

Self-Declared Gender Identity: The Impact on Children and Adolescents

by Stephanie Davies-Arai, Transgender Trend

I would also like to express my thanks to David Davies MP for setting up this event and to everyone for attending. I will be speaking on behalf of parents of all political persuasions and I would like to express their gratitude too.

The parents I am representing are not the ones you see celebrated in the media. I speak for those who describe their experience as akin to having a son or daughter lost to a cult, with a devastating impact on siblings and on the family as a whole.

These parents are not bigoted, they are caring parents who would describe themselves as liberal and tolerant, parents who would always love and support their child no matter what the outcome.

I also speak to urge caution on behalf of the children of this generation who are caught up in the teaching of a new rigid, anti-science belief system presented to them as fact. [1]

If Gender Identity is established in law as a Protected Characteristic, it will apply to children of any age. But a child's identity is not fixed: it changes over time, and it is shaped by factors like parental approval and societal influences. If all trusted adults are reinforcing daily a little boy's belief that he is really a girl, this will have an obvious self-fulfilling effect. Puberty blockers supply the 'answer' to the created fear of a puberty he now believes to be the 'wrong' one.

Almost all children on blockers progress to cross-sex hormones at age 16. [2] Very few come off this path of increasingly invasive medical treatments once they are on it and so-called 'social transition' is the first step. This approach clearly works to prevent normal resolution of childhood gender dysphoria and foster persistence of opposite-sex identity.

While trans activists call for the de-medicalisation of 'transgender,' in the case of children they campaign aggressively for social transition, blockers and cross-sex hormones at ever earlier ages.[3]

The surge in sex hormones at puberty triggers the enormous changes in the teenage brain which don't complete their job until the mid-twenties. [4] The brain /personality is not fully-formed until then. The effects of blockers on adolescent brain development are unknown [5] although studies on adults, including men taking the drug for prostate cancer, indicate risk of memory loss, depression and cognitive impairment. [6] Recent reports from the US indicate long-term serious health effects for women who were administered blockers for precocious puberty, such as excruciating muscle and bone pain, depression, weakness and fatigue. [7]

Preventing a child's sexual development in early puberty, followed at 16 by cross-sex hormones, results in sterility as viable eggs or sperm have not developed. [8] These children are prevented from ever experiencing puberty: hormones can only superficially feminise or masculinise secondary sex characteristics, they cannot create the puberty of the opposite sex. Risks of cross-sex hormones include cardiac disease, high blood pressure, blood clots, strokes, diabetes and cancers. [9] Some

significant effects are irreversible, such as male-pattern baldness and body and facial hair, masculinised voice and compromised fertility.

There have been no clinical research trials into the long-term effects of this treatment on children: this is a non evidence-based practice [10] to treat a non evidence-based diagnosis of being 'a girl trapped in a boy's body' and vice versa [11] and this generation of children are the guinea pigs.

'Transgender' is an ideological label distinct from the clinical diagnosis 'gender dysphoria.' To call a child 'transgender' is to make both a claim that the child's feelings represent material reality and a prediction about that child's future: they will not change.

An analysis of all published research studies of children with 'gender dysphoria' shows that 80% will naturally come to be happy as the sex they were born [12] and this is true of even some of the most severe cases, we can't know which children will persist and which will desist.

Opposite-sex identity in childhood is overwhelmingly predictive of gay or lesbian sexual orientation in adulthood, not transsexualism. [13] Affirming a child's 'gender identity' can therefore be seen as gay conversion therapy by another name.

There has been an almost 1000% increase in children referred to the Tavistock clinic in London over the past 6 years. [14] These figures are inflated by the unprecedented rise in the number of girls - nearly 70% of the figure overall and over 70% of adolescent referrals last year. [15] By comparison, in the late Sixties 90% of adult transsexuals were male. [16]

We are aware that teenagers and young adults are susceptible to indoctrination, brainwashing and social contagion which is why we block online anorexia and self-harm sites. The internet, however, is chock-full of Tumblr bloggers and Youtube vloggers with hundreds of thousands of followers, who are selling vulnerable young people the myth of transformation through cosmetic alteration of their bodies, including amputation of healthy body parts, and a lifetime's dependency on powerful off label hormones.

Recent reports of girls' mental health indicate that girls and young women in the UK are in crisis. [17] Recently published evidence of the rate of sexual abuse and harassment in schools across the UK is a matter of national shame. [18]

Reports such as the recent Stonewall Schools Report [19] which indicate high suicidal ideation in 'trans' youth serve to cover up the fact that the vast majority of these youngsters will be teenage girls, now hidden in the category 'trans boys.'

A PSHE teacher and Head of Year at a large comprehensive told me that in her school the kids who identify as 'trans' are, without exception, either lesbian, autism spectrum, have mental health problems or have suffered sexual abuse.

Parents are also concerned about the relentless gender identity propaganda their children are subject to today - across the media, [20] the internet and in schools, through organisations such as GIRES, Gendered Intelligence, Mermaids and Educate and Celebrate. The belief that gender is an innate identity is taught to children as truth, with no alternative views offered, in contravention of the UN Rights of the Child.

The 'transition or suicide' trope is repeated endlessly, against all Samaritans guidelines. There is no evidence that children will commit suicide if their parents fail to support them in taking a medical pathway, but of course the threat terrifies parents into feeling they have to.

There are over 260 trans youth support groups across the UK [21], which provide the 'tribe' where our most vulnerable young people will be accepted, maybe for the first time, as long as they identify as trans. All transgender organisations advertise their support for 'gender non-conforming' youth, sweeping up all children who are 'different' and don't fit in.

These organisations claim to support 'diversity' but of course they do the opposite: a girl who rejects feminine stereotypes is transformed into a 'boy' who conforms to masculine stereotypes. Gender non-conformity is erased. Regressive and reactionary sex-stereotyping is being sold to young people as a progressive social justice movement.

To teach children that their 'authentic self' is something in their heads, split off from and in opposition to, the body, is to create gender dysphoria. Mind-body disassociation is recognised as a state of mental ill-health: in this case uniquely, it is presented as a normal variation and something to be celebrated. Mental health is based on being equipped to accept reality.

Since children have been taught that it is their 'gender identity' which makes them a boy or a girl and not their biological sex, calls to Childline from young people confused about their gender have doubled in a year - eight calls are now received every day from children as young as eleven. [22] The concept of 'gender identity' is clearly - and inevitably - causing mental health problems for young people.

Any child who suffers genuine gender dysphoria must of course be sensitively supported in schools and youth organisations. But teachers, professionals and other children cannot be asked to collude in the reinforcement of a child's belief which contradicts reality. Recognition of biological facts is not bigotry.

When girls are told that a male classmate is now a girl, their sense of their own reality is shattered. If a biological male is a girl, then it is not female biology which makes you a girl, it is something else. Girls must look to a male classmate to find out the invisible magic quality they need, and the boy is given the power to define what a girl is. We cannot predict the long-term practical or psychological effects on girls taught to deny their own biology, without the right to even define themselves correctly as the female sex.

If teenage girls must consent to a male classmate using their toilets and changing-rooms they learn that their boundaries may be violated and their consent is unimportant. Girls learn that they are not always allowed to say 'no.' This is grooming; lessons on the importance of consent become meaningless.

Girls who are coached at school into ignoring their own discomfort and intuition may go on to put themselves in risky situations with any man who claims to be a woman, out of fear of being seen as transphobic.

In the case of public swimming pool changing rooms a young girl cannot name a male with a penis as a man: voyeurism and indecent exposure cease to exist as crimes if a man claims to be a woman. Normal child protection protocols effectively become unlawful.

I urge ministers to vote against the implementation of self-declared gender legislation, pending full investigation into the operation of transgender youth organisations and the impact on children and adolescents, including the implications for child protection and safeguarding, especially for girls. Expert testimony from professionals, including experts in child and adolescent development and psychology, and specific feminist analysis on the impact on girls is essential.

What I typically hear from parents is:

"I feel like I'm going through a death of my child and everyone is just cheering her on. When I found your website I cried with relief."

But I am also contacted by young people themselves and I will end by quoting the most distressing message I received, from a young woman who asked simply this:

"Would you know how to get my body back? Would you know if anyone's yet sued their doctor?"

From: J P [mailto:wordpress@www.transgendertrend.com]
Sent: 17 June 2017 20:51
To: |
Subject: General message from transgendertrend.com

Name: J P

Email:

Comment: Would you know how to get my body back? Would you know if anyone's yet sued their doctor? Thank you.

References

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- [4] <https://science.howstuffworks.com/life/inside-the-mind/human-brain/teenage-brain1.htm>
- [5] <http://www.sciencedirect.com/science/article/pii/S2444866417301101>
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