



Petitions Committee

House of Commons, London SW1A 0AA

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Rt Hon Jeremy Hunt MP
Secretary of State for Health
Richmond House
79 Whitehall
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21 March 2017

Dear Jeremy,

The Petitions Committee met on 21 March and considered a recent e-petition titled ‘Make offering Gay Conversion Therapy a criminal offence in the UK’, to which your department has responded. The response to this petition arrived 19 days late.

The petition explains that legislation might help to make members of the LGBT+ community—who feel threatened by recent global events, including the 2016 shootings in Orlando—to feel safer.

The response to the petition does not address directly the petition’s request for legislation. It seems to suggest that the Government does not consider legislation to be necessary to prevent the practice of gay conversion in the UK, but it does not make this point explicitly. Nor does it explain why the Government has reached this view.

The response also states that the Government has “already taken the necessary steps to prevent the practice of gay conversion therapy in the UK”. This seems to refer to the Memorandum of Understanding agreed with the main registration and accreditation bodies for psychotherapy and counselling practitioners. If the Government has taken any further steps to prevent the practice of this kind of therapy, then it would be helpful to have more detail of these. If not, it would be helpful to have a clear explanation of why the Government believes that the Memorandum of Understanding is sufficient to achieve this.



Therefore be grateful if you could send us a response which addresses the request of the petition more directly, so that we can share this with petitioners.

Best Wishes,
Helen

Helen Jones MP
Chair of the Petitions Committee



Department
of Health

From Nicola Blackwood MP
Parliamentary Under Secretary of State for Public Health and Innovation

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Helen Jones MP
House of Commons
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23 MAR 2017

Dear Helen

I write in answer to your letter dated 21 March 2017. First please let me apologise for the delay in responding to the petition, as a cross-cutting issue, my officials worked with other Government departments to provide a substantive response to the petitioners' concerns.

I would like to reiterate that the Government has consistently condemned gay conversion therapy, and stressed that no public money should ever be used to fund such a practice.

To put this commitment into practice, we have supported the publication of a statement to make clear that the major therapy bodies in the UK are united against the use of such therapies and in January 2015, the 'Memorandum of Understanding on Conversion Therapy in the UK' (MoU) was launched. The MoU was signed up to by many health organisations – including the NHS. This MoU is currently being updated to cover the transgender community.

In parallel, the Government introduced assured voluntary registers for counselling professionals. Quality assurance of the voluntary registers is undertaken by the Professional Standards Authority. This allows employers and people who use services to assure themselves that the practitioners they appoint or contract with meet high standards of training, conduct and competence, and at all times apply high ethical standards to their work, without placing an undue regulatory burden on practitioners or taxpayers. Organisations seeking to be accredited set their own rules about what therapies their members can or cannot offer. The MoU gives a benchmark for the rules on offering conversion therapy.

Since the process of Accredited Registers was launched in 2013, 22 registers have been accredited by the PSA. 13 are held by organisations dedicated to mental health and wellbeing and a number are within the counselling and psychotherapy sector. This means there are already approximately 34,000 counsellors and psychotherapists

are voluntarily registered out of an estimated workforce of approximately 50,000. In this way we are embedding the consensus against the practice of conversion therapy.

Returning to the use of a statutory ban, we consider that legislation is a blunt instrument and not suited to this issue. To legislate in this area we would need to be able to define exclusively what conversion therapy is, and in doing so not inadvertently capture parts of other therapies, because the consequence of breaking the law would be a sanction, possibly a criminal record. The Government believes that there is a real risk, in taking a legislative option, that we overly restrict access to therapies and capture, in any legal definition, therapies that may help some people in working through issues and feelings they have about their sexuality and to access appropriate support.

I hope this sets out more specifically how the Health and Care System is embedding the Government's commitment and ensuring that this therapy, which has no evidence base, is not practised in this country.

Best wish

Nicola

NICOLA BLACKWOOD