Transgender Children and Young People
Transgender Children and Young People:

Born in Your Own Body

Edited by
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and Michele Moore

Cambridge Scholars Publishing
This book is dedicated to children living with gender confusion.
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GenderCriticalDad

I’m a middle of the road middle aged dad trying to keep my daughter safe. Lefty liberal newspaper reader, organic eggs and chicken, equal shares sort of dad. I earn my living making machines doing stuff for people, fixing their machines when they don’t work. My daughter is being damaged by transgender dogma. I hate what it’s doing to her, but I love her. As I cannot critique transgender dogma without harming her I write anonymously. I write a blog http://gendercriticaldad.blogspot.co.uk which gained far more attention than I ever imagined possible. It grew in to http://gendercriticaldad.blogspot.co.uk/2017/ which has details of a support board for parents of gender dysphoric children and young adults I helped set up with https://4thwavenow.com. I readily admit to shamelessly stealing ideas from Gender Critical Radical Feminism. You can follow me on Twitter @dad_gc

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Robert Withers
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Seventh Penis, which described some of the difficulties of working psychotherapeutically with people who identify as transgender, recently won the Michael Fordham prize. He also compiled, edited and contributed to the book Withers, R. (Ed.) (2003) Controversies in Analytical Psychology Routledge Hove and New York. You can follow Bob on Twitter @BobWithers52
People who are broadly liberal and tolerant of gender diversity often fiercely defend adult transgenderism as progressive, even revolutionary. In this view, acceptance of transgenderism means not only support for transgender individuals but for the rights of all gender non-conforming people who belong to the LGBTQI community. Transgender activists who work to normalise transgenderism are admired as bravely working to help steer society away from lingering, old-fashioned bigotry towards the tolerance of ‘difference’ and acceptance of ‘gender fluidity’.

By extension, it is assumed that the practice of transgendering children is equally progressive. It is argued that transgender children are transgender adults in the making whose ‘true’ ‘gender identity’ is belied by their external genitalia. For example, a girl can reside in a boy’s body, and a boy can be ‘trapped’ in a girl’s body. From this perspective, transgender children have always existed, but have hitherto been denied human rights and social recognition. Nowadays, medicine, social policy, and the law endorse this understanding of ‘the transgender child’. Children who do not conform to gender stereo-types and are uncomfortable with their assigned gender are diagnosed as suffering from ‘gender dysphoria’ – being unhappy in the born body. Gender dysphoria is an alleged medical diagnosis whose treatment includes social gender re-assignment, chemical intervention in puberty if the condition continues, and possibly surgery as a young adult. Support to transition is founded on the belief that children’s psychological and physical well-being will be improved, as well as their chances of future happiness and empowerment. Broadcast media have brought transgender children to popular attention, and laud those families
who lovingly accept their children’s self-defined ‘true’ gender and support them to transition.

This book is written against the grain of this thinking and practice, and challenges transgender ideology. As Editors, our central contention is that transgender children don’t exist. Although we argue that ‘the transgender child’ is a fabrication, we do not disavow that some children and adolescents experience gender dysphoria and that concerned and loving parents will do anything to alleviate their children’s distress. It is because of children’s bodily discomfort that we argue it is important families and support services are informed by appropriate models for understanding gender. Our analysis of transgenderism demonstrates it is a new phenomenon, since dissatisfaction with assigned gender takes different forms in different historical contexts. The ‘transgender child’ is a relatively new historical figure, brought into being by a coalition of pressure groups, political activists and knowledge makers. The book examines the theories and politics of transgenderism, and the medical, psychological, legal and educational practices associated with it, for the ways they discursively construct ‘the transgender child’.

The book replaces the key concepts of transgender doctrine such as ‘non-binary gender’ and ‘gender as a spectrum’. Bizarrely, in transgender theory, biology is said to be a social construct but gender is regarded as an inherent property located ‘somewhere’ in the brain or soul or other undefined area of the body. We reverse these propositions with the concept that it is gender, not biology, which is a social construct. From our theoretical perspective, the sexed body is material and biological, and gender is the externally imposed set of norms that prescribe and proscribe desirable behaviours for children. Our objection to transgenderism is that it confines children to traditional views about gender, whereas our vision is that children could be released from binary gender. The norms of gender are not random, but express patriarchal power relations and the pressure to conform to heteronormativity. The sexed body is invested with cultural meaning, so that a girl is induced through social institutions such as the family and school to identify with ‘femininity’ and a boy is similarly induced to identify with ‘masculinity’. If we don’t want children and adolescents to be constrained by gender we should be reflexive about embracing it as an inherent, pre-social ‘identity’ and thus reject the theory of transgenderism.

We are aware that there are different views about transgenderism, some of which are heated, or even publicly disallowed. The purpose of the book is to extend the conversation about transgenderism. Lack of open debate about transgendering children is a casualty of a current culture of
offense-taking and identity politics which has had a serious impact on many aspects of free speech. Progressive politics and ethics should surely compel us to reflect upon and discuss theories and practices that may lead to the chemical and surgical transformation of the healthy bodies of children and teenagers. As a society, we are all morally responsible for our young people and, in our view, it is a derogation of our responsibility if, as adults, we did not openly talk about such a serious topic.

In opening up discussion, the contributors to this book have each found that any reflection on transgender doctrine makes us vulnerable to accusations of transphobia, hate speech or of being a Trans-Exclusionary Radical Feminist ("TERF"). We notice that any critique can be inflammatory even to people who are largely disinterested in transgender issues and who are seemingly free from partisan views. We state this reaction at the outset because each of us has been surprised that any reflection on transgenderism, and specifically on ‘the transgender child’, incurs a unique set of constraints on our voices that we have not experienced in applying a social constructionist methodology to any other area of our academic, clinical or other work to date.

Transgender theory and politics specifically claims transgenderism is a ‘gender revolution’ which will release children from the oppression of not being allowed to be their ‘authentic self’. As Editors, we conclude, that in the guise of offering a new paradigm of thought and a revolution in values, transgendering children is not progressive, but politically reactionary, medically dangerous and abusive of children.

**Becoming a community of transcritical thinkers**

It seems important at this juncture to describe the process by which concerns about the growing uncritical acceptance of transgender theory and practice of transgendering children evolved. In early 2014, we began researching transgenderism. At this time, we did not know any of the contributors to this book. Our approach to enquiry had led us to begin thinking of ways in which our work on the social construction of gender might critically intervene into emerging knowledges, politics and ethics of transgenderism. To our surprise, our tentative steps towards progressive transcritical thought were responded to as injurious. Heather wrote a post for her University’s blog Think Leicester on the social construction of gender and critiquing the celebration by Vanity Fair of the transition of Bruce Jenner to Caitlin Jenner as an act of Jenner’s bravery in which ‘she’ had become a ‘true’ woman (Brunskell-Evans 2015). Formal complaints were made to the University of Leicester including the accusations that
Heather was firstly, being hurtful to possible transgender students and staff and secondly, breaching the 2010 Equality Act. Although these were not upheld we learned a painful lesson that while in most other areas academic research and writing offers a space in which critical thinking can take place, and conflicting theories and opinions can be expressed and debated, on the topic of transgenderism debate is suppressed. We found on this occasion and many since, there is an incredibly high demand for vigilance, policing of speech and a real risk of being silenced. In our experience, transgender activists and their supporters can very quickly falsely accuse transcritical commentators of being oppressive to transgender individuals and of not aspiring to equality. By the summer of 2015 it was clear that transgender ideology had fired the popular imagination with regards to the rights of transwomen. Submissions were solicited by the Women & Equalities Committee to inform the Transgender Equality Inquiry where written contributions about possible conflict of interests between women and transwomen, were disregarded. At the same time, we became increasingly concerned that unprecedented numbers of children were being identified as transgender and that the practices of transgendering children ran the risk of serious, long-term consequences, medically, psychologically and socially. We realised that public debate was urgently needed where a range of voices could be heard. Questions such as ‘Is transgendering children progressive and a sign of a tolerant society?’ or ‘Is transgendering children potentially harmful and abusive?’ were impossible to dialogue in public. Gradually, through very careful privately conducted conversations often mediated over the internet through false persona, we located allies also struggling to intervene in the trend to diagnose more and more children as transgender. The collection of well-informed careful thinkers we eventually found, working from a range of personal circumstances and experiences, came together in secret in the summer of 2016 from far flung corners of the UK and the USA to discuss transcritical perspectives with the express purpose of protecting children from harm. We came together in fear, making clandestine travel arrangements, each afraid of very real consequences for our families and livelihoods which could arise from our small network of activism. In the safe confines of a sunny board room overlooking a shady metropolitan street we resolved to stand together and reveal our critical concerns through the pages of this book. And so, in this book the reader will find compelling research-based accounts of central controversies and contentions which underlie the transgendering of children and explain our resistance to identification of children as transgender. Each contributor examines aspects of the personal,
The Fabrication of ‘The Transgender Child’

The political, theoretical, social and cultural impact of transgenderism for children and young people, drawing on their own knowledge and experience. They draw, overtly and implicitly, on a range of personal circumstances to enter the debate from a variety of positions. The contributors bring a wide range of stakeholder perspectives to the debate as academic theorists, practitioners, counsellors, persons living as transgender, persons who have transitioned and regretted it and parents of children and young people identifying as transgender. They analyse transgenderism from their own position of witnessing concern for children and young people to offer a call for critical resistance that contests the current status quo.

The critique of the practice of transgendering children in this book is not aimed personally at any adult who chooses to transition or who has transitioned, at any individual doctor who facilitates the transgendering of children, at any parent who supports their child to transition, and last but not least, at any young person who is thinking about transitioning or is in the process of doing so.

Youth Transcritical Perspectives

In Chapter Two Stephanie Davies-Arai Director of Transgender Trend, the leading UK organisation for parents questioning the transgender narrative, outlines the key concepts and questions that have shaped this book. She points to the relationship between growing media coverage of children identified as transgender and the exponential rise in number of children referred to the leading UK Gender Identity Development Service (GIDS). One explanation, she argues, is that the media promulgates the myth that some children are ‘born in the wrong body’. This idea is relentlessly promoted by transgender lobbyists within a cultural climate where challenge is silenced. She offers a clue to whose interests the ‘transgender child’ lobby is really serving by pointing to a change in terminology from ‘transsexual’ to the euphemism of ‘transgender’ that obscures the interests of adult lobbyists. She authoritatively dismantles the tyranny of youth transgender suicide statistics, known to be based on falsified data yet routinely used to compel parents to collude in the maintenance of their child’s transgender confusion. She exposes the inevitability that falsely exaggerated claims about the incidence of suicide are likely to be driving youth transgender suicide statistics. In contrast to the idea that we are developing increased awareness and sensitivity towards the transgender child, she shows how we are witnessing a new ideology of ‘gender identity’ which decreases children’s freedom as parents and children are
induced in clinical and educational settings to believe a single fixed narrative that a child’s body can somehow be wrong.

Davies-Arai’s analysis makes plain that the increasingly popular trend to transgender children is not benign and easily morphs into homophobic discrimination. She says that “what we have been witnessing is not only a medical experiment on some children’s bodies but a psychological experiment on all children’s minds”. The reader is left questioning whether transgendering children belongs to the world of unreality rather than reality and whether medicine is objective as we might like to believe or is being practiced in Gender Identity Development Services according to a political agenda which has no evidence base that is undermining the health of children and families. There are legitimate common sense questions that must be asked about transgenderism that are crucial to the well-being and safeguarding of children. Davies-Arai makes clear that underpinning the lack of credible reasoning and data to substantiate transgender ideology is deep and purposeful obfuscation of the distinction between sex and gender; this is a theme which contributors to the book make central to analysis of transgender ideology.

In Chapter Three Heather Brunskell-Evans, Visiting Research Fellow at Kings’ College London, picks up the theme of the social construction of gender and the relationship between medicine and another UK Gender Identity Service, namely Gendered Intelligence which works with children and staff in schools. She explores the power that medicine and Gendered Intelligence have in conveying unproven theories about gender and children to children themselves, to their caretakers and teachers, and to social policy. Firstly, she asks questions of medical knowledge and demonstrates that the medicalized transgendering of children is an individualised response to what is a social issue, namely problems posed by repressive, societal binary gender norms. As such, medicine constructs rather than reveals ‘the transgender child’. Secondly, she asks questions of Gendered Intelligence and demonstrates how this organization contributes to the construction of this new, fabricated identity through ideas gleaned from queer theory and an existentialist philosophy of ‘choice’. She argues the doctrine of ‘non-binary gender’ proposed by Gendered Intelligence is intellectually incoherent and confirms rather than subverts gender stereo-types.

Brunskell-Evans proposes that when medical practice and organisations such as Gendered Intelligence combine to mobilize children and teenagers to transgender they are not progressive and humane but illiberal and abusive. As such her analysis adds to the conclusion that Davies-Aria draws, namely that transgender theory is mythological and
that it is pernicious not only to the individual children who become identified as transgender but to all children in the school communities to which Gendered Intelligence programmes are delivered. In her unequivocal statement that she hopes future generations will look back on the current transgender trend with shame, the reader is charged with the utmost responsibility for making sure they are looking at transgenderism through seeing eyes.

In Chapter Four GenderCriticalDad writes as the parent of a trans-identifying teenager. He must remain anonymous to safeguard the confidentiality of his child. His chapter connects the snapshots of the world of transgenderism presented by Davies-Aria and Brunskell-Evans to the actuality of everyday life as the parent of a gender confused teen. He talks about his experience of being on the receiving end of a Gendered Intelligence workshop for teenagers and their parents. He describes his alarm seeing his daughter and other young people in the group exposed to facilitators designated to counsel confused teenagers with no qualifications in education, child development or youth work. The sole determinant of the facilitator’s suitability for access to vulnerable young people is that they themselves identify as transgender. In his view, the facilitators showed evident signs of extreme confusions about gender. His disturbing account raises questions about who has influence over our children and young people and who has the power to translate children’s expression of gender confusion to transgender ideology.

GenderCriticalDad describes the mundane details of ordinary family life with a teenager, knowing that teenage years can be turbulent, and contrasts this with extra-ordinary narratives provided by transgender doctrine as a means to help them. He talks about his struggle to protect his daughter from untrusted outside influences; he knows his role as a parent is to mitigate and put those influences into a context for his children in order to keep them safe. He illuminates the irony of transgender doctrine which presents parents who question the transgender narrative as the source of unsafe influence on their own children. In desperately wanting to support his daughter and be a good parent he constantly faces the accusation that he is bigoted and transphobic.

GenderCriticalDad finds solace in radical feminist analysis of the distinction made between sex and gender that is completely at odds with transgender theory. A growing number of men understand that radical feminism provides the conceptual tools to interrogate the ideology of transgenderism and to his great surprise GenderCriticalDad is leading the way on this. He is an unlikely candidate for putting his head above the TERF parapet where TERF is the catchall term used to denounce and
belittle any radical feminist critique of transgenderism. He explains how parental concern is immediately denounced as being an example of TERF behaviour and oppositional to your own child’s best interests. Having read GenderCriticalDad’s chapter the reader will be in no doubt about the integrity and reasoning behind his transcritical ‘chest full of feelings’ that explain the legitimate resistance of any ‘parent with a daughter who says she wants to be a man’.

In Chapter Five Josephine Bartosch, a feminist activist, explores the coming out stories of women who understood their same sex attraction before transgenderism began to invalidate lesbians. This helps build useful insights into how young people discovering their sexuality can be supported so that their search for a positive sexual identity is not hijacked by discourses of transgenderism. Not surprisingly, all of the women Bartosch talks to remember difficult times during adolescence when their experience of growing up as a female was at odds with stereotypical expectations that govern women’s lives, and when they felt under heavy social pressure to modify their feelings, bodies and behaviours to conform to prescribed gender boundaries.

Looking back the women she talked to fear that today’s sustained campaign to interpret gender confusion as a sign of being transgender would have put them under considerable pressure at a time when they were self-conscious and already engulfed with confusion. They reflect on the ready deployment of transgender discourses in the lives of young women coming to understand same sex attraction in the current climate as ushering in new forms of oppression, with the prospect of actual bodily harm, and therefore see it as essential to step out of line to challenge the rise of transgender identity politics. Looking back over their shoulders they know their clothes, haircuts, interests and pastimes would have been sufficient to incite and propel definitions of transgender identity – exactly as GenderCriticalDad is witnessing and describes. Bartoch’s conversations with the women, and consideration of her own experience, raise serious questions concerning how becoming a lesbian can be powerfully and dangerously disrupted if children and young people fall sufficiently into the gaze of those who are indifferent to the significance of transcritical thinking.

In Chapter Six Lisa Marciano, clinical social worker and Jungian analyst, explores the emergence of the fiction of transgender through a Jungian practitioner lens. Her chapter is distinctively different from others in this book because, in contrast to other contributors who focus more directly on political and social factors, she locates transgenderism as an effect of a developmental need of teenagers to discover meaning and to
find purpose. In Marciano’s view, an eternal adolescent developmental stage is individuation from adult authority by seeking out intense and sometimes dangerous situations. Throughout history young adults have done this by testing themselves whilst belonging to a social group doing the same thing. In the 21st Century she claims this need can be satisfied through the excitement offered by transgender identity as alleged resistance to cultural norms and parental authority. By identifying as transgender teenagers seek to satisfy a universal psychological need for tribal belonging to overthrow parental control. She suggests identifying as transgender is an attempt to “self-initiate, to slip the bounds of banal ordinariness and see meaning and transcendence”.

The question may arise of what is wrong with seeking autonomy and independence through transgender doctrine and identification with the transgender community? Marciano argues that irrespective of whatever transgender theory does, or does not contribute to ideas about gender, ultimately its solutions do not reach the roots of what a young person needs. A sensitive appreciation of a young person’s need to symbolically transition from teenagehood to adulthood through separation offers a reassuring solution in her chapter that offers connectivity rather than disconnection and difference from others which is integral to transgender explanations of teenagehood. Interventions based on transgender theory may offer, for instance, cosmetic surgery to counteract body dysmorphia but there is evidence that dissatisfaction with the body part altered does not disappear after its physical alteration. In contrast, an appreciation of the symptoms of body dissatisfaction can be resolved through counselling. Taking symptoms of discomfort at the transition from teenage to adulthood at the level of the concrete disclosure by a young person, as transgender theory claims it does, means that we miss the meaning behind the utterances of a young person who is confused about gender. Echoes of arguments presented in all the other chapters of the book can be heard; derogation of responsibility in allowing a developmentally immature person to make decisions that will affect them in their lives in ways which they cannot possibly predict or understand is neither just nor morally comprehensible.

In Chapter Seven Susan Matthews, an academic, turns to analysis of the emergence of transgender identity through its construction in literature and storytelling. In contrast to the idea that transgenderism is ahistorical and has been with us forever, she argues that contemporary transgender ideology “is a product of our moment in history, that it invents a new set of beliefs that are without historical precedent”. She demonstrates that changes in our understanding of gender can be seen in the “stories
produced by novelists, historians, gender theorists, psychiatrists and scientists” taking two sources as the site of her analysis: the 1984 novel The Wasp Factory by Iain Banks which explores genital mutilation in childhood; and the story told by American gender identity specialist John Money in the middle of the 20th century of Bruce Reimer who was accidentally castrated at the age of nine months in a medical accident during circumcision and reassigned as a girl by Money. In this analysis, Matthews argues that 20th century medical technologies have enabled the idea that one can transform the body in to its “real” gender – as if gender was ‘real’ in contrast to the body which can betray reality.

Matthews further posits that gender has currently taken over from religion as a means of offering escape from distress inherent in the human condition. She shows that in contemporary society all distress is now being referred to the idea of gender disquiet whereas in fact alternatives narratives, seen in the literary examples she explores, suggest alternative routes out of gender distress: we tell ourselves stories to escape unhappiness. Matthews’ intent is to decouple the relationship transgender theory makes between unhappiness and gender discontent. What is interesting about The Wasp Factory, Matthews proposes, is that the road to personal and collective freedom will not be built upon gender as key to what is essentially human, but counter-intuitively to a 21st mind, human freedom and happiness can be achieved by recognising the fictional status of gender and thereby releasing us all – adults and children – from gender tyranny.

In Chapter Eight Carey Callahan writes as a detransitioned woman interested in alternative treatments for gender dysphoria. Her chapter about her experience detransitioning from a man reads more like poetry than prose. Within the beauty of language and metaphor she conveys the pain and horror of the lies that led her to transition in the first place. She argues that in focusing on her own individual story her chapter does more than illumine her own life but points also to the “ideological narratives that rule our culture”.

In the process of detransitioning Callahan realised that what the transitioning community and modern society spurn is the idea that there is anything about the female body to which one could be loyal. In contrast, loyalty is a performance to the concept of ‘femininity’ both in the transgender community and in wider society. She longs to abandon the requirement for gender performance and to get back to her own body’s experience of the world. The authentic sense of self she longs for is not the one provided for by transgender ideology, namely that she is ‘really a man in a woman’s body’. It is to return to the authenticity of being a woman in
a woman’s body and to be allowed to have experiences of that body outside of objectification and the performance of ‘femininity’. She wants to have an experience of her body below the level of sexism. In the detransitioning community to which she belonged women were originally on their guard not to bring sexism and objectification of women into their discussion about why women might want to become men for fear that they were letting the trans community down. The transitioning community in fact did reject her and in doing so she felt cast aside like other women throughout the centuries who have been deemed mad, bad or crazy. She notes that discomfort with womanhood takes different forms in different historical contexts; at the time of writing, transitioning to a man is becoming one available way for women to express their discomfort.

Where did the idea of becoming a man to resolve the problems of becoming a woman emerge? Callahan feels feminism let her down in finding alternative ways to be a woman. She turned to Queer feminism which offered liberation from being a ‘she’. Queer feminism promised an escape from discomfort with femininity; a promise Callahan learned to her cost could never be realised. It offered her ‘gender fluidity’ that would let her call herself any pronoun, have sex with every gender in every kind of body. But she discovered the same oppressive feminine roles were just under the surface; what wasn’t on offer was any alternative to valuing oneself and one’s body on any other basis than the old feminine role of mother or hooker in new disguise. She knows the experience of detransitioners threatens the claims and power of the transitioning community. She refuses to be silenced and will not kowtow to the demands of transgender advocates to render the transregret experience of people like herself invisible. Her radical agenda is for the seldom heard voices of detransitioners to be heard and taken seriously.

Miranda Yardley, a natal man who has chosen to live as a woman, takes Callahan’s disappointments with gender ideology further. Yardley now takes an abolitionist stance on gender believing gender damages everyone. He disavows use of the word ‘woman’ for himself, preferring to use the term ‘transsexual’. Yardley describes the rise in children and young people identifying as transgender as a ‘modern epidemic’ and sets out to answer the question of why we don’t respond to this as we would any other new epidemic such as might result from a pathogen, i.e., why don’t we attempt to stop the surge of transgenderism rather than support its increase as if it was benign? He reminds us that GIDS openly admits it can find no explanation for the rise in referrals nor can it provide any scientific explanation for gender dysphoria. That gender is a cultural phenomenon is acknowledged by GIDS and the service
provides very little understanding of why it is that anyone would be transgender.

In answering the question of why we seem incapable as a society to address this epidemic, Yardley provides two solutions. Firstly, he proposes that pressure not to address the issue comes from transgender lobbyists who are not concerned about children and young people. The concept of “the transgender child”, he reveals, is useful to the transgender lobby and indeed is “central to the campaigning of transgender activism”. The transgender activist lobby is aware that to make changes in transgender legislation and gender related language and expression in legislation, transgender identifying youth can be deployed to mobilise support. Using the rights of children and young people to lobby for legislative change is useful because it persuades the movers and shakers of society that transgender is connected to the needs of children and keeping them safe and has nothing to do with the sexual desires of male transvestites.

Secondly, the advancement of scientific knowledge about the aetiology of transgenderism is being obstructed by the same transgender lobbyists “through tactics of threats and intimidation”. Scientific enquiry and reporting of it “is tightly politically controlled, in particular, the attacking of any activity seen as being other than affirmative”. Research and debate is obstructed through “routine harassment, vilification and intimidation of professionals”. Yardley is horrified by this and calls for a change to the cultural climate in which transgenderism can be discussed. He insists there must be scope for rigorous investigation of what it is that makes individuals identify as the opposite sex. Research should be conducted without personal or professional risk and researchers should be free to investigate topics of concern irrespective of political sensitivities, for example, investigating the links between pornography consumption and incitement of sexual pleasure in transgenderism.

Yardley takes up a recurring theme in the book about the role of the media in producing and reproducing affirmative views of transgenderism as a benign, non-threatening phenomenon. His chapter raises more questions than it answers about the social origins and implications of transgenderism showing there is no room for complacency in relation to the consequences of transgendering children.

In Chapter Ten Robert Withers, a psychotherapist whose approach is informed by psychoanalysis, does specifically seek to understand the aetiology of transgenderism. He argues that psychoanalysis can perform that function, and as such, therapy may be able to offer a viable alternative to transgender medical intervention. In his view, it is
plausible that “fear of sexuality, dissociation between both mind and body and male and female elements in the personality and issues around identification” may be determinants of gender dysphoria for some of the clients he has worked with. His ideas resonate with those explored by Callahan on possibilities of a relationship between transgender identification and childhood trauma. In contrast to her view that dissociation arises from the cultural constraints of growing up as a girl, Withers describes transgenderism without reference to social context. In his view, transgenderism can be the result of keeping at bay feelings of dissociation arising from childhood trauma and the subsequent fear of being overwhelmed by any resurfacing of them. He suggests it is unsurprising that some people attempt to cope with overwhelming feelings by surgically and hormonally altering their body, but like Callahan, he has been brought directly into contact with people regretting transition.

We saw earlier the scope for transregret experienced by Callahan where transitioning through medical intervention did not alleviate underlying discomfort with living in a female body. However, even finding a clear physical causal explanation for gender dysphoria would not necessarily imply the necessity for medical intervention. The continued failure to provide a biological aetiology for gender dysphoria Withers argues, can only add weight to the importance of psychological or psychotherapeutic rather than medical intervention. He is of course, acutely concerned about accusations of transphobia, finding himself to be operating in a climate where even at professional conferences he attended at the time of writing, transcritical discussion was being decidedly shut down. Not seeking to dodge the difficulty of false accusations of transphobia, Withers ends his chapter by posing the question of whether a therapeutic, psychological approach or a medical approach involving wounding surgery and a lifelong hormone regime best serves people who identify as transgender.

Jen Izaakson is a doctoral candidate with a thought-provoking track record of being asked if she is transgender though she is not. In Chapter Eleven, she proposes the feminism that arises from queer theory, which she calls 'transfeminism', is inadequate for the purposes of challenging an emphatic and self-assured reconceptualization of gender espoused through transgender ideology. A robust engagement with transgender theory is necessary she argues, because academics, psychologists, medical doctors and the public find themselves ill equipped to confront the questions and challenges thrown up by transgender ideology. She seeks to confront the assertiveness of transgender theory and open a space for critical thinking. Theory applied to transgender children
she reveals, did not emerge from focus on the physical and well-being of children, but emerged from a focus within the academy on adult sexuality. An interesting aspect of the chapter is Isaacson’s views that within the academy the idea of transgenderism has been invented and then researched in ways that seek to demonstrate that it is a naturally occurring phenomenon.

Isaacson says that gender identity theory embedded within transgender doctrine, is a challenge to conventional gender stereotypes. She turns this idea on its head, arguing the converse is true. Both conventional ideas of gender and the key trans concept of ‘gender identity’ perform a policing of the person. Where conventional gender stereotyping takes the form of objectifying women on the basis that the female body and ‘femininity’ are the same thing, transgender policing objectifies people by focusing on whether your ‘true’ gender identity and your body are out of sync. In both cases, whether it is conventional objection or within transfeminism, there is no space for outright refusal of gender and “regulatory gender rules”. Once gender identity has become established as something that’s ‘natural’ and ‘real’ rather than something that is socially constructed then there is a circularity to its logic.

Isaacson argues that clinicians in gender identity clinics do not discuss, and are possibly completely unaware, that they reproduce and act on these confused ideas. Service providers and service users are oblivious to the cycle of transgender construction because firstly it has the appearance of naturalness and secondly, in carrying out their job, they reinforce it. Not only this; clinicians in reproducing transgender in their clinics get caught up in requiring transgenderism as real for their own livelihood. She points to the relationship between transgendering and the financial incentives of the industry (medicine, big pharma etc.) to maintain this illusion.

Finally, Michele Moore, Professor of Inclusive Education, argues that transcritical thinking is not oppositional to inclusivity in education and society. She asserts there should be no stigma or discrimination around gender nonconforming children and that responses to a child’s gender discomfort must be located in requirement for social change rather than in rejection of a child’s body. She sees gender discomfort as located in social injustice which has to be tackled through social change – not through intervention that compromises children’s the integrity of bodies. She points out that entitlements of children and young people to self-determination are being drowned out by dominant voices of transgender activists, especially in schools. Far from promoting well-being and social justice, powerful institutions upholding transgender ideology are taking
away freedoms, eroding respect for individuality that is the foundation stone for inclusion and acceptance in all spheres of life and, at the same time, annihilating the physical and mental health of unprecedented numbers of children and young people. Her analysis exposes transgender activism as having hugely restrictive implications for children’s rights to self-expression. She draws parallels between the current fashion for intervention on children’s healthy bodies and treatment systems for disabled children that have come and gone in different historical contexts to show that critical voices must be sustained in the face of movements that seem to promise liberation but neglect to adequately face up to possible harms. She concludes that a sign of a truly progressive society is one where serious critical debate can take place and that the contributors of this book work toward such a society.

And so, at the end of this book the reader will have engaged with many arguments about the importance of critical intervention in the seemingly unstoppable celebration of transgender ideology in the lives of children and young people. We advocate adherence to the principle of First, Do No Harm. There is constant abreaction to the analyses of all contributors to this book which has not deterred us but, in contrast, has strengthened our resolve to address the phenomenon of transgendering children. The authors call for an open debate about the divide between gender confusion and intervention. We argue that if discussion of any topic is silenced or shut down through personal slurs or name-calling this is probably the very moment at which we should open it to further critical scrutiny. This book is the result of our collective persistent questioning.
CHAPTER TWO

THE TRANSGENDER EXPERIMENT ON CHILDREN

STEPHANIE DAVIES-ARAI

In April 2015 an episode of the popular Louis Theroux series, entitled 'Transgender Kids' was broadcast on BBC2 (Theroux, 2015). Although media coverage of the subject had already been steadily growing in the UK, this was probably the moment when the issue of 'transgender kids' was brought into full mainstream awareness. The number of children referred to the Tavistock gender clinic in London over that year doubled. Concurrent with increasing media coverage, the Tavistock clinic has seen an increase in referrals of nearly 1000% over the past six years (BBC News, 2016). Each year has seen a 50% increase in referrals and during that time the number of children less than ten years of age has increased four-fold. The reversal in the sex ratio since 2009/10, when figures were first recorded, has been expanding year on year and the number of girls is now nearly double that of boys: 913 out of the 1,398 children and adolescents referred in 2015/16. The average age of referral was fourteen.

One simple story has been popularised to explain this unprecedented increase in numbers: that some children are 'born in the wrong body' and that it is the increased public awareness and acceptance of transgender people which has inevitably led to a greater number of children and adolescents who feel able to 'come out' as transgender. What this explanation fails to acknowledge is that a single fixed narrative, that of 'courageous children daring to be their authentic selves and the brave parents who support them' has been relentlessly promoted to the public within a climate where any challenge has been silenced by accusations of hatred and bigotry (Banned by Trans, undated) and all debate shut down (Transgender Trend, 2016).

It is not only 'increased awareness' we have been witnessing but a sustained campaign to promote a new ideology of 'gender identity' which persuades parents that their child's body is 'wrong' and teaches children
that 'sex is between your ears and not between your legs'. Quietly, the idea that sterilising children by blocking their natural sexual development (Mirror.co.uk, 2011) and then medically altering their healthy bodies with synthetic cross-sex hormones, followed by possible surgery and lifelong risky medication, has been accepted as the new orthodoxy (Taylor, 2015).

**Girls will be boys and boys will be girls**

Through exploiting confusion in the public mind between 'sex' (the biological reality of being male or female) and 'gender' (the social idea of masculine and feminine), transgender organisations have managed to mask the inherent contradictions of a reactionary ideology. The fact that changing your sex to match your 'gender identity' reinforces the very stereotypes which these organisations claim to be challenging is effectively hidden in plain sight as, in increasing numbers, boys who love princess culture become 'girls' and short-haired football-loving girls become 'boys'.

Promoted as a 'progressive' social justice movement based on 'accepting difference', transgender ideology in fact takes that difference and stamps it out. It says that the sexist stereotypes of 'gender' are the true distinction between boys and girls and biological sex is an illusion. In this ideology, 'being feminine' has replaced being female as the very definition of 'girl'.

The sympathetic story of helping children to become 'who they really are', together with the change in terminology from 'transsexual' to 'transgender', has worked to sanitise the story and obscure the reality. A diagnosis previously reserved for adults may now be applied to children with little resistance from parents, not many of whom would be comfortable with the label 'transsexual' for their child. It is hard to imagine a parent at the school gate saying of their six year-old 'this is my daughter Chloe, she's transsexual'.

**Transition or die**

An integral part of the celebratory media story has been the darker supporting narrative of the inevitable suicide outcome if children are not supported in their transition. If parents need one more push to believe the new ideology, this is the one that does it. With no evidence that treatment cures suicidal ideation (nor recognition that hormonal drugs, as a side-effect, may exacerbate it), transgender youth support organisations such as
Mermaids regularly broadcast the threat to worried parents and a gullible media (Kleeman, 2015).

From parents in media interviews we typically hear 'I want a happy daughter, not a dead son'. Children get taught the script and the media has eagerly given them a platform to spread the message: a 16-year-old talking on the BBC Radio 4 programme Beyond Binary (BBC Analysis, 2016) says that if she couldn't transition "I would probably kill myself." The Guardian, in an article about sex-reassignment surgery describes it as "life-saving work" (Lyons, 2016).

We have never before taught children they can decide their sex; this is an experiment. Let's see how it's going.

The creation of the transgender child

The medical term for the condition in which someone feels discomfort or distress in their sexed body is 'gender dysphoria'. However, Louis Theroux's programme was not entitled 'Gender Dysphoric Kids' and nowhere across the media do we hear any word other than 'transgender' used to describe these children. The actual definition of the term (National Centre for Transgender Terminology, 2014) is "a person whose gender identity is different from the sex they were assigned at birth" as though your sex is something randomly decided by strangers. Calling a child 'transgender' in fact signifies nothing other than allegiance to the belief that a child's gender identity is their true sex.

In using the term 'transgender kids' it is not the kids we are protecting and advocating for, but the ideology itself. More sinisterly, the word is used by transgender organisations as an umbrella term for all so-called 'gender questioning', 'gender non-conforming' and 'gender variant' children, thus sweeping up all children who don't conform 100% to stereotype. The 'transgender' label treats all 'gender dysphoric' children as a homogenous group; the reason an infant boy who loves playing with dolls believes he is really a girl becomes exactly the same reason a troubled autism spectrum teenage girl thinks she is really a boy: 'because they are transgender'. An adult identity politics has been applied to children and young people whose identities are not fixed but are in a process of being built through experience and interaction with the environment; identities which are highly vulnerable to influence from adults.