1. What different practices fall under the scope of so-called “conversion therapy” and what is the common denominators that allow their grouping under this denomination?

*The Dutch definition of conversion therapy is as follows: the effort to change (‘cure’) the sexual orientation or gender identity of LGBTI-persons. The Dutch government has stated that this effort is flawed as homo/bisexuality or being transgender/gender fluid is no disease. It does harm the well-being of LGBTI-persons (March 2019, statement of the minister of Health in response to questions from Dutch parliament).*

1. Are there definitions adopted and used by States on practices of so-called “conversion therapy”? If so, what are those definitions and what was the process through which they were created or adopted?

*There is no place for conversion therapy under the Dutch regular healthcare system. People are free to develop and give all kinds of courses, training and therapy, but they are not allowed to abuse, threaten, coerce or deprive people of their liberty. Clients can lodge a complaint with the Health and Youth Care Inspectorate, the police and criminal court.*

1. What are the current efforts by States to increase their knowledge of practices of so-called “conversion therapy”?  Are there efforts to produce information and data on these practices?

*In 2014 the Dutch government ended the financial support of the organization Different that was accused of giving conversion therapy to (Christian) LGBTI’s. Dutch LGBTI organizations such as COC, TNN and NNID and the Dutch Youth Healthcare Organization do advocate for an explicit prohibition of conversion therapies that still are applied in Dutch orthodox religious communities (Christian, Muslim, etc.).*

*In February 2019 Dutch parliament accepted a statement for a legal prohibition of conversion therapies. The government is conducting research on the possibilities to counteract and prevent conversion therapy. It conducts interviews with LGBTI-persons who experienced conversion therapy, religious organizations and health care experts. This research should also lead to more knowledge about the number of people that in fact did or still do experience conversion therapy.*

1. What kinds of information and data are collected by States to understand the nature and extent of so-called “conversion therapies” (e.g. through inspections, inquiries, surveys)?

*In March 2020 the results of this qualitative research will be presented to parliament and public. In June 2020 the government will give a reaction how to act on these results about conversion therapy in The Netherlands. This could be a campaign to collect complaints, a more active role of the Health and Youth Care Inspectorate or a Code of Conduct (as in the UK) or a change of law/penal code.*

1. Has there been an identification of risks associated with practices of so-called “conversion therapy”?

*NGO’s and the Dutch Youth Healthcare Organization have identified the risks (mental problems, discomfort etc.), but there is no Dutch scientific research yet.*

1. Is there a State position on what safeguards are needed, and what safeguards are in place to protect the human rights of individuals in relation to practices of so-called “conversion therapy”?  This question includes the following:
	* 1. Safeguards to protect individuals from being subjected to “conversion therapies”.
		2. Broader statutory rules or administrative policies to ensure accountability of health care and other providers

*This is the subject of the current research by the Dutch government.*

1. Are there any State institutions, organizations or entities involved in the execution of practices of so-called conversion therapy? If so, what criteria have been followed to consider these as a form of valid State action?

*No there are no State institutions, organizations or entities involved in the execution of practices of so-called conversion therapy . In 2004 the financial support of an organization that seemed to conduct conversion therapies was terminated.*

1. Have any State institutions taken a position in relation to practices of so-called “conversion therapy”, in particular:
	1. Entities or State branches in charge of public policy;
	2. Parliamentary bodies;
	3. The Judiciary;
	4. National Human Rights Institutions or other State institutions;
	5. Any other entities or organizations.

*Yes: Parliament, Government, Healthcare organizations, NGO’s, LGBT-organizations and Amnesty International have taken a position in relation to practices of so-called “conversion therapy’.*

*No: the Judiciary and National Human Rights Organizations have not taken a position yet.*