

Briefing and reflections on Conversion Therapy

The following paper was presented to the House of Bishops for information and as a briefing on the question of Conversion Therapy. It was agreed by the House that it would be appropriate for this paper to be made available to the wider Church, to increase understanding of the issues involved and promote good practice in line with the General Synod's vote that Conversion Therapy should be banned.

It is in the form of a briefing as an aide to understanding the concepts and complexities involved. Public discourse around Conversion Therapy has both given voice to concern about practices that are deeply harmful, and concern about freedom of belief. This briefing explores both questions.

All material included was drawn up in consultation with a number of LGBTQ+ people from a variety of church traditions. The work was also conducted in consultation with the National Safeguarding Team.

For ease of reference, this briefing is presented in the form of questions and answers.

The present Government had announced an intention to put forward a bill to introduce a ban on conversion therapy, though at the time of writing, this has not yet happened. The Church of England submitted its response to the Government's consultation and the plans that were put forward at the time, and this is reflected in the paper below.

A. What is Conversion Therapy and why ban it?

1. 'Conversion Therapy' (CT) is a term used as an umbrella for a number of practices aiming to change a person's sexual orientation or gender identity. There is no clear or fully agreed definition, though all definitions include an element of coercion and imposition, and some form of violation of a person's sense of identity and agency. The British Association for Counselling and Psychotherapy (BACP), in their 2017 Memorandum of Understanding, define it as 'the term for therapy that assumes certain sexual orientations or gender identities are inferior to

others, and seeks to change or suppress them on that basis.’¹ In a debate at General Synod in July 2017, the Synod voted in all three houses to condemn the practice of CT; the motion was initially based on this definition, but was amended to use the BACP 2015 MoU, which introduced a more cautious note: ‘efforts to try to change or alter sexual orientation through psychological therapies are unethical and *potentially* harmful’ as well as a specific focus on sexual orientation and the exclusion of gender identity. Definitions, however, are not settled, and it is unclear why a ‘potentially harmful practice’ should be accepted for one group and rejected for another. In considering CT it is wise to remember that this is a fast-evolving field of study and public debate.

2. The Church of England, as part of the global Christian Church, is committed to the protection of the vulnerable in all circumstances.² Given this commitment, regardless of specific definitions, the Church of England therefore recognises that CT is (a) ineffective on its own terms and potentially harmful; (b) contrary to scientific evidence on sexual orientation; and (c) in some cases involves violence and abuse, which clearly cause harm.
3. Using the word ‘therapy’ is in itself controversial as such practices, which damage and wound rather than enable healing, are considered a perversion of therapy. Stories of ‘Conversion Therapy’ include the use of extreme physical force and violation, including rape, assault, deprivation of liberty, abduction, beatings, and torture. They also include the use of psychological techniques to try and convince/force a person to change.
4. Some LGBTQ+ advocacy groups, such as the Ozanne Foundation, argue that the words ‘Conversion Therapy’ should be changed to ‘conversion practices’, and cover any act attempting to change a person’s gender identity or sexual orientation. This ‘catch all’ definition is intended to be as broad as possible so as to protect, in particular, young people who are in an explorative stage of development and who are statistically most at risk from conversion practices.³

¹ <https://www.bacp.co.uk/media/14985/memorandum-of-understanding-on-conversion-therapy-in-the-uk-march-2022.pdf>

² <https://www.churchofengland.org/news-and-media/news-and-statements/general-synod-backs-ban-conversion-therapy>

³ The Ozanne Foundation, *The Cooper Report*, p. 3.

5. The Government's proposals consider that delivering talking therapy with the intention of changing a person's sexual orientation or changing them *from* being transgender or *to* being transgender should be considered a criminal offence when it involves someone who is under 18, or someone who is 18 or over and who has not consented, or lacks the capacity to do so. There had been some uncertainty as to whether the Government would proceed with regards to gender identity, or restrict the scope of legislation to sexual orientation, however, the latest plans are to include gender identity.
6. An area of controversy to note around the definition of CT is the question of 'suppression' and whether the idea of encouraging celibacy for all relationships outside of marriage would be considered negative and coercive. Some care needs to be taken in defining 'suppression' and what it can (and cannot) be applied to, and how self-regulation and choices of certain ways of life can be positive rather than harmful.
7. The fluidity of the definition, however, is problematic and has raised concerns about where boundaries are, particularly in relation to criminalisation. As of now, both Church and Government continue to use the term 'conversion therapy' as a more focused term to describe coercive practices, whether they are mostly physical, psychological, or spiritual.

B. What is the relationship between Conversion Therapy and prayer?

8. The key concept in the planned legislation is that of coercion. Any form of prayer which is coercive and does violence to an individual's agency would fall under the scope of Conversion Therapy in the legislative definition.
9. The Government's initial proposals and subsequent communications have stressed that, where consenting non-vulnerable adults are concerned, conversations, prayers and counselling which may explore issues arising from their explorations of sexuality and gender, should not be criminalised.
10. However, activities involving (at the extreme end) physical violence, or mental or spiritual abuse, will appropriately fall within the scope of the Bill. The use of deliverance ministry in this area would also be considered

coercive and go against the guidelines of the Church of England.⁴ The question for churches, therefore, is whether their practices of prayer with, and for, others, remain demonstrably non-coercive.

11. The concept of coercion is somewhat tricky to apply well, as what is coercive is not always obvious at first sight. As prayer for one another usually takes place within the context of wider community life, it is wise to be aware of the complex relationships between individuals and community. Dominant narratives or traditions may shape patterns of prayer and dominant groups or individuals may silence contrary voices. At the same time, profound cultural commitments to individualism may lead some to the assumption that their needs are encapsulated by their sense of individual freedom, with no sense of being formed and grounded within a community. Prayer in a church community is not the same as individual therapy. There will be ethical and communal commitments that shape the context for prayer – commitments which may or may not be shared in exactly the same way by the wider church and wider society. Negotiation of this context with awareness is important in the creation of healthy contexts for prayer. Where prayer for others is entered into without self-awareness, openness, and reflection, conflictual and controlling patterns of behaviour may be generated which, even if inadvertently and without malicious intent, may become damaging and potentially abusive.

12. It is also important to note that the primary focus of the proposed legislation is to protect the vulnerable, rather than suppress diversity of belief. Defining vulnerability without over-extending the category to include all LGBTQ+ people, or any adult expressing doubts or questions about their orientation or identity, (which would be a diminishing of their humanity), is a complex task which needs to include careful account of imbalances of power and authority.

C. What are the difficulties in relation to a ban on Conversion Therapy?

13. Problems in defining conversion therapies have led to growing anxieties that a ban could outlaw forms of prayer which do not adopt a wholly affirmative approach to (for example) same sex attraction or gender

⁴ See the Church of England's guidelines on deliverance ministry, [4. 1 Deliverance Ministry | The Church of England](#)

reassignment and that Christians who offer pastoral prayer for those who are troubled in these areas of their lives could face prosecution and heavy fines.

14. The chief difficulty in banning Conversion Therapy is establishing a definition of the practice which captures abuse and coercion, but which does not inadvertently ban important therapeutic practices, which help people address issues concerning sexuality and gender identity. It is also important to avoid the creation of a "chill factor" where legitimate therapeutic practitioners are deterred from operating due to a fear that they might mistakenly be perceived as breaching the ban. While churches do not offer therapy *per se*, the same concerns apply to pastoral care, which is subject to similar dynamics. The BACP MoU addresses this concern explicitly:

*'Psychological therapists routinely work with people who are struggling with inner conflict. For people who are unhappy about their sexual orientation – whether heterosexual, homosexual or bisexual – there may be grounds for exploring therapeutic options to help them live more comfortably with it, reduce their distress, and reach a greater degree of acceptance of their sexual orientation.'*⁵

15. This point, however, stresses the openness of the process - in contrast with CT where the outcome of the encounter is predetermined. Furthermore, the BACP MoU also stresses the importance of therapists working in ways that privilege a person's own framework of beliefs, rather than imposing their own personal beliefs, whether conservative or liberal in nature:

*'Ethical practice in these cases requires the practitioner to have adequate knowledge and understanding of gender and sexual diversity and to be free from any agenda that favours one gender identity or sexual orientation as preferable over other gender and sexual diversities. For this reason, it is essential for clinicians to acknowledge the broad spectrum of sexual orientations and gender identities and gender expressions.'*⁶

⁵ <https://www.bacp.co.uk/media/14985/memorandum-of-understanding-on-conversion-therapy-in-the-uk-march-2022.pdf>

⁶ <https://www.bacp.co.uk/media/14985/memorandum-of-understanding-on-conversion-therapy-in-the-uk-march-2022.pdf>

16. This is obviously more complex in a church where certain theological beliefs and ethical norms are espoused; however, adults who hold these beliefs should be free to seek pastoral care or therapy that does not violate these beliefs and helps them live well within the communities which they consider their own.
17. There is also an important question about the human rights of adults to hold and express beliefs which are outside the mainstream and to act together upon those beliefs with the informed consent of all concerned. There are also arguments around the difficulty of giving informed consent when one is part of an organisation or shared mind-set which supports the ideas behind CT. The desire to belong and strong identification with a certain group can make dissent, and hence consent, extremely difficult to assess. However, treating members of groups which hold such beliefs as, by definition, incapable of informed consent, is incompatible with basic human rights. The objective of a ban on CT should be about protecting the vulnerable rather than imposing a single set of beliefs across society.

The CofE's initial response to the Government consultation stated:

- The proposals outlined in the consultation seem to us to have negotiated these tricky questions well. They make good use of existing law where that is pertinent.
- They strengthen the law, and the potential penalties, in ways which emphasise the likely harm of CT and bring it more strongly into the public consciousness.
- They focus on protecting the vulnerable.
- They place the onus for defending any practice identified as CT on the person or organisation offering the therapy to prove that it is not coercive or within the scope of the ban (which seems to be a reversal of the usual burden of proof).
- They rightly give unequivocal protection to minors and those not able to give free and informed consent.
- They do not infringe the rights of informed, consenting adults to believe things which are unpopular, whether about themselves or others, or infringe their right to manifest those beliefs -- while carefully balancing individual rights and the common good of all.
- They do not outlaw conversations exploring complex and disputed issues and should not therefore impinge upon freedom of speech.

D. What is prayer and how do we avoid coercive practices?

18. Prayer is a profoundly human way of being in the world. The riches of prayer are grounded in what God – in Christ – offers to us. In short, prayer is a gift from God and prayer is a natural response to God's loving action and presence in the world. The freedom to pray is the first entitlement of the human creature. Prayer is predicated on relationship, attention on God, and on listening to God in our lack and in God's sufficiency.

19. With the best of intentions, and sometimes due to lack of awareness, prayer for others can be used in coercive and controlling ways. We may wish the best for people but sometimes in our ignorance, or because of our anxiety to 'get it right', we may override people's freedom and agency. Coercive forms of prayer do not make space for the person prayed for to explore and speak to God for themselves and instead they are controlled and coerced into accepting the beliefs and values of those offering prayer, whether through argument, entreaty, or threat. Coercive forms of prayer follow the predetermined agenda of those who offer the prayer.

20. When people are exploring answers to their questions, hopes and needs in prayer, it can be easy for them to become over-certain about what they think they are hearing from God, Scripture, or others. It can be hard to hold the line between a commitment to follow where God leads and humility about our ability to hear and understand what is revealed. But without this, conviction can turn into coercion – whether in one-to-one or communal prayer. In fact, disagreement is a significant part of discernment and mature decision-making. To say that God has a purpose for us is not the same as saying that we have an unerring grasp on what that is. The process of discernment through prayer, debate and disagreement is an important aspect of growth in faith, as it privileges people's agency in discernment and decision-making. This is important both for personal responsibility and community development.

21. Prayer for others is most likely to be healthy and appropriate when it is conducted in contexts where people pay attention, and are committed, to personal and communal maturity. This means the growing of communities in which people are open and respectful of the other, develop self-awareness as a group, and learn how to attend to, and

express, difference honestly and respectfully. Clergy and lay ministers often need more help and encouragement in the formation of such communities. While the overwhelming majority of clergy and lay ministers would not engage in any sort of formalised Conversion Therapy, there is still room to improve awareness of power dynamics and of their own position of influence.

22. Those who are involved in praying for others need to learn, in such an environment of respect, to guard and encourage the agency of those for whom they pray whilst being appropriately open to the presence and activity of God. Those to whom the church entrusts a representative ministry of praying for others need to commit themselves to initial training, ongoing learning, and regular reflective supervision, all within the frameworks of good practice set by the National Church on Safeguarding. Church communities also often involve informal networks of prayer between lay people and volunteers, whose prayers cannot (and should not) be controlled yet need to be shaped by a healthy wider culture nurtured by those in leadership.⁷ Informal prayer in this case cannot be counted as ‘therapy’ but still has the potential to be difficult or harmful – as all human relationships can be.

23. Within this context, however, it is important to distinguish between coercion and taking offence. This matters particularly in the context of an increasingly pluralistic society with multiple religious groups whose dissenting views could risk being suppressed by being termed harmful, rather than simply offensive. An appropriately free society which encourages freedom of belief, will make space for beliefs that are not universally shared and might be termed offensive, so long as they are not used to cause actual harm. Therefore, the question here is not simply of the content of people’s beliefs, or their intention, but about the dynamics of power.

24. If the power relationship between two people is not heavily imbalanced in one direction, someone who doesn’t want to follow a particular line of prayer can just walk away. But if the power relationship is heavily weighted to the other person, that may not feel like an option. So, how can anyone assess when the power relationship (which is almost never strictly equal between any two individuals) tips over into coercion? Some

⁷ For existing work on healthy cultures, see [4.2 Spiritual Abuse | The Church of England Section 1: Responding well to all victims and survivors | The Church of England](#)

of this is not clear and relies on developing self-awareness, attention to levels of power, setting a prayer encounter under the sign of freedom, and giving the person being prayed for space for disagreement and permission to walk away at any point.

25. Training for good practice in this area is an ongoing need in the church. The House of Bishops has agreed the publication of guidelines for good practice: *Lord, Teach Us To Pray: An exploration of prayer in pastoral settings and guidelines for good practice*.

E. How do you define 'harm' in relation to Conversion Therapy?

26. The notion of 'harm' and what constitutes harm is not straightforward. This is explored in some detail in Chapter 5 of the Living in Love and Faith resource [Friendship and the Body of Christ](#) and is therefore reproduced below.

"To relate to another person, particularly one who is very different, is always going to be a risky undertaking, and the history of humanity suggests that harm will occur at times. Making space for the reality of pain and finding ways to relate across it, is to embody a call to reconciliation, and an essential aspect of the call to be Jesus' friends. This, however, does not make harm either inevitable, or something that should be minimised or brushed aside. We also need to acknowledge the asymmetric nature of harm caused in this area.

When we discuss matters of sexual orientation and gender identity, this question of 'harm' is often raised, both as a past and present reality, and as a fear for future encounters. As friends of Jesus, commanded to love one another, the reality that we cause pain and even harm to one another is deeply distressing, and a sign of our individual and collective sinfulness. A part of the LLF process has been to listen intently to the voices of LGBTQ+ Christians and recognise the role that the church in all its forms, and the Church of England in particular, has played in their marginalisation, and at times, in causing deep psychological harm.

However, to talk of harm is complex within the framework of the church. First, there is disagreement about what 'harm' looks like. For those holding more traditional positions, moral and spiritual harm can be caused by blessing or agreeing to patterns of life that fall short of the life to which the Gospel calls us.

On the other hand, there are many life stories of LGBTQ+ Christians that speak of deep harm through coercive practices, sometimes in pastoral prayer, sometimes through forms of 'Conversion Therapy', sometimes through systematic exclusion and through a more subtle undermining of someone's sense of self and personhood through consistent condemnation and a refusal to acknowledge their life with God. To disagree in the area of sexual orientation and gender identity is not simply an intellectual matter, or a question of actions, but touches on a person's sense of self. We need to recognise when, even with good intentions, the church has at times crossed a line into deeply harmful and traumatic practices that shatter someone's sense of self and ability to inhabit the world safely.

When we speak of our calling to be the people of God together, this leaves us with deep uncertainty and complex questions. We are called to be the church, and to be one. The abundant life that Jesus promises is not a life free of pain – as Jesus' words, 'take up your cross and follow me', suggest.

If we are called to be one, as a church, how do we deal with the reality of 'harm' graciously and firmly? How do we develop healthier ways of being church, without separating into homogenous bubbles? What do we do when we disagree on the very definition of 'harm' and how it is caused?

While pain and even harm do not necessarily result in trauma, in the clinical sense of the word, when harm does cause trauma, injunctions to keep living together, to love one another regardless become deeply problematic. If someone suffers trauma, they need compassion and safety above all else. That is why a traumatised person may need to withdraw from certain relationships or communities while they heal and find a safe place from which to rebuild strength and identity, and it is the church's duty to enable them to do so."⁸

F. What is the Church of England's previous guidance on 'coercive prayer' and Conversion Therapy?

27. There has been previous guidance from the Church of England on good practice in prayer, particularly in the document *A Time to Heal*.⁹ However, questions of coercion and Conversion Therapy have only fully come to

⁸ Friendship and the Body of Christ, pg. 62-63, [Layout 1 \(churchofengland.org\)](https://www.churchofengland.org)

⁹ Available here: [A Time to Heal Handbook The Development of Good Practice in the Healing Ministry by Archbishops' Council - Paperback - 9780715110706 \(chpublishing.co.uk\)](https://www.churchofengland.org)

light over the last few years and are increasingly highlighted as part of spiritual abuse. It is therefore timely that the Church of England should do new work to issue guidelines on good practice, in light of emerging research and current questions.

28. In July 2017, the General Synod of the Church of England debated CT and voted overwhelmingly to call upon Her Majesty's Government to ban this practice. The Church of England recognises that CT is (a) ineffective on its own terms and potentially harmful, (b) contrary to what is known of the science of sexual orientation etc. and (c) in some cases involves violence and abuse. The Church of England, as part of the global Christian church, is committed to the protection of the vulnerable in all circumstances.

29. The CofE statement following the 2017 Synod can be found here:

<https://www.churchofengland.org/news-and-media/news-and-statements/general-synod-backs-ban-conversion-therapy>.

G. Can coercive prayer/Conversion Therapy be considered a form of spiritual abuse?

30. Prayer which becomes abusive and displays gross misuse of power is a form of abuse exercised within a spiritual setting. Conversion Therapy is described by those who have gone through it as abusive, hence the Church of England Synod's decision to call for a ban on it.

H. Why has the issue of Conversion Therapy come up?

31. The question of how to think about, and respond to, Conversion Therapy and forms of prayer that can be considered coercive has arisen as part of an increasing awareness of the stories and experiences of LGBTQ+ people and concerns about how to help everyone be treated with respect within the church.

32. In addition, there are anxieties in the church that forthcoming legislation to ban CT may lead to situations where all prayer itself is prohibited and that some clarification of what is, or is not acceptable, and how to

respond to different types of unhelpful uses of prayer is now needed and timely.

33. Wider work is being undertaken to produce guidelines for good practice in pastoral prayer, which aims to produce material with wider relevance than solely Conversion Therapy and to consider appropriate and healthy dynamics for pastoral prayer more generally.

I. Has the Church of England previously endorsed coercive prayer practices or Conversion Therapy?

34. The Church of England has never formally 'endorsed' Conversion Therapy or coercive prayer, as these were not defined as specific practices. However, the practices of certain local churches, either deliberately or unwittingly, can now be seen to have been inappropriate but not formally challenged. Until recently, there was poor understanding of the harm caused by CT and a failure to listen to the experience of those who had faced pressure to change their orientation. Any behaviour involving coercion, violence or abuse is now more clearly defined in our safeguarding guidelines, with clear instructions for reporting. Beyond safeguarding guidelines, *Lord, Teach Us To Pray* will help provide a framework of self-appraisal for churches, with guidelines on good prayer practice and a generous approach to the complexity of human relationships within churches. The National Safeguarding Team has been involved throughout the work to advise and help identify abusive practices.

35. It may be puzzling to wonder how communities of faith, well-intentioned, have nevertheless participated, in smaller and larger ways, in practices that we now recognize to be abusive. A number of reasons have been suggested by a range of groups, coming from different perspectives; there is no coherent account owned by all. Some of the reasons listed below may be controversial, and this paper does not endorse or refute them, but simply highlights what has been suggested in debates and conversations as areas to engage with, with self-awareness and attentiveness to the impact of belief and practices on others. Areas include:

- A belief that godliness is heterosexuality, with a tendency to have a monolithic idea of the perfect human against which all others are

compared – with little regard for historical and cultural factors that shape this vision.

- A tendency to conceive of the world in binary and patriarchal ways, with strict essentialist definitions of masculinity, femininity, and associated gender roles. Masculinity can then tend to be overly defined in heterosexist and macho ways, and femininity coded as secondary, weak, and emotional. Cultural expressions of gender roles are then assigned moral value, leading to the belief that those who depart from them need to be changed, and, at times, to repent and convert back to 'true' Christian expression.
- An idealistic vision of heterosexual marriage and parenthood as one of the key marks, sometimes even necessities, of Christian maturity. The intent of the CofE to do work on singleness and celibacy, and the role of friendship, will help in shaping a fuller understanding of humanity, though this also needs to be accompanied by a realistic approach to marriage and parenthood.
- False reports that significant changes in the pattern of someone's sexual attractions were frequently possible and could be permanent - if people attempted CT.
- There is a highly contested debate as to whether many people experience fluctuation over life in their sexuality and patterns of attraction.
- A cultural moment and context (especially in the US) in which working with a therapist was seen as the answer to numerous perceived problems.
- Problematic theories around the causes of same-sex attraction that rooted it in a bad relationship, or lack of connection, with your same-sex parent, or same-sex contemporaries growing up: in 'wounds' that needed to be 'repaired' and to which therapy was therefore the answer.
- A simplistic theology of prayer that fails to account for the sinfulness of those who pray and the cooption of prayer into other human agendas.
- An over realized eschatology that promised 'healing' from all struggles in the here and now.
- No positive vision of living life to the full as a celibate Christian.

36. One of the most effective ways of preventing CT and coercive forms of prayer amongst any Christians that might still support it will be correcting these types of misunderstandings.

J. How should we handle personal requests for prayer around sexual or gender identity?

37. One of the areas where this issue is most pertinent is when a priest, or other lay or ordained minister or member of a prayer team, is approached by an individual asking for prayer connected to their own sexual or gender identity. This is a highly complex area of work, where the risk of coercion and erasure of someone's agency runs in several directions. The primary aim of pastoral prayer is to accompany an individual on their journey towards God, not to define where that journey should end. Prayer presupposes divine agency and the reality of God's goodness within it. As such, to come alongside an individual and allow them to define the terms of engagement with God, needs to be done with trust that God will lead them to 'fullness of life'. Coercion can run in different directions: it can be to try and convert someone out of a same-sex orientation; but to coerce an individual to move away from a conservative expression of faith which has sustained them can be damaging and inappropriate too. The temptation for the one who offers prayer, whatever their perspective, is to take the place of God and seek to manipulate, define, or dictate the life of the other.

38. There is also always the danger that good intentions are marred by misjudgement and carelessness. We need to understand that prayer takes us into the presence of a transcendent God, who may unsettle as well as reassure us, and that when we pray for others we do not and cannot control what God may do – and should not want to do so. However, we should take care to ensure that the human relationship in prayer is psychologically safe and the church should be prepared to learn from wider wisdom in the world, as well as the church's historic traditions, to ensure this.

39. There is, however, clearly space for coming alongside an individual who is struggling and accompanying them as they seek to find ways to live with the inner conflicts and challenges that they face. Clergy and other Christian ministers, like counsellors or therapists, may be approached by

people who are struggling with inner conflict and here the remarks of the BACP, quoted above, are particularly relevant:

"For people who are unhappy about their sexual orientation – whether heterosexual, homosexual or bisexual – there may be grounds for exploring therapeutic options to help them live more comfortably with it, reduce their distress and reach a greater degree of acceptance of their sexual orientation."

40. This point assumes the openness of the process in contrast with Conversion Therapy in which the outcome of the encounter is predetermined. Instead, it leaves open the possibility of supporting someone in living according to the spiritual practices that they wish to follow. 'Acceptance' does not prejudge how this acceptance is lived out or understood, nor does it preclude a degree of fluidity in an individual's understanding of their own identity and sexuality over time.

K. Would legislation put limits on prayer?

41. The key concept in the planned legislation is that of coercion. We have been assured that, where consenting non-vulnerable adults are concerned, conversations, prayer and counselling within which they themselves question their sexuality or gender identity will not be criminalised.

42. It remains that it is impossible to say, in the light of the Government's plans, that "prayer will not be banned", since some forms of prayer, involving (at the extreme end) physical violence, or mental or spiritual abuse, will fall within the scope of the Bill. The question for churches, therefore, is whether their practices of prayer and pastoral care with, and for, others remain demonstrably non-coercive.

43. Any 'limits' would apply specifically to pastoral prayer (interpersonal prayer focused on an individual), whether in a private setting or a wider public setting and seek to prevent explicitly abusive or coercive behaviour only.

L. Is a restriction on coercive prayer/ Conversion Therapy a clamp down on traditional Christian beliefs?

44. We are aware of the arguments around the difficulty of giving informed consent when one is part of an organisation or shared mind-set which supports the ideas behind CT. We recognise that the desire to belong and strong identification with the thoughts and practices of one's group can make dissent, and hence consent, extremely difficult to assess. However, we believe that non-vulnerable adults should be allowed to express beliefs that the majority of the population may not share, and that treating members of groups which hold such beliefs as, by definition, incapable of informed consent, is incompatible with basic human rights.

45. No matter what part of the Church someone comes from, it is expected that they should be treated with kindness, respect, and dignity. Furthermore, the temptation to impose one's beliefs on another can come in many guises and varied theologies and spiritualities. Appropriate safeguarding training and good practice should ensure that, where strong beliefs are expressed, they are expressed in non-coercive, respectful ways for all.

M. What is the place of consent in relation to Conversion Therapy and forms of prayer?

46. A key concept in the legislation, and in good practice, regardless of legislation, is that of coercion. This means that it is coercive practices that are problematic and would be banned, but it should still be possible for people to be free to ask for help or prayer if they feel that they do not want to experience same sex attraction or want to live in a way consistent with conservative beliefs. In this case, prayer can be offered to help them live well as they wish, but this should not move into coercive practices, should be about supporting that person's own journey, and be highly sensitive to the complex issues surrounding this type of prayer.

47. Children and vulnerable adults should never be in a position where CT or prayer to change their sexual or gender identity is offered, as their vulnerability makes informed consent extremely problematic. As such, the question of consent arises primarily in relation to non-vulnerable adults. It is important that they should be able freely to request and to receive

prayer to accompany and support them in exploring their own sexual or gender identity, provided that such prayer is offered to them in a non-coercive way and does not seek to impose on them a predetermined outcome.

48. Informed consent may be authentically given by individuals who belong to a community which holds views based on beliefs not shared by the majority of the population; the freedom to hold and teach such beliefs is a basic human right. That said, leaders and ministers in such communities must always be vigilant to ensure that individuals are not in fact coerced or pressured into consenting to practices which violate their spiritual freedom or sexual or gender identity; consent to spiritual abuse cannot be legitimised.

49. In this respect, it is also important to consider the role of a local community of faith in shaping the ability to consent. Wider community pressures can lead an individual to feel coerced or as if there are no alternatives, leading them to seek prayer in ways that appear consensual but are coerced by this wider context. Therefore, there is a need for ministers to be alert to the ways in which community dynamics influence individual consent.