

REPORT ON CURRENT PRACTICES IN CONVERSION THERAPY, EMERGING TECHNOLOGY, AND THE PROTECTION OF **LGBTQ+ RIGHTS** IN AFRICA



TABLE OF CONTENTS

ACKNOWLEDGEMENTS	ii
TERMINOLOGY	1
1. INTRODUCTION	3
2. UNDERSTANDING CONVERSION THERAPY	5
2.1 Definition of conversion therapy	5
2.2 Forms of conversion therapy	5
2.3 Effects of conversion therapy	8
3. CONVERSION THERAPY IN AFRICA	11
3.1 Religious conversion therapy	11
3.2 Traditional conversion therapy	12
3.3 Conversion camps	12
3.4 Psychoanalytic treatment	13
4. PREVALENCE OF CONVERSION THERAPY IN MODERN SOCIETY	14
5. WHY CONVERSION THERAPY SHOULD BE BANNED	16
6. TECHNOLOGY AND CONVERSION THERAPY	17
6.1 How technological developments have impacted conversion technology	17
6.2 Legal frameworks on conversion therapy	18
6.3 Legal frameworks on conversion therapy and technology	19
6.4 Enforcing limits on conversion therapy	20
6.5 How can we include the issue of conversion therapy in technology ethics	21
7. RECOMMENDATIONS	24
7.1 Recommendations to governments	24
7.2 Recommendations to national human rights institutions	24
7.3 Recommendations to civil society organisations	24

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The Centre for Human Rights (the Centre) is an academic department of the Faculty of Law at the University of Pretoria, South Africa. It also doubles as a Non-Profit Organisation (NPO). It therefore functions as a teaching, training and research department as well as implementing human rights projects akin to the style of an NPO. The Centre's reach is within South Africa and beyond, particularly on the African continent. The Centre enjoys 'observer status' with the African Commission on Human and Peoples' Rights and the Committee on the Rights of the Child. The Centre has also submitted cases before the African Court on Human and Peoples' Rights. It, therefore, identifies itself as a pan-African organisation. It specialises in human rights law and human rights issues on the African continent, while linking these to global human rights knowledge streams and discourses from other regions of the world.

Formed in May 2016, the SOGIESC Unit's mandate is to advocate for and work towards equality, inclusion, non-discrimination, non-violence and non-heterosexism for lesbian, gay, bisexual, transgender, intersex, and other non-binary and gender-nonconforming people. The SOGIESC Unit has been responsible for presenting statements at the African Commission on Human and Peoples' Rights on LGBTIQ+ issues; drafting soft law instruments and a model law on intersex rights for possible adoption by regional bodies; organising a yearly advanced human rights short course on sexual minorities rights; and convening a strategic litigation and advocacy workshop for LGBTIQ+ human rights defenders in Africa.

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TERMINOLOGY

Terminology used in this document:

LGBTQ+ This refers to lesbian, gay, bisexual, transgender, queer and other sexual orientations and gender identities associated with non-heteronormative or non-cisgender identity.

Gender The socially constructed roles, behaviour, activities and attributes that a particular society considers appropriate for men and women.

Sexual orientation This refers to a pattern of multiple attractions regarding sexual, romantic, emotional, and mental attractions to individuals of a specific gender. Sexuality can change over the course of someone's life and in different situations. It is understood to be a spectrum instead of a series of mutually exclusive categories.

Lesbian Female-identified women who experience multiple attractions to and seek, caring, supportive and sexual relationships with other female-identified women including transgender and intersex women.

Gay Male-identified men who experience multiples attractions to and seek, caring, supportive and sexual relationships with other male-identified men including transgender and intersex men.

Bisexual Female-identified women; male-identified men and non-binary/gender non-conforming individuals who seek caring, supportive and sexual relationships with other men and women, be they male/female identified, transgender, or intersex.

Heterosexual Female-identified women and male-identified men who experience multiple attractions to and seek caring, supportive and sexual relationships with persons of a different gender.

Transgender A term for persons who have a gender identity, and often a gender expression, that is different to the sex (and assumed gender) they were assigned at birth by default on account of their primary biological characteristics. It is also used to refer to people who challenge society's view of gender as fixed, unmovable, dichotomous and inextricably linked to one's biological sex.

Non-binary/gender non-conforming An expression of gender identity by a person whose behaviour or appearance does not conform to prevailing cultural and social expectations about what is appropriate to their gender.

Intersex A term referring to a variety of characteristics (genetic, physiological or anatomical) in which a person's sexual and/or reproductive features and organs do not conform to dominant and typical definitions of biosex 'female' or biosex 'male'. Such diversity in sex characteristics is also referred to as 'biological variance' – a term which risks reinforcing pathologising treatment of differences among individuals, but which is used with caution in this document to indicate an inclusive grouping of diversity in sex characteristics, including, but not limited to, intersex individuals. The technical term 'Disorders of Sex Development' has been replaced by the less pathologising 'Differences of Sex Development'.

Homosexuality The perceived characteristic of being sexually attracted solely to people of one's own gender.

Homosexual Female-identified women and male-identified men who experience multiple attractions to and seek caring, supportive and sexual relationships with persons of a similar gender.

Heteronormativity The belief that heterosexuality is the default, preferred, or normal mode of sexual orientation. It assumes the gender binary and that sexual and marital relations are most fitting between people of opposite sex.

1. INTRODUCTION

For a long time, homosexuality was widely considered in western countries to be a pathological condition. Under this theory, homosexuality was considered to be a disease caused either by pathogens or a psychiatric disorder.¹ As such, medical intervention was deemed necessary to address occurrences of homosexuality in individuals and promote heterosexuality as a normative value for society.²

Homosexuality has not been considered a psychiatric disorder since the year 1990 when the World Health Organisation (WHO) officially removed homosexuality from the list of mental illnesses upon adopting a new version of its international classification of diseases.³ The American Psychology Association (APA) removed homosexuality from its Official Manual of Mental Disorders Diagnosis and Statistics (DSM) in 1973⁴ and supported the same position in several court cases, notably in the cases of *Jegley & Another vs. Picado* and *Shields & Others vs. Madigan*.⁵

Unfortunately, the stigmas surrounding homosexuality persist today and has resulted in the treatment of LGBTQ+ identities as pathologies in need of a cure. Many people around the world today still hold stigmatising beliefs about homosexuality being 'a disease' which can be cured through various interventions.

Conversion therapy is one such intervention with attendant harmful physical or psychological consequences. The practice of conversion therapy on homosexual persons can be traced as far back as the 1890s in experiments conducted by a German psychiatrist Albert von Schrenck-Notzing who claimed to have 'converted' a homosexual man.⁶ Other doctors like Eugen Steinach, an Austrian endocrinologist,

1 J Drescher 'A history of homosexuality and organized psychoanalysis' (2008) *Journal of the American Academy of Psychoanalysis and Dynamic Psychiatry* 444.

2 American Academy of Child & Adolescent Psychiatry 'Conversion therapy' https://www.aacap.org/AACAP/Policy_Statements/2018/Conversion_Therapy.aspx (accessed 29 May 2020).

3 Organisation Panaméricaine de la Santé 'Thérapies to change sexual orientation lack medical justification and threaten health' https://www.paho.org/hq/index.php?option=com_content&view=article&id=6803&Itemid=1926&lang=fr (accessed 14 April 2020).

4 'Psychiatrist, in a shift, declare homosexuality no mental illness' *The New York Times* 16 December 1973 <https://www.nytimes.com/1973/12/16/archives/psychiatrists-in-a-shift-declare-homosexuality-no-mental-illness.html> (accessed 14 April 2020).

5 *Jegley & Another vs. Picado* (2001) 16 (Supreme Court of Arkansas) <https://www.apa.org/about/offices/ogc/amicus/jegley.pdf> (accessed 14 April 2020); *Shields & Others vs. Madigan* (2005) 3 (Supreme Court of the State of New York) <https://www.apa.org/about/offices/ogc/amicus/shields.pdf> (accessed 14 April 2020).

See also <https://www.casemine.com/judgement/us/5914765cadd7b049343c11e7> (accessed 26 November 2020)

6 E Blakemore 'Gay conversion therapies disturbing 19th century origins' (2019) <https://www.history.com/news/gay-conversion-therapy-origins-19th-century> (accessed 29 May 2020).

claimed that homosexuality was rooted in a male's testicles and the transplantation of 'heterosexual testicles' would convert a homosexual man to heterosexual.⁷

Over the years, the harmful effects of conversion therapy on human dignity and mental and emotional health have been well documented. This report has been prepared as a contribution to the conversation. The report looks at the nature of conversion therapy in Africa, the forms it takes, as well as its effects. It provides an analysis of why conversion therapy is considered a human rights violation and the reasons why it should be prohibited globally. This report also highlights the threat of emerging technologies and the impact these could potentially have in creating a more evolved, high-tech version of conversion therapy.

⁷ As above.

2. UNDERSTANDING CONVERSION THERAPY

2.1 Definition of conversion therapy

Conversion therapy is a broad term which refers to therapy techniques or other activities that attempt to change or alter sexual orientation or reduce a person's attraction to other persons of the same sex and instil conventional gender roles.⁸

Conversion therapy is based on the premise that homosexuality is a disease, addiction, or religious aberration, even though all major medical and psychiatric organisations agree that LGBTQ+ identities are a normal aspect of human diversity.⁹ Conversion therapy may also be pursued by family members or individuals who are concerned that being LGBTQ+ will make an individual's life more difficult within society.

For this report, we refer to conversion therapy in the broad sense to include a host of other socio-cultural practices, outside of psychological therapies, performed in the attempt to alter sexual orientation or reduce the attraction to others of the same sex.¹⁰

2.2 Forms of conversion therapy

Conversion therapy takes a variety of forms, with many practitioners employing several techniques. It is important to understand the wide range of forms conversion therapy can take in order to devise strategies to combat it.

a) Psychoanalytic therapy

Conversion therapy can make use of traditional psychotherapeutic techniques such as counselling, group therapy, worksheets, and social skills training.¹¹ This kind of therapy is based on the premise that homosexuality is a pathology, originating from past trauma, irregular parental relationships, or self-esteem problems.¹² Therapists encourage the individual to share their intimate thoughts and feelings around their same-sex desire and non-heteronormative identity to guide them to view these thoughts as undesirable and shameful.¹³ This type of therapy is generally meted out by psychiatrists or psychologists, although in many instances this has been

8 UK Council for Psychotherapy 'Conversion therapy – Consensus statement' <https://www.psychotherapy.org.uk/wp-content/uploads/2016/08/ukcp-conversion-therapy.pdf> (accessed 1 June 2020).

9 Drescher (n 1 above) 444.

10 UK Council for Psychotherapy (n 8 above).

11 E Reynolds 'The cruel, dangerous reality of gay conversion therapy' (2018) <https://www.wired.co.uk/article/what-is-gay-conversion-therapy> (accessed 24 May 2020).

12 LA Gans 'Inverts, perverts and converts: Sexual orientation, conversion therapy and liability' (1999) 8 *Boston University Public Law Journal* 223-224.

13 Reynolds (n 11 above).

proven to be unsuccessful and often directly contravenes the codes of conduct of psychiatric bodies.

b) Faith-based therapy

Conversion therapy can also take the form of faith-based therapies. This includes prayer and exorcism and can be conducted at places of worship, camps, in family settings, or combined with other forms of conversion therapy. This form of conversion therapy views LGBTQ+ identities and same-sex sexual desire as religious sins and encourages LGBTQ+ people to reject their identity by focusing on religious doctrine. This form of therapy is the most practiced reparative therapy in African society and is often initiated by family members of the individual.¹⁴

Traditional conversion therapy is also common in Africa.¹⁵ People who are perceived to be homosexual may be taken to herbalists or traditional healers where they are given herbal medicines and are sometimes exorcised according to traditional practices.¹⁶ In South Africa, for instance, traditional male initiation processes are also relied on to convert young gay men, such as the amaXhosa initiation and circumcision ritual ulwaluko.¹⁷

In Kenya, there are documented instances of the forced marriages of suspected LGBTQ+ individuals, forcing them to dedicate to religion in the hope that they will abandon pursuing same-sex relationships and sexual activity.¹⁸

In addition, another form of faith-based conversion therapy is the belief that an exorcism will purge an individual of their homosexuality tendencies. There are organisations who are of the view that homosexuality can be accredited to persons being possessed by a ghost or a demon, thus an exorcism is regarded as a way to cure an individual.¹⁹

14 OutRight Action International 'Harmful treatment: The global reach of so-called conversion therapy' <https://outrightinternational.org/content/united-nations-independent-expert-sogi-focuses-so-called-conversion-therapy> (accessed 27 April 2020).

15 M Sjodin 'Criminalization and conversion: Prevalence and practices of so-called conversion therapy in Africa' (2019) ' <https://outrightinternational.org/content/criminalization-and-conversion-prevalence-and-practices-so-called-conversion-therapy-africa> ' (accessed 27 April 2020).

16 As above.

17 A Ntozini and H Ngqangweni 'Gay Xhosa men's experiences of ulwaluko' (2016) 18 *Culture, Health and Sexuality* 1310-1311.

18 UN Independent Expert on SOGIE Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity with focus on practices of so-called 'conversion therapy' (2019) 3.

19 ILGA 'Curbing deception: A world deception legal regulation of so-called conversion therapies' https://ilga.org/downloads/ILGA_World_Curbing_Deception_world_survey_legal_restrictions_conversion_therapy.pdf (accessed 15 April 2020) 38.

c) Aversion therapy

Conversion therapy often makes use of several abusive techniques such as aversive conditioning therapies and physical abuse. Aversive conditioning therapies involve administering beatings, whippings, burnings, electric shocks, and nausea-inducing medication while images of same-sex activities are displayed.²⁰ These violent practices cease when images of heterosexual behaviour are shown. This therapy aims to use torture to force LGBTQ+ individuals to form negative associations of pain and discomfort with their sexuality or gender expression.²¹

d) Sexual abuse

Sexual abuse is also prevalent in conversion therapy. Guided masturbation and rape may be used in an attempt to guide LGBTQ+ people to heterosexuality.²² Homophobic rape (often referred to as 'corrective' rape) is perceived as a curative act for homosexual individuals, primarily targeting LBQ+ women.²³ This practice is often believed by the perpetrator to alter the sexual orientation of known or supposed LBQ+ person by forcing them to have sex with a man.²⁴ This brutal form of conversion therapy often generates serious consequences, even resulting in the death of the victims. This was the case with the death of South African footballer Eudy Simelane after being raped.²⁵

e) Surgical interventions

Some of the earliest forms of conversion therapy included injecting individuals perceived to be homosexual with substances such as testosterone, oestrogen, animal organ extracts, and cocaine.²⁶ Additionally, some individuals would be subjected to male sterilisation or the surgical removal of the testicles, uterus, ovaries, and/or clitoris.²⁷ Many patients were also lobotomized, a surgical operation performed by a neurosurgeon on the individual's brain to sever the connections between the frontal lobes and the rest of the brain.²⁸ This procedure often left patients in a vegetative, brain dead state.

20 Gans (n 12 above) 223.

21 As above.

22 ILGA (n 19 above) 38-43.

23 R Koraan & A Geduld *Corrective rape of lesbians in the era of transformative constitutionalism in South Africa* (2015) 8 <http://www.nwu.ac.za/sites/www.nwu.ac.za/files/files/p-per/issuepages/2015volume18no5/2015%2818%295KoraanGeduld.pdf>. (accessed 15 April 2020).

24 As above.

25 'Raped and killed for being lesbian : South Africa ignores corrective rape attacks' *The Guardian* 12 March 2009 <https://www.theguardian.com/world/2009/mar/12/eudy-simelane-corrective-rape-south-africa> (accessed 15 April 2020).

26 Gans (n 12 above) 223.

27 As above.

28 Gans (n 12 above) 223.

All forms of conversion therapy described above have been proven ineffective and harmful, leading to feelings of shame, depression, and suicide experienced by the individuals who have undergone these conversion therapies. Some of the above methods also constitute torture, which is prohibited under international law and other some domestic laws.

2.3 Effects of conversion therapy

The different forms of conversion therapies have both physical and psychological effects on the individuals who experience it. These effects are amplified for those who are coerced or forced to undergo such therapies, especially minors.

2.3.1 Physical effects of conversion therapy

Many forms of conversion therapy are invasive and include a physical intervention component which can be deployed through the use of surgical procedures, the consumption of chemicals, and electroshock therapy as well as physical assaults and sexual violence such as 'corrective' rape.

- Injury and death

The use of physical violence and dangerous electronic, surgical, and chemical methods in conversion therapy has resulted in numerous injuries and deaths. For instance, according to a media report, 15-year-old Raymond Buys died in 2013 after being beaten, abused, and starved at a Game Rangers camp designed to cure potentially gay young men.²⁹ In their witness testimony, other attendees stated that Buys 'had been chained to his bed, prevented from going to the toilet, electrocuted with a stun gun, and made to eat his faeces in addition to the starvation and violent beatings, which eventually cost him his life.'³⁰

- The intervention of medicine and its consequences

Often the intervention of medicine in the process of changing sexual orientation is done through treatment with electroshock therapy or the ingestion of dangerous chemicals. A victim of this treatment testified to Human Rights Watch:

I was very scared because I have never heard of it before... you tend to trust the doctors. At least they would not do something harmful to you, right? ... I was asked to sit down on a chair, with my hands both tied on the chair arms with leather strips. Then the nurse and the doctor attached pads to both of my wrists and my stomach and my temples. These pads

29 'SA teen dies brutal death after attending gay conversion camp' *The South African* 05 May 2013 <https://www.thesouthafrican.com/news/sa-teen-dies-brutal-death-after-attending-gay-conversion-camp/> (accessed 27 March 2020).

30 As above.

are connected to a machine through cables... The nurse also set up a screen in front of me, where they later started playing gay porn on the screen. The doctor asked me to watch what was playing on the screen and asked me to focus on what was the content of the video... A few minutes later, they switched on the electric current. My wrists and arms felt numb, my head too. But the most painful part was my stomach. I don't know why... The doctor asked me to lie down and relax. He started to play very gentle and slow music, at a very low volume. He asked me to think about my intimate moments with my boyfriend. He asked me to relax and start imagining having sex with my boyfriend... then all of a sudden, I felt a very short but strong pain on my left forearm, as if my arm was stabbed by something very sharp. I jumped off the couch I was lying on and started yelling at the doctor and asked him what the hell that was. He told me it was electroshock treatment... I don't feel the pain anymore. But I remembered I was so scared and did not know what could have happened to me. I don't want it to continue doing that. I asked him to stop the session. The psychiatrist said that would be it for that session, but I would need to be ready for more sessions of electroshock for this to work.³¹

Another Chinese man after attending several electroshock therapy sessions said that:

After three or four sessions of the electroshock treatment, I started to feel sick regularly and I started having a difficult time concentrating at work.³²

2.3.3 Psychological effects of conversion therapy

Conversion therapy can cause long-term psychological harm when it is the result of psychotherapeutic treatment practiced by mental health professionals or by religious leaders.³³

Individuals who have been exposed to this type of therapy in their life experience conflict over their self-identity, which harms them and can lead to depression. In

31 Human Rights Watch 'Have you considered your parents' happiness? Conversion therapy against LGBT people in China' (2017) 29-31 https://www.hrw.org/sites/default/files/report_pdf/china1117_web_0.pdf (accessed 14 April 2020).

32 As above.

33 'Conversion therapy associated with severe psychological distress in transgender people, study says' *The Washington Post* 11 September 2019 <https://www.washingtonpost.com/health/2019/09/11/conversion-therapy-associated-with-severe-psychological-distress-transgender-people-study-says/> (accessed 14 April 2020).

some cases, this may lead to a negative self-image, trauma responses, and suicidal ideation resulting in some of these individuals committing suicide.³⁴

In the United States, for example, in 2014, a 17-year-old transgender young person, Leelah Alcorn, committed suicide after having undergone psychotherapy for a change of sexual orientation.³⁵ President Barack Obama asked all states to ban psychotherapy and all interventions aimed at changing sexual orientation because these types of interventions are likely to have devastating consequences, although this ban never materialised.³⁶

34 As above.

35 BD Earp & A Vierra 'Sexual orientation minority rights and high-tech conversion therapy' in D Boonin (ed) *Handbook on philosophy and public policy* (2018) 2.

36 As above.

3. CONVERSION THERAPY IN AFRICA

In African society, conversion therapy takes many forms. However, it is primarily driven by members of religious communities.³⁷ In many African communities, homosexuality is perceived to be a spiritual problem rather than a mental illness, or a pathology. Many churches organise exorcisms and prayers to drive out the ‘demon of homosexuality.’³⁸

In Kenya, for example, a Christian church organised a sexual orientation conversion therapy seminar where participants were subjected to several days of starvation to drive out the ‘demon of homosexuality.’³⁹

3.1 Religious conversion therapy

Homosexuality is still perceived to be unreligious and ‘unAfrican’ on the African continent.⁴⁰ As a result, religious conversion therapy is the most practiced form of conversion therapy in Africa.⁴¹ According to the 2019 statistics from the international organisation OutRight Action International, 75% of conversion therapy in Africa is carried out for religious and cultural reasons. In many African countries, religious leaders promote conversion therapy by organizing religious crusades through which they claim to exorcise what they call ‘demons of homosexuality.’

In Ghana, for instance, Pastor Moses Foh-Amoaning is known for organising religious crusades against the perceived danger that churches will be ‘dominated by homosexuals’ if the clergy does not intervene and combat homosexuality.⁴²

In Ethiopia, religious leaders under the leadership of priest Derej Negash have formed an association, not only to promote conversion therapy but also to pressure the government of Prime Minister Abiy Ahmed to take coercive measures against sexual minorities.⁴³

37 OutRight Action International (n 14 above) 33.

38 As above, 32.

39 ‘Gay therapy! Church claims homosexuality can be cured through prayers and 3 days of starvation’ <https://www.tuko.co.ke/249487-gay-therapy-church-claims-homosexuality-cured-prayers-3-days-starvation.html#249487> (accessed 14 April 2020).

40 M Sjodin (n 15 above).

41 OutRight Action International (n 14 above) 33-34.

42 ‘Hundreds of gay to be treated for homosexuality at a camp in Ghana’ *PinkNews* 21 August 2018 <https://www.pinknews.co.uk/2018/08/21/400-gay-people-treated-homosexuality-camp-ghana/> (accessed 27 March 2020).

43 ‘Ethiopian church leaders push gay conversion therapy’ *Daily Monitor* 6 September 2019 <https://www.monitor.co.ug/News/World/Ethiopian-church-leaders-push-gay-conversion-therapy/688340-5262910-p9hbpsz/index.html> (accessed 27 April 2020).

In Kenya, the church of Dr Desmond Sanusi regularly organizes crusades where homosexuals are subjected to extreme starvation to convert to heterosexuality.⁴⁴ This practice of extreme starvation is also manifest in Nigeria. Henry, a 28-year-old Nigerian bisexual, whose story is documented in an OutRight Action International report said that his religious community had ‘imposed year-long fasting on him as therapy for conversion to heterosexuality.’⁴⁵

Many African states continue to tolerate these kinds of crusades despite the harmful experiences’ LGBTQ+ people have had with them.⁴⁶

3.2 Traditional conversion therapy

Conversion therapy cases in Africa are also carried out for cultural reasons and through localised methods.⁴⁷ This form of conversion therapy in Africa is performed by traditional healers. They claim to be able to change the sexual orientation of an LGBTQ person through potions. However, testimonies have shown that these treatments do not change anything.

MA, a Nigerian member of the LGBTQ+ community, testified to OutRight Action International that at the age of nine his family took him to a traditional healer to cure him of his feminine traits.⁴⁸ The Tiv tribe, to which MA belongs, considers it abnormal to have a gay or transgender child. During the treatment, the traditional healer had made several incisions on his legs and shoulders, rubbed in herbs, and gave him a potion to drink. This therapy proved unsuccessful as MA claims that nothing about him has changed.

3.3 Conversion camps

Conversion therapy in the form of training camps is prevalent, justified as an attempt to safeguard the family honour.⁴⁹ LGBTQ+ people are taken to isolated camps where they receive advice that will be able to subsequently change their sexual orientation.⁵⁰

In East Africa, these camps are located around the regions of Somalia and Kenya.

44 ‘Gay therapy! Church claims homosexuality can be cured through prayers and 3 days of starvation’ (n 36).

45 Drescher (n 1 above) 50.

46 C Ryan et al ‘Parent-initiated sexual orientation change efforts with LGBT adolescents: Implications for young adult mental health and adjustment’ (2018) 67 *Journal of Homosexuality* 2 https://www.tandfonline.com/doi/pdf/10.1080/00918369.2018.1538407?casa_token=jQVpo0yG9LUAAAAA:xOfV0bsQx4KU0qeDrmqlTmWWEDNUcTB4-wRHCHdQMqGeY9SMutYSU6x09HWu42jqba5kKM85I09D4Q (accessed 26 March 2020).

47 Drescher (n 1 above) 38.

48 OutRight Action International (n 14) 33.

49 M Sjodin (n 15 above).

50 ‘The sexuality blog: Gay conversion therapy is happening in Africa and it is horrible’ <https://ynaija.com/sexuality-blog-gay-conversion-therapy-happening-africa-horrible/> (accessed 27 April 2020).

In these camps, LGBTQ+ people are subjected to severe abuse, starvation, and other cruel practices.⁵¹ LGBTQ+ people who resist conversion run the risk of facing physical violence.

In 2017, for example, a Somali born, Kenyan immigrant to the United States by the name of Sophomore Mahad Olad faced being held captive in such a camp. His family tricked him into returning to Kenya and attempted to take him to such a conversion camp. However, he was able to escape with the help of the American embassy in Kenya and sought asylum in the United States.⁵²

3.4 Psychoanalytic treatment

This form of conversion therapy is popular in Africa and takes place in person and over the internet, utilising conventional psychotherapy techniques to explain away and combat same-sex desire. Infamously, during Apartheid, psychologists provided the South African government pseudo-scientific justification for forced conversion therapy.⁵³

Currently, the internet has also made international sources of this therapy widely available in Africa. Such was the case of Mohammad, an Egyptian man who claims to have converted to heterosexuality after receiving both online and in-person therapy from Joseph Nicolosi, one of the pioneers of the theory of psychological conversion therapy in the United States.⁵⁴ As these forms of therapy move online, they become more accessible and thus more dangerous.

51 As above.

52 'Escaping gay conversion therapy in Kenya' *The Ithacan* 7 February 2018 <https://theithacan.org/opinion/escaping-gay-conversion-therapy-in-kenya/> (accessed 27 March 2020).

53 'Overturning long-held biases' <https://www.apa.org/monitor/2019/03/overturning-biases> (accessed 27 March 2020).

54 'Testimony from Cairo, Egypt' <https://www.josephnicolosi.com/collection/2015/4/18/testimony-from-cairo-egypt> (accessed 28 April 2020); 'The abominable legacy of gay-conversion therapy' *The New Republic* 13 March 2017 <https://newrepublic.com/article/141294/abominable-legacy-gay-conversion-therapy> (accessed 28 April 2020).

4. PREVALENCE OF CONVERSION THERAPY IN MODERN SOCIETY

In the 1970s, medical and mental health experts in the West began to abandon conversion therapy practices as societal acceptance for LGBTQ+ people began to grow. Numerous professional associations of psychologists have rejected conversion therapy as ineffective and dangerous.⁵⁵ Despite this, new cases of conversion therapy incidents are still documented today.

Additionally, a worldwide climate of homophobia motivates recourse to conversion therapy. 71 countries still criminalise homosexuality around the globe,⁵⁶ thus encouraging individuals and families to attempt to change the sexual orientation or gender identity of LGBTQ+ people. As a result, the prevalence of conversion therapy is increasing in modern society.

The trend of conversion therapy is a global issue, but the highest prevalence has been registered in countries like the United States, Australia, the United Kingdom, China, and South Korea.⁵⁷ It is currently also manifesting on the African continent in South Africa, Nigeria, Kenya, Tanzania, and Zambia.

Approximately 698,000 LGBTQ adults (ages 18-59) in the United States have experienced conversion therapy at some point in their lives. Most conversion therapy occurrences are practiced on adolescent LGBTQ persons that are taken to these programs by their parents.⁵⁸ According to Williams Institute law school, an estimate of 57,000 youth (ages 13-17) across all states will receive conversion therapy from religious or spiritual advisors before they reach the age of 18.⁵⁹

In China, the Chinese Classification of Mental Disorder (CCMD-3) still includes sexual orientation disorder.⁶⁰ This has been a major basis of conversion therapy trends in China. In Malaysia and Indonesia, conversion therapy is sponsored and encouraged by the state.⁶¹

In Middle Eastern countries, the conversation around conversion therapy and its prevalence is minimal since the majority of these countries still punish same-sex

55 ILGA (n 19 above) 49.

56 '71 countries where homosexuality is illegal' Newsweek 4 April 2019 <https://www.newsweek.com/73-countries-where-its-illegal-be-gay-1385974> (accessed 26 April 2020).

57 As above.

58 'Conversion therapy and LGBT youth update (2019)' accessed <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Conversion-Therapy-Update-Jun-2019.pdf>.

59 As above

60 OutRight Action International (n 14 above) 23-25.

61 ILGA (n 19 above) 55.

acts by death.

The prevalence of conversion therapy is already high and most likely to increase in Africa due to the growing trends of so-called 'ex-gay ministers', religious leaders who claim that they can convert homosexual people to heterosexuality. 33% of African respondents to an OutAction survey indicated that they believed conversion therapy to be very prevalent in their societies, compared to only 17% of Latin American respondents.⁶²

Anti-homosexual rhetoric by the religious community and the promotion of religious conversion therapy methods such as exorcisms contribute to the popularity of conversion therapy on the continent. The occurrence of religious therapy is bound to increase due to this influence.

62 M Sjodin (n 15 above).

5. WHY CONVERSION THERAPY SHOULD BE BANNED

Conversion therapy is one outcome of societal and internalized homophobia and transphobia, and its prevalence is encouraged by negative attitudes towards LGBTQ+ persons.⁶³ It is a practice that aims to alter, ‘heal’ or ‘repair’ an individual’s sexual orientation or gender identity. It poses a major concern for LGBTQ+ individuals and their human rights as it causes serious physical and psychological suffering to its victims.

It is an unscientific practice and a violation of the global ban on torture and inhuman treatment. According to the International Rehabilitation Council for Torture Victims (IRCT), the practice of conversion therapy should be banned worldwide given the extreme and often unimaginable human suffering it causes.⁶⁴

Through conversion therapy practices, LGBTQ+ people are subjected to corrective violence and harmful drugs including antipsychotics, antidepressants, anxiolytics, and hormone injections. Further, electroconvulsive therapies aversive treatments using electric shocks or drugs that cause vomiting exorcism. Sometimes ritual cleansing is used which often involves violence when reciting religious verse, starvation; forced exposure to nudity; forced isolation, and confinement.

In most cases, it is minors and children who are the most immediate victims of this harmful practice. And by banning coercive conversion therapy there are much better consequences, as the LGBTQ+ individual begins to feel accepted. This is the reason why in many countries, in this case, Germany, Brazil, Malta, and even Taiwan, this practice has already been banned legally.⁶⁵

⁶³ OutRight Action International (n 14 above) 67.

⁶⁴ International Rehabilitation Council for Torture Victims ‘Conversion therapy is a torture’ <https://irct.org/media-and-resources/latest-news/article/1027> (accessed 27 May 2020).

⁶⁵ ‘Germany is 5th country to ban conversion therapy for minors’ *NBC News* 8 May 2020 <https://www.nbcnews.com/feature/nbc-out/germany-5th-country-ban-conversion-therapy-minors-n1203166> (accessed 27 May 2020).

6. TECHNOLOGY AND CONVERSION THERAPY

The advent of the fourth industrial revolution has led to major developments in the digital world. This has resulted in a wave of technological progress in recent decades, significantly impacting communication and information. For LGBTQ+ people, this has enabled the creation and hosting of social forums on digital media platforms. Likewise, it has also enabled the creation of movements aimed at converting LGBTQ+ people to heteronormativity.

6.1 How technological developments have impacted conversion technology

Social media and video streaming websites have recently been weaponised to reach young LGBTQ+ people. Often these social media accounts and videos have misleading titles designed to lure young LGBTQ+ people with the promise of wholesome content, only to then display messages promoting conversion and discrimination. Sites including Facebook and YouTube also display ads for groups promoting or offering conversion therapy services to people who show interest in LGBTQ+ content.⁶⁶ The use of social media in conversion therapy is especially concerning considering the influence it has over impressionable young people and the reach it has. A video that aims to convince teens that they will be happier if they leave behind sin and enter heterosexual relationships garnered more than six million views on YouTube.⁶⁷

Some conversion therapy service providers have even created apps. Living Hope Ministries created an app which included sections such as 'Keys to Recovery from Same-Sex Attractions.' The app had amassed over 1,000 users before it was removed from Apple and Amazon's app stores in 2018 and eventually from Google Play Store in 2019 after a change.org petition collected over 150,000 signatures.⁶⁸

In 2018, the government of Malaysia released an online app called 'Hijrah Diri – Homoseksualiti'.⁶⁹ The app purportedly provides resources to overcome same-sex desire,

66 'Facebook removes ads for gay conversion therapy after backlash' *Salon* 31 August 2018 <https://www.salon.com/2018/08/31/facebook-removes-ads-for-gay-conversion-therapy-after-backlash/> (accessed 28 April 2020); <https://www.opendemocracy.net/en/5050/us-evangelicals-target-lgbt-young-people-facebook-youtube-ads/> (accessed 28 April 2020).

'This pro-conversion therapy group wants to target LGBTQ+ youth on social media' *Them* 1 August 2018 <https://www.them.us/story/conversion-therapy-social-media> (accessed 30 April 2020).

67 67 'Germany is 5th country to ban conversion therapy for minors' *NBC News* 8 May 2020 <https://www.nbcnews.com/feature/nbc-out/germany-5th-country-ban-conversion-therapy-minors-n1203166> (accessed 27 May 2020).

68 E Cronin & LA Linsky *The impacts of conversion therapy on LGBTQ youth* (2019) <https://www.suny.edu/media/suny/content-assets/documents/spectrum/cle/The-Impacts-of-Conversion-Therapy-on-LGBTQ-Youth-Presentation.pdf> (accessed 30 April 2020).

69 ILGA (n 19 above) 56.

including eBooks based on Islamic teachings, audio files with thematic talks, and guided process teaching users to 'Understand the Challenges' and 'Control Your Lust'.⁷⁰ Apps such as the two discussed above are especially dangerous since they are easily accessible and create difficulties with regulation and liability since the process is self-executed.

Furthermore, scientists have predicted that, in future, technology could be developed that would target same-sex attraction specifically and could be used to alter the sexual orientation of a person.⁷¹ There have been various studies conducted by scientists which involved human neuroscience, biotechnology, psychopharmacology, and other disciplines, with the aim of developing anti-love biotechnology.⁷² This technology is defined by neurotechnological interventions that can block or diminish feelings of love, lust, attraction, and even basic social bond which, as a by-product, can lead to a 'gay cure'.⁷³ This technology is designed to impact the neurological thought process of an individual to pursue higher-order goals, rather than lower-level feelings, thereby enhancing the individual's decision-making autonomy.⁷⁴

Individuals who elect to make use of biotechnology of this nature should be mandated to provide explicit consent to undergo these forms of treatment.⁷⁵ It is also recommended that the individual must first possess the belief that their sexual desire is harmful to them – this is to ensure that there is no violation to a person's autonomy and their right not to be subject to cruel and inhuman treatment.⁷⁶

6.2 Legal frameworks on conversion therapy

According to the 2019 report by OutRight,⁷⁷ 172 countries have no legislation or measures to ban conversion therapy.⁷⁸ Ten states including South Africa, U.S, Canada, Norway, Uruguay, Netherlands, Spain, Switzerland, Argentina and Cyprus have policies that partially ban conversion therapy. Ten states have shown an interest in introducing policies that ban conversion therapy; in this case Belgium, Ireland,

70 As above.

71 BD Earp *et al*, 'Brave new love: The threat of high-tech 'conversion' therapy and the bio-oppression of sexual minorities' 2014) 5(1) *AJOB Neurosci.* https://www.researchgate.net/publication/242654891_Brave_new_love_the_threat_of_high-tech_'conversion'_therapy_and_the_bio-oppression_of_sexual_minorities/citation/download. (accessed 26 November 2020).

72 As above

73 Earp 'The ethics of infant male circumcision' (2013) 39(1) *Journal of Medical Ethics* 416–417.

74 BD Earp *et al* 'Brave new love: the threat of high-tech 'conversion' therapy and the bio-oppression of sexual minorities (2014) 5 *AJOB Neuroscience* (2014) https://www.researchgate.net/publication/242654891_Brave_new_love_the_threat_of_high-tech_'conversion'_therapy_and_the_bio-oppression_of_sexual_minorities/citation/download. (accessed 30 April 2020).

75 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3932804/>

76 Earp (n 74 above).

77 OutRight Action International (n 14 above) 21.

78 As above.

Poland, UK, Chile, Mexico Australia, New Zealand, and the Maldives.⁷⁹ At present, only five countries in the world have a ban on conversion therapy, namely: Brazil, Ecuador, Malta, Taiwan and Germany. We will look at some of these polices as follows:⁸⁰

Malta

Malta's national ban of conversion therapy is the most comprehensive in the world. ⁸¹ The ban on conversion therapy was succeeded by a law which was adopted in 2015, and dealt with the affirmation of sexual orientation, gender identity and gender expression.⁸²

Taiwan

In Taiwan, conversion therapy is prohibited under the Criminal Code, and The Protection of Children and Youths Welfare and Rights Act. These laws criminalise any form of conversion-be it medical or religious therapy.⁸³

Brazil

In Brazil there is a legal ban on medical conversion therapy which was introduced by the Brazil Federal Council of Psychology, however, cases of conversion therapy has still occurred due to the fact that religious-based conversion therapy is not prohibited under the law.⁸⁴

Other countries have sub-national and municipal, civil or criminal bans and/or medical or mental health policies or other legal or regulatory mechanisms that prohibit the practice, while several countries (such as UK, Ireland, and Australia) are preparing national bans.

6.3 Legal frameworks on conversion therapy and technology

The Yogyakarta Principles reiterate the right to health in Principle 17 stating that everyone has the right to the highest attainable standard of physical and mental health, regardless of sexual orientation, gender identity, gender expression, or sex characteristics. Principle 10e states that states should prohibit any practice allowing intrusive and irreversible treatments including reparative or conversion therapies when enforced or administered without the free, prior, and informed consent of the person concerned. Conversion therapy has been recognised as a violation of the right to health and freedom from cruel, inhuman, or degrading treatment.

79 OutRight Action International (n 14 above) 22.

80 OutRight Action International (n 14 above) 21.

81 OutRight Action International (n 14 above) 22.

82 As above.

83 OutRight Action International (n 14 above) 25-26.

84 OutRight Action International (n 14 above) 30-31.

Most states do not even have adequate legal frameworks for conventional conversion therapy, making it less likely that the intersection of technology and conversion therapy is covered in legislation. Only Brazil, Ecuador, and Malta have laws banning conversion therapy. Countries like Chile, Mexico, Canada, and Germany are in the process of amending their laws to prohibit conversion therapy. In the USA, some states prohibit conversion therapy on minors, but it is not a nationwide law. While some countries have prohibited mental health, diagnoses based exclusively on sexual orientation, they do not directly ban conversion therapy. The regulations on healthcare professionals may prevent them from administering conversion therapy but it is unlikely to curb conversion therapy services offered by non-healthcare professionals, such as religious bodies.⁸⁵

While a legal framework exists with regards to conversion therapy and this legal framework may be applied to high tech conversion therapy, there appears to be no legal framework specifically targeting high tech conversion therapy.

6.4 Enforcing limits on conversion therapy

24 countries in the world have a ban, partial laws, or moving towards the prohibition of conversion therapy.⁸⁶ However, these laws tend to prohibit only the medical form of conversion therapy. Other forms like religious and traditional conversion therapy are not described as unlawful yet they are the most common forms that manifest in this era.

States should develop legislation that prohibits all forms of conversion therapy conducted on minors or on adult individuals without their full consent. States have an obligation under regional and international law to protect all individuals including LGBTQ people's state of physical, emotional health, and mental well-being.⁸⁷ However, 172 states worldwide have not made any effort to prohibit any form of conversion therapy.⁸⁸ Conversion therapy is an invasive and harmful practice, as using psychological or spiritual interventions to change the sexual orientation or gender identity of an individual cause irreparable psychological harm to LGBTQ individuals. States, therefore, have to make laws that will limit or ban all forms of conversion therapy as a measure to combat this harmful practice.

The definition of conversion therapy needs to be expanded to portray the harm this

85 ILGA World: Lucas Ramon Mendos *State-sponsored homophobia 2019: Global legislation overview update* (2019) 131-135.

86 OutRight Action International (n 14 above) 22.

87 African Charter on Human and Peoples Rights art 16; International Convent on Economic, Social and Cultural Rights, art 12; African Charter on the Rights and Welfare of the Child art 16; and the Maputo Protocol art 5.

88 OutRight Action International (n 14 above) 22.

practice perpetuates.⁸⁹ In Africa, the conversation around conversion therapy is limited, partially due to the limited understanding of its harmful effects. Academics need to conduct more research on conversion therapy that will enable both state and non-state actors to advocate for the ban or limitation of conversion therapy with evidence-based research. With information flow on the harmful practice and its effect, knowledge can be used as an advocacy tool to limit the use and spread of conversion therapy.

Consequently, it is necessary to disseminate information about the limits and dangers of conversion therapy.⁹⁰ There is limited information about the topic and activists and government have to develop messages that demonstrate the dangers of conversion therapy. This would provide an empowering visibility campaign for LGBTQ+ individuals who have experienced discrimination or violence and are recovering from incidents of conversion therapy practices.

Further, there is a need to partner with other stakeholders like health ministries and mental health professional societies to educate policymakers, influencers and the public that homosexuality is not a disease and therefore all coercive attempts to 'convert' sexual orientation should be banned or limited.

Families in Africa still resort to conversion therapy due to the lack of knowledge that conversion therapy does not work. There is a need to create awareness for survivors of conversion therapies as well as produce documentaries on ex-conversion therapists that testify that a person's sexual orientation or gender identity and expression cannot be changed through conversion therapy. This will help reduce misconceptions among people and limit the use of conversion therapy.

6.5 How can we include the issue of conversion therapy in technology ethics?

While psychiatrists, psychologists, and other medical practitioners are bound by strict ethical codes of practice that often prohibit harmful practices such as conversion therapy,⁹¹ no such code binds individuals or groups developing technology that may be used in conversion therapy.

Technology ethics is a broad field and strategies such as Value in Design/Value

89 G Marie-Amelie 'Expressive ends: Understanding conversion therapy bans' 68:3: 793 *Alabama Law Review* <https://www.law.ua.edu/lawreview/files/2011/07/Expressive-Ends-Understanding-Conversion-Therapy-Bans.pdf> (accessed 24 May 2020).

90 As above.

91 'Conversion therapy: Current policy and ethical issues' <https://societyforpsychotherapy.org/conversion-therapy/> (accessed 24 May 2020).

Sensitive Design⁹² may be important tools in ensuring that new technology does not give rise to the harm of conversion therapy. VID/VSD is a three-part methodology to proactively incorporate certain values in design and guard against harmful effects.⁹³ Noëmi Manders-Huits makes reference to the of Friedman position of VSD, which he maintains,

focuses on values with moral import that are often implicated in technological developments, such as the values of human dignity, justice, welfare, human rights, privacy, trust, informed consent, respect for intellectual property rights, universal usability, environmental sustainability, moral responsibility, accountability, honesty, and democracy.⁹⁴

There is a need to identify the central values at stake with regards to a particular technology as well as the stakeholders affected by the technology. The first part of the methodology focuses on a ‘philosophically-informed conceptual analysis’.⁹⁵ It starts with the premise that technology may enhance, transform, or threaten existing values and that certain values may be built into technology, for example, understanding that social media affects privacy. Similarly, this stage could take the form of understanding that a new drug that changes attraction to prevent paedophilia could affect values of dignity and equality for the LGBTQ+ community if it is weaponised in conversion technology:⁹⁶

VSD particularly focuses on values with moral import that are often implicated in technological developments, such as the values of human dignity, justice, welfare, human rights, privacy, trust, informed consent, respect for intellectual property rights, universal usability, environmental sustainability, moral responsibility, accountability, honesty, and democracy.

The next part entails an empirical inquiry into how identified stakeholders assess and behave with the technology as well as any value conflicts it gives rise to.

Lastly, the final part aims to incorporate the results of the previous parts into the design in a proactive way. For example, this could mean creating sufficient privacy settings for social media or ensuring sufficient safeguards for anti-love technology to ensure that it is not used without prior informed consent by users or on the

92 N Manders-Huits ‘What values in design? The challenge of incorporating moral values into design’ (2011) 17 *Science and Engineering Ethics* <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3124645/> (accessed 24 May 2020).

93 As above

94 Manders-Huits (n 92 above).

95 As above.

96 Manders-Huits (n 92 above).

LGBTQ+ community to eliminate same-sex desire and attractions in an individual.

Some argue that it may be justifiable to utilise future developments in technology for controlling attraction or altering sexual orientations. The reasoning for this is, supposedly, for addressing the pathological aspects of paedophilia in individuals to help them overcome their attraction to children. The fact that paedophilia can sometimes be considered a pathology.⁹⁷ Another argument is that it can be used on victims of abuse to leave their abusers.

Earp, Sandberg, and Savulescu considered the misuse of biotechnology. This kind of intervention is for a lifetime if one is to use it for love alternation and therefore they considered the possibility of the abuse of this intervention.⁹⁸ They, therefore, considered an outlined ethical framework to limit the abuse of biotechnology conversion therapy.⁹⁹ In their work, they laid down the following as ethical guidelines for the use of anti-love biotechnology:

1. The love in question would be harmful and in need of dissolving one way or another.
2. The person would have to want to use the technology so that there would be no problematic violations of consent.
3. The technology would help the person follow her higher-order goals instead of her lower-order feelings, thereby enhancing her 'bigger picture' decision-making autonomy.
4. It might not be psychologically possible to overcome the perilous feelings without the help of anti-love biotechnology—or at least more 'traditional' methods had already been tried or thoroughly considered.

Earp, Sandberg, and Savulescu suggested the above ethical framework to justify permissibility for the use of their biotechnology method of conversion therapy. However, these guidelines can be adapted to guarantee that these technological advancements are not used in a way which could violate human rights of vulnerable communities, such as the LGBTQ+ community. Acquiring a party to produce written consent, as well as providing verbal consent after undergoing an assessment should be the main safeguard to ascertain that the party in question has voluntarily given consent to the procedure. This will eliminate persons being forcibly subjected to undergo this particular procedure, and thus preventing violations of human rights from occurring.

97 D Canter *et al* 'Paedophilia: pathology, criminality, or both? The development of a multivariate model of offence behaviour in child sexual abuse' (1998) 9 *The Journal of Forensic Psychiatry* 553.

98 Earp (n 71 above) 4.

99 Earp (n 71 above) 4-5.

7. RECOMMENDATIONS

The Centre for Human Rights urges the adoption of the following recommendations by relevant stakeholders:

7.1 Recommendations to governments

- Condemn the continuous use of conversion therapies in all forms.
- Review discriminatory laws that trigger violence and human rights violations against LGBTQ+ persons.
- Enact laws to ban coercive conversion therapies and implement policies that discourage non-coercive conversion therapies, with a particular focus on the use of conversion therapy practices on minors perceived to be sexual or gender minorities.
- Institute guidelines and policies to reinforce technology ethics in the area of conversion therapy and prohibit the coercive use of technology to alter sexual orientation.
- Investigate and prosecute incidents of coercive conversion therapies, particularly those involving torture and cruel, inhumane, or degrading treatment.
- Include sexual diversity in the training curriculum of service providers across healthcare, welfare, and policing services.
- Enforce the implementation of policies regarding the ethical development of artificial intelligence in emerging technologies to curb potential digital bias against LGBTQ+ communities.

7.2 Recommendations to national human rights institutions

- Establish a reporting process for informing the institution on human rights abuses resulting from conversion therapies.
- Establish processes to provide remedies for human rights abuses resulting from conversion therapies.
- Design and implement campaigns to promote an end to all forms of conversion therapies.
- Liaise with community-based organisations to promote awareness on the harmful effects of conversion therapies.

7.3 Recommendations to civil society organisations

- Acknowledge and promote sexual diversity and initiate programmes to ensure the protection and promotion of the human rights of LGBTQ+ persons.
- Promote awareness of the harmful effects and human rights violations of conversion therapies in relevant health, gender, and human rights programmes.
- Develop sensitisation workshops with technology organisations, cultural

and religious communities, mental health professionals, and government agencies on the need to reduce the spread of conversion therapies.

- Monitoring the implementation of government policies regarding the ethical development of artificial intelligence in emerging technologies to curb potential digital bias against LGBTQ+ communities.

BIBLIOGRAPHY

Books

Cronin, E & Linsky, L The impacts of conversion therapy on LGBTQ youth (2019)
Earp, B; Anders, S; Julian, S Brave new love: the threat of high-tech 'conversion' therapy and the bio-oppression of sexual minorities (2014)
ILGA State sponsored homophobia (2019)
Koraan, R & Geduld, A Corrective rape of lesbians in the era of transformative constitutionalism in South Africa (2015)

Chapters in books

Earp, BD & Vierra, A 'Sexual orientation minority rights and high-tech conversion therapy' in Boonin, D (ed) Handbook on philosophy and public policy (2018)

Journal Articles

Drescher, J 'A history of homosexuality and organized psychoanalysis' (2008) Journal of the American Academy of Psychoanalysis and Dynamic Psychiatry 444
Earp, B 'The ethics of infant male circumcision' (2013) Journal of Medical Ethics 417
Manders-Huits, N 'What values in design? The challenge of incorporating moral values into design.' (2011) Science and engineering ethics
Marie-Amelie, G 'Expressive ends: Understanding conversion therapy bans' (2017) Alabama Law Review 794
Ntozini, A; Ngqangweni, H 'Gay Xhosa men's experiences of ulwaluko' (2016) Culture, Health and Sexuality
Ryan, C; T, Russell; D, Rafael; R, Stephen 'Parent-initiated sexual orientation change efforts with LGBT adolescents: Implications for young adult mental health and adjustment' (2018) Journal of homosexuality 2

Newspaper articles

AFP 'Ethiopian church leaders push gay conversion therapy' (Daily Monitor 2019).
Avery, D '71 countries where homosexuality is illegal' (Newsweek 2019)
Bever, L 'Conversion therapy associated with severe psychological distress in transgender people, study says' (The Washington Post 2019)
Donegan, M 'The abominable legacy of gay-conversion therapy' (The New Republic 2017).
Ezeamalu, B 'Pastors, activists debate gay rights in Nigeria' (Premium Times 2018).
Fitzsimons, T 'Germany is 5th country to ban conversion therapy for minors' (NBC News 2020)
Jackman, J 'Hundreds of gay to be treated for homosexuality at a camp in Ghana' (PinkNews 2018)
Kelley, A 'Raped and killed for being lesbian: South Africa ignores corrective rape

attacks' (The Guardian 2009)

M, O'Hara 'This pro-conversion therapy group wants to target LGBTQ+ youth on social media' (Them 2018)

Olad, S 'Escaping gay conversion therapy in Kenya' (The Ithacan 2018)

Onyango, J 'Gay therapy! Church claims homosexuality can be cured through prayers and 3 days of starvation' (Tuko 2017)

Richard, L 'Psychiatrist, in a shift, declare homosexuality no mental illness' (The New York Times 1973)

Sanderson, S 'SA teen dies brutal death after attending gay conversion camp' (The South African 2013)

Williams, M 'Facebook removes ads for gay conversion therapy after backlash' (Salon 2018)

Reports/Papers

American Academy of Child & Adolescent Psychiatry 'Conversion therapy'. https://www.aacap.org/AACAP/Policy_Statements/2018/Conversion_Therapy.aspx (accessed 29 May 2020)

UK Council for Psychotherapy 'Conversion therapy – consensus statement' <https://www.psychotherapy.org.uk/wp-content/uploads/2016/08/ukcp-conversion-therapy.pdf> (accessed 1 June 2020)

'Conversion Therapy and LGBT Youth Update' <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Conversion-Therapy-Update-Jun-2019.pdf> (accessed 26 March 2020)

'Conversion therapy: Current policy and ethical issues' <https://societyforpsychotherapy.org/conversion-therapy/> (accessed 24 May 2020)

Human Rights Watch, 'Have you considered your parents' happiness? Conversion therapy against LGBT people in China' 31 https://www.hrw.org/sites/default/files/report_pdf/china1117_web_0.pdf (accessed 14 April 2020)

International Rehabilitation Council for Torture Victims 'Conversion therapy is a torture' <https://irct.org/media-and-resources/latest-news/article/1027> (accessed 27 May 2020)

ILGA 'Curbing deception: A world deception legal regulation of so-called conversion therapies' https://ilga.org/downloads/ILGA_World_Curbing_Deception_world_survey_legal_restrictions_conversion_therapy.pdf (accessed 15 April 2020)

Organisation Panaméricaine de la Santé 'Therapies to change sexual orientation lack medical justification and threaten health' https://www.paho.org/hq/index.php?option=com_content&view=article&id=6803&Itemid=1926&lang=fr (accessed 14 April 2020)

OutRight Action International 'HARMFUL TREATMENT: The Global Reach of So-Called Conversion Therapy' <https://outrightinternational.org/content/united-nations-independent-expert-sogi-focuses-so-called-conversion-therapy> (accessed 26 March 2020)

'Overturning long-held biases' <https://www.apa.org/monitor/2019/03/overturning-biases> (accessed 27 March 2020)

'Testimony from Cairo, Egypt' <https://www.josephnicolosi.com/collection/2015/4/18/testimony-from-cairo-egypt> (accessed 28 April 2020)

'The sexuality blog: Gay conversion therapy is happening in Africa and it is horrible' <https://ynaija.com/sexuality-blog-gay-conversion-therapy-happening-africa-horrible/> (accessed 27 April 2020)

Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity with focus on practices of so-called 'conversion therapy', GIN-SSOGIE submission 20th December 2019- <https://webcache.googleusercontent.com/search?q=cache:H29t57ibqwQJ:https://www.ohchr.org/Documents/Issues/SexualOrientation/IESOGI/CSOsAJ/GIN-SSOGIESubmission.docx+&cd=3&hl=en&ct=clnk&gl=za> (accessed 17 March 2021)

Case Law

Jegley & Another v Picado (2001) 16 Supreme Court of Arkansas

Shields & Others v Madigan (2005) 3 Supreme Court of the State of New York

International Treaties

African Charter on Human and Peoples' Rights

African Charter on the Rights and Welfare of the Child

International Covenant on Economic, Social and Cultural Rights

Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa

Websites

[OutRight Action International](https://outrightinternational.org/content/criminalization-and-conversion-prevalence-and-practices-so-called-conversion-therapy-africa) 'Criminalization and conversion : prevalence and practices of so-called conversion therapy in Africa' <https://outrightinternational.org/content/criminalization-and-conversion-prevalence-and-practices-so-called-conversion-therapy-africa> (accessed 26 March 2020)

'US evangelicals targeted LGBT young people with dehumanising Facebook and YouTube ads' <https://www.opendemocracy.net/en/5050/us-evangelicals-target-lgbt-young-people-facebook-youtube-ads/> (accessed 28 April 2020)