



**Women's Human Rights Campaign**

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15 January 2021

The Hon Jaclyn Symes  
Attorney General  
State of Victoria

By email only: [jaclyn.symes@parliament.vic.gov.au](mailto:jaclyn.symes@parliament.vic.gov.au)

Dear Ms Symes

**Change or Suppression (Conversion) Practices Prohibition Bill 2020**

I write on behalf of the Australian Chapter of the Women's Human Rights Campaign (WHRC), an international campaign which has as its foundation document the Declaration on Women's Sex-Based Rights (attached). This Declaration was launched in New York in March 2019. As at 14 January 2021, it had been signed by 13,142 signatories from 125 countries, in collaboration with 291 organisations. Further information is available on the Declaration website:

<https://www.womensdeclaration.com/en/>

While we know that the above bill has already been passed by the Legislative Assembly, we urge you to withdraw this legislation and reconsider it in the light of its potential adverse effect upon the rights of women and children. In this respect, we note:

- Sexual orientation and 'gender identity' are very different phenomena and should not be yoked together as the bill does. Sexual orientation rights are necessary in eliminating discrimination against those who are sexually attracted to persons of the same sex. Rights relating to sexual orientation are compatible with women's sex-based rights, and are necessary to enable lesbians, whose sexual orientation is towards other women, to fully exercise their sex-based rights. However, the concept of 'gender identity' makes socially constructed stereotypes, which organise and maintain women's inequality, into essential and innate conditions, thereby undermining

women's sex-based rights. Victorian legislators, accordingly, should split the SO from the GI and approach the issue of 'conversion practice' afresh on that basis.

- The bill could well be construed as proposing the outlawing of a 'watchful waiting' approach to children with gender dysphoria, and imposing upon health care providers – and parents – a 'gender affirmation' approach which, we would argue, does not serve the best interests of children. We contend that children are not developmentally competent to give full, free, and informed consent to medical interventions such as puberty-suppressing drugs, cross-sex hormones, and surgery, given that such interventions carry a high risk of long-term adverse consequences to the physical and psychological health of the child, such as sterility and failure to accrue bone density. You may be aware that the UK High Court has adopted a similar position in *Bell v Tavistock* (attached), a decision handed down on 1 December 2020:  
<https://www.judiciary.uk/wp-content/uploads/2020/12/Bell-v-Tavistock-Judgment.pdf>

In consequence, we urge you to withdraw this bill for further consideration with a focus on women's and children's rights. We note your positions as co-convenor of EMILY's List and chair of the Women's Correctional Advisory Committee. We wish you well in your new position as Victorian Attorney-General, and hope that you will be able, during your term of office, to promote measures to:

- cease the practice of identifying young people who are same-sex attracted as suffering from gender dysphoria;
- cease the practice of diagnosing and treating children as having been 'born in the wrong body' when they do not conform to traditional sex-role stereotypes;
- abolish traditional and emerging practices which enforce sex-role stereotypes of girls and boys;
- develop school curricula which are materially accurate about human biology and reproduction, and include information about the human rights of people of diverse sexual orientations, taking into account the evolving capacity and psychological developmental stages of the child;
- protect the healthy bodies of children from the use of drugs or surgery to effect 'gender reassignment' treatment;
- prevent organisations that promote the concept of 'gender identity', or constituencies that have no clinical expertise or child psychology background, from influencing health services for children;
- include, in teacher training and continuing professional development, programs of accurate material about human biology and reproduction, and information about the human rights of people of diverse sexual orientations, which should include the challenging of sex stereotypes and of homophobia; and
- prohibit state agencies, public and private bodies, medical practitioners, and other child welfare professionals from taking action which seeks to compel parents to consent to medical and other interventions aimed at changing the 'gender identities' of their children.

We will be happy to supply additional information if you require any.

Yours sincerely



Eileen Haley  
for **Women's Human Rights Campaign**, Australia