

Nursing and Midwifery Council response to the consultation on banning conversion therapy

About Us

- 1 Our vision is safe, effective and kind nursing and midwifery that improves everyone's health and wellbeing. As the professional regulator of almost 745,000 nursing and midwifery professionals, we have an important role to play in making this a reality.
- 2 Our core role is to regulate. First, we promote high education and professional standards for nurses and midwives across the UK, and nursing associates in England. Second, we maintain the register of professionals eligible to practise. Third, we investigate concerns about nurses, midwives and nursing associates – something that affects less than one percent of professionals each year. We believe in giving professionals the chance to address concerns, but we'll always take action when needed.
- 3 To regulate well, we support our professions and the public. We create resources and guidance that are useful throughout people's careers, helping them to deliver our standards in practice and address new challenges. We also support people involved in our investigations, and we're increasing our visibility so people feel engaged and empowered to shape our work.
- 4 Regulating and supporting our professions allows us to influence health and social care. We share intelligence from our regulatory activities and work with our partners to support workforce planning and sector-wide decision making. We use our voice to speak up for a healthy and inclusive working environment for our professions.

Our position

- 5 Our position is that conversion therapy has no place in the UK health and social care sector. It is not a valid treatment since sexual orientation and/or gender identity do not need curative treatments, and no one should seek to change them. We note the Government's assessment that conversion therapy is inconsistent with existing regulatory standards of statutory healthcare professionals, and we can confirm that this is the case for nurses, midwives and nursing associates.
- 6 We are aware of evidence that conversion therapies are taking place within healthcare settings. The [National LGBT Survey](#) conducted by the Government Equalities Office in 2018 suggested that 2 percent of the 108,000 respondents had undergone a conversion practice while another 5 percent had been offered it but did not take it up. These figures are higher for trans people, with 13 percent having undergone or been offered it. Healthcare providers and professionals were the second largest group cited as offering these therapies, 19 percent of the total.

- 7 To help us consistently and fairly regulate our professions and best protect the public, we have been refining our own stance on conversion therapy. This sets out the position above and reflects the existing [Memorandum of Understanding](#) produced by a wide range of expert healthcare organisations. To help guide our approach to this issue, we have explored how our Code relates to conversion therapy, which is set out in the next section.

Conversion therapy and our Code

- 8 [The Code](#) sets out the NMC's professional standards of practice and behaviour for nurses, midwives and nursing associates in England. The standards within the Code already safeguard against many of the activities or approaches that could be considered conversion therapy. The Code is structured around four key themes, and this section sets out the ways in which each of these can be interpreted in relation to conversion therapy.

Prioritise People

- 9 Professionals on our register are required to act in the best interests of people at all times (section 4), ensuring that they avoid any harm, including that which can result from conversion therapy. They must respect individuals and uphold their human rights, and must recognise diversity (section 1), and must challenge poor practice and discriminatory attitudes (section 3).

Practise Effectively

- 10 The Code makes clear that any information or advice given by those on our register must be evidence-based and this includes information relating to using any health and care products or services (section 6). Professionals on our register must practise in line with the best available evidence, and any advice or information they provide must be evidence based. As the evidence base shows that conversion therapies can be harmful, providing them or supporting information about them would go against this section of the Code. It is the professional duty of our registrants to use their expert judgement to advise patients against potentially harmful actions.

Preserve Safety

- 11 We are aware that some circumstances may lead adults to actively seek conversion therapy and to approach healthcare professionals, including those we regulate. However, as set out in this standard, it is incumbent on regulated healthcare workers to protect the health and wellbeing of these individuals and all who are at risk (section 17). As such nurses, midwives and nursing associates must not encourage nor promote any potentially harmful activity. They should also discourage any conversion therapy when it is requested, and should help to ensure it does not take place in health and care settings by [raising concerns](#) where they believe this may be the case. Additionally, professionals on our register have a responsibility to raise concerns immediately if they believe that a person needs extra support and protection (section 16).

Promote Professionalism and Trust

- 12 The Code makes clear that political, religious and moral beliefs must not be expressed or acted upon in an inappropriate way (section 20). Any nurse, midwife or nursing associate encouraging, showing support for or directing a member of the public towards conversion therapy in line with their own personal views could be in breach of the Code. Conversion therapy also contradicts this standard because promoting ineffective and/or potentially harmful treatments undermines the integrity of the profession.

Our response to the proposals

- 13 We welcome the opportunity to feed back on the Government's proposals for banning conversion therapy in England and Wales. As a health and care regulator, some of the questions in the consultation are not directly relevant to our regulatory function. However we have replied to those covering the general principles of the proposals.

Do you agree or disagree that the government should intervene to end conversion therapy in principle?

- 14 We agree. This is an important issue and we support the Government's move to ban this practice and strengthen existing laws. As a health and care regulator, we are committed to doing all we can to make sure the professionals we regulate do not participate in any activity or approach that could be considered conversion therapy.
- 15 Nurses, midwives and nursing associates should not be involved in providing conversion therapies or encouraging people to undergo them. Doing so is against the standards set out in our [Code](#) and risks not only harm to the public, but also damaging public confidence in the profession by undermining the principle of promoting good standards in professional care.
- 16 While we are clear that our standards already prohibit the professionals on our register from taking part in any activity that could be considered conversion therapy, we welcome the decision to ban conversion therapies more widely and the steps proposed to restrict their promotion and advertising. We are pleased to see that the proposals include a blanket ban on all forms of physical conversion therapy, and on talking conversion therapies for children. We welcome the plans to introduce new support for the victims of conversion therapy and to produce resources to educate and inform people on the law and their rights.
- 17 We welcome the commitment set out in the consultation document to ensure that the ban on conversion therapy must not result in interference for healthcare staff providing legitimate support for those who may be questioning if they are LGBT. Our position is that anyone who is feeling uncertain about their sexual orientation and/or gender identity must not be prevented or discouraged from approaching qualified professionals for appropriate help and support.

Do you think that these proposals miss anything?

- 18 We note that the Government's proposals allow for talking-based conversion therapies to take place where an adult consents and is aware of the risks involved. The evidence is that conversion therapies can be harmful and so we do not think they should be permitted even where an adult consents and is aware of the risks involved. Our position is that even if it is not a criminal offence, professionals on our register will not be able to provide conversion therapy. As explained in this response, this is because any involvement in delivering them goes against the principles of our Code and could cause harm to the individual. This will not prevent those on our register discussing conversion therapy when asked, although they must ensure that their professional advice reflects the evidence, which is that these treatments do not work and can be harmful.
- 19 Health and care professionals have a responsibility to provide support, guidance and signposting to those who wish to discuss their feelings around sexual orientation and/or gender identity, and can play a positive role in supporting these individuals. We agree with the government's position that the proposed ban will complement the regulatory framework of us and partner organisations, and it should not override the independence of professionals to support people who may be questioning the way they identify, in line with their professional obligations and in a way that upholds equality and human rights. In particular, it is vital that those on our register who work in gender identity clinics are not restricted by any part of the ban. As such, we would welcome clarity that practice in these settings to support and care for people who do not identify with the sex assigned to them at birth – such as gender transition services, gender transition healthcare and legitimate and explorative gender identity therapy, conducted in line with our standards and expectations – would not constitute unlawful conversion therapy.