



## Report to Policy Committee

**Author/Lead Officer of Report:** Janet Kerr, Chief Social Work Officer

**Tel:** 07580536217

**Report of:** Director of Adult Health and Social Care

**Report to:** Education, Children and Families Policy Committee

**Date of Decision:** 8<sup>th</sup> March 2023

**Subject:** Conversion Practice Position Statement

Has an Equality Impact Assessment (EIA) been undertaken?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If YES, what EIA reference number has it been given? <b>Number 1447</b>				
Has appropriate consultation taken place?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Has a Climate Impact Assessment (CIA) been undertaken?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/> NA
Does the report contain confidential or exempt information?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-				
<p><i>“The (<b>report/appendix</b>) is not for publication because it contains exempt information under Paragraph (<b>insert relevant paragraph number</b>) of Schedule 12A of the Local Government Act 1972 (as amended).”</i></p>				

### Purpose of Report:

The Sheffield Adult Safeguarding Partnership Board is seeking endorsement on its proposal to produce a position statement on Conversion Therapy or Practice and to note its direction of travel.

Conversion Practice is any intervention that seeks to change a person’s sexual orientation or gender identity. It works towards one goal and that goal is to cure someone from being LGBTQIA+.

The proposal for a position statement supports the rights and autonomy of all people, regardless of sexual identity, and takes a gender affirming perspective. We are asking our Council members and wider organisations to endorse the position statement which condemns this harmful and unethical practice.

**Recommendations:**

It is recommended that the Education, Children and Family Policy Committee:

1. Endorses sign up to the Safeguarding Board Conversion Practice Position statement and delivery plan, noting that approval will be sought from Strategy and Resources Committee on 15<sup>th</sup> March 2023.
2. Requests the Director of Adult Health and Social Care to bring an update to Committee on an annual basis regards implementation of the statement.

**Background Papers:**

- Appendix 1 – Position Statement
- Appendix 2 – Conversion Practice Delivery Plan
- Appendix 3 – Equalities impact assessment

Lead Officer to complete:-		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: Liz Gough
		Legal: Patrick Chisholm
		Equalities & Consultation: Ed Sexton
		Climate: Jessica Rick
	<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	<b>SLB member who approved submission:</b>	Alexis Chappell
3	<b>Committee Chair consulted:</b>	Councillor George Lindars-Hammond and Councillor Angela Argenzio
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	<b>Lead Officer Name:</b> Janet Kerr	<b>Job Title:</b> Chief Social Work Officer
	<b>Date:</b> 27 <sup>th</sup> February 2023	

## **1. PROPOSAL**

- 1.1 Safeguarding and the promotion of human rights is everyone's responsibility.
- 1.2 The Adult Health and Social Care Strategy Living the Life You Want to Live and subsequent Delivery Plan agreed at Adult Health and Social Care Committee on 15th June 2022, made a commitment towards improving wellbeing outcomes and enabling a shift towards prevention of harm.
- 1.3 [A Safeguarding Delivery Plan](#) was subsequently approved at the Adult Social Care Policy Committee in September 2022 and as part of this it was agreed to develop a conversion practice position statement.
- 1.4 A multi-agency task and finish group was subsequently established which involved representatives from adult and children's social care, health, church, human rights organisation, and individual with experience of conversion practice. Best practice and benchmarking were undertaken by this group to inform a position statement.

### **1.5 Conversion Practice Position Statement**

- 1.5.1 Conversion practices still exist although they are scientifically discredited, violate fundamental human rights, and are known to directly harm individuals who are subjected to them.
- 1.5.2 Examples of these harms include anxiety, depression, and suicide. These practices also entail long-term harm to LGBTQIA+ people through their perpetuation of stigma, prejudice, discrimination, and violence based on sexual orientation and gender identity.
- 1.5.3 The Council and partners of the Safeguarding Board value diversity and are committed to promoting the human rights, well-being, and dignity of all members of society.
- 1.5.4 The Conversation Practice Statement condemns any approach that attempts to change an individual's gender or sexuality, including conversion or reparation therapy or practice, on the grounds they are harmful, unethical, and violate the dignity and human rights of the recipient.
- 1.5.5 The position statement provides assurances that organisations who are signed up will respect the identities of those people with diverse gender and sexuality expressions as well as ensuring that they are a safe place to live, work, learn, receive services or worship. The position statement is at Appendix 1 for approval.

## **1.6 Implementation of the Position Statement**

- 1.6.1 It's recognised that there continues to be learning informed by the experiences of individuals about best practice in relation to ending conversion practices as well as the support to individuals affected by conversion practice.
- 1.6.2 It's also recognised that as the profile of the position statement is raised, more individuals who have been affected may need support. To that end, a dedicated confidential email address for people affected by conversion practice to contact for advice and support has been established. The email address is [safeguardingadults@sheffield.gov.uk](mailto:safeguardingadults@sheffield.gov.uk)
- 1.6.3 To enable implementation of the position statement a delivery plan has been produced and through this, it is planned to develop: -
- Training and practice guidance to enable agencies to understand how to respond when safeguarding concerns about conversion practices are made.
  - A review of what supports are needed to support individuals affected by an experience of conversion practice.
  - Guidance about the responsibilities of people in positions of trust, such as Council Officers who are Trustees/ Directors of Boards, and how assurances will be gained regards their understanding of safeguarding and conversion practice when acting as a person in a position of trust.
- 1.6.4 Given the ongoing learning and development in relation to our approach in relation to responding to conversion practice its proposed to bring updates in relation to progress in encouraging sign up to the position statement. The Delivery Plan is at Appendix 2 for Approval.

## **2. HOW DOES THIS DECISION CONTRIBUTE?**

- 2.1 This proposal supports adults and young people enabling them to live, work, learn or worship in the city free of abuse i.e., bullying discrimination, homophobia or transphobia, social isolation, and rejection. It sends out a strong message to the wider community of equality and inclusion.

## **3. HAS THERE BEEN ANY CONSULTATION?**

- 3.1 The Council has engaged and consulted on this proposal with:
- The Safeguarding Adults Partnership
  - Equalities and Human Rights UK Limited
  - Children's Services
  - The Diocese of Sheffield
  - LGBTQ+ members of the community and a survivor of Conversion

Therapy.

3.2 The work thus far has been well received and supported; it continues to attempt to further engage other multi-faith groups in Sheffield and individuals or organisations who may wish to support this development.

3.3 Benchmarking and research have also been undertaken as part of this development to promotion learning and ongoing development.

#### **4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION**

##### **4.1 Equality Implications**

4.1.1 As a Public Authority, we have legal requirements under the Equality Act 2010, collectively referred to as the 'general duties to promote equality'. Section 149(1) contains the Public Sector Equality Duty, under which public authorities must, in the exercise of their functions, have due regard to the need to:

1. eliminate discrimination, harassment, victimisation, and any other conduct that is connected to protected characteristics and prohibited by or under this Act.
2. advance equality of opportunity between those who share a relevant protected characteristic and those who do not.
3. foster good relations between those who share a relevant protected characteristic and those who do not.

4.1.2 The Equality Act 2010 gives legal protection to two directly relevant characteristics – gender reassignment and sexual orientation. It prescribes different types of discrimination in relation to both. The Act gives similar protection to Age and other protected characteristics.

4.1.3 We are committed to standing with our LGBTQ+ community and want to hear about their experiences and offer support. We believe this work will have a positive effect on LGBTQIA+ community as conversion practices can have a significant impact on their physical and mental health.

4.1.4 The Safeguarding Board recognises the value of having a clear, unambiguous, and empowering statement about conversion therapy, irrespective of the legal position. However, the Board will monitor Government stated plans to introduce a total ban on the practice and will reflect this in further development of the Equality Impact Assessment.

##### **4.2 Financial and Commercial Implications**

4.2.1 The report supports completion of the safeguarding delivery plan. All individual components of Adult Social Care activity will be assessed for their financial contribution to this finance strategy and the Council's budget. This will be used to inform both plans and decision-making. There are no implications.

#### 4.3 Legal Implications

4.3.1 Whilst there is no specific legal duty to have a policy in relation to conversion therapy, the core purpose of adult health and social care support is to help people to achieve the outcomes that matter to them in their life. The Care Act 2014 sets the Council's statutory power to direct the provision that:

- promotes wellbeing.
- prevents the need for care and support.
- protects adults from abuse and neglect (safeguarding)
- promotes health and care integration.
- provides information and advice.
- promotes diversity and quality.

4.3.2 The Care Act Statutory Guidance requires at para 4.52 that "... Local authorities should have in place published strategies that include plans that show how their legislative duties, corporate plans, analysis of local needs and requirements (integrated with the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy), thorough engagement with people, carers and families.....translate (now and in future) into appropriate high quality services that deliver identified outcomes for the people in their area and address any identified gaps."

4.3.3 It is established in the report how the practice of conversion therapy can have adverse and implications for the health and wellbeing of those subjected to it. The proposal is therefore in line with the Care Act obligations, as well as other policies and the equalities duties referred to above.

4.3.4 The Care Act applies to both adults and children, but there also relevant obligations arising out of the legislation relating specifically to children. Section 17 of the Children Act 1989 imposes a general duty on Local Authorities to safeguard and promote the welfare of children within their area who are in need by providing a range and level of services appropriate to those children's needs.

#### 4.4 Climate Implications

4.4.1 There are no climate implications

#### 4.4 Other Implications

4.4.1 At this time, it is difficult to predict what impact the position statement will have in its proposed implantation. There is however a commitment from the Director of Adult Health and Social Care to consider any direct needs for individuals who have been subjected to this practice.

## **5. ALTERNATIVE OPTIONS CONSIDERED**

- 5.1 A position statement is proposed to define the issues and implement strategies that will produce a measurable and positive result for the LGBTQ+ community. It will also provide a framework for guidance rather than a mandatory policy which cannot be enforced across the numerous organisations which we hope to sign up.

## **6. REASONS FOR RECOMMENDATIONS**

- 6.1 Endorsing and noting the direction of travel will:

- Raise awareness of the practice of Conversion therapy in Sheffield.
- Encourage the LGBTQ+ community to speak out with confidence where they are subjected to this practice.
- Provide strategies within a framework to support the LGBTQ+ community.

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## **‘So called’ Conversion Practices Position Statement**

### **Purpose of the document**

This position statement:

- Sets out Sheffield Adult Safeguarding Partnership’s view on Conversion Practice
- Makes recommendations on how this work can be implemented

### **Issues**

There is no representative data on the number of lesbian, gay, bisexual and transgender queer or questioning, intersex, asexual or plus which is used to signify all of the gender identities or sexual orientations that letters and words cannot yet fully describe (LGBTQIA+) people who have undergone conversion practices in the UK. However, some evidence appears to suggest that transgender people may be more likely to be offered or receive conversion practices than those whose gender identity corresponds to their sex assigned at birth and identify as lesbian, gay, bisexual, asexual, queer, or intersex people.

There is consistent evidence that exposure to conversion practices can be associated with having certain conservative religious beliefs. However, the Diocese of Sheffield’s position follows the Church of England’s declaration that such practices are “unethical, potentially harmful and not supported by evidence” and therefore should not be carried out in the name of the Church.

This position is echoed by the British Psychological Society and other professional bodies, including NHS England and the Royal College of Psychiatrists.

Research shows that conversion practices are strongly linked to adverse mental health outcomes, including depression, increased substance abuse, attempts to die by suicide, and other serious concerns. Qualitative studies have found that people who have undergone conversion practices attribute such feelings to the conversion practices they were subjected to (Jowett, A et al, 2021).

Common reasons given for people being subjected to conversion practices are:

- a perceived incompatibility between someone’s religious values and their sexual orientation or gender identity
- a desire to belong and feel ‘normal’ within a community
- external pressure or coercion by someone’s family members or people from their faith community using unequal power dynamics

Some people report that while they underwent conversion practices voluntarily, they feel these ‘choices’ were shaped by powerful influences in their social environment and under guidance from authority figures. (HM, Gov 2021)

### **Definition of Conversion Practices**

The Expert Advisory Group on Ending Conversion Practices in Scotland recommends that the Scottish Government adopt the following definition of conversion practices (Expert Advisory Group on Ending Conversion Practices Report and Recommendations, October 2022). Currently there is no such recommendation of definitions in England. SASP support the definition described, however will commit to updating the definition should this position change:

- 'Conversion practices': refers to any treatment, practice or effort that aims to change, suppress and/or eliminate a person's sexual orientation, gender identity and/or gender expression. Conversion practice is abusive and unethical; therefore, any person being subjected to this cannot consent to that practice being carried out on them.
- 'Gender expression' and 'expression of sexual orientation' refers to each person's manifestations of their gender identity and/or sexual orientation, and/or the one that is perceived by others.
- 'Gender identity': refers to each person's internal and individual experience of gender, which may or may not correspond with their sex assigned at birth, including their personal sense of the body (which may involve, if freely chosen, modification of bodily appearance and/or functions by medical, surgical or other means) and other expressions of gender, including name, dress, speech and mannerisms. Excluding FGM, or other related illegal activities.
- 'Sexual orientation': refers to a person's emotional, affectional and sexual attraction to persons of a different gender, the same gender or more than one gender and includes the lack of such attraction or relations
- Intersex people are individuals born with any of several sex characteristics, including chromosome patterns, hormonal patterns gonads, or genitals, or an internal reproductive system that, according to the Office of the United Nations High Commissioner for Human Rights, "do not fit typical binary notions of 'male or female'".
- Asexual refers to someone who does not experience sexual attraction toward individuals of any gender. Asexuality is a sexual orientation, and is different from celibacy, in that celibacy is the choice to refrain from engaging in sexual behaviours and does not comment on one's sexual attractions. An asexual individual may choose to engage in sexual behaviours for various reasons even while not experiencing sexual attraction. Asexuality is an identity and sexual orientation; it is not a medical condition.
- Queer is a term used by those wanting to reject specific labels of romantic orientation, sexual orientation and/or gender identity. It can also be a way of rejecting the perceived norms of LGBTQIA+ identities.

Further explanation of the terms used in our definition is provided below.

- 'To change': When the Group suggests the term 'change' it refers to practices which seek to alter or modify a person's sexual orientation or gender identity, expression of sexual orientation and/or gender expression.
- 'To suppress': When the Group suggests the term 'suppress' it refers to practices which seek to put an end to, restrain and/or prevent the development or the manifestation of another person's sexual orientation, gender identity, expression of sexual orientation and/or gender expression.
- 'To inhibit': When the Group suggests the term 'inhibit' it refers to practices which seek to hinder, restrain, prevent or prohibit, a person's sexual orientation, gender identity, expression of sexual orientation and/or gender expression

## **Evidence**

Evidence suggests that modern forms of conversion practices are commonly based on a belief that same-sex sexual orientations and transgender identities and other identities cited above are mental or developmental disorders, addictions, or spiritual problems.

The most common methods we identified involved a combination of: -

- spiritual methods – for example, prayer for ‘healing’/’deliverance’ or exorcisms, and some forms of pastoral counselling
- psychological methods – for example, talking therapies

The boundaries between religious and psychological approaches are often unclear with many combining the two in a way that could be described as pseudo-scientific theory, methodology, or practice that is considered to be without scientific foundation.

Conversion practice appears to be most commonly carried out in religious settings by religious individuals or organisations, but it may also be done by mental health professionals or family members. In some cases, secular mental health professionals may treat those whose gender identity does not correspond to their sex assigned at birth (for example, non-binary) or minority sexual orientations (for example, asexual) as symptoms of existing mental health conditions. It is unclear how often this is a deliberate attempt at conversion practices.

There is less evidence relating to gender identity change efforts but what evidence there is suggests that conversion practice with transgender people can take a very similar form to that aimed at changing sexual orientation. (HM Gov, 2021)

SASP are aware that people who are subjected to conversion practices can experience coercion which can lead to a perception of consent to conversion practices. In a similar vein to coercive control within domestic abuse situations, a victim may be coerced into agreeing to be subjected to such practices. Professionals responding to concerns about conversion practices should consider this in any action taken (Expert Advisory Group on Ending Conversion Practices Report and Recommendations, October 2022).

### **Sheffield Safeguarding Adults Partnership position**

We the undersigned members of Sheffield Adult Safeguarding Partnership (SASP) value diversity. We are committed to promoting the human rights, well-being and dignity of all members of our society and support their freedom of thought, conscience and religion. We take a gender affirming stance regarding diversity of sexual orientation and gender identity, one that focuses on affirming an individual’s views about themselves.

SASP believes that the sexual orientation and gender identity of LGBTQIA+ people are legitimate and valid. We condemn any approach including coercion that attempts to change an individual’s gender or sexuality, including conversion or reparation practices, on the grounds they are harmful, unethical, and violate the dignity and human rights of the recipient whether or not the person consents to this ‘practice’. SASP supports the rights and autonomy of all people, regardless of sexual identity, and takes a gender affirming perspective. SASP expect our members to do the same.

## Appendix 1:

### Proposal of recommendations for action to be approved by the City-Wide Best Practice Group and the SASP Executive Board

Recommendation	Action	Measure of Achievement
Awareness raising for staff which should include training to identify and spot the signs of so-called 'Conversion Practices' and talk with confidence to those who are experiencing this or challenge the view of those in support.	Develop a simple Powerpoint which can be downloaded and used by local organisations to train staff on spotting the signs of "Conversion Practices" and what steps to take if they do.  Record a conversion practice training session and make this available on the SASP website.	Ask the SASP Performance and Quality sub group if we can measure the numbers of people downloading the information.  Measure the level of interest from organisations by asking them to complete a proforma and send it to <a href="mailto:safeguardingadults@sheffield.gov.uk">safeguardingadults@sheffield.gov.uk</a> . If they have used conversion practice training resources from the website.
Awareness raising for the public to:  Support people to identify the signs of so-called 'Conversion Practice' and talk with confidence to those who are experiencing this or speak out to challenge the view of those in support.	Signage posters and pamphlets to be developed, to be available for download and use by local organisations.  A simple definition to be developed for use in settings where the full definition is too complex to be easily understood. Target at people who have never heard of conversion practice before.	Ask the SASP Performance and Quality sub group if we can measure the numbers of people downloading the information.  Measure the level of interest from organisations by asking them to complete a proforma and send it to <a href="mailto:safeguardingadults@sheffield.gov.uk">safeguardingadults@sheffield.gov.uk</a> . If they have downloaded and used conversion practice resources from the website.
Raising awareness of those who carry out conversation practices who work in Positions of Trust	Provide a statement for organisations to use which will include:  A definition of who is a PiPoT (person in a position of trust) and how they may abuse this trust if they carry out conversion practice within their employment or in their personal life.	Measure referrals to PiPoT where people involved in conversion practice are held to account.
Developing pathways to allow people and professionals to raise and respond to concerns about 'so called conversion' practices	Develop a mapping document, with steps to take: i.e. Does it meet safeguarding criteria, if yes, step to take, if no, what alternatives are available.	Measure referrals and provide data on how many of these did or did not meet the legal criteria for safeguarding.

	Process maps will be added onto the SASP website.	
Identify support services for those who are experiencing conversion practices	<p>Further sources to be updated as they are identified and added to the SASP website.</p> <p>National Support Service Organisation: Galop</p> <p><a href="https://galop.org.uk/get-help/support-services/">https://galop.org.uk/get-help/support-services/</a></p> <p>“Galop provides advocacy and casework support for LGBT+ people who have experienced abuse and violence. Advocates and caseworkers work with clients, based on what each individual person needs. Our advocacy service specialises in supporting LGBT+ victims and survivors of domestic abuse, hate crime, sexual violence, and other forms of abuse including honour-based violence, forced marriage, and so-called conversion therapies. We are a service run by LGBT+ people, for LGBT+ people, and the needs of our community are at the centre of what we do.”</p>	Monitoring and reporting the number of people accessing this area of the website.
Seek support from organisations across Sheffield to sign up to this position statement	Identify conversion practices advocates to make contact with local organisations.	Number of organisations contacted Number of organisations signed up
Consider multi faith representation on safeguarding partnership boards	<p>Not all organisations are part of the Safeguarding Board and nor would it be appropriate for them all to be members.</p> <p>City Wide Best Practice can invite guests to meetings where this subject is presented or discussed.</p>	

	Provide email address on the resources, where interested parties can make enquiries.	
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The Human Rights Act (1998) is in place to protect everyone rights and public authorities have a duty to uphold these rights without interference. The right to be free from discrimination, torture, to have privacy and right to family life are of utmost importance. We will take positive steps to protect the rights of individuals where there is good reason to do so.

# Adult Health and Social Care

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## Conversion Practice Delivery Plan

## Conversion Practice Delivery Plan

### Ambition:

A position statement will define the issues and implement strategies that will produce a measurable and positive result for the LGBTQ+ community. It will:

- Raise awareness of the Conversion Practice in Sheffield.
- Encourage the LGBTQ+ community to speak out with confidence where they are subjected to this practice.
- Provide strategies within a framework to support the LGBTQ+ community.

### Context:

Conversion Practice is any intervention that seeks to change a person's sexual orientation or gender identity. It works towards one goal and that goal is to cure someone from being LGBTQIA+.

A position statement endorsed by Council members and wider organisations condemns this harmful and unethical practice and supports the rights and autonomy of all people, regardless of sexual identity, and takes a gender affirming perspective.

This position statement supports adults and young people with diverse gender and sexuality expressions enabling them to live, work, learn or worship in the city free of abuse i.e., bullying discrimination, homophobia or transphobia, social isolation, and rejection. It sends out a strong message to the wider community of equality and inclusion.

A multi -agency task and finish group has been implemented which involves representatives from adult and children's social care, health, church, human rights organisation and an individual with experience of conversion therapy. Best practice and benchmarking has been undertaken by this group in order to inform a position statement and a subsequent delivery plan.

**Accountable Officer:** Director Adult Health and Social Care

**Accountable Committee/ Board:** Safeguarding Adults Partnership Board and Adult Health and Social Care Policy Committee



Recommendation	Action	By when	Lead	RAG
<p><b>1.</b> Awareness raising for <b>staff and the public</b> which should include training to identify the signs of 'so called Conversion Practices' and talk with confidence to those who are experiencing this or challenge the view of those in support.</p>	1a. Develop a Power-point which can be downloaded and used by local organisations to train staff on spotting the signs of "Conversion Practices" and what steps to take if they do.	June 2023	Chief Social Work Officer	
	1b. Record a conversion practice training session and make this available on the SASP website.	June 2023	Chief Social Work Officer	
	1c. Signage posters and pamphlets to be developed, to be available for download and use by local organisations in their organisations and premises in public view.	November 2023	Chief Social Work Officer	
<p><b>2.</b> Raising awareness of those who carry out conversation practices who work in Positions of Trust</p>	2a. Provide a statement for organisations to use which will include: A definition of who is a PiPoT (person in a position of trust) and how they may abuse this trust if they carry out conversion practice within their employment or in their personal life.	September 2023	Chief Social Work Officer; Assistant Director Access, Mental Health and Wellbeing; Safeguarding Adults Partnership	
<p><b>3.</b> Developing pathways to allow people and professionals to raise and respond to concerns about</p>	3a. Develop a mapping document, with steps to take: I.e. Does it meet safeguarding criteria i.e., person has needs for care and support, if yes, step to take, if no, what alternatives are available.	September 2023	Chief Social Work Officer Assistant Director Access, Mental Health, and Wellbeing	

conversion' practices.				
	3b. Process maps will be added onto the SASP website.	November 2023	Chief Social Work Officer	
4. Identify support services for those who are experiencing conversion practices	4a. Source services that may provide support i.e. National Support Service Organisation: Galop <a href="https://galop.org.uk/get-help/support-services/">https://galop.org.uk/get-help/support-services/</a>	August 2023	Chief Social Work Officer	
	4b. To be updated as they are identified and added to the SASP website.	Ongoing	Chief Social Work Officer	
<b>Risks</b>		<b>Other issues</b>		
<ul style="list-style-type: none"> <li>Collective action is necessary, and it is a challenge given the number of organisations which will need to commit to the position statement and deliver the scope of change required.</li> </ul>		<ul style="list-style-type: none"> <li>A new law is proposed to ban conversion therapy in the UK, however questions remain about what the bill will cover or the exact timescale which is yet to be agreed. The position statement and this delivery plan will remain under review and revised dependent on legislation.</li> </ul>		

## Part A

### Initial Impact Assessment

**Proposal name**                    **Conversion Practice Position Statement –  
Safeguarding Board**

#### **Brief aim(s) of the proposal and the outcome(s) you want to achieve**

The Sheffield Adult Safeguarding Partnership Board is seeking endorsement on its proposal to produce a position statement on Conversion Therapy or Practice and to note its direction of travel.

Conversion Therapy or Practice is any intervention that seeks to change a person's sexual orientation or gender identity. It works towards one goal and that goal is to 'cure' someone from being LGBTQIA+.

The proposal for a position statement supports the rights and autonomy of all people, regardless of sexual identity, and takes a gender affirming perspective.

The Board is seeking endorsement from Council members and representatives of wider organisations to endorse the position statement which condemns this harmful and unethical practice.

The end goal is to influence organisational sign-up to the statement. It is recognised that, as a public authority, the Council has organisational legal duties under the Equality Act and decision-making governance processes.

#### **Proposal type**

Budget                     Non Budget

#### **If Budget, is it Entered on Q Tier?**

Yes                     No

If yes what is the Q Tier reference

#### **Year of proposal (s)**

21/22     23/23     23/24     24/25     other

#### **Decision Type**

- Coop Exec
- Committee (e.g. Health Committee)
- Leader
- Individual Coop Exec Member
- Executive Director/Director
- Officer Decisions (Non-Key)
- Council (e.g. Budget and Housing Revenue Account)
- Regulatory Committees (e.g. Licensing Committee)

#### **Lead Committee Member**

Janet Kerr, Chief Social Worker

#### **Lead Director for Proposal**

Alexis Chappell, Director ASC

**Person filling in this EIA form**

Jeanette Munday

**EIA start date**

11/01/2023

**Equality Lead Officer**

- Adele Robinson
- Annemarie Johnston
- Bashir Khan
- Beverley Law
- Ed Sexton
- Louise Nunn

**Lead Equality Objective ([see for detail](#))**

- |   |   |  |  |
|---|---|--|--|
| <input type="radio"/> Understanding Communities | <input type="radio"/> Workforce Diversity | <input checked="" type="radio"/> Leading the city in celebrating & promoting inclusion | <input type="radio"/> Break the cycle and improve life chances |
|---|---|--|--|

**Portfolio, Service and Team**

**Is this Cross-Portfolio**

- Yes
- No

**Portfolio**

Is the EIA joint with another organisation (eg NHS)?

- Yes
  - No
- Please specify

SASP, partners

**Consultation**

**Is consultation required (Read the guidance in relation to this area)**

- Yes
- No

**If consultation is not required please state why**

Consultation has been undertaken via a task and finish group and engagement with the LGBTQ+ community.

**Are Staff who may be affected by these proposals aware of them**

- Yes
- No

**Are Customers who may be affected by these proposals aware of them**

- Yes
- No

**If you have said no to either please say why**

Consultation has been held with relevant people thus far, but that does not include all staff or all customers.



## Initial Impact

Under the [Public Sector Equality Duty](#) we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

For a range of people who share protected characteristics, more information is available on the [Council website](#) including the [Community Knowledge Profiles](#).

## Identify Impacts

**Identify which characteristic the proposal has an impact on tick all that apply**

<input checked="" type="radio"/> Health	<input checked="" type="radio"/> Transgender
<input checked="" type="radio"/> Age	<input type="radio"/> Carers
<input type="radio"/> Disability	<input checked="" type="radio"/> Voluntary/Community & Faith Sectors
<input type="radio"/> Pregnancy/Maternity	<input type="radio"/> Cohesion
<input type="radio"/> Race	<input type="radio"/> Partners
<input checked="" type="radio"/> Religion/Belief	<input type="radio"/> Poverty & Financial Inclusion
<input type="radio"/> Sex	<input type="radio"/> Armed Forces
<input checked="" type="radio"/> Sexual Orientation	<input type="radio"/> Other
<input type="radio"/> Cumulative	

## Cumulative Impact

**Does the Proposal have a cumulative impact**

- Yes       No

<input type="radio"/> Year on Year	<input checked="" type="radio"/> Across a Community of Identity/Interest
<input type="radio"/> Geographical Area	<input type="radio"/> Other

*If yes, details of impact*

This proposal supports LGBTQ+ adults and young people enabling them to live, work, learn or worship in the city free of abuse i.e., bullying discrimination, homophobia or transphobia, social isolation and rejection.

**Proposal has geographical impact across Sheffield**

- Yes       No

*If Yes, details of geographical impact across Sheffield*

It sends out a strong message of support to the wider LGBTQ+ community of equality and inclusion.

**Local Area Committee Area(s) impacted**

- All       Specific

*If Specific, name of Local Committee Area(s) impacted*

## Initial Impact Overview

**Based on the information about the proposal what will the overall equality impact?**

The Equality Act gives legal protection to two directly relevant characteristics – gender reassignment and sexual orientation. It prescribes different types of discrimination in relation to both. The Act gives similar protection to Age and other protected characteristics.

The Safeguarding Board is committed to standing with our LGBTQ+ community and want to hear about their experiences and offer support. The Board believes this work will have a positive effect on LGBTQIA+ community as conversion practices can have a significant impact on their physical and mental health.

The Board recognises the value of having a clear, unambiguous and empowering statement about conversion therapy, irrespective of the legal position. However, it will monitor Government stated plans to introduce a total ban on the practice and will reflect this in further development of this EIA.

**Is a Full impact Assessment required at this stage?**  Yes  No

**If the impact is more than minor, in that it will impact on a particular protected characteristic you must complete a full impact assessment below.**

## Initial Impact Sign Off

**EIAs must be agreed and signed off by the Equality lead Officer in your Portfolio or corporately. Has this been signed off?**

Yes  No

Date agreed

Name of EIA lead officer

## Part B

### Full Impact Assessment

#### Health

**Does the Proposal have a significant impact on health and well-being (including effects on the wider determinants of health)?**

Yes       No      *if Yes, complete section below*

#### Staff

Yes       No

#### Customers

Yes       No

#### Details of impact

**Comprehensive Health Impact Assessment being completed**

Yes       No

*Please attach health impact assessment as a supporting document below.*

**Public Health Leads has signed off the health impact(s) of this EIA**

Yes     N

**Name of Health  
Lead Officer**

#### Age

**Impact on Staff**

Yes     No

**Impact on Customers**

Yes       No

#### Details of impact



## Disability

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

## Pregnancy/Maternity

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

## Race

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

## Religion/Belief

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

## Sex

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

## Sexual Orientation

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

## Gender Reassignment (Transgender)

### Impact on Staff

### Impact on Customers

Yes     No     Yes     No

**Details of impact**

**Carers**

**Impact on Staff**

Yes     No

**Impact on Customers**

Yes     No

**Details of impact**

**Poverty & Financial Inclusion**

**Impact on Staff**

Yes     No

**Impact on Customers**

Yes     No

**Please explain the impact**

**Cohesion**

**Staff**

Yes     No

**Customers**

Yes     No

**Details of impact**

**Partners**

**Impact on Staff**

Yes     No

**Impact on Customers**

Yes    No

**Details of impact**

**Armed Forces**

**Impact on Staff**

Yes    No

**Impact on Customers**

Yes    No

**Details of impact**

**Other**

*Please specify*

**Impact on Staff**

Yes    No

**Impact on Customers**

Yes    No

**Details of impact**

## Action Plan and Supporting Evidence

What actions will you take, please include an Action Plan including timescales

**Supporting Evidence** (Please detail all your evidence used to support the EIA)

**Detail any changes made as a result of the EIA**

Following mitigation is there still significant risk of impact on a protected characteristic.  Yes  No

If yes, the EIA will need corporate escalation? Please explain below

### Sign Off

**EIAs must be agreed and signed off by the Equality lead Officer in your Portfolio or corporately. Has this been signed off?**

Yes  No

Date agreed  Name of EIA lead officer

**Review Date**

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