



Te Kāhui Tika Tangata  
Human Rights Commission



# Conversion Practices in Aotearoa New Zealand

Insights and Recommendations from a Human Rights Perspective

June 2024

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CONTENT WARNING: This report discusses a range of types of abuse, self-harm, and suicide.

# Acknowledgements

Te Kāhui Tika Tangata | Human Rights Commission acknowledges the community leaders, Members of Parliament, and conversion practices survivors, among countless others, who advocated and fought hard to bring this issue before Parliament, eventually leading to the passing of the historic Conversion Practices Prohibition Legislation Act 2022 (CPPLA).

We acknowledge in particular the leadership of Amanda Ashley who passed away in 2018 as the Conversion Practices Prohibition Legislation Bill was going through Parliament.

In addition, we acknowledge the effort and time spent by survivors in contributing to this report. The stories of all survivors have been invaluable in reaching the hearts and minds of those unfamiliar with conversion practices and their associated harm. They have made it clear that conversion practices are a problem in Aotearoa – and a current one. This report is intended as a way for us to reciprocate the support we received from the conversion practices survivor community who generously shared their experiences with us to inform our work.

When the Commission set out to enact its mandated responsibility to implement a civil redress pathway under the amended Human Rights Act, we knew we had to be *survivor-led, survivor-focused, trauma informed, culturally safe, evidence-based, and accessible*.

We were able to adhere to those values due to Commission staff past and present who made up our time-limited Conversion Practices Response Team. Many who worked on this project had direct or related lived experience. For the team, having lived experience of a human rights issue and being able to help prevent it happening to others can feel to be both a privilege and a weighty responsibility. We thank all those who worked in this space for thoughtfully applying their lived experience to this work, skilfully navigating complexity and nuance with professionalism, grace, compassion, and courage.

I was honoured to guide the Commission's response. A particular highlight was recruiting Matt Langworthy, a survivor of 20 years of conversion practices, to lead our Conversion Practices Response Team, which he did with great care and expertise. Matt laid down the vision for this report and is its lead author. Shanice Dent, Shawn Wimalaratne, Clare O'Connell, and Helen Isbister made significant writing contributions.

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There are many more in civil society and the wider Rainbow whānau who provided insights, wisdom, and guidance that helped inform our work and strengthen the voice of survivors presented herein. Writing as a survivor of more than 15 years of these practices myself, on behalf of the team, I thank all survivors who supported the Commission's work to ensure that conversion practices are indeed eliminated in Aotearoa and globally.

## **Andre Afamasaga**

Former Group Manager Advice, Research & Engagement (including Conversion Practices)

Te Kāhui Tika Tangata | New Zealand Human Rights Commission

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## Foreword

**Imagine a future where Rainbow people can live authentically and with pride. A future where Rainbow people are affirmed within their religious and faith communities, their ethnic communities, their schools and youth groups. This is the future most of us want for ourselves and our loved ones, and many people have worked and continue to work to remove the barriers that prevent Rainbow people from experiencing this.**

Conversion practices are one example of these barriers. Any practice or attempt to change or suppress a person's sexual orientation, gender identity, or gender expression is a conversion practice. Such practices do not work. As the evidence gathered in this report demonstrates, they also cause significant harm. After years of advocacy from Rainbow people, conversion practices were eventually banned in Aotearoa New Zealand with the passing of the Conversion Practices Prohibition Legislation Act 2022 (CPPLA).<sup>1</sup>

Just one year prior to that, the largest-ever survey of young Rainbow people in Aotearoa (aged 14–26) found an astonishing three-quarters had poor wellbeing and almost two-thirds had thought about suicide.<sup>2</sup> The ban on conversion practices was a clear and welcome step to improve the lives of Rainbow communities. In banning these practices, Parliament affirmed that no sexual orientation or gender identity is wrong.

We cannot stop there. To prevent the tremendous harm caused by conversion practices, we must continue to embrace, support, and value Rainbow people in our society and our lives. This requires us to address the harmful ideologies that encourage people to fear and belittle Rainbow people.

Under the CPPLA, Te Kāhui Tika Tangata | Human Rights Commission received one-off government funding to establish a Conversion Practices Response Service. In the course of its work, the service responded to contact from survivors and raised awareness of the significant harm caused by the practices. When funding ended, the response service was folded into the Commission's free and confidential dispute resolution process.

Our engagement with Rainbow communities has shown that more work is needed to create a society where all Rainbow people are able to live safely and well as their true selves.

<sup>1</sup> See the references section for links to New Zealand legislation referred to in this report.

<sup>2</sup> Fenaughty, J., Ker, A., Alansari, M., Besley, T., Kerekere, E., Pasley, A., Saxton, P., Subramanian, P., Thomsen, P., & Veale, J. (2022). *Identify survey: Community and advocacy report*. Identify Survey Team.

Rainbow people experience discrimination at a rate higher than the general population.<sup>3</sup> For Māori, Pacific, and ethnic peoples in Aotearoa, this is overlaid with racism.<sup>4</sup> Colonisation impacted Indigenous peoples' traditional acceptance of the natural fluidity of sexuality and gender, replacing it with a rigid binary opposition of male and female.<sup>5</sup>

Disabled Rainbow people who experience conversion practices also face layered oppression arising from a pervasive perception that they need to be 'cured' or 'corrected' for their sexuality or gender identity and their impairments.<sup>6</sup> This study cites evidence that these experiences are in multiple settings, including healthcare, youth work, and religious environments.

Many Rainbow people's stories include some religious context. The dread of losing whānau and community should they come out is very real. Due to the fear of exclusion and isolation, so-called conversion 'therapy' can – at least at first – seem a hopeful option.

The underlying ideology that supports conversion practices means many people recommend them in the mistaken belief they will improve the life of the Rainbow person. However, the evidence shows that conversion practices do not work. Instead, they tell Rainbow people that who they are is wrong. They also engender a sense of failure and shame when the change they seek to make inevitably does not happen.

The Commission has learned that people often do not realise they are experiencing conversion practices as they are increasingly happening in subtle forms and under different names. People can find it difficult to abandon the practices when they do come to realise what they have experienced. Often, they do not want to make a complaint about the people carrying out the practices, either because those responsible are their loved ones or because the practices themselves include an element of secrecy.

To prevent conversion practices – and the tremendous harm they cause – we must address the ideology and the mis- and disinformation that encourages people to fear and belittle Rainbow people. In May 2023, independent research group The Disinformation Project found an increase in the volume of online abuse directed at transgender people coinciding with a visit from a UK-based anti-transgender activist to Aotearoa.

The Disinformation Project's report found the language and imagery used online against transgender people had become more violent over time.<sup>7</sup> The language and imagery they found included repeated denials that transgender people exist or that they should be allowed to exist. The report described the language used about transgender people as "genocidal".

Aotearoa strives to be an inclusive society, but progress in Rainbow matters has been uneven. It is critical we continue to embrace, support, and value Rainbow people in our society and our lives. We must give no tolerance to the rigid ideologies that underpin homophobia, biphobia, and transphobia.

Research has found that young Rainbow people are optimistic for a future that supports and uplifts them, despite experiencing prejudice and discrimination.<sup>8</sup> In this report, the Commission and Rainbow communities share recommendations that will continue the progress made and create a positive future for all our diverse communities in Aotearoa.

### Prudence Walker

Kaihautū Tika Hauātanga | Disability Rights Commissioner and Rainbow Spokesperson

<sup>3</sup> Ibid.

<sup>4</sup> Pihama, L., Green, A., Mika, C., Roskrudge, M., Simmonds, S., Nopera, T., Skipper, H., & Laurence, R. (2020). *Honour Project Aotearoa*. Te Kotahi Research Institute; Thomsen, P., Brown-Acton, P., Manuela, S., Tiatia-Siau, J., Greaves, L., & Sluyter, J. (2023). *The Manalagi survey community report: Examining the health and wellbeing of Pacific Rainbow+ peoples in Aotearoa-New Zealand*. The Manalagi Project Team; Bal, V., & Divakalala, C. (2022). "Community is where the knowledge is": *The Adhikaar report*. Adhikaar Aotearoa.

<sup>5</sup> Pihama et al, 2020.

<sup>6</sup> United Nations Human Rights Special Procedures. (2023, October 27). *LGBT persons with disabilities* (p. 2).

<sup>7</sup> Hattotuwa, S., Hannah, K., & Taylor, K. (2023). *Transgressive transitions. Transphobia, community building, bridging, and bonding within Aotearoa New Zealand's disinformation ecologies*. The Disinformation Project.

<sup>8</sup> Fenaughty, J., Ker, A., Alansari, M., Besley, T., Kerekere, E., Pasley, A., Saxton, P., Subramanian, P., Thomsen, P. & Veale, J. (2022). *Identify survey: Community and advocacy report*. Identify Survey Team.



# Glossary

This glossary provides the meaning of terms as they are used in this report. Unless otherwise indicated, most definitions are adapted from two earlier Human Rights Commission reports: *Prism: Human rights issues relating to sexual orientation, gender identity and expression, and sex characteristics (SOGIESC) in Aotearoa New Zealand – A report with recommendations*<sup>9</sup> and *Ki te whaiao, ki te ao Mārama: Community engagement report for developing a national action plan against racism*.<sup>10</sup>

## General terms

<b>Binary</b>	The concept that gender only exists in the two distinct opposites of feminine and masculine.
<b>Cisgender</b>	A term used to describe someone whose gender aligns with their sex assigned at birth. For example, a person who was assigned female at birth and identifies as a girl, woman, or wahine.
<b>Colonisation</b>	A practice of domination, which involves the subjugation of one people to another. <sup>11</sup>
<b>Conversion practice</b>	Defined in section 5 of the Conversion Practices Prohibition Legislation Act 2022 (CPPLA) as any “practice, sustained effort or treatment that is directed towards an individual because of the individual’s sexual orientation gender identity, or gender expression” that are done with “the intention of changing or suppressing their sexual orientation, gender identity or gender expression”.
<b>Diaspora</b>	A term used to describe the mass, often involuntary dispersal of a population from a centre (or homeland) to multiple areas and the creation of communities and identities based on the histories and consequences of dispersal. <sup>12</sup>
<b>Ethnic communities</b>	An umbrella term that in the Aotearoa context captures a diverse group representing over 200 ethnicities and speaking over 170 languages. <sup>13</sup> The New Zealand Government defines ethnic communities as Asian, African, Continental European, Latin American, and Middle Eastern. <sup>14</sup>
<b>Gender</b>	Someone’s social and personal identity as male, female, or another gender or genders that may be non-binary. Gender includes gender identity and its gender expression. A person’s current gender may differ from the sex recorded at their birth and may differ from what is indicated on their current legal documents. A person’s gender may change over time. Some people may not identify with any gender. <sup>15</sup>
<b>Gender affirmation</b>	An umbrella term for a range of actions and possibilities involved in a person living, surviving, and thriving as their authentic gendered self. What this looks like for each individual trans person is unique and based on what is personally affirming for them, what feels safe to do, and what is accessible and available. For a trans or non-binary person, gender affirmation may include changing their name or pronouns, wearing different clothes, cutting/growing hair, engaging in speech and language therapy, taking gender-affirming hormones, or having surgery or surgeries.
<b>Gender conforming</b>	Refers to an individual or a behaviour that is consistent with gendered expectations of a society. Gender conformity can include dress, work, childcare, or leisure activities. For example, in most societies, it is gender conforming to expect women to be responsible for most household duties and childcare.
<b>Gender expression</b>	Refers to a person’s physical presentation of gender – including dress, hairstyles, accessories, and cosmetics – and mannerisms, speech, behavioural patterns, names, and personal references. Gender expression may or may not conform to a person’s gender identity.
<b>Gender identity</b>	Refers to a person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at their birth. This includes their sense of their body and other expressions of gender, including dress, speech, and mannerisms.
<b>Gender transition</b>	Similar to gender affirmation in that it is used to describe steps that may be taken towards one’s true gender. While many people use this term, for others, it positions trans experiences narrowly in a linear way and solely through the lens of medical intervention.

<sup>9</sup> Human Rights Commission. (2020). *Prism: Human rights issues relating to sexual orientation, gender identity and expression, and sex characteristics (SOGIESC) in Aotearoa New Zealand – A report with recommendations*.

<sup>10</sup> Human Rights Commission & Tangata Whenua Caucus and Tangata Tiriti Caucus of the National Anti-Racism Taskforce. (2022). *Ki te whaiao, ki te ao Mārama: Community engagement report for developing a national action plan against racism*.

<sup>11</sup> Kohn, M., & Reddy, K. (2023). Colonialism. In E. Zalta & U. Nodelman (Eds.), *Stanford Encyclopedia of Philosophy*. Stanford University.

<sup>12</sup> Pierre, J. (2013). *Diaspora*. Oxford Bibliographies.

<sup>13</sup> Ministry for Ethnic Communities | Te Tari Mātāwaka. (2024). *Our communities*.

<sup>14</sup> Ministry for Ethnic Communities | Te Tari Mātāwaka. (2023, March 13). *Ethnic communities in New Zealand*.

<sup>15</sup> Stats NZ. (2021, April 21). *Gender, sex, variations of sex characteristics, and sexual identity*.



<b>Heteronormativity</b>	The concept that being heterosexual is preferred, or the only norm.
<b>Indoctrination</b>	The process over time of repeatedly teaching a set of beliefs until they are accepted without question or criticism.
<b>Intersectionality</b>	Refers to ways in which people can experience overlapping and intersecting disadvantage and discrimination based on multiple identities such as their ethnicity, race, class, gender identity, sexual orientation, and religion (among others). In the context of this report, it is a way to differentiate the experiences of, for example, a person who is takatāpui from someone who is a Pākehā gay man.
<b>Intersex</b>	An umbrella term used to describe a range of natural variations in the human body, specifically the innate variations in someone's sex characteristics (including hormones, chromosomes, and internal/external reproductive anatomy).
<b>LGBTQIA+</b>	An acronym for different identities, including lesbian, gay, bisexual, transgender, queer, intersex, and asexual. The plus is used to include other terms not listed.
<b>Missionisation</b>	A term that means to carry out missionary work; often refers to the way Western Christian missionaries engage with non-Western Indigenous peoples around the world. Both historical and contemporary missionaries operate at the intersection of colonialism and the process of religious evangelism.
<b>MVPFAFF+</b>	An acronym used to describe Pacific gender and sexuality diverse identities for māhū (Hawai'i and Tahiti), vakasalewalewa (Fiji), palopa (Papua New Guinea), fa'afafine (Samoa and American Samoa), 'akavaine (Cook Islands), fakaleitī or leitī (Tonga), and fakafifine (Niue). <sup>16</sup> The plus acknowledges that these traditional terms do not encompass or describe lesbian or bisexual women or transgender men. The acronym is gaining increasing use to signify the existence of different Pacific cultures that have a strong presence in Aotearoa.
<b>Non-binary</b>	An umbrella term for gender identities that are neither male nor female. These include gender fluid and gender queer for example.
<b>Race</b>	A social construct originating in 15th century Christian Europe that organised people into a hierarchy according to their perceived and actual physical differences such as hair, skin and eye colour, facial features, or skull shape.
<b>Racism</b>	<p>Refers to the use of race as the basis for prejudice and power at interpersonal, institutional, and internalised levels.</p> <ul style="list-style-type: none"> <li>• <i>Interpersonal racism</i> relates to omissions, remarks, and actions towards someone based on unfounded assumptions about their perceived race.</li> <li>• <i>Institutional racism</i> refers to society's structures and institutions advantaging one group at the expense of others based on race. In Aotearoa, our structures and institutions work for the collective benefit of Pākehā rather than Māori or ethnic minorities. This manifests in inequities across sectors such as education, health, justice, housing, employment, and wellbeing.</li> <li>• <i>Internalised racism</i> refers to people, stigmatised because of their race, accepting those negative ideas and messages about themselves.</li> </ul> <p>In the context of this report, racism refers to the specific nuances of racism toward Tangata Whenua, Pacific peoples and ethnic communities in Aotearoa New Zealand.</p>
<b>Rainbow people/communities</b>	We use Rainbow as an umbrella term to describe people whose sexual orientation, gender identity, gender expression or sex characteristics differ from majority, binary norms. This includes people who identify with terms like takatāpui, lesbian, gay, bisexual, intersex, transgender, queer, non-binary, or fa'afafine, as well as people who don't use specific words for their identity. Definition adapted from Te Ngākau Kahukura (n.d).
<b>Religious or cultural counsellor</b>	A term used by survivors to refer to religious and cultural mentors who provide informal counselling support.
<b>Sex</b>	Sex is based on a person's sex characteristics, such as their chromosomes, hormones, and reproductive organs. While typically based upon the sex characteristics observed and recorded at birth or infancy, a person's sex can change over the course of their lifetime and may differ from their sex recorded at birth. <sup>17</sup>

<sup>16</sup> Brown-Acton, P. (2011, March 12–19). *Movement building for change* [keynote presentation]. 2nd AsiaPacific Outgames, Wellington, New Zealand.

<sup>17</sup> Stats NZ, 2021.

<b>Sexual orientation</b>	Refers to each person's capacity for emotional and sexual attraction to, and intimate and sexual relations with, people of the same or different gender or more than one gender.
<b>Sexuality</b>	Refers to a person's sexual feelings, thoughts, attractions, and behaviours towards other people.
<b>SOGIESC</b>	An acronym for sexual orientation, gender identity and expression, and sex characteristics.
<b>Survivor</b>	A term used to refer to people who have experienced conversion practices (in line with what is common in the lived experience community).
<b>Transgender</b>	An umbrella term for a person whose gender differs from their sex assigned at birth. Transgender people may be binary or non-binary, and some opt for some form of medical intervention (such as hormone therapy or surgery). Used as an adjective rather than a noun, and often shortened to 'trans'.
<b>Variations of sex characteristics</b>	Refers to people born with innate genetic, hormonal, or physical sex characteristics that do not conform to medical norms for female or male bodies. The term refers to a wide spectrum of variations in a person's hormones, chromosomes, genitals, and/or reproductive organs. Other terms used to describe being born with variations of sex characteristics are intersex person, a person with an intersex variation, or differences of sex development (DSD). Some people may identify as intersex, while others may see their intersex variation more as part of their medical history rather than their identity. <sup>18</sup>
<b>White supremacy</b>	Refers to the presumed superiority of whiteness, that is, white culture and norms. In the case of Aotearoa, this refers to the presumed superiority of Pākehā norms and values, for example, the Westminster-based system of government. It is a means of maintaining institutional control of political, religious, and other systems.

### Kupu Māori<sup>19</sup>

<b>Awhi</b>	(-hia,-ngia,-tia) To surround or to embrace or cherish.
<b>Awhina</b>	(-hia,-ngia,-tia) To assist, help, support, benefit.
<b>Hapū</b>	Kinship group, clan, tribe, subtribe – section of a large kinship group and the primary political unit in traditional Māori society.
<b>Hoa takatāpui</b>	Intimate companion of the same sex.
<b>Ira tangata</b>	Human genes, human element, mortals. It is used to refer to intersex people. This kupu is a Māori reference to identity and whakapapa. This term acknowledges in te reo that Māori are Indigenous first and are not defined by any single characteristic or variation. <sup>20</sup>
<b>Iwi</b>	Extended kinship group, tribe, nation, people, nationality, race – often referring to a large group of people descended from a common ancestor and associated with a distinct territory.
<b>Kawa</b>	Protocols that guide behaviour in different contexts.
<b>Karakia</b>	(-tia) To recite ritual chants, say grace, pray, recite a prayer, chant.
<b>Kaumātua</b>	Adult, elder, elderly man, elderly woman, old man – a person of status within the whānau.
<b>Kuia</b>	Elderly woman, grandmother, female elder.
<b>Mana</b>	Prestige, authority, control, power, influence, status, spiritual power, charisma.
<b>Manaaki</b>	(-tia) To support, take care of, give hospitality to, protect, look out for, as well show respect, generosity and care for others.
<b>Marae</b>	Courtyard or open area in front of a wharenui or meeting house, often used to refer to the complex of buildings around the marae.
<b>Mātauranga Māori</b>	Māori knowledge – the body of knowledge originating from Māori ancestors, including the Māori world view and perspectives, Māori creativity, and cultural practices.
<b>Mōteatea</b>	Lament, traditional chant, sung poetry – a general term for songs sung in traditional mode.
<b>Ngā atua</b>	Gods, supernatural beings or ancestors with continuing influence, deities.

<sup>18</sup> Stats NZ, 2021.

<sup>19</sup> Unless otherwise indicated, the definitions for these kupu Māori are taken from Te Aka Māori Dictionary. <https://www.maoridictionary.co.nz>

<sup>20</sup> Intersex Aotearoa. (n.d.) *Ira tangata*.

<b>Ngāti Tūwharetoa</b>	Tribal group from the Lake Taupō area.
<b>Pākehā</b>	New Zealander of European descent, probably originally applied to English-speaking Europeans living in Aotearoa New Zealand.
<b>Rangatahi</b>	Younger generation, youth.
<b>Takatāpui</b>	An ancient term used by some Māori that identify with a minority sexual orientation, gender identity or expression, or sex characteristics. The term has been contemporarily reclaimed from its original meaning, which was intimate companion of the same sex.
<b>Tangi</b>	Rites for the dead, funeral – shortened form of tangihanga.
<b>Taonga</b>	Treasure, anything prized.
<b>Te ao Māori</b>	The Māori world. It encompasses te reo Māori and tikanga Māori.
<b>Tiaki</b>	(-na) To look after, nurse, care, protect, or conserve.
<b>Tikanga</b>	Correct procedures, customs.
<b>Tino rangatiratanga</b>	Self-determination, sovereignty, autonomy, self-government, domination, rule, control, power.
<b>Tīpuna</b>	Ancestors, grandparents – plural form of tipuna and the eastern dialect variation of tūpuna.
<b>Tuākana</b>	Elder brothers (of a male), elder sisters (of a female), cousins (of the same gender from a more senior branch of the family).
<b>Tuakana-teina</b>	Refers to the relationship between an older sibling (tuakana) and a younger sibling (teina) that provides a model for buddy systems.
<b>Waiata</b>	Song, chant, psalm.
<b>Waiata tangi</b>	Lament, song of mourning with no set actions sung especially at funerals.
<b>Wairuatanga</b>	Spirituality.
<b>Whakairo</b>	Carving.
<b>Whakapapa</b>	(noun) Genealogy, genealogical table, lineage, descent. (verb) To recite in proper order (for example genealogies, legends, months). To place in layers, lay one upon another, stack flat.
<b>Whakawhanaungatanga</b>	Process of establishing relationships, relating well to others.
<b>Whānau</b>	Extended family, family group, a familiar term of address to a number of people.

### Pasifika words

Pacific peoples have their own culturally specific terms relating to sexual orientation and gender identities. These concepts are also about familial, genealogical, social, and cultural selfhood. Fa’afafine (Samoa and American Samoa), leitī/fakaleitī (Tonga), fakafifine (Niue), ‘akavaine (Cook Islands), pina (Tuvalu), mähū (Tahiti and Hawaii), vakasalewalewa (Fiji), and palopa (Papua New Guinea).

<b>Pukapukan</b>	Pukapuka is one of the 15 islands of the Cook Islands. People from Pukapuka are often referred to as Pukapukan.
<b>Talanoa</b>	A form of dialogue from the Pacific islands that brings people together to share opposing views without any predetermined expectations for agreement.
<b>Wakawawine</b>	Although there are various definitions of wakawawine, simply put it is to be or behave like a woman.

## South Asian terms<sup>21</sup>

අරමුණ <b>Aramuna</b>	Kaupapa, topic, matter of discussion in Sinhalese.
<b>Aravani</b>	Commonly interchangeable identity with Hijra.
භූමිය <b>Bhūmiya</b>	Whenua, land, nation, state in Sinhalese.
<b>Hijra</b>	A third gender identity where typically those assigned male at birth identify as female. Many choose to undergo a castration ceremony as an offering to the Hindu goddess Bahuchara Mata.
<b>Jogappa</b>	An identity best interchanged with the Western term transgender (specifically male to female). This is commonly used in the Hubli-Dharwad region of North Karnataka (South India). It is considered a divine identity as Jogappa are said to marry the Goddess Yellamma.
<b>Jogatha</b>	An identity best interchanged with the Western term of transgender.
<b>Khwajasara</b>	An identity best interchanged with the Western term of transgender in Pakistan (specifically male to female). It is also commonly used to identify those who are, in Western terms, intersex.
<b>Kothi</b>	Commonly interchangeable identity with Hijra.
<b>Nachchi</b>	An identity used in Sri Lanka best compared with the Western terms of transgender or homosexual. It is a term commonly used to celebrate feminine gendered nuances while also embracing their biological maleness.
නවසීලන්තය <b>Navasīlantaya</b>	Aotearoa New Zealand in Sinhalese.
පවුල් <b>Pavula</b>	Whānau or family in Sinhalese.
<b>Thirunambigal</b>	An identity best interchanged with the Western term of transgender (specifically female to male) in the Tamil language.
<b>Thirunangaigal</b>	Best translates to respectable woman in the Tamil language. An identity best interchanged with the Western term of transgender (specifically male to female).

<sup>21</sup> The diverse SOGIESC identities defined here pre-date European colonisation of South Asia by more than 1,500 years. The translations provided are approximate as the terms do not have direct English equivalents.

# Executive summary

**Imagine a world where Rainbow people are able to live authentically and with pride. A world where Rainbow people are affirmed within their religious and faith communities, their ethnic communities, their schools and youth groups. Where Rainbow people have equitable access to healthcare. Where whānau and communities are havens of support and acceptance. This is the future most of us want for ourselves and our loved ones, and many people have worked and continue to work to remove the barriers that prevent Rainbow people from experiencing this.**

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Conversion practices are one example of these barriers. Conversion practices are attempts to change or suppress an individual's sexual orientation, gender identity, or gender expression. The ideology behind these practices seeks to maintain rigid and binary ideas about gender and sexuality. Such ideologies give rise to homophobia, biphobia, and transphobia, which can even cause Rainbow people who have not experienced conversion practices to suppress their sexuality and gender identity and expression.

After years of advocacy from Rainbow communities, the Conversion Practices Prohibition Legislation Act 2022 (CPPLA) came into force in 2022. The CPPLA created new criminal offences relating to conversion practices. It also amended the Human Rights Act 1993 to make conversion practices unlawful in Aotearoa New Zealand. The amendment allows Te Kāhui Tika Tangata | Human Rights Commission ('the Commission') to support a civil response of the CPPLA, which includes receiving complaints, providing a dispute resolution service, and referring complaints to the Human Rights Review Tribunal. The Commission was also charged with undertaking education and prevention work in support of the new legislation.

The purpose of this report is to capture the extensive collective learning and reflection that we gathered from our role in implementing the civil response of the CPPLA as well as recommending actions to be taken to support survivors of conversion practices and to prevent these practices from occurring. Limited research is available on the prevalence and impacts of conversion practices in Aotearoa. This report contributes to the evidence base and provides a robust human rights perspective rooted in local circumstances about what needs to change to achieve the vision described above.

Regardless of their form and the setting, research has shown that conversion practices do not work and can cause serious harm. Experiencing conversion practices increases the risk of suicidal ideation and negatively impacts physical, mental, emotional, and spiritual health. In addition, such practices can isolate a person from their family, whānau, and/or community.

Ending conversion practices contributes to upholding te Tiriti o Waitangi. Te Tiriti reaffirms pre-existing rights to tino rangatiratanga, including over taonga. Takatāpui, Māori Rainbow identities, and traditional Māori cultural values around sexual orientation and gender are taonga to be cared for and protected from the harms of conversion practices. Te Tiriti also protects the right to be free from discrimination for Māori, including discrimination on the basis of sexual orientation and gender identity.

The international and domestic human rights relevant to conversion practices include:

- the right to freedom from discrimination
- the right not to be deprived of life
- the right to freedom of expression
- the right to health
- the right to be free from torture or other cruel, inhuman, or degrading treatment
- the rights of Indigenous peoples
- the rights of the child
- the rights of disabled people.

One of the major contributions of this report is to draw together insights relating to more marginalised communities who face conversion practices, including takatāpui, MVPFAFF+ Pacific peoples, ethnic Rainbow people and transgender and non-binary people. We acknowledge the limitations in this report, particularly in respect to intersex people and disabled people, and a need to augment our insights gathered from minority ethnic communities with additional research.

While the experiences of takatāpui, MVPFAFF+ Pacific peoples, and ethnic Rainbow people are distinct, there are also commonalities. These shared experiences include the impacts of colonisation; migration; introduction of Western, Christianised understandings of gender, sexuality, and spirituality; and the suppression of customary beliefs and practices both for Tangata Whenua in Aotearoa and for other communities within their home countries and in the diaspora. Experiences of racism further compound the impacts of discrimination and harm caused by conversion practices.

For transgender and non-binary people, conversion practices often take place in healthcare and family settings. Practices aim to enforce gender conformity, linked to the idea that being trans or non-binary is suspect or less desirable than being cisgender. The research is clear that conversion practices often lead to suicidal thoughts, self-harm, and other forms of psychological distress among those who experience them. These impacts can be lifelong.

This report contributes to better understanding of the harm caused by conversion practices in Aotearoa. It challenges the argument used by those who oppose the CPPLA by suggesting that Rainbow rights are antithetical to family values and children's wellbeing. Acceptance, inclusion, and affirmation of Rainbow people by their families, religious, and cultural settings promotes familial and societal cohesion.

This report concludes with nuanced advice informed by lived experience about the support survivors need to promote healing. In addition to the advice included in this report, further guidance is available on the Commission's website.<sup>22</sup>

### Eliminating conversion practices

The law changes that made conversion practices unlawful in Aotearoa New Zealand were an important essential step towards eliminating these practices and the profound harm they cause. However, unless concerted efforts are made to address the conditions that give rise to conversion practices, they will likely continue. Through our engagement, we have already learned that conversion practices are increasingly happening covertly and under different descriptions. The recommendations in this report identify what to change to eliminate conversion practices and who has the power to change them.

The burden of eliminating conversion practices should not rest on those who have experienced them. To end conversion practices, we need to shift the harmful ideologies that enable them and actively build an inclusive society that values and protects all Rainbow people.

Government must play a significant role in ensuring that the CPPLA is effectively enforced and supported with meaningful policy and resourcing. Government should also support faith communities, community organisations and groups, healthcare professionals, whānau, families, and individuals to take the steps that are required to stamp out these practices and ultimately to eradicate the underlying ideologies that underpin them. Government can resource evidence-based approaches to deepen public understanding of conversion practices, shift the harmful ideologies that underlie them, and support communities to become more inclusive and safer for all Rainbow people.

While Government has a major role to play, an all-of-society approach is necessary to ensure the safety and wellbeing of Rainbow people. There are specific recommendations here for the media, for religious and faith communities, for mental health and medical healthcare practitioners, and for people who work with children and young people. These groups each have specific power and influence in creating the conditions in Aotearoa to end conversion practices and to provide support to those who have experienced them.

The overarching approach to addressing conversion practices for Māori needs to focus on enacting tino rangatiratanga. We have made specific recommendations to support Māori communities – revitalising mātauranga Māori can counter and prevent conversion practices. This report also contains specific recommendations for Pacific communities and others who have experienced colonisation.

All of us can encourage conversations about how to better support and affirm Rainbow people in our whānau, clubs, schools, and community. We can speak up when we see or hear homophobic and transphobic mis- or disinformation. We can encourage our family, colleagues, teammates, and community to engage with research and resources that are based on science and inclusive of the Rainbow community.

Aotearoa New Zealand is strongest when everyone can be themselves regardless of sexual orientation, gender identity, or gender expression. Together, by implementing these recommendations, we can create a world where Rainbow people can be embraced and valued.

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<sup>22</sup> Human Rights Commission. (2022a). *Conversion practices guidelines*.





## Summary of recommendations

We summarise here our six groups of priority recommendations for action. See chapter 9 for a fuller set of recommendations that outline actions targeted more specifically at Government, healthcare professionals, religious, ethnic and cultural communities, and whānau.

We note that there is a diversity of views within Rainbow communities. Not all survivors will agree with the recommendation to link conversion practices to family harm. We acknowledge this discomfort and reiterate that we make these recommendations in our capacity as a National Human Rights Institution with human rights responsibilities in respect of discrimination, harm, and violence.

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### Recommendations for Government

- I. Strengthen the Conversion Practices Prohibition Legislation Act 2022 (CPPLA) and provide ongoing funding to support its intent.**
  - Reinstatement funding to provide survivor-led education.
  - Remove the requirement for Attorney-General consent for prosecutions.
  - Ensure te Tiriti o Waitangi and human rights are at the centre of any future policy development concerning conversion practices.
  - Explore establishing an agency to lead cross-government work on improving outcomes for Rainbow people, including the elimination of conversion practices.
- II. Ensure medical healthcare and mental health and wellbeing support for conversion practices survivors are accessible, safe, and culturally competent.**
  - Fund services to provide mental health support and consult with survivors on who delivers it and what it will include.
  - Develop safeguards and professional guidelines for medical healthcare, mental health, and wellbeing support to help build capability, including cultural capability, and ensure protection for survivors.
  - Establish clear organisational policies and procedures for any medical or mental healthcare agency that may offer support to survivors to deal with disclosures or instances of historical and contemporary conversion practices.
- III. Explore categorising conversion practices as a form of family violence in cases where families are involved in these practices.**
  - Work with survivors and experts in the family violence sector to explore opportunities for alignment and learning between the responses to conversion practices and to family violence, including in legislative responses.
  - Support families to facilitate safe, respectful, and affirming conversations about sexuality and gender with their Rainbow family members.
- IV. Adopt an evidence-based approach to addressing the ideologies that inform conversion practices.**
  - Fund research to better understand conversion practices in Aotearoa New Zealand, particularly within marginalised communities.
  - Ensure awareness campaigns are evidence-based and do not perpetuate mis- and disinformation about Rainbow communities.
  - Ensure the consistency and accessibility of robust evidence-based programmes and resources on sexual orientation, gender identity, and gender expression as part of the national curriculum.



The following recommendations are aimed at specific communities, although these efforts also require Government support.

## Recommendations for all communities

- V. Affirm the rights of Rainbow people in your communities and promote whānau and community spaces that are inclusive of Rainbow people. Decolonise perspectives on sexuality and gender.**
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## Recommendations for religious/faita communities

- VI. Affirm the rights of Rainbow people and work with survivors to develop actions plans to eliminate conversion practices, including by exploring affirming teachings.**
- Engage in research around inclusive and affirming interpretations of religious/spiritual teachings at the highest levels of your denomination/local church or faith/spiritual community.
  - Commence a review process of reckoning with religious texts and teachings that do not affirm Rainbow people. Engage with peer-reviewed evidence, lived experience testimonials, theological developments, and inclusive interpretations with an open mind.
  - Co-produce action plans through a collaborative approach with faith/spiritual leaders (such as theologians and clergy in the case of Christian bodies), as well as survivors and Rainbow people to both educate and disseminate findings from your review process to your stakeholders.
- VII. Engage with resources about conversion practices that have been tailored to religious communities.**
- Listen to survivor stories about their experiences of conversion practices in religious settings and hold reflective and safe discussions that include lived experience voices.
  - Co-produce action plans with survivors that include clear statements against conversion practices and an outline of their harms, as well as prevention and response policies.
- VIII. Conduct research at the highest levels of your faith/spiritual group on gender and sexuality-based spiritual abuse and the harm caused by conversion practices.**
- Subsequently, develop and formally adopt health and safety policies and education and prevention programmes that recognise the harm of conversion practices and mitigate against conversion practices.
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## Recommendations to support Māori as Tangata Whenua

- IX. Engage with mātauranga Māori, tikanga, and research on pre-colonial understandings of sexuality and gender and create opportunities to discuss, reflect, and, where relevant, remedy the impacts of colonisation upon Māori Rainbow communities.**
- X. Support Māori cultural revitalisation that embraces pre-colonial expressions of sexuality and gender, including in cultural practices, language, arts, and storytelling.**
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## Recommendations to support Pacific and ethnic communities

- XI. Engage with customary knowledge and research on pre-colonial understandings of sexuality and gender and create opportunities to discuss, reflect, and, where relevant, remedy the impacts of colonisation upon Rainbow communities.**
- XII. Support cultural revitalisation that embraces pre-colonial expressions of sexuality and gender, including in cultural practices, language, arts, and storytelling.**

# 1. Introduction

## Survivors' vision for the future

**Imagine a world where being Rainbow is embraced.** In this world, takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people would feel free to express their authentic selves without fear of discrimination, stigma, or pressure to suppress or change their sexual orientation, gender identity or expression, or sex characteristics.

**In this world, religious communities affirm Rainbow identities and uplift and protect their mana.** Takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people and their relationships would be welcomed, and interpretations of religious texts that exclude them would be challenged. Religious communities would promote inclusive and affirming teachings that foster spiritual growth and acceptance for all people, regardless of ability, sexual orientation, gender identity or expression, or sex characteristics.

**In this world, whānau and communities are havens of support** and offer unconditional love and acceptance to takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people. They would actively seek to understand and affirm their loved ones, creating safe and nurturing environments that celebrate diversity.

**In this world, Rainbow rights are fully recognised and protected.** Existing laws would be better enforced and supported by meaningful policy. Additional measures would be in place to ensure equal rights and protections for takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people in areas such as employment, housing, healthcare, and education. Discrimination and prejudice based on ability, sexual orientation, gender identity or expression, or sex characteristics would be actively challenged and eliminated.

**In this world, Rainbow people experience improved mental health and wellbeing and equitable access to support.** Mental health services would be readily available and affirming of takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people. Mental health professionals would receive training on Rainbow issues and provide competent, culturally sensitive care that supports the unique needs of takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people. Without the harmful effects of conversion practices, they would be able to navigate their identities and relationships with greater self-acceptance, self-esteem, and resilience.

**In this world, education is inclusive and evidence-based** with schools providing comprehensive and inclusive education that covers diverse sexual orientations and gender identities, including across Māori, Pacific, and ethnic cultures. Students would receive accurate information, learn about takatāpui, MVPFAFF+ Pacific peoples, and Rainbow history and contributions, and cultivate empathy and respect for all people.

**In this world, Rainbow people are represented positively in society** with media, entertainment, and other cultural platforms featuring authentic representations of takatāpui, MVPFAFF+ Pacific peoples, and Rainbow people. Their stories would be told with respect and dignity, helping to dismantle stereotypes and foster empathy, understanding, and acceptance.

This is the future most of us want for ourselves and our loved ones, and many people have worked and continue to work to remove the barriers that prevent Rainbow people from experiencing this.

Conversion practices are one example of these barriers. Conversion practices are attempts to change or suppress an individual's sexual orientation, gender identity, or gender expression. In 2022, as a result of years of Rainbow community advocacy, the Conversion Practices Prohibition Legislation Act 2022 (CPPLA) came into force. The CPPLA made it unlawful to perform conversion practices in Aotearoa New Zealand. Te Kāhui Tika Tangata | Human Rights Commission (the Commission) was charged with implementing the civil response service under the CPPLA, as well as undertaking education and prevention work in support of it.

The purpose of this report is to capture the extensive collective learning and reflection that we gathered as a result of our human rights-centred approach to setting up the civil response service. The report was written collaboratively by the diverse members of our Conversion Practices Response Team. It draws from the engagements and training sessions the team ran, the workshops they participated in, and the conversations they had with conversion practices survivors throughout the 18 months that the dedicated response was under way.

The insights the team gained during their work and that are outlined in this report are an invaluable contribution to the very limited evidence base on the experience of conversion practices in Aotearoa. Drawing on relevant research as well as survivor insights, the report distils what we learned about how and where conversion practices can take place, including religious, health, medical, mental health, and youth work and education settings. We also make recommendations for leaders and practitioners in these spaces to help prevent these practices.

It is often assumed that conversion practices no longer happen in Aotearoa. Some groups who opposed the Conversion Practices Prohibition Legislation Bill repeated this argument

when making their submissions for why legislation prohibiting conversion practices was unnecessary. However, this report comprehensively confirms that conversion practices, and practices that if carried out in a sustained manner would amount conversion practices according to the legislation, continue to happen here. It further confirms that, without proactive human rights actions and education, conversion practices will likely continue to occur in various guises. Regardless of their form, conversion practices cause serious harm, including before and after they are performed. Our report describes the impact they have.

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## We took a human rights approach to eliminating conversion practices

As the National Human Rights Institution for Aotearoa New Zealand, and as the entity mandated by section 13 of the CPPLA to receive complaints about conversion practices, the Commission states conclusively that conversion practices are a breach of human rights for those who experience them. Such practices not only breach domestic human rights legislation but also the international human rights instruments that Aotearoa has ratified and is legally bound by.

In light of these human rights breaches, the Commission committed to applying a human rights-based approach to the delivery of our work programme under the CPPLA. This meant that the needs and perspectives of those most impacted by and vulnerable to the harms of conversion practices were at the centre of its design. Our priority was to have a diverse set of survivor voices involved. Efforts were made to ensure the

team was survivor-led and included members of minority ethnic groups whose experiences and perspectives are often less visible in work about conversion practices.

We begin our report by outlining what the CPPLA is and how it came about. This is followed by a comprehensive definition of what conversion practices are – and what they are not. We provide examples of such practices and evidence that they are happening in Aotearoa in a variety of settings. The report then outlines the considerable harms conversion practices cause, including a focus on marginalised communities such as Māori, Pacific peoples, ethnic communities, and transgender and non-binary people and disabled people. The report concludes by outlining ways that survivors can be best supported. This chapter draws on the advice shared with us by survivors.

## Conversion practices exist despite growing recognition of Rainbow rights

In 2020, we published the *Prism* report, which detailed six key human rights issues Rainbow communities face in Aotearoa.<sup>23</sup> The report noted the global rise of hate speech and hate crimes against Rainbow people at the time. Since 2020, informed by a rise in mis- and disinformation targeting Rainbow people, there has been a marked increase in both hate speech and hate crime in Aotearoa.<sup>24</sup> Increased occurrences of these incidences make takatāpui, MVPFAFF+ and Rainbow people even more vulnerable.

Nevertheless, Aotearoa has made positive strides in the recognition of Rainbow rights since the 1980s. The prohibition of conversion practices is the most recent step in the country's legislative trajectory to safeguard the rights of Rainbow people. The passing of the CPPLA in 2022 builds upon previous milestones, including:

- the Homosexual Law Reform Act 1986
- the Human Rights Act 1993

- inclusion of hate motivation based on gender identity or sexual orientation as an aggravating factor for sentencing under section 9(1)(h) of the Sentencing Act 2002
- the Civil Union Act 2004
- that both members of same-sex couples can be legally appointed as guardians of their child under section 21(4) of the Care of Children Act 2004
- equality reform and equal adoption rights under the Marriage (Definition of Marriage) Amendment Act 2013
- legal gender recognition (for those whose birth was registered in New Zealand) under section 24 of the Births, Deaths, Marriages, and Relationships Registration Act 2021.

There has also been a growing recognition and revitalisation of te ao Māori and Indigenous perspectives on gender and sexual orientation in Aotearoa, as efforts are made to reclaim and celebrate the rich diversity and cultural heritage that had been suppressed or forgotten as a result of colonisation.<sup>25</sup>

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## The CPPLA is a direct result of advocacy by Rainbow people

The CPPLA came about after years of advocacy by Rainbow communities. In early 2018, Amanda Ashley and the Rodney Area Rainbow LGBTQ+ Group started a petition to ban conversion practices. The petition called on then Prime Minister Jacinda Ardern to ban the practices. As the number of signatures grew, Member of Parliament Marja Lubeck reached out to offer support.<sup>26</sup>

Despite collecting 5157 signatures, it had relatively less sway than a Parliamentary petition because it was not created using the official Parliamentary process. A Parliamentary petition was then started by Young Labour and Young Greens and signed by 15,448 people.<sup>27</sup> Lubeck agreed to receive both petitions in August 2018, and they were then considered by the Justice Select Committee. Lubeck and others worked on the development of a Member's bill in her name to ban the practices. In June 2019, the Justice Select Committee heard from Max Tweedie and Teri O'Neill as the petition was formally presented.

The Conversion Therapy Action Group, co-founded in late 2018 by Shaneel Lal, Shannon Novak, Harry Robson, Max Tweedie, and Neihana Waitai, raised national awareness about the issues around conversion practices and the need for a ban. The work they and others did led to the Labour Party adopting the ban as policy in late 2020.

Despite this, progress appeared to have stalled. In February 2021, Dr Elizabeth Kerekere, a Green Party MP at the time, presented a further petition to Parliament to accelerate the progress for a ban.<sup>28</sup> Her petition collected 157,764 signatures in one week – the largest validated petition in the history of Aotearoa. Shortly after this, the Conversion Practices Prohibition Legislation Bill (the Bill) was introduced in July 2021.

The Bill led to a polarised public debate. Nearly 107,000 written submissions were made during the Justice Select Committee process, more than three times any other Bill in the history of Aotearoa.<sup>29</sup> In February 2022, the CPPLA passed into law with the support of 113 of Parliament's 120 members.<sup>30</sup>

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<sup>23</sup> Human Rights Commission, 2020.

<sup>24</sup> Hattotuwa et al., 2023.

<sup>25</sup> Hartendorp, K. (2019, October 23). *What do we really know about gender diversity in te ao Māori?*

<sup>26</sup> Local Matters. (2018, August 14). *Rodney activists seek ban on gay conversion therapy.*

<sup>27</sup> New Zealand Parliament | Pāremata Aotearoa. (2018, July 19). *Petition of Max Tweedie for Young Labour and the Young Greens: Ban gay conversion therapy.*

<sup>28</sup> Radio New Zealand. (2021, February 23). *Greens present petition in support of gay conversion therapy ban.*

<sup>29</sup> Smith, P. (2021, October 17). *Submission rising: Parliament's feedback flood.*

<sup>30</sup> Seven National MPs opposed the Bill at the third reading and voted against it: Simon Bridges, Simeon Brown, Melissa Lee, Simon O'Connor, Chris Penk, Shane Reti, and Michael Woodhouse.

## The CPPLA gave the Commission a role in education and prevention

The CPPLA has three parts. Part 1 sets out the purpose of the Act and the defines “conversion practice” for the purposes of the Act. Part 2 creates criminal offences and defines civil liabilities in relation to conversion practices. Part 3 amends the Human Rights Act to make it unlawful for any person to perform a conversion practice on another person, or to arrange for a conversion practice to be performed on another person.

Given the Commission’s existing mandate to receive and handle discrimination complaints under Part 3 of the Human Rights Act, we were provided with \$750,000 in 2021/22 and \$1.5 million in 2022/23 to implement aspects of the civil redress scheme under the CPPLA. This funding was provided to:

expand [the Commission’s] complaints function, train staff, develop and provide education on the prohibition and the civil redress scheme, set up appropriate monitoring and evaluation, deal with an initial tranche of enquiries and complaints, and exercise its general powers and functions in respect of conversion practices. The Commission will engage with communities (particularly survivors of

conversion practices and rainbow communities) and across agencies in designing and implementing the civil redress scheme.<sup>31</sup>

As part of this work, as outlined in the Bill’s commentary, the Commission was to provide education about conversion practices and their prohibition, and to build awareness among survivors of how they could access support. These tasks build on our existing functions under the Human Rights Act and were considered by the Justice Select Committee as “an important part of achieving the purpose of [the CPPLA]”.<sup>32</sup>

Having been charged with implementing the civil response service under the CPPLA, as well as undertaking education and prevention work, the Commission sought to centre a diverse range of survivor voices from the outset. We recognised the importance of bringing nuance, balance, and bridge-building approaches to both the public discussion and the introduction of the civil redress service set up under the CPPLA.

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## Taking a human rights-based approach meant putting survivors at the centre of our work

The human rights-based approach guided the establishment of the Commission’s Conversion Practices Response Team and the implementation of its work programme to give effect to the CPPLA. It also informed the methodology through which the team gained the insights and advice that are captured in this report.

Key tenets of a human rights-based approach are:

- decision making is linked to human rights standards set out in human rights covenants and conventions
- emphasis is placed on the participation of individuals and groups in decision making that affects them
- empowerment of individuals and groups by their use of rights as leverage for action and to legitimise their voice in decision making
- non-discrimination among individuals and groups through equal enjoyment of rights and obligations
- identifying the range of human rights involved and balancing rights, where necessary. This is guided by the prioritisation of the rights of those most vulnerable to human rights abuses
- accountability for actions and decisions, enabling individuals and groups to complain about decisions adversely affecting them.<sup>33</sup>

To lead this work we formed a team with both the leadership and a significant number of the members having lived experience of conversion practices. One of the major contributions of this report is to draw insights from more marginalised communities facing conversion practices in Aotearoa. In order to do so, efforts were made to ensure the team’s composition included gender and ethnic diversity and also people who identified as disabled. The team’s ethnic diversity included Māori, Pacific, South Asian, and Pākehā. However, we acknowledge that this does not represent the full breadth of diverse ethnicities relevant in our context. Another limitation was that there was no trans or non-binary representation on the team. To mitigate this, our Senior SOGIESC Human Rights Advisor with trans lived experience worked with the team on the report and developing its recommendations. In addition, sections relating specifically to the experience of conversion practices relating to gender and identity benefited from the review of a senior researcher and policy analyst with expertise on transgender health and wellbeing and legal gender recognition.

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<sup>31</sup> Ministry of Justice | Tāhū o te Ture. (2022). *Departmental report: Conversion Practices Prohibition Legislation Bill* (p. 67).

<sup>32</sup> Justice Select Committee. (2020). *Conversion Practices Prohibition Legislation Bill* (p. 10). In its 2018 advice on conversion practices, the Ministry of Health also recommended education as an effective way to reduce harm. Cabinet papers relevant to the new CPPLA also support the Commission using its education function and inquiry powers to bring an end to conversion practices in Aotearoa.

<sup>33</sup> Human Rights Commission. (2011a). *2011–2014 statement of intent and service performance* (p. 22).

Our work began with a series of consultation hui with:

- a wide range of survivors of conversion practices
- Māori, Pacific, and ethnic conversion practices survivors
- staff and board members of Rainbow sector organisations.

Four central principles were ratified at these early hui and guided the Commission's work, embedding accountability to survivors and stakeholders.

- **Voice (authentic perspective of those with lived experience of a particular issue):** A diverse variety of authentic survivor voices should be centred in public discourse, in the development of guidelines and community education, and in the development and delivery of services related to the CPPLA.
- **Agency (a sense of control, capacity to influence one's own thoughts and behaviour):** Survivors' agency will be increased as a result of engaging with government entities with responsibility under the CPPLA and with psychosocial support provided by the Rainbow and mental health sectors. Survivors have histories of being controlled and suppressed by those around them. Services and support will avoid anything that could be reminiscent of control or the misuse of authority.
- **Hope (a desire for something better to happen and a belief that it is possible):** Survivors face many challenges as they leave and try to recover from conversion practices. A key aim is that survivors develop hope for the future. The Commission and other agencies will use strengths-based language and framing both with and about survivors and will encourage survivors to see a positive way forward.
- **Wellbeing (having the tools, support, and environments needed to be who we are):** The Commission and partner agencies will be a safe space for all survivors and for Rainbow communities more broadly.

Survivors have been clear that conversion practices must stop and those who enact them must be held to account. They have also called for complaints and prosecutions to be progressed respectfully with a focus on education and building understanding and empathy for survivors. Despite experiencing rejection and harm, survivors continue to demonstrate understanding and compassion for those who enact conversion practices, whether consciously or unconsciously.

As Aotearoa's national human rights institution, the Commission's unique role includes two deeply held commitments.

- To advocate for a fair, just, and dignified life for all people in Aotearoa.
- To provide a free, neutral, and confidential dispute resolution service that protects the rights of everyone involved.

Both commitments are vital across all our work. With survivors setting the tone for empathy and understanding, it gives us a community mandate to deliver education in a mana-enhancing way. This includes education for people and organisations who could be potentially enacting or supporting conversion practices.

Throughout our 18-month implementation project, we continued to hear from survivors through a variety of channels and on a range of topics. Their wisdom, empathy, advice, and calls for action shaped our work programme and the insights and recommendations in this report.

We engaged with people with lived experience of conversion practices through Rainbow networks and through survivor networks. In addition, over the course of the 18 months the work was being carried out, any survivor of conversion practices who reached out to the Commission was offered the opportunity to meet with a member of the team to help shape and inform the implementation of the work programme.

We gathered insights from:

- group discussions and interviews with the Rainbow community and allies with lived experience of being migrants
- two wānanga held during 2022 with Tangata Whenua, Pacific peoples, and ethnic survivors
- ongoing one-on-one hui with survivors
- a desktop review of research in 2022 and 2023
- discussions and a survey at Awaken | Maranga Mai, a Rainbow faith conference held in 2023 for Rainbow people and allies of faith across Aotearoa.

We received a small amount of feedback from those supportive of conversion practices as a way to uphold what they perceived to be the 'rights' of families and religious communities to discipline or try to change those in their care. We have not given space to those views in this report, not only because conversion practices are unlawful, but also because it ensures the voices and experiences of those who have experienced harm from them are at the centre of this report.





## 2. What conversion practices are

This chapter explains what conversion practices are, where they come from, what makes people participate in them, and what harm they cause.

### Definition of conversion practices

Conversion practices are defined in section 5(1) of the CPPLA as any “practice, sustained effort, or treatment that ... is directed towards an individual because of the individual’s sexual orientation, gender identity, or gender expression” that is done with “the intention of changing or suppressing their sexual orientation, gender identity, or gender expression”.

Such practices attempt to change an individual’s Rainbow, takatāpui or MVPFAFF+ identity to be heterosexual and cisgender.<sup>34</sup>

We note, however, that the definition in the CPPLA does not include medical or surgical interventions on people (including infants) with innate variations of sex characteristics, sometimes referred to as intersex, despite these being considered as conversion practices by many intersex people, advocates, and experts.

Section 5 of the CPPLA gives examples of conversion practices.

- Using shame, coercion, or other tactics to give someone an aversion to same-sex attractions or to encourage gender-conforming behaviour.
- Encouraging someone to believe their sexual orientation or gender, or parts thereof, are defective or disordered.

- Performing a deliverance, exorcism, or prayer-based practice intended to change or suppress a person’s sexual orientation, gender expression, or gender identity.

There is no evidence that conversion practices can change a person’s sexual orientation or gender. Conversely, numerous studies have shown conversion practices cause significant and long-lasting harm (see chapter 5). Despite not working and having no therapeutic value, these practices are sometimes referred to as conversion ‘therapy’. Calling them therapies is misleading and undermines other genuinely helpful therapies.

Conversion practices are known by many names, which can disguise their true nature and mean people are sometimes unaware they are experiencing them. Names of conversion practices can include but are not limited to:

- ex-gay or ex-trans ministries
- healing sexual brokenness
- sexual orientation or gender identity change efforts<sup>35</sup>
- reparative therapy
- overcoming same-sex attraction.

<sup>34</sup> Fenaughty, J., Tan, K., Ker, A., Veale, J., Saxton, P., & Alansari, M. (2023). Sexual orientation and gender identity change efforts for young people in New Zealand: Demographics, types of suggesters, and associations with mental health. *Journal of Youth and Adolescence*, 52, 149–164.

<sup>35</sup> Gender identity change efforts in this context is another name for conversion practices. It is not a reference to the positive gender-affirmation steps a trans or non-binary person might take.



## Indoctrination and conversion ideology

Conversion practices are underpinned by a set of beliefs that can be broadly described as conversion ideology. This ideology asserts that being Rainbow, takatāpui, or MVPFAFF+ is wrong or undesirable and that it can be changed. While this ideology is not unlawful in Aotearoa, eliminating conversion practices is almost impossible without addressing the underpinning root beliefs. These inaccurate premises and damaging impacts must be confronted.

Conversion ideology experienced by people we engaged with encompassed the following beliefs.

- All people are or should be heterosexual, cisgender, and gender conforming.
- Anyone who is not heterosexual, cisgender, and gender conforming has experienced some damage, neglect, abuse, or other inappropriate influence that has affected their development. The belief that Rainbow people may have an illness can extend into believing that this illness could be 'contagious'.
- It is possible to stop being Rainbow through spiritual, psychological, or other intervention.
- Ceasing to be Rainbow would be good for the individual, their family, and/or their community. This may be a condition for their full acceptance, affirmation, and inclusion.
- Being Rainbow is incompatible with a given faith, culture, community, or family value set, and it is a sin, deviant, or a spiritual problem.
- The idea that Rainbow people attend activities and events with malevolent intentions to recruit others to identify as Rainbow.

Any one of these beliefs may constitute conversion ideology. When multiple beliefs exist within a community, Rainbow people, including those concealing their identity, are at risk. Different forms of conversion practices can focus on different inaccurate, harmful, and stigmatising beliefs that these identities are not natural.

**"I was told there was fundamentally something wrong with me and that, through counselling and through talking through the issues as they saw them, that I would be able to change my sexual orientation."** Pākehā, male<sup>36</sup>

Conversion ideology becomes entrenched in environments where these types of beliefs are taught as fact and where testing these beliefs and other views is discouraged, generally by those in authority. Young people are particularly at risk in these indoctrinating environments because they are learning ideas and frameworks that will affect how they interpret and apply information throughout their life. In addition, young people are dependent materially and for nurture and affection on older people with power, particularly their parents/guardians.

**Indoctrination** is the process over time of repeatedly teaching a set of beliefs until they are accepted without question or criticism.

Colonisation introduced conversion ideology to Aotearoa. Prior to European contact, evidence suggests traditional Māori society viewed gender and sexuality as fluid.<sup>37</sup> Like many other countries, Aotearoa has a history of homophobic and transphobic legislation, policies, attitudes, and medical practices that still hold influence on society.

<sup>36</sup> This statement is the first among many authentic quotes in this report from survivors who experienced conversion practices in Aotearoa New Zealand. These were gathered primarily through the Commission's 18-month project to implement the changes brought about by the CPPLA. As many survivors find the experience of resharing their experiences retraumatising, we have supplemented the quotes we gathered with quotes from survivors who have shared their stories in the media. They are all shared because it is important to give survivors their own voice and in the hope they will personalise and bring to life the data, stories, and recommendations contained in this report. All quotes have been anonymised.

<sup>37</sup> Aspin, C., & Hutchings, J. (2007). Reclaiming the past to inform the future: Contemporary views of Maori sexuality. *Culture, Health & Sexuality*, 9(4), 415–427; Kerekere, E. (2017a). *Growing up takatāpui: Whānau journeys*. Tiwhanawhana Trust and RainbowYOUTH; Pihama et al., 2020.

## What makes people take part in conversion practices

While some people may be forced into conversion practices, others may seek them out for themselves. People are motivated to take part for several reasons such as:

- perceived incompatibility between their culture or faith and their sexual orientation, gender identity, or expression
- a feeling of failing oneself or bringing dishonour and shame to their families or communities if they cannot conform to heterosexual and cisgender norms
- fear of rejection by their family or peers
- a desire to lead a 'normal' life, including having children and getting married
- financial dependence on relatives or others.

**"I wanted so desperately to feel normal that I was willing to try anything."**

Pākehā, male

In some instances, family members will seek conversion practices for other family members due to the concern that being Rainbow, takatāpui, or MVPFAFF+ will make that person's life difficult or unhappy.

## Examples of conversion practices

Conversion practices take many different forms and can include several different techniques. They can be formal and informal, and include practices directed by others or self-imposed. The common misunderstanding that conversion practices can only occur formally means survivors themselves may not recognise their experiences as conversion practices or have the language to clearly explain what happened to them.

Often, conversion practices are difficult to recognise because, at face value, the forms they take appear to be neutral and generally have positive associations such as group study, mentoring and counselling, or camps and courses.

Other forms of conversion practices are easier to identify as they are more commonly recognised and understood forms of abuse. Some examples of these practices include beatings, whippings, burnings, 'corrective' rape, electric shocks, nausea-inducing medication, castration, hormone therapy to reinforce sex assigned at birth, forced fasting, and abduction. Other forms can be associated with specific cultural or religious practices, such as exorcisms, 'black magic', the use of talismans,<sup>38</sup> rituals, prayer, recitation of religious texts with some type of aversion component, and worship.

**"I listened to sermons telling me that gay people needed to change who they were, remain celibate, or go to hell. I experienced sexual assault by someone who thought that was the way to change me to straight."**

Pākehā, female

**"I'd heard frightening stories about people screaming, contorting, and frothing at the mouth when devils were cast out of them, but whatever it took to get rid of these terrible thoughts, I wanted to do it. I wanted so desperately to feel normal that I was willing to try anything. They shouted, 'Come out, come out, you unclean, foul spirit from the pit of hell! You have to obey us, we have the authority of Jesus Christ, the Son of God! Name yourself!' I was so worked up [from the pressure I was under and all the yelling] that I coughed up phlegm and fell off the seat onto the floor."**

Pākehā, male

The most common conversion practices use manipulative pseudo-scientific approaches disguised as psychology-based 'therapy'. These can include group therapies, counselling, camps and seminars, and cultivating 'normative' gender behaviour through behaviour modelling.

Through our engagement we found that people are also frequently coerced to perform conversion practices on themselves. These practices are usually accompanied by follow-up conversations with someone in a position of authority to report back on what has been done. Alternatively, a person may be required to publicly recount the details of their 'failings', which might include masturbation, reading, or looking at Rainbow content or thinking about acting on desires to live as a Rainbow person. It is also common in faith settings that are practitioners of conversion practices for people in authority to either push people into marriage with a person of the opposite sex or to try and enforce celibacy.

<sup>38</sup> Objects thought to have supernatural powers.



Through our engagement, we observed that practitioners of conversion practices are often people who hold positions of power in communities. They include family members, religious leaders or advisors, medical professionals, counsellors, and cultural leaders.

**“People talked about intensive prayer sessions, exorcisms, reorientation education, boot camp kind of ideas. Other people talk about psychological tools like being asked to wear a rubber band and flick the rubber band whenever they had a bad thought.”**

New Zealand researcher recounting stories from survivors.

**“For the first time, and even before I’d even had conversations with myself about it, I was telling an adult who was in a position of power, who I didn’t really know and didn’t really trust, the most intimate detail of my life. That was how I came out ... I felt the need to sit away from my family because I didn’t want them to see me not taking the sacrament because I wasn’t worthy of it. I was just made to feel that there’d be a lot of shame, that there would be abandonment, and that I wouldn’t belong to this unit [my family] any more.”**

Samoan, male

**“The shame and disgust in myself that I felt sitting in front of a room of elders, recounting my homosexual activities and being interrogated about a presumed sexual assault that caused such behaviours, is something that still hurts to think about. It was a huge contributor to my leaving the faith. The religion’s attitudes towards homosexuality, and teachings that frame queer identities as an abomination. Ex-communication interviews are enough of a barrier to overcome – requiring young people to share deeply personal intimate experiences with church leaders is unnecessarily cruel and must be stopped.”**

Māori, male

## Conversion practices are happening in Aotearoa

Although the research base is small, we know from studies done since 2020 and our own engagement with survivors that conversion practices happen here and they have significant harmful impacts.

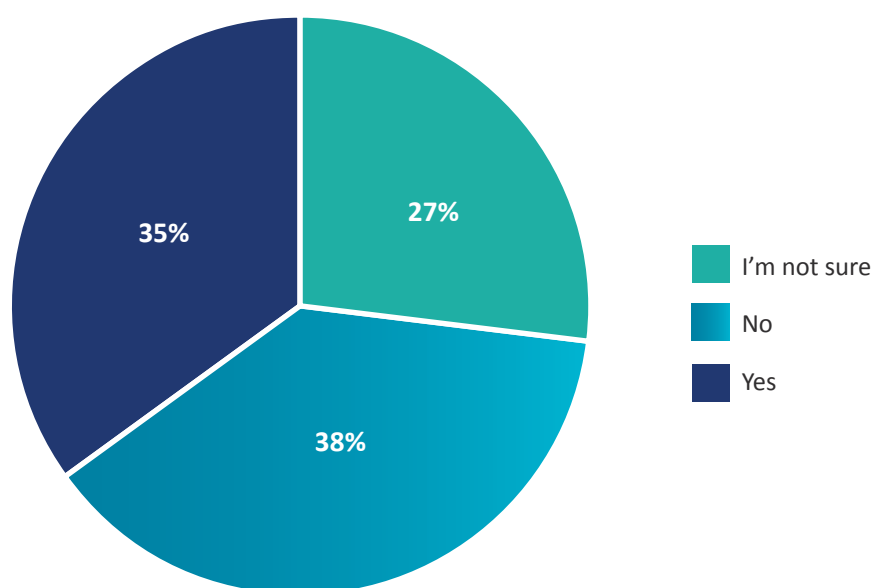
A 2021 study based on a survey of 4,800 Rainbow young people in Aotearoa aged 14–26 reported that 3 percent of those surveyed had experienced conversion practices. An additional 4 percent of survey participants reported that they were too upset to talk about it. According to this study, a more accurate estimate of the actual prevalence of conversion practices among young people may be 7 percent.<sup>39</sup>

This study found that, amongst those who reported being exposed to conversion practices, a higher proportion of those aged 19–26<sup>40</sup> (compared to participants aged 14–18) were transgender, non-binary, or another non-cisgender identity or were unsure/questioning their gender (compared with cisgender) and reported severe material deprivation (compared to those reporting no deprivation or mild deprivation).<sup>41</sup> Conversion practices were most commonly suggested by family/whānau members, followed by religious or spiritual leaders, the individual themselves, another person, and then medical professionals.<sup>42</sup> Significantly, this study found that those who experienced conversion practices had a higher likelihood of reporting suicidal ideation, suicide planning, and/or a

suicide attempt compared to those who had not experienced conversion practices. The study results confirm that conversion practices are occurring amongst a significant minority of young people and that they have harmful mental health impacts.

A 2022 study of the experiences of transgender and non-binary people of gender identity-related conversion practices in healthcare settings in Aotearoa found that 20 percent of participants had been exposed to conversion practices.<sup>43</sup> A further 9 percent did not know if they had. Those with exposure to conversion practices were found to be more likely to report internalised transphobia, psychological distress, self-injury, and suicide attempts. This study also confirmed the harmful effects of these practices.

The engagement we undertook as part of setting up the temporary response service further confirms the presence of conversion practices in Aotearoa. As part of this work, the Commission conducted a survey inviting participants at a 2023 conference for Rainbow people of faith to share their views on safe faith spaces and to help inform the development of the conversion practices work programme. Of the 26 participants who completed the survey, 35 percent had experienced conversion practices. A further 27 percent were unsure if they had experienced conversion practices (see Figure 1).



**Figure 1:** Prevalence of experiencing conversion practices – survey results from Awaken | Maranga Mai conference 2023.

<sup>39</sup> Fenaughty et al., 2023, p. 157.

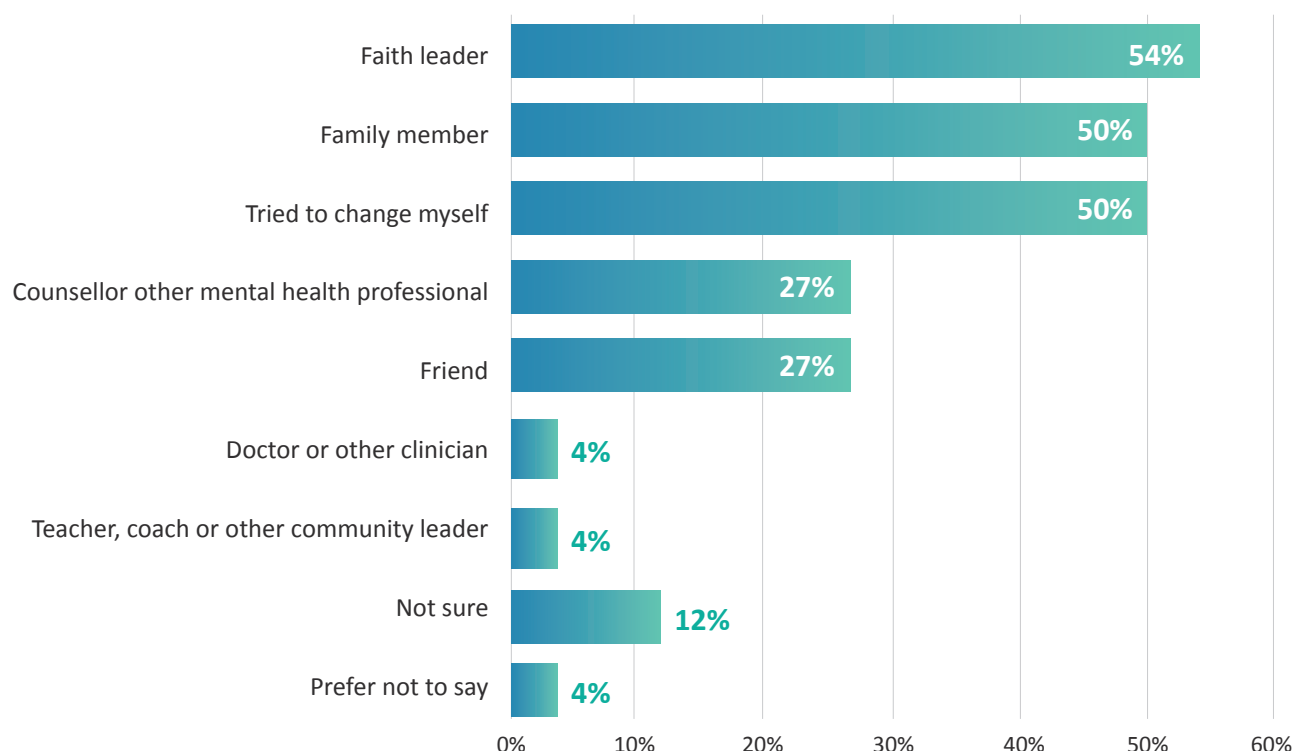
<sup>40</sup> For this reason, many survivors call for the CPPLA to be amended to afford the same protection to those over the age of 18 as it does to those under.

<sup>41</sup> Fenaughty et al., 2023, p. 158.

<sup>42</sup> Ibid.

<sup>43</sup> Veale, J., Tan, K., & Byrne, J. (2022). Gender identity change efforts faced by trans and non-binary people in New Zealand: Associations with demographics, family rejection, internalized transphobia, and mental health. *Psychology of Sexual Orientation and Gender Diversity*, 9(4), 478–487.

When asked who contributed to the practices, ‘faith leader’ was the most common response, followed by ‘family member’, and ‘being coerced to try to change themselves’ (see Figure 2).



**Figure 2:** Contributors to conversion practices – survey results from Awaken | Maranga Mai conference 2023.

One participant at the Rainbow faith conference – a Pākehā male community leader rather than a survivor – observed, **“I couldn’t believe that in a modern New Zealand a practice like that could actually be undertaken.”**

## What is not a conversion practice?

**Under section 5(2) of the CPPLA, none of the following examples constitute a conversion practice, providing there is no intention to change or suppress an individual’s sexual orientation, gender identity, or gender expression.**

- A religious leader preaching to or praying for their congregation.
- A religious leader praying for or providing pastoral care for an individual.
- A parent or guardian respectfully discussing sexual orientation or gender with their child, including offering advice and guidance or expressing a belief or religious principle.
- A medical practitioner delaying hormone treatment to allow for the development of a plan for gender-affirming healthcare or for activities such as counselling. Practitioners need to comply with all legal, professional, and ethical standards and exercise reasonable professional judgement.

It is important to bear in mind the distinction that, while these activities *can* be lawful, they are *not* lawful if they are done with the intention to change or suppress an individual’s sexual orientation, gender identity, or gender expression.

It is also not a conversion practice to:

- assist someone who is undergoing or considering undergoing a gender transition
- assist someone to express their gender or identity
- provide acceptance, support, or understanding of an individual
- facilitate a person’s coping skills, development, or identity exploration or help with social support.

For further information, please see the Commission’s guidelines on conversion practices.<sup>44</sup>

<sup>44</sup> Human Rights Commission. (n.d.a). *Conversion practices*.





### 3. Conversion practices are a breach of human rights

Conversion practices breach human rights. The CPPLA made conversion practices a criminal offence in Aotearoa New Zealand and inserted section 63A in the Human Rights Act to make them a form of unlawful discrimination under the civil law. The CPPLA sits within a broader domestic and international legal and human rights framework that protects the enjoyment of rights breached by conversion practices.

All people in Aotearoa have the right to equality, dignity, and respect. Conversion practices can interfere with rights set out in international and domestic human rights law, including:

- the right to freedom from discrimination
- the right not to be deprived of life
- the right to freedom of expression
- the right to health
- the right to be free from torture or other cruel, inhumane, or degrading treatment
- the rights of Indigenous peoples
- the rights of the child
- the rights of disabled people

## Recognition of gender and sex in human rights laws

The Yogyakarta Principles<sup>45</sup> apply binding international human rights law to sexual orientation, gender identity, gender expression, and sex characteristics (SOGIESC).<sup>46</sup> The principles state that all people, regardless of their SOGIESC, have the same human rights and freedoms. All States must comply with these international legal obligations.

Section 21 of New Zealand's Human Rights Act prohibits discrimination on 13 grounds, including sex and sexual orientation. The Commission has interpreted sex to include gender identity since at least 2005.<sup>47</sup> In 2006, the acting Solicitor-General wrote a legal opinion concluding that the prohibition of discrimination on the ground of sex includes prohibition on the ground of gender identity, even without its express inclusion.<sup>48</sup>

The New Zealand Bill of Rights Act 1990 (NZBORA) sets out a range of civil and political rights and requires the government and anyone carrying out a public function to observe these rights and to justify any limits placed on them. The NZBORA includes nearly all the rights set out in the International Covenant for Civil and Political Rights (ICCPR),<sup>49</sup> which New Zealand has ratified. Like the ICCPR, the NZBORA includes the right to freedom from discrimination (section 19) and the rights to freedom of expression (section 14) and religious belief (section 13).

Conversion practices discriminate against Rainbow people and limit their freedom of expression based on their gender and sexual orientation. This is a breach of their human rights.

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## Te Tiriti o Waitangi and the rights of Indigenous peoples

Signed between over 500 rangatira and representatives of the British Crown in 1840, te Tiriti o Waitangi is both the founding document of Aotearoa New Zealand and our own unique statement of human rights. Te Tiriti reaffirms the pre-existing rights and rangatiratanga of Tangata Whenua.

In Article One of te Tiriti, Māori gave the Crown kāwanatanga or governorship. In return, Māori were guaranteed tino rangatiratanga – the unqualified exercise of chieftainship over their lands, dwelling places, and all other taonga or treasures – in Article Two. This guarantee includes both material taonga like forests and fisheries and intangible taonga like language and tikanga.

Tino rangatiratanga stems from inherent pre-existing rights and whakapapa connections that Māori have to land and the natural environment. It gives Māori the authority and autonomy to understand and build on their own inclusive views of sexual orientation, gender identity, gender expression, and sex characteristics that are centred around mātauranga Māori and tikanga. Tino rangatiratanga also includes obligations to manaaki and tiaki te ao Māori, including whānau, hapū, iwi, and communities. Takatāpui identities, and traditional values around sexual orientation and gender, are taonga to be cared for and protected from the harms of conversion practices.

Article Three of te Tiriti promises Māori equal enjoyment of citizenship rights, placing obligations on the Crown to ensure equity for Māori alongside other New Zealanders, including equity of access. This article protects the right to be free from discrimination, including discrimination on the basis of sexual orientation and gender identity.

The oral fourth article of te Tiriti guaranteed the protection of religious and spiritual traditions, including “Māori custom.” Whaea Merimeri Penfold has observed that this article provides the “Mana Atua (spirituality) dimension that makes sense to Tangata Whenua values and practices”.<sup>50</sup> In protecting Māori spiritual customs, this article includes protection for takatāpui and their spiritual roles within Māori communities.

Te Tiriti is supported by international human rights instruments, particularly the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), which was adopted by the United Nations in 2007 and ratified in Aotearoa New Zealand in 2010. Affirming (in Article 37) that Indigenous peoples such as Māori have the right to the recognition, observation and enforcement of treaties, UNDRIP upholds and reinforces the rights set out in te Tiriti.

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<sup>45</sup> International Commission of Jurists. (2007). *The Yogyakarta Principles: Principles on the application of international human rights law in relation to sexual orientation and gender identity*. In 2017, the Yogyakarta Principles Plus 10 expanded on the principles developed in 2007, adding 10 new ones. These included recognition of the right to bodily and mental integrity and the rights to state protection and legal recognition. See International Commission of Jurists. (2017). *The Yogyakarta Principles plus 10: Additional principles and state obligations on the application of international human rights law in relation to sexual orientation, gender identity, gender expression and sex characteristics to complement the Yogyakarta Principles*.

<sup>46</sup> While this report predominantly uses the term ‘Rainbow’, or less often the acronym LGBTQIA+, the acronym SOGIESC is more widely used in the context of human rights and so is included in this chapter.

<sup>47</sup> Human Rights Commission. (Unpublished manuscript, 2005). *Does the Human Rights Act 1993 prohibit discrimination based on gender dysphoria or transsexualism?*

<sup>48</sup> Gwyn, C. (2006, August 2). *Crown Law opinion on transgender discrimination*.

<sup>49</sup> See the references section for links to United Nations human rights instruments referred to in this report.

<sup>50</sup> Human Rights Commission. (2011b). *Te Mana i Waitangi: Human rights and the Treaty of Waitangi* (p. 15).



UNDRIP protects Indigenous peoples' right to their own identity in accordance with their customs and traditions, the right not to be subjected to the destruction of their culture, the right to their spiritual and religious traditions, and the right to develop future manifestations of their culture (Articles 2, 8, 12, 13). For Māori in Aotearoa, this provides the right to embrace the affirming and inclusive attitudes they have historically had towards gender identity and sexual orientation as well as to the reclamation of takatāpui as an identity.

A concept note regarding item 8 of the 16th session of the UN Expert Mechanism on the Rights of Indigenous Peoples (EMRIP) in July 2023 states:

Article 2 [of UNDRIP] affirms that Indigenous Peoples, including LGBTQIA+ people, are free and equal to all other peoples and individuals and have the right to be free from any kind of discrimination in the exercise of their rights. This includes the right to express themselves, based on their Indigenous origin and identity, without discrimination ... States must take measures, in conjunction with Indigenous peoples, "to ensure that LGBTQIA+ members of Indigenous Peoples enjoy the full protection and guarantees against all forms of violence and discrimination.

Article 8 affirms that Indigenous Peoples and individuals, including LGBTQIA+ people, have the right not to be subjected to forced assimilation or destruction of their culture. This includes ... violence and discrimination based on sexual orientation, gender identity, gender expression and sex characteristics, which also affects LGBTQIA+ members of Indigenous Peoples ... States must

take measures, in conjunction with Indigenous Peoples, to prevent any action which has the aim or effect of depriving LGBTQIA+ members of Indigenous Peoples of their integrity as distinct peoples, or of their cultural values or ethnic identities."<sup>51</sup>

Discussion on the topic at the annual EMRIP session in July 2023 noted that "colonial heritages continue to play an active role in fomenting lack of acceptance and violence" towards Indigenous Rainbow people. Participants noted that, within traditional Indigenous societies, Rainbow people often performed important cultural and religious roles with their sexual identity "often spring[ing] from the divine". Participants expressed the hope that greater awareness on this topic would help decolonise sexuality and gender.<sup>52</sup>

A 2023 report to the United Nations General Assembly discusses the impact of colonialism on social values regarding sexual identity, focusing on the fact that sexual diversity has been present throughout history and the ways in which colonial policies on gender and sexuality have affected Indigenous peoples.<sup>53</sup>

Within their homelands, Pacific peoples and many ethnic communities who have experienced the impact of colonisation also historically embraced diverse genders and sexualities. For example, MVPFAFF+ identities are Indigenous identities across the Pacific that have unique histories and places in society. Perhaps overlooked in a traditional reading of section 20 of the NZBORA is that laws in Aotearoa also offer specific protection to these Indigenous identities and communities by protecting their rights as minorities to enjoy their culture.

<sup>51</sup> Expert Mechanism on the Rights of Indigenous Peoples. (2023). *Concept note*.

<sup>52</sup> Indigenous Peoples' Centre for Documentation, Research and Information. (2023). *Summary notes of the 16th session of the Expert Mechanism on the Rights of Indigenous Peoples: 17–21 July 2023, Geneva*. (p. 17).

<sup>53</sup> United Nations (General Assembly). (2023). *Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity, Victor Madrigal-Borloz*.

## The right not to be subjected to torture or cruel treatment

Torture, cruel, inhuman, and degrading treatment or punishment are prohibited under international and domestic law.

The most comprehensive and widely recognised international human rights instrument relating to the prohibition of torture is the United Nations Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT). CAT defines torture as the “intentional infliction of severe physical or mental pain or suffering for specific purposes, which includes coercion”. As well as CAT and the ICCPR, the prohibition of torture is also enshrined in the Universal Declaration of Human Rights, the United Nations Convention on the Rights of the Child, and the United Nations Convention on the Rights of Persons with Disabilities.

United Nations treaty bodies and human rights leaders and experts globally have expressed concern that conversion practices amount to torture, cruel, inhuman, or degrading treatment. United Nations human rights mechanisms have concluded that conversion practices are contrary to international human rights law and have urged States to ban them.<sup>54</sup>

In New Zealand law, section 9 of the NZBORA provides that “everyone has the right not to be subjected to torture or to cruel, degrading, or disproportionately severe treatment or punishment”. In addition to being recognised as crimes in their own right, some specific conversion practices may amount to torture or degrading treatment such as involuntary confinement and forced treatment on the grounds of sexual orientation or gender identity, electric shock or other aversion therapies, and sexual abuse.

The Abuse in Care Royal Commission of Inquiry has reported on the transphobic and homophobic abuse inflicted on patients at Lake Alice Hospital child and adolescent unit. Conversion practices and punishments for behaviour that staff considered ‘homosexual’ and failing to conform to traditional gender norms included electric shock (including administration to the genitals), non-consensual sedating medication (injection of paraldehyde), and solitary confinement. The Inquiry concluded that the use of electric shocks and paraldehyde to punish met the definition of torture as outlined by the Solicitor-General.<sup>55</sup>

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## Rights of the child

Aotearoa New Zealand ratified the United Nations Convention on the Rights of the Child (CRC) in 1993. Article 1 of the CRC guarantees basic and fundamental rights to all children and young people up to the age of 18 and establishes the human rights standards for their treatment. The CRC’s preamble notes that children and young people require “special safeguards and care, including appropriate legal protection.”

The CRC is based on four general principles.

- Article 2: the obligation of States to respect and ensure the rights to each child without discrimination of any kind.
- Article 3 (1): the best interests of the child as a primary consideration in all actions concerning children.
- Article 6: the child’s inherent right to life and States parties’ obligation to ensure to the maximum extent possible the survival and development of the child – embracing the child’s physical, mental, spiritual, moral, psychological, and social development.
- Article 12: the child’s right to express his or her views freely in “all matters affecting the child,” those views being given due weight.<sup>56</sup>

Article 8 of the CRC also affirms the rights of all children to have their identity respected. The United Nations Committee on the Rights of the Child has confirmed that this right encompasses sexual orientation and gender identity, which must be taken into consideration when assessing a child’s best interests.<sup>57</sup>

These rights and standards are incorporated in New Zealand legislation, including in section 4 of the Care of Children Act (COCA), which states that “the welfare and best interests of a child in his or her particular circumstances must be the first and paramount consideration”. The Oranga Tamariki Act 1989 also recognises that upholding the wellbeing of a child in accordance with the CRC requires a “holistic approach” that “sees the child or young person as a whole person which includes, but is not limited to, the child’s or young person’s ... gender identity; and sexual orientation”.

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<sup>54</sup> United Nations Human Rights Council. (2020). *Practices of so-called “conversion therapy”: Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity*.

<sup>55</sup> Abuse in Care Royal Commission of Inquiry. (2022). *Beautiful children: Te uiui o te Manga Tamariki me te Rangatahi ki Lake Alice | Inquiry into the Lake Alice Child and Adolescent Unit*.

<sup>56</sup> United Nations Committee on the Rights of the Child. (2003). *General comment No. 5: General measures of implementation of the Convention on the Rights of the Child (arts. 4, 42 and 44, para. 6)*.

<sup>57</sup> United Nations Committee on the Rights of the Child. (2013). *General comment No. 14 (2013) on the right of the child to have his or her best interests taken as a primary consideration (art. 3, para. 1)*.

Children can be especially vulnerable to conversion practices and their harms. Proactive protection of their rights requires additional government intervention. The best interests of the child must allow for their freedom of expression and respect for their physical and psychological integrity. Conversion practices are in direct opposition to the best interest of children as they can cause psychological distress, can harm children physically or cause them to harm themselves physically, and suppress their freedom of expression.

Under various domestic laws, parents have a responsibility to uphold these rights. Section 16 of the COCA provides that guardians have a responsibility and duty in “contributing to the child’s intellectual, emotional, physical, social, cultural and other personal development” and in “determining for or with the child, or helping the child to determine, questions about important matters affecting the child”. Section 5 of the COCA provides that “a child’s care, development, and upbringing should be primarily the responsibility of [their] parents or guardians”. However, these responsibilities are limited in several ways. They must be exercised in accordance with the core principle that the welfare and interest of the child are paramount and that they “must be given reasonable opportunities to participate in decisions affecting them”.

The CPPLA does not make unlawful respectful discussion of sexual orientation or gender with their child, including offering advice and guidance or expressing a belief or religious

principle, providing there is no intention to change or suppress an individual’s sexual orientation, gender identity, or gender expression. Instead, it is aimed at specific harmful practices and sustained effort or treatments that try to change a child’s gender or sexual orientation.

Some submitters at Select Committee were concerned about the potential impact on legitimate expressions of opinion within families/whānau about sexuality and gender. In assessing the Bill against the NZBORA, the Crown Law Office considered the risk of this impact to be mitigated by three provisions.

- The Bill is clearly expressed to ban only practices that are intended to change or suppress rather than merely confront or reject the individual’s sexual orientation, gender identity, or gender expression.
- One of the purposes of the Bill is expressed to be the promotion of respectful and open discussions regarding sexuality and gender.
- Attorney-General consent is required for any prosecution.<sup>58</sup>

These provisions were retained in the CPPLA when it was passed. Of these, the Commission recommends that the Attorney-General consent requirement is repealed. The Attorney-General’s consent for prosecution is required in some cases requiring complex human rights considerations. However, in this context, the Commission believes such oversight is not required given the other safeguards and can instead create a barrier to justice.<sup>59</sup>

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## The right to health

Article 12 of the International Covenant on Economic, Social and Cultural Rights, which New Zealand has ratified and is therefore legally binding, recognises “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health”. An integral part of this right is sexual and reproductive health, which encompasses the right of persons to be fully respected for their sexual orientation and gender identity.<sup>60</sup> The Government is legally obliged to take steps to achieve the full enjoyment of this right on the basis of equality and non-discrimination. This includes ensuring acceptable and quality healthcare for Rainbow people in Aotearoa. Conversion practices undermine this right by making people vulnerable to psychological and physical harm, stigmatisation, and experimentation by conversion practitioners attempting various approaches to conversion practices.

The Code of Health and Disability Services Consumers’ Rights (Code of Rights) sets out the rights of people using health and disability services and the obligations and duties of providers to comply with the Code of Rights. It provides the right for consumers:

- to receive services free from coercion (Right 2)
- to receive services of an appropriate standard (Right 4)
- to be fully informed (Right 6)
- to make an informed choice and give informed consent (Right 7).

Section 5 of the CPPLA affirms the ability for health practitioners to act within their reasonable professional judgement where that complies with all legal, professional, and ethical standards. Alongside the rights outlined above, Rights 1, 2 and 4 of the Code of Rights specify that healthcare providers must provide services of an appropriate quality and standard that respond to the diverse needs of their clients with respect and without discrimination.

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<sup>58</sup> Crown Law. (2021, June 29). *Briefing to Attorney-General – Conversion Practice Prohibition Legislation Bill*.

<sup>59</sup> Human Rights Commission. (2021). *Conversion Practices Prohibition Legislation Bill: Submission of the Human Rights Commission* (p. 28).

<sup>60</sup> International Commission of Jurists, 2007, Principle 17.

The right to the highest attainable standard of physical and mental health is fundamental for Rainbow people's physical, mental, and emotional wellbeing. Ensuring the right to health requires healthcare services to meet four essential standards: availability, accessibility, acceptability, and quality – referred to as the AAAQ Framework. These standards must be met without discrimination and the needs of the most marginalised populations prioritised. Treatment and knowledge cannot be withheld with the intention of changing or suppressing someone's sexual orientation, gender identity, or gender expression, regardless of the age of the individual. In relation to

trans people, all healthcare professionals have a duty to provide gender-affirming care within their scope of practice.

Timely provision of gender-affirming healthcare is the expected norm in Aotearoa<sup>61</sup> as has been endorsed by professional medical and psychological associations.<sup>62</sup> Therefore, withholding gender-affirming healthcare may be considered a conversion practice if the health practitioner does so with the intention to suppress or change someone's gender identity or gender expression.

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## The right to freedom of religion

Everyone has the right to freedom of religion or belief. This right is protected under article 18 of the Universal Declaration of Human Rights, article 18 of the ICCPR, and domestically under section 13 of the NZBORA and section 21 of the Human Rights Act. Article 14 of the Convention on the Rights of the Child recognises that children also have this right. Article 14(2) requires States to respect the rights and duties of parents and legal guardians to provide children with direction about this right "in a manner consistent with the evolving capacities of the child".

Section 5 of the CPPLA respects this right by applying prohibitions only to actions taken towards an individual with the intention of changing or suppressing their sexual orientation, gender identity, or gender expression.

To further support religious and faith communities to understand the legal requirements, section 5 of the CPPLA provides examples of what could qualify as conversion practices. One of the examples focuses on religious practices, including "carrying out a prayer-based practice, a deliverance practice, or an exorcism intending to change or suppress an individual's sexual orientation, gender identity, or gender expression".

The Commission has heard from several conversion practice survivors who do not want to leave their religions. Some of these survivors instead seek Rainbow-affirming religious spaces. During the public consultation phase of the Bill and throughout the Commission's engagement, some religious institutions were supportive of the proposed law and wanted to remove the religious exception within the Bill.<sup>63</sup>

**"I think the most unexpected allies for me were all of the churches that made it very clear that concerns about religious freedom were not compromised at all by this Bill."** Māori, takatāpui, community leader

The United Nations Independent Expert on Protection against Violence and Discrimination based on Sexual Orientation and Gender Identity made similar observations in 2020. Stating that "there is no direct correlation between religion and exclusion of sexual orientation and/or gender identity ... [and] he has been encouraged to see that some churches and religious communities adopt an inclusive interpretation of religion and embrace the value of diversity and welcome [Rainbow people]"<sup>64</sup>

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<sup>61</sup> Carroll, R., Nicholls, R., Carroll, R. W., Bullock, J., Reid, D., Shields, J., Johnson, R., Oliphant, J., McElrea, E., Whitfield, P., & Veale, J. (2023). *Primary care gender affirming hormone therapy initiation guidelines*.

<sup>62</sup> New Zealand Psychological Society | Rōpū Mātai Hinengaro o Aotearoa. (n.d.a). *Position statement on "conversion therapy"*; New Zealand College of Clinical Psychologists | Te Whare Wānanga o te Mātauranga Hinengaro. (2021). *Conversion Practices Prohibition Legislation Bill: Submission to the Justice Select Committee*; The Royal Australian & New Zealand College of Psychiatrists. (2019). *Sexual orientation change efforts*; New Zealand Association of Counsellors. (2020). *NZCCA's stance on conversion practices*.

<sup>63</sup> This exception was maintained when the Bill passed into law in section 5(2)(f) of the CPPLA.

<sup>64</sup> United Nations Human Rights Council, 2020, p. 16.

## The balancing of rights in Aotearoa

Human rights are **universal** (inherent to every individual without discrimination), **inalienable** (no one can take them away), **indivisible**, and **interrelated**, with all rights having equal status and being necessary to protect human dignity. Some rights compete with other rights, and fair balances have to be struck between them. The balancing of rights is an ongoing exercise, and new balances are often struck and restructured by decision makers as new information and evidence emerges and our understanding of issues changes and develops.

The NZBORA affirms the right to freedom of religion and belief for everyone in Aotearoa. Freedom of religion or belief has many dimensions, and it intersects with other human rights. In this context, it intersects with the right of Rainbow people to be free from discrimination. The CPPLA balances these rights by providing a proportionate way to protect Rainbow people from the proven harms of conversion practices while respecting the right for someone to practise their religion. The CPPLA does not

interfere with the right to hold a religious belief but puts limits on how that belief is put into action in relation to other people.

Section 5 of the NZBORA justifies limitations on rights and freedoms to “reasonable limits” as prescribed by law in a free and democratic society. There are other examples of legislation in Aotearoa that place limits on certain rights to prevent harm.<sup>65</sup>

The ICCPR also provides further context for when rights may be limited. The relevant provision states that expression of religious belief can be limited only where the rights are prescribed by law and are necessary to protect public safety, order, health, morals, or the fundamental rights and freedoms of others. The limits put in place by the CPPLA do not prevent all harm experienced by Rainbow people caused by religious or belief practices but instead focus on actions directed at Rainbow individuals with the intention of changing or suppressing their Rainbow identity.

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## The Commission’s civil redress role

Where the balancing of rights is in question or if conversion practices may be happening, the Commission can assist. We can answer questions, provide information, and refer people to a variety of support resources and agencies. In some cases, we can offer a dispute resolution process for complaints covered by the Human Rights Act. The Commission’s service is free and confidential and protects the rights of everyone involved. Our service is guided by tikanga and aims to be accessible to everyone in Aotearoa New Zealand. More information is available on the Commission’s website.<sup>66</sup>

Our dispute resolution process involves a mediator helping people safely communicate with each other and agree on outcomes without a judge or decision maker being involved. Potential outcomes can include an apology, an

acknowledgement of the impact of the behaviour, agreement not to do the same thing in future, a training programme, or financial compensation. If dispute resolution is not appropriate or does not result in a satisfactory outcome, there may be the option of taking the complaint to the Human Rights Review Tribunal. The Tribunal can hear complaints about breaches of the Human Rights Act and make findings and orders. You can apply to the Office of Human Rights Proceedings for free legal representation at the Tribunal.<sup>67</sup>

The Commission also has a role to help prevent conversion practices through education and awareness raising. We can provide support and information to survivors and to those who are consciously or unconsciously contributing to conversion practices.

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<sup>65</sup> Examples of laws where limits have been placed on certain rights to prevent harm include laws about:

- racist hate speech (section 61 of the Human Rights Act)
- withholding consent to medical treatment such as blood transfusions in minors (section 37 of the Care of Children Act)
- female genital mutilation (section 204A(3) of the Crimes Act 1961)
- child marriage of under 16-year-olds (section 17 of the Marriage Act 1955).

<sup>66</sup> Human Rights Commission. (n.d.b). *Making a complaint*.

<sup>67</sup> Human Rights Commission. (n.d.c). *Te Tari Whakatau Take Tika Tangata | The Office of Human Rights Proceedings*.





## 4. Settings for conversion practices

An international evidence scan found that conversion practices take place in a range of settings, typically by religious people or organisations, but not exclusively.<sup>68</sup> The settings where conversion practices take place in Aotearoa New Zealand likely mirror those of elsewhere and include religious, education, healthcare, and family settings. The attitudes of general society and some religious communities in Aotearoa have shifted to become more accepting, inclusive, and celebratory of Rainbow people and their experiences. However, homophobic and transphobic views are still common, and our engagement suggests that religious communities are one of the most frequent settings for conversion practices.

Across all groups, people wanting to leave conversion practices often face a sudden absence of support networks. Intersectionality is a factor in creating higher-risk situations for those who experience multiple forms of oppression from society. Families, and faith and ethnic communities, can be particularly important sources of solidarity and support for people who experience widespread systemic and interpersonal discrimination and racism and socioeconomic marginalisation such as Māori, Pacific, minority ethnic, migrant, and refugee communities,<sup>69</sup> and disabled people. This can have serious implications for Rainbow individuals if the communities that they rely on for support, care, and a sense of belonging simultaneously become sources of harm through conversion ideologies and practices. This can diminish Rainbow people's access to other perspectives and information about diverse sexualities and gender identity and expression and increase their biases against these.

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<sup>68</sup> Jowett, A., Brady, G., Goodman, S., Pillinger, C., & Bradley, L. (2021). *Conversion therapy: An evidence assessment and qualitative study*. Government Equalities Office, United Kingdom.

<sup>69</sup> Malatest International. (2021). *Ngā take o nga wheako o te kaikiri ki ngā manene o Aotearoa | Drivers of migrant New Zealanders' experiences of racism*.

Outside family and community networks, professional support services such as mental and medical healthcare have also been settings associated with conversion practices often when a practitioner is informed by Christian principles or closely tied with communities that subscribe to conversion ideology. These can include primary healthcare, paediatrics and mental healthcare, community-based counselling, and alternative and complementary healthcare settings. Survivors reported that close-knit community dynamics undermined confidentiality and exaggerated power dynamics, allowing conversion practices to proliferate in medical settings, sometimes unrecognised.

Education and youth work settings can be settings for conversion practices, particularly those with a religious dimension. Religious or special character schools have protected status in law under Schedule 6 section 29 of the Education and Training Act 2020. This can make them settings where conversion ideology is common, whether intentional or not. The Commission has heard from survivors that conversion practices occur in some educational settings and that these are motivated by conversion ideology. It is of particular concern when conversion practices occur in settings such as these that are obliged to support the health, safety, and wellbeing of children and young people.

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## Conversion practices in the context of a settler colonial state

In describing the settings for conversion practices in Aotearoa New Zealand, its status as a settler colonial state is relevant. Historically, Indigenous communities in Aotearoa and across the Pacific embraced fluid sexual orientation and gender and used specific terms for significant spiritual and cultural roles.<sup>70</sup> The introduction of Christianity in Aotearoa by European missionaries in the 19th century brought with it concepts of binary gender, monogamy, and heteronormativity, which influenced and altered attitudes towards sexual orientation and gender that largely remain today.

As a result, Indigenous communities' traditional inclusion of diverse expressions of sexual orientation and gender fluidity was reduced. Those individuals who did not conform to new colonial interpretations of sexual orientation and gender were marginalised and stigmatised. Concepts of binary gender, monogamy, and heteronormativity – and the marginalisation of those who did not conform to them – came to underpin the social, education, and health sectors of Aotearoa.

In recent years, there has been a growing recognition and revitalisation of Indigenous perspectives on gender and sexual orientation in Aotearoa.<sup>71</sup> Efforts are being made to reclaim and celebrate the rich diversity and cultural heritage that has been suppressed or forgotten. For example, the term 'takatāpui' has been reclaimed as an inclusive and culturally specific term for Māori. It refers to individuals who embrace diverse sexual orientations, gender identities and expressions, and sex characteristics within an Indigenous Māori context. It acknowledges and affirms the unique spiritual and cultural roles these individuals embody.<sup>72</sup> See chapter 6 for more information on this.

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## Religious and faith-based settings

Conversion practices are rooted in and motivated by conversion ideology. This ideology is supported in environments where certain beliefs are taught as fact and where questioning and testing those beliefs are discouraged by people in authority. It is often present in communities that adhere to 'traditional' heteronormative gender roles and either consciously or unconsciously hold homophobic and transphobic views. While the right to freedom of religion and belief allows for people to hold such beliefs, they must take care that they do not engage in conversion practices by taking action to suppress or change someone's Rainbow identity because of those views.

Religious and faith settings can be environments that foster conversion ideology (see chapter 2). The close-knit nature of some religious communities can make it difficult for individuals to challenge or question beliefs without fear of rejection or isolation. Religious leaders are assumed spiritual authorities and can therefore influence attitudes and beliefs towards groups and individuals. This can impact the ways in which Rainbow people are perceived – positively or negatively.

Leaders in religious settings therefore play an important role in whether conversion ideology and practices are encouraged or not. Research has shown that harm to an individual associated with conversion practices is increased when the practices are suggested by a religious leader.<sup>73</sup>

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<sup>70</sup> Pihama et al., 2021.

<sup>71</sup> Re: News. (2019, December 12). *Rediscovering Aotearoa: Takatāpui | LGBTQIA+ [Video]*.

<sup>72</sup> Kerekere, E. (2017b). *Part of the whānau: The emergence of takatāpui identity – He whāriki takatāpui*.

<sup>73</sup> Fenaughty et al., 2023.



**“My understanding of the queer community, my community, grew from the aggressively heteronormative, Eurocentric, homophobic, transphobic ideologies I learned in the church. I am a takatāpui person who spent years trying to be straight without success. It was common for the pastor to pray demons out of the outwardly gay kids. I remember looking on as this was happening one time – this boy was bent over and crying as the pastor screamed for the demons to come out of him. I felt so sorry for him. I knew if I acknowledged I was takatāpui, that would be me, so I stayed right in the closet. It may as well have been my tūpāpaku though. They usually said things like, ‘His love will heal your brokenness’ (read: your orientation), ‘It’s a behaviour pattern, no one is born homosexual’, ‘People who attempt to change their gender are just confused,’ or rhetoric along those lines. We were all products of the Christian doctrine to lesser or greater degrees and understood sexual orientation in the same way as the churches we attended – ‘Being queer is a defective sexual expression, I will have grace for you and tolerate where you’re at but the end goal will always be for you to become heterosexual.’ I was told, ‘This is a consequence of acting on your attraction with that girl last week; you gave the devil a foothold and now Satan is trying to reach further into your life. When was the last time you prayed for forgiveness?’ I wanted to be straight so badly. I was at the train station one day watching the trains and thinking, ‘It would be so easy for it all to just be over.’ But I remember a high pitch whine in my ears and the chant, ‘ka mate, ka mate, ka ora, ka ora,’ from the haka reverberating through my body on repeat. My tipuna knew I was at the edge.”** Māori, takatāpui

Christian religions are common settings for conversion practices.<sup>74</sup> Conversion ideology can co-exist with a religious belief that humans are sinful and are in need of being ‘saved.’ In these contexts, there is a tendency to classify identities or experiences that differ from heterosexual or cisgender norms as deviations (or, at the more harmful end, perversions) that must be remedied.

Research suggests that, although Roman Catholic groups typically do not participate in conversion practices, they are not entirely opposed to them.<sup>75</sup> Instead, Catholic leaders recommend celibacy as the path for those with diverse sexualities. This is still, however, a form of suppression of Rainbow people and may, in some cases, constitute a conversion practice. Conversion practices are generally more commonly found in Protestant Christian settings such as Methodist traditions.<sup>76</sup>

**“I see just a trail of wreckage and broken lives as a result of the church’s attempts to suppress or change peoples’ sexual orientation.”** Pākehā, male

Although evidence about the prevalence of conversion practices in other spiritual or faith communities in Aotearoa is lacking, international evidence cites these practices occurring in Mormon, conservative Jewish, Hindu, Buddhist, and Muslim communities.<sup>77</sup>

In Aotearoa, conversion practices in faith settings take a variety of forms. In some communities, conversion practices exist in programmes that use words like ‘healing ministry,’ ‘recovery,’ ‘brokenness,’ ‘reparative therapy,’ ‘purity,’ or ‘spiritual accountability.’ These programmes have gained traction under the umbrella of public ‘ex-gay,’ ‘ex-trans,’ and ‘detransition’ movements that mostly originate in the United States.

In 2018, a study undertaken by academics at La Trobe University in Australia reported there were at least 10 organisations publicly advertising the provision of ex-gay and ex-trans therapies in Australia and New Zealand with overarching networks offering referral services to conversion practices through counselling.<sup>78</sup> Since then, conversion practices have been made unlawful in Aotearoa and the Australian states of Queensland,<sup>79</sup> Victoria,<sup>80</sup> and the Australian Capital Territory.<sup>81</sup>

<sup>74</sup> Jones, T. W., Power, J., & Jones, T. M. (2022a). Religious trauma and moral injury from LGBTQA+ conversion practices. *Social Science & Medicine*, 305, 115040.

<sup>75</sup> Jones, T., Brown, A., Carnie, L., Fletcher, G., & Leonard, W., (2018). *Preventing harm, promoting justice: Responding to LGBT conversion therapy in Australia*.

<sup>76</sup> Ibid.

<sup>77</sup> Jowett et al., 2021.

<sup>78</sup> Jones et al., 2018.

<sup>79</sup> Public Health Act 2005 (<https://www.legislation.qld.gov.au/view/html/inforce/current/act-2005-048#ch.5B>).

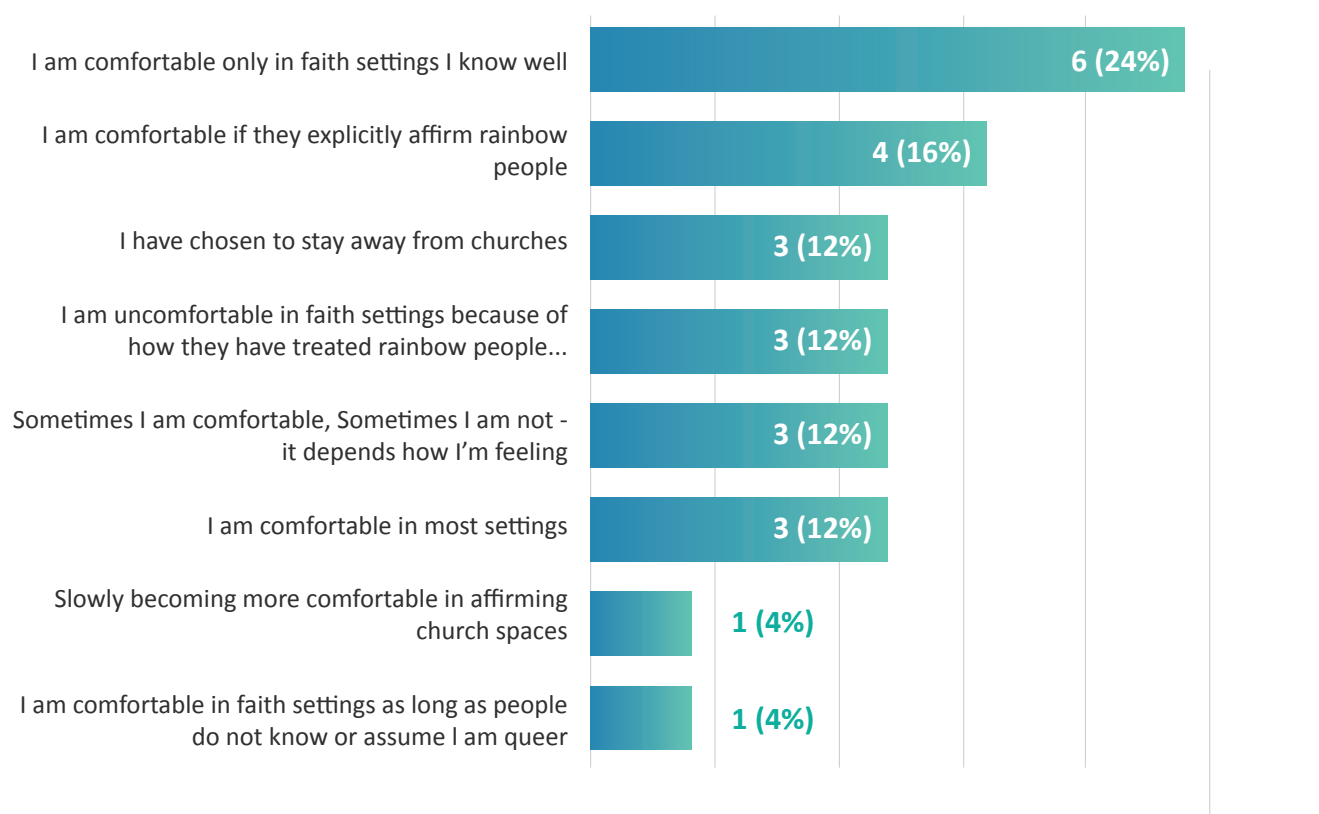
<sup>80</sup> Change or Suppression (Conversion) Practices Prohibition Act 2021 (<https://www.legislation.vic.gov.au/as-made/acts/change-or-suppression-conversion-practices-prohibition-act-2021>).

<sup>81</sup> Sexuality and Gender Identity Conversion Practices Act 2020 (<https://www.legislation.act.gov.au/a/2020-49/>).

Leaders of Exodus International, once the largest ‘ex-gay’ group in the world, have publicly denounced conversion practices, acknowledged the harm their work caused, and apologised,<sup>82</sup> as have many of their former leaders and member organisations. In doing so, they acknowledged that people could not successfully suppress or change their Rainbow identity as a result of conversion practices.

When asked what their level of comfort was in faith settings, 39 percent said they were only comfortable in faith settings they knew well or that explicitly affirmed Rainbow people. A further 31 percent said they were either uncomfortable in faith settings, have chosen to stay away, or only go into faith spaces where they can remain closeted.

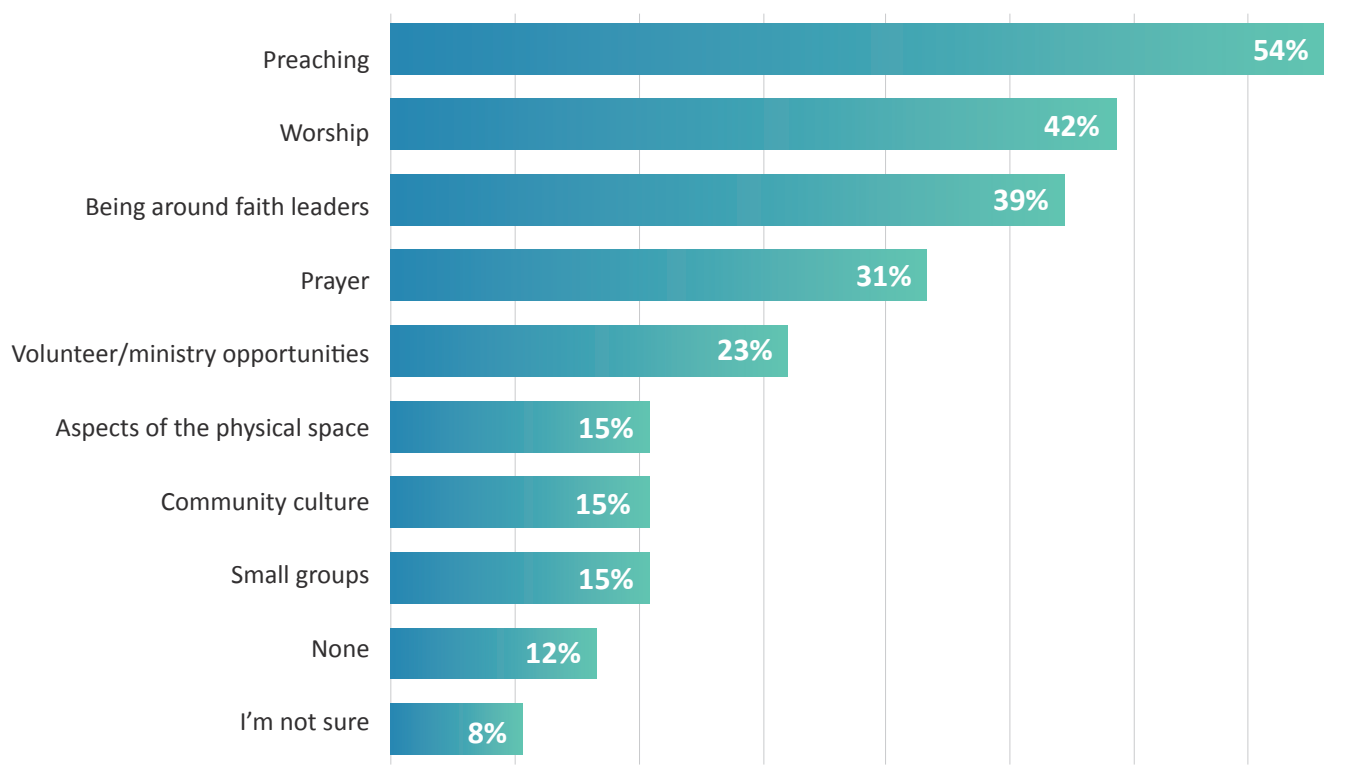
At the Awaken | Maranga Mai 2023 conference for Rainbow people of faith, the Commission ran two workshops and conducted a survey of attendees’ experiences in faith settings (see Figures 3–5).



**Figure 3:** Level of Rainbow comfort in faith settings – survey results from Awaken | Maranga Mai conference 2023.

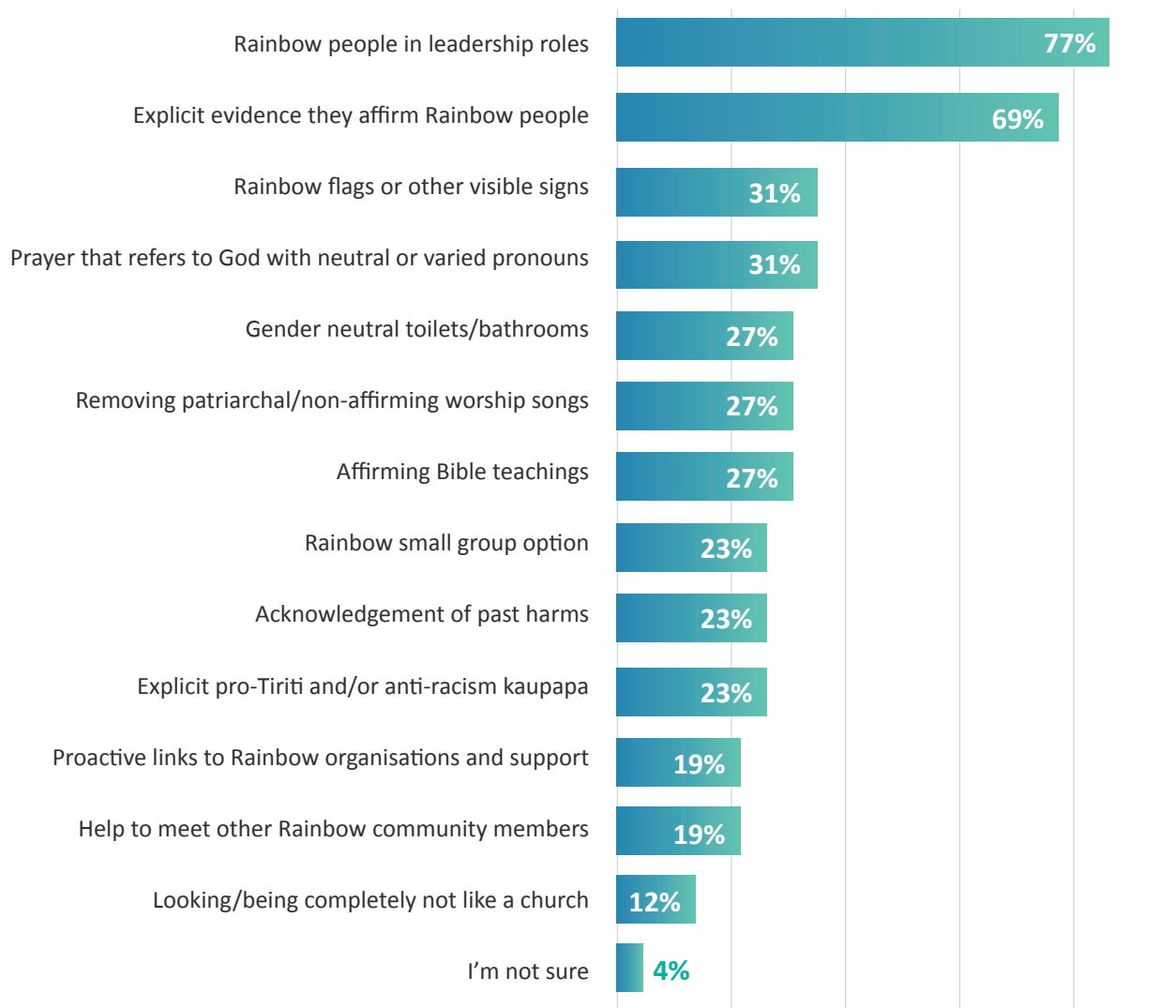
When asked which aspects of faith environments are most challenging, 54 percent of conference attendees cited preaching, 42 percent worship, and 39 percent being around faith leaders.

<sup>82</sup> Jones, T. (2013, June 21). *World's largest 'ex-gay' organisation shuts down*. The Conversation.



**Figure 4:** Aspects of faith settings that bring up bad memories – survey results from Awaken | Maranga Mai conference 2023, (up to 4 answers possible).

When asked what would help faith settings feel safer, the overwhelming response was seeing Rainbow people in leadership roles (77 percent) and seeing explicit evidence such as published statements that Rainbow people are affirmed (69 percent).



**Figure 5:** Ways to make faith settings feel safer for Rainbow people – survey results from Awaken | Maranga Mai conference 2023, (up to 5 answers possible).

Conversion practices in faith settings can also take non-obvious forms such as study groups, prayer, mentoring, or informal conversations. They can be disguised or portrayed as pastoral support. Survivor accounts suggest that, because of this, people who have experienced conversion practices in these forms may have difficulty recognising or being able to explain what has happened to them.

**“From a religious point of view, it’s mostly about encouraging people to think that God wants them to change, sort of forcing that idea on them.”** Pākehā, female

If done as part of a sustained effort and with the intention of changing or suppressing someone’s sexual orientation, gender identity, or gender expression, conduct such as sending

someone to a spiritual leader for guidance and telling them that participation in spiritual activities will ‘help their struggle’ or stop them being ‘different’ may constitute a conversion practice under the CPPLA.

It is important to eliminate conversion practices in all settings – within religious faith communities and families/whānau but also medical, health, and non-religious community/family settings. This requires strong leadership and prioritisation of education as well as deliberate efforts to authentically include Rainbow people in those communities. See recommendations 16–20 in chapter 9.

The Commission has produced guidance for those in religious settings.<sup>83</sup>

<sup>81</sup> Human Rights Commission. (2023b). *Conversion practices: Guidance for people working in religious communities*.

## Medical and healthcare services and settings

Gender-affirming healthcare is healthcare that facilitates people's abilities to "embody, express and live their gender".<sup>84</sup> Gender-affirming healthcare can include counselling, peer support, hair removal, voice therapy, puberty blockers, hormones, surgeries, or other treatments that help someone to express their gender. Non-affirming practices or services can deny an individual the true realisation or expression of their identity and therefore deny them their protected human rights.

Conversion practices in medical and healthcare settings can involve non-affirming practices directed at an individual because of their sexual orientation, gender identity, or gender expression. In relation to gender identity, these could look like:

- using shame or coercion to discourage someone from seeking gender-affirming healthcare
- expressing the belief that being transgender is an illness and suggesting counselling to 'fix it'
- creating delays to obstruct access to gender-affirming healthcare
- knowingly referring someone to a non-affirming healthcare provider.

Healthcare professionals who might practise conversion practices in these settings could have a religious motivation. It is not uncommon for individuals to be deliberately referred by someone from a community promoting conversion practices and for the healthcare practitioner offering these practices to belong to that same community.

**"I remembered being referred to a counsellor who came from the same country as I did, and I was so excited! But during the session, he asked me if I was sure I was gay and that just dismantled everything I had worked on myself up to that point ... it was because I had placed so much trust in the health system."** South

Asian, non-binary

Notably, in the context of providing gender-affirming healthcare to adults and those able to consent, the pace of healthcare provision is of particular importance. While this pace is subject to professional judgement, if healthcare provision is hindered by a belief that having a minority sexual orientation, gender identity, or gender expression is wrong and needs 'healing,' it may be a conversion practice.

The Rainbow community experiences poorer mental health outcomes (such as daily feelings of depression) compared to non-Rainbow people.<sup>85</sup> In addition, transgender, non-binary, and gender diverse people in Aotearoa are exposed to conversion practices and, as a result, may experience further harm, such as self-injury and suicidality.<sup>86</sup> We discuss this more in chapter 5.

In light of this, education about conversion practices is vital for the healthcare sector as is professional direction from governing bodies. See recommendations 21–23 in chapter 9.

Evidence shows that access to healthcare professionals who are educated about conversion practices and how they harm survivors can be key to enabling survivors to recover from the harms of conversion practices.<sup>87</sup> We know that transgender people who have supportive and affirming primary care doctors have lower psychological distress and are less likely to attempt suicide than those without this support.<sup>88</sup>

Under the Code of Health and Disability Services Consumers' Rights, clinicians in Aotearoa have a responsibility to ensure that their services are provided free from coercion (Right 2) and must minimise the potential harm to and optimise the quality of life of each patient (Right 4(4)). The Royal New Zealand College of General Practitioners has publicly condemned conversion practices<sup>89</sup> as has the Professional Association for Transgender Health Aotearoa<sup>90</sup> and other healthcare oversight bodies.

<sup>84</sup> Carroll et al., 2023.

<sup>85</sup> Stats NZ. (2022, November 9). *LGBT+ population of Aotearoa: Year ended June 2021*.

<sup>86</sup> Fenaughty et al., 2023; Veale et al., 2022.

<sup>87</sup> Jones, T. W., Jones, T. M., Power, J., Despott, N., & Pallotta-Chiarolli, M. (2021a). *Healing spiritual harms: supporting recovery from LGBTQ+ change and suppression practices*. La Trobe University.

<sup>88</sup> Trehame, G. J., Carroll, R., Tan, K. K. H., & Veale, J. (2022). Supportive interactions with primary care doctors are associated with better mental health among transgender people: Results of a nationwide survey in Aotearoa/New Zealand. *Family Practice*, 39(5), 834–842.

<sup>89</sup> Betty, B. (2021). *Conversion Practices Prohibition Bill: Submission to the Justice Select Committee*.

<sup>90</sup> Professional Association for Transgender Health Aotearoa. (2021). *Submission to the Justice Committee on the Conversion Practices Prohibition Legislation Bill*.

## Conversion practices and ira tangata (intersex people)

People born with innate variations of sex characteristics sometimes use the term ‘intersex’ to describe themselves. In te reo Māori, the term ‘ira tangata’ refers to genetics/whakapapa and person/hood, and is used for intersex people. This term acknowledges in te reo that Māori are Māori first and are not defined by any single characteristic or variation.

Ira tangata may experience medical or surgical intervention considered defensible or medically unnecessary.<sup>91</sup> These interventions are intended to ‘correct’ a variation of sex characteristics based on binary notions of sex and the idea that natural variations need ‘fixing’.<sup>92</sup>

For most variations of sex characteristics, medical intervention to create a gender conforming appearance are not medically necessary and may constitute a violation of the individual’s inherent right to bodily integrity.<sup>93</sup> Where they are not necessary for the immediate preservation of life, deferring such surgeries is necessary until the individual is old enough to understand and provide fully informed consent should they wish to do so.

The definition of conversion practices in the CPPLA does not extend to ira tangata or interventions directed at them based on their variations of sex characteristics. Amending the CPPLA to include ‘sex characteristics’ could be a useful addition to the health sector response. It would not, however, be sufficient on its own to uphold the rights of ira tangata to bodily autonomy and integrity.<sup>94</sup> Further work is required to respond to the needs of ira tangata as determined by them, including access to psychosocial support, quality information, and healthcare providers who have received education and training about intersex variations. These things can commence irrespective of an amendment to the CPPLA.

The present report reflects that the scope of the CPPLA does not extend to protection of people with innate variations of sex characteristics. See recommendation 1 in chapter 9.

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## Mental healthcare services and settings

Therapeutic health services (counselling and psychological therapy, including group, online counselling, and behavioural and psychoanalytic practices), and particularly those delivered by unregistered practitioners are common settings for conversion practices both internationally and in Aotearoa.<sup>95</sup>

Conversion practices in this setting range from blunt attempts to continue the indoctrination a person is experiencing at home or in their religious community through to the sophisticated misuse of otherwise legitimate practices such as eye movement desensitisation and reprocessing (EMDR), Gestalt therapy, or cognitive behavioural therapy. There are also pseudo-therapies unique to conversion ideology such as reparative therapy<sup>96</sup> and aversion therapy.<sup>97</sup>

**“I was completely naive. I just wanted to feel better ... I think they were trying to blow the gay out of my brain ... The psychiatrist said it would make me feel better ... But it didn’t.”** Pākehā, male

The perceived sense of authority of professionals in this sector, and the heightened vulnerability of people seeking their help, are particular risk factors. One-on-one interactions and principles of confidentiality can also allow conversion practices in mental healthcare settings to remain hidden. Professional responsibility is crucial in these settings as is clear direction from governing bodies and education for professionals. We note that not all counsellors are registered with professional bodies. See recommendations 21–23 in chapter 9.

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<sup>91</sup> Darlington Statement. (2017, March 10). *Darlington statement*. This joint statement by intersex organisations from Aotearoa and Australia calls for the immediate prohibition as a criminal act of deferrable medical interventions, including surgical and hormonal interventions, that alter the sex characteristics of infants and children without personal consent alongside other measures.

<sup>92</sup> United Nations Human Rights Office of the High Commissioner. (n.d.). *Fact sheet: Intersex*.

<sup>93</sup> Parliamentary Assembly. (2017). Resolution 2191: Promoting the human rights of and eliminating discrimination against intersex people; United Nations Human Rights Council. (2024). *Combating discrimination, violence and harmful practices against intersex persons*.

<sup>94</sup> Human Rights Commission, 2021, p. 32; Human Rights Commission. (2016). *Intersex roundtable report 2016: The practice of genital normalisation on intersex children in Aotearoa New Zealand*.

<sup>95</sup> Jones et al., 2021a.

<sup>96</sup> Although the term has come to refer generically to conversion practices, ‘reparative therapy’ was coined by Joseph Nicolosi. It concentrated on a man’s relationship with masculinity and centred on father-son relationships with the intention of ‘repairing’ a ‘misguided’ sexuality.

<sup>97</sup> Aversion therapy aims to create a negative association with an ‘undesirable’ behaviour through concurrent exposure to a stimulus and discomfort.





It is common for people to seek out conversion practices in mental healthcare settings themselves. This is especially the case when they have been immersed in environments that maintain conversion ideology and have internalised negative messages about themselves. External pressure or coercion or fear of rejection or discrimination from a social or cultural group can also lead people to seek ‘help’ through counselling to suppress or change their sexual orientation, gender identity, or gender expression.

As previously noted, the Rainbow community experiences worse mental health outcomes than the general population, with transgender, non-binary, and gender diverse people experiencing particularly negative outcomes.<sup>98</sup> People who have experienced conversion practices have often faced – or will continue to face – abusive relationships within their community, post-traumatic stress disorder, major traumatic incidents, and accumulated microtrauma. These experiences are in addition to the frequent burden of repeated negative coming out experiences.<sup>99</sup>

The negative mental health effects experienced by those belonging to a marginalised community is significantly increased when mental healthcare is driven by conversion ideology and attempts to delay the realisation of someone’s sexual orientation, gender, or gender expression.

Evidence shows that access to mental health professionals who are educated about conversion practices and how they affect survivors’ mental health is key to recovery.<sup>100</sup> Survivors of faith value mental health professionals who understand their faith goals. They say a common mistaken assumption is that a survivor will want to leave a religious community when they leave conversion practices.<sup>101</sup>

Conversion practices have been declared harmful in Aotearoa by:

- the New Zealand Psychological Society<sup>102</sup>
- the Royal Australian and New Zealand College of Psychiatrists<sup>103</sup>
- the NZ College of Clinical Psychologists<sup>104</sup>
- the New Zealand Association of Counsellors<sup>105</sup> and other clinical peak bodies.

Relevant policies and codes require practitioners in these professions to act when instances of conversion practices are identified.

The Commission has produced guidance for those working in mental healthcare settings.<sup>106</sup>

<sup>98</sup> Stats NZ, 2022.

<sup>99</sup> Jones, T., Power, J., Jones, T. W., Pallotta-Chiarolli, M., & Despott, N. (2022b). Supporting LGBTQ+ peoples’ recovery from sexual orientation and gender identity and expression change efforts. *Australian Psychologist*, 57(6), 359–372.

<sup>100</sup> Roguski, M., & Atwood, N. (2024). Conversion practices in Aotearoa New Zealand: Developing a holistic response to spiritual abuse. *PLoS ONE*, 19(5), e0302163–e0302163.

<sup>101</sup> Jones et al., 2022b.

<sup>102</sup> New Zealand Psychological Society. (n.d.b). *New Zealand Psychological Society submission to the Parliamentary Justice Select Committee – on the Conversion Practices Prohibition Legislation Bill*.

<sup>103</sup> The Royal Australian & New Zealand College of Psychiatrists, 2019.

<sup>104</sup> New Zealand College of Clinical Psychologists | Te Whare Wānanga o te Mātauranga Hinengaro, 2021.

<sup>105</sup> New Zealand Association of Counsellors, 2020.

<sup>106</sup> Human Rights Commission. (2023a). *Conversion practices: Guidance for mental healthcare professionals*.

## Youth work and education settings

In Aotearoa, many people, including Rainbow people, begin to have an awareness of their sexual orientation or gender identity while still in school.<sup>107</sup> In 2021, a study showed 73 percent of transgender and diverse gender participants had started to identify as transgender or gender diverse before the age of 14.<sup>108</sup>

The research tells us that young people in Aotearoa are still experiencing conversion practices.<sup>109</sup> Survivor accounts describe these practices occurring in some youth work organisations and educational institutions.

When done with the intention of changing or suppressing someone's sexual orientation, gender identity, or gender expression, the provision of courses, camps, discussion groups, lessons, mentoring, counselling, or specific religious practices and the denial or delay of gender-affirming healthcare can amount to conversion practices. They may constitute a criminal offence even when done in response to the wishes of parents, whānau, or caregivers.

The added complexity that comes with the impact and authority of whānau in a young person's life means youth work organisations and educational institutions must be clear on the rights of young people and how to best uphold them in this context.

In Aotearoa, religious schools, legally called state-integrated or special character schools, are governed by boards of proprietors who are responsible for protecting the special character of the school. Section 127 of the Education and Training Act affords this responsibility alongside the obligations of those same boards (and boards of all schools) to ensure that the school is a physically and emotionally safe place for all students. They are also required to give effect to the relevant student rights in the Human Rights Act, including the right to be free from discrimination based on sexual orientation and sex (including gender identity).<sup>110</sup> The right to education has also been affirmed in numerous international treaties, including the International Covenant on Economic, Social and Cultural Rights and the Convention on the Rights of the Child.

Recognising the vulnerability of young people in general, it is crucial that youth work organisations and educational institutions are equipped to provide support. They can and should serve as a source of guidance, acceptance, and understanding for these young people. Education about conversion ideology, conversion practices, and the harms associated with these is key. See recommendations 7 and 24 in chapter 9.

The Commission has produced guidance for those in youth work settings.<sup>111</sup>

<sup>107</sup> Fenaughty, J., Sutcliffe, K., Fleming, T., Ker, A., Lucassen, M., Greaves, L., & Clark, T. (2021). *Youth19: Transgender and diverse gender students*. The Youth19 Research Group.

<sup>108</sup> Ibid.

<sup>109</sup> Fenaughty et al., 2023.

<sup>110</sup> While the Human Rights Act does not explicitly include discrimination on the basis of transgender status, the Commission interprets discrimination on the grounds of sex to include transgender status. The Solicitor General has taken a similar approach (see Gwyn, 2006).

<sup>111</sup> Human Rights Commission. (2023c). *Conversion practices: Guidance for those working with rangatahi and their whānau*.



## 5. The harms of conversion practices

Conversion practices occur as part of a long life cycle of indoctrination, harm, and after-effects. This chapter contains information on the harm caused to survivors and the harm associated with whānau and community.

We note at the outset of this section that the available data and peer-reviewed evidence on the harms of conversion practices (and particularly that about suicidal thinking) do not adequately account for those who have been lost to suicide as a direct result of conversion practices.

Rainbow people experience a greater risk of mental health distress and suicide than non-Rainbow people.<sup>112</sup> There is both international and local evidence that demonstrates that exposure to conversion practices is statistically associated with poor mental health outcomes, including suicidal thoughts and suicide attempts.<sup>113</sup> With overwhelming frequency, stories from people who have lived experience of conversion practices feature accounts of suicidal ideation and suicide.

**“I was suicidal for most of 20 years. I would obsess about planning it so no one knew it was a suicide because that would just confirm for them that I was ‘demon possessed.’ There is this doctrine, particularly with ‘sexual sin,’ that once you’ve ‘given yourself over to Satan, to the lusts of the flesh,’ that it leads to death. I didn’t want to play into that. Three different times I came up with a plan and started to carry it out. I guess the good part about wanting it to look like an accident is that the process of making it look that way gave me just enough time to start to doubt that killing myself would achieve anything. I’m so glad I didn’t.”** Pākehā, male.

<sup>112</sup> Stats NZ, 2022; Mental Health Foundation of New Zealand et al. (n.d.). *Rainbow communities, mental health and addictions. A submission to the Government Inquiry into Mental Health and Addiction – Oranga Tāngata, Oranga Whānau*; Health Promotion Agency | Te Hīringa Hauora. (2019). *Wellbeing and mental health among Rainbow New Zealanders: Results from the New Zealand Mental Health Monitor*; Prakash, A. (2023). *Rainbow people: 2022 Quality of Life survey snapshot 8-city*. Research and Evaluation Unit, Auckland Council.

<sup>113</sup> Fenaughty et al., 2023; Jowett et al., 2021.

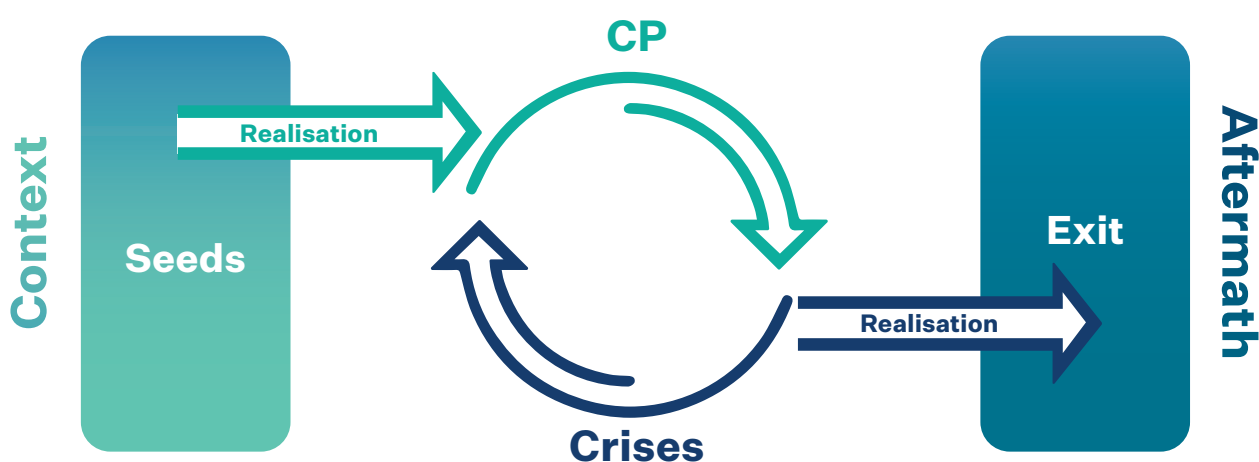
## Conversion practices inflict lifelong trauma

As already described, people vulnerable to conversion practices are usually part of indoctrinating environments that include beliefs that do not accept the full diversity of humanity. People in these environments who are heterosexual and cisgender will find themselves included within the group, while those who come to realise they are different to preferred 'norms' experience exclusion, stigma, and marginalisation.

Survivors of conversion practices tell us the harm begins when they realise they are the kind of person that is being negatively spoken about or excluded from their community. Seeds of doubt, anxiety, being 'othered', and eventually the option of engaging in conversion practices can be planted each time Rainbow people are negatively referenced. Whether initiated by the person themselves or others, conversion practices begin when efforts to suppress or try to change a person's Rainbow identity are initiated, however informal, and often continue in a cyclical fashion.

These efforts inflict harm, often prompting the individual to try to alleviate their distress. Attempts to minimise distress can include personal efforts to suppress their identity while at the same time withdrawing from those suggesting conversion practices.

Even when someone disengages from conversion practices, the internal conflict between their identity and the surrounding environment persists. It is not uncommon for people to relapse into conversion practices either because of external pressure or because they rely on the sense of belonging to a group even if this group encourages them to suppress their sexuality and/or gender identity and expression. This leads to a repetitive cycle of starting and stopping such practices, often with escalating intensity (see Figure 6).



**Figure 6:** The life cycle of repeated conversion practices until the survivor exits.

The evidence base is unequivocal – changing sexual orientation or gender identity is impossible. Any external observation that a person has become more heterosexual or cisgender or an individual has decreased their desire to express their Rainbow identity is always temporary.<sup>114</sup> There is no peer-reviewed evidence demonstrating that permanent suppression or change is possible.<sup>115</sup> It is when survivors realise the impossibility of change that they may exit conversion practices.<sup>116</sup>

**“In my years of working as a conversion therapy leader, I never met one person who could genuinely claim they had been converted to heterosexual orientation. They would all secretly admit to having lustful thoughts and use phrases like, ‘It’s a long journey’ and ‘You can’t change overnight’ and so on. And yet they would publicly proclaim freedom [from homosexuality]. Many would later ‘fall back into sin’.”** Pākehā, male.

<sup>114</sup> Przeworski, A., Peterson, E., & Piedra, A. (2021). A systematic review of the efficacy, harmful effects, and ethical issues related to sexual orientation change efforts. *Clinical Psychology: Science and Practice*, 28(1), 81–100.

<sup>115</sup> United Nations Human Rights Council, 2020; The Royal Australian & New Zealand College of Psychiatrists, 2019; American Psychological Association. (2009). *Report of the American Psychological Association Task Force on appropriate therapeutic responses to sexual orientation*.

<sup>116</sup> Przeworski et al., 2021.

**“They prayed for me and laid hands and then they sort of started casting out the demons. I’d go once a week to these meetings, and I felt optimistic at first, and I thought, ‘Oh yeah I think I am different, yeah I think it’s changing’. But after about four weeks, I was thinking, ‘Nah, actually it’s not changing that much.’ By about six weeks I thought, ‘No, this is not working, there must be something I’m missing out on here, it’s obviously not just demons.’ I think from that point on I started to look at more psychological things as being the cause of being gay.”** Pākehā, male.

An unwelcome discovery reported by many survivors is that stopping conversion practices is a lengthy and difficult process.<sup>117</sup> Survivors cannot change their family of origin, the community they come from, or their culture so they continue to face many of the same inherent tensions and discrimination after stopping conversion practices. This contributes to an often lifelong aftermath of mental, physical, and spiritual harm.

Survivors often describe life after conversion practices as living in a ‘no man’s land.’ They experience a significant lack of belonging in both their new and old communities. Some survivors find they are excluded from Rainbow communities who do not understand how they could have rejected their Rainbow identity in such an extreme way. At the same time, they are also excluded from non-Rainbow circles that do not accept their Rainbow identity. Survivors who had children in previous heterosexual relationships often experience exclusion from groups of parents as they divorce and come out as part of the Rainbow community and as newly single people with unusual histories that are often difficult for others to comprehend.

Through our engagement, we heard that the intensity of this isolation – and the perceived or actual inability to remedy it – can feel like an extension to the loss of autonomy experienced in conversion practices. This can lead to the unconscious development of antisocial behaviour patterns as the survivor tries to cope with the jarring circumstance of having little or no community of support when they need it most.

Some survivors we heard from described this as contributing to a ‘second adolescence’. This means that there is, on the one hand, a motivation to rebel against the indoctrination and control that led to their conversion practices. On the other hand, there is a desire to ‘make up for lost time’ socially, sexually, and in typical Rainbow celebrations and rites of passage.

Recent research indicates that enduring conversion practices, coupled with growing up in or spending extended time in the broader indoctrinating environment that facilitates their occurrence, can result in an underdevelopment of the kinds of social skills an individual needs to build a new community and function comfortably in their post-conversion practices environment.<sup>118</sup> The research also found that harm caused by conversion practices can become part of a survivor’s subconscious mind, leaving them stuck in a state of confusion and post-traumatic symptoms. This results in conscious and unconscious behaviours that restrict a person’s healing journey and the chance to have a more promising future away from harmful environments.<sup>119</sup>

**“I was extremely isolated when I stopped and came out. My family disowned me and my whole community – that was based in my church – cut me off too. I’d see people on the street who had been friends for years and they’d ignore me. It was made worse because old Christian friends started harassing me on my phone, email, and social media. It got to the point where I had to change my accounts and keep the new ones anonymous, locked down and private. That really hurt my ability to build new community. I found myself sitting at home completely alone thinking, ‘I’m nearly 50 years old, how is this my life?’”**

Pākehā, male

<sup>117</sup> Jones et al., 2021a.

<sup>118</sup> Roguski & Atwool, 2024.

<sup>119</sup> Ibid.



## Psychological and social impacts of conversion practices

Conversion practices cause a range of serious and long-lasting psychological harms. Drawing from published research and the Commission’s engagement with survivors, the following harms are evident.

- **Shame and guilt:** Conversion practices instil a sense of shame about a person’s sexual orientation or gender. Survivors often internalise prejudices and are made to feel their natural desires and attractions are sinful, morally wrong, or incompatible with their communities. This leads to deep-seated feelings of guilt and self-blame.<sup>120</sup>
- **Damage to identity:** An individual’s self-identity is undermined by the idea they are flawed and unacceptable. Survivors experience a loss of authenticity as they are coerced into suppressing their true selves to conform to the expectations of their whānau or community. This suppression of identity leads to confusion, a distorted sense of self, and long-term internal conflicts.<sup>121</sup>
- **Low self-esteem:** Survivors internalise negative messages about who they are at their core, leading to feelings of inadequacy, self-doubt, loss of confidence, and a diminished sense of value as a person. This is particularly harmful when these messages come from their closest communities.<sup>122</sup>
- **Loss of social support:** Due to indoctrination, people vulnerable to conversion practices are sometimes already isolated from society, diverse people, and ways of life. Survivors who leave behind conversion practices and come out as part of the Rainbow community are frequently alienated from whānau, friends, and community who do not affirm and embrace Rainbow people. This lack of support exacerbates the person’s emotional distress.<sup>123</sup>
- **Relationship and intimacy challenges:** Conversion practices disrupt an individual’s ability to form healthy relationships and experience fulfilling intimacy. Survivors struggle with trust, intimacy, sex, and emotional vulnerability because they have internalised the stigma about their sexual orientation or gender identity.<sup>124</sup>
- **Anxiety and depression:** Constant pressure to change the unchangeable leads to chronic worry, apprehension, and a sense of failure. This, combined with the self-blame and fear of rejection, leads to chronic stress and feelings of hopelessness. Studies have consistently shown a higher prevalence of depression among individuals who have experienced conversion practices. They also show the mental and physical harm from long-term exposure to stress hormones.<sup>125</sup>
- **Disordered eating and body shame:** Survivors are compelled to suppress their sexual feelings, gender, or both, leading to self-rejection. This can also contribute to disordered eating patterns. Survivors may develop unhealthy relationships with food, engage in restrictive eating or binge-eating behaviours, and experience body shame and dissatisfaction that leads to self-harm.<sup>126</sup>
- **Disembodiment and dissociation:** Conversion practices exhaust people to the point where they can present as ‘emotionally numb’ as they disconnect from their own experiences (mind and body). Survivors can also develop a dissociative response such as memory loss or a perception of reality as distorted or unreal.<sup>127</sup>

<sup>120</sup> Higbee, M., Wright, E. R., & Roemer, R. M. (2022). Conversion therapy in the southern United States: Prevalence and experiences of the survivors. *Journal of Homosexuality*, 69(4), 612–631; Chan, R. C. H., Leung, J. S. Y., & Wong, D. C. K. (2022). Experiences, motivations, and impacts of sexual orientation change efforts: Effects on sexual identity distress and mental health among sexual minorities. *Sexuality Research and Social Policy*, 19, 1534–1548; Glassgold, J. M. (2022). Research on sexual orientation change efforts: A summary. In D. C. Haldeman (Ed.), *The case against conversion “therapy”: Evidence, ethics, and alternatives* (pp. 19–50). American Psychological Association; Power, J., Jones, T. W., Jones, T., Despott, N., Pallotta-Chiarolli, M., & Anderson, J. (2022). Better understanding of the scope and nature of LGBTQ+ religious conversion practices will support recovery. *Medical Journal of Australia*, 217(3), 119–122; Jones et al., 2018, 2021a, 2022a; Flentje, A., Heck, N. C., & Cochran, B. N. (2014). Experiences of ex-gay individuals in sexual reorientation therapy: Reasons for seeking treatment, perceived helpfulness and harmfulness of treatment, and post-treatment identification. *Journal of Homosexuality*, 61(9), 1242–1268.

<sup>121</sup> Przeworski et al., 2021; Jones et al., 2018, 2022b.

<sup>122</sup> Glassgold, 2022; Jones et al., 2018, 2021a; Ryan, C., Toomey, R. B., Diaz, R. M., & Russell, S. T. (2020). Parent-initiated sexual orientation change efforts with LGBT adolescents: Implications for young adult mental health and adjustment. *Journal of Homosexuality*, 67(2), 159–173.

<sup>123</sup> Glassgold, 2022; Power et al., 2022; Jones et al., 2018, 2021a, 2022b; Salway, T., Juwono, S., Klassen, B., Ferlatte, O., Ablona, A., Pruden, H., Morgan, J., Kwag, M., Card, K., Knight, R., & Lachowsky, N. J. (2021). Experiences with sexual orientation and gender identity conversion therapy practice among sexual minority men in Canada, 2019–2020. *PLoS ONE*, 16(6), e0252539; Asia Pacific Transgender Network. (2021). *Conversion therapy practices against transgender persons in India, Indonesia, Malaysia and Sri Lanka*.

<sup>124</sup> Higbee et al., 2022; Przeworski et al., 2021; Jones et al., 2018.

<sup>125</sup> Glassgold, 2022; Przeworski et al., 2021; Chan et al., 2022; Lee, H., Operario, D., Restar, A. J., Choo, S., Kim, R., Eom, Y.-J., Yi, H., & Kim, S.-S. (2023). Gender identity change efforts are associated with depression, panic disorder, and suicide attempts in South Korean transgender adults. *Transgender Health*, 8(3), 273–281; Jones, T., Power, J., Hill, A., Despott, N., Carman, M., Jones, T. W., Anderson, A., & Bourne, A. (2021b). Religious conversion practices and LGBTQ+ youth. *Sexuality Research and Social Policy*, 19, 1155–1164; Ryan et al., 2020; Flentje et al., 2014; Jones, et al., 2021a.

<sup>126</sup> Jones et al., 2021b.

<sup>127</sup> Power et al., 2022.



- **Self-harm and non-suicidal self-injury:** Emotional distress caused by conversion practices leads to an increased risk of self-harm. This increase is on top of the already increased rates that Rainbow communities experience due to ongoing marginalisation.<sup>128</sup>
- **Suicidal thoughts and suicide attempts (suicidality):** Survivors feel overwhelmed by the internal and external pressures to change, resulting in extreme psychological pain and desperation. The distress, isolation, and internal conflict often lead to feelings of hopelessness, suicidal thoughts, suicide planning, and suicide attempts.<sup>129</sup>
- **Trauma and post-traumatic stress disorder (PTSD):** Conversion practices are traumatic. The coercive and abusive nature of them, the harm to self, and the intensity of the emotional stress constitute psychological trauma.

Some practices also include physical trauma. The effects are long-lasting and often result in PTSD manifesting as recurring intrusive thoughts, nightmares, flashbacks, hypervigilance, avoidance, memory problems, numbness, and debilitating emotional distress.<sup>130</sup>

- **Escalated levels of drug and alcohol misuse:** Trauma, isolation, identity crisis, and lack of support are all factors that can lead survivors to misuse drugs and alcohol as coping strategies.<sup>131</sup>
- **Housing instability:** Evidence shows that survivors experience homelessness and housing instability at higher rates than other groups, and this has been reported as a direct outcome of their Rainbow identity and the associated poor treatment by their communities.<sup>132</sup>

## Spiritual and physical impacts of conversion practices

Current understandings of wellbeing support the notion that acute mental distress such as that caused by conversion practices will also affect the spiritual and physical wellbeing of the person experiencing it.

Survivors of religious conversion practices often report an inability to carry on with their previous spiritual practice. These environments contain frequent triggers to the harm they experienced, especially as they usually still have non-affirming beliefs and community members. While some survivors are able

to find new Rainbow-affirming religious communities, many, including those who initially want to continue with a spiritual practice, find the triggers remain too strong and ultimately give up.

Changing or stopping spiritual practice often puts survivors at odds with whānau and community around them. This can manifest as disagreements about faith and make milestone events such as weddings, funerals, and religious holidays challenging and anxiety-inducing.

<sup>128</sup> Przeworski et al., 2021; Veale et al., 2022; Fenaughty et al., 2023; Jones et al., 2018, 2021b; Transgender Health Research Lab. (2022). *What Counting Ourselves tells us about conversion practices*; Asia Pacific Transgender Network, 2021.

<sup>129</sup> Jones et al., 2018, 2021a, 2021b; Ryan et al., 2020; Turban, J., Beckwith, N., Reisner, S., & Keuroghlian, A. (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; Asia Pacific Transgender Network, 2021; 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; Higbee et al., 2022; Chan et al., 2022; Power et al., 2022; Przeworski et al., 2021; Veale et al., 2022; Fenaughty et al., 2023; Blossnich, J. R., Henderson, E. R., Coulter, R. W. S., Goldbach, J. T. & Meyer, I. H. (2020). Sexual orientation change efforts, adverse childhood experiences, and suicide ideation and attempt among sexual minority adults, United States, 2016–2018. *American Journal of Public Health*, 110(7), 1024–1030; Transgender Health Research Lab, 2022.

<sup>130</sup> Power et al., 2022; Fenaughty et al., 2023; Jones, et al., 2021a, 2021b, 2022a; Asia Pacific Transgender Network, 2021.

<sup>131</sup> Ryan et al., 2020; Salway et al, 2021; Asia Pacific Transgender Network, 2021.

<sup>132</sup> Asia Pacific Transgender Network, 2021.

# Physical harms of conversion practices

Physical harm is also common in conversion practices, as illustrated by the following quote.

**“It was quite stressful. They would set fire to all the boys’ clothes I liked wearing. At one point, I was tied up and hung from the ceiling fan while my uncles would thrash me non-stop while I cried. My youngest uncle would be the main force behind this torture. My father and mother were away ... and this is how I would be treated at home.”** Indian, queer

Ritual self-harm is common as a form of self-administered aversion therapy (for example, snapping a rubber band on the wrist every time a Rainbow ‘thought’ comes to mind, particularly arousal). As shown above, peer-reviewed evidence shows that self-harm and non-suicidal self-injury is incredibly common among conversion practice survivors and happens at higher rates than the already high rates experienced by Rainbow people. Genital self-harm also continues to feature in survivor stories.

Additional physical harm comes from both acute and prolonged exposure to stress hormones both during and after conversion practices. This leads to a range of short-term and long-term health problems.<sup>133</sup>

We have developed a model – see Figure 7 and a more detailed version in Figure 8 – to illustrate the dimensions of harm that conversion practices cause. This model was developed over time by the team drawing on what they heard from survivors to show how pervasive the harm caused by conversion practices is. It may also provide survivors with a map for their recovery, pointing out areas that need to be built up, stabilised, instilled with healthy boundaries, reimagined, or created for the first time as they journey to wellbeing and belonging.

The model is survivor centered. Validating who someone is as a person is a key part of helping people who are experiencing conversion practices to take action to stop them. We note that this is not about encouraging people to break with their whānau or culture. Rather, it is about encouraging an individual to value themselves and take time and space to understand and embrace their identity.

We offer this as a flexible and iterative model that can be built on to include the different dimensions that support recovery from conversion practices for people from diverse communities.

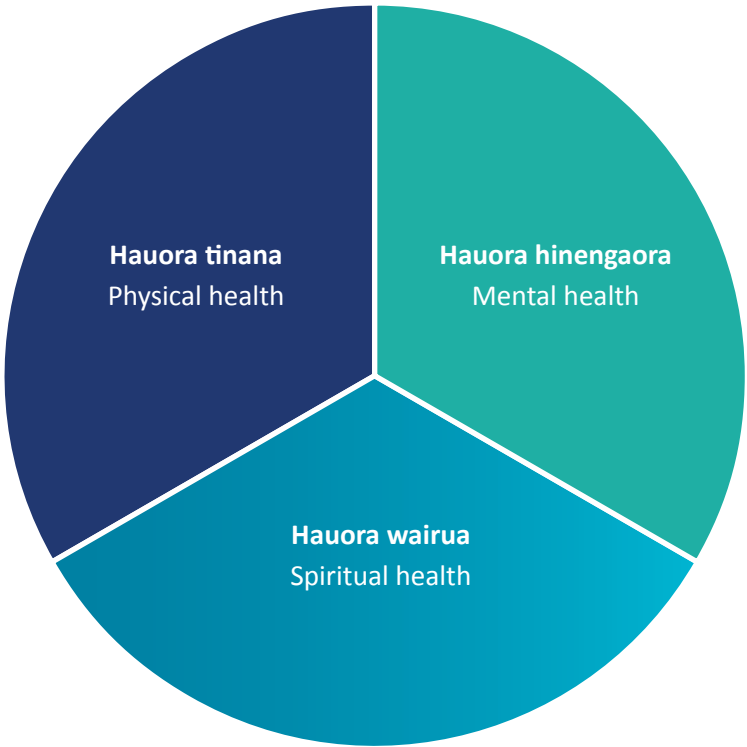


Figure 7: Model for the harm caused by conversion practices in physical, mental, and spiritual dimensions.

<sup>133</sup> Ibid.

## Harm associated with whānau and community

Evidence in Aotearoa New Zealand and internationally shows that significant harm may occur when conversion practices are suggested or carried out by family members.<sup>134</sup> A study of young people in Aotearoa undergoing conversion practices found a high percentage of those who suggested the practices were members of the young person's whānau or were spiritual leaders in their community.<sup>135</sup>

**“The most damaging, most difficult things that were done to me as a child and as a teenager in regard to changing my sexual orientation were done by people who loved me and believed they were acting in my best interest.”** Pākehā, male.

The inevitable failure of the practices eventually resulted in family rejection. Survivors were left feeling betrayed and abandoned as they were rejected and cut off by their whānau, influential leaders, and their community.

In other circumstances, where someone has sought to change their own Rainbow identity by getting advice from a community or faith leader, it is common for them to be told to keep their conversion practices and their 'struggle' secret. Survivors report being told to act publicly as heterosexual and cisgender as possible in the hope that acting that way will make becoming that more likely. When this inevitably fails and the survivor comes out to family, the revelation they have been hiding both their identity and conversion practices can be difficult for family to accept.

**“The practice was kept secret and I was advised not to speak to any of my family or friends about it. I felt very isolated during this period.”** Pākehā, male.

In other cases, it is not uncommon for parents in religious settings to support and be generally aware that their child was receiving 'help' or 'counselling' from other adults (not necessarily from a credentialed professional) for their sexual orientation and/or gender identity and expression while being oblivious to the form and content of that 'help.' Ironically, some of the pseudoscience being taught in conversion practices blames the parents for failing to help activate a cisgender or heteronormative identity for their child.

Some survivors reported initially having a healthy relationship with their parent(s), but pseudoscientific theories imposed on them during conversion practices eventually made them blame or hate their parent(s) for contributing to their 'brokenness.' This dynamic shows the authority, influence, and control that some religious leaders may exert over parents, who may place great trust in them. Such leaders may assume and expect parents to outsource the responsibility of 'teaching' corrective conversion practices to experts like themselves.<sup>136</sup>

In Aotearoa and internationally, research shows there is a correlation between experiencing conversion practices and family rejection.<sup>137</sup> Among transgender and non-binary people, those with unsupportive family environments experienced greater harm to their mental health than those with supportive family environments.<sup>138</sup> The support of an individual's family, no matter the structure, size, or definition, is essential to a sense of growth and validation.<sup>139</sup>

Harm is not only experienced by a survivor but may also be experienced by people surrounding them. International evidence documents damaged family relationships amongst the wide range of harmful effects of conversion practices.<sup>140</sup> The negative impact on whānau of such practices was also a finding from our engagement. Those we engaged with reported examples of whānau harm including:

- intimate partner relationship problems either due to sexual incompatibility or disclosure of sexual or gender identity not previously acknowledged
- strain and breakdown in immediate family relationships
- stress on children living in high-tension environments and with the effects of divorced parents
- extended family tension when some members affirm the survivor and others do not
- loss of continuity of faith practice.

**“In the church I was in I met this girl. She fell in love with me and I thought, ‘Oh, I must be getting straight’. Even though I knew I wasn’t, I thought, ‘OK, I think I can do this’. I really loved her – as a friend. So, we struggled.”** Pākehā, male

<sup>134</sup> Veale et al., 2022; Ryan et al., 2020.

<sup>135</sup> Fenaughty et al., 2023.

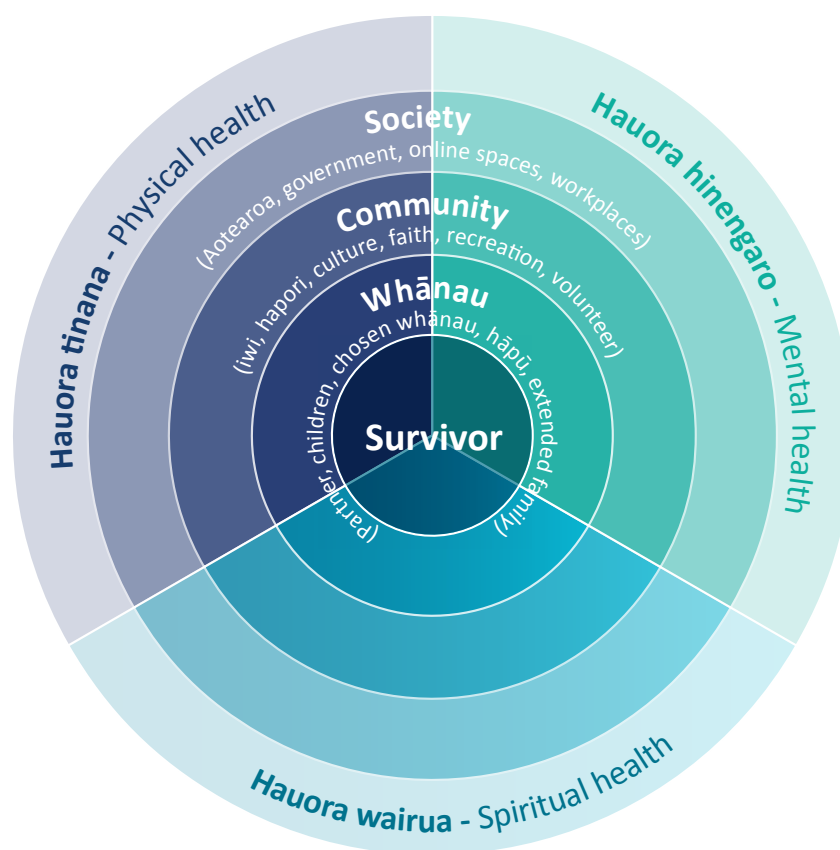
<sup>136</sup> Jowett et al., 2021. This review of the little research that has been conducted on the beliefs of conversion practitioners found that some considered Rainbow identities to be caused by 'deficient caregiver role models or childhood trauma'.

<sup>137</sup> Glassgold, J. M., & Ryan, C. (2022). The role of families in efforts to change, support, and affirm sexual orientation, gender identity, and expression in children and youth. In D. C. Haldeman (Ed.), *The case against conversion "therapy": Evidence, ethics, and alternatives* (pp. 89–107). American Psychological Association; Veale et al., 2022.

<sup>138</sup> Transgender Health Research Lab, 2022.

<sup>139</sup> Masten, A., & Shaffer, A. (2006). How families matter in child development: Reflections from research on risk and resilience. In A. Clarke-Stewart & J. Dunn (Eds.), *Families count: Effects on child and adolescent development* (pp. 5–25). Cambridge University Press.

<sup>140</sup> Jowett et al., 2021.



**Figure 8:** Model of multidimensional harms caused by conversion practices.

Beyond the survivor themselves, those we engaged with believed that harm may be experienced by their partners and any children from these relationships when they are pushed into ‘heterosexual’ marriages. Partners of the opposite sex who are either not aware they have married a closeted Rainbow person or who have been coerced into taking on the marriage may potentially experience significant harm when the survivor eventually comes out. Any children from these relationships may similarly experience harm. One participant we engaged with described the challenge of parenting while experiencing the mental health challenges he faced related to conversion practices.

**“The times of depression were dreadful and I had a lot of suicide ideation. In the middle of all that I had to pretend to be a happy husband and happy father. So, for anybody who asked, I was great, I was free from this, but of course my private life in my head was like, ‘I don’t know how I’m going to survive.’”** Pākehā, male.

Some Rainbow people may try to persist in their mixed orientation marriage, but many end in divorce.<sup>141</sup>

Community harm may also be experienced. When survivors withdraw from non-affirming groups, their contribution is lost. Survivors say it is common for them to have to leave volunteer or recreational activities. These are often tied to faith communities or contain people who do not affirm the survivor’s journey.

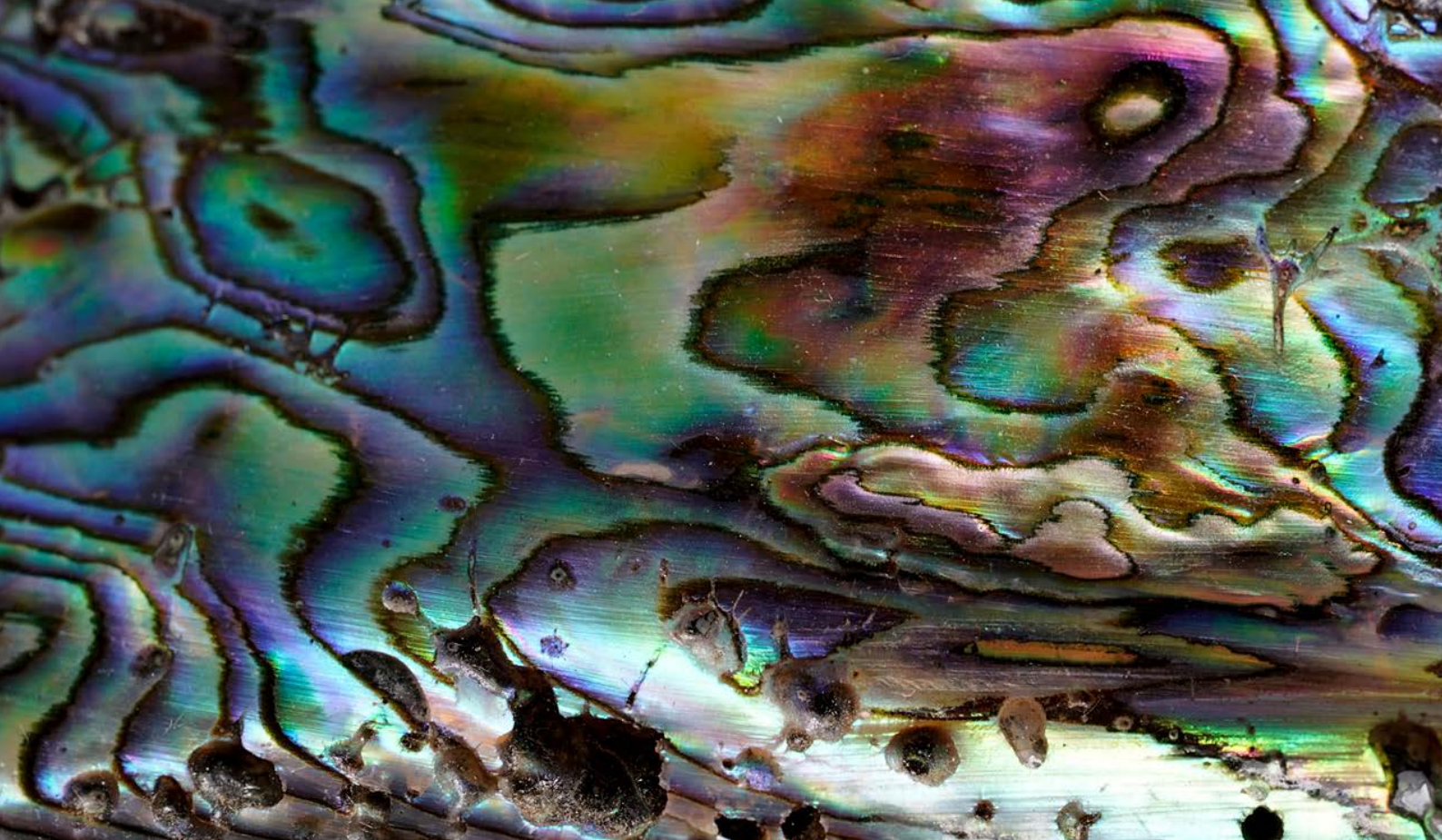
Building on the model developed in Figure 7, the team developed a multidimensional model to illustrate how the mental, physical, and spiritual harms experienced by a survivor have impacts beyond them, extending to their whānau and community (Figure 8).

The overall picture painted by both the evidence base and the survivors the Commission spoke with over the course of 18 months is one of complex, overlapping, and wide-ranging harms. Elements of spiritual, mental, and physical harm are experienced beyond the individual. Conversion practices have negatively impacted whānau, community, and Aotearoa as a whole.

As an overall picture of harm, the model at Figure 8 may be useful to survivors trying to make sense of their experiences, as well as to affirming whānau, new friends, counsellors, and others supporting the survivor to understand and recover from their complex experiences.

<sup>141</sup> Buxton, A. P. (2001). Writing our own script: How bisexual men and their heterosexual wives maintain their marriage after disclosure. *Journal of Bisexuality*, 1(2-3), 155–189; Dehlin, J. P., Galliher, R. V., Bradshaw, W. S., & Crowell, K. A. (2014). Psychosocial correlates of religious approaches to same-sex attraction: A Mormon perspective. *Journal of Gay & Lesbian Mental Health*, 18(3), 284–311; Legerski, E., Harker, A., Jepps, C., Armstrong, A., Dehlin, J. P., Troutman, K., & Galliher, R. V. (2017). Mormon mixed-orientation marriages: Variations in attitudes and experiences by sexual orientation and current relationship status. *Journal of GLBT Family Studies*, 13(2), 186–209.



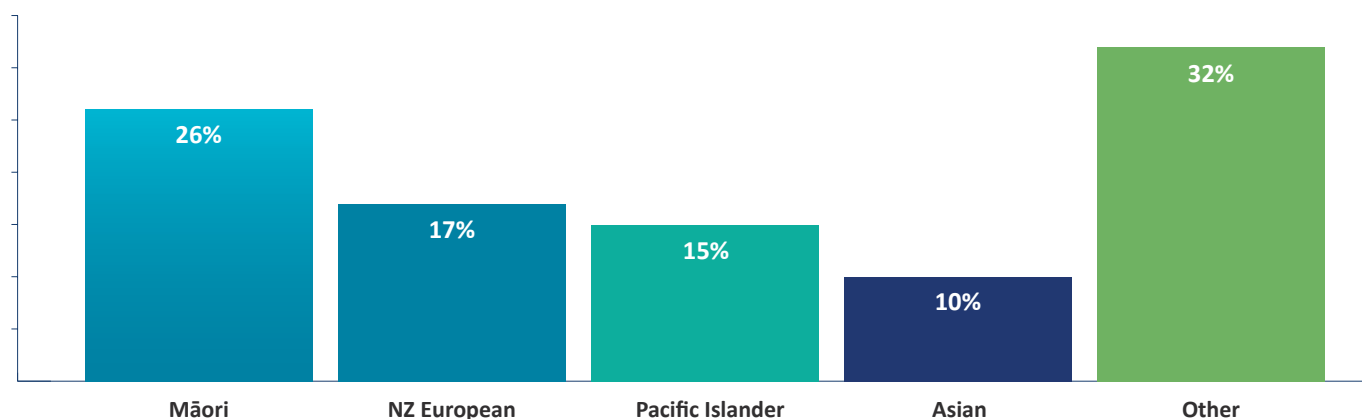


## 6. Māori experiences of conversion practices

In this section, we explore Māori experiences of conversion practices and how colonisation has affected traditional Māori values that were accepting of diverse genders and sexual orientations. The impact of conversion practices on Māori is outlined along with recommendations for how to reduce and prevent the harm they cause. We note the limited data available to get a full picture of conversion practices prevalence for Māori.

**“When I first came out, I had people picking me up from my house to take me to prayer circles. It was confusing because they were telling me to go to the healers because I was hurt. But I was hurt because I was having moral conflicts – they thought I was hurt because I had ... demons inside of me. I cared about these people a lot and so I’d go with them. I felt pretty coerced into it. What else was I going to do with these people showing up at my house? Everything felt overwhelming so I moved to a new town. But the only way I knew how to make friends was through church. So I went back to church and I went back into the closet because I wasn’t going to be able to make friends otherwise. I had people doing prayer, sending me Bible verses every day. People telling me they couldn’t be my friend any more and threatening to leave the church if I didn’t leave. It was a long process. I started going to [Rainbow-affirming] therapy and my therapist said, ‘I’m so excited for you. You’re a beautiful, charming, and intelligent person. And I’m excited for your future.’ It really stuck with me. It made me feel powerful because I felt so weak against the church for so long. I couldn’t even walk down the street because [other members of the church] would cross the road to avoid me.”** Māori, female

A 2021 study found almost 20 percent of transgender and non-binary people in Aotearoa New Zealand who had spoken to a health professional about their gender had been exposed to conversion practices.<sup>142</sup> Māori who were transgender or non-binary reported conversion practices more than people of Pākehā, Pacific and Asian ethnicities (Figure 9).



**Figure 9:** Percentage of trans and non-binary participants who experienced conversion practices by health professionals by ethnicity.<sup>143</sup> (Source Veale et al, 2022).

## Traditionally affirming views

There is limited research on traditional Māori views on gender identity and sexual orientation. However, existing evidence clearly indicates Māori traditionally accepted diverse sexual orientations, gender identities, and sex characteristics. Some kaumātua and kuia suggest homosexuality was readily accepted before colonisation.<sup>144</sup> To date, there is no evidence of conversion practices in traditional Māori views.

Pre-European acceptance of tīpuna with fluid genders and/or sexual orientations are depicted in different mōteatea, waiata, karakia, and whakairo.<sup>145</sup> For example, a Ngāti Tūwharetoa waiata tangi laments the death of a warrior chief and alludes to him having sex with both women and men.<sup>146</sup>

The term ‘takatāpui’ has been used for several centuries. It has been connected to iwi around Rotorua and in the Wairarapa.<sup>147</sup> Te Arawa leader Te Rangikaheke wrote of Tūtanekai and Tiki, his hoa takatāpui with whom he shared an “intimate friendship and pledging of love”.<sup>148</sup> The traditional term has now been reclaimed and expanded from its original meaning, which was ‘intimate companion of the same sex’. It is used by some Māori who identify as Rainbow and provides spiritual connection to takatāpui ancestors<sup>149</sup> and traditional collective values of Māori

society.<sup>150</sup> After being forced to conform to European views on gender, sexual orientation, and culture, some Māori have reclaimed a takatāpui identity.

Whakapapa is of paramount importance in te ao Māori. With a literal meaning of ‘to place in layers’, whakapapa describes relationships with the past, present, and future and with land, people, and wairuatanga or spirituality. Inherent in whakapapa is mana, which is the delegated authority or power of ngā atua (the gods). The dynamic between whakapapa and mana is likely the reason for the acceptance of takatāpui. Rejection of takatāpui whānau would undermine relationships and go against concepts of manaaki and tiaki where support and protection of whānau is a priority.

Some iwi, hapū, and whānau are already open and affirming of their takatāpui and Rainbow whānau. However, there is no general consensus on gender, sex, and sexual orientation amongst all iwi, hapū, or whānau. For example, there are many complex and varying opinions within te ao Māori about gender-based roles on marae and within practices that are tapu or deal with other realms. Inclusion of takatāpui and Māori Rainbow people differs across the country.

<sup>142</sup> Veale et al., 2022.

<sup>143</sup> Ibid., p. 4.

<sup>144</sup> Richardson, I. L. M. (1988). *The April Report: Report of The Royal Commission on Social Policy | Te Kōmihana a te Karauna mō ngā Āhuatanga-ā-iwi* (vol. 3, pt 2). The Royal Commission on Social Policy.

<sup>145</sup> Kerekere, 2017a.

<sup>146</sup> Pihama et al., 2020.

<sup>147</sup> Kerekere, 2017a.

<sup>148</sup> Pihama et al., 2020.

<sup>149</sup> Kerekere, 2017a.

<sup>150</sup> Pihama et al., 2020.



## Colonisation and the influence of missionaries

Many Māori carry intergenerational trauma from colonisation; the influence of missionaries; racism; and the loss of land, culture, and identity. Understanding the role of colonisation in stigmatising takatāpui and Māori Rainbow identities is important in understanding how to stop conversion practices.

From the 19th century when Aotearoa New Zealand was colonised, ideologies that would now be recognised as homophobic, biphobic, and transphobic were imported. Early missionaries were influential in teaching Māori these concepts, which were based in their understandings of Christian teachings. Imposing a European world view and undermining traditional Māori concepts, including those concerning gender and sexuality, was a consequence of the Crown's assumption of sovereignty. Through the English Laws Act 1858, New Zealand inherited all English laws as of 14 January 1840. This included the criminalisation of homosexuality in Aotearoa, which was illegal under British law at the time.<sup>149</sup> It began the systemic destruction of Māori views on gender and sexual orientation by making male homosexuality illegal and criminalising gender non-conformity.<sup>152</sup>

Progressive steps have been made from the 1980s onwards, including the decriminalisation of male homosexuality, the legalisation of marriage equality, and in 2022, the prohibition of conversion practices. These measures have contributed to undoing some of the harms of imposed colonial laws. Despite this progress, however, takatāpui and Rainbow Māori are still dealing with the impact that settler and missionary views have had on attitudes towards gender and sexual orientation.

For Māori, conversion practices are a product and a continuation of colonisation. They suppress traditional Māori identities, perspectives, and power through imposing European values and religious superiority. This external pressure for suppression of identity has been internalised by many takatāpui and Rainbow Māori.

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## Conversion practices and the destruction of whānau structures and culture

Conversion practices can result in the exclusion of takatāpui from their whānau. For some takatāpui, this can cause them to lose access to language and culture. This is especially true for those who live away from their whānau or hapū. The idea that stigma and discrimination only affect the individual and not their whānau undermines core collective Māori values and principles and makes it difficult to deal with whānau feelings of:

- shock, embarrassment, and denial
- fear for their child's safety
- inner conflict
- grief from the loss of the vision they had for their child's future
- worry that they will have lost a child if the child goes through a gender transition.<sup>153</sup>

**“It’s really triggering. Very, very difficult to talk about. Been really, really anxious to even think about it.”** Māori, male (describing his conversion practices experiences)

Takatāpui and Māori Rainbow family structures are also susceptible to stigma and harm. Parents of takatāpui children reported that they face challenges associated with racism, homophobia, and transphobia when raising their children. They are subjected to threats to the custody of their children, rejection by whānau members and others, and having their rights questioned due to their children's Rainbow and takatāpui identities.<sup>154</sup>

In addition to direct violence and discrimination towards takatāpui and Rainbow Māori, historical and intergenerational impacts of colonisation can include:<sup>155</sup>

- internalising conversion ideology<sup>156</sup>
- multifaceted marginalisation, for example, being excluded from Rainbow spaces because of racism and being excluded from cultural spaces because of their sexual orientation and gender identity<sup>157</sup>
- being judged by other Māori for not being raised in or confident in traditional cultural practices
- fears and distrust of government due to historical and current injustices

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<sup>151</sup> Laurie, A. J. (2018). *Lesbian lives*. Te Ara – the Encyclopedia of New Zealand.

<sup>152</sup> NZ Truth. (1929, May 9). *Man with female mentality*.

<sup>153</sup> Pihama et al., 2020.

<sup>154</sup> Ibid.

<sup>155</sup> Tangata Whenua Caucus of the National Anti-Racism Taskforce & Ahi Kaa. (2022). *Maranga Mai!: The dynamics and impacts of white supremacy, racism, and colonisation upon Tangata Whenua in Aotearoa New Zealand*. Human Rights Commission.

<sup>156</sup> Veale et al., 2022.

<sup>157</sup> Pihama et al., 2020.

A 2023 report from The Disinformation Project focused on trends in disinformation targeting trans people in Aotearoa.<sup>158</sup> The report found that hatred towards transgender people in Aotearoa increased significantly in 2023 on social media. Their research found that this timing coincided with an increase in sharing of international far right and explicitly neo-Nazi content in Aotearoa. Furthermore, white nationalist groups

and individuals based in Aotearoa were more active on social media over the same period. The research demonstrates that anti-trans content was used successfully as a bridge between different disinformation networks. This ‘bridging’ between extremist ideas is concerning as it enables the dissemination of further harmful ideologies.

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## What the data tell us about Māori experiences of conversion practices

Approximately 5 percent of Māori aged 18 or over identify as Rainbow in Aotearoa.<sup>159</sup> A 2020 study reported that 45 percent of takatāpui and Rainbow Māori participants were out or were only sometimes out in their day-to-day lives.<sup>160</sup> The most common reasons for this were:

- fear of discrimination
- fear of rejection
- encountering homophobia
- fear for safety.

Almost half (49 percent) reported they had experienced violence or the threat of violence because of their takatāpui or Māori Rainbow identity.<sup>161</sup>

The Youth19 survey of 7891 young people showed that takatāpui and Rainbow rangatahi experienced housing instability, food insecurity, forgone healthcare, symptoms of depression, and serious thoughts of suicide.<sup>162</sup>

The 2020 Rangatahi Suicide Report found that 4 percent of suicides from 2012 to 2016 amongst Māori aged 20–24 were people who identified as takatāpui or Māori Rainbow (where the data on sexual orientation and/or gender identity were available). This same report estimates that, from 2007 to 2011, issues surrounding sexual orientation played a role in about 7 percent of rangatahi Māori suicides. The report mentions that LGBTI stigma and related bullying were particularly difficult for Māori males who had died by suicide.<sup>163</sup>

In a study of young Māori and Pacific adults aged 18–25 in Aotearoa, participants who felt that they had less family support were more likely to consider suicide. Furthermore, Rainbow young adults reported statistically significant lower family support than non-Rainbow respondents.<sup>164</sup> Although these statistics are not specific to conversion practices, they point to the serious implications for young Rainbow people when they are not accepted and supported by their families.

Another study on young people’s experiences of conversion practices relating to gender and sexual orientation found 3 percent of Māori participants had experienced conversion practices. A further 4 percent of all respondents preferred not to say or found the question too upsetting to answer.<sup>165</sup> Another study on transgender and non-binary people showed 29 percent of Māori participants had experienced conversion practices from a health provider.<sup>166</sup> As noted earlier in this report, conversion practices, including suggestion of conversion practices by whānau or family, increases the risk of harm.

There are no studies with a clear breakdown of where and in what ways Māori experience conversion practices. However, through media accounts and from 18 months of engaging with survivors, the Commission has gained an understanding of some common experiences. The following quote captures the experience of a Māori, non-binary person who describes conversion practices in a religious setting, through a psychologist associated with their church.

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<sup>158</sup> Hattotuwa et al., 2023.

<sup>159</sup> Stats NZ, 2022.

<sup>160</sup> A Rainbow person is considered out when they have told people about their Rainbow identity. Not everyone comes out, and some of those who do come out do so only selectively.

<sup>161</sup> Pihama et al., 2020.

<sup>162</sup> Clark, T., Fenaughty, J., Fleming, T., Greaves, L., Roy, R., & Sutcliffe, K. (2021b). *A Youth19 brief: Rainbow rangatahi Māori*. The Youth19 Research Group.

<sup>163</sup> Child and Youth Mortality Review Committee & Suicide Mortality Review Committee. (2020). *Rangatahi suicide report | Te pūrongo mō te mate whakamomori o te rangatahi*. Health Quality & Safety Commission.

<sup>164</sup> King-Finau, T. (2020). *It takes a village: The role of familial support on suicidal ideation in young rainbow (LGBTQIA+) Māori and Pasifika adults* [Honours thesis, University of Otago].

<sup>165</sup> Fenaughty et al., 2023.

<sup>166</sup> Veale et al., 2022.

**“They told me marriage is, you know, husband and wife, and your sole purpose is to have a family. When you hear your uncles and aunties talking about queerness as being a bad thing, you know, ‘Don’t be a sissy,’ obviously I had to hold myself in. I got married to my best friend at the time. I tried to do everything the right way until I came out at 30 – I was outed at 30 actually. That potentially meant losing the relationship with my children, and that harrowing thought of losing friends and family, the loss of a whole lifestyle which I’d lived since the day I was born. I was really scared of losing all of that. When I was trying to make things work so that this didn’t happen, I sought proactively the help of church leaders. Church leaders put me in touch with a church counsellor, a member of the church who practiced psychology, I think. I would have sessions and talk through things. That whole idea of, you have a thought about homosexuality, read a scripture, that will distract you and you’ll be OK. I think it would have been about six years [after I stopped conversion practices] until I realised what had happened. I didn’t talk about it really, with anyone, not even with my husband. But it was always sort of in the back of my head, right. I realised [doing conversion practices] wasn’t a free choice. I felt the pressure of needing to do that. My children are everything. I did not want to lose access or the privilege of having them in my life. So that was a real aha! moment because I carried this incredible guilt my whole life [from doing that to myself] but, I didn’t have a choice. I didn’t have a choice.”** Māori, non-binary

Media articles,<sup>167</sup> public submissions to the Justice Select Committee,<sup>168</sup> and documentaries<sup>169</sup> on conversion practices highlight many stories of Māori survivor experiences particularly stemming from their involvement in religious spaces. The experiences include:

- being ex-communicated
- being sent to ‘spiritual healers’
- exorcisms
- formal conversion practices through courses
- talk ‘therapies’
- significant pressure from whānau to conform.

**“The leaders of my church said that you need to see a counsellor. They gave me this book and I tell you when I read that book it made me hate myself, hate my upbringing, hate everything about me.”** Māori, male

The Commission also heard from Māori survivors who were not religious but whose families physically abused them and forced them to conform to their sex assigned at birth.

Survivors spoke about different motivations for engaging with conversion practices. One survivor described voluntarily engaging in the practices so that they could “fully participate in the church”. Others feared losing whānau or family relationships if they did not participate. Like survivors from other ethnicities, Māori survivors had differing feelings about publicising their experience after leaving the practices. One survivor wanted “people to recognise that a cult put [them] through evil shit.” Another preferred to not explicitly call out those who had put them through conversion practices.

<sup>167</sup> Johnsen, M. (2021, March 8). *Conversion therapy ban petition: Takatāpui ‘inherent to our culture’*; Te Karere TVNZ. (2021). *Conversion therapy survivor can’t wait for it to be banned* [Video]; Allan, K. (2022, February 19). *Kiri Allan: My conversion therapy story*; Ling, J. (2023, March 26). *Trans woman’s experience of 17 years of conversion therapy at controversial Far North school and church*.

<sup>168</sup> Sykes, R. (2021, November 6). *My oral submission to the Justice Committee on the Conversion Practices Prohibition Legislation Bill* [Video].

<sup>169</sup> Pooley, L. (Producer). (2022). *Beyond conversion* [Documentary]. Irirangi Te Moto | New Zealand on Air and TVNZ; Koloamatangi, A. W. (Host). (2022, June 9). *Queer and here* (Episode 4) [TV series episode]. Whakaata Māori.



## Preventing conversion practices and affirming takatāpui and Rainbow Māori

Takatāpui and Rainbow Māori have been – and continue to be – leaders in queer advocacy and activism in Aotearoa. Ngāhuia te Awekōtuku, Carmen Rupe, Georgina Beyer, Mama Tere Strickland, and Chrissy Witoko played vital roles in progressing Rainbow and takatāpui rights, safety, and community. Preventing conversion practices for Māori relies on understanding where the underlying conversion ideology has come from and how it has become entrenched. The overarching approach to addressing conversion practices for Māori needs to focus on restoring tino rangatiratanga.

Māori require the autonomy, authority, and space to rediscover and build on their own inclusive views of gender and sexual orientation. Iwi and hapū who have not yet discussed these topics may choose to use this opportunity to have conversations within their hapū and whānau about what inclusion and affirmation looks like. They may also wish to discuss how to bring survivors back into the communities from which they have been excluded in the past.

Prevention could be supported through Māori-led education about the traditional acceptance of diverse Māori identities within whānau and hapū and how these views were suppressed by colonisation. Giving a platform to stories about takatāpui and Māori Rainbow people throughout history may strengthen contemporary Māori views of gender, sex, and sexual orientation.

The burden of preventing conversion practices should not lie with Māori alone. The Government has a responsibility to understand, acknowledge, and address the harm caused by the systemic destruction of tino rangatiratanga, including on gender and sexuality. This engages a number of human rights and Tiriti responsibilities for the Government, including providing appropriate mental health support for takatāpui and Māori Rainbow survivors. See recommendations 2, and 25–28 in chapter 9.





## 7. Highlighting experiences of conversion practices in under-represented communities

The existing international evidence base largely documents the experiences of these in Christian settings and in relation to sexual orientation.<sup>170</sup> More information is needed on conversion practices experienced by minority ethnic groups and those from non-Christian faiths; as well as on the experiences of transgender and non-binary, and disabled survivors of conversion practices. In some cases, some groups who have received less attention may well be experiencing more severe and/or higher rates of these practices. Recent research focused on young people in Aotearoa found that those identifying as transgender, non-binary, or unsure of their gender reported higher rates of conversion practices than cisgender Rainbow young people.<sup>171</sup> A 2022 Australian study found that participants from minority ethnic and religious backgrounds were more likely than white Christian participants to report experiencing “explicitly coercive versions of conversion practices” and, in some cases, more severe versions of the practices.<sup>172</sup>

Given this lack of evidence base, this report has placed emphasis on gathering available evidence from research and engagement relating to the experience of conversion practices amongst groups for whom less is known. This chapter and the previous one centre on Māori, Pacific, and minority ethnic and religious; trans, non-binary people; and, to a limited extent, disabled experiences by highlighting available data and, where possible, survivor experiences. Of course, these experiences are cross-cutting. For example, some of the trans and non-binary survivors we spoke with identified as belonging to minority ethnic communities. Some, but not all, of the minority ethnic people we engaged with experienced their conversion practices in Christian religious settings. In this chapter, we begin to explore the complexities inherent when a person has multiple overlapping marginalised identities. Please note, we include in this section some reference to practices that may not necessarily meet the legal threshold of unlawful conversion practices, particularly if they are not carried out in a sustained manner.

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<sup>170</sup> Jowett et al., 2021.

<sup>171</sup> Fenaughty et al., 2023.

<sup>172</sup> Jones et al., 2022a.

## Pacific Peoples’ experiences of conversion practices

This section looks at the experiences of MVPFAFF+ and Pacific Rainbow people with conversion practices. As in the previous section, we note the limited data available to provide a full picture of these experiences.

### The diverse diaspora and homeland connections

Pacific peoples have a long history in Aotearoa of shared kinship to Māori. The relationship between Pacific peoples and Māori is sometimes characterised as a tuakana-teina relationship.<sup>173</sup> Pacific migration to Aotearoa is largely associated with waves of migration in the 1960s and 1970s.<sup>174</sup>

However, smaller pockets of migration happened before then, and relationships between Aotearoa and many Pacific countries remain strong.

Based on Census 2018 data, the Pacific population in Aotearoa is made up of those from the Pacific homelands represented in Figure 10. Census 2023 data show that the number of Pacific peoples increased their proportion of the total population to 8.9 percent, up from 8.1 percent in 2018 and 7.4 percent in 2013.<sup>175</sup>

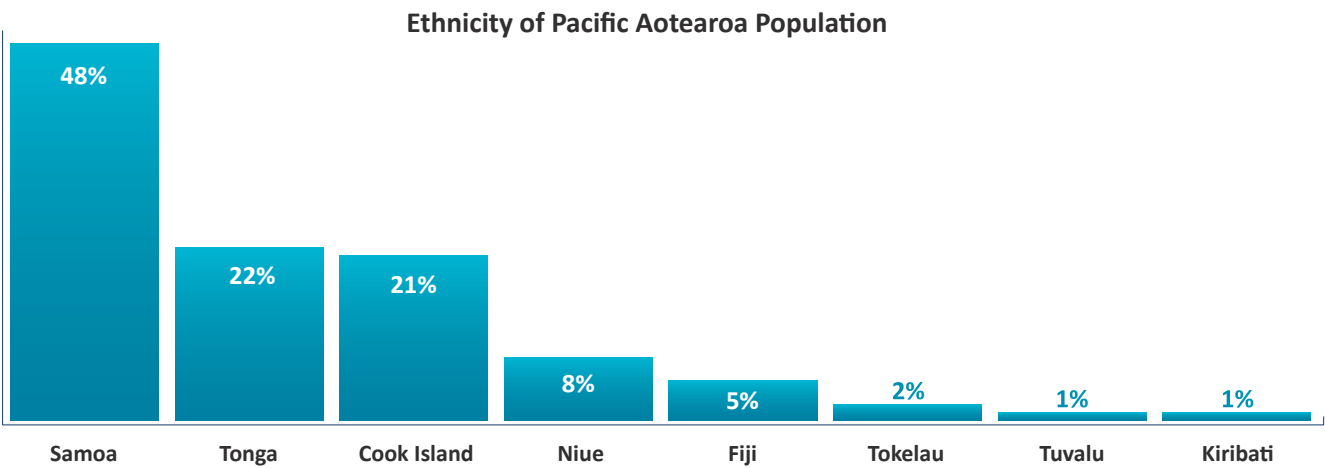


Figure 10: Ethnicity of Pacific population in Aotearoa. (Source: Stats NZ, 2018)<sup>176</sup>

While Pacific countries hold similar cultural values, each has their own understanding of gender and sexual orientation. Early understandings of gender and sexual orientation in many Pacific countries were accepting, and in some instances, people with diverse Rainbow identities were revered and given special roles in society.<sup>177</sup> To date, there is no evidence of conversion practices in early Pacific societies and world views.

For example, a New Zealand historian describes a young wakawawine (meaning ‘like a woman’) Pukapukan in 1938 who was able to go between doing ‘men’s work’ and ‘women’s work’ without comment.<sup>178</sup> This was despite the London Missionary Society arriving in the island over 80 years earlier in 1857.<sup>179</sup>

In 2021, Stats NZ data estimated approximately 5.7 percent of Rainbow people in Aotearoa over the age of 18 were Pacific peoples.<sup>180</sup> There are an estimated 1,300 Pacific transgender or non-binary people over the age of 18 and a further 8,700 people over the age of 18 who are of a sexual minority.

<sup>173</sup> Abbot, K. (2022). Tuākana/tēina relational responsibilities of Pacific tauwi to Māori and te Tiriti o Waitangi [Master’s thesis, Victoria University of Wellington].

<sup>174</sup> Malatest International, 2021.

<sup>175</sup> Stats NZ. (2024, May 29). 2023 Census population counts (by ethnic group, age, and Māori descent) and dwelling counts.

<sup>176</sup> Stats NZ. (n.d.). Pacific Peoples ethnic group.

<sup>177</sup> Lim-Bunnin, L. (2020). “And every word a lie”: Samoan gender-divergent communities, language and epistemic violence. *Women’s Studies Journal*, 34(1/2), 76–91.

<sup>178</sup> Murray, S. O. (2002). *Pacific homosexualities*. Writers Club Press.

<sup>179</sup> Beckett, J. (1964). Social change in Pukapuka. *The Journal of the Polynesian Society*, 73(4), 411–430.

<sup>180</sup> Stats NZ, 2022.



## Colonisation and influence of missionaries

The link between colonialism, Christianity, and culture in the Pacific has long been discussed.<sup>181</sup> There were many parallels between Christianity and the respective and diverse Pacific cultures that enabled an effective missionisation campaign across the South Pacific.<sup>182</sup> These parallels include the familiarity of hierarchical leadership structures, the appeal of political power, or, at the other end, egalitarianism. The influence of Christianity eventually usurped or at least reshaped Indigenous spirituality, matriarchal systems, and social norms, which has led today to the Christianisation of most Pacific nations.<sup>183</sup> When Christianity spread through the region replacing traditional religions, it was modified by Pacific peoples in various localities, resulting in a range of ways in which Christianity was integrated into Pacific cultures.<sup>184</sup>

As Pacific countries gained independence, their leadership leaned heavily on their interpretations of Christianity in the forging of their political cultures.<sup>185</sup> While some Pacific countries have maintained or revitalised varying levels of acceptance of Indigenous genders and sexualities, traditional accepting and inclusive views of MVPFAFF+ people have been mainly replaced with religious-based judgement. A conservative Christian morality has informed the introduction of anti-gay legislation. Gay sex and marriage equality are still illegal in most Pacific countries. The underlying values of these laws are often strongly held amongst Pacific peoples here in Aotearoa, although, as with any community, there remains a diversity of views.

Today, Pacific Church historians observe a new wave of changes in religious affiliation in the region, including amongst Pacific peoples in Aotearoa.<sup>186</sup> In particular, there is a rise in prominence of “increasingly complex networks of transnational networks of Pentecostal, charismatic, evangelical groups and churches that form together a renewal movement where flows of people, money, ideas and images spread with growing speed and intensity.”<sup>187</sup> Due to the strong transnational ties between Pacific diasporic populations around the world and their home countries, attitudes and forms of religious fundamentalism can circulate back and forth between Aotearoa and the Pacific countries.

This movement between countries tends to reinforce the fundamentalism first introduced via colonisation and the influence of missionaries.

**“Homophobia in Pacific island nations can ultimately be traced back to our colonial history. Sadly, our leaders, whether by design or default, continue to entrench discrimination against LGBTIQ+ people. Lines between church and culture have converged into a set of untouchable rules and assumptions. Pacific diasporas in Australia or New Zealand cannot decipher where today’s accepted norms originated from and why. Tragically, a strain of fundamentalism has hijacked Pacific cultures and Christianity, in a manner that exhibits united disgust of all things gay.”**

Samoan, male

The suppression of MVPFAFF+ identities was likely also reinforced for many migrants from the Pacific on arrival in Aotearoa when they met additional layers of racism stemming from colonisation. Pacific survivors of conversion practices noted the dynamic that exists between Aotearoa and Pacific nations as one that can be filled with conflict and entrenched fundamentalism.

<sup>181</sup> Fountain, P., & Troughton, G. (2019) Christianity and development in the Pacific: An introduction. *Sites: A Journal of Social Anthropology and Cultural Studies*, 16(1).

<sup>182</sup> Ernst, M. (2012). Changing Christianity in Oceania: A regional overview. *Archives de Sciences Sociales des Religions*, 157 (Janvier-Mars), 29–45.

<sup>183</sup> Thomsen, P. S. (2016, October 26). ‘Hobgoblin’ logic on Pacific gay rights has distinctly Western roots.

<sup>184</sup> Ernst, 2012.

<sup>185</sup> Ibid.

<sup>186</sup> Ibid.

<sup>187</sup> Ibid., p. 31.



## The role of the church in contemporary Pacific communities

Pacific churches in Aotearoa play a significant role in supporting Pacific migrants to New Zealand to settle and also to maintain transnational ties with their home countries.<sup>188</sup>

In total, 79 percent of the Pacific population in Aotearoa identifies with at least one religion compared to just 42 percent for the total New Zealand population.<sup>189</sup> Most Pacific peoples are Christian, with Catholic, Presbyterian, and Methodist being the most common denominations.

A 2016 report from the Ministry for Pacific Peoples notes a positive link between being able to speak Pacific languages and attending church.<sup>190</sup> This supports the notion that expression of culture and religion are deeply connected within Pacific communities in Aotearoa.

Pacific survivors pointed to a loss of respect for Indigenous culture and knowledge that included inclusive concepts of sexuality and gender. Instead, they felt conversion practices and religious ideology brainwashed them to prefer rigid sexual frameworks, derivative of colonisation and white supremacy. To explain further, in some conservative religious settings, some non-white cultural practices can be seen as being analogous to paganism and therefore antithetical to Western Christianity, which is largely based on Eurocentric concepts.

Religious Eurocentrism is most evident in debates about sexuality or marriage equality, which can cause Pacific political leaders to reject acceptance by claiming their nations are Christian countries.<sup>191</sup> Between 2018 and 2022, there were high-profile cases where Pacific rugby union and league players came under the spotlight for citing religious reasons for why they do not affirm homosexuality.<sup>192</sup> The public interventions of these high-profile figures led to divisive debates in wider society that have also been replicated in Pacific settings. While many Pacific voices, including some religious leaders, have spoken out for inclusion, the most dominant and publicised voices remain those of Pacific religious leaders who support these athletes' views and positions. Traditional and biblical teachings are cited as their motivation.

Unfortunately, these actions send the signal to Pacific Rainbow communities that they do not belong and that their sexuality, gender identity, or gender expression are incompatible with culture and religion. This is a recurring and contemporary example of how conversion ideology manifests itself in Pacific contexts.

<sup>188</sup> Fer, Y., & Malogne-Fer, G. (2014). Protestantism among Pacific peoples in New Zealand: Mobility, cultural identifications, and generational shifts. In E. Hermann, W. Kempf, & T. Meijl (Eds.), *Belonging in Oceania: Movement, place-making and multiple identifications* (pp. 142–163). Berghahn Books.

<sup>189</sup> Ministry for Pacific Peoples. (2016). *Contemporary Pacific status report: A snapshot of Pacific peoples in New Zealand*.

<sup>190</sup> Ibid.

<sup>191</sup> Curtis, J., Dickson, A., Gadd, E., Robinson, T. (2022). *LGBT+ rights and issues in Pacific islands*. House of Commons Library.

<sup>192</sup> NZ Herald. (2022, March 24). *Rugby: Israel Folau has no regrets about homophobic comments, eyes international return*; Radio New Zealand. (2020, April 21). *World Rugby investigating Fiji chairman over homophobia allegations*; Radio New Zealand. (2019, December 4). *Folau settles unfair dismissal case with Rugby Australia*.

## What the data tell us about Pacific peoples' experiences of conversion practices

Data on conversion practices within Pacific communities in Aotearoa are limited. The inaugural 2023 Manalagi survey community report examines the health and wellbeing of 750 Pacific Rainbow people and their allies across Aotearoa.<sup>193</sup> The survey found that 14 percent of respondents indicated that they had been subjected to conversion practices with a further 4 percent preferring not to say whether they had or not. Respondents had the opportunity of indicating in an open text box where these practices took place; the majority of those who had experienced them indicated that they took place primarily in religious, church, or family settings.<sup>194</sup>

The Manalagi survey explored the experience of religious and cultural identity of respondents as it related to their Rainbow identities. The survey found that 63 percent of those surveyed indicated religion or spirituality was important or very important to them. However, over 60 percent of respondents also reported that religion had impacted their ability to live their lives as a member of a Rainbow community, making their lives somewhat or very difficult. The survey also found that, while 92 percent of respondents indicated that their cultural identity as Pacific people was important to them, only 60 percent of respondents indicated they felt connected to their culture as a member of the Rainbow+ community.<sup>195</sup>

Another study focusing on transgender and non-binary people showed 17 percent of Pacific survey respondents had been exposed to gender identity-based conversion practices from a health professional.<sup>196</sup> The same study showed a further 13 percent of Pacific peoples did not know if they had been exposed.

**“It’s like being part of an emotionally or psychologically abusive relationship. So you have the positive side of it where people are really loving and welcoming and say positive things to you and make you feel part of the community and like you’re important. But they’re also making you agree to what they say. There’s that element of control.”** Pacific, non-binary

Another study on sexual orientation and gender identity-based conversion practices reported 3 percent of Samoan participants, 2 percent of Tongan participants, and 0 percent of Cook Island Māori had experienced conversion practices.<sup>197</sup> In addition to these percentages of survey respondents reporting experiences with conversion practices, other respondents reported that they found the topic upsetting or preferred not to say regarding these experiences (6 percent of Samoan, 5 percent of Cook Island Māori, and 2 percent of Tongan respondents), which suggests that the prevalence of conversion practices experiences could be higher than what was reported in the survey. The non-probability nature of the sample as well as small subsamples for these groups of respondents (e.g n=19 Tongan respondents) mean that the results may not be statistically robust enough to draw conclusions about the prevalence of conversion practices experiences within these groups of people in the New Zealand population.

These data are further complicated by definitions of Pacific identities and the sample size for specific Pacific ethnic groups. More information is needed to get a clearer understanding of the prevalence of conversion practices for Pacific peoples. For example, this could include greater understanding of why some participants did not want to answer a question about whether they had experienced conversion practices.

According to the Youth19 survey,<sup>198</sup> Pacific Rainbow youth were more likely to report more challenges than Pacific non-Rainbow youth, Rainbow Pākehā, and non-Rainbow Pākehā youth. Over 40 percent of Pacific Rainbow youth reported symptoms of depression, food insecurity, or serious thoughts of suicide.

Counting Ourselves, a 2019 study on the health and wellbeing of trans and non-binary people in Aotearoa, showed 27 percent of Pacific trans and non-binary participants had been asked to leave their home because of their identity compared to 6 percent of European participants.<sup>199</sup> Some were physically abused by their families and bullied for being different. The survey showed 33 percent of Pacific transgender and non-binary participants had a family member be violent towards them because of their gender identity compared to 7 percent of European participants. The same study found 56 percent of Pacific participants had family members prevent them wearing clothes that matched their gender identity.

<sup>193</sup> Thomsen et al., 2023.

<sup>194</sup> Ibid., p. 74.

<sup>195</sup> Ibid., pp. 87–88.

<sup>196</sup> Veale et al., 2022.

<sup>197</sup> Fenaughty et al., 2023.

<sup>198</sup> Tiatia-Seath, J., Fleming, T., Sutcliffe, K., Fenaughty, J., Roy, R., Greaves, L., & Clark, T. (2021). *A Youth19 Brief: Pacific Rainbow young people*. The Youth19 Research Group.

<sup>199</sup> Veale, J., Byrne, J., Tan, K., Guy, S., Yee, A., Nopera, T., & Bentham, R. (2019). *Counting ourselves: The health and wellbeing of trans and non-binary people in Aotearoa New Zealand*. Health Research Lab, University of Waikato.

It is not possible to discuss the negative impacts of conversion practices upon Pacific Rainbow communities in Aotearoa without mentioning the socioeconomic profile of Pacific peoples. Pacific peoples are more likely than people of other ethnicities to report that they do not have enough money to meet their everyday needs.<sup>200</sup> Contributing to the low disposable incomes experienced by Pacific peoples are the significant ethnic and gender pay gaps they experience compared to other groups. The Commission's Pacific Pay Gap Inquiry in 2022 found that there is a wide and persistent pay gap between Pacific workers and other workers, which is particularly pronounced for Pacific women. The Inquiry found that discrimination and racism is playing a part in these disparities.<sup>201</sup>

The Commission's inquiry also noted the intersectional and compounding nature of discrimination for those who identified as both Pacific and Rainbow. In a talanoa with Pacific Rainbow workers, people told us about their specific concerns. These included burdensome ideas of 'perfect masculinity' in the workplace and hierarchies within the Rainbow community

that reproduced wider social, ethnic, and gender privilege and discrimination against Pacific trans people in particular.<sup>202</sup>

Through our engagement, we understand that survivors of all ethnicities faced economic barriers when trying to exit and recover from conversion practices. The high rates of material deprivation experienced by Pacific peoples has implications for their ability to access what they need to limit their exposure and secure any support required.

The nature of conversion practices within Pacific peoples' communities and the Commission's engagement with Pacific survivors suggest more data are needed for an accurate understanding of the prevalence of conversion practices in these communities.

**"It was really terrifying, as if there's something really wrong with me."**

Pacific, non-binary

## How conversion practices appear in Pacific communities within Aotearoa

Pacific survivors told us family, cultural, and religious pressures for conversion practices overlap. However, accounts of conversion practices from Pacific survivors in Aotearoa were often tied to their religious beliefs and a desire to live in the way they have been told God wants them to. This was often interwoven with wanting to be a good child, sibling, or family member and not bringing shame to everyone by accepting their Rainbow identity. There was a need to balance the collective good with their individual wellbeing and feelings of guilt for putting their own needs before those of their family.

**"I was just made to feel that there'd be a lot of shame, that there would be abandonment and that I wouldn't belong to this unit (my family) anymore."** Samoan, male

Some survivors spoke about the risk of being sent back to the Pacific islands as their Rainbow identity was seen as being influenced by Western ideologies. They noted the dynamic of having two sets of rules to comply with – the rules in Aotearoa and the rules from the Pacific country their family originates from.

Others spoke about fearing they would be "kicked out of the house" if they did not comply with collective norms. Other survivors mentioned being forced to spend time with family members of the same sex so that they could behave more like them. It is important to acknowledge that these actions were often done by family and community members as acts of 'love'

for children.

**"My experiences of conversion therapies have undermined the credibility of the community I grew up in, and my respect for authority figures. In my community of origin, the church that led the conversion practices engaged medical professionals employed in the public system to deliver these 'treatments'. The presence of these people as registered professionals, undertaking unethical treatments, calls the regulatory system into question. Furthermore, these people were powerful in my community while I have struggled to advance my career against the stigma of being Māori, Pasifika and LGBTIQ+ / MVPFAFF+."** Māori/Tongan, male

Within religious settings, some survivors noted their parents put so much trust into their religious leaders they did not realise their child was going through conversion practices. They stated, "a lot of people end up in conversion [practice] situations because they are being counselled for a different mental health problem by a religious or cultural counsellor." Survivors recounted 'mentoring' from leadership and conversations about 'worthiness' and how to be sexually pure.

<sup>200</sup> Thomsen, S., Shafiee, H., & Russell, A. (2023). *Pacific peoples' wellbeing. Background Paper to Te Tai Waiora: Wellbeing in Aotearoa New Zealand 2022*. The Treasury.

<sup>201</sup> Human Rights Commission. (2022c). *Voices of Pacific peoples: Executive summary and recommendations* (p. 2).

<sup>202</sup> Human Rights Commission. (2022b). *Voices of Pacific peoples: Eliminating pay gaps* (p. 77).

## Preventing conversion practices and affirming Rainbow and MVPFAFF+ Pacific peoples

Long-term prevention of conversion practices for Pacific peoples in Aotearoa will require Pacific leaders and families to prioritise inclusivity for their MVPFAFF+ and Rainbow loved ones.

Survivors have noted the need to look to Indigenous Pacific understandings of gender, sexual orientation, and identity that upheld inclusion of MVPFAFF+ and Rainbow identities within the collective. While some traditionally termed identities such as fa'afafine have continued to have some acceptance, it is vital this acceptance is expanded to all those with Rainbow identities.

**“When I grew up in a large church-going family, I got the strong message that it wasn’t OK to be who I was, that living outside of binary gender and the gender I was assigned at birth was inappropriate, shameful, and disgusting. My experiences of conversion practices took place amongst both family, church, and professional settings. It was only later as I reclaimed my identity that I saw that my ancestors from the Pacific had already led the way for us. Trans people are not a new phenomenon but an ancient one. I’m talking about my ancestors because I really feel them coming through for me today. The va, a Pacific concept which refers to the relational space between us, is important. When harm such as conversion practices occurs within communities, the va is often fractured and broken.”**

Fijian/Tongan, non-binary

A struggle survivors mentioned was the need to have appropriate language and framing to discuss MVPFAFF+ and Rainbow identities. They noted some Pacific languages do not have the word ‘gay’ and that some family members may be able to relate better to Indigenous terms and identities. This linguistic diversity highlights the need for Pacific peoples in Aotearoa to have fundamental conversations about identity within various Pacific, rather than Western, framings of identity. This process may be assisted through resources that are translated both linguistically and conceptually into diverse Pacific languages and contexts.

Finally, there is a call for Pacific communities, including Pacific non-Rainbow leaders, to develop an inclusive approach to Christianity. Such an approach would prioritise the safety and dignity of Rainbow people and prioritise Pacific identities over Western ideologies of sexual orientation and gender.

That there is still work to be done in this area is evident in debates about sexuality or marriage equality in Pacific communities. Political and religious leaders in the Pacific and Aotearoa in these debates tend to reject acceptance of Rainbow people by emphasising that their nations are Christian countries. See recommendations 29–32 in chapter 9.

While distinct, the experiences of Pacific conversion practice survivors share similarities with those from Māori and ethnic communities. The parallels are primarily due to shared experiences of racial discrimination, social inequalities and inequities, and histories of colonisation for non-Māori in their country of origin.

On the positive side, there are many more survivors from Pacific backgrounds who are not only speaking about their experiences of conversion practices but are also authoritatively commenting on the intersection of family, spirituality, culture, and indigeneity with Rainbow identities. These survivors are modelling new inclusive practices in those spaces.



## Ethnic communities' experience of conversion practices

In Aotearoa, the term 'ethnic communities' is an umbrella term that captures a diverse group representing over 200 ethnicities and speaking over 170 languages.<sup>203</sup> This section explores some of the perspectives of ethnic Rainbow communities who have experienced or observed conversion practices in Aotearoa.

The insights contributed here draw from the team's engagements and interactions with ethnic survivors as well as desktop research of available published articles, reports, and academic journal articles, as in other parts of this report. However, given that very little is publicly available on the experiences of minority ethnic conversion practice survivors, this chapter is supplemented by seven semi-structured interviews with survivors or members of minority ethnic groups who were well positioned to share insights on the experience of Rainbow community members.

The self-identified ethnicity of those we interviewed included Korean, Fijian Indian, Sri Lankan, and Iranian. Most participants we interviewed identified as Rainbow. Those we interviewed included recent migrants, long-term settlers, and multigenerational New Zealanders with diverse Rainbow backgrounds. Some engagement participants have intersectional experiences that encompass more than one ethnic and one diverse Rainbow identity. These interviews were conducted by the member of the team who identifies as a Sri Lankan Rainbow community member. Their insights are also included in this section.

While we have taken this extra step to broaden the examples we discuss here, we acknowledge that this section is in no way

completely representative of the breadth of minority ethnic communities and Rainbow identities present in Aotearoa. In particular, the evidence and insights gathered for this report do not cover the experiences of ethnic transgender or intersex communities nor those of African, Latin American, and continental European backgrounds. Our engagement also focused primarily on the experience of recent migrant communities. We have therefore not addressed the experience of ethnic communities who have been established in Aotearoa for a long time.

Based on the select voices documented in this section, we can suggest that conversion practices occur within several minority ethnic communities in Aotearoa but that they may manifest in different ways than those experienced by other groups. The examples discussed in this chapter underline the unique risks of harm that occur for individuals who are members of minoritised ethnic communities. Their experiences may be shaped by membership in a minoritised group at the sharp end of racism and discrimination who experience pressure to assimilate into the dominant (Pākehā) culture.

Simultaneously, many of those ethnic Rainbow people vulnerable to conversion practices are threatened with the experience of marginalisation and exclusion from the protected space of the family and/or wider ethnic community. Compounding these factors, our engagements confirmed what existing studies have also identified as an issue for ethnic Rainbow youth – they experienced barriers to belonging to what they perceive as Pākehā, cisgender, Rainbow community spaces.<sup>204</sup>

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## Data about ethnic communities in Aotearoa

The government defines ethnic communities as including anyone who identifies their ethnicity as African, Asian, Continental European, Latin American, and/or Middle-Eastern.<sup>205</sup> In the 2018 Census, 18 percent of the population<sup>206</sup> (approximately 836,000 people) identified as being part of a minority ethnic community in Aotearoa.<sup>207</sup> Stats NZ reported that, in 2021, 4.4 percent of Aotearoa's total adult population identified as Rainbow.<sup>208</sup> This figure comes from the Household Economic Survey and as such does not have readily available

information on the ethnic breakdowns of the overall figure. Forthcoming analysis from the 2023 Census may provide a fuller picture of ethnic representation in Rainbow communities.

A priority for the Ministry for Ethnic Communities is to ensure equitable provision of and access to government services for ethnic communities.<sup>209</sup> The Ministry recognises the ethnic Rainbow community as a further marginalised group within the wider community.

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<sup>203</sup> Ministry for Ethnic Communities | Te Tari Mātāwaka, 2024.

<sup>204</sup> Bal & Divakalala, 2022; Tan, K., Roy, R., Ker, A., & Fenaughty, J. (2023). An ecological analysis of hope amongst Asian rainbow young people in Aotearoa New Zealand. *Culture, Health & Sexuality*, 26(6), 717–733.

<sup>205</sup> Ministry for Ethnic Communities | Te Tari Mātāwaka, 2023.

<sup>206</sup> Stats NZ. (2020). *Ethnic group summaries reveal New Zealand's multicultural make-up*.

<sup>207</sup> Asian, Middle Eastern, Latin American, African, or another ethnicity but not including Māori or Pacific ethnicities.

<sup>208</sup> Stats NZ (2022).

<sup>209</sup> Ministry for Ethnic Communities | Te Tari Mātāwaka. (2022). *Strategy 2022–2025: A pathway to an Aotearoa where ethnic communities feel at home*.



As documented in research published by the Commission in 2021, migrants decide to settle in Aotearoa New Zealand for a number of reasons, including the belief amongst many that living in Aotearoa provides:

- opportunities for a better future for their families and children
- safety and protection for all citizens
- a sense of belonging, acceptance, and inclusion.<sup>210</sup>

Ethnic migrants often bring hopes of making a home where they will be free to express who they are and what they aspire to be (for themselves and their families). The themes of safety, protection, and a space to give voice to individual concerns are also common reasons for ethnic migrants to live in Aotearoa. For some in the study, importance was placed on being heard and making a positive contribution to the country. While we primarily discuss the experience of participants for whom this is not the case, it is worth noting that, for some migrants, the perception that Aotearoa is a country that is free and open with regards to Rainbow identities, and has achieved marriage equality, was part of what attracted them to the country in the first place.<sup>211</sup>

A recurring theme for those we engaged with who had experienced or had awareness of conversion practices in

ethnic communities related to the understanding of ‘respect’ in the context of community. Many migrant and/or minority ethnic communities in Aotearoa place importance on “respect, relationships and [people] reaching their full potential.”<sup>212</sup> While there are similarities in how to show respect between some ethnic communities and the majority population, there are also differences.

As discussed by those we engaged with, in South Asian communities (and likely other minoritised ethnic communities), respect can often present as:

- obedience towards parents and other family elders
- obligations to uphold traditional practices including marriage and reproduction at the ‘appropriate’ time (typically age 23–27)
- modest dress codes
- non-Western courting (dating, pre-marital cohabitation, and divorce are not acceptable)
- varying expectations to uphold and honour the sacrifices made to migrate, including obligations into adulthood to cater for parents through financial and other means.

Such values and beliefs are passed through generations and are influenced by tradition, religion, and colonisation.

## Rainbow communities as Pākehā-dominated

The sense that Rainbow communities are not inclusive of minority ethnic communities may add an additional barrier to members of minoritised ethnic communities experiencing conversion practices who may lack alternative social support networks that are Rainbow affirming.

A recurring theme in our engagement, as well as in the available published research, is the experience of ethnic Rainbow people being invisible and feeling excluded from Rainbow spaces, which are often experienced as predominantly Pākehā spaces. A 2023 study of the experience of Asian Rainbow youth captures the way young people experienced Rainbow community spaces as ‘white’ and not spaces in which the Chinese Rainbow youth quoted could be themselves.

**“The [Rainbow space] is still predominantly cis- and white-dominated for me to feel entirely comfortable because currently it doesn’t feel like it’s a space I go to feel represented and loved.”<sup>213</sup>**

Chinese, Rainbow

A participant in the 2022 Adhikaar study echoes a sentiment expressed by some of those we engaged with. It again describes the invisibility of minoritised ethnic Rainbow communities within Rainbow community spaces.

**“There is a lack of representation of queer people of colour, especially from a South Asian background, in Aotearoa. There is no educational information or resources focused on their experiences. There is no culturally sensitive information that one could share with their parents when they come out to them. This needs to change.”<sup>214</sup>** Queer, gender unsure

The Adhikaar report also documents the interpersonal racism identified by participants they engaged with and experienced within mainstream Rainbow communities.

<sup>210</sup> Malatest International, 2021, pp. 42–43.

<sup>211</sup> Chen, L. (2023, August 10). *Chinese rainbow communities struggle with life in the ‘ethnic closet’*.

<sup>212</sup> Malatest International, 2021, p. 42.

<sup>213</sup> Tan et al., 2023, p. 10.

<sup>214</sup> Bal & Divakalala, 2022, p. 31.

## Rainbow identities and minority ethnic communities

Some people we engaged with discussed how some ethnic communities in Aotearoa may perceive Rainbow identities as a threat to their social status. In the context of the dominance of Pākehā culture, ethnic Rainbow community members discussed what they referred to as ‘respectability politics’.<sup>215</sup> This concept captures how migrants can be motivated to selectively uphold some cultural values while at the same time attempting to integrate with the dominant culture.

For example, one Sri Lankan migrant ally of the Rainbow community we interviewed discussed how some migrant parents are focused on trying to become as ‘Pākehā’ as possible as they strive to fulfil the hopes and dreams they have for themselves and their children in Aotearoa. At the same time, this person described how some Sri Lankan migrants felt very protective of the status of their family within their ethnic community. In that context, they often perceived Rainbow identities as a potential threat to their family status. As this participant described it, Rainbow identities were seen as part of Pākehā culture that was not embraced and that was perceived as a danger to ethnic cultural preservation. This participant discussed how family status can be damaged by “gossip chains in the community”, which they describe as enacting “microaggressions” directed not only at individuals who identify publicly as Rainbow but also at their extended families.

Another Sri Lankan interviewee described the likely scenario that, if someone embraced a Rainbow identity, it would become a cause of potential shame for the family within their wider community. The family’s relationship with the community would then become the focus, as opposed to any thought of care or support the individual might require: “It becomes more of a ‘what will xyz think’ rather than focusing on the hauora [health and wellbeing] of the individual who is coming out.”

The sense that disclosing a Rainbow identity was potentially risky was shared by others who we interviewed. In another example, a Parsi migrant described the high stakes of revealing their Rainbow identity.

**“If I were to come out, it would not only be to my immediate family, it would be to my whole family – the community.”**

Parsi migrant, closeted

A Fijian Indian queer participant made a similar point, explaining that, when it comes to thinking about getting ahead in society and what success looks like, coming out as a Rainbow identity can be perceived as “a major roadblock” in their ethnic community. The exclusion of Rainbow family members from cultural gatherings and community events can occur in some cases because sexual orientation is perceived as contagious and families fear that that younger members of the wider community may be ‘recruited’.<sup>216</sup>

**“When someone comes out, it is a ‘you have to keep it to yourself or you won’t be really allowed in those [community] spaces’.”** Fijian Indian migrant, queer

However, this participant observed that, with the prominence of people such as Shaneel Lal and others living unapologetically as a Rainbow identity, older and more conservative generations are beginning to understand that Rainbow identities can also represent ‘what success looks like.’

A Korean participant we engaged with discussed Rainbow identities being seen as a “Western problem” within their ethnic and religious (Christian) community. As described by other participants, when individuals identify with a Rainbow identity, they are perceived as not living up to their social status. The Korean participant discussed how, even if the particular member of the community was very high achieving with respect to other aspects of their lives, if they identified as Rainbow, “it cancels out your spot in the community.” According to this participant, Korean Rainbow people are afraid to identify with the Korean community at all, as the Korean ethnic community is so closely tied with the Christian religion. As they described it, “it is a fear of being further ashamed of being Korean and not in the Church.” When someone comes out, their parents are often blamed for neglecting to keep their child in Christian practices (which is observed in other Christian Asian communities as well). The cost of not being perceived as Christian for one participant was feeling excluded from the Korean community.

**“Essentially, if you are not in church, you are not in the community.”** Korean, Rainbow

The people we engaged with discussed how the experience of migrating to a Pākehā-dominant society may contribute to the rigid views their families and communities held of Rainbow identities. A few participants noted that some ethnic communities in Aotearoa held strong to such views in contrast to the more accepting views they believed to be more current now in their country of origin.

<sup>215</sup> Nakhid, C., Fu, M., & Yachinta, C. (2020). *Letting in – closing out: A research report on the perspectives and experiences of ‘coming out’ for queer/rainbow ethnic young people in Aotearoa New Zealand.*

<sup>216</sup> Ibid.

**“They hold on to their culture so tight that it fails to evolve.”** Sri Lankan, queer

While the idea expressed by some participants that acceptance of Rainbow identities is becoming more common in some home countries, this is not the case for all migrant communities in relation to their homelands. Some Asian participants were aware of the rise of anti-transgender and broader anti-Rainbow rhetoric taking place in their homelands. They expressed a growing fear that extreme forms of conversion practice methods from their homelands will gain traction in Aotearoa. Examples of these practices include ‘corrective rape,’ masturbatory reconditioning, ‘black magic,’ and circulation of pseudo-academic articles.<sup>217</sup> A 2023 article exploring the experience of recent Chinese Rainbow migrants in Aotearoa finds that they are well aware of a recent trend in China for hardline anti-Rainbow policies and crackdowns on Rainbow organisations.<sup>218</sup>

These findings suggest that some migrant and ethnic community members may hold fast to what they see as their traditional culture in response to the sense that they are losing their culture in the face of multiple pressures. These pressures include pressure to assimilate into the dominant Pākehā culture of Aotearoa and/or in response to experiences of racism and discrimination. Some views held about Rainbow identities may also be connected to or bolstered by resurgences occurring across the world.

The challenges faced in being accepted in certain minority ethnic communities that emerged through our engagement is also documented in published reports and academic studies. The 2022 Adhikaar report focuses on the experience of Rainbow South Asian communities in Aotearoa. It documents how some South Asian communities may associate Rainbow identities with Western ‘ism’ or as ‘a white people thing,’ and

even as a form of ‘Western corruption,’ and ‘un-South Asian.’<sup>219</sup> This report found that, of the 43 participants in the study, 70 percent reported that their immediate family knew about their gender and/or sexual identities. Recognising the significance of extended family in the South Asian community, participants were also asked whether their extended family was aware of their Rainbow identity. The response was similar – 69 percent of respondents reported that their extended family knew about their gender and/or sexual identity. The study found that a key determinant of whether individuals would come out to their families was the fear of being disowned and of tarnishing the reputation of the family.<sup>220</sup>

Academic research on the experience of queer Chinese international students in Aotearoa made similar findings. In a 2023 study, the concept of the ‘ethnic closet’ was used to describe the ‘dual, intertwining oppression’ that international Chinese Rainbow students experience.<sup>221</sup> This study documented the heteronormative microaggressions the students experienced. These microaggressions were based both on the students’ sexual and racial/ethnic identities in the wider community and what they describe as “oppressive” encounters with members of their own ethno-cultural communities both in Aotearoa and in their home country.

A different 2023 study of the specific experiences of Asian Rainbow youth in Aotearoa noted that, for youth who decide to prioritise “the maintenance of harmonious familial relationships and kinship,” not disclosing a Rainbow identity represents a considered decision on their part.<sup>222</sup>

While not all these studies document conversion practices specifically, they serve to shed light on the factors that can make ethnic Rainbow people more vulnerable to conversion practices.

<sup>217</sup> Asia Pacific Transgender Network, 2021.

<sup>218</sup> Chen, 2023.

<sup>219</sup> Bal & Divakalala, 2022, p. 36.

<sup>220</sup> Ibid., p. 44.

<sup>221</sup> Cui, T. L., & Song, L. (2023). *The end of the rainbow? Chinese queer international students negotiating the “ethnic closet” in New Zealand*. Community Research.

<sup>222</sup> Tan et al, 2023, p. 2; Nakhid et al., 2020.

## Legacies of colonisation within ethnic communities

Several of those who identified with minority ethnic groups contested binary notions of gender and enforcement of heterosexual norms that they believe are often presented as ‘traditional’ or ‘customary’ by their ethnic communities. Instead, participants pointed out that ancestors within ethnic communities often had varying sexual orientations and gender identities and were celebrated for their diverse sex characteristics. Rainbow identities reaching beyond the Eurocentric acronym of LGBTQIA+ were prevalent across South Asian regions. Examples of these identities included Hijra (a thriving ‘third gender’), Aravani, Thirunangaigal, Khwajasara, Kothi, Thirunambigal, Jogappa, Jogatha, Nachchi, and Shiva Shakti.<sup>223</sup> These identities present a diverse understanding of gender and sexual orientation that pre-date colonisation and the establishment of colonial and faith-based norms.

There are Sinhalese words to give voice to the make-up of our ethnic communities in Aotearoa New Zealand.

- Whānau – family – පවුල (Pavula).
- Aotearoa New Zealand – නවසීලන්තය (Navasīlantaya).
- Kaupapa – topic, matter of discussion – අරමුණ (Aramuna).
- Whenua – land, nation, state – ಭූමිය (Bhūmiya).

People we engaged with discussed the ways in which colonisation has affected cultural and religious beliefs and doctrine. For ethnic Rainbow people, this is evident in the evolution of anti-queer rhetoric and behaviours. For example, a Fijian Indian queer participant spoke of the ancient Hindu tradition of inviting transgender members of a community to bless a newborn. Despite these traditional religious duties, this participant believed that transgender people are now regarded as ‘other’ to the wider community and described the acceptance and inclusion of the Rainbow community within Hinduism as having disappeared. This person said they lived separately from the Hindu community because of this experience.

The following quotes capture the reflections of ethnic Rainbow community members on how colonisation has impacted other communities practising Hinduism, Sri Lankan Buddhism, and Parsi Zoroastrianism.

**“We carry this awareness that the Fijian Indian community has thousands of years of queer history that is ... removed by a colonial system.”** Fijian Indian, queer

**“Traditionally Buddhist teachings do not discriminate against Rainbow people, it is the embedded post-colonial culture that transformed the thinking.”** Sri Lankan, queer

**“This anti-Rainbow attitude stems heavily from the consequences of colonial culture, as there is no explicit teaching against those who are sexually or gender diverse in Zoroastrian scripture/teachings.”**

Parsi migrant, not publicly out

**“People of South Asia are sadly losing [connection to pre-colonial traditions] and seem to believe the discriminatory laws that restrict minorities are inherently part of their culture.”**

Sri Lankan migrant, not publicly out

These examples capture how those who spoke to us understood the rigid attachment to heterosexuality and binary notions of gender they observed in their ethnic community to be associated with Western and colonial ideas about gender and sexuality.

However, as discussed above, through our engagement, we heard that conversion practice proponents in ethnic communities can perceive ‘queerness as whiteness’ (an external cultural imposition) and therefore, “not [part of] our culture”. As a result, some parents or leaders from ethnic communities (including those from migrant, former refugee, and multigenerational settler backgrounds) may disagree with efforts to retrace pre-colonial cultural nuances due to the influence of Western religion or internalised colonial narratives.

All of these factors contribute to the complexities faced by an individual trying to establish their cultural identity alongside their sexual orientation, gender identity, or gender expression. As we have discussed in this section, people from ethnic Rainbow communities balance coming to terms with their Rainbow identity with upholding their respective cultural nuances.<sup>224</sup> At the same time, immigrant parents may also be preoccupied in trying to be as Pākehā as possible to get ahead and to provide for their family.

<sup>223</sup> Bal & Divakalala, 2022.

<sup>224</sup> Bal & Divakalala, 2022.

## Ethnic communities and conversion practices

Our engagement suggests that the values and beliefs, including notions of respect, held by ethnic communities can sometimes be used to justify conversion practices within those communities.

The idea that Rainbow identities are “not our culture,” and variations of this sentiment, can be a foundation for proponents of conversion practices. One conversion practice survivor of Sri Lankan and Burgher descent – and Christian faith background – shared that, on coming out, their parents immediately culled Western influences such as TV shows and social events as a way to rid them of their queerness. This survivor then underwent

a religious intervention with a church minister. Bible verses were used in an attempt to persuade them they were following Western ideology, and they were then compared to the minister’s gay, Pākehā brother-in-law. As a result of the practice, the survivor developed panic attacks that continued for many years.

Behind the attempted conversion practice is a desire to uphold what it means to be an ethnic individual in Aotearoa. ‘Coming out’ is at odds with what some migrant communities have constructed as the ideal social status, which includes heterosexual marriage and children.

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## Other examples of conversion practices in ethnic communities

A 2020 study of ethnic Rainbow youth in Aotearoa includes examples described by participants of the following practices which may constitute conversion practices.<sup>225</sup>

- Family members seeking assistance through medical practitioners, counselling, healers, or homeopathy in order to change their children’s Rainbow identity.
- Parents engaging in ‘gender monitoring,’ reminding their children to conform to their expectation of the gender they knew them to be through references to “their clothing, hairstyles, or other factors that aligned with these expectations.”

Conversion practices and assertion of conversion ideology that we have been told about in our engagement include:

- an individual at a Catholic boys’ secondary school being sent to counselling services for presenting with ‘feminine traits’ – at this same school, religious education classes were used to teach the ‘sinful’ nature of gay sex and relationships
- forced heterosexual marriage where an individual is taken back to their ancestral homeland to be married so they can uphold the status of the family
- ‘black market’ hormones and herbal remedies to demasculinise or defeminise an individual
- mental and physical punishment for reading or watching Rainbow media such as magazines, music, films, or other literature
- weaponising of religious doctrine and dogma.

**“If you are like that [Rainbow], you will not be reincarnated, an important belief of afterlife in our Sinhalese Buddhist traditions.”** Sri Lankan migrant, queer

The values of ethnic communities are passed through generations and influenced by tradition, religion, and colonisation. Our participants expressed concern that, while these values bring strengths, they can also be used to defend the use of conversion practices to suppress, harm, and diminish Rainbow communities.

Our engagement suggests that many ethnic Rainbow individuals who have experienced and/or conducted conversion practices are likely to ‘play down’ their experiences, possibly as a result of stigma or shame. Community-led approaches are needed to remove stigma and shame from discussing human rights issues such as conversion practices, but also around discussing sexual orientation and gender more broadly. Similarly, this is why more research is needed to record prevalence and nuanced examples within diverse communities.

Both the existing evidence base and our engagement with community members show how Rainbow members of ethnic communities experience a complex range of homophobia, transphobia, racism, and/or xenophobia depending on whether they are navigating Rainbow communities, ethnic communities, or the dominant Pākehā culture in Aotearoa. What is often highlighted is the challenge experienced by not being accepted in terms of gender and sexual orientation in minority ethnic communities, given the importance these play in protecting community members from racism experienced outside. At the same time, the lack of visibility of minority ethnic communities amongst Rainbow communities can sometimes hinder a sense of belonging. This means that, for ethnic Rainbow community members, the protection and solidarity of a wider Rainbow community is either less or not available to them.

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<sup>225</sup> Nakhid et al., 2020, p. 33–35.





## Barriers to support services

Members of ethnic Rainbow communities with whom the Commission engaged shared how they faced barriers accessing these services. They also discussed the challenges they faced advocating for their identity within their respective communities.

### Social barriers

The pressure on migrants to integrate into ‘mainstream’ society can often divert the attention of parents and caregivers. Since caregivers prioritise integration, the needs of ethnic Rainbow people to receive empathy and support can be missed and can negatively impact the development of their sense of self. Language can also contribute to this barrier.

We were told there is often a communication breakdown with the children of immigrants who grow up in Aotearoa. English is often a second language for their parents, which places a barrier for their children to speak about Rainbow awareness at home.<sup>226</sup>

This barrier puts pressure on younger generations in the ethnic migrant diaspora to educate not only their immediate family but also the wider community.

### Social services and authority barriers

While the Commission has established services to facilitate reports of conversion practices, when asked to list barriers to accessing these services, ethnic Rainbow people provided these suggestions as to why they may not make contact.

- A young Rainbow member of an ethnic community is unlikely to report their family’s attempts at conversion practices due to the pressure to stay connected with a wider community.

- Some social service providers do not understand the intersectionality within which ethnic Rainbow people struggle. The default for some service providers is to direct ethnic Rainbow people to staff with the same or similar ethnicity. While this is well intentioned, this person or people still may not have the capability to understand Rainbow issues.
- They may fear for themselves or for their family being deported, where there will be a risk of further persecution.
- Services are inaccessible because information is not translated or written in plain English.
- They may fear authority due to experiences of racism towards ethnic communities.

Lack of money can stop ethnic Rainbow people getting comprehensive and focused support such as consistent counselling sessions, alternative housing, and access to Wi-Fi and other cellular services. These types of concerns are also echoed by some Māori and Pacific Rainbow voices and reflect wider systemic issues with minority communities being able to access government and public services.

The Commission has noted these suggestions and has in place various responsive accommodations and methods to support better access to our services. It also highlights the need for the Commission (and public services) to deliver awareness raising about services, and education and prevention of human rights issues via respected community leaders and channels.

<sup>226</sup> Engagement with a Sri Lankan migrant ally of the Rainbow community.

## Trans peoples' experiences of conversion practices

This section outlines the evidence from research and engagement about the experiences and impact of conversion practices on transgender people, both binary and non-binary, in Aotearoa.

**“My fear of accepting ‘this is who I am’ was very much a reality. I thought the best way to not be gay was to tell my pastor. That’s when my conversion therapy began. At the time, because of all the religious teaching I’d received over the years, it becomes ingrained in you. I was confident this would be the way to go, though deep down I knew it would never happen. I thought if I stopped therapy and kept up the pretense that it worked, I wouldn’t have to face people’s disappointment. I became more and more disheartened. When I came out [as trans], I was removed from my leadership roles and told to join a rugby team and survive in the bush for three days to reintroduce my masculinity.”**

Māori, transgender

### Transgender people

Gender is both complex and deeply personal. It is woven into an individual’s core identity and is distinct from a person’s sexual orientation and sex characteristics. Gender and its expression vary with time, place, and culture. Stats NZ’s 2020 Household Economic Survey classified about 1 percent of the adult population (0.8 percent) as transgender or non-binary.<sup>227</sup> This percentage includes Indigenous and cultural gender identities held by people within Aotearoa either as Tangata Whenua, Pacific peoples, or part of an ethnic minority community.

The Commission’s research has documented violence and discrimination against transgender people in Aotearoa since its 2008 Transgender Inquiry report.<sup>228</sup> Recent research undertaken in 2018<sup>229</sup> and 2022<sup>230</sup> continues to show high levels of discrimination and violence towards trans people. The proliferation of negative online messages in particular has increased in recent years with a documented spike in online hate against trans women in March and April 2023.<sup>231</sup> As noted by the United Nations Independent Expert on Sexual Orientation and Gender identity, “at the root of the acts of violence and discrimination lies the intent to punish based on preconceived notions of what the victim’s gender identity should be, binary understanding of what constitutes a male and female, or the masculine and the feminine.”<sup>232</sup>

Transgender people can experience having their gender identity or expression suppressed in a range of settings, including schools, religious and faith settings, community and family settings, and medical settings. Gender affirmation in social settings includes supporting transgender people through their social transition, which may involve, for example, using a different name or pronouns, and changes to hairstyle, clothing, and other forms of body presentation.<sup>233</sup> Gender affirmation in healthcare settings includes gender-affirming care. However, it also includes access to healthcare without discrimination, for example, access to a general practitioner who addresses health issues as they present without encouraging a person to comply with the gender identity assigned at birth.

### Data about gender identity-based conversion practices

There is a long history of conversion practices towards transgender people based on their gender identity and expression.<sup>232</sup> Gender identity-based conversion practices are based on the transphobic assumption that being trans is undesirable or wrong and that gender is binary.<sup>235</sup> Although there are limited New Zealand data available about gender identity-based conversion practices, recent community surveys with transgender participants have included relevant questions.<sup>236</sup> There are various data available about trans and non-binary people’s non-affirming experiences in New Zealand.<sup>237</sup>

<sup>227</sup> Stats NZ, 2021.

<sup>228</sup> Human Rights Commission. (2008). *To be who I am: Report of the Inquiry into Discrimination Experienced by Transgender People*.

<sup>229</sup> Veale et al., 2019.

<sup>230</sup> Forthcoming analysis of the 2022 wave of *Counting Ourselves* will be published in 2024.

<sup>231</sup> Hattotuwa et al., 2023.

<sup>232</sup> Independent Expert on Sexual Orientation and Gender Identity. (n.d.). *The struggle of trans and gender-diverse persons*. United Nations Human Rights Office of the High Commissioner.

<sup>233</sup> Oliphant, J., Veale, J., Macdonald, J., Carroll, R., Johnson, R., Harte, M., Stephenson, C., & Bullock, J. (2018). *Guidelines for gender affirming healthcare for gender diverse and transgender children, young people and adults in Aotearoa, New Zealand*. Transgender Health Research Lab.

<sup>234</sup> Ashley, F. (2020). Homophobia, conversion therapy, and care models for trans youth: Defending the gender-affirmative approach, *Journal of LGBT Youth*, 17(4), 361–383; Ashley, F. (2022). *Banning transgender conversion practices: A legal and policy analysis*. UBC Press.

<sup>235</sup> Veale et al., 2022.

<sup>236</sup> Fenaughty et al., 2022; Thomsen, Brown-Acton et al., 2023; Veale et al., 2019. Forthcoming analysis of the 2022 wave of *Counting Ourselves* will be published in 2024. These surveys sampled different populations and asked questions about conversion practices differently. For example, both 2018 and 2022 *Counting Ourselves* surveys counted trans people only (aged 14 and older), Identify surveyed young Rainbow people (not solely trans people) aged 14–26, and Manalagi surveyed Pacific Rainbow+/MVPFAFF+ peoples aged 15 and older.

<sup>237</sup> Veale et al., 2019.

One large study from Aotearoa showed almost 20 percent of transgender and non-binary participants who had spoken to a health professional about their gender reported that they had experienced a mental health professional denying their trans or non-binary identity. This often involved the healthcare professional enforcing compliance with sex assigned at birth.<sup>238</sup> A further 9 percent did not know whether they had experienced this. Trans youth were more likely to report experiencing conversion practices than adult trans people<sup>29</sup> and, in another study, more likely to experience them than cisgender Rainbow youth.<sup>240</sup>

Experiences described in the study included healthcare providers discouraging transgender people from exploring their gender, refusing to discuss gender-affirming healthcare with them, or telling them they were “not really transgender or non-binary”.<sup>241</sup> The study provides evidence that gender identity-based conversion practices are harmful to mental health.<sup>242</sup> Those who had experienced conversion practices had higher rates of psychological distress, more than twice the odds of increased non-suicidal self-injury and suicidal ideation, and almost four times the odds of increased suicide attempts than those who had not experienced gender identity-based conversion practices.<sup>243</sup>

There is also evidence of a correlation between exposure to gender identity-based conversion practices and internalised transphobia.<sup>244</sup> Additionally, survey participants who had experienced family rejection were more likely to report gender identity-based conversion practices than those who had not. This suggests conversion practices are one of the ways that family rejection can cause psychological harm to trans people.

A separate Aotearoa-based study asked participants who it was who had suggested to them that they undergo conversion practices. It found that family members were the most common ‘suggesters’ to transgender young people, followed by religious leaders.<sup>245</sup>

Together, the results of these studies emphasise the importance to trans people’s mental health of accepting and affirming their gender identity and expression in social and medical settings.<sup>246</sup> International<sup>247</sup> and local<sup>248</sup> evidence demonstrates that social acceptance and gender-affirming healthcare decrease suicidal thoughts and other harms faced by transgender people.

## What gender identity-based conversion practices look like in Aotearoa

Transgender survivors repeatedly told us they experience conversion practices that may meet the threshold for unlawfulness across multiple settings. These can include within families, cultural and faith spaces, and school and healthcare settings. Our engagement with survivors showed gender identity and expression-based conversion practices appeared to be more widely socially acceptable than those focused on sexual orientation. Survivors also spoke about how conversion practices affected their ability to come out or to live openly as they identified.

**“My father used to always yell at me for ‘walking like a girl’ and criticise other ‘girl’ things I used to do as a teenager. I remember one night I wandered off in the middle of the night and just stared at traffic, contemplating if I should just jump to end it all so that I am no longer a burden to my parents.”** South Asian, non-binary

Transgender people are uniquely susceptible to experiencing conversion practices in healthcare settings, as many have contact with health professionals to access gender-affirming healthcare.

Some survivors who spoke with us were under the impression that, if health practitioners tried to change or suppress a person’s gender identity, this would fall outside the scope of the CPPLA. While there is a partial exemption for health practitioners in section 5 of the CPPLA, it is designed to allow for health practitioners to assist individuals to explore their gender identity with medically appropriate considerations in place. The exemption is not absolute, nor does it allow discrete forms of conversion practices to be carried out in healthcare settings.<sup>249</sup>

<sup>238</sup> Veale et al., 2022.

<sup>239</sup> Ibid.

<sup>240</sup> Fenaughty et al., 2023.

<sup>241</sup> Veale et al., 2022.

<sup>242</sup> Including in relation to psychological distress, non-suicidal self-injury, suicidal ideation, and suicide attempts.

<sup>243</sup> Ibid.

<sup>244</sup> Veale et al., 2022.

<sup>245</sup> Fenaughty et al., 2023.

<sup>246</sup> Carroll et al., 2023.

<sup>247</sup> Coleman, E., Radix, A. E., Bouman, W. P., Brown, G. R., de Vries, A. L. C., Deutsch, M. B., Ettner, R., Fraser, L., Goodman, M., Green, J., Hancock, A. B., Johnson, T. W., Karasic, D. H., Knudson, G. A., Leibowitz, S. F., Meyer-Bahlburg, H. F. L., Monstrey, S. J., Motmans, J., Nahata, L., ... Arcelus, J. (2022). Standards of care for the health of transgender health. *International Journal of Transgender Health*, 23(1), 1–259.

<sup>248</sup> Veale et al., 2019; Fenaughty et al., 2023.

<sup>249</sup> Ministry of Justice | Tāhū o te Ture. (2022) (p. 37).

Some survivors from diverse ethnic cultural backgrounds spoke of the phenomenon of an adolescent family member who is “naughty” (or exhibits problematic behaviour) being sent to live with relatives (uncle, aunt, grandparent) as a form of punishment and discipline. They were concerned that this practice could be adopted by families, either consciously or unconsciously, to perform conversion practices. This may include attempts to change or suppress a family member’s gender expression, such as policing their behaviours or mannerisms. Other survivors spoke of being forced to use black market hormones to correct perceived hormonal imbalances that ‘caused’ their diverse gender and/or sexual orientation.

Some ethnic community and Pacific transgender survivors spoke of physical abuse for not wearing clothing that conformed to their sex assigned at birth. Others reported a fear of being sent to their home countries where there are no legal protections against conversion practices, and where such practices may not only be permissible, but also potentially state-sanctioned and funded.

The overarching theme for survivors of gender identity-based conversion practices was that the harm caused was long-lasting and impacted many areas of their lives.

### Prevention of gender identity-based conversion practices

Trans people have the same potential to live healthy and flourishing lives as everyone else. However, evidence shows that stigma and discrimination towards transgender people drive negative outcomes.<sup>250</sup> Focusing on increasing understanding of transgender and non-binary people will help to counter disinformation – particularly the aggressive rhetoric underpinned by conversion ideology.

Preventing conversion practices for transgender people is necessary to uphold their right to live free from discrimination. Support and education is required for families around the negative impacts of family and social rejection, and how to reconcile religion and Rainbow identities. Education and training for medical and health practitioners is also important.

**“I was sent to a GP, he was actually from the same church, and the counsellor he sent me to was also part of that broader church community. So you can see how it’s all interlinked, and it was bizarre but it didn’t feel like something I could say no to it. At the time I was like completely depressed, and she was so loving and warm and I was completely taken in. This was deeply confusing and shaming and also prevented me from getting the support that I needed at the time. I went through major mental distress and suicidality because obviously what she was doing was making everything worse.”** Pasifika, non-binary

<sup>250</sup> Tan, K. H., Treharne, G. J., Ellis, S. J., Schmidt, J. M., & Veale, J. F. (2020). Enacted stigma experiences and protective factors are strongly associated with mental health outcomes of transgender people in Aotearoa/New Zealand. *International Journal of Transgender Health*, 22(3), 269–280.





## Disabled people's experiences of conversion practices

Ableism is “a value system that considers certain typical characteristics of body and mind as essential for living a life of value.”<sup>251</sup> Disablism is “an oppression that directly targets and impacts disabled people, such as abuse and violence that is inflicted on disabled people because they are ‘disabled.’”<sup>252</sup> These belief systems negatively frame disability as a problem in need of fixing, contrary to the social model of disability set out in the Convention on the Rights of Persons with Disabilities. The social model focuses on the barriers within society that prevent a disabled person from participating in society and developing their full potential. These beliefs are not dissimilar to conversion ideology, since the individual becomes known as the ‘problem’ to be fixed via religious or cultural practices.

Given the pervasiveness of such beliefs, the experience of disabled Rainbow people in relation to conversion practices is particularly concerning. Sexuality and the freedom to express gender identity and expression is often denied in different ways to disabled people.<sup>253</sup> For example, assumptions around sexual expression of people with intellectual disabilities are that they are either asexual or hypersexual, but if sexual, that they are heterosexual.<sup>254</sup>

In 2023, the United Nations Independent Expert on Protection Against Violence and Discrimination Based on Sexual Orientation and Gender Identity and the Special Rapporteur on the Rights of Persons with Disabilities jointly issued a statement with regards to the violence experienced against disabled Rainbow people. They expressed deep concern about the widely held and dangerous assumption that Rainbow people with impairments require ‘curing’ and ‘correcting’.

This prejudice lies at the root of violence against them. Including practices of correction or conversion and the denial of agency in decisions about their bodies, forced sterilisation, and interventions – medical or otherwise – to which they are subjected.<sup>255</sup>

<sup>251</sup> United Nations Committee on the Rights of Persons with Disabilities. (2022). *General comment No. 8 (2022) on the right of persons with disabilities to work and employment* (p. 1).

<sup>252</sup> Mirfin-Veitch, B., Tikao, K., Asaka, U., Tuisaula, E., Stace, H., Watene, F. R., & Frawley, P. (2022). *Tell me about you: A life story approach to understanding disabled people's experiences in care (1950-1999)*. Donald Beasley Institute (p. 5).

<sup>253</sup> Roberston, S. (2017). *All of us. Minority identities and inclusion in Aotearoa New Zealand*.

<sup>254</sup> Noonan, A., & Taylor Gomez, M. (2011). Who's missing? Awareness of lesbian, gay, bisexual and transgender people with intellectual disability. *Sexuality and Disability*, 29(2), 175–180.

<sup>255</sup> United Nations Human Rights Special Procedures. (2023, October 27). *LGBT persons with disabilities* (p. 2).



## Data on disabled Rainbow people

In Aotearoa, Stats NZ's 2021 Household Economic Survey classified about 16 percent of LGBT+ adults as disabled compared to 12 percent of non-LGBT+ adults.<sup>256</sup> This disparity may be wider among youth, with a 2022 study reporting that about 40 percent of Rainbow young people surveyed identified as neurodiverse or physically disabled.<sup>257</sup>

Youth19 is a study exploring the wellbeing of Aotearoa New Zealand secondary school students with an intersectional lens that provides some insights on the intersectional experience of disabled Rainbow young people.<sup>258</sup> This study draws from surveys with 36,000 young people conducted in 2019. The study found that disabled Rainbow young people reported multiple inequities and challenges. Rainbow young people with a disability or chronic condition compared to non-Rainbow young people without a disability or chronic condition were found to have statistically significant higher rates of the following concerns:

1. greater challenges on family indicators (acceptance, closeness, and safety).
2. higher housing instability and food insecurity.
3. inequities on all school indicators (part of school, teacher expectations, and feeling safe at home).
4. greater challenges in terms of community and friendships.
5. being more likely to have forgone healthcare when they needed it and more likely to report discrimination by healthcare providers.
6. very much poorer mental health and wellbeing

While this study does not address the experiences of conversion practices among disabled Rainbow people, it does suggest that disabled Rainbow youth generally face multiple challenges or particularly serious challenges.

## Experiences of conversion practices

A disabled person-led monitoring report on the United Nations Convention on the Rights of Person with Disabilities found that disabled people reported the experience of denial of sexual and gender identities by health practitioners as a matter of concern.<sup>259</sup> The report also found that disabled people's access to sexual and reproductive health was impeded by "a lack of knowledge around gender affirming healthcare and disability".<sup>260</sup>

Conversion practices on disabled people and those experiencing mental distress has been documented in the Aotearoa context through the Royal Commission of Inquiry into the Abuse in Care. These practices are discussed in a case study report<sup>261</sup> that addresses the abuse that took place at the Lake Alice Child and Adolescent Psychiatric Unit. The report finds that the homophobic and transphobic abuse that took place in the unit has had a profound and enduring impact on those harmed.

Through our engagement, we spoke with survivors who described experiences in religious settings that attempted to change or suppress both their Rainbow identity and their disability. This intersection between being disabled, being Rainbow, and having a religious or cultural identity warrants further exploration in the context of conversion practices. For example, work is occurring by some disabled people and mental health advocates to reduce stigma based on religious beliefs or superstitions that disability and/or mental health distress is a result of a spiritual transgression of an individual or a close relative or ancestor.<sup>262</sup>

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<sup>256</sup> Stats NZ, 2021.

<sup>257</sup> Fenaughty et al., 2022.

<sup>258</sup> Roy, R., Greaves, L. M., Peiris-John, R., Clark, T., Fenaughty, J., Sutcliffe, K., Barnett, D., Hawthorne, V., Tiatia-Seath, J., & Fleming, T. (2021). *Negotiating multiple identities: Intersecting identities among Māori, Pacific, rainbow and disabled young people*. The Youth19 Research Group.

<sup>259</sup> Donald Beasley Institute. (2022). *My experiences, my rights: A monitoring report on disabled people's experiences of health and wellbeing in Aotearoa New Zealand*. New Zealand Disabled People's Organisations Coalition (p. 12).

<sup>260</sup> Ibid., p. 7.

<sup>261</sup> Abuse in Care Royal Commission of Inquiry, 2022, pp. 144–146.

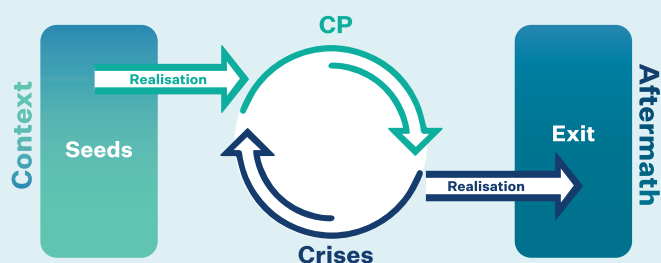
<sup>262</sup> Le Va. (2015, November 2). *Positive messages from the pulpit*.



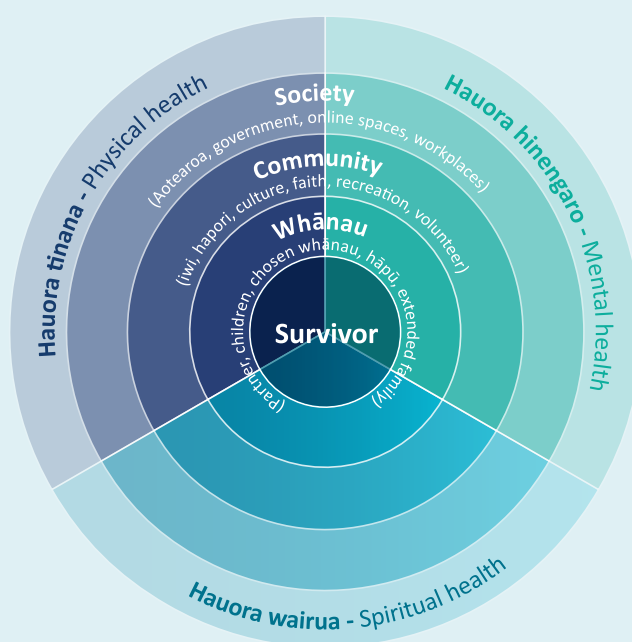
## 8. Supporting and working with survivors

This chapter provides advice on how to support survivors of conversion practices. It includes survivors' requests of their communities and healthcare professionals as well as advice to peers who may be at risk of, or have experienced, conversion practices. It is worth noting that those attempting to exit situations where they are exposed to conversion practices may face significant economic barriers, if they were financially reliant on the community or whānau setting in which it was taking place to meet their basic needs. Escaping conversion practices may require securing safe housing, travel costs, as well as any costs associated with mental health support required to work through the trauma of the experience.

Key to supporting and working effectively with survivors is understanding the life cycle of conversion practices and the pervasive nature of the harm throughout multiple layers of their lives, illustrated in Figures 11 and 12 below and discussed in more detail in chapter 5 of this report.



**Figure 11:** The life cycle of repeated conversion practices until the survivor exits.



**Figure 12:** Model of multidimensional harms caused by conversion practices.

The harms associated with conversion practices are documented in an overwhelming body of literature and peer-reviewed research evidence. Significant research has also been done on how to best support survivors through recovery, which is often not straightforward and can be a lifelong process.<sup>263</sup>

Those facing crises of identity, disembodiment, shame and guilt, anxiety and depression, and loss of social networks need careful and deliberate support from a range of sources, including, for some, affirming health treatment. Acceptance and support to rebuild one's identity is key. Autonomy is centrally important for a survivor in their recovery.

Most survivors of conversion practices have experienced control and misuse of authority. Support for recovery must not mimic these experiences as this risks retraumatising the survivor and setting back their recovery. Rather, survivors must be supported to build their voice and agency, and they should be free to rebuild their own identity free from controlling influences.<sup>264</sup> Friends, whānau, therapists, and supporters should work on providing for survivors' increasing autonomy in all aspects of their life, including any engagement or re-engagement in their previous communities.<sup>265</sup>

## Survivors' advice for communities

- **Validate the survivor's experience** and the harm they have endured. Show empathy and understanding, emphasising their emotions and reactions are valid and justified. Affirm their authentic sexual orientation and gender identity in the same way heterosexual and cisgender people are affirmed throughout their lives. Encourage self-acceptance, self-expression, and the exploration of healthy relationships and connections within the Rainbow community, just as is the case for heterosexual and cisgender people.
- **Create safe and supportive spaces** where survivors can share their stories and, where possible, connect with others who have had similar experiences. Rainbow support groups, online communities, or therapy groups specifically tailored for conversion practices survivors can be invaluable in fostering a sense of belonging and validation.
- **Engage in brave and constructive discussions** so communities learn how to have safer and more evidence-based discussions about diverse gender and sexualities. In the context of faith communities, one survivor explains, "Unless we provide an alternative narrative to conversion practices that can be backed by the church, there is no way this is not going to carry on. It's going to be pushed underground."
- **Provide Rainbow-affirming resources** to survivors and connect them with organisations that provide support tailored to their needs. Affirming resources help with building self-acceptance, self-esteem, and the affirmation of true sexual orientation, gender identity, and gender expression.
- **Suggest mental health support** and encourage survivors to seek support from therapists or counsellors experienced in Rainbow issues and, ideally, recovery from conversion practices. Therapists who are part of the Rainbow community can be best placed to provide safe support. The therapist's role is critical in providing a safe and confidential environment where survivors can process their emotions, address trauma, and develop coping strategies.
- **Educate and advocate** about the harms of conversion practices. Support inclusive events and initiatives and advocate for inclusive and affirming policies that protect Rainbow people from conversion practices and the harmful indoctrination that can accompany them.

**"I'd love to see people becoming aware and more sensitive about the conversation and becoming actively engaged. And not defend conversion therapy as freedom of speech and not think that we're attacking religious freedom and practice. This isn't what I'm trying to attack here. It's abuse. And to recognise that conversion therapy is abuse."** Samoan, male

<sup>263</sup> Jones et al., 2018, 2021a.

<sup>264</sup> Jones et al., 2022b.

<sup>265</sup> Ibid.

## Survivors' advice for therapists

This section outlines survivors' advice for therapists, focusing on trauma and how it impacts the provision of professional support.

Conversion practices are often pseudo-therapies masquerading as professional mental health support. This 'therapy' can cause significant trauma for survivors, which causes complications when they seek mental health support as part of recovery from this trauma.

The very manner in which therapeutic approaches are delivered often retraumatises survivors, particularly if, from the point of view of the survivor, the therapy technique in any way resembles the conversion practices they experienced. This makes it imperative to approach the recovery process cautiously and consider alternative methods of support that may be better suited to the individual's situation and needs.

Even if a therapy technique is reputable and evidence-based, it will be inappropriate and harmful if it mimics the vehicle by which a survivor experienced their abusive conversion practices.

- **Carefully consider which approaches are safest for the survivor**, acknowledging that usual methods and tools, no matter what their evidence base, may risk retraumatising the survivor and would therefore be inappropriate. Avoid any technique that mimics the directive and controlling nature of conversion practices (such as eye movement desensitisation and reprocessing or Gestalt therapy). Even the appearance and layout of the therapy room may be retraumatising.
- **Use trauma-informed techniques** that prioritise safety, trust, and empowerment while addressing the emotional impact of conversion practices. Expect that, while some clients will have experienced major traumatic events, nearly all clients will be processing a large accumulation of microtraumas. Recognise there may be high levels of mistrust in a clinical setting due to historical trauma from counsellors and therapists.
- **Expect less common reactions to therapy** as a result of the combination of exhaustion, striving to achieve perfectionism, and what may be the first time a survivor has had their story listened to. Survivors can experience memory loss, relay conflicting narratives, and wish to spend significant time recounting their story.
- **Support survivors in developing healthy coping strategies** to manage past and ongoing emotional distress. This may include mindfulness techniques, journalling, art therapy, physical exercise, deep breathing exercises, or engaging in activities that bring joy and relaxation. Be patient with survivors who may not have sufficient self-identity to know what brings them joy, or who may be so exhausted by trauma they lack the motivation to work at their recovery.
- **Consider formal diagnoses carefully, including historical ones.** During years of prolonged stress and the related physical and mental health complaints, some survivors report seeing a range of practitioners and being diagnosed with a variety of conditions, often idiopathic or diagnoses of exclusion. This is more common in survivors with long histories in conversion practices. It will be important for some survivors to shed such past diagnoses as they find new hope and self-confidence in their Rainbow identity. Others will be reluctant to shed these diagnoses, even if they experience a reduction in symptoms as they recover. This reluctance is because the diagnoses have or are still providing a level of comfort, allowing the survivor to blame diagnosed conditions for their mental and physical complaints rather than facing the possibility they are a direct result of chronic exposure to mental distress and stress hormones related to conversion practices.
- **Help survivors challenge the internalised shame** associated with their sexual orientation or gender identity. Education, awareness, and engaging with Rainbow-affirming resources will assist in reframing negative beliefs and building a positive self-image. Not all survivors will make progress at the same pace.
- **Support survivors to build resilience** by helping them identify and utilise personal strengths and resources. This may involve developing problem-solving skills, fostering positive relationships, and engaging in activities that promote personal growth and empowerment.
- **Encourage survivors to explore the concept of post-traumatic growth**, which refers to positive changes that can occur following adversity. Encourage them to identify areas of personal growth they would like to explore such as increased self-awareness, resilience, empathy, and a deeper appreciation for their authentic selves. Help them understand how their experiences may contribute to unique strengths and empathy for others as their recovery progresses.
- **At the same time, remember that trauma is likely to continue for the survivor.** They can experience ongoing issues with employment, relationships and marriage, challenging dynamics within the Rainbow community, and repeated negative coming out experiences. Note that family milestones are often a point of regression for survivors. Recognise that trauma associated with conversion practices is unique in that it is associated with what are typically protective factors in any other situation, and because they are still supported and propagated by large, organised, and well-funded parts of society. Those recovering from lived experiences of conversion practices and associated trauma are often doing so in a context where they face ongoing discrimination as a Rainbow person.
- Be prepared to refer them on to someone else who may be better able to support them because that counsellor or therapist is Rainbow themselves.

## A note on intersectionality

A survivor will be affected by their lived experience, which may include overlapping forms of discrimination, for example, transphobia, racism, and ableism. This is often referred to as intersectionality.

In general, the immediate removal of someone from their home or community is not recommended. They may wish to remain due to ties with their whānau and community. This can be especially so for survivors who are Māori, Pacific, or from a family-centric ethnic culture.

The Commission heard from Māori survivors that they wished to be seen as Māori before anything else, and needed to be

able to design and implement a recovery that involved, if possible, ongoing connection with their respective whānau, hapū, and iwi.

For survivors carrying intersectional cultural identities, some Rainbow organisations may not initially be the right space for them to find support. If these spaces bring tension due to clashing cultural and religious influences, this will be exhausting for the survivor and may result in them retreating into harmful elements of their environment.

One therapist described their strong reaction to a new client's obvious and acute discomfort.<sup>266</sup>

**“My primary goal during the intake session was to provide constant reassurance, validation, and a sense of safety in the hopes of creating a mini-corrective emotional experience that would be just enough to bring him back for continued services. In an attempt to be as affirmative as possible, I made the mistake of openly judging the community and family from which he came, and I rushed to reassure him that he had a place in the LGBT community. As discussed, the literature reveals the danger in using such a tactic. In my concern for his wellbeing, I was extremely eager to whisk him away from his abusive family and community into the LGBT community with which he may not yet, or ever, identify. The outrage one feels for the devastating effects such overt hate and discrimination produce may be one of the most difficult emotions for clinicians working with clients post-conversion therapy. It triggers an impulse to ‘rescue’ or ‘save’ the client which, ironically, are some of the same verbs used by conversion therapists to justify their work. This is a sobering realisation.”**

Whakawhanaungatanga is a crucial element in understanding the complexities of a survivor's relational ties to their communities and whānau. This should be prioritised and purposefully considered.

## Research supporting survivors' advice to therapists

This section describes the findings from a 2022 Australian study.<sup>267</sup> It found there were three key components to a successful recovery.

- Access to people who are affirming and with whom a survivor can be freely themselves – especially health and mental health practitioners, family and friends, and survivor support groups.
- Considerable time and internal motivation to enable support to be effective.
- Support to settle conflicting aspects of their identity and beliefs, with the survivor taking the lead in how this is done.

The study also found survivors were helped by practitioners who were educated about:

- conversion practices
- the kinds of challenges faced in indoctrinating environments where they take place
- intersectionality.

A trans woman reported having to educate her therapist that the relationship between childhood trauma/sexual abuse and being Rainbow is not causal, if there even is one.

One Southeast Asian participant noted, “When you put a minority within a minority and then throw the faith stuff in there, a lot of these professionals have no idea how to help. You end up supporting them to support you.”

<sup>266</sup> Horner, J. (2010). Undoing the damage: Working with LGBT clients in post-conversion therapy. *Columbia Social Work Review*, 8(1), 8–16.

<sup>267</sup> Jones et al., 2022b.



Some of the unique complexities of recovery – such as the duality of feeling emotional fatigue at the same time as feeling free for what may be the first time – were also cited as areas where competency in practitioners could be improved.

A bisexual non-binary Christian survivor spoke of the importance of therapists acknowledging dualities like this.

**“I felt this weakness. And being able to have the counsellor actually understand that ... but then also say, ‘here’s how you’re strong’ was important ... And the times where I’ve felt very unheard and unseen by allies or, I guess, people who are trying to be supportive, is when they can’t acknowledge those dualities.”**

Study participants also found therapists made unwanted assumptions about clients’ faith goals and about their leaving or remaining in faith or cultural communities. A trans participant abandoned therapy when asked, “Can you see how it might be delusional for you to remain in your church?”

A Māori participant in this study reported the therapist “definitely encouraged me to preference my queer identity and my secularised world over my faith, when that was really impossible for me.”

A cisgender gay male participant, after clarifying with his therapist that he still identified as Christian, objected to the subsequent forced approach of ‘visualising Jesus coming back into the picture’. “Someone else putting God and Jesus back in like that was really confronting given that wasn’t my own goal.” This participant equally rejected receiving affirming church referrals.

The examples from the Australian study above illustrate the degree to which therapists must avoid operating on ‘auto-pilot’. From our engagement, we understand that doing so risks missing important trends, such as the risk of suicide for survivors who leave conversion practices and find their whānau, friends, and even employers reject them.

**“I had such bad experiences with therapy after I stopped conversion practices. I knew I needed help but everything just reminded me of the counsellors who tried to convert me. I even went to a queer therapist but he kept pushing his favourite method on me. I was like, ‘This isn’t helping, I’m literally sitting here shaking from the PTSD!’ But he kept saying, ‘This really works, there is a lot of evidence to support it.’ He just wouldn’t listen. I felt really traumatised.”** Pākehā, female

Therapists are also advised to treat the first session with a survivor as the only chance to cover safety with them, such as telephone help lines, breathing techniques to manage anxiety, and identifying safe people and places to go to in a crisis. Help the survivor consider and develop back-up plans should they find themselves without work or a place to live.

## Survivors' advice to people experiencing or recovering from conversion practices

- **Build a supportive network.** Develop and nurture relationships with supportive family members and friends or allies who can provide love, acceptance, and non-judgemental understanding. In some existing relationships, survivors may need to set boundaries. Building a strong support network helps to counteract the isolation and alienation that often follows an exit from conversion practices. Survivor support networks can be an excellent source of peer connection.
- **Engage in survivor peer support.** A nationwide conversion practices peer-support network (<https://outline.org.nz/conversion-practices-survivor-network>) was launched in late 2023. Connection with fellow survivors is key to breaking down isolation, self-blame, and self-stigmatisation. All survivors are encouraged to engage with the support the network will offer.
- **Practice self-care** by engaging in activities that bring joy and relaxation. Try a range of different things because it's normal to not know what helps when you have been focused on pretending to be someone else for so long. Develop daily coping strategies that support emotional wellbeing, for example, look after daily sleep, eating, and hygiene routines as best you can.
- **Cultivate self-compassion.** Over time, self-care leads to becoming someone who is self-compassionate. This involves acknowledging and validating your emotions, challenging self-blame, and embracing self-acceptance and self-love. Use kind words about yourself repeatedly.
- **Engage in self-reflection** from a foundation of self-care and compassion to better understand yourself, your values, and your authentic identity. This process of self-discovery and acceptance can help build self-esteem and resilience. Self-reflection can also build an understanding of how indoctrination from communities that you belonged to, rather than one's own actions, drove participation in conversion practices.
- **Work with mental health professionals.** Most survivors find it helps, or is even necessary, to work with a mental health professional. A Rainbow-affirming professional can help you develop strategies to assist you to move towards greater wellbeing and an authentic expression of identity.

**“I dove into all things queer – queer history podcasts, TV shows, books, movies – you name it. I had been so sheltered and indoctrinated – it left me feeling dumb and like I was always making mistakes around queer people. I needed new community, and for a while that took the form of online content, until I could establish new relationships.”** Pākehā, male

## Survivors' advice to people working on abolishing conversion practices and protecting Rainbow rights

- **Make use of current legislative mandates** especially to address cases where conversion practices persist within deliberately misleading framing, for example those that claim to be ‘therapeutic interventions’.
- **Disseminate educational content about diverse takatāpui, Rainbow Māori, and MVPFAFF+ Pacific peoples**, including historically accurate information about the existence and acceptance of these identities pre-colonisation. Enabling survivors to share this information themselves will benefit those at risk of, or those experiencing, conversion practices. They will be able to see their own experiences reflected and validated.
- **Ensure any resources developed are culturally and linguistically diverse** to reflect all major Pacific languages, Mandarin, Arabic, Hindi, Farsi, Ethiopian, Somalian, Tamil, Thai, Vietnamese, and simplified Chinese.<sup>268</sup>
- **Ensure any resources developed are accessible** and are available in alternative formats, such as New Zealand Sign Language, Braille, large print, audio, and captions.
- **Build safety into all marketing campaigns and approaches**, noting that vulnerable individuals may not be able to safely access resources or content that may out them. Accessing information and resources must not put people at further risk of harm or violence.

**“What will end conversion therapy is educating a generation of people so that they know that being queer is OK. No queer child will be born into a New Zealand that accepts or tolerates the erasure of their identity.”** Pasifika, queer

<sup>268</sup> This reflects the requests of survivors we engaged with, and we acknowledge that there are further languages and cultures that should be catered for.

## Survivors' advice for religious communities

Over a period of 18 months, the Commission has heard from conversion practices survivors and Rainbow religious people, including at the Awaken | Maranga Mai 2023 conference, about what would make religious spaces safer. Their advice is divided into six focus areas: teaching, prayer, worship, ministries and groups, community culture, and physical and other tangible spaces.

### Teaching

As a form of education, religious teaching will be most effective if it is flexible and adapted to the needs and circumstances of those being taught. As with any education setting, participants being able to see themselves reflected in teaching material is key to learning. Survivors provided the following advice regarding religious teachings.

- **Reflect on the teaching programmes and materials you use** and assess whether they are inclusive of Rainbow people and experiences. You might find that, while they do not actively discriminate against Rainbow people, they do not represent them or their experience, for example, same-sex relationships or same-sex couples with children.
- **Improve Rainbow representation in your teaching materials** and include messages of affirmation for Rainbow people. You may wish to seek the advice of Rainbow people before doing this. Alternatively, leaders of religious communities that are already affirming may be able to help.
- **'Un-gendering' your language** means moving away from the idea that all people are either male or female and making space for those whose experience is different. Instead of the gender binary of 'he' or 'she', use neutral terms like 'they', 'them', or 'their'. Gender-neutral terms are already used when gender is unknown, for example, 'Someone has lost their wallet'. When we consistently use gendered terms, especially to refer to God (as 'he'), we reinforce the importance of the gender binary and male dominance, especially to people who are struggling with its impact on their lives and identity. This also applies to worship, prayer, and liturgy.
- **Build in time to discuss the hard questions** on your doctrine. This will rely on the willingness of Rainbow people within your community to take part. Ensure you create a safe space when you do this, with a solid trusting relationship as a foundation. People taking part need to know they will not be judged but received openly. This kind of practice also provides a rich learning opportunity for those outside the Rainbow community and for intergenerational learning.
- **Be transparent about your teaching** and your journey towards creating a more inclusive programme. This will give people, including potential new community members, the information they need to decide if your space is for them.

### Prayer and liturgy

Prayer is typically offered with the welfare of people in mind. It is likely that, at some time, you will wish to pray for a Rainbow person in your community. Understand they may have boundaries to protect their privacy and these need to be checked before they are included in prayer.

Prayer has also been a channel for conversion practices that deny Rainbow people their rights, cause significant harm, and are now unlawful under section 5 of the CPPLA if done towards Rainbow people with the intention of changing or suppressing their Rainbow identity. The motivation behind prayer needs to be examined and monitored. This, and some traditionally held attitudes, may cause Rainbow people to be nervous about being prayed for by others.

Survivors provided the following advice regarding prayer and liturgy.

- **Review the prayers and liturgy offered in your space.** If you think they may cross the line into a conversion practice, consider reaching out to the Commission. We can provide advice without bias or judgement and refer you to further sources of education about conversion practices.<sup>269</sup>
- **Get consent before praying for someone.** Consent applies to topics of prayer and to physical touch during prayer interactions. Touch in this context could look like placing your hands on someone's head or shoulders, and this should not be done without asking first.
- **Privacy should be taken seriously when it comes to prayer.** Be careful about what personal information is being shared about a person being prayed for and in front of whom. All personal information, but especially about a person's Rainbow identity or their journey in this context, needs to remain under the control of that person. Avoid public prayer disclosures.
- **Diversify prayer.** Aotearoa is becoming an increasingly diverse and inclusive society. Diversify prayer and liturgy to reflect this. Consider expanding prayer into music, art, written, and other verbal outlets.

### Worship

Worship is often a moment where the entire community comes together. This provides a good platform for modelling inclusive attitudes and creating a place of safety for all. Survivors provided the following advice regarding worship.

- **Consider the language used in worship** and whether it could be unintentionally excluding some community members. Some traditional songs may no longer be appropriate. As with teaching material, consider using gender-neutral terms.

<sup>269</sup> Human Rights Commission, n.d.a.

- **Invite diversity in worship.** What does the make-up of your gatherings look like? Can people from different demographics, cultures, and lived experiences see themselves represented and comfortably participating? Who has created the material or music used? Who is leading? Consider exploring worship practices that resonate with ethnically diverse Rainbow communities, takatāpui, and MVPFAFF+ people.
- **Be open to embracing flexibility in worship.** People who do not wish to participate at full capacity may step in and out of spaces where organised worship is conducted. Provide easy ways for people to do this.

### Leadership and groups

This includes the full range of leadership, ministry, and social groups as well as other volunteer opportunities. For some in the Rainbow community, strict gender binaries make them feel excluded. When groups are organised around traditional gender roles, Rainbow people will not feel welcome. Survivors provided the following advice regarding ministries and groups.

- **Review the names of your ministries or groups.** Do they have gendered titles? If so, do they need to have them? Consider renaming groups to reflect their activity or purpose, for example Sewing Group or Prayer Breakfast. Have a wide range of options that are promoted as open to all.
- **Review the organisation of ministries and groups** as an opportunity to hear from your community. Consider consulting with them on your current groups and ask for feedback on how to further cater to their needs.
- **Provide opportunities for leaders to participate in Rainbow competency training or upskilling.** Such training will equip leaders to include and empower Rainbow people in their groups. This help will pave the way for Rainbow people to step into group leadership roles if not in them already. This will also provide important visibility of Rainbow people in leadership roles to younger members of the community.

### Community culture

Community culture is the foundation of a sense of belonging and support for members. This is key for Rainbow people who face discrimination in religious settings, as well as wider society, and experience disproportionately negative mental health outcomes compared to other groups in Aotearoa.<sup>270</sup> Fostering a shared identity and set of values that encourages your community to accept, include, and celebrate Rainbow people can be achieved with leadership and simple actions. Survivors provided the following advice regarding community culture.

- **Review how cultural events are framed and who is invited.** Consider giving proactive signals that the Rainbow community is included. For example, on Mother's Day and Father's Day, communicate that you are celebrating all people who help to raise children, including Rainbow parents, grandparents, and other whānau members.
- **Consider having non-religious events.** When your community celebrates events, consider whether you need to include a religious element. Some Rainbow people who are starting to reconcile their faith and Rainbow identity will appreciate the chance to engage with their religious community without overt faith content. Also consider celebrating events that may uplift your Rainbow community like Pride Month.
- **Create space to have Rainbow-specific conversations and discussion.** These might be physical spaces, times in the calendar, or otherwise. It takes courage for Rainbow people to join discussions about their existence in religious spaces. Intentionally creating safe ways for them to have these conversations means they can participate without fear of judgement. Be clear about what is acceptable respectful discussion and behaviour.

### Physical and other tangible spaces

As one of the first signs of community culture, your physical space can speak volumes about your accepting and inclusive religious community. Making small changes or additions to your physical space is one of the most straightforward ways to welcome and support Rainbow people. Survivors provided the following advice regarding physical and other tangible spaces.

- **Assess what is displayed in your space.** Is there anything that signals to Rainbow people that they are welcome or unwelcome? You may wish to consult someone from the Rainbow community about this.
- **Using visual signs of affirmation** like posters, flags, or stickers to communicate the space is safe and welcoming for the Rainbow community is a simple way to promote inclusivity. Consider placing a small Pride flag or poster with a Rainbow-affirming message in a common area.
- **Review the layout of your bathrooms.** Some transgender and non-binary people will access bathrooms that align with their gender, while others need to use gender-neutral facilities. Providing gender-neutral bathroom options supports transgender and non-binary people to safely access these facilities. What this looks like will differ in every space – the input from someone in the community can be valuable here.
- **Check your faith community's online presence.** Your website and social media pages provide great opportunities to be transparent about your journey to affirm Rainbow people and give assurance to any new members seeking information.

<sup>270</sup> Stats NZ, 2022; Fenaughty et al., 2021.

## What about sacred texts?

Becoming an accepting and inclusive church does not necessarily mean putting aside traditional religious texts or changing your view on the authority of these texts in the life of your community.

For example, theologians and others who advocate for an inclusive interpretation of scripture often refer to six well-known Bible verses used against homosexuality as ‘clobber verses or passages’. Many posit that these few verses have been weaponised to justify discrimination and exclusionary treatment of Rainbow people within church life. In response, a rich discourse and scholarship

that challenges those traditional interpretations and assumptions now exists.<sup>271</sup> These inclusive interpretations are available for Rainbow communities and others who cherish their sacred texts and acceptance of diverse genders and sexual orientations.

For an introduction to affirming Biblical interpretations, see *Join this chariot*<sup>272</sup> and *Strengthening solutions for Pasefika Rainbow*.<sup>273</sup> For more in-depth analysis, visit theologian and former Pastor Amanda Pilbrow’s website [www.alreadyenough.co.nz](http://www.alreadyenough.co.nz).

## Recovery for Māori survivors

This section provides advice from survivors as to how best to provide support for Māori who have experienced conversion practices.

### Supporting Māori to recover from conversion practices

Māori survivors of conversion practices may need to unpack the layers of cultural supremacy, both colonial and religious, that have been used to suppress their identities. Some Māori survivors of conversion practices clarified to the Commission they were Māori first and that different aspects of themselves cannot be viewed in isolation.

When considering how to help Māori recover from conversion practices, it is important to remember the role of whānau and the impact disconnection from whānau can have on an individual. Where possible, acceptance and support by whānau members will minimise risks to harm for those susceptible to conversion practices. Rather than the survivor being extracted from communities, the harm needs to be extracted from communities. Acceptance, support, and inclusion align with the key principles within te ao Māori of aroha, awhi, manaakitanga, whanaungatanga, and whakapapa. Employing these principles may help to heal relationships damaged by conversion practices.

In our engagement, survivors wanted to see mediation processes focused on restoring relationships and on wider whānau experiences. Mediation, like any other process Māori survivors become involved in, should include the option of using kaupapa Māori models.

Where whānau relationships cannot be repaired immediately, or at all, Māori survivors may need support in overcoming the loss of their sense of cultural identity. This may be through connecting with new communities who affirm them as Māori. Connecting with groups that have the same Māori cultural values may help to prevent a further breakdown of identity. However, for someone who has internalised judgement against certain values or aspects of the environment they have come from, this may be harmful if suggested too soon. When one aspect of a Māori person’s wellbeing is supported, it is important to consider that in the context of the other challenges they face.

**“I carried that ‘You’re not good enough,’ ‘You’re not worthy’, that anxiety through to adulthood. Those lasting effects of anxiety – avoidance, not wanting to cause conflict even to the point where I won’t even share my opinion because I don’t think it will matter. You know, those are lasting effects from that time. And I was an adult going through it. Imagine if [a young person] was going through it. Unimaginable. I don’t know if they’d survive it. It would break them.”** Māori, non-binary

<sup>271</sup> Anderson, C. (2009). *Ancient laws and contemporary controversies: The need for inclusive biblical interpretation*. Oxford University Press; Keen, K. R. (2018). *Scripture, ethics, and the possibility of same-sex relationships*. Eerdmans Publishing; Vines, M. (2014). *God and the gay Christian: The biblical case in support of same-sex relationships*. Convergent Books.

<sup>272</sup> InsideOUT. (2021). *Join this chariot: Christian schools supporting Rainbow students’ wellbeing*.

<sup>273</sup> Brown-Acton, P. (2014, March 4). *Strengthening solutions for Pasefika Rainbow* [Keynote speech]. GPS 2.0: Growing Pacific Solutions for our Communities National Pacific Conference, Auckland, New Zealand.



Throughout the Commission's engagement with Māori and the Rainbow sector, the concept of intergenerational sharing or tuakana-teina relationships was suggested as helpful to the recovery process. This could include passing down examples of historical and whānau acceptance of takatāpui or Rainbow Māori. It could also be driven by Māori leaders in the Rainbow community who have lived experience and can help survivors navigate through the challenges they face.

The importance of cultural humility from those who interact with Māori survivors in support services was also highlighted. Assumptions about an individual's exposure to Māori culture, or whether they have or want personal connections to a community, should be avoided as each survivor will have a different experience and different goals.

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## Recovery for survivors in under-represented communities

This section provides advice from survivors from under-represented communities as to how best to provide support for those who have experienced conversion practices.

### Supporting Pacific peoples to recover from conversion practices

Supporting Pacific peoples in Aotearoa to recover from conversion practices needs to happen with an understanding of how the elements of family, culture, and faith intersect. The loss of one of these elements is likely to be connected to the loss of others and have compounding negative effects.

Survivors may feel that being accepted in their MVPFAFF+ or Rainbow identity will result in the loss of their identity as a member of their family, community, culture, or faith. What should be protective factors in their lives can become risk factors. Exclusion by friends, family members, and leaders can make MVPFAFF+ and Rainbow people afraid to accept themselves or make them feel as though they must face the burden alone.

**“Before I came out, I was so scared for the longest time. Something that stopped me from coming out was a sense of responsibility to the people that looked up to me. I was so worried about what it would do to them.”** Samoan, male

Despite harm from family members and church leaders, Pacific survivors have spoken about being reluctant to report their loved ones for conversion practices. Some feared deportation, others have issues with trust due to previous injustices, and others did not think they would be helped by institutions that had previously harmed them or their community.

Many survivors were still respectful of their family and wanted to find ways to repair relationships that had broken down rather than cut ties. When helping Pacific peoples recover from conversion practices, it is important not to make assumptions about how they want to navigate relationship breaks or people who have caused them harm.

Lack of immediate support when navigating loss of community is also a key consideration in supporting Pacific survivors, as Pacific Rainbow youth also face increased rates of housing instability.<sup>274</sup> Most Pacific peoples in Aotearoa reside in Auckland.<sup>275</sup> It may therefore be easier to access appropriate mental health supports, safe community spaces, and inclusive and culturally adapted education in this region. In other parts of Aotearoa, MVPFAFF+ and Pacific Rainbow people may feel culturally isolated and extra assistance may be required to rebuild their sense of community.

If excluded from their community, Pacific peoples may not be able to maintain their culture. Pacific communities in Aotearoa are often tied together through shared migration experiences and maintaining strong connections to their families in Pacific countries. Once excluded, survivors may have no one to share their culture with, for example, using their language, eating cultural dishes, or carrying out cultural practices. It may be helpful to connect survivors with affirming groups who share the same cultural values and expressions.

There are different values and practices within Pacific peoples' cultures that can help to bridge gaps and hold space for each other. The practice of talanoa or Pacific frameworks of mediation can be useful in bringing people together and fostering a space for respectful conversations. The ability to employ culture, faith, and family in their protective forms may help. For those who cannot repair existing relationships, this protection could be achieved through bringing together a 'chosen' family, affirming Pacific faith groups, and MVPFAFF+ and Rainbow-friendly cultural activities, including art.

Finally, Pacific survivors told us many will play down their experiences of conversion practices. It may take time to build rapport even if they have actively come to you for help. It is important that support services make space for this process and acknowledge it can be difficult for Pacific survivors to share their experiences.

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<sup>274</sup> Tiatia-Seath et al., 2021.

<sup>275</sup> Ministry for Pacific Peoples. (2020). *Pacific Aotearoa status report: A snapshot*.

## Support for South Asian and other diverse ethnic communities

The following advice has been discussed with ethnic Rainbow survivors of conversion practices. They draw on a combination of pre-colonial cultural practices that promote acceptance for Rainbow identities, as well as community-relevant channels and strategies that allow for educative discussions. We encourage diverse ethnic communities to accept and embrace their Rainbow community members. We suggest that community leaders or those working with ethnic communities must work to eliminate conversion practices if they occur. Those in leadership roles should also read and apply where relevant recommendations from the previous two sections for Māori and Pacific survivors.

We heard advice about this from ethnic Rainbow survivors.

Learning about, teaching, and celebrating the existence of diverse Rainbow identities, prior to colonisation, is a chance for ethnic communities to revive these unique histories through storytelling and advocacy. This would bring a greater sense of pride, belonging and empowerment to ethnic Rainbow communities.

**“An example to tap into today, that is still inherently practised, is the traditional Kandyan dance of Sri Lanka. Most diaspora kids typically have a period of their life where they train in this art. This type of dance encourages you to move between gender roles and also embody a third space where gender does not exist ... The traditions and whakapapa are there, they just need to be wrangled out. Wrangled out for our people by our people. To awaken these narratives, we need to tap into traditional whakapapa holders that remain in the homeland.”** Sri Lankan, queer

The high value that ethnic communities place on respect, relationships and reaching the fullest individual potential could be used to support Rainbow people so they thrive within their communities. The following suggestions were offered by participants.

**“Family-friendly activities and initiatives will be welcome to have these conversations. The Zoroastrian community thrives on community events.”**

Parsi migrant, Rainbow ally

**“Reaching into the community needs to be designed by those in the community. When it comes to resources and education. Don’t underestimate the power of the WhatsApp group!”** Sri Lankan (Sinhalese and Burgher descent),

Christian background

Discussions around Indigenous and pre-colonial views and practices that appear in the previous sections for both Māori and Pacific communities will also have some resonance with ethnic communities. Over and above those commonalities, the following initiatives and actions have been reported as restorative and healing for ethnic Rainbow communities and their allies.

- Broader visibility of ethnic Rainbow communities. Participants noted that the visibility of ethnic advocates involved in banning conversion practices in Aotearoa and supporting Rainbow youth has helped raise the profile of some of the issues facing Rainbow people, in particular, those of South Asian and Pacific descent.
- The visibility and celebration of the arts of ethnic Rainbow communities as a form of discourse, advocacy, and engagement. A participant noted the work and exhibitions of a renowned gay multidisciplinary artist that gives visibility to the South Asian Rainbow community.

**“They are a great example of someone who has been accepted into the community but sadly it took him to be in the limelight for the community to see cultural profitability from it. Acceptance of Rainbow folk is transactional. Poster people create acceptance – like Freddie Mercury.”** Parsi

migrant, not publicly out

- Awareness raising of the issues experienced by Rainbow people within ethnic and migrant communities such as conference presentations by Adhikaar Aotearoa, Ethnic Rainbow Alliance, and Rainbow Path. This awareness raising helps people who come from those communities to see visible representation and relatable narratives to support their own development. It is also helpful for others outside those communities to know how and where they can be of assistance.

However, it has been noted that most of the ethnic Rainbow community working for acceptance of Rainbow identities are young people, which is causing exhaustion for them.

**“Fatigue as a consequence of navigating their intersectionality and also educating their parents and other elders in their community.”** Fijian Indian migrant, queer

We recommend resourcing culturally safe and relevant, survivor-led education and prevention. This will help to mitigate against this dynamic of a comparatively youthful cohort of Rainbow individuals and groups leading the charge for more inclusive practice and attitudes on behalf of their wider communities.

### Supporting transgender and non-binary people to recover from conversion practices

For transgender and non-binary survivors, acceptance and affirmation of their gender identity and expression is crucial. This is the case throughout all areas of their lives, including within whānau, schools, teams, communities, religious and faith spaces, and healthcare. Some, but not all, trans and non-binary people require access to gender affirming healthcare. Their healthcare practitioners, parents, and guardians need scientific and evidence-based solutions to support transgender and non-binary people. A Member of Parliament has said:<sup>276</sup>

**“Health practitioners would write to us and say we have seen people that have gone through [conversion practices] and we have to undo all that damage before we can even get to the path of people accepting and embracing their own feelings.”**

Affirming mental health support is also key. Affordability is especially important. A study focused on young Rainbow people in Aotearoa found that those who reported current material deprivation were amongst the groups more likely to report they had experienced conversion practices.<sup>277</sup>

**“Going to a counsellor who was Rainbow affirming was really wonderful and allowed me to work through some of the trauma that I had. There were also these relationships with other people in the queer community that really helped me to let go of the shame that I had, and to heal.”**

Pacific, non-binary

When supporting transgender and non-binary people out of conversion practices, there must be sensitivity to their individual journey without assumptions about what they want or need. For example, someone with a diverse Māori or Pacific gender identity could have different expectations and priorities for gender-affirming healthcare than someone who is Pākehā or from a different ethnic community. In cultures where gender roles are strictly divided, a priority may be finding other ways to stay connected culturally.

Family acceptance and support is important for transgender and non-binary people. Comprehensive education about gender diversity and the harm caused by conversion practices is key to recovery and to building support within families.

<sup>276</sup> Pooley, 2022.

<sup>277</sup> Fenaughty et al., 2023.



## 9. Recommendations for a world free from conversion practices

Despite many signals locally and internationally that hate towards Rainbow people is on the rise – and the fact that only limited short-term government funding was made available to support a community response to conversion practices – it is important to remain optimistic. With the support and collaboration of groups across Aotearoa who have not traditionally worked together, there is hope that the goal of an Aotearoa free from conversion practices can be achieved.

A primary aim of this report is to highlight survivor experiences along with their needs and their advice for others. The insights of people with lived experience are critical to effective change, and survivors need support to lead this work. The Commission engaged with conversion practice survivors over 18 months. Throughout that time, as well as during the Select Committee process, many recommendations emerged. If adopted, they would advance the rights of those vulnerable to conversion practices and the survivor community and make Aotearoa safer for all Rainbow people.

The law changes that made conversion practices unlawful in Aotearoa New Zealand were an essential step in eliminating these practices and the profound harm they cause. However, unless concerted efforts are made to address the conditions that give rise to conversion practices, they will likely continue. Through our engagement, we have already learned that conversion practices and related activities are happening in increasingly subtle forms, often without explicitly mentioning an anti-Rainbow stance and instead making reference to spiritual healing, mental health, and religious liberty. The recommendations in this report identify what can be changed to help to eliminate conversion practices for good and who has the power to change them. They also identify the steps that need to be taken to ensure there are adequate supports in place to enable those who exit these practices to heal.

The burden of eliminating conversion practices should not rest on those who have experienced them. To end conversion practices, we need to shift the harmful ideologies that enable them, while still respecting the right to freedom of religion and belief, and actively build an inclusive society that values and protects all Rainbow people. An all-of-society approach is necessary to ensure the safety and wellbeing of Rainbow people.

Government must play a significant role in ensuring that the CPPLA is effectively enforced and supported with meaningful policy and resourcing. Government should also support faith communities, community organisations and groups, healthcare professionals, whānau, families, and individuals to take the steps that are required to stamp out these practices. Government should resource evidence-based approaches to deepening public understanding of conversion practices, shifting the harmful ideologies that underlie them and supporting communities to become more inclusive and safer for all Rainbow people.

There are specific recommendations here for the media, for religious and faith communities, for mental health and medical healthcare practitioners, and for people who work with children and young people. These groups each have specific power and influence in creating the conditions in Aotearoa to end conversion practices and supporting those who experience them to exit and heal from them.

The overarching approach to addressing conversion practices for Māori needs to focus on enacting tino rangatiratanga. Because of the role that colonisation has played in creating the conditions for conversion practices, there are also specific recommendations to support Māori communities – revitalising mātauranga Māori can counter and prevent conversion practices – and to support Pacific communities.

All of us can encourage conversations about how to better support and affirm Rainbow people in our whānau, clubs, schools, and community. We can speak up when we see or hear homophobic and transphobic mis- or disinformation. We can encourage our family, colleagues, and community to engage with research and resources that are based on science and inclusive of the Rainbow community.

This will require effort from all parts of society. We can all play a part in achieving an Aotearoa free from conversion practices.

We set out the list of recommendations in full below, organised by primary audience. A summary of the Commission's priority recommendations is also included at the front of the report.

Survivors and the Commission make the following recommendations.

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## To Government

### 1. Review and strengthen the Conversion Practices Prohibition Legislation Act 2022 (CPPLA)

Stronger measures are needed to better protect survivors and people at risk of conversion practices from harm. A review of the CPPLA's operation should consider amendments to address protection gaps identified by survivors, including:

- considering options for protection for intersex people, especially infants and children, from medical interventions that could be deferred
- reconsidering the high threshold for criminalisation of conversion practices directed at adults
- removing the requirement for the Attorney-General's consent for prosecution, as the Commission has consistently recommended
- consider a ban on removing a person from Aotearoa for conversion practices.

### 2. Considering a ban on removing a person from Aotearoa for conversion practices. Place human rights and te Tiriti o Waitangi at the centre of policy and decision making

Placing human rights and te Tiriti o Waitangi at the centre of policy and decision making about conversion practices will help to ensure all communities are represented and supported and will contribute to the enactment of tino rangatiratanga.

### 3. Fund the Commission to deliver conversion practices education within the education, social, and health sectors and in religious/faith communities

Ongoing funding is required to continue survivor-led education and prevention work. Greater public awareness of the harms of conversion practices is needed as well as accurate information about sexual orientation and gender identity. This would help to debunk myths and stereotypes that fuel support for conversion practices. Stakeholders have told us this type of education is most effective when participants can engage face to face with survivors and ask sensitive questions.

### 4. Fund research to better understand conversion practices in Aotearoa

The peer-reviewed research available on conversion practices in Aotearoa comes from a smaller number of publications than is ideal. Each subsequent article uncovers new and concerning information about the ongoing prevalence of conversion practices. More research is needed to understand what continues to motivate people to participate in conversion practices, what the harms are over the long term, and what would help to bring conversion practices to an end.



## 5. Fund sources of survivor support

Well-funded psychosocial and other support services, including via ACC and the Rainbow sector, are needed to ensure survivors have the best chance to regain wellbeing and build an affirming, safe community around themselves. Survivors have specifically asked for a peer-support network to be set up and sustained. This is an important source of wellbeing for people who are often misunderstood by everyone around them.

## 6. Empower Rainbow organisations

Adequate and appropriate funding is needed for organisations and initiatives that empower Rainbow communities to advocate for their rights, raise awareness about the harms of conversion practices, and provide support to survivors. Rainbow communities need to be involved early and authentically in policy and decision making.

In addition, it is the Commission's view, based on our engagement with survivors and other stakeholders, that the following two recommendations can help mitigate against the multiple varying conditions that lead to conversion practices in the first place. It will also help ensure survivors are better understood and supported.

## 7. Improve consistent access to robust relationships and sexuality education

We acknowledge the national curriculum currently encompasses inclusive, affirming, accurate, and evidence-based information about sexual orientation, gender identity and expression, and Rainbow issues. Nevertheless, the lack of legal mandate to deliver this education consistently across all educational settings in Aotearoa is of concern and allows for the perpetuation of discrimination, marginalisation, and abuse of Rainbow people in some communities. All students in Aotearoa deserve an education that reflects the diversity and reality of our population and the world, no matter where they grow up.

## 8. Establish an agency to encourage and support collaboration

An office or ministry with responsibility for improving outcomes for Rainbow people would encourage collaboration and partnerships among policy makers, activists, mental health professionals, educators, religious leaders, Rainbow organisations, and conversion practices survivors. By working together, sharing resources, and aligning efforts, a stronger collective impact can be achieved to eliminate conversion practices.

# To the Rainbow community

## 9. Recognise the significant impact you can have on the mental health of someone leaving conversion practices and entering your community

Provide a place of safety and acceptance for survivors noting that, even though the anti-Rainbow parts of their experience may be confronting, survivors are part of the Rainbow community and need support. This is especially the case for survivors from Māori, Pacific and ethnic communities who wish to preserve links to whānau, family, and communities that may have harmed them.

# To the wider community

## 10. Show compassion

Conversion practices survivors are often misunderstood. Avoid judging them and the experiences they've been through. Learn about the coercive power of indoctrination and how that can leave Rainbow people with no choice but to try to change or suppress who they are.

## 11. Engage with Rainbow resources and content

Even if you are already affirming, listening to people's stories and seeking to better understand the stigma, exclusion, and discrimination Rainbow people face will help create an Aotearoa where conversion practices would be unthinkable. Rainbow organisations provide a range of affirming resources to help.

## 12. Do not support fear-based mis- and disinformation

False and fear-based narratives and mis- and disinformation about Rainbow communities are being actively promoted on social media. These politicise issues and dehumanise Rainbow people. When you see these messages, please do not support or spread them.

## 13. Speak up

If you are part of a community that includes some conversion ideology, use your voice to encourage people to engage with research and resources that are based on sound scientific principles and are inclusive of the Rainbow community.

## 14. Affirm your whānau members

Encourage a family conversation about how you can better support and affirm the Rainbow people in your whānau and community. This could start with an acknowledgement of homophobic or transphobic language or jokes and how they should no longer be tolerated.

## To media

### 15. Assess bias when reporting on Rainbow issues

Avoid sensationalism and ensure a diverse range of voices are presented on any issue that affects Rainbow people. Avoid providing a platform for misguided debate about the existence or rights of transgender, non-binary, and gender diverse people. Acknowledge that doing so compromises the safety and rights of these communities and that this discourse perpetuates the existence of conversion practices in Aotearoa.

## To religious/faith communities

### 16. Listen to survivor stories

Their stories offer valuable lessons and opportunities for religious leaders and members to reflect upon and consider where changes can be made. Actively engaging with these narratives demonstrates empathy and validates the trauma endured. Investigate options for their subsequent application to denominational or local policies and practices.

### 17. Engage research around Rainbow-based religious abuse and harm caused by conversion practices at the highest levels of your faith group

Conversion practices are rooted in a wider system of beliefs and practices that eventually cause spiritual abuse. Upon completion of the research, develop and formally adopt health and safety policies, and education and prevention programmes, that recognise the harm caused and mitigate against the practices causing harm.

### 18. Engage research around theologically inclusive and affirming interpretations of religious teachings at the highest levels of faith group

Commence a review process of reckoning with religious texts and teachings that do not affirm Rainbow people. Engage with peer-reviewed evidence, lived experience testimonials, theological developments, and inclusive interpretations with an open mind. Recognise important, historical advancements in how religious communities understand and respond to key issues like slavery, the oppression of women, and now, hopefully, the full inclusion of Rainbow people. Co-produce action plans with theologians, clergy, survivors, and Rainbow lived experience people that both educate and disseminate findings from your review process to your stakeholders.

### 19. Empower Rainbow people in your communities

People with lived experience hold invaluable insight and perspective when it comes to fostering an affirming and inclusive community. Empowering them must be done respectfully, acknowledging the burden that is being placed on a group of people that have historically been – and still are – oppressed.

### 20. Engage with resources about conversion practices that have been tailored to religious communities

This should include resources that support religious communities in becoming inclusive of Rainbow people.

## To mental health and medical healthcare practitioners

### 21. Develop professional guidelines

Develop clear guidelines and ethical standards that explicitly denounce conversion practices and outline processes to protect people when they disclose that they have been through conversion practices.

### 22. Prioritise tailored training

This should encompass Rainbow-affirmative care, cultural competence, and understanding the unique mental health needs of Rainbow people, particularly survivors of conversion practices.

### 23. Advocate for change within your networks

Survivors have told us conversion practices that occur in mental health and medical healthcare settings can go unnoticed. Survivors need practitioners to dismantle the environments that allow this to occur and advocate for their wellbeing.

## To those who work with children and young people

### 24. Establish clear organisational policies and procedures to deal with instances of conversion practices or disclosures of conversion practices

Policies and procedures should be informed by the particular protection of children in the CPPLA and the law relating to children's decision-making capacity. Ensure organisational capability to know how to recognise conversion practices and be clear on the rights of the young people with whom you are working.

## To Māori communities affirming takatāpui

Revitalising mātauranga Māori (Māori knowledge) can counter and prevent religious and culturally motivated conversion practices and ideology. Tangata Whenua can exercise tino rangatiratanga to develop approaches that work for Māori communities. The Commission shares recommendations based on engagement with survivors and informed by best practices to support takatāpui and Māori survivors of conversion practices.

### 25. Make space for decolonising perspectives

Allow for discussions and reflections on the impact of colonisation on tikanga Māori and mātauranga Māori. Learn about and be open to hearing about the negative impacts of colonial and missionary influences that can contribute to homophobia, transphobia, and other forms of discrimination perpetuated within Māori communities.

### 26. Support cultural revitalisation

Embrace and revitalise mātauranga Māori, customs, and values. Celebrate and honour diverse expressions of Māori identity, including those of takatāpui, within cultural practices, language, arts, and storytelling.

### 27. Restore inclusivity in kawa and tikanga

Review and restore or adapt kawa and tikanga to ensure they are inclusive of takatāpui.

### 28. Promote inclusive whānau and community spaces

Foster inclusive and supportive whānau and community spaces that affirm diverse people. Demonstrate and encourage open dialogue, understanding, and respect for all members of the community, regardless of their sexual orientation, gender identity, or gender expression.

## To Pacific communities affirming MVPFAFF+ people

As Aotearoa increasingly embraces Indigenous knowledge, it becomes less tolerable to propagate harmful imported beliefs. Affirming MVPFAFF+ individuals within Pacific communities while respecting religious faith is a delicate balance. Pacific peoples need to lead efforts to create more acceptance and safety for people living at the intersection of being Pacific, MVPFAFF+, and religious.

### 29. Celebrate the range of Pacific identities

Recognise and celebrate the range of identities and intersectionality within Pacific communities. Acknowledge that Pacific peoples value their cultural heritage alongside their sexual orientation, gender identity, and gender expression. Promote inclusive approaches that affirm the entire person.

### 30. Respect the diversity of Pacific views

Recognise and validate the diversity of experience and beliefs within Pacific communities, including the diverse perspectives of religious communities and the experiences of MVPFAFF+ people. Centre common ground rather than highlighting differences.

### 31. Increase inclusivity in religious spaces

Advocate for inclusive religious spaces that welcome MVPFAFF+ people as they are and affirm their participation. Encourage religious leaders to study and engage with affirming interpretations of sacred texts, highlighting messages of love, acceptance, and inclusion.

### 32. Support family acceptance of MVPFAFF+ people

Promote awareness and understanding of MVPFAFF+ and Rainbow people generally in Pacific communities. Develop and circulate resources to help families navigate their own beliefs and values while affirming and embracing their MVPFAFF+ loved ones. Encourage open and supportive discussion in community spaces that offer new perspectives and dispel misconceptions and stereotypes.



## 10. Conclusion

Listening to the stories and experiences that survivors shared with us vividly brought to life the harm these practices cause. Survivors deserve an Aotearoa free from conversion practices – a country where everyone’s human rights are respected, where different communities live peacefully and respectfully with each other, and where no one group views another as ‘less than’ or needing to change.

Despite the progress in the recognition of Rainbow rights in Aotearoa since the 1980s, conversion practices have continued in Aotearoa largely unnoticed. There is an absence of documented history about the practices in this country although survivors have reported they increased from the 1970s and 1980s.

No known decrease in conversion practices has occurred alongside other pro-Rainbow law reform and the gradually increasing acceptance of Rainbow communities in Aotearoa. The increasing prevalence of transnational mis- and disinformation works to undermine Rainbow rights here in Aotearoa.

Due to the efforts of Rainbow advocates, activists, and community workers, concern about the ongoing prevalence and intensity of conversion practices led to the passing of the CPPLA in 2022. We are now starting a journey to build a future where more is understood about the harm caused by conversion practices so communities can eradicate them.

The passing of the CPPLA, however, is not a cause for complacency. Survivors have pointed out various areas where the CPPLA could offer better protection. There are no references to medical practices that could be deferred but are performed on intersex people before they can legally consent, its protections are limited by age and do not apply universally, and Attorney-General consent is required for prosecutions. A ban

on removing a person from Aotearoa for conversion practices could also be explored. Such a ban would clarify that it would be illegal to travel to another country to procure practices that would be illegal to procure in New Zealand.

Through our CPPLA response work and in putting together this report, we have identified that a multifaceted approach is still needed to ensure the safety and equal rights of Rainbow people, particularly in health, education, and employment. Rainbow people need better data and information, legislative recognition, and protections from discrimination and violence. These needs are compounded by multiple layers of intersectional discrimination, including the impacts of institutional racism and ableism. There is still work to be done to build bridges between faith communities and Rainbow people in order for their rights to be fully realised. We offer the insights and recommendations from our work to reciprocate the support we received from survivors, but also as both an impetus for discussion within communities and for further action from decision makers and duty bearers.

While it is imperfect, the CPPLA does represent a clear statement from Parliament and the people it represents that conversion practices are ineffective, harmful, and a breach of human rights. In the words of lecturer, researcher, and advocate Dr John Fenaughty:<sup>278</sup>

**“What the Conversion Practices Act does is it says, as a society, we say that these practices are not appropriate, they are not valid, and we will not condone them. In so doing, we say that Rainbow identities are valid, they are normal, they are natural, they are valued.”**

<sup>278</sup> Pooley, 2022.

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Care of Children Act 2004  
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Civil Union Act 2004  
<https://www.legislation.govt.nz/act/public/2004/0102/latest/whole.html>

Code of Health and Disability Services Consumers' Rights  
<https://legislation.govt.nz/regulation/public/1996/0078/10.0/DLM209085.html>

Conversion Practices Prohibition Legislation Act 2022  
<https://legislation.govt.nz/act/public/2022/0001/latest/whole.html>

Crimes Act 1961  
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Education and Training Act 2020  
<https://legislation.govt.nz/act/public/2020/0038/latest/LMS170676.html>

Homosexual Law Reform Act 1986  
<https://www.legislation.govt.nz/act/public/1986/0033/latest/whole.html>

Human Rights Act 1993  
<https://www.legislation.govt.nz/act/public/2002/0009/latest/DLM135342.html>

Marriage Act 1955  
<https://www.legislation.govt.nz/act/public/1955/0092/latest/whole.html>

Marriage (Definition of Marriage) Amendment Act 2013  
<https://www.legislation.govt.nz/act/public/2013/0020/latest/DLM4505003.html>

New Zealand Bill of Rights Act 1990  
<https://www.legislation.govt.nz/act/public/1990/0109/latest/DLM224792.html>

Oranga Tamariki Act 1989  
<https://www.legislation.govt.nz/act/public/1989/0024/latest/DLM147088.html>

Sentencing Act 2002  
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## United Nations human rights instruments

Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

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Convention on the Rights of Persons with Disabilities

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Convention on the Rights of the Child

<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>

Declaration on the Rights of Indigenous Peoples

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International Covenant for Civil and Political Rights

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International Covenant on Economic, Social and Cultural Rights

<https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights>

Universal Declaration of Human Rights

<https://www.ohchr.org/en/human-rights/universal-declaration/translations/english>



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