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Dear Committee Secretary, Re Health Legislation Amendment Bill 2019.

Thank you for inviting submissions from the public regarding the Health Legislation Amendment Bill 2019. I am a specialist doctor working in the fields of Sexual Assault, Child sexual abuse and Domestic Violence.

I appreciate the concerns of the committee for children and young people who suffer as a result of gender confusion and being born transgender. This is a difficult complex and painful area.

However I have my profound concerns regarding the pending legislature and to speak plainly the risk that the treatments proposed will in some cases be seen in the future as ill-advised and tragic if not abusive. There is a long history of well-meaning and highly regarded scientific and medical experts advocating treatments in professional journals which later evidence has shown to be harmful to children.

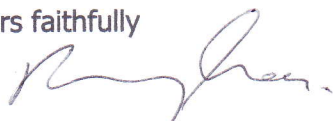
In my professional opinion this area of gender conversion therapy in children could well prove to be such an area. The scientific evidence is not adequate for any certainty that therapies with lifelong potential harms (side-effects) should be embedded into every approach care of these children.

I appreciate that many children are suffering and at risk. There are however options available for child and family therapy that may well be effective. I fear that that it is too easy for families and doctors to reach to quickly to the apparently scientific, medical 'fix' of surgery and hormones and to think that of course the Doctors and government would not fund this if it were not the best and safest option.. Medical treatment after medical treatment in adults and children that was once considered helpful has been found to have been widely overprescribed in cases where it was ineffective or dangerous. We need rigorous evidence before we opt for a system which only allows a treatment regime which will accept committing children to lifelong and medicalization, the unknown lifetime sideeffects of these medications in children and also depriving children of the potentially beneficial effects of their own bodies' hormones.

These children are by no means a homogenous group and some are children whose insecurities and confusion may have causes including past child sexual abuse which, even with caring family and professional support may not be disclosed till adult years.

I write to request the Parliament not to oblige therapists to pursue the hormonal intervention and to permit the alternative psychotherapeutic support, in the long term which has been shown to be effective in the past for a significant number of children. It would be safer to take a slower and more careful approach and to allow for alternative medical approaches and continue to evaluate the evidence which may be forthcoming.

Yours faithfully

(Dr) 
Rosemary Isaacs

PHONE

Provider Number