

LGB Alliance submission to Ending conversion practices in Scotland: consultation

Annex A: Questions

Question 1

Do you support our approach to defining conversion practices which focus on behaviour motivated by the intention to change or suppress a person's sexual orientation or gender identity?

No

Question 2

Please give the reason for your answer to Question 1.

The approach is misguided and incoherent. It is predicated on a belief in concepts that are disputed and open to subjective interpretation. Who is to determine whether someone's behaviour is motivated by a particular intention? How is anyone to defend himself or herself against such an allegation? Above all, what does "gender identity" mean? The Bill does not even attempt to define it. This is perhaps unsurprising since no non-circular definition has ever been proposed. The underlying assumption appears to be that of gender self-identification – the introduction of which has already failed, and which is therefore not the law in Scotland. We see this Bill as an attempt to reintroduce the concept of gender self-ID by other means.

First, a few words on gay conversion practices

Seeking to change or suppress a person's sexual orientation – what was once called "gay conversion therapy" – is wrong. It is not only cruel but ineffective. The Scottish Government rightly states that such efforts are "damaging and destructive acts." You cannot change who a person is sexually attracted to, and no one should bring pressure to bear on someone in a deluded attempt to change their sexual orientation. However, it is unclear why a ban on gay conversion practices is needed, since all cruel and coercive acts of this kind are already illegal.

At the heart of this Bill, in the view of LGB Alliance, is a desire to criminalise those who reject the belief that self-defined "gender" takes precedence over sex and who wish to help distressed young people accept their bodies and their sexual orientation. **LGB Alliance views this as a pernicious project that harms lesbian, gay and bisexual teenagers – and with cruel irony actually promotes gay conversion practices – and we will explain at length why we reach this conclusion.**

Gender identity conversion practices

What does the Bill seek to end, in banning "practices which aim to change or suppress a person's gender identity"? Without a clear definition of "gender identity", individuals are left to interpret what such a ban would mean according to their own understanding of "gender identity" – and indeed their own interpretation of whether certain acts constitute "conversion practices" or not. This in itself should be enough to reject the Bill in its entirety. However, it is important to place it in what we believe is the essential context.

Besides our objections to the lack of definitions, and the ample scope for subjective interpretation, we need to explain why the criminalisation of forms of talking therapy, as proposed, would be a frontal assault on the interests of LGB teenagers. We will also comment on the highly biased sources on which the Bill relies.

It is our view that the Bill proposes a solution to a non-existent problem. It posits that there is a widespread problem with people taking actions intended to change or suppress a person's "gender identity". The "solution" proposed by the Scottish Government involves changes to language usage (substituting *gender* or *gender identity* for *sex*), and to Scotland's laws (criminalising normal therapeutic and family interactions), and – most worrying of all – it involves the removal of critical safeguarding measures for those children and young people who are most at risk from what we refer to throughout this response as **"gender identity theory" – that is, the belief that everyone has a gender identity that may differ from, and that overrides, their natal sex.**

We are particularly concerned about "conversion practices" described in relation to talking therapy. It is essential to understand that many of the teenagers, especially girls, who are being referred to gender clinics, mistake their homosexuality for a gender identity issue. We know that an exceptionally high percentage of teens referred to gender clinics have same-sex sexual orientation – so much so that clinicians at the Tavistock GIDS clinic in London joked: "Soon there will be no gay kids left". Data reported by GIDS reveal that teenage patients expressing a sexual orientation were overwhelmingly homosexual or bisexual. 67.7% of adolescent female patients were recorded as being attracted to other females only, 21.1% were bisexual, and only 8.5% were listed as heterosexual. Among adolescent male patients, 42.3% were attracted only to other males, 38% were bisexual, and only 19.2% said they were attracted only to females. (See <https://www.cambridge.org/core/journals/bjpsych-bulletin/article/sex-gender-and-gender-identity-a-reevaluation-of-the-evidence/76A3DC54F3BD91E8D631B93397698B1A>; Holt V, Skagerberg E, Dunsford M. *Young people with features of gender dysphoria: Demographics and associated difficulties. Clinical Child Psychology and Psychiatry. 2016;21(1):108-118. Doi:10.1177/1359104514558431*). One whistleblower explicitly referred to the institutional homophobia at the GIDS in his exit interview. Furthermore, the BBC Newsnight reporters Hannah Barnes and Deborah Cohen reported that homophobia was a factor in *all* the families they spoke to. In our view, the medicalisation of largely LGB, "gender non-conforming" teenagers is the greatest medical scandal of our age. The Scottish Government presents its Bill as progressive and caring. We say it is the opposite. The Bill is homophobic at its heart and strikes a mortal blow at the interests of lesbian, gay and bisexual people, eroding rights that have been painstakingly advanced over the past half-century.

Sources invoked as experts

We noted the individuals and groups that were consulted and have played a key part in the development of this Bill.

First, the Minister for Equalities, Emma Roddick, quotes the former United Nations Independent Expert on Sexual Orientation and Gender Identity, Victor Madrigal-Borloz, in her introduction to the consultation document. She goes on to mention New Zealand, Canada, Germany and the Australian state of Victoria, who have all imposed bans on conversion practices. The Minister fails to note that Mr Madrigal-Borloz (now thankfully at the end of his term and replaced) is a hugely controversial trans rights activist who has been subject to complaints about his bias from across the world. Although his mandate embraced both sexual orientation and gender identity, he focused exclusively on the latter and promoted gender self-ID tirelessly throughout his term – against the interests of LGB people, women and children.

The "Expert Advisory Group" appointed by the Scottish Government again reads like a list of gender identity activists –

- Blair Anderson, lived experience
- Dr Paul Behrens, University of Edinburgh
- Pritpal Bhullar, Sarbat LGBT+ Sikhs
- Very Reverend Dr Susan Brown, Church of Scotland
- Dr Mhairi Crawford, LGBT Youth Scotland
- Dr Rebecca Crowther, Equality Network
- Richy Edwards, lived experience
- Dr Amber Keenan, NHS Grampian
- Reverend Jide Macaulay, House of Rainbow
- Colin Macfarlane, Stonewall Scotland
- Reverend Elder Maxwell Reay, Metropolitan Community Church
- Dr Igi Moon, MoU Coalition Against Conversion Therapy
- Florence Oulds, Scottish Trans
- Hannah Winter, lived experience
- Luis Felipe Yanes, Scottish Human Rights Commission

The Equalities, Human Rights and Civil Justice Committee heard from two academics from Victoria, Australia, where some of the most extreme legislation has been passed – including removing *sex* from the definition of same-sex sexual orientation and replacing it with *gender*.

While the Committee heard from four religious organisations who had “expressed concerns” they took no evidence either from clinicians or psychotherapists or parents’ groups or LGB or women’s groups who have strong reason to oppose such legislation. Why is that?

Where are the voices of those who believe strongly that no Bill is needed and have the arguments to substantiate this? Where is the political balance?

Countries listed as laudable examples: the “trptych”

It is worth looking at the countries and states that Minister Roddick lists as laudable examples. All have introduced, or are seeking to introduce, three specific types of legislation – which we refer to as the gender identity “trptych” – to replace *sex* with *gender* in law, to outlaw talking therapy and parental guidance for gender-distressed teenagers, and to ban any criticism of gender identity theory under the guise of “hate crime”.

More specifically, this “trptych” of legislation consists of:

1. **Gender self-ID laws**
2. **Bans on so-called conversion practices**
3. **Hate crime laws**

Scotland is attempting to emulate these countries and states in imposing this triptych of legislation.

- The Scottish Government tried but failed to introduce gender self-ID. Public outrage at the detention of the rapist Isla Bryson in a women’s prison is still reverberating today. Fortunately, Section 35 of the Scotland Act was invoked to prevent the proposed Bill entering into effect.
- The Hate Crime Act that comes into effect on 1st April is already making Scotland look like a McCarthyite state.
- The proposed ban on “conversion practices” now out for consultation, may well be passed by a legislature with a record of ignoring both evidence and public opinion.

Source documents

The source documents used for the Bill are predictably poor in the sense that they represent a single point of view – how does that promote a balanced consultation process?

- The 2018 LGBT Action plan has long been dismissed as utterly irrelevant as the data were collected by Stonewall and others at random Pride festivals.
- The 2021 Cooper report, though well-meaning, lacked balance and omitted any discussion of the concerns emerging from the Tavistock GIDS. The signatories included a range of gender identity activists: Susie Green, ex CEO of Mermaids (NB Mermaids is now subject to a statutory inquiry by the Charity Commission), Nancy Kelley, ex CEO of Stonewall (fired by the Chair of Trustees Iain Anderson), Jayne Ozanne (whose life is dedicated to outlawing conversion practices on the basis of her own experience many decades ago), and several other high-profile activists. The report was never going to be impartial.
- The 2022 report of the Equalities, Human Rights and Civil Justice Committee on conversion therapy displayed the lack of rigour and pre-determined conclusions demonstrated throughout their “scrutiny” of the failed GRRB. As noted above, the Committee heard from a range of LGBT organisations and individuals including those who have made it their life’s work to promote such a ban, such as Jayne Ozanne and Igi Moon. It made no attempt to seek a full range of opinions.

The report of the EHRCJ Committee

One of the least edifying facts about the Committee’s report is their agreement with Igi Moon that no more research into the subject is needed. (See Report on Petition PE1817: End Conversion Therapy, para 113: <https://bprcdn.parliament.scot/published/EHRCJ/2022/1/25/8c18e05c-08ab-4c7d-992b-4b0467541d70/EHRCJS062022R1.pdf>)

The reason this is such a dereliction of duty is that:

- 1) Neither the EHRCJ Committee nor the Scottish Government – nor indeed any other group – has provided any evidence that conversion practices are a current problem or are not already prohibited under existing legislation. In paragraph 73 of the Consultation Document, the Scottish Government states: “some forms of conversion practices will already fall within existing criminal offences” and in paragraph 74 that “our analysis has shown that not all types of conversion practices can be addressed by existing offences. For example, talking therapy or coaching someone to change or suppress their sexual orientation of [sic] gender identity are unlikely to be prosecutable under the existing criminal law.” In other words the Scottish Government seeks to introduce “**new criminal offences**” to outlaw the very talking therapy that Cass and others say is essential in the treatment of children and young people. This is incomprehensible and shameful.
- 2) Other countries including England, France, Denmark, Finland, Sweden and even the Netherlands – the home of the “Dutch Protocol” of medicalising children and teenagers – are all looking again at the need for further research and more talking therapy rather than less! Why is the Scottish Government seeking to mandate the opposite approach – thus taking a retrograde step – in this Bill?

Language

The introduction to the Consultation states at para 13: “Throughout this document, we have chosen to use the term LGBTQI+ (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, plus) except when referencing the work of others where different terminology has been used.” As lesbian and gay campaigners, we reject this forced teaming of LGB with other groups that have completely different issues. Lumping us together with those other groups has the effect that our interests are obscured or

overlooked altogether. Where will our voices be heard? We know our history and we know that we and other homosexuals who came before us have had to fight hard for our rights. We will continue to explain that homosexuality and bisexuality are about sexual orientation. TQ+ identities have nothing to do with sexual orientation – so why has the Scottish Government treated all these disparate groups as a collective? The letter “I” refers to sex-specific medical conditions, and its inclusion is even more bizarre. Labels such as non-binary and asexual are likewise unrelated to same-sex sexual orientation. Lastly – as noted above – the Scottish Government has failed to define the central term of “gender identity”, without which the entire Bill is meaningless and based on entirely subjective beliefs and interpretations.

Our organisation LGB Alliance will defend and promote the rights of homosexuals and bisexuals and we will not stand by while attempts are made to erase us and – more importantly still – put young gays and lesbians at risk – as this legislation will do if passed.

Question 3

Do you think that legislation should cover acts or courses of behaviour intended to ‘suppress’ another person’s sexual orientation or gender identity?

No

Question 4

Please give reasons for your answer to Question 3.

As stated above, we do not believe any evidence has been given for the need for legislation on this matter. Indeed, if conversion practices were a pressing issue, why did Stonewall never mention this as a campaign priority during all the battles for equality up to 2015? Why was it only discussed after Stonewall abandoned its long and successful commitment to protecting and promoting the rights and interests of people with same-sex sexual orientation, changing tack to the promotion of gender identity theory? The reason is very simple – there is zero evidence to suggest that a ban is needed. Ask any gay man or lesbian in the street and they will tell you. It is only those who seek to impose their belief in gender identity theory on society who see this as a priority.

The 78-page document from the Scottish Government on the consultation is remarkable in its lack of any data whatsoever to back up the case for a ban.

We note that Igi Moon of the Memorandum of Understanding on Conversion Therapy Coalition is on your “Expert Advisory Group”. The Memorandum of Understanding defines exploratory psychotherapy as a kind of conversion therapy. It also minimises age boundaries and safeguarding issues within therapy. (See recent article by the therapist Peter Jenkins, <https://www.transgendertrend.com/wpath-mou-gender-ideology-uk/>)

This is in direct opposition to the Cass Review interim report, which highlighted that talking therapy is essential in the treatment of confused children and young people, and yet here we see it is described as potentially criminal. Cass also states that **safeguarding is everyone’s responsibility**, while Igi Moon rejects this view.

All therapists will have to think very carefully about accepting any child with gender issues as a client if this is enacted – why would they put themselves at the risk of prosecution when doing their job?

Accusations may be made with no foundational basis – but who would be believed? Therapists in Victoria, Australia – where such legislation is in place – now avoid taking on such clients for this reason. The consequence is that distressed children and young people are deprived of vital mental health care. Whose interests would that serve?

The section on suppression is as weak as the rest of the document and appears to seek to criminalise normal family interactions. Paragraph 50 of the document gives examples of the types of acts that could be “intended to suppress another person’s sexual orientation or gender identity”. These include:

- Controlling a person’s appearance (e.g. clothes, make-up, hairstyle)
- Restricting where a person goes and who they see

How many parents do NOT comment on the appearance of children or restrict where they may go? Isn’t this part of normal parenting – and making sure children are safe? To include these acts as potentially criminal seems to be even less sensible than most of the other proposals.

Question 5

Do you support or not support an approach which uses a package of both criminal and civil measures to address conversion practices in legislation?

Do not support

Question 6

Please give reasons for your answer to Question 5.

LGB Alliance does not support either criminal or civil measures “to address conversion practices in legislation” for one simple reason:

There is no evidence of any need whatsoever for this legislation.

In our view, this Bill is a deceitful proposal, designed as part of a triptych of legislative proposals, as described above, to get “gender identity” onto the statute book. This is directly harmful to homosexuals as it erases homosexuality by replacing *sex* with *gender*. We have explained this many times and will do so again and again until our voices are heard.

Question 7

What are your views on the proposal that the offence will address the provision of a service?

Do not support

Question 8

Please give reasons for your answer to Question 7.

The Scottish Government evidently seeks to outlaw talking therapy for distressed children and teenagers presenting with “gender identity” issues. It seeks to reassure parents and religious leaders that they will be exempt from prosecution. However, “these situations fall within the legislation if they form part of a coercive course of behaviour” – para 98. It does not explain how it is to be assessed whether they do or do not “form part of a coercive course of behaviour” in the event of a disagreement.

It lays out three new criminal offences in para 77:

- 1) The provision of a service
- 2) A coercive course of behaviour
- 3) Taking someone out of Scotland for conversion practices

The consultation document proposes two diametrically opposed statements on page 30, paras 92 and 94:

- “We do not wish to interfere with the provision of medical or psychological care that is conducted ethically by a healthcare professional.”
- “Specifically, the types of acts that would be considered a service for this part of the offence will include (where it is intended to change or suppress an individual’s sexual orientation or gender identity):
 - Counselling or any other form of talking therapy
 - Coaching or instruction
 - A purported treatment”

It will be clear that the word “ethically” and the phrase “intended to change or suppress” will be interpreted differently by believers in gender identity theory than by those who believe it is in the best interests of a child to explore why they have come to think they are the opposite sex.

Once again, we see Scotland turning its back on the conclusions of the interim report from the Cass Review, which emphasises that most children with gender-related distress find that this resolves with the passage of puberty, and that talking therapy is exactly what gender-distressed children and young people need most. We recall the words of Dr David Bell, Consultant Psychiatrist in the Adult Department at the Tavistock and Portman NHS Foundation Trust. On the PM programme of 13 March 2024, he stressed that “**gender dysphoria is a symptom**” and that most children and young people will desist. (See <https://www.bbc.co.uk/sounds/play/m001x4l9>)

We believe the intention and the impact of this section is to outlaw any attempt to engage in the kind of actions that Dr Bell and Dr Cass recommend. That is, in the full exploration of gender confusion by qualified therapists who understand that children and young people need help, not a predetermined conclusion, driven by gender identity zealots who promote the unscientific and unsubstantiated view that there are “trans” children. As Dr Bell noted pointedly – there are not.

The proposals would be most damaging to teenagers with – in some cases suppressed – same-sex sexual orientation. As we have noted above, these make up the vast majority of youth referrals to gender clinics.

Question 9

What are your views on the proposal that the offence will address a coercive course of behaviour?

Do not support

Question 10

Please give reasons for your answer to Question 9.

This does nothing to clarify the nature of the new crimes. The “non-exhaustive” list of “coercive behaviour” in paragraph 104 includes “acts that are:

- violent, threatening or intimidating
- controlling of the victim’s day-to-day activities
- manipulative or pressuring the victim to act in a particular way
- frightening, humiliating, degrading or punishing of the victim”

Some of these acts would already be considered illegal, some are normal aspects of parenting and safeguarding, and others would be very difficult to prove in a court of law. While paragraph 105 references the application of a degree of force, this would also be hard to prove or to disprove. This section serves no useful function.

Question 11

What are your views on the requirement that the conduct of the perpetrator must have caused the victim to suffer physical or psychological harm (including fear, alarm or distress)?

Do not agree

Question 12

Please give reasons for your answer to Question 11.

Para 111 states “Courses of behaviour that do not cause harm will not be criminalised”.

This is a ludicrous statement and far from reassuring. Again, a word is used that depends entirely on subjective interpretation. A girl who is convinced she is a boy may say that she experiences any exploration of this conviction – whatever the professional judgment of a psychotherapist – as harmful. Para 94 of this Bill seeks to outlaw any kind of talking therapy that is defined in certain ways by the client. But talking therapy is a perfectly normal way of assisting children and young people with gender distress – which cannot be shown objectively to cause harm. Three pages later it is stated that should no harm be caused, then no offence has taken place.

The Scottish Government is confused and confusing and should withdraw this ill-thought-out Bill before it goes any further.

Para 118 makes clear that the Scottish Government welcomes what WPATH (World Professional Association for Transgender Health) calls “gender-affirming care” and excludes any such affirmation from criminalisation. Draft Section 4 states that:

“For the avoidance of doubt, examples of behaviour being engaged in without the intention mentioned in section 1(2) include

(a) the provision, by a healthcare professional in the course of employment as such, of healthcare, including -

(i) medical treatment intended to align person B's physical characteristics with person B's gender identity

(b)

(i) affirms a sexual orientation or gender identity which person B considers is (or may be) person B's sexual orientation or gender identity"

This is perhaps the most shocking part of the Bill – since it exempts from criminalisation precisely the kind of action that has been shown to cause actual, objective harm, in the form of later regretted infertility, beard growth, deep voice, lack of sexual function, and numerous increased risks to mental and physical health. The Scottish Government appears to be unaware of the accumulating evidence of systematic reviews and the emerging conclusion that WPATH and others who promote “gender-affirming care” as practitioners of “quack medicine”. (See <https://www.thetimes.co.uk/article/the-times-view-on-treating-gender-with-drugs-quack-medicine-8z6tv5nf3>.)

The Scottish Government appears to be set upon its path, oblivious to evidence growing around the world that gender-affirming care is seriously harmful for children and young people. LGB Alliance believes that this section is an example of what we have termed “transing away the gay”. This Bill, if passed, would outlaw normal talking therapy for young people attracted to others of the same sex, who have mistaken their emerging sexual orientation as “gender identity” issue. It would encourage the belief that “gender non-conforming” children or teenagers may have been “born in the wrong body”. “Gender-affirming care” is at the heart of a growing global medical scandal – and here we have the Scottish Government enabling and encouraging it.

Question 13

Do you agree with the inclusion of a defence of reasonableness?

Do not agree

Question 14

Please give reasons for your answer to Question 13.

Given our rejection of the woolly definition of “conversion practices”, which is left open to subjective interpretation, and the inherently subjective nature of the notion of “reasonableness”, we consider this provision irrelevant.

Question 15

Do you agree with the proposed penalties for the offence of engaging in conversion practices?

Do not agree

Question 16

Please give reasons for your answer to Question 15.

Given our rejection of the woolly definition of “conversion practices”, which is left open to subjective interpretation, we reject the proposed penalties out of hand.

Question 17

Do you agree that there should be no defence of consent for conversion practices?

No

Question 18

Please give reasons for your answer to Question 17.

Given our rejection of the woolly definition of “conversion practices”, which is left open to subjective interpretation, we reject this proposal out of hand.

Question 19

Do you have any other comments regarding the criminal offence as set out in Parts 8 and 9?

Parts 8 & 9 confirm that the Scottish Government has chosen to ignore the growing body of evidence that “gender-affirming care” is both harmful and in many cases homophobic. How is it possible that while England (and many other European countries) have taken the lessons of the interim report from the Cass Review on board and await the final report with interest, Scotland’s Government seeks to outlaw Cass’s main recommendation for gender distressed children and young people – talking therapy.

The fact that the Scottish Government would go so far as to imprison those who would follow the advice of Dr Hilary Cass and many others shows it to be an institutionally homophobic organisation whose ideological beliefs are driving a course of action that will harm children and young people. The Scottish Government has placed ideology – that is, a firm belief in gender identity theory – above both science and safeguarding.

Question 20

What are your views on it being a criminal offence to take a person out of Scotland for the purpose of subjecting them to conversion practices?

Do not support

Question 21

Please give your reasons for your answer to Question 20.

Given our rejection of the woolly definition of “conversion practices”, which is left open to subjective interpretation, we reject this proposal out of hand.

Question 22

What are your views on the proposed penalties for taking a person outside of Scotland for the purposes of conversion practices?

Do not support

Question 23

Please explain your answer to Question 22.

Given our rejection of the woolly definition of “conversion practices”, which is left open to subjective interpretation, we reject this proposal out of hand.

Question 24

What are your views on the proposal that conversion practices should be an aggravating factor for existing offences?

Do not support

Question 25

Please explain your answer to Question 24.

Given our rejection of the woolly definition of “conversion practices”, which is left open to subjective interpretation, we reject this proposal out of hand.

Question 26

Do you have any views on the steps we have taken to ensure the proposals are compatible with rights protected by the European Convention of Human Rights?

Whatever steps have been taken are clearly insufficient, since several legal experts advise that this Bill would be incompatible with human rights in general terms.

As far as the ECHR is concerned: The Bill breaches Article 8 (the right to respect for family life) and Article 10 (the freedom of expression of therapists as they perform their work to the best of their ability).

Given the subjective nature of “conversion practices” in the context of psychotherapy, those seeking to malign someone would have free rein to do so. We have already seen one example: a person accused the psychiatrist Dr Az Hakeem of conversion therapy and medical malpractice. While these accusations were so wild that the GMC did not even investigate them, the Bill would have a chilling effect on therapists seeking to carry out their professional activities. (See <https://sex-matters.org/posts/healthcare/conversion-therapy-or-just-therapy/>)

The Bill would also breach Article 6 of the ECHR: the right to a fair trial. The entire Bill is predicated on the belief in universal gender identity. Again, this belief is hotly contested throughout society. It is akin to a religious belief. How ironic that this Bill eliminates the offence of blasphemy in the traditional sense and replaces it with what is in effect a new ban on the expression of dissenting views. A 21st- century blasphemy law designed by the Scottish Government.

Question 27

What are your views on the purposes of the proposed conversion practices protection order?

Do not support

Question 28

Please explain your answer to Question 27.

Another example of a draconian and unnecessary provision. Even a third party (with leave of the court) could apply for an order “to protect an individual at risk”.

Question 29

Do you agree or disagree with the proposals for who should be able to apply for a conversion practices civil order?

Do not agree

Question 30

Please explain your answer to Question 29.

As above –

Another example of a draconian and unnecessary provision. Even a third party (with leave of the court) could apply for an order “to protect an individual at risk”.

Question 31

Do you have any other comments regarding the civil order as set out in Parts 13 – 15?

Yes – it is draconian and unnecessary.

Question 32

Do you have any views on the potential impacts of the proposals in this consultation on equality by:

- a) Age
- b) Disability
- c) Gender reassignment
- d) Civil partnership
- e) Pregnancy and maternity
- f) Race
- g) Religion and belief
- h) Sex

i) Sexual orientation

All members of society are damaged when a government takes ideological beliefs, rather than proven facts, as its starting point for drafting legislation. The primary responsibility of any government is to protect the population. This Bill does the opposite. It is premised on a controversial belief and an uncorroborated assertion:

1. That universal gender identity exists
2. That there is a serious problem with conversion therapy taking place in Scotland today

It provides no evidence for either. The first is a belief that is widely contested, and the second is an assertion for which no evidence is provided. By proceeding on this basis, the Scottish Government is damaging its credibility among the electorate.

The “potential impacts of the proposals in this consultation on equality” for sexual orientation are enormous. We have stated throughout this response that the promotion of gender identity ideology is especially harmful to children and young people who do not conform to gender stereotypes. The data we have show that the majority of children and young people referred to gender clinics are same-sex attracted. Systematic reviews on approaches to gender dysphoria among young people that have been conducted by European clinicians now favour precisely the kind of exploratory therapy that some – such as Igi Moon and the “Memorandum of Understanding on Conversion Therapy Coalition” – would wish to characterise as “conversion therapy/practices”. Tavistock whistleblower clinicians, the Minister for Equalities Kemi Badenoch, and others have expressed concern that what is euphemistically called “gender-affirming care” can sometimes amount to “transing away the gay”. In other words, far from protecting young people, this Bill would expose them to further harm. The legislation proposed is regressive, ill-conceived and dangerous – and it will cause irreparable damage to many young people. We believe that many aspects of this Bill are essentially homophobic. In consequence, the entire Bill should be withdrawn.

Question 33

Do you have any views on the potential impacts of the proposals in this consultation on children and young people, as set out in the UN Convention on the Rights of the Child?

As per previous answer.

Question 34

Do you have any views on the potential impacts of the proposals in this consultation on socio-economic inequality?

N/A

Question 35

Do you have any views on potential impacts of the proposals in this consultation on communities on the Scottish islands?

N/A

Question 36

Do you have any views on the potential impacts of the proposals in this consultation on privacy and data protection?

N/A

Question 37

Do you have any views on the potential impacts of the proposals in this consultation on businesses and the third sector?

N/A

Question 38

Do you have any views on the potential impacts of the proposals in this consultation on the environment?

N/A

Questions on the Consultation itself:

Response:

This consultation is appalling in so many ways. So many questions when so few are necessary. All the Scottish Government needs to ask itself and answer are:

how many sexes are there?

is sex immutable?

how do we ensure children are safeguarded to the maximum so that they grow up to be healthy adults?

how do we take special care to ensure gender non-conforming children who may be gay or lesbian in later life can grow up and flourish without homophobia and without any trans activist telling them that they "may have been born in the wrong body"?

how can we prevent unnecessary medicalisation of gender non-conforming children in the NHS or private clinics?

how can we close down the Sandyford clinic and replace it with talking therapy for the same-sex attracted and autistic children referred there?

Once these questions are answered using evidence based arguments this Bill will be seen as not only superfluous but damaging in intent and content. It must be recognised as a trans activist document which seeks to "trans away" lesbian and gay young people and be dropped by the Scottish Government as soon as possible.