




Speech By  
**Joseph Kelly**

**MEMBER FOR GREENSLOPES**

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### HEALTH LEGISLATION AMENDMENT BILL

 **Mr KELLY** (Greenslopes—ALP) (3.17 pm): I would like to acknowledge the previous speaker and join with the member for Mudgeeraba in wishing him well into the future. I have had the pleasure of serving with him on two committees now and he has always made a fantastic contribution.

I support the entirety of this bill, although my contribution will focus mainly on the so-called conversion therapy. I say 'so-called' because it neither converts nor is it therapeutic. I think one of the key lessons that we should have learned during this recent global pandemic is the importance of listening to and basing our practice on clinical evidence. We have seen governments around the world that have chosen to ignore clinical advice and that has had devastating consequences for their citizens. I know it is difficult at times for people who are not from a clinical background to understand clinical evidence, but it is certainly incumbent on all health professionals to try to help people to understand that.

Recently I was approached by a constituent raising concerns around 5G and asking me where I stood on that particular issue. I said I would really have to read some clinical evidence to make a definitive statement on that. The constituent responded by saying, 'Well, all the research is biased.' I tried to take the constituent through a research paper—not about 5G but a general research paper—and explain to her the different segments one looks at and how one tests whether a paper is biased or not. Unfortunately I could not get that constituent to a level of understanding about that. The whole system of clinical evidence and research is designed so that you can spot bias and you can correct bias with future research. When it comes to gay conversion therapy there is no evidence that it works. In fact, there is quite considerable evidence that it does harm.

**Mr Hunt** interjected.

**Madam DEPUTY SPEAKER** (Ms Pugh): Order! Member for Nicklin, it is your turn next. The member on his feet is not being provocative. You will hear him in silence.

**Mr KELLY:** It is easy to throw barbs across the chamber at me but perhaps more difficult to throw them at the American Psychological Association which reviewed all available research on conversion therapies and asked that a task force provide recommendations to the association on their efficacy.

The task force found that none of the research conducted between 1999 and 2007 would permit any conclusions to be drawn about the safety or efficacy of conversion therapy given the limited amount of methodologically sound research that is available. Cornell University also considered all available research on conversion therapy in relation to both the benefits and the harms of the therapy. Many of the research articles that claim benefits of conversion therapy trace back to a study done by Dr Robert Spitzer in 2001. That study is often cited as proof of the efficacy of the therapy because the study concluded that reparative therapy is effective at curing same-sex orientation. In May 2012 Dr Spitzer recanted his research, noting that it was methodologically unsound. He later went on to apologise to the individuals who had undertaken conversion therapy on the basis of his statement as to its efficacy.

The research into the benefits of reparative conversion therapy notes that most of the positive effects would be achieved by any type of competent psychological counselling, so there is little weight to be applied in relation to those conclusions.

The research done at Cornell University around the harms was quite extensive, including a variety of mental health impacts, depression, anxiety, shame, guilt, suicidal ideations, attempts at suicide and a range of other problems. The British Royal College of Psychiatrists went so far as to make an apology for sexual reorientation therapies, stating—

Studies that once purported to have a 'cure' to homosexuality, or indeed to classify it as an illness in the first place, have now all been disproven and debunked. Studies which once showed conversion therapies to be successful have all been exposed as seriously methodologically flawed. In this day and age, there is no feasible scenario in which a fully trained mental health professional would administer such a treatment.

Given that there is no basis in evidence for a fully trained health professional to practise a therapy that is known to harm a patient, it should attract a criminal sanction.

Moving beyond the evidence, I grew up in a culture and environment where homosexuality was not tolerated and was often discriminated against. I came from a family that did not encourage or tolerate any type of intolerance, but because of our deep religious views homosexuality was not discussed or even considered in our house. Certainly boys at my school who were of a same-sex orientation had a particularly difficult time. I apologise if I was in any way involved in their difficult years. Certainly it would have happened. Luckily, I went on to become a nurse and was exposed to people with a whole range of different ways of living their lives. I became friends with several people who are gay. I had the great privilege of nursing a number of young men who died of AIDS, which was another eye-opening exposure for me to people of the homosexual persuasion. It helped me as a nurse to relate to people first as people. The reality is that it was the culture that was causing the discrimination and I was able to change my views. That did not happen overnight and, realistically, that change is probably still occurring.

I support what is being put forward in this bill, but I do not think it goes far enough. Queensland banning this practice is certainly acceptable and is something that I support. However, the reality is that we know that children are being taken overseas for this particular therapy. As a nation we have worked together to stop young girls being taken overseas to be subjected to the abhorrent practice of female genital mutilation. We have stopped children being taken overseas for marriage. I think we can do the same here for children and adults. I call on the minister to do that.

I will finish by reading a statement from one of my constituents, who will remain anonymous. They state—

At 14 years-old, my parents found out about my homosexuality and sent me overseas to undergo conversion therapy. They told me that I was being sent to a religious institution in my country of birth in order to repair my homosexuality. For five days I underwent face-to-face therapy with the head of the religious institution who informed me that he was a licenced counsellor and had a degree in psychology. He proceeded to tell me that my sexuality was disgusting and reprehensible; that it was not normal. I was told that my sexuality was an illness that needed to be cured like depression or anxiety. He told me that 'my aura was negative' and that I was not homosexual because everyone is inherently and naturally 'heterosexual'. I was forced to recite and memorise scripture that condemned my sexuality every day. I sobbed into my pillow every night. I was left alone with no one I knew in a place I was not familiar with. I acted as 'straight' as I possibly could and began agreeing with what the counsellor was saying just so he would stop. I was eventually released early because I was able to act my way through it.

Ever since coming back to Australia, I have grappled with thoughts of guilt and shame surrounding my sexuality. I have had to act as someone I am not in front of family just so they never have to send me back to that place ever again. The relationship that I once had with my parents no longer exists as I can now no longer be myself in front of them. I was disgusted with myself and believed that all the problems in my life was the result of divine punishment. It was not until a few months ago I reached out to my GP and started seeing a psychologist about my feelings. I am recovering with the help of supportive friends and family who have helped me come to terms with my sexuality and love me unconditionally. But it is still a long road to recovery. I still have feelings of shame and guilt and to be perfectly honest, I do not think that these feelings will ever leave.

I've experienced this therapy, and I still grapple with the effects of it to this day. My life is and never will be the same because of it. As a survivor of this insidious practice, I hope that no LGBT+ persons ever have to undergo this practice; Not in Queensland nor anywhere else in the world.

This should be a happy day for people in the LGBTI community and it should be a happy day for health practitioners. This practice, which has no evidence base and is for a disease that does not exist, is being outlawed. It is being ruled out. That is something that this parliament, our community and our society should be proud of. I commend the bill to the House.