

Dear Convener and Committee members,

We are writing to highlight several recent developments which we feel have significant bearing on the work of the Committee in considering a ban on conversion therapy.

The Cass Review published their [Interim Report](#) on 10 March 2022 on the standard of care for children and young people who are questioning their gender identity or experiencing gender dysphoria. While this relates to NHS England it vindicates many of the points we made in our [submission](#) to the Committee and it should be taken very seriously by policy makers in Scotland.

Unlike the sexual orientations of lesbian, gay and bisexuality, it is clear that those who present with gender-distress are a clinical group. The report highlights deficiencies in the current provision of NHS care where, as is the case in Scotland, the service is overwhelmed. There are several references to clinicians' concerns about the pressure to adopt an unquestioning "gender-affirmative" approach which is at odds with their professional training and is based on poor or non-existent evidence. Cass suggests there should be a fundamentally different service model involving holistic care that recognises the full range of support and treatment options available, and affirmation and medical transition may not be appropriate for most children.

We are particularly alarmed by the prospect of the Committee's recommendation of a conversion therapy ban that potentially criminalises any clinician, therapist, parent or teacher who does not affirm a child's declared gender identity, and who instead follows the Cass recommendation to respond with thoughtful, open-minded exploration that allows for other treatment options and alleviation of distress and body acceptance. It was remiss of the Committee to not hear evidence from [clinicians and therapists](#) working in this field who tell of the difficulties and pressures - including from transgender lobby groups - when trying to provide this care without automatically affirming. It was also extremely remiss not to hear from detransitioners, many of whom regret that their teenage transgender identity was affirmed with experimental medication and surgery when it is now apparent therapy to resolve trauma or accept homosexuality was more appropriate.

It is not clear what the Committee envisages in this area and certainly it is the [written view](#) of Stonewall Scotland, Equality Network, Scottish Trans Alliance and LGBT Youth Scotland that gender identity is innate and any therapy should be restricted to helping a child understand and accept their gender identity. That they appear to have shifted somewhat to redefining "affirm" as slightly more in line with "neutral" when giving [oral evidence](#) to the Committee is of little comfort when all these organisations continue to affirm and encourage a child's belief that they are the opposite sex throughout the guidance they provide to schools and councils. The [guidance](#), produced in conjunction with the Scottish Government, [supports](#) social transitioning of children as young as four years old, with teachers directed to ask them for their new name and pronouns. Indeed, LGBT Youth Scotland will [only issue](#) a Charter Award if schools agree to keep this information secret from parents.

Requiring teachers to affirm a gender identity on pain of breaking the law forces them into an active intervention which may not be in the child's long-term best interest. The Cass report states clearly that social transition is not a neutral act: "It is important to view [social transition] as an active intervention because it may have significant effects on the child or young person in terms of their psychological functioning."

Issues not explored in the interim report but are due for further discussion include the role of schools and how they respond to gender-distressed children, the interaction with sexuality and the problems faced by detransitioners.

It is abundantly clear that politicians must wait for the review's final findings before taking any action to legislate in this area. The best way to support young people experiencing gender distress has not yet been determined, and the influx of a new patient group, namely teenage girls, has not been adequately explored. It may well be the case that the independent analysis reaches the same conclusion as [Sweden](#) and [France](#), who have both recently called a halt to gender affirmation treatment.

In 2021 the Scottish Government [said](#) it would "closely consider" the findings of the Cass review and we call upon the Committee to uphold this commitment and pause any further action until such time as there is clarity on best practice.

Kind regards,

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