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**TLRI Issues Paper No. 31: Sexual Orientation and Gender Identity Conversion Practices
(November 2020)**

Submission from Family Planning Tasmania

Why is Family Planning Tasmania making this submission?

Family Planning Tasmania (FPT) is a community-based, not for profit organisation providing sexual and reproductive health (SRH) clinical, education and advocacy services for all Tasmanians. Over five decades, FPT has actively engaged Tasmanian communities, and facilitated Tasmanian consumer participation in sexual and reproductive health.

In the 2019-2020 financial year, FPT:

- delivered 29,590 instances of clinical services to 13,121 health consumers, including (but not limited to) contraception, gynaecology, treatment of sexually transmitted infections, and termination of pregnancies
- increased the number of consumers accessing FPT clinical services year-on-year despite the impacts of COVID-19, including through use of telehealth
- delivered to consumers across the North-West (18%); North (35%); and Southern (46%) regions of Tasmania
- provided SRH education programs to 5603 young consumers in Tasmania schools
- delivered one-on-one educative and therapeutic support to 456 consumers with additional needs
- provided SRH professional development to 61 workers in Tasmania's education, disability and social work sectors
- employed 68 staff, including health practitioners and educators.

A key focus of FPT's work is advocating for legislative and administrative reforms that specifically improve SRH outcomes for LGBQTA+ Tasmanians. There is compelling evidence that banning sexual orientation and gender identity conversion practices (if accompanied by a range of support measures) will have positive impacts on sexual and reproductive health, and is therefore considered by FPT to be a critical SRH reform issue.

Family Planning Tasmania's position on legal reform associated with sexual orientation and gender identity conversion practices

The following addresses Questions 1, 2, 4, 5, 6, 7, 8 and 9 in the TLRI Discussion Paper.

Put simply, conversion practices are a violation of international human rights in relation to sexual and reproductive health. This was established in 2016 by the United Nations Committee on Economic, Social and Cultural Rights, and confirmed in 2020 by the United Nations Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity¹.

The Independent Expert also found that conversion practices are a breach of human rights in relation to non-discrimination (as ascertained by the United Nations Human Rights Committee, the Committee on the Elimination of Discrimination against Women, and the Committee on the Rights of Persons with Disabilities); comprise practices that are degrading, inhuman and cruel under international human rights law; and contravene the Convention on the Rights of the Child.

The Independent Expert found the adverse impacts of conversion practices - as indicated by a wide range of peer-reviewed medical research - include significant loss of self-esteem, anxiety, depressive syndrome, social isolation, intimacy difficulty, self-hatred, shame and guilt, sexual dysfunction, suicidal ideation and suicide attempts and symptoms of post-traumatic stress disorder.

On this basis, FPT strongly supports a ban on conversion practices through specific, comprehensive, stand-alone Tasmanian legislation (incorporating consequential amendments to other legislation as required). Among other things, this will provide Tasmania with a clear and unambiguous approach to conversion practices that can be effectively communicated as part of the support measures set out below.

As all conversion practices are inherently degrading, inhumane and cruel, FPT supports the definition of conversion practices captured by the legislation being drafted as simply, broadly and unconditionally as possible, while maintaining legal enforceability.

FPT believes the legislation should provide for both civil and criminal actions and sanctions, so that appropriate recourse and remedies can be sought according to the circumstances of each victim and perpetrator.

To the maximum extent permissible under law, and taking into account the totality of the proposed legislation, conversion practices should be offences regardless of the victim's purported 'consent'. As conversion practices can never be in the best interests of a child, victim 'consent' should never be a defence or mitigating factor for conversion practices involving a person under the age of 18.

Such legislation will help ensure that Tasmania protects and improves the sexual and reproductive health of Tasmanians. It will also enable Tasmania to maintain consistency with well-established international human rights obligations.

¹ United Nations Human Rights Council, *Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity*, Agenda item 3, Forty-fourth session, 15 June–3 July 2020

It is important, however, that Tasmanian legislation banning conversion practices is accompanied by State funded support measures. These measures should be consistent with the UN Human Rights Council Independent Expert report, and should include at a minimum:

- A funded system for enforcement of sanctions for non-compliance with the legislative ban on conversion practices.
- Funded monitoring, support and complaint mechanisms so that Tasmanian victims of conversion practices have facilitated access to a full range of medical and legal assistance.
- Urgent measures to protect children and young people from conversion practices, including by giving priority to the design and implementation of monitoring programmes for healthcare, religious, education, community, commercial and any other private or public settings where conversion practices may impact young Tasmanians.
- Rolling communication campaigns to raise awareness among parents, families, faith communities and the general public about the invalidity and ineffectiveness of, and the damage caused by, conversion practices.
- Ongoing structured dialogue with key stakeholders, including medical and health professional organisations, faith-based organisations, educational institutions and community-based organisations, to raise awareness about the human rights violations connected to conversion practices.

Importantly, in recognizing and addressing the profound damage caused by conversion practices, it is necessary to engage, empower, and build individual and collective capacities within the LGBTQTA+ communities of Tasmania. The lived realities and expressed priorities of LGBTQTA+ Tasmanians need to be understood, respected and placed at the core of all conversion practice interventions. FPT notes and supports the manner in which the TLRI has engaged extensively with the LGBTQTA+ community generally, and the victims of conversion practices specifically, in preparing the Issues Paper. To this end, FPT encourages the TLRI to consider and incorporate the recommendations in the *SOGICE Survivor Statement* (July 2020) to the maximum extent practicable.

Finally, community-based health organisations with existing strong links to LGBTQTA+ Tasmanians have proven capacity to deliver the outreach, communication and education support measures outlined in this submission. FPT recommends utilizing such organisations to ensure the effective and cost-effective implementation of the proposed legislation across all regions of Tasmania.

If you require any further information, please do not hesitate to make contact.

Yours sincerely,



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