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**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 appears to prioritize intersectional politics over the identification and prevention of serious harm in the community. This is evident in the overly broad definition of "change or suppression practice", which encompasses conduct that is innocuous and causes no harm, while failing to provide clear guidance on what constitutes coercive or abusive conduct that genuinely harms individuals. A law aimed at protecting victims of conversion practice should be precisely targeted at preventing serious harm, rather than being drafted so broadly that it inadvertently captures ordinary conversations, pastoral care, and clinical 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 Act's carve-out for practices that encourage or promote gender transition raises concerns about unequal treatment of different clinical approaches. By explicitly protecting affirmation, the provision leaves non-affirmation exposed to liability, undermining the principle of neutrality in clinical practice. This lack of clarity, particularly with regards to exploratory or Socratic questioning, may lead to unintended consequences, such as deterring clinicians from exploring alternative possibilities or ruling out other diagnoses.

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

The inclusion of psychotherapy as a in the Act, unless exempt, has a chilling effect on clinical practice, as practitioners may be deterred from providing evidence-based treatments due to uncertainty about the law's application. This uncertainty is exacerbated by the necessity exemption, which, unlike its NSW counterpart, imposes a higher threshold for non-affirming interventions than for affirming ones, leaving practitioners with non-affirming clinical views uncertain about the legitimacy of their ordinary professional practice.

**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 Change or Suppression (Conversion) Practices Prohibition Act 2021 represents an extraordinary intrusion into both religious freedom and individual autonomy, as it seeks to regulate the most intimate and deeply personal aspects of a person's life. A person who freely seeks support from a pastor or faith-based counsellor to reconcile their faith with their same-sex attraction is not protected by the Act, and the provider of that support risks liability under the Act, despite the person's consent and autonomy in seeking such support.

**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 Act's prohibition on conversion practices is based on a contested clinical position that is not supported by the best available evidence, including the findings of the Cass Review. The consultation materials, which assume affirmation of gender identity is the only medically appropriate option, are biased and detract from the possibility of a balanced and evidence-based consideration of the law, instead promoting an advocacy agenda that seeks to expand the Act's reach beyond its legislative requirements.

**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 development of materials by the Victorian Equal Opportunity and Human Rights Commission under the Change or Suppression (Conversion) Practices Prohibition Act 2021 should be informed by current best-evidence guidance to ensure the provision of accurate and reliable information. This approach would align with the principles of evidence-based policy and practice, and help to promote the well-being and safety of individuals affected by the Act. The Commission should also engage with the findings of the Cass Review, the most comprehensive independent review of gender medicine for children and young people ever conducted, to ensure that its materials reflect the latest understanding of these complex issues.

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

The creation of a private right of action through civil tribunals under the Change or Suppression (Conversion) Practices Prohibition Act 2021 is a deeply concerning provision that constitutes the most chilling form of speech regulation available, posing a significant threat to freedom of expression and open discussion in Victoria.

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