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(editorial, practice bite and articles included in this part are linked to the LexisNexis platform)

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When children are conceived through artificial conception or surrogacy arrangements, identifying their legal parents can be problematical even when all the facts are known, because Australian law fails to provide a clear answer to the question who is a child's 'parent'. The water was made muddier when the High Court held in *Masson v Parsons* that in many situations the answer depends on the 'ordinary meaning' of 'parent'. What is that ordinary meaning, in the distinctly un-ordinary situations that can be involved in assisted conception? This article explores that problem, pointing to the difficult policy issues involved, and showing how 'parent' means something different under the relevant state and territory laws and under the federal *Family Law Act 1975* (Cth). It argues that the law is a mess, and renews the numerous calls by scholars and law reform bodies for legislative intervention that will give a clear and satisfying answer to the many families now unable to answer that most basic of a child's questions: who is my parent?

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A growing number of Australian transgender and gender diverse youth are seeking medical treatment for gender dysphoria. Unique legal requirements for consent to these treatments in Australia have developed through case law since 2004. These cases have defined the capacity of parents and children to consent to medical treatment and the role of the Family Court of Australia in the decision-making process. This article analyses the recent Family Court judgment in *Re Imogen* which imposes new and burdensome requirements for consent to treatment. The judgment is at odds with the direction of the law in the Full Court decision of *Re Kelvin*, which had the effect of reducing Family Court involvement in medical treatment of transgender and gender diverse youth. The new legal requirements will almost certainly delay access to treatment for transgender and gender diverse youth in situations where parents are in conflict or where a parent is absent from a child's life. The decision

also erodes the principle of *Gillick* competency, treating competency in transgender and gender diverse cases as a special case. Finally, *Re Imogen* also creates resourcing challenges for medical professionals that will ultimately be to the detriment of transgender and gender diverse young people.

Fathers' allegations of mental health and mothers' allegations of coercive control: Intersections and outcomes in family law proceedings

— *James Drury and Patricia Easteal*

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This article examines the possible impact of separated fathers' coercive control on their former partners' mental health, and the apparent differential treatment of mothers' and fathers' allegations by family law courts. A small select population of judgments for the period 2013–20 published in the Australasian Legal Information Institute were identified. Each matter contained allegations of both maternal mental health issues and allegations of family violence against the father. The analysis of this sample has shown that the psychological impact of coercive control on mothers tends to be minimised. The courts do appear to acknowledge the potential nexus between controlling behaviour and mental health but give primacy to the impact of coercive control on the mother's parenting capacity rather than on her mental health. This approach can adversely impact mothers because it can result in a child being placed in a violent father's care.