

6 Jan 2020

Submission to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee

Inquiry into the Health Legislation Amendment Bill 2019

To:

Committee Secretary

Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee

Parliament House

George Street

Brisbane Qld 4000

From:

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Dear Members of the Committee,

I make the following points, as a medical practitioner, in response to your proposed ban on counselling for people struggling with issues over gender identity or sexual orientation. I disagree with your claims and consider your proposal to be an outrageous overreach in silencing free thought and clinical discretion amongst doctors.

I quote the passage from your inquiry's material, and then my response:

“Conversion therapy is a term used to describe treatments and practices that attempt to change or suppress a person’s sexual orientation or gender identity. There is no evidence of any benefits from conversion therapy, nor that sexual orientation or gender identity can be changed through therapeutic or other interventions. “

This is is so broad a brush, and overlooks the fact that many people with gender dysphoria need emotional support and discussion, and cognitive therapy (that they may initially resist), in the same way as patients with other mental disorders, such as those who have disturbed body image, (as in anorexia), who have entered into a dangerous state of irrationality. In fact, the paragraph is ideologically loaded, and actually negates the rights of the patient, and the possibility of the patient needing help.

To the contrary, clinical and social science research has produced overwhelming evidence that conversion therapy is psychologically harmful and correlated with higher rates of suicidality, self-harm and other adverse health outcomes.

To lump all typed of interventions, such as counselling, discussion, cognitive therapy, with other kinds of drastic physical interventions (presumably genital electric shock), is disingenuous. It implies insensitivity or violence by doctors, acting against patient's will, when it can be entirely consensual and professional.

In November 2018, the Minister for Health and Minister for Ambulance Services convened the Ending Sexual Orientation Conversion Therapy Roundtable to consider how to end conversion therapy in Queensland. The roundtable, attended by representatives of the community and government, concluded that the Government should consider legislation making it an offence for health practitioners to perform conversion therapy. The roundtable also recommended that consideration be given to protecting children, young people and vulnerable groups from these practices.

Were these experts or activists, driving an agenda ? How round was the table, how representative was it of the major players in the community, for example, were there any medical critics of this proposed Bill? Was there anybody on the "round table" able to tell the government they must not lump in normal psychotherapy with the extreme coercive therapy being portrayed by the Minister?

Prohibition of conversion therapy The Bill amends the Public Health Act to prohibit health service providers from performing conversion therapy and makes it an offence for a health service provider to perform conversion therapy.

What does this mean? Is it an offence to offer rational advice, counselling, discuss implications ?

The new offence carries a maximum penalty of 100 penalty units, 12 months imprisonment or both. If the recipient of the conversion therapy is a vulnerable person, such as a child, the maximum penalty increases to 150 penalty units, 18 months imprisonment or both.

Incredibly heavy handed for a doctor who may be acting in good faith using established modes of talk-therapy to help his patient.

How absurd and hypocritical, to neutralise a well meaning medical practitioner from their usual work of service to the community. So much for a true agenda of dedication by government to free speech and care for the community as a whole. Arm chair experts driving an Orwellian rule of law.

The Bill targets practices that are based on the idea that being a LGBTIQ person is a disorder or deviant behaviour that requires correction or suppression. These ideas have long been discredited by the medical community and are not evidence-based.

Not all the medical community supports the notion that an individual's desire to change gender is consistent with a healthy mental state. The proponents of the Bill judge that any doctors who disagree with them are criminals. Doctors who will disagree with radical destructive sex change medications and surgery, are criminals, whereas doctors who remove testicles, ovaries and breasts (actions which would be far more harmful (and irreversible), than any conversion therapy) are benevolent. This is an inversion of reality.

Examples of practices and treatments that are prohibited under the Bill include: • aversion therapy, which may include administering an electric shock or nausea inducing drugs while showing a person an image of a person of the same sex; •

This is a strawman argument. A bogus bogeyman is presented, to smear well meaning and reasonable therapists/ doctors/ counsellors. I know of no one who has ever done this (torture with electricity or drugs) This would be an extreme historical aberration, which is nowadays non existent. This example is used, dishonestly conflated with mild reasonable strategies (counselling, advice, knowledge, religious education), to help vulnerable individuals.

Counselling is not a unilateral therapy, typically it is a partnership, between patient and a therapist. The patient should be offered all options and long term sequelae of sex change should be explained in detail. To withhold this is in fact a travesty, a betrayal of patient care, and an affront to the principal of informed consent.

In contrast, the Bill does not prohibit treatments or practices that: • assist individuals who are undergoing or considering a gender transition

So the actual act of cognitive and physical transition (conversion), is deemed to not be conversion, where as reasonable strategies to offer emotional support, counselling to help an individual reconsider undergoing a destructive conversion, are now considered to be acts of criminality! This Bill is an abuse of the power of politicians to enforce a bizarre ideology about gender and stifle the professional freedom of doctors. It must be rejected.

Yours faithfully,

Joseph De Zordi

A handwritten signature in black ink that reads "Joseph De Zordi". The signature is written in a cursive style with a large, sweeping initial 'J'.

FRACP, (formerly paediatrician at Mt Isa QLD)

Dr Thomas Campbell