

The Canadian Association of Social Workers (CASW) is the national association voice for social work in Canada with a dual mission to promote the profession and advance social justice. Our profession puts a special emphasis on the inherent dignity and worth of all persons, and we thank you for inviting us to provide a social work perspective on Bill C-6, an *Act to Amend the Criminal Code (conversion therapy)*. CASW unequivocally supports Bill C-6's intention to ban this abhorrent attack against 2SLGBTQ+ communities but believes the legislation could be strengthened to make this national and international stride forward for human rights.

Rooted in the profession's Code of Ethics and on behalf of social workers across Canada -- as well as echoing the crucial report by *No Conversion Canada* -- CASW **provides 6 key** recommendations at the conclusion of this submission to strengthen this already foundational legislation.

CONTEXT

Conversion 'therapy' practices, which aim to alter an individual's sexual orientation or gender, go by many names, such as reparative therapy, reintegrative therapy, reorientation therapy, exgay therapy, gay cure, and "sexual orientation and gender identity and expression change efforts." To provide further context into these devastating practices, conversion therapy efforts have been known to include practices such as electroshock treatment or electroconvulsive therapy, lobotomies, chemical castration, aversion therapy, behavioural conditioning, gender coaching, regressive role play, hypnosis, extreme fasting, sleep deprivation, "corrective" rape, spiritual prayer, exorcism, and the use of various isolation tactics in a deliberate attempt to change, alter, deny, or suppress a person's sexual orientation, gender identity, or gender expression. That said, even the 'gentlest' forms of these therapies are attacks against 2SLGBTQ+ individuals' personhood.

Despite differences in nomenclature, these 'therapies' are united by their common traits: they are widely discredited by registered health and social professions, as being both deeply harmful and deeply ineffective, and directly contributes to 2SLGBTQ+ individuals' disproportionate experiences of mental health challenges, homelessness, poverty, violence, and substance use. ⁴ These impacts are especially egregiously felt among children and youth.

It is the federal government's role and responsibility to protect and uphold the rights of all citizens and CASW commends this government's steps to ban this deeply harmful, damaging attack against individuals' identities. We urge this government to go further, however, recognizing that the Canadian Human Rights Act stipulates that children and young persons in Canada are protected from discrimination based on gender identity, gender expression, and sexual orientation. As such, CASW calls for the federal government to put the safety and security of children and youth first by unanimously supporting and expediting this legislation into law with included amendments to codify the rights of trans, gender diverse, and gender creative children and youth.

CASW RECOMMENDATIONS

- 1. The bill must include Gender Expression as well as expand the definition of gender expression as follows:
- (a) to a person's social, legal, or medical gender transition; or
- **(b) to a person's non-judgmental exploration and acceptance of their identity or to its development.** The bill contains a problematic and limited definition of conversion therapy, which fails to include "gender expression", despite being a ground on which discrimination is prohibited under the Canadian Human Rights Act. The current definition does not go far enough in including reference to services that relate to gender expression.
- 2. The law must not remove the liability of the provider of conversion therapy on the ostensible basis that the recipient consented, when the practice itself is proven to be fraudulent and harmful. This would create a significant loophole limiting the protective effect of the law. The government has an obligation to protect individuals from known or reasonably foreseeable harms and dangers, which is why there are strict consumer protection laws and numerous medical and health regulations in Canada. Any language focused on issues of "consent" and "coercion" is misdirected, as this fails to recognize the antecedent impact of systemic homophobia, biphobia, and transphobia on the lives of 2SLGBTQ+ people. Instead, the legislation must focus on conversion therapy as a harmful, unscientific, and deceptive set of practices. Restrictions and regulations are common and in place to protect the best interests of Canadians from recognized dangers, harms, and fraudulent and abusive practices. Although this practice goes against most health professionals' Code of Ethics; a federal ban is required to ensure no one falls through the cracks of varied municipal and provincial laws across Canada.

- 3. The law must not delineate by age: this is problematic as it implies that conversion therapy may be dangerous/harmful to some (minors), but not necessarily to others (adults). "Adults" could also include a person who has just turned or is a few years above legal age. These young adults are extremely vulnerable and are often targeted by conversion therapy practices. Government legislation should cover all ages. The notion that there can be "consenting adults" is misguided. In short, an individual cannot actively consent to conversion therapy practices when these are known to be deceptive, coercive, and fraudulent.
- 4. Any federal legislation must also revoke the charitable status, if held, of any organization that promotes, advertises, or practices any form of conversion therapy.
- 5. The federal government must invest in a survivor's fund for those who have experienced the harm of this damaging practice so that they can receive the supports, services, and reparations they deserve.
- 6. The federal government must allocate funding to accompany this bill towards education and awareness campaigns highlighting the need to end conversion therapy in Canada. Social workers are acutely aware of the work required to change harmful and unfounded public perceptions that lead to discrimination and further marginalization. We must address the root causes of the stigmatization and the social and economic conditions that further oppress 2SLGBTQ+ individuals.

References

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