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Dear Ministers,

Concerns regarding the *Change or Suppression (Conversion) Practices Prohibition Bill 2020*

I am writing to bring to your attention several concerns that AMA Victoria has with the *Change or Suppression (Conversion) Practices Prohibition Bill 2020*, and ask that you consider amending the legislation.

AMA Victoria is strongly opposed to conversion practices and endorses the public policy intention of the Bill. We are concerned, however, that the Bill as currently drafted

- unnecessarily focuses on psychiatry and psychotherapy,
- is excessively punitive, and
- has the potential to compromise the legitimate practice of medicine, to the detriment of both practitioner and patient alike.

Clause 5(3)(a) of the legislation currently states:

5(3) For the purposes of subsection (1), a practice includes, but is not limited to the following—

(a) providing a psychiatry or psychotherapy consultation, treatment or therapy, or any other similar consultation, treatment or therapy

AMA Victoria believes that this unfairly targets psychiatry and psychotherapy specifically. We note that this goes further than similar legislation in either the Australian Capital Territory and Queensland. Consequently, AMA Victoria believes that these terms should be removed from the legislation.

Clause 5(2)(b) as currently drafted states:

5(2) For the purposes of subsection (1), a practice of conduct is not a change or suppression practice if it:

b) is a practice or conduct of a health service provider that is, in the health service provider's reasonable professional judgement, necessary

- i) to provide a health service; or
- ii) to comply with the legal or professional obligations of the health service provider

AMA Victoria is concerned that clause 5(2)(b) restricts what psychiatrists can talk about in a session, and therefore limits appropriate normal psychiatric practice.

This restriction is brought about by the use of the word 'necessary'. There can be significant discussion around whether a treatment is 'necessary' and by whom. Therefore, we urge that the words 'when clinically appropriate' be substituted in place of 'necessary'.

Furthermore, notwithstanding our aversion to conversion practices and our shared desire to firmly discourage them, we are concerned about the significant criminal penalties included in the Bill (up to 10 years in prison). Such a maximum jail term will be of significant concern to all healthcare practitioners who would likely consider such sanctions disproportionate. AMA Victoria believes that the penalty should be aligned with the other Australian jurisdictions.

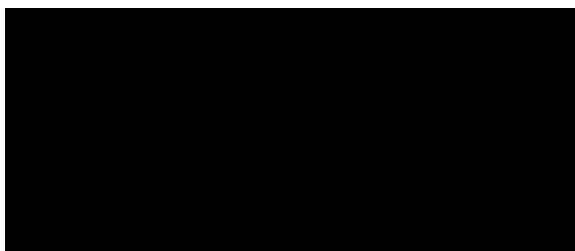
In comparison, in Queensland the criminal penalty is up to 12 months in prison in relation to offences involving adults, increasing to 18 months if the person is "vulnerable". In the ACT, criminal penalties only apply in relation to treatment of "protected persons" (children or people with a mental incapacity) and not to treatment of adults. The maximum jail term is 12 months with fines up to \$24,000.

The severity of the penalties attached to breaches of the legislation are such that we fear that psychiatrists, psychotherapists and other mental health care practitioners (all of which are increasingly risk averse in any event) may avoid routine assessment, treatment, and exploration of gender related issues. The result is that they may refuse to undertake care to the vulnerable groups that the legislation purports to protect, which would be a most perverse and counterproductive outcome of the Bill.

We are vehemently opposed to conversion practices. AMA Victoria's concerns are not motivated by politics or morality, only that the Bill as currently drafted has the potential to be detrimental to clinical practice.

We urge you to amend the legislation to address our concerns.

Yours sincerely,



AMA VICTORIA PRESIDENT