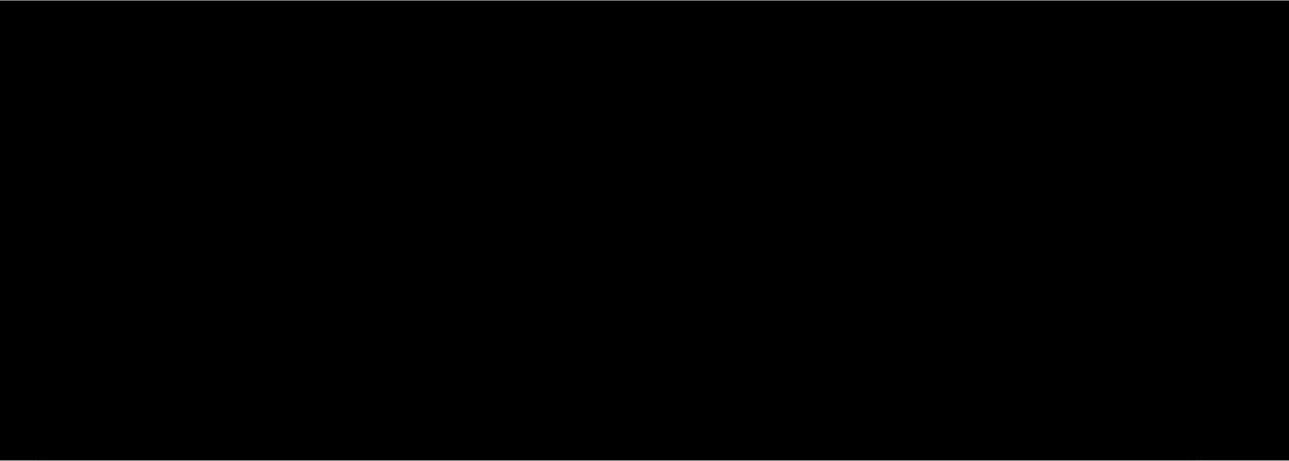


The following submission to this review has been received



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 Change or Suppression (Conversion) Practices Prohibition Act 2021 fails to establish a genuinely neutral law, as it privileges one clinical approach over another, thereby undermining the principles of informed consent and evidence-based practice. Furthermore, the Act's prohibition on religious practice, including prayer-based practice, lacks clarity, leaving pastors and faith leaders uncertain as to what constitutes a prohibited practice, and the carve-out for practices that encourage or promote gender transition creates an uneven playing field that exposes non-affirmation approaches to liability, while the definition of prohibited conduct defaults to an affirmation-only approach that does not clearly protect exploratory or Socratic questioning.

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

The Change or Suppression (Conversion) Practices Prohibition Act 2021 raises concerns regarding the intersection of faith and professional judgment. This provision presumes a clinician's faith perspective is inherently incompatible with or compromising of their professional judgment, which is not necessarily the case. As a result, practitioners who hold 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 Change or Suppression (Conversion) Practices Prohibition Act 2021 represents an extraordinary intrusion into both religious freedom and individual autonomy, as it fails to provide clear guidance on what constitutes a permissible faith practice. The Act's lack of safe harbour provisions and absence of explicit examples of protected faith-based practices has a serious chilling effect on religious communities, leaving them uncertain whether their activities may contravene the Act, and unfairly penalizing a pastor or faith-based counsellor who responds to a same-sex attracted person's consensual request for support to live and practise their religion.

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 are fundamentally flawed, proceeding from the assumption that affirmation of gender identity is the only medically appropriate option, a position that is contested and not supported by the best available evidence, including the Cass Review. This bias undermines the integrity of the consultation process, rendering

it an advocacy document that seeks to maximise the reach of the Act beyond what the legislation requires, rather than a neutral description of the law. By embedding this assumption, the consultation process is unlikely to produce balanced or evidence-based recommendations, and instead, produces a chilling effect that deters Victorians from engaging in lawful speech and activity.

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 should be required to consider current best-evidence guidance when developing materials under the Change or Suppression (Conversion) Practices Prohibition Act 2021, and such materials should be treated as educational resources rather than authoritative guidance, to avoid perpetuating unsubstantiated claims and potential harm to vulnerable young people, particularly if they uncritically adopt affirmation of gender identity as the only medically appropriate option, and instead should engage with other up-to-date systematic reviews of the evidence on gender-affirming care and the findings of the Cass Review, the most comprehensive independent review of gender identity services for children and young people in England, highlighting gaps in evidence and recommending major reforms to clinical practice.

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

The Act's broad definition of change or suppression practices risks ensnaring faith leaders in unintended consequences, as pastors, priests, imams, and rabbis who offer prayer, counsel, or scripture-based guidance could face civil liability simply for expressing their faith tradition's teaching. The breadth of the definition is particularly concerning, as it means that expressing a sincerely held view in a conversation, sermon, therapy session, or public forum could trigger liability, stifling open and honest discussion. The costs burden on respondents, even those who ultimately succeed, creates a powerful deterrent against any pastoral engagement with these questions, and a civil cause of action against faith leaders and pastoral care activities would be catastrophic for religious communities.