



**Submission to the Consultation on the *Conversion Practices Prohibition Bill* 2026 (Tasmania)**

**From: Parents of Adolescents with Gender Distress – Victoria (PAGD Vic)**

**Contact:** [REDACTED]

We write as Parents of Adolescents with Gender Distress – Victoria (PAGD Vic), a group of parents supporting evidence-based care for young people experiencing gender-related distress. We welcome genuine efforts to prohibit coercive, harmful practices that seek to change or suppress a person’s sexual orientation. However, drawing on our direct experience with Victoria’s Change or Suppression (Conversion) Practices Prohibition Act 2021, we urge careful attention to the drafting, exclusions, guidance materials, and implementation of Tasmania’s proposed Bill so that it does not replicate the unintended consequences we have experienced in Victoria in regards to the misguided inclusion of gender identity.

**The Chilling Effect on Neutral, Exploratory Therapy in Victoria**

An unintended and damaging impact of Victoria’s Act has been a severe chilling effect on access to neutral, exploratory therapy. Parents in our group have faced extreme difficulties finding therapists in Victoria willing to provide such therapy, due to fears that it could be misinterpreted as “suppression” under the Act’s definitions. Our experience is that any therapists willing to work neutrally with gender-distressed youth cannot advertise their expertise in the area. This has forced families to seek therapists in other states (e.g., New South Wales or Queensland) or even internationally (e.g., in Sweden), often at great expense and inconvenience.

Several of our children have benefited from this approach, with some choosing to desist or detransition and are now thriving without medical interventions. This underscores the value of neutral and exploratory therapy. Without clearer guidelines, legislation may inadvertently limit supportive, evidence-based options that align with reasonable professional judgement, potentially exacerbating distress for vulnerable young people, as we have experienced.



### Confusion, Misunderstanding, and Over-Caution

The lack of clarity and definition around which practices are allowed or not allowed has created confusion and misunderstanding for parents, clinicians, and educators. It has also led to misunderstanding among those who would benefit most from supportive therapy, with many gender-distressed youth believing that any exploratory questions to help them explore their identity development are “conversion therapy.”

There seems to be limited understanding of what constitutes change or suppression practices, with some interpreting neutral exploration as potentially suppressive. This deters therapists who might prefer a more open-ended treatment path when dealing with children and vulnerable youth, particularly those with other health challenges such as neurodiversity and trauma. Awareness of the harms of suppressing sexuality is well known. However, this has been conflated with identity distress, which is a far less understood or researched area.

### Recommendations for Greater Clarity on Exclusions

The Act’s effectiveness could be improved by providing much greater clarity on exclusions for health service providers, particularly in relation to psychotherapeutic practices for children and young people experiencing gender distress. This could be achieved through legislative amendments incorporating explicit examples (similar to those in South Australian legislation) of permissible exploratory or neutral therapy, which supports adolescents in understanding their feelings without attempting to induce change or suppression. South Australia’s Conversion Practices Prohibition Act 2024 lists examples of health services or treatments that do not constitute a conversion practice when assessed by a registered health practitioner as clinically appropriate, including:

- genuinely assisting an individual who is exploring their sexual orientation or gender identity or considering or undergoing a gender transition;
- genuinely assisting an individual who is receiving care and treatment related to their gender identity; and
- genuinely advising an individual about the potential impacts of gender-affirming medical treatment.



We recommend Tasmania adopt comparable explicit examples in the proposed Bill, alongside exclusion for genuinely facilitating coping skills, development, or identity exploration. Greater clarity could also be achieved by including specific examples of excluded practices, such as neutral counselling that explores underlying factors (e.g., trauma, neurodivergence).

### Evidence-Based Guidance and Professional Support

Drawing on the NSW Sax Institute report (2024 update), which found psychosocial interventions like psychotherapy to be safe, effective, well-received, and without reported risks or harms, the Act could reference such evidence to encourage compliance while protecting access to beneficial therapies. This would reduce barriers to care by ensuring a range of supportive options.

We also urge development of professional guidelines or training modules to build confidence among providers and to remove false claims that there is no evidence that gender identity can change. The UK Cass Review remains the most comprehensive and rigorous examination of gender distress in young people in recent years. It emphasises holistic, exploratory psychological care rather than immediate affirmation as the default. Referencing both the Sax Institute findings and the Cass Review would improve the balance of information provided by the administering body.

### Specific Provision for Detransitioners

Specific detail should be provided for detransitioners, who are actively re-identifying with their sex and seek support to clarify and process shifting views on gender identity. They should not face barriers to the therapy they need.

### Avoiding the Problems Experienced with VEOHRC Materials

We strongly urge Tasmania to avoid the problems we have faced in Victoria with the Victorian Equal Opportunity and Human Rights Commission's (VEOHRC) materials regarding conversion practices and gender identity. These materials are highly problematic regarding the evidence around gender identity and the wording of the Act in relation to psychotherapeutic interventions, leading to widespread over-caution among professionals and anxiety for parents.



In particular, VEOHRC has irresponsibly suggested or implied that parents could face criminal charges for failing to affirm their children's trans identities, which has created unnecessary fear and a chilling effect on neutral, exploratory therapy. The implicit and sometimes explicit assumption from VEOHRC's website, information materials, and training sessions is that "gender-affirming care" is the only acceptable model of support for gender-distressed youth. We can provide examples.

This overreach has deterred therapists from offering neutral, exploratory support, as evidenced by our group's experiences sourcing care interstate or overseas. We would suggest the development of targeted resources for families and therapists on permissible therapies, and incorporating positive outcomes from exploratory approaches (e.g., desistance and detransition experiences from our group and others and references to available studies, such as the Sax report).

Collaborating with groups like ours and others who support neutral approaches to gender distress would enhance understanding and compliance, while reducing the harm we've experienced with the VEOHRC's currently misleading approach. Enhanced guidance materials from the Tasmanian Anti-Discrimination Commissioner, such as fact sheets tailored for health professionals and parents, could emphasise that non-affirming but non-suppressive approaches, focused on holistic mental health and exploration, are not prohibited.

### Conclusion

PAGD Vic supports the prohibition of genuinely coercive and harmful conversion practices. We recommend that the Tasmanian Bill be drafted and implemented with sufficient clarity, explicit exclusions modelled on South Australia's approach, balanced evidence-based guidance (drawing on the Sax Institute and Cass Review), and genuine engagement with families who have lived experience of exploratory care and desistance/detransition. This will protect vulnerable young people without creating the barriers to neutral, evidence-based therapy that have already harmed families in Victoria. We are available to provide further examples, meet with the Bill's proponents, or participate in any consultation process.

**PAGD (Parents of Adolescents with Gender Distress-Victoria)**