

**Submission
No 35**

EQUALITY LEGISLATION AMENDMENT (LGBTIQA+) BILL 2023

Organisation: Australian Christian Lobby

Date Received: 14 April 2024

NSW Legislative Assembly Committee on
Community Services



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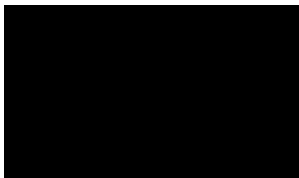
Dear Committee Chair,

The Australian Christian Lobby (ACL) is grateful for the opportunity to make a submission on the *Equality Legislation Amendment (LGBTIQA+) Bill (NSW)*.

We would appreciate an opportunity to meet with the Committee to discuss our submission.

Thank you for giving the following submission your careful consideration.

Yours Sincerely,



Yours Sincerely,

Joshua Rowe

ACL State Director NSW

SUBMISSION:

***NSW Equality Legislation Amendment
(LGBTIQA+) Bill 2023***

AUSTRALIAN CHRISTIAN LOBBY

About Australian Christian Lobby

The vision of the Australian Christian Lobby (ACL) is to see Christian principles and ethics influencing the way we are governed, do business, and relate to each other as a community. ACL seeks to see a compassionate, just and moral society through having the public contributions of the Christian faith reflected in the political life of the nation.

With around 250,000 supporters, ACL facilitates professional engagement and dialogue between the Christian constituency and government, allowing the Voice of Christians to be heard in the public square. ACL is neither party-partisan nor denominationally aligned. ACL representatives bring a Christian perspective to policy makers in Federal, State and Territory Parliaments.

acl.org.au

Introduction

This Bill represents the comprehensive wish list of a coalition of sexual interest groups and the industrial complex that profits from the promotion of sexual promiscuity and gender expression as a lifestyle choice. It has been proposed without regard for the role that normative standards of sexual morality play in limiting the scope for sexual predation and establishing social conditions that uphold the safety, dignity and equality of women. It demonstrates a disregard for the rights and freedoms of others that is incompatible with an orthodox understanding of Australia's international human rights obligations.

Although characterised as equitable “reform”, Mr Greenwich’s second reading speech indicates that this Bill advances a radical program of social change by shifting the entire corpus of NSW law from one ideological universe to another.¹ This shift is achieved by redefining the human person without reference to the body, erasing biological sex and so destabilising categories of identity that have always been fundamental to our social organisation. What this Bill proposes is the erasure of a traditional (hylomorphic) concept of the human person (in which individual identity is understood to involve both the body and the soul (or psyche) and the insertion of post-modern anthropology that centres “sexual orientation” and “gender identity” (the “SOGI”) as the principal constituent elements of identity.² A society organised according to this doctrine will seek to maximise freedoms of sexual and gender expression and encourage (require) the celebration of “diversity” as normative for humanity, while condemning more traditional viewpoints as harmful.

Accordingly, this Bill prioritises the expression of sexual and gender diversity without consideration for the harm this produces. It seeks to maximise the access of children to medical sex trait modification services and eliminate the authority of parents to object. It strips protections from and threatens legal penalty against any whose beliefs conflict with

¹ Mary-Lou Rasmussen, Professor of Gender Studies at the ANU, explained how modern “anti-gender campaigners” and “researchers in gender and sexuality” inhabit different epistemic universes as follows: “The term ‘gender ideology’ is being crafted to perform a particular rhetorical labour. It is conjuring a vision in which the spheres of beliefs and ideas are separated from the sphere of reality and gender is allocated to the former, thereby undermining the knowledge production and truth claims of many decades of gender studies scholarship. By invoking both common sense and hard sciences, such as Biology or Medicine, they [anti-gender campaigners] aim to dismantle a wide array of research in Social Sciences and Humanities and notably, but not only, research that is inspired by a post-structuralist approach.” Mary-Lou Rasmussen, [“Anti-gender campaigns freedom and education about gender and sexuality in Australian schools”](#), ANU TV, 7 March 2017). Rasmussen’s distinction between “the sphere of reality” and “the sphere of ideas” describes the field of contest well. Is gender identity “real” or only “felt”? When the evidence of “common sense and the hard sciences” is at variance with the truth-claims of post-structuralist humanities research, how are they to be reconciled, and should one prevail over the other?

² Elisabeth Taylor [“‘Conversion Practices’ and Parental Rights”](#), Family First National Conference, September 2023.

the post-modern SOGI-centered anthropology. The extent to which the NSW government can indulge even elements of these proposals without serious deleterious consequences, both in our society's present and future shape, is doubtful.

The first casualties of such a paradigmatic shift include protections for children, women and the family and rights relating to freedom of thought, religion and belief (including freedom of conscience), speech and association. The obliteration of biological sex introduces incoherence to the operation of government and the interpretation of the law. Further, the ACL questions whether the assumptions underpinning these recommendations serve the best interests of the disadvantaged and vulnerable individuals it claims will benefit.

This submission addresses particular concerns relating to;

- Freedoms of religion, belief, conscience and assembly.
- The right of parents to bring up their children in conformity with their own moral convictions guaranteed under Article 18 of the ICCPR.
- The mischaracterisation of “gender-affirming care” as a routine medical procedure and the problems associated with legislating Gillick competence in the manner proposed.
- The detrimental effects on women and children of reducing barriers to surrogacy.
- The detrimental effects on women and children of reducing barriers to prostitution
- Compromising the integrity and safety of women’s sports and allowing males to access female-only services and spaces based on sex self-identification.

The legal redefinition of the human person

The redefinition of the human person (mentioned above) has been introduced to Australian law by **a**) ignoring aspects of identity that are grounded in the body (such as biological sex and the genetic connection between parents and children) and **b**) emphasising the importance of “sexual orientation” and “gender identity” – concepts which have been redefined in accordance with post-modernist doctrine.³ In consequence, the scope of anti-discrimination protections is greatly expanded to include sexuality- and gender-related behaviours (“expression”) as well as a potentially limitless number of sexual and gender identities that may change over time (“diversity”).

Formerly, protections against discrimination were established for the benefit of a fixed minority of the population who were assumed to be “homosexual” or “transsexual” as a stable identity. (Most jurisdictions also recognised “bisexuals” as a protected category, and

³ Expansive definitions are found, for example, in the Yogyakarta Principles ([The Yogyakarta Principles](#)). This document is sometimes (but not always) explicitly referenced as the source for definitions which then appear in Australian legislation.

in some cases, the word “transsexual” had been modernised to “transgender”). In 2013, amendments to the Commonwealth *Sex Discrimination Act (1984)* added protections for “sexual orientation” and “gender identity” (defined with reference to the Yogyakarta Principles)⁴ to an Act that was intended to protect the sex-based rights of women. Various laws at the state and territory level followed suit, replacing “sex” first with “gender reassignment” (for people who medically transitioned to live as the opposite sex) and now with “gender identity” (determined according to self-identification).⁵ The question of whether “gender identity” has entirely eclipsed the formerly-recognised sex-based rights of women – rights which, as a signatory to the UN Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), Australia has undertaken to uphold – is central to the *Tickle v Giggle* case currently before the Federal Court.⁶

In Victoria, the *Change or Suppression (Conversion) Practices Prohibition Bill 2020* introduced definitions of “sexual orientation” and “gender identity” modelled on the Yogyakarta Principles to the *Equal Opportunities Act (2010) (Vic)*.⁷ Consequential changes to legal definitions of “abuse”, “harassment” were explicitly stated in the Bill,⁸ but less obvious changes were not. Questions remain, for example, about how Victorian law now interprets “the best interests of the child” and whether Victorian parents still have the right to object to medical sex trait modification for their children.⁹

Instead of explicitly defining “sexual orientation” and “gender identity” as Victorian legislation now does, Mr Greenwich’s Equality Bill achieves the same legislative results by replacing defined categories of identity (“homosexual”/“recognised transgender person”) with undefined fluid and non-binary identities and/or forms of expression related to gender and sexuality. This introduces ambiguity which can be exploited by activists.

- Where to date, NSW law has recognised a fixed minority assumed to be “homosexual” as a stable identity, Schedule 1[1] of the Equality Bill would remove recognition of

⁴ [The Yogyakarta Principles](#)

⁵ Notably in Anti-discrimination or Births, Deaths and Marriages Registration legislation.

⁶ [Roxanne Tickle v Giggle for Girls Pty Ltd & Anor.](#)

⁷ [The Yogyakarta Principles.](#)

⁸ “Emotional and psychological abuse” in the Family Violence Protection Act 2008 now includes denigration of a sexual orientation (i.e. any emotional, affectional or sexual attractions, any intimate or sexual relations). (s.64, *Change or Suppression (Conversion) Practices Prohibition Act (2021) (Vic)*). The definition of “harassment” in the Personal Safety Intervention Orders Act 2010 now includes discouragement of gender transition or denigration of gender incongruence. (s.65, *ibid*).

⁹ These matters were left to the Victorian Equal Opportunities and Human Rights Commission (VEOHRC) to determine. The information of VEOHRC’s web site indicates that parents who refrain from taking their child to a gender clinic (facilities which seem ready to offer the medicalised pathway on the basis of doubtful diagnostic protocols) may be in breach of the law. *The Change or Suppression (Conversion) Practices Prohibition Act (2021)* also established new powers of enforcement for VEOHRC.

“homosexuals” as a discrete category and establish protections based on “sexuality” instead. Sexuality is not explicitly defined. Schedule 1[23]ff mentions that it will include “bisexuality” and “asexuality” as well as homosexuality for the purposes of a particular part of the Anti-Discrimination Act. “Bisexuality” and “asexuality” are not defined, and it is not clear that “sexuality” in other parts of this Anti-Discrimination Act and in other legislation will not also include sexual interests and fetishes. BDSM is mentioned, for example, as well as “sex work” (see discussion on “Prostitution” below). **How will NSW law define “sexuality”?**

- Schedule 1[4] would omit “recognised transgender person” and extend protections to “transgender persons” without the need for medical or surgical interventions, based on self-identification with “another sex”. “Transgender” is not defined in the Bill. Even academics practicing in the field of post-modernist gender studies agree that the term may be undefinable.¹⁰ **How can a law that recognises undefined and possibly undefinable attributes avoid introducing incoherence where certainty is required?**
- The comprehensive erasure of all references to male/female sex distinctions is clear from many of the Equality Bill’s proposals. For example, Schedule 1[3]–[8] replaces terms such as “opposite sex” with “another sex”. Schedule 1[43] requires government sector agency forms to use gender-neutral terms (e.g., using “parent 1” and “parent 2” instead of “mother” and “father”). Schedule 2[5] provides for a range of “sex descriptors” to be recognised under the *Births, Deaths and Marriages Registration Act 1995*, including “agender”, “genderqueer”, and “non-binary”; these are gender descriptors, not sex descriptors. Similarly, Schedule 5 [2], Schedule 9 [4], [5], [7] – [9] and [11], Schedule 14 [1], [2], [3], Schedule 15[2], [3], [5] and [9], and Schedule 17 [2] (and possibly others) replace binary with non-binary beliefs about biological sex. **Will NSW law continue to recognise biological sex as significant?**

¹⁰ A recent AusPATH report acknowledges that “there has been a consistent tension over medical versus social understandings of gender diversity, and this has been reflected in language”. (Noah Riseman, [A History of Trans Health Care in Australia](#): A report for the Australian Professional Association for Trans Health (AusPATH), May 2022, 6–7.) Historian of transgenderism, Susan Stryker acknowledges that the word “transgender” has only appeared in the last couple decades and that its meaning is “still under construction”. (Susan Stryker, *Transgender History: the roots of today’s revolution*, Seal Press, 2017, 1). For Stryker, the concept(s) associated with “transgenderism” are part of a novel cultural development in which “[s]elf’ doesn’t map onto the biological body in quite the way it seemed to in the last century, and being trans simply isn’t as big a deal as it used to be in many contexts ... [As] biomedical developments continue to coalesce, we are finding more and more ways to separate sex (in the sense of biological reproduction) from one’s psychological gender identity or social gender role. Contemporary trans issues offer a window into that brave new world.” (Stryker, op. cit., 42–44).

These changes point to the paradigm shift from hylomorphism to SOGI-based anthropology, which is now proving problematic in other jurisdictions. The question to be considered is whether it is the intention of the NSW Parliament to engineer a future society in which male/female sex differences and the genetic connections between parents and children are no longer regarded as significant. Such a shift would undermine the nuclear family, an ambition that is consistent with political change advocated by Marxists (among others) who regard the nuclear family and our current “heteronormative” social organisation as products of an oppressive ideology from which the recognition and celebration of “diversity” promises universal relief.¹¹

Religious Freedom

The Bill proposes to remove exemptions to anti-discrimination law that currently allow religious institutions to exercise the freedoms of religion, belief, conscience and association which Australia is treaty-bound to guarantee to citizens. The loss or reduction of these exemptions (proposed in Schedule 1 [10], [11], [14], [17], [40], etc.) would adversely affect (potentially to the point of extinction) the ability of religious schools to function in accordance with their religious ethos in matters relating to the employment of staff and the enrolment of students. This would violate the terms of Article 18(4) of the ICCPR, which guarantees the rights of parents to bring up their children in conformity with their own convictions, including through school choice.¹²

The Bill is anti-religious in effect, if not by intention, because it pays no regard to how these proposals will affect the operation of religious institutions. As the Special Rapporteur on freedom of religion has emphasised:

¹¹ Speaking at the *Marxism 2015 Conference*, Roz Ward (co-author of the Safe Schools program) explained views which are widely shared, particularly by academics working niche fields of the humanities such as Queer and Gender Studies programs:

“To smooth the operation of capitalism, the ruling class has benefitted and continues to benefit from repressing our bodies, relationships, sexuality and gender identities. Alongside sexism, homophobia and transphobia, both serve to break the spirits of ordinary people to consume our thoughts to make us accept the status quo and for us to keep living or aspiring to live, or feel like we should live, in small social units and families where we must reproduce and take responsibility for those people in those units ...

LGBTI oppression and heteronormativity are woven into the fabric of capitalism ... Only Marxism provides both the theory and the practice of genuine human liberation ... [it] offers both the hope and the strategy needed to create a world where human sexuality, gender and how we relate to our bodies can blossom in extraordinarily new and amazing ways that we can only try to imagine today.”

(Roz Ward, [“The role of the left in the struggle for LGBTI rights”](#), addressing the *Marxism 2015 Conference*).

¹² This was noted in Legislation Review Committee’s report, Parliament of New South Wales, [Legislation Review Digest No. 3/58](#) – 12 September 2023, 36.

“Freedom of religion or belief also covers the right of persons and groups of persons to establish religious institutions that function in conformity with their religious self-understanding. This is not just an external aspect of marginal significance. Religious communities...need an appropriate institutional infrastructure, without which their long-term survival options as a community might be in serious peril, a situation which at the same time would amount to a violation of freedom of religion or belief of individual members.”¹³

The interference with how religious bodies conduct their internal affairs proposed by Schedule 1[40] (for example), which would allow an organ of the secular state to consider whether employment decisions are “reasonable and proportionate in the circumstances”, is just one example of how the Equality Bill, if enacted, would compromise the exercise of religious freedom for communities of faith.

Australian law does a disservice to freedom of religion by characterising it negatively as a ‘special license to discriminate’. The problem is created by an overly broad definition of “discrimination”, which captures all forms of differential treatment, even when based on reasonable and objective criteria, and provides “exemptions” for legitimate differential treatment (which international law would not regard as discrimination).¹⁴ The result is sub-optimal. Instead of recognising freedom of religion as a fundamental right with positive social value and worthy of protection, the declaratory effect of Australian law denigrates legitimate religious practice as ‘not unlawful discrimination’. By implication, wherever religious precept contradicts a prevailing secular morality, the law casts people of faith in a negative light as holding to harmful beliefs that would normally be unlawful but for special “exemptions” to the law.¹⁵

Regarding the Equality Bill, the requirement that religious schools defer to secular doctrines about the nature of the human person, the role of the body in individual identity formation, and cultural views on acceptable sexual behaviour – even when these contradict the religious ethos which is central to the school’s foundation and purpose – is not reasonable.

¹³ Heiner Bielefeldt, Special Rapporteur on freedom of religion or belief, Interim Report to the 68th Session of the UN General Assembly, [A/68/290](#), 7 August 2013, paras 59–61.

¹⁴ Differential treatment based on reasonable and objective criteria is not considered “discrimination” according to the ICCPR, and therefore requires no special “exemption” to avoid penalty.

¹⁵ The 2018 Ruddock Religious Freedom Review recommended avoiding this by adjusting the interpretation provisions in anti-discrimination law to align with international convention and accord equal status to all human rights. (Religious Freedom Review: Report of the Expert Panel, May 2018, Recommendation 3, p 1. (Available here: Religious Freedom Review Expert Panel ([ag.gov.au](#)). A similar suggestion from Professors Parkinson and Aroney is noted in the 2015 Australian Law Reform Commission Report 129, *Traditional Rights and Freedoms – Encroachments by Commonwealth Laws*, n 3, at 5.111).

It needs to be recognised that when the Equality Bill proposes removing exemptions that currently allow religious schools to operate according to their ethos, what is proposed is an infringement on the rights of all NSW residents to freedom of thought, conscience and belief, and freedom of association.¹⁶

Parental Rights, “the best interests of the child,” and medical sex trait modification for minors

Schedule 2[5] of the Equality Bill redefines parental rights to preclude objection to a legal change to a child’s sex descriptor and/or medical sex trait modification. For children over 16, applications that normally require parental consent could instead be supported by “an adult who has known the applicant for at least 12 months.” For children under 16, submissions could still proceed, with authorisation from NCAT, which, however, would be limited in its ability to deny submissions or alert parents to the consequential changes proposed for their child. According to the text of the Bill:

“NCAT must not notify a parent, or other person with parental responsibility for the applicant, about the application if making the notification could reasonably be expected to adversely affect the applicant (32C Application to NCAT by person under 16 years of age about alteration of record).”
(Schedule 2[5], 32CA(1)(b)).

In such cases (i.e. cases involving a child under 16 years of age), Section 32CA(2)(b)(i) of the Equality Bill places the onus for justifying a decision to notify parents on NCAT. Mr Greenwich’s second reading speech anticipates that pubertal suppression (which might begin at age 10) will be included in these provisions. No mention is made of a lower age limit at which the authority of parents regarding their child’s gender identification would still be respected. In this way, the authority of parents, which statutory authorities have long recognised as one of the most significant protections for children, is comprehensively dismantled wherever “the best interests of the child” are understood to require “affirmation” of a “gender identity” at variance with biological sex.

This re-interpretation of “the best interest of the child” comes about through applying a SOGI-based identity, as per the Yogyakarta Principles. The powerful effect of this paradigm shift can be demonstrated by comparing, for example, AHRC submissions to two different Family Court cases which considered how “the best interests of the child” should be understood in relation to gender transition, *Re: Jamie* (2013)¹⁷ and the appeal of *Re: Kelvin*

¹⁶ This was recognised in the Legislation Review Committee’s report, Parliament of New South Wales, [Legislation Review Digest No. 3/58](#) – 12 September 2023, p. 36.

¹⁷ *Re: Jamie* (2013) FamCAFC 110; (31 July 2013).

(2017)¹⁸. In the first, the AHRC invoked only regular UN Conventions and did not conclude that gender affirmation was required under Australia’s international human rights obligations. In the second, the AHRC added the Yogyakarta Principles as “an aid to interpretation” to justify a significant departure from its previous analysis of this question.

In its submission to Re: Jamie (2013), the AHRC invoked only recognised UN Conventions (notably, the *Convention on the Rights of the Child (CRC)* and the *Convention on the Rights of Persons with Disabilities (CRPD)*) to illuminate the Court’s obligations under the *Family Law Act (1975) (Cth)*.¹⁹ It upheld the rights of parents to make decisions on behalf of their children:

*“26. The CRC makes clear that it is important for children to have input into decisions that affect them, and that parents have a special responsibility for assisting their children in making these decisions. Children are rights bearers and not merely objects of protection. Further, there is a strong presumption that the realisation of children’s rights will occur in the context of the family unit in a manner which accommodates a child’s evolving capacities.”*²⁰

Further, it concluded that notwithstanding the apparent “consensus opinion on the proper course of treatment for children diagnosed with transsexualism”, the “uncertainties about the long-term effects of treatment” meant “that it is too soon to say that Court authorisation for this kind of treatment is not required.”²¹ The AHRC did not conclude that gender affirmation was required under Australia’s international human rights obligations.

By contrast, the AHRC’s submission in the appeal of Re: Kelvin (2017) introduced the Yogyakarta Principles as an aid to “the interpretation of the scope of rights under the CRC”.²² The AHRC’s submission acknowledged that “the CRC does not specifically refer to questions of gender identity” but argued that “supplementary means of interpretation which include the Yogyakarta Principles” could be applied, in which case the child’s right to preserve an identity (recognised, for example, in Article 3(h) of the CRPD and Article 8 of the CRC), might include the right to recognition of a *gender identity*, including through the

¹⁸ Appeal No. EA 30 of 2017, in the Appellate Jurisdiction of the Family Court of Australia at Sydney, 8 August 2017. This appealed Re: Kelvin [2017] FamCAFC 258.

¹⁹ [AHRC submission](#) to Re: Jamie, 2013, [9].

²⁰ [AHRC submission](#) to Re: Jamie, 2013, [26].

²¹ [AHRC submission](#) to Re: Jamie, 2013, [117].

²² [AHRC’s submission](#) to the appeal of Re: Kelvin, 2017, [20].

facilitation of medical sex trait modification (as per Principles 3 and 17 of the Yogyakarta Principles).²³

Why the AHRC should introduce the Yogyakarta Principles is a question that remains to be answered. Australia's Federal Senate Legal and Constitutional Affairs Legislation Committee, reporting on the Parliamentary Inquiry into the *Sex Discrimination Amendment (Sexual Orientation, Gender Identity and Intersex Status) Bill 2013*, reiterated that "the Yogyakarta Principles have no legal force either internationally or within Australia. They were developed by a group of human rights experts, rather than being an agreement between States."²⁴ States are not required to do anything that the Yogyakarta Principles stipulate. Particularly when the Yogyakarta Principles have the effect of compromising the enjoyment of the very Convention rights that the AHRC has statutory obligations to defend, the use of this document as an aid to interpretation would appear to be open to challenge.

The point of drawing this to the attention of the NSW Parliament in the context of this Bill is to underscore how laws premised on SOGI-based anthropology bring into contention issues of material importance to NSW families, such as the scope parental rights and how "the best interests of the child" are to be understood. Like the Yogyakarta Principles, the Equality Bill centres on SOGI-based identity and therefore prioritises affirmation of gender identity over the preservation of parental rights to protect children, over the child's bodily integrity and over aspects of identity that are grounded in the body, such as biological sex. Mr Greenwich's second reading speech presents a vision of "the best interests of the child" premised on the belief that "where medical interventions are in a child's best interest", any objection is characterised as the product of "ideology and discrimination". His Bill envisages pre-pubertal interventions (puberty blockers) and seeks to eliminate the need both for parental consent and for the court approval currently required where parents withhold their consent.

²³ As quoted in the AHRC's submission to the Court: "22. Principle 3 of the Yogyakarta Principles, dealing with the right to recognition before the law, recognises that: 'Each person's self-defined sexual orientation and gender identity is integral to their personality and is one of the most basic aspects of self-determination, dignity and freedom: Pursuant to this principle, States are required to: 'Take all necessary legislative, administrative and other measures to fully respect and legally recognise each person's self-defined gender identity.'

23. Children have the right to the enjoyment of the highest attainable standard of health and the right of access to health care services. The Yogyakarta Principles describe the application of this right in relation to sexual orientation and gender identity. Under Principle 17, State are required to: 'Ensure that all persons are informed and empowered to make their own decisions regarding medical treatment and care, on the basis of genuinely informed consent, without discrimination on the basis of sexual orientation or gender identity.'" ([22]–[23]).

²⁴ [Report on the Inquiry into Sex Discrimination Amendment \(Sexual Orientation, Gender Identity and Intersex Status\) Bill 2013 \[Provisions\]](#), Commonwealth of Australia, 14 June 2013, n. 3.41, 26.

In characterising the evidentiary support for medical sex trait modification for children as “strong” and claiming that it “can reduce depression and suicidal ideation in young trans people”, Mr Greenwich merely repeats the favoured talking points of lobbyists without acknowledging the extensive and growing body of academic literature which challenges each of these claims.²⁵ It is simply incorrect to characterise “gender-affirming care” as a regular medical procedure for which children might be expected to provide “informed consent” based on Gillick competence.

In *Re: Alex (2004)*²⁶ – the first Australian case to allow medical gender transition for a minor – Nicolson CJ presiding, rejected the submission of the Human Rights and Equal Opportunities Commission (HREOC – as the AHRC was then called) that Gillick competent children could provide informed consent such that court oversight should not be required. Rather, Nicholson found that:

“There is a considerable difference between a child or young person deciding to use contraceptives as in Gillick [this is a reference to a particular UK legal case which considered questions about prescription for the pill] and a child or young person determining upon a course that will ‘change’ his/her sex. It is highly questionable whether a 13 year old could ever be regarded as having the capacity for the latter, and this situation may well continue until the young person reaches maturity.”²⁷

Similarly, the UK Divisional Court in *Bell v Tavistock (2020)*²⁸ found that no amount of information, however well-presented, will enable a child to evaluate the full implications of the transition decision:

“To achieve Gillick competence the child or young person would have to understand not simply the implications of taking PBs [puberty blockers] but those of progressing to cross-sex hormones. The relevant information therefore that a child would have to understand, retain and weigh up in order to have the requisite competence in relation

²⁵ See, for example, Belle Lane, “[Gender Questioning Children and Family Law: an evolving landscape](#)”, Paper for the Australian Family Law profession, April 2023; Alison Clayton, William J. Malone, Patrick Clarke, Julia Mason & Roberto D’Angelo, “[Commentary: The Signal and the Noise—questioning the benefits of puberty blockers for youth with gender dysphoria—a commentary on Rew et al. \(2021\)](#)”, *Child and Adolescent Mental Health*, vol. 27(3), 2022, 259–262; Diane Chen, Johnny Berona, Yee-Ming Chan, Diane Ehrensaft, Robert Garofalo, Marco A. Hidalgo, Stephen M. Rosenthal, Amy C. Tishelman, and Johanna Olson-Kennedy, “[Psychosocial Functioning in Transgender Youth after 2 Years of Hormones](#)”, *New England Journal of Medicine*, vol. 389(16), 19 January, 2023, 240–250.

²⁶ *Re Alex: Hormonal Treatment for Gender Dysphoria* [2004] FamCA 297.

²⁷ *Re: Alex (2004)*, [172]–[173].

²⁸ [R \(on the application of\) Quincy Bell and A -v- Tavistock and Portman NHS Trust and others. \[2020\] EWHC 3274 \(Admin\), Case No: CO/60/2020 in the High Court of Justice, Administrative Court, Divisional Court, 01/12/2020.](#) (Hereafter “*Bell v Tavistock*”).

*to PBs, would be as follows: (i) the immediate consequences of the treatment in physical and psychological terms; (ii) the fact that the vast majority of patients taking PBs go on to CSH [cross-sex hormones] and therefore that s/he is on a pathway to much greater medical interventions; (iii) the relationship between taking CSH and subsequent surgery, with the implications of such surgery; (iv) the fact that CSH may well lead to a loss of fertility; (v) the impact of CSH on sexual function; (vi) the impact that taking this step on this treatment pathway may have on future and life-long relationships; (vii) the unknown physical consequences of taking PBs; and (viii) the fact that the evidence base for this treatment is as yet highly uncertain.*²⁹

The UK Court concluded that “it is highly unlikely that a child aged 13 or under would ever be Gillick competent to give consent to being treated with PBs. In respect of children aged 14 and 15, we are also very doubtful that a child of this age could understand the long-term risks and consequences of treatment in such a way as to have sufficient understanding to give consent.”³⁰ The March 2022 Interim Report of the Cass Review pointed out that Gillick competence is only one of the essential components underpinning informed consent. Equally important is the “robustness of the options offered to the patient” and the “quality and accuracy of the information provided about those options.”³¹

Outstanding questions pertaining to the claims made by advocates for the “gender-affirming” model of care advocated by the Equality Bill are too numerous to canvass here. The ACL will be pleased to supply further information upon request, but these cases alone deserve an inquiry in their own right. Internationally, wherever the claims advanced in support of this treatment model have been impartially investigated – notably, Finland, Sweden, Norway, Florida and the UK – reputable medical authorities have found reasons to step back from medical gender transition for children.³² Some states of America have now criminalised³³ the medical interventions that this Bill proposes to make freely available to children, even without parental knowledge or consent.

²⁹ Bell v Tavistock, [138].

³⁰ Bell v Tavistock, [145].

³¹ [Interim Report](#), Cass Review, March 2022, 64.

³² Recommendation of the Council for Choices in Health Care in Finland (PALKO / COHERE Finland): [Medical Treatment Methods for Dysphoria Related to Gender Variance In Minors](#), Palveluvalikoima, 2020; (“[Care of children and adolescents with gender dysphoria Summary of national guidelines December 2022](#)”, Socialstyrelsen (The National Board of Health and Welfare), Sweden, 2022; “[Pasiensikkerhet for barn og unge med kjønnsinkongruens](#)”, Ukom, 9 March 2023; Bernard Lane, “[Yes, It’s an experiment: Norway joins the shift to caution on gender medicine](#)”, *Gender Clinic News*, 10 March 2023; “[Treatment of Gender Dysphoria for Children and Adolescents](#)”, Florida Department of Health Office of the State Surgeon General, 20 April 2022; “[Interim service specification for specialist gender incongruence services for children and young people](#)”, NHS England, 9 June 2023.

³³³³ Annette Choi and Will Mullery, “[19 states have laws restricting gender-affirming care, some with the possibility of a felony charge](#)”, CNN Politics, 6 June 2023.

We take this opportunity to note that the NSW Parliament has been informed about the problems this is already creating for children in NSW. Since September 2022, Greg Donnelly MLC has reported problems with Maple Leaf House, a gender clinic associated with John Hunter Hospital in Newcastle. Last October, and again in March, Donnelly reported on substandard record keeping, parents being bullied and threatened by clinicians, and children over-hearing “warnings” – which might also function as “suggestions” – about increased suicide risk in the absence of medical transition.³⁴ A forum was held in NSW Parliament in February 2024 with speakers representing the health and mental health professions, LGB communities, concerned parents, the ACL and detransitioners. Information obtained by the ACL suggests very strongly that the children have been socially transitioned in NSW schools without parental knowledge or consent.

The profile and advocacy of Teddy Cook, Vice-President of AusPATH, Director of ACON (which publishes the TransHub website and is funded by the NSW Department of Health), is gaining international attention. Although Cook has assured the NSW Parliamentary Inquiry into *Education Legislation Amendment (Parental Rights) Bill 2020*³⁵ that “I am really not very radical at all”,³⁶ this statement is at odds with reports from the UK concerning the nature of Cook’s social media profile.³⁷ Further, where Cook assured the Education Legislation Amendment Inquiry that young people accessing “irreversible medical procedures” in NSW must go through “a very rigorous process” to do so,³⁸ there are strong grounds for suspecting that this “rigorous process” is confined to the assessment of Gillick competence without assessing the more significant question of whether a particular patient will or will not benefit from the medical pathway recommended by “affirmation” advocates. According to Cook:

³⁴ Greg Donnelly, “Maple Leaf House”, Legislative Council, *NSW Parliamentary Hansard*, [11 October 2023](#), 7713ff.

³⁵ Report on the Proceedings before Parliamentary Committee No.3 – Education, *Education Legislation Amendment (Parental Rights) Bill 2020*, Legislative Council, NSW Parliament, 20 April 2021, 54.

³⁶ Report on the Proceedings before Parliamentary Committee No.3 – Education, *Education Legislation Amendment (Parental Rights) Bill 2020*, Legislative Council, NSW Parliament, 20 April 2021, 54.

³⁷ James Reinl, “[Kinky secrets of UN trans expert REVEALED: Australian activist plugs bondage, bestiality, nudism, drugs, and tax-funded sex-change ops - so why is he writing health advice for the world body?](#)”, *Daily Mail*, 28 February 2024.

³⁸ “*If we are starting to talk about irreversible medical procedures then there is already a well-established protocol for assessing a young person’s capacity to consent ... Young people, I think, in my view, should be free to explore who they are. If we are getting to a point of medical intervention then there is a very strong standard of care and guidelines in Australia that speak very clearly about a very rigorous process that people need to go through. It is very rigorous.*” (Report on the Proceedings before Parliamentary Committee No.3 – Education, *Education Legislation Amendment (Parental Rights) Bill 2020*, Legislative Council, NSW Parliament, 20 April 2021, 53–54).

“It’s not a clinician’s job to agree or not agree that we are who we say we are. It is the clinicians’ role to assess whether we can consent, whether we understand what is happening and whether we can move forward with a full and informed decision being made ... There is a real focus on what happens if you make a decision that you then regret later. I would prefer the question to be: How can we support you to be who you are, whatever that looks like?”³⁹

The latest version of the Melbourne Royal Children’s Hospital Guideline (version 1.4) – endorsed by AusPATH and ACON – details an expanded role for GPs, which, however, no longer includes the “assessment of the adolescent’s gender identity” found in previous editions. GPs initiating medical transition for children are now instructed only to assess “the young person’s health and wellbeing, level of understanding, maturity, and capacity to provide informed consent through medical and psychosocial history taking, physical examination and appropriate investigations”.⁴⁰

This is all indicative that the manifold problems and questions associated with gender affirmation – both social and medical – for children are current issues in NSW. Rather than legislating to suppress one side of an enormously consequential debate, the ACL takes this opportunity to encourage the NSW Parliament to commission a thorough independent inquiry into “gender affirmation” for children in NSW.

Again, the interests of particular lobby groups are clearly represented – Mr Greenwich acknowledged “the Gender Centre, ACON, TransHub, Equality Australia and many others” in his second reading speech. The radical nature of what is proposed and the potentially catastrophic consequences of these proposals for children and families in NSW can hardly be overstated.

Surrogacy

Schedule 19 proposes amendments to the *Surrogacy Act 2010* that would remove the current legal obstacles to the commodification of children through surrogacy. The Equality Bill argues that removing these obstacles is consistent with “the best interests of the child”. The NSW Parliament is asked to consider whether women exploited as surrogates should

³⁹ Report on the Proceedings before Parliamentary Committee No.3 – Education, *Education Legislation Amendment (Parental Rights) Bill 2020*, Legislative Council, NSW Parliament, 20 April 2021, 53–54.

⁴⁰ Michelle Telfer, Michelle Tollit, Carmen Pace and Ken Pang, *Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents*, version 1.4, Royal Children’s Hospital Melbourne, January 2024, 21. The same passage in RCH Guideline version 1.3, 21 included “assessment of the adolescent’s gender identity”.

have “the same rights to manage the birth mother’s pregnancy as any other pregnant woman”; whether those who exploit them should evade penalties “if the commercial surrogacy arrangement occurs outside New South Wales”; whether the Court should be empowered to regularise currently illegal arrangements by making parentage orders “in the best interests of the child”.

In other words, this Bill proposes creating conditions where children can become tradable commodities. While this proposal is consistent with the deprioritisation of the body and the family connections established through genetic ties, it is inconsistent with compassion for the vulnerable, the protection of women and children and the belief that human beings should not be tradable commodities. It is disingenuous to suggest that these proposals will benefit the children to be traded or the women exploited as surrogates to gestate babies for the benefit of others. The greatest beneficiaries of these arrangements will be those who wish to control a potentially lucrative new market and those who wish to purchase babies.

Prostitution

Regarding sex workers, the Legislation Review Committee has noted that “the Bill makes it unlawful to discriminate on a characteristic that generally pertains or is imputed to sex workers. Given the ambiguity of what may amount to such a characteristic, the Bill may have a broad application.”⁴¹ The same problem of ambiguous definition applies to other niche sexual interest groups that potentially fall under the LGBTIQ+ umbrella.

In combination, the proposed protections for sex workers, as well as the inclusion of “sexuality” (Schedule 1[1]) among the prohibited grounds of “discrimination”, would seem to restrict the normally uncontroversial prerogative of teachers and school administrators to prevent sexual interest groups using schools as recruiting grounds. Predictable situations that these “reforms” would enable include organisations like Scarlet Alliance demanding a platform at school career fairs and teachers advocating the benefits of sex work or pornography performance in the classroom.⁴² Where new opportunities for market expansion are created, it is predictable that sex industry advocates will exploit these opportunities.

In his second reading speech, Mr Greenwich explicitly objected to current legislative obstacles to sex industry expansion. He objected that exerting undue influence to cause or induce someone into prostitution is currently an offence because this “creates

⁴¹ [Legislation Review Digest No. 3/58](#) – 12 September 2023, p. 38.

⁴² The 2018 story of an Australian Maths teacher outed by his students as a gay porn star is illustrative of the type of situation in which schools might need to take protective steps which this Bill would prohibit. (“Aussie maths teacher outed as gay porn star by his UK students”, *NZ Herald*, 26 March 2018.

complications and risks for sex worker businesses in recruitment”.⁴³ He regretted that sex workers and “support services” might be prevented from “talking about their work with friends” and “helping a person starting in sex work.” The current restrictions on advertising are also represented negatively on the grounds that they “place unnecessary hindrances on sex work”.

The interest of sex industry lobbyists, such as Sex Workers Outreach Project and Scarlet Alliance, advocating for these “legal reforms” is made clear in Mr Greenwich’s Bill. However, the detrimental consequences of mainstreaming “payment or reward” in exchange for “participating in sexual activity like erotic entertainment, BDSM work and pornography” on (1) children’s protection, (2) levels of sexual harassment, and (3) the dignity and equality of women should be abundantly clear.

Women’s rights and Self-ID

Changes to the definition of “recognised transgender person” (Schedule 1[1] and [43]) and the ability for individuals to change their recorded sex (Schedule 2[5]) nullifies the benefits to women and girls of any remaining legislative provision for single-sex spaces (schools, gyms, prisons, etc.)

The dangers that arise for women and girls when they are obliged to use mixed-sex facilities are entirely predictable. Although activists claim that female-identifying males pose no danger to women, this fails to engage with the plain fact that males have exploited the novel opportunities created in the last decade or so by legal recognition of “gender identity”. This exploitation comes in the form of access to women’s private spaces, with the result that women and girls have been exposed to physical and sexual assaults, harassment, intimidatory behaviour and voyeuristic invasions of privacy.⁴⁴

⁴³ Mr Alex Greenwich, [Equality Legislation Amendment \(LGBTIQ+\) Bill 2023, Second Reading Speech](#), Legislative Assembly Hansard, NSW Parliament, 24 August 2023.

⁴⁴ In 2016, Maya Dillard Smith, the head of Georgia’s ACLU chapter resigned over this issue relating how, having taken her young daughters to a women’s restroom, three transgender young adults then entered. They were over six feet tall and had deep voices. Dillard Smith and her daughters, concerned for their safety were obliged to leave. (Jessica Chasmar, “Ga. ACLU leader resigns over Obama’s transgender bathroom directive”, *The Washington Times*, 2 June 2016. Retrieved from: <http://www.washingtontimes.com/news/2016/jun/2/maya-dillard-smith-georgia-aclu-leader-resigns-ove/>)

The University of Toronto reinstated gender-specific bathrooms after two separate incidents of male students holding their cell phones over female students’ shower stalls and filming them as they showered.” (Pardes Seleh, “University of Toronto Dumps Transgender Bathrooms After Peeping Incidents”, *The Daily Wire*, 8 October 2015. Retrieved from: <http://www.dailywire.com/news/330/university-toronto-dumps-transgender-bathrooms-pardes-seleh#>)

At one YMCA, a woman abused as a child ... [explained] that being seen in the shower by a transgender woman who hadn’t surgically transitioned would reproduce the trauma she endured when her abuser enjoyed watching her in the shower. (Steven E. Rhoads, “The Transgender Locker Room: Coming soon to a school near you”, *The Weekly Standard*, 6 June 2016. (Retrieved from <http://www.weeklystandard.com/the-transgender-locker-room/article/2002577>)

Protections for girls in NSW schools were put in jeopardy as early as 2014 by a Department of Education document (Legal Issues Bulletin No. 55), which, among other things, directs schools to prioritise the safety of transitioning students while remaining silent on the need also to consider the impact of altered toilet, change room and overnight accommodation arrangements on other students, particularly girls. It states:

“Students should not be required to use the toilets and change rooms used by persons of the sex they were assigned at birth if they identify as a different gender ... The exclusion of students who identify as transgender from the toilet or change rooms of their identified gender must be regularly reviewed to determine its continuing necessity.

If other students indicate discomfort with sharing single-sex facilities (toilets or change rooms for example) with a student who identifies as transgender, this should be addressed through the school learning and support team.”⁴⁵

The changes proposed in the Equality Bill would reduce the discretion available to schools in such matters by introducing the real threat of prosecution if they fail to comply. The detrimental consequences for individual women and girls are self-evident, promoting a future where impediments to their free enjoyment of educational opportunities are normalised. There is no world in which girls who object to males in their private spaces should be penalised for doing so.

Sport

Schedule 1 [12] proposes to align NSW law with controversial 2013 amendments to the Commonwealth SDA. These were intended to protect women’s sports while allowing for transgender inclusion under limited circumstances. In practice, this legislative change has provided the mechanism for undermining safety and fairness in women’s sports. The ongoing controversy around the exclusion of women from consultations, which has resulted in the AHRC-promoting “Guidelines for the Inclusion of transgender and gender diverse people in Sport”, demonstrates the unworkability of these proposals.⁴⁶

Christopher Hambrook, 37 and described as a ‘dangerous offender’, leaned on the expanding legal rights of transsexuals to identify as ‘Jessica’ in order to gain entry to two Toronto women’s shelters, where he sexually assaulted several women. (Peter Baklinski, “Sexual predator jailed after claiming to be ‘transgender’ to assault women in shelter”, *LifeSiteNews.com*, 4 March 2014. Retrieved from: <http://linkis.com/www.lifesitenews.com/12D80>)

⁴⁵ NSW Department of Education, Legal Issues Bulletin, No. 55, 2014.

⁴⁶ For further details see “[A Fair Playing Field: Protecting women’s single-sex sport](#)”, Women’s Forum Australia, 2019, 53ff.

The proposals affect sports at all levels, from recreational and junior sports to professional competition. It is incorrect to assume, as the Bill does, that physiological differences between boys and girls prior to puberty do not confer a performance advantage on boys. Performance differentials may increase after puberty, but they are sufficiently marked in primary school to make mixed competition unfair to girls and to potentially discourage otherwise promising female athletes from pursuing a career in sport.⁴⁷ Safety and fairness are important regardless of whether a sport is played to a professional standard or merely for recreational purposes. Girls should not be discouraged or excluded from sports by obligations to play against male-bodied opponents.

Questions relating to whether and to what extent “strength, stamina or physique” is “relevant” to a particular sport and the circumstances in which “the exclusion of a person is reasonable and proportionate” create a minefield of debate about where lines should be (and formerly were) simply and clearly drawn. The Legislation Review Committee correctly notes the potential for disputes to trigger complaints to the NSW Anti-Discrimination Board⁴⁸ – a problem that could easily be avoided by retaining existing arrangements that allow single-sex sports to continue functioning as it currently does. Transgender inclusion can be facilitated by establishing specific teams and events for these players (just as women did last century) or in mixed categories.

Operational issues for government agencies raised by the Bill

Apart from the issues relating to elevating post-modern doctrine at the expense of religious belief, infringing the rights and freedoms of others and perpetuating negative stereotypes of those who dissent (including but not limited to people of faith), the Equality Bill proposes to introduce incoherence where there is currently clarity and to co-opt the government in assisting a radical social change agenda.

Where clarity is one of the properties of good law, this Equality Bill (Schedule 9) proposes an impossibly confusing array of considerations about the circumstances in which a person held in custody may or may not be searched by a person who may or may not be of the same “gender”, which parts of the body count as “private”, when the body is (and is not) to be regarded as significant, etc. In some places, recognition of the reality of biological sex is regarded as important; in other places, recognition of this triggers legal penalty and/or constitutes an aggravating factor in sentencing (Schedule 10).

⁴⁷ Based on an analysis of 175 track, field and swimming records published by the NSW Department of Education, Whitehall found a difference of 1%–4% between the performances of boys and girls aged 12 or under, compared with a difference of 10%–17% after the age of 12. (John Whitehall, “[Guidelines for the Destruction of Female Sport](#)”, Quadrant, 3 October 2019. Accessed 27 May 2021).

⁴⁸ Legislative Review Report, p. 39.

Schedule 1[43] (that requires government forms to use gender-neutral terms that obscure biological sex) and Schedule 12[2] (that requires the government to set “diversity and inclusion” standards, including workplace employment quotas) promise to turn the NSW government and bureaucracy into agents of a radical and divisive push for “social change”, without a mandate and contrary to the prevailing beliefs of the vast majority of NSW residents.

A better strategy for improving the safety and well-being of vulnerable individuals is needed

The erasure of the body and the prioritisation of socially constructed identities results in the trivialisation of potentially significant medical issues (including sex trait modification through hormonal or surgical interventions, sexually transmitted infections and intersex conditions).

One particularly concerning motif in these reforms that threatens the safety and well-being of vulnerable persons is the attempt to normalise ‘gender incongruence’ or ‘gender dysphoria’ as a healthy expression of personhood. Accompanying such ideological redefinitions of the human person is the flagrant promotion of transitionary therapies as an appropriate intervention for improving the safety and well-being of vulnerable sex-confused persons.

The push is identifiable and particularly confronting in Schedule 3 [2], which seeks to allow over 16s to access therapeutic interventions, including puberty blockers and cross-sex hormones, without parental consent. This reform intends to increase the accessibility of sex trait modification therapies to vulnerable children when these interventions are increasingly known to be unevidenced, highly disputed, and harmful.

Notable recent developments indicate the ACL’s concerns, which the committee should share:

1. The UK National Health Service (NHS) has banned the general use of puberty blockers for those under 18 years following the interim report of the independent Cass Review.⁴⁹
2. An investigative journalist, Michael Shellenberger, leaked WPATH files exposing conversations between surgeons, therapists, and activists regarding transgender treatments and surgeries. The files have revealed that, amongst other things, clinicians were

⁴⁹ AFP, “[England bans puberty blockers for under-18s](#),” *The Australian* (March 13, 2024).

aware of the carcinogenic nature of testosterone – including conversations about patients who appear to have passed away as a direct result of the hormone treatment.⁵⁰

3. A British Medical Journal (BMJ) study uncovers that medical gender transition does not correlate with a reduction in suicide rates. The finding suggests that the causes of suicide in this demographic are linked to psychiatric co-morbidities.⁵¹

4. An Australian research piece indicates that those identifying as 'gender diverse' have faced significantly elevated levels of child maltreatment, including physical abuse, sexual abuse, emotional abuse, neglect, and exposure to domestic violence.⁵²

However, the most significant development was the release on **Wednesday 10th, April 2024**, of the largest systematic review of evidence on gender-transition medicine – the Cass Review – its Final Report revealing no clear evidentiary basis for medical gender-affirmation therapies in children.⁵³

Cass's Report was commissioned by the UK's National Health Service in 2020 in response to a dramatic increase in referrals to youth gender identity services, and the Cass Review confirms that available research on puberty suppression and cross-sex hormone treatment is of such poor quality that no foundation exists for clinical decisions and informed consent.

The Review concludes, “For most young people, a medical pathway will not be the best way to manage their gender-related distress. For those young people for whom a medical pathway is clinically indicated, it is not enough to provide this without also addressing wider mental health and/or psychosocially challenging problems”.

Other findings of the Cass Review include:

- Clinicians are unable to determine with any certainty which children and young people will go on to have an enduring trans identity;
- The long-term impact of puberty suppression and cross-sex hormones on cognitive and psychosexual development is unknown;
- An unusual number of children who believe they are trans are neurodiverse, have psychiatric disorders or mental health issues;

⁵⁰ Hughes, Mia, “[The WPATH Files](#),” *Environmental Progress* (March 4, 2024), pg., 68.

⁵¹ Ruuska S, Tuisku K, Holttinen T, et al., “[All-cause and suicide mortalities among adolescents and young adults who contacted specialised gender identity services in Finland in 1996–2019](#)” *BMJ Mental Health* (February 17, 2024).

⁵² Higgins, D. J., Lawrence, D., Haslam, D. M., et al., “[Prevalence of Diverse Genders and Sexualities in Australia and Associations With Five Forms of Child Maltreatment and Multi-type Maltreatment](#)” *Child Maltreatment* (January 12, 2024)

⁵³ Dr. Cass, Hillary, “[The Cass Review](#)” (April 10, 2024).

The findings cited above are ample evidence to discredit the strategy of the ‘Equality Bill’ and its ideological proponents. Undermining biological norms in NSW law and furthering access to sex-trait modification is only determinantal to the safety and health of vulnerable persons in NSW.⁵⁴

The ACL submits that the best steps in a better strategy for helping sex-confused individuals are 1) ceasing the operation of all ‘gender services’ in NSW and immediately suspending the usage of puberty blockers and cross-sex hormones in NSW and (2) conducting an immediate independent inquiry into all ‘gender-related services’ in NSW.

Conclusion

The Equality Bill only does a disservice to the people it claims will benefit, creating real-world difficulties for the individuals affected by reframing these problems purely as a social justice issue and threatening legal penalties for those who fail to accept this framing.

To the extent that the problems of intersex people, prostituted women, pornographic performers and sex-confused children are *not* the product of social stigma, the terms of the Bill will exacerbate their difficulties by prohibiting forms of assistance that recognise the reality of the body, the importance of good health and the problems of psychological dissociation from the body produced through trauma.

Where each of these issues requires sensitive, holistic, individuated interventions to effect positive change in response to adverse circumstances that vary on a case-by-case basis, the Equality Bill proposes a one-size-fits-all identity-driven approach that is very likely to increase the suffering of the people it claims to help. The real beneficiaries – representatives of an industrial complex that profits from the promotion of sexual promiscuity, non-binary, fluid gender identities and trafficking in women and children – are identified by Mr Greenwich as sponsors of this Bill. Not only would the Equality Bill allow for the expansion of existing markets, but it would also assist these industrial interests by turning the weapons of the state against those who object, including medical and health practitioners, parents of children, advocates for the family, religious communities and women’s rights advocates.

Where this represents a radical effort to shift the entire corpus of NSW law from one ideological universe to another, the ACL respectfully submits that the correct use of executive power should be confined to considering legislation that addresses defined problems, which is properly supported by evidence and where the benefit of legislative change can be demonstrated.

⁵⁴ Note: NSW Health’s strategy for treating people with gender dysphoria, the ‘**Framework for the Specialist Trans and Gender Diverse Health Service for People Under 25 Years**’, is no exception to this scrutiny.

The ACL, therefore, urges the NSW government to reject the Equality Bill in its entirety.