

# UK is the first country to scrap gender self-identification plan

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*Dr Carys Moseley comments on the government's announcement that it will scrap plans to introduce gender self-identification.*

The UK government has become the first government in the world to scrap its own plans to make changing gender easier. The press had published rumours that this would happen for many months. This is great news for all of us who campaigned to stop this dangerous step being taken.

It is also a huge blow to transgender activist groups such as Stonewall, Mermaids, Gendered Intelligence and GIRES.

This government U-turn has come after the previous Conservative government announced the plans in July 2018. That in turn followed on from the Transgender Equality Inquiry published by the Women and Equalities Committee of the House of Commons in June 2016. Just over four years after the non-stop media avalanche of transgender propaganda started, the campaign for legislating 'gender self-identification' has been defeated.

What does all this mean?

## **The present system will remain**

The government's announcement<sup>1</sup> makes it clear that the present system for allowing people to change gender will remain. This means people will still need a Gender Recognition Certificate and still need doctors' signatures to get one. This must still be based on a medical diagnosis of gender dysphoria. They will still need a medical report detailing treatment related to this. They will still need to prove that they have lived for two years or more in their chosen gender. The spouse or civil partner of a person who wants to change gender has to agree to this. Finally, anyone who intends to change gender has to make a statutory declaration saying they intend to live in their acquired gender until death.

The only changes that the government will introduce will be to digitise the process on its [www.gov.uk](http://www.gov.uk) website, and to reduce the fee from £140 to £5.

This has been very disappointing for transgender campaign groups. This is especially important given that Stonewall

produced an online form which allowed its supporters to respond using its template. The result was that the government was deluged with over 40,000 responses that were very similar to each other. Interestingly only a minority (8230) of Stonewall respondents were transgender people. We can see this from the government report's analysis of responses to question 1(a) of the consultation.

## **Three more gender identity clinics**

In her Written Statement to Parliament<sup>2</sup> on the decision, the Minister for Equalities, Liz Truss, put healthcare at the centre. She said that the consultation showed that for transgender people themselves, healthcare was the most important issue.

She said that three more gender identity clinics are planned. It is promised that this will reduce waiting times (a frequent complaint) as well as increasing the geographical health of transgender healthcare.

## **Christian support for de-transitioners acknowledged**

The government has also published a 184-page report on the consultation responses. The research for this was done by academics at the Business School and Social Science Department at Nottingham Trent University. Whilst there are questions to be asked about the accuracy and quality of this report, some things stand out as being of interest.

Christian organisations are the only ones referred to as expressing concerns about regret and de-transitioning. Christian Concern and the Evangelical Alliance are mentioned on page 49 in relation to the need for provision for regretters and de-transitioners. It remains to be seen which other respondents raised these issues.

## **Beware 'new' gender identity clinics**

The announcement of three new gender identity clinics follows an announcement made on 13 May this year<sup>3</sup> of three pilot clinics in England. The question now is, how can more gender identity clinics be justified? What psychological theories will underpin the work of these pilot schemes? The affirmation model that validates belief that one is 'born in the

wrong body'? Or a more reality-based approach that investigates the roots of people's confusion? Given that there is a professional ban on 'conversion therapy' in the UK, how much freedom would new and trainee psychotherapists have to explore the underlying problems?

Already for several years, there have been very few surgeons capable of doing gender reassignment in the UK. One suspects that this is why the government initially supported plans for gender self-identification; it would cost very little. Therefore, we must ask where the money for more surgeons will come from if the new gender identity clinics refer more patients for surgery. The NHS has been under huge pressure due to the Coronavirus Act prioritising coronavirus patients. There are huge backlogs for appointments for cancer patients, among others. Is the status quo sustainable?

### **True and false kindness**

Liz Truss struck a softer tone in saying she wanted the gender recognition process to be 'kinder' to people. James Kirkup noted on Twitter<sup>4</sup> that her timing was not an accident<sup>5</sup>. She made her announcement on the day that lockdowns will intensify. He thinks this means that the government is trying to bury the news amid the much wider concerns about coronavirus. It is desperate to avoid a culture war. Moreover, I would add that this is a government desperate to avoid close scrutiny of its handling of gender identity clinics.

Liz Truss' reasoning here is somewhat misplaced. It isn't the government's job directly to show people 'kindness'. Specifically, it isn't right for the government to continue to facilitate changing gender at all. Truss' predecessor Penny Mordaunt ordered an inquiry into the sudden high rate of teenage girls wanting to be boys. This was more on the right track in terms of shining a light on healthcare gone wrong. What government can and should do is to facilitate a framework for healthcare which allows true medicine and therefore true kindness to operate without obstruction. This means that placing healthcare at the centre needs to involve scrutinising the place of gender identity clinics within the NHS system. It also needs to involve revisiting treatment protocols that allow patients to bypass psychiatrists. Lastly as hinted above, there need to be new treatment protocols put in place to help de-transitioners and those who do not want to continue with

hormones and surgery. At present there are none. Indeed, there has been no treatment protocol in place for them since Charing Cross gender identity clinic first opened in 1966.

### **Withstanding pressure is possible**

The biggest lesson to be learnt from this announcement is that it is possible to withstand the massive pressure to normalise transgenderism. This U-turn has never happened in any other country in the world, let alone any western country. Interestingly journalists have not commented on this. There is probably a reason for this silence. The press in the UK has portrayed objections to gender self-identification as liberal, secular and feminist. When the press used to report on the trend towards self-identification, it used to list countries where this had happened, such as Malta, Canada and Argentina.

By contrast articles about the transgender debate in the UK never struck a comparison with countries that resisted, mostly in eastern Europe. Instead those were singled out for suspicion as havens of conservative reaction. For example Bulgaria has refused to ratify the Istanbul Convention, and Hungary has moved against legal gender recognition. In Poland the president vetoed a bill<sup>6</sup> for gender recognition. The government of Lithuania had previously refused<sup>7</sup> to accede to strategic litigation. In the UK the change came about due to successive Ministers for Equality being confronted with public concerns expressed via consultation.

### **'Soft law' problems remain**

That said, the status quo is hardly satisfactory. It is one thing to have halted legislation that would have made things worse. This was possible partly because people looked at what was happening in the USA and Canada. It is quite another thing to tackle the many instances of transgender ideology already being pushed in various sectors. This is why so many legal cases have emerged in the last five years.

What is needed now is for Christians to come together and articulate a vision of health and well-being for all of society. This must include healthcare, schools, higher education, criminal justice and more. It must address the roots of gender confusion, which include mass family breakdown, loneliness, child abuse, porn addiction and indoctrination and propaganda wherever they occur.

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- <sup>1</sup> <https://www.gov.uk/government/news/government-responds-to-gender-recognition-act-consultation>
  - <sup>2</sup> <https://www.gov.uk/government/speeches/response-to-gender-recognition-act-2004-consultation>
  - <sup>3</sup> <https://www.england.nhs.uk/commissioning/spec-services/npc-crg/gender-dysphoria-clinical-programme/>
  - <sup>4</sup> <https://twitter.com/jameskirkup/status/1308336556705538050>
  - <sup>5</sup> <https://www.spectator.co.uk/article/how-women-won-the-war-against-gender-self-id->
  - <sup>6</sup> [https://en.wikipedia.org/wiki/LGBT\\_rights\\_in\\_Poland#Gender\\_identity\\_and\\_expression](https://en.wikipedia.org/wiki/LGBT_rights_in_Poland#Gender_identity_and_expression)
  - <sup>7</sup> [https://en.wikipedia.org/wiki/LGBT\\_rights\\_in\\_Lithuania](https://en.wikipedia.org/wiki/LGBT_rights_in_Lithuania)