

## WHRC response to conversion therapy consultation December 2021

The Women's Human Rights Campaign (WHRC) was established to protect the sex-based rights of women and girls and to campaign against the replacement of the category of sex with that of 'gender identity'. The founders of WHRC created the Declaration on Women's Sex Based Rights to lobby nations to maintain language protecting women and girls on the basis of sex rather than 'gender' or 'gender identity'. As of 9 December 2021, the Declaration on Women's Sex-Based Rights has been signed by 27,689 people and 404 organisations from 154 countries.

#### Submission aim

WHRC is in favour of a ban on conversion therapy relating to homosexuality.

WHRC is **not in favour** a ban on 'conversion therapy' relating to 'gender identity' for the following reasons:

- Neither 'gender identity' nor what 'conversion therapy' relating to it are properly defined
- Affirming that a homosexual person is the opposite sex is conversion therapy in and of itself
- Supportive parents could be criminalised
- Healthcare professionals will have their ability to support patients restricted and could be criminalised
- The concept of 'gender identity' treats sex role stereotypes as innate and erodes women and girls' rights
- Accepting that 'gender identity' is innate allows men and boys entry into women's single-sex spaces, sports and opportunities
- Powerful lobby organisations such as Stonewall have exerted undue influence over government departments, statutory bodies, corporations and charities to promote 'gender identity' and insist that it should take precedence over biological sex to the detriment of women and girls
- This consultation is a call for legislation without evidence, based on poor quality research involving a very limited number of participants<sup>1</sup>

### Q1. To what extent do you support, or not support, the Government's proposal for addressing physical acts of conversion therapy?

#### Somewhat not support

#### Why do you think this?

WHRC agrees with the banning of conversion therapy on grounds of sexuality. Attempting to change someone's sexuality through therapy, prayer, ritual, shame or other methods is inhumane. Lesbians, gays and bisexuals have been subject to brutal practices, including 'corrective rape', which are

<sup>&</sup>lt;sup>1</sup> <u>https://sex-matters.org/posts/sex/legislating-with-out-evidence/</u>

deeply harmful. Physical acts of violence are already illegal and should be prosecuted to the full extent of the law.

WHRC does not agree with the banning of 'conversion therapy' on grounds of 'gender identity'. Any violent 'physical acts' that might be carried out by therapists are abhorrent and are already illegal.

#### Detransition and conversion therapy

The growing ranks of detransitioners, who have desisted from their claimed trans identity, have been very clear that 'physical acts' of conversion therapy including permanent physical changes from unnecessary hormones and surgeries, have been practised against them in their affirmative treatment by gender therapists<sup>2</sup>.

Q2. The Government considers that delivering talking conversion therapy with the intention of changing a person's sexual orientation or changing them from being transgender or to being transgender either to someone who is under 18, or to someone who is 18 or over and who has not consented or lacks the capacity to do so should be considered a criminal offence. The consultation document describes proposals to introduce new criminal law that will capture this. How far do you agree or disagree with this?

On the banning of conversion therapy with the intention of changing a person's sexual orientation – **strongly agree**.

On the banning of 'conversion therapy' on the grounds of 'gender identity' – strongly disagree.

As regards 'conversion therapy' aimed at 'changing them from being transgender', WHRC is not in favour of any legislation that would criminalise therapists/healthcare professionals, or restrict their ability to support patients in resolving their issues.

#### Gender identity IS conversion therapy

The 'affirmation model' (where any person, including children of any age, claiming they are the opposite sex, or another 'gender identity' such as 'non-binary', are affirmed in that and offered medication and surgeries) of treatment for gender incongruence is conversion therapy in and of itself. The vast majority of children presenting with gender dysphoria will grow out of it if a watchful waiting approach is adopted and become comfortable with their birth sex<sup>3</sup>.

Many young people presenting at gender clinics will turn out to be gay or lesbians. Affirming their delusion that they are the opposite sex is conversion therapy. News reporting in 2019<sup>4</sup> showed that many Tavistock clinicians were concerned that children were being encouraged to claim a 'trans' identity by homophobic parents and parents who were abusive, with a disturbing interest in blocking their healthy children's puberty<sup>5</sup>.

#### **Converting young lesbians**

<sup>&</sup>lt;sup>2</sup> <u>https://www.persuasion.community/p/keira-bell-my-story</u>

<sup>&</sup>lt;sup>3</sup> https://www.telegraph.co.uk/politics/2018/09/16/minister-orders-inquiry-4000-per-cent-rise-children-wanting/

<sup>&</sup>lt;sup>4</sup> https://www.thetimes.co.uk/article/it-feels-like-conversion-therapy-for-gay-children-say-clinicians-pvsckdvq2

<sup>&</sup>lt;sup>5</sup> 'All the pushing was coming from the father to put the kid on puberty blockers. Thinking back on it now, I fear that the father was a paedophile and the child was being abused.' <u>https://www.thetimes.co.uk/article/it-feels-like-conversion-therapy-for-gay-children-say-clinicians-pvsckdvq2</u>

There has been a 4,000% increase<sup>6</sup> of girls being referred to the Tavistock. Most of these girls will grow up to be lesbians if supported by following a watchful waiting approach. Young lesbians report that it is currently very difficult to be a same-sex attracted female. Lesbian spaces are disappearing as they are colonised by males, lesbians face constant threat of homophobic abuse and sexual assault, there are very few lesbian role models and they are facing sexual coercion from men claiming a lesbian identity, as recently reported on by the BBC<sup>7</sup>. Many young women are claiming a trans identity in an attempt to escape the homophobia and objectification lesbians face – affirming that they are, in fact, heterosexual men, IS conversion therapy.

#### Gender identity as child abuse

It is impossible for a human being to change sex. Hormone treatment and surgeries can mimic some secondary sex characteristics, but any person undergoing those treatments can become only a poor imitation of the opposite sex. Most treatments offered to people claiming a trans identity (puberty blockers, exogenous hormones, mastectomy, orchiectomy, penile inversion, phalloplasty) cause significant harm and are largely experimental. Pretending that people, particularly children, can become the opposite sex through drugs and surgery is abusive.

In no other area of mental health medicine is a patient suffering any kind of dysphoric disorder, such as body dysmorphia, anorexia, bulimia, affirmed in the delusion that they really are what they think they are. Anorexics are not offered liposuction. Therapists should not pretend to children that they really are the opposite sex.

#### Influence of lobby groups

Powerful lobby groups such as Stonewall have been discovered to be exerting an enormous influence on government branches, statutory bodies, charities and corporation. Much of their language of gender ideology is found within this consultation and throughout government today. Legislation must not be led by lobby groups but decided by parliament, without shadowy attempts to change our language.

#### Effects on family life

Supportive parents who do not affirm their child as a member of the opposite sex must not be criminalised. Parents must be able to bring their children up as they see fit within the bounds of the law and to speak honestly to their children about the reality of biological sex.

#### Q3. How far do you agree or disagree with the penalties being proposed?

#### Strongly disagree

This consultation has failed to provide definitions of 'gender identity', 'transgender' and 'conversion therapy'. Without these, this legislation risks being so broad that anyone working in the field of 'gender dysphoria' risks criminalisation for exercising their normal duty of care towards patients. This also extends to teachers, social workers, youth workers, charity workers, parents and other family members who may face criminal prosecution for failure to affirm a child's 'gender identity'.

Some parents have already faced investigation from social services for failing to accept that their child is really the opposite sex – in countries such as Canada and Australia, children have been

<sup>&</sup>lt;sup>6</sup> <u>https://lesbianandgaynews.com/2021/02/keira-bell-calls-for-more-mental-health-support/</u>

<sup>&</sup>lt;sup>7</sup> https://www.bbc.co.uk/news/uk-england-57853385

removed from parents and parents even sent to prison<sup>8</sup>. Many parents who refuse to affirm a child's trans identity are seeking to protect them from being converted from gay to straight.

Children presenting with a trans identity must be protected from adults who have a gender ideology agenda and wish to convert them into thinking they have been 'born in the wrong body'.

#### Q4. Do you think these proposals miss anything?

Yes

#### If, yes, can you tell us what you think we have missed?

This consultation is biased towards the affirmation model and treats 'gender identity' as a fact throughout. It has not defined 'gender identity', 'transgender' or 'conversion therapy' and should be shelved until it has done so. Furthermore, the consultation has not included the following:

- A growing consensus that affirming a child is 'transgender' is conversion therapy in and of itself
- Any information or evidence of the harms caused by affirmative treatment
- Any input or testimonies from detransitioners
- The outcomes of the Cass review the consultation process should have waited for the Cass review to report
- Any consultation with women's groups or LGB groups on this legislation that will affect their rights

### Q5. The government considers that Ofcom's Broadcasting Code already provides measures against the broadcast and promotion of conversion therapy. How far do you agree or disagree with this?

#### Somewhat disagree

This consultation has not defined 'conversion therapy'. If broadcasters have been influenced by groups such as Stonewall they will already be biased towards the promotion of 'gender identity' which WHRC considers to be conversion therapy.

Conversion therapy aimed at changing a person's sexual orientation should never be promoted or advertised by broadcasters.

### Q6. Do you know of any examples of broadcasting that you consider to be endorsing or promoting conversion therapy?

Yes

#### If yes, can you tell us what these examples are?

Any output that aims to convince people that 'gender identity' is a fact is endorsing/promoting conversion therapy. There have been numerous examples of this including:

- 100 Genders (BBC Teach)
- I am Leo (CBBC)
- Just a Girl (CBBC)

<sup>&</sup>lt;sup>8</sup> https://www.dailymail.co.uk/news/article-8998207/Transsexual-teenager-removed-parents-judge-rules-parents-abusive.html; https://thevelvetchronicle.com/father-jailed-for-refusing-to-affirm-daughter-as-male

- First Day (CBBC)
- Butterfly (ITV)
- I am Jazz (TLC-USA, widely available in the UK)
- Jammidodger (Youtube) a young woman who claims a trans identity and promotes surgery, hormones and chest binders to other young women. Her resources are widely used in schools<sup>9</sup>

#### Q7. The government considers that the existing codes set out by the Advertising Standards Authority and the Committee of Advertising Practice already prohibits the advertisement of conversion therapy. How far do you agree or disagree with this?

The promotion of 'gender identity' constitutes conversion therapy aimed at convincing gay people they are straight. Despite this, 'gender identity' language permeates all policies of organisations such as the Advertising Standards Authority. Advertisements or promotion of 'gender identity' as a fact, particularly those aimed at children, should be forbidden.

### Q8. Do you know of any examples of advertisements that you consider to be endorsing or promoting conversion therapy? If yes, can you tell us what these examples are?

Promoting the concept of 'gender identity' is gay-to-straight conversion therapy. WHRC is aware of several examples of the promotion of harmful practices such as chest binding, that are attempts to convert lesbian women into 'heterosexual' men including cosmetics company, Lush, which is running a promotion of chest binders to young girls without their parents' knowledge.

## Q9. The consultation document describes proposals to introduce conversion therapy protection orders to tackle a gap in provision for victims of the practice. To what extent do you agree or disagree that there is a gap in the provision for victims of conversion therapy?

#### Somewhat disagree.

WHRC does not agree that conversion therapy protection orders should be provided for those who claim a trans identity. There is no evidence that children are being taken abroad for 'gender identity' 'conversion therapy'. Conversely, several children have already been taken abroad for hormone and surgical treatment to affirm their claimed identity, which WHRC regards as conversion therapy aimed at turning gay children straight.

Influential trans lobby organisations such as Mermaids and other charities are already offering advice and services to children without their parents' knowledge. Introducing such protection orders risks malicious applications from these organisations which would interfere with parents' rights to bring up their children as they see fit without interference from lobbying groups.

### Q10. To what extent do you agree or disagree with our proposals for addressing the gap we have identified?

Partially

#### Why do you think this?

There is no evidence that children claiming a trans identity are experiencing any 'conversion therapy'. On the contrary, many children who believe they are 'trans' will grow up to be gay or lesbian and treatment that affirms they are the opposite sex is conversion therapy itself.

<sup>&</sup>lt;sup>9</sup> https://www.youtube.com/channel/UCHSIA2JRC5PWvUX4SI8OrcA

Q11. Charity trustees are the people who are responsible for governing a charity and directing how it is managed and run. The consultation document describes proposals whereby anyone found guilty of carrying out conversion therapy will have the case against them for being disqualified from serving as a trustee at any charity strengthened. To what extent do you agree or disagree with this approach?

#### **Strongly disagree**

The Charity Commission already has the power to remove trustees who are behaving illegally. As we have mentioned repeatedly within this submission, this consultation does not provide a working definition of either 'gender identity', 'transgender' or 'conversion therapy' – without these, this legislation risks criminalising anyone working for a charity who operates a watchful waiting approach and could lead to malicious complaints against charities and their staff.

## Q12. To what extent do you agree or disagree that the following organisations are providing adequate action against people who might already be carrying out conversion therapy? (Police; Crown Prosecution Service; OTHER statutory service)? Why do you think this?

#### Somewhat agree

The police, CPS and other statutory organisations have been unduly influenced by trans lobby organisations. Many forces and the CPS, until recently, are members of Stonewall's Diversity Champions and Workplace Equality Index schemes. These organisations must withdraw from all biased schemes and training organisations before they will be able to apply the law fairly. They must not attempt to criminalise parents and healthcare professionals who do not affirm a child's claimed 'gender identity'.

## Q13. To what extent do you agree or disagree that the following organisations are providing adequate support for victims of conversion therapy? (Police; Crown Prosecution Service; OTHER statutory service)?

No

#### Why do you think this?

Mental health services for children and young people are inadequate. Although referrals to gender clinics can be rapid when a child declares a trans identity, people who have subsequently detransitioned have already been victims of conversion therapy. There is no support available for them at all.

It is not the role of the CPS or police to provide support to victims of conversion therapy and that should be left to qualified professionals.

#### Q14. Do you think that these services can do more to support victims of conversion therapy?

Yes

#### If yes, what more do you think they could do?

Detransitioners need help from the NHS to 'transition back' to their own sex, with mental health services offered for resulting trauma and medical help for the effects of conversion therapy (unnecessary surgeries and wrong-sex hormones.)

The NHS should be establishing sound record-keeping and tracking outcomes for those who have been subject to puberty blockers, wrong-sex hormones and 'affirming' surgeries in order to build a reliable evidence.

Organisations and statutory bodies that have been practising conversion therapy by promoting gender ideology and encouraging those who are gender non-conforming to announce a trans identity should cease immediately.

## Q15. Do you have any evidence on the economic or financial costs or benefits of any of the proposals set out in the consultation? If yes, please can you provide us with details of this evidence, including where possible, any references to publications?

Affirming 'transgender' identities, including lifelong hormones and experimental surgeries, places a significant cost burden on the NHS. As an increasing number of people seek to detransition back to their natal sex the NHS could also face significant extra cost<sup>10</sup>.

Pursuing a careful 'watchful waiting' approach comes at reduced cost to the NHS.

# Q16. There is a duty on public authorities to consider or think about how their policies or decisions affect people who are protected under the Equality Act 2010. Do you have any evidence of the equalities impacts of any proposals set out in the consultation? 32 Consultation Paper Questions related to privacy

Men should not be included in the protected characteristic of 'sex' by claiming a female 'gender identity'. This concept has already undermined women and girls' rights in many situations. Men who claim to be female must be excluded from women's spaces, opportunities and sports. Including them damages women and girls.

WHRC was set up to campaign against the replacement of the category of 'sex' with that of 'gender identity'. Our website (https://womensdeclaration.com/en/) contains significant quantities of published articles, news stories and reports from all around the world that show evidence of the harms caused to women and girls by including men in the category of 'women'. Our weekly webinars host women from all over the globe reporting on the damage done in their countries. Enshrining the concept of 'gender identity' into law as this legislation would do is deeply harmful to women and girls.

'Gender Hurts' by Sheila Jeffreys, WHRC Director [Routledge; 1st edition (15 April 2014), ISBN-10 0415539404, ISBN-13 978-0415539401]

'The Abolition of Sex: How the Transgender Agenda Harms Women and Girls' by Kara Dansky, WHRC USA President and Chair of the Laws and Legislation Committee [Bombardier Books (8 Nov. 2021), ISBN-10 1637582293, ISBN-13 978-1637582299]

<sup>&</sup>lt;sup>10</sup> https://thecritic.co.uk/issues/november-2020/transitioning-to-a-medical-scandal/; https://www.independent.co.uk/life-style/genderreversal-surgery-demand-rise-assignment-men-women-trans-a7980416.html; https://academy.siuurology.org/siu/2014/glasgow/59851/miroslav.djordjevic.reversal.phalloplasty.in.regretful.male.to.female.html