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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, as presently drafted, prioritizes intersectional politics over the identification of genuine instances of serious harm in the community, with a definition of "change or suppression practice" so broad that it encompasses harmless conduct while failing to provide clear guidance on the coercive or abusive conduct that actual victims of conversion practices have described, thereby necessitating a more precise targeting of serious harm rather than capturing 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?

A genuinely neutral law would not privilege one clinical approach over another, yet the Change or Suppression (Conversion) Practices Prohibition Act 2021 defaults to an affirmation-only approach, leaving non-affirmation exposed to liability. The Act's failure to provide clear examples of what will not contravene the prohibition, including its prohibition on religious practice such as prayer-based practice, leaves pastors and faith leaders uncertain about whether their teaching constitutes a prohibited practice, effectively infringing on the freedom of religious doctrine in an unprecedented manner.

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

Practitioners with non-affirming clinical views are uncertain whether their ordinary professional practice is protected, even when it is evidence-based and conducted with informed consent, due to the Act's broad language. This lack of clarity disproportionately affects clinicians of faith, who are singled out for adverse treatment not applied to clinicians whose approach is informed by other ideological commitments, resulting in discriminatory treatment. The Act's failure to acknowledge the legitimacy of faith-informed clinical perspectives and its importation of a higher threshold for non-affirming interventions than for affirming ones undermine the principles of reasonable professional judgment and 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 failure to provide clear exemptions for faith-based practices that do not aim to change or suppress a person's sexual orientation or gender identity leaves individuals seeking support to live consistently with their religious beliefs vulnerable to exclusion. A person of faith who consensually seeks pastoral care or spiritual guidance to reconcile their same-sex attraction with their religious convictions may find that such support is not available due to the Act's broad and ambiguous

provisions, which pose a significant threat to religious freedom and individual autonomy.

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 description of the law provided in the consultation materials is based on a contested clinical position that is not supported by the best available evidence, including the Cass Review, which undermines the credibility of the entire consultation process. By embedding this assumption and framing ordinary conversations, pastoral care, and clinical practice as potential conversion practices, the materials deter Victorians from lawful speech and activity, and cannot produce balanced or evidence-based recommendations.

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's (VEOHRC) materials that uncritically adopt affirmation of gender identity as the only medically appropriate option risk causing serious harm to vulnerable young people who may be prematurely or inappropriately transitioned. In developing materials under the Act, VEOHRC should engage with a range of evidence-based sources, including other up-to-date systematic reviews of the evidence on gender-affirming care, rather than relying on a narrow or outdated understanding of best practice. This should include consideration of 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 current best-evidence guidance and do not cause harm to those they are intended to support.

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

The imposition of costs on respondents, even those who ultimately succeed, creates a significant barrier to engagement with sensitive topics, deterring individuals from providing pastoral care and guidance. This chilling effect on speech is far-reaching, extending beyond any legitimate regulatory purpose and stifling open discussion and debate. The introduction of a civil cause of action against faith leaders and pastoral care activities would have catastrophic consequences for religious communities, undermining their ability to provide spiritual guidance and support. A private right of action through civil tribunals is a particularly pernicious form of speech regulation, as it allows any individual to bring a claim with a lower standard of proof, regardless of the outcome. By casting the net so wide, the Act risks rendering liable individuals who simply express sincerely held views in a conversation, sermon, therapy session, or public forum, including pastors, priests, imams, and rabbis who offer prayer, counsel, or scripture-based guidance in accordance with their faith tradition.