

**1. Has the Act reduced or stopped change or suppression practices? Describe any impact you think the Act has had on the occurrence or the nature of change or suppression practices.**

The Change or Suppression (Conversion) Practices Prohibition Act 2021, as currently written, prioritises intersectional politics over the identification of genuine instances of serious harm in the community, thereby diluting its effectiveness in addressing the issue at hand. A more targeted approach is necessary, one that clearly defines and prohibits coercive or abusive conduct, rather than capturing ordinary conversations, pastoral care, and clinical practice under an overly broad definition of "change or suppression practice".

**4. How clear is the Act's definition of what is and what is not a change or suppression practice? If further clarity is needed, what forms of clarification would be most helpful?**

The ambiguity surrounding the definition of prohibited conduct in the Change or Suppression (Conversion) Practices Prohibition Act 2021 raises concerns that exploratory or Socratic questioning, including discussions about alternative possibilities such as same-sex attraction or ruling out other diagnoses like autism spectrum disorder, may be inadvertently captured, and this lack of clarity is compounded by the Act's implicit endorsement of affirmation as the sole permissible approach to gender dysphoria, which not only fails to provide a genuinely neutral framework but also creates an uneven playing field where non-affirmation practices are disproportionately exposed to liability.

**5. How clear is the exclusion for health service providers? If further clarity is needed, how could this best be achieved?**

The Act's prohibition on change or suppression practices must be nuanced to accommodate reasonable professional judgment, including minority or dissenting clinical approaches, given the ongoing debates and controversies within the field. The express example that psychotherapy is a prohibited suppression activity unless it falls within the exemption creates a chilling effect on clinical practice, as practitioners may feel constrained from exploring all therapeutic options with their clients. As a result, practitioners with non-affirming clinical views cannot be confident that their ordinary professional practice is protected, even where it is evidence-based and conducted with informed consent.

**6. Is greater clarity needed about how people of faith can hold and express their beliefs to support clear understanding and compliance with the Act? What forms of clarification would be most helpful?**

The Act's broad definition of change or suppression practices would unjustly expose a pastor or faith-based counsellor to liability for simply responding to a person's voluntary request for support and guidance, thereby intruding upon both the individual's right to seek help and the counsellor's freedom to provide it, in a manner that disregards the autonomy of an LGB person of faith who may freely choose to seek support to align their life and practices with their religious convictions.

**7. How effective are VEOHRC's awareness and education materials on change or suppression practices? What improvements, if any, could help strengthen community understanding and compliance?**

The consultation materials provided by the Victorian Law Reform Commission fail to maintain a neutral tone, instead advocating for an expansive interpretation of the Change or Suppression (Conversion) Practices Prohibition Act 2021 that goes beyond the legislative requirements, thereby creating a chilling effect by portraying a wide range of conduct as potentially prohibited.

**9. Are there changes that could help support VEOHRC to carry out its functions or improve the effectiveness of the civil response scheme? If so, please describe any changes.**

The Victorian Equal Opportunity and Human Rights Commission (VEOHRC) should be required to consult current best-evidence guidance when developing materials under the Change or Suppression (Conversion) Practices Prohibition Act 2021. However, any materials developed by VEOHRC should not be permitted to stand as authoritative guidance under the Act, as this may unduly influence the provision of healthcare and support services. By uncritically adopting affirmation of gender identity as the only medically appropriate option, VEOHRC materials risk causing serious harm to vulnerable young people who may be in need of more nuanced and individualised care and support.

**13. Should a civil cause of action be introduced under the Act? What distinct purpose would it serve compared to existing pathways?**

The broadly defined terms of the Change or Suppression (Conversion) Practices Prohibition Act 2021 raise significant concerns about the potential for liability to be triggered by the mere expression of sincerely held views in conversations, sermons, therapy sessions, or public forums, with the provision for private civil claims through tribunals being particularly problematic, as it allows any individual who feels aggrieved to bring a claim with a lower standard of proof, and regardless of the outcome, costs will still fall on the respondent, thereby creating a pervasive chilling effect on speech that far exceeds any legitimate regulatory purpose.