

***Girls deserve a chance: The repercussions and potential harms of Bill C-6  
are too serious not to consider***

**Submission on Bill C-6: *An Act to amend the Criminal Code (conversion therapy)*  
Brief to the Standing Committee on Justice and Human Rights**

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Bill C-6 purports to address a serious issue: conversion therapy — a practice that indeed has been the cause of pain, strife, harm, and stigmatization for gay and lesbian individuals. And if this bill *were* simply about ensuring homosexual people were not subjected to conversion therapy against their will, I would support it. But this is not the case.

As Conservative MP Michelle Rempel pointed out during the second reading of Bill C-6, on October 27, the Canadian Psychological Association (CPA) has long defined conversion therapy as “any formal therapeutic attempt to change the sexual orientation of bisexual, gay and lesbian individuals to heterosexual.” She also points out that “This definition has generally been updated to include methods that aim to change the gender identity or gender expression of an individual.”

This is also true. Many advocacy groups and activists have pushed to include “gender identity” under the banner of LGB (adding a “T”) and, by proxy, have lumped “gender identity” into definitions of (and rejections of) conversion therapy.

This is both incoherent and dangerous. Gender identity and sexual orientation are not the same thing. Yet it is activists — not experts or scientists — who have pressured organizations, politicians, and institutions around the world to combine gender identity and sexual orientation unthinkingly. Activists alone, even if well-intentioned, should not be dictating law, policy, and medical practices. There should be rigorous public debate, as well as input from various experts. Especially when something as serious as transitioning kids is concerned.

While the CPA does not yet appear to have altered their definition of conversion therapy to include “gender identity,” in 2018, the American Psychiatric Association (APA) board of trustees updated their position to add that the “APA recommends that ethical practitioners respect the identities of those with diverse gender expressions.”

This is a troubling position for a professional organization of psychiatrists to take. This is an activist position, not an evidence-based one, and again, activism should not dictate science, medicine, or therapy.

The APA states that conversion therapy “is rooted in the false and outdated assumption that homosexuality and other forms of gender and sexual diversity are mental disorders that can be ‘cured.’” This is inaccurate and lacks understanding of what “gender” is.

While homosexuality is about who an individual is attracted to and chooses to partner with, “gender” is simply a set of roles, behaviours, choices, and superficial cues, applied to people based on their biological sex. “Gender” refers to “masculine” or “feminine” stereotypes or “gender roles.” So, it is presumed that men and boys are inherently authoritative, assertive, dominant, unemotional, aggressive, rational, and drawn to things like sports, trucks, and roughhousing; whereas women and girls are presumed to be inherently nurturing, passive, emotional, irrational, delicate, and drawn to things like high heels, makeup, the colour pink, ballet, homemaking, and so on. These ideas are pushed on kids from a very early age.

Feminists have long rejected the idea that males and females must fit within these sexist categories, and have encouraged children and adults to reject these kinds of stereotypes. In progressive Canada, we should all have accepted that people should be free to be themselves: boys can play with dolls and girls can play with trucks. Women can be leaders and men can be emotional.

Yet the modern concept of “gender identity” has turned this all on its head. Gender identity ideology says that if a person breaks out of stereotypical gender roles, they can no longer be the sex they are, but must be the opposite sex. This is reminiscent of “biological determinism” — the notion that biological sex and gender stereotypes are rigid and hardwired. But gender identity ideology goes a step further, insisting that “gender” (behaviours, clothing preference, toy preference, inclinations, skills, etc.) actually determines one’s sex. Under gender identity ideology, a boy who plays with dolls and likes dresses is not simply a boy who plays with dolls and likes dresses, but is in fact literally a girl, and needs cross-sex hormones and surgery to appear more like his “true self” (it is incredibly strange to insist that in order for a person to really be themselves, they require a lifetime of hormones, prescribed not for health or medical reasons, but for superficial ones, and invasive cosmetic surgeries...)

In other words, all the hard work feminists have done over the years to insist people be accepted as they are, and not forced into sexist gender roles has been undone by gender identity ideology. And more concerningly, kids are now being subjected to intrusive, experimental medical practices and operations in order to accommodate what is truly a faith-based ideology.

I say “faith based” because there is no evidence that a male can become a female or vice versa: not really. One can alter the appearance of body parts or remove them entirely, but a woman is not merely a collection of various body parts — she is a system, all interconnected, and the way she develops is completely connected to puberty and necessary for her health. Stopping a child from going through puberty does not ensure they can become the opposite sex, it ensures they won’t develop properly as a human being: that surge of sex hormones is needed from brain and bone development, as well as, of course, in order to be able to reproduce and develop primary and secondary sex characteristics.

We have completely dehumanized people under this ideology: acting as though a male and female have interchangeable parts — like Mr. and Mrs. Potato Heads: remove a breast; add a (non-functioning) “penis.” Humans do not work like this. No animal does. And as much as we would like to imagine we have evolved beyond, we are still animals, at the end of the day.

I also say “faith based” because gender identity ideology rests on the idea that it is possible to be “born in the wrong body.” It is not. No one has a “wrong body,” they simply have the body they are born with. If a woman has small breasts and wants large breasts, that doesn’t make her body “wrong,” and if a person has a physical disability it also doesn’t make their body “wrong.” People who feel 30 years old on the inside but are in fact 80 are not “really 30.” They are really 80, no matter what they feel or desire. One cannot identify out of material reality. It is absolutely inappropriate and, I would argue, harmful, to tell a child their body could be “wrong” — that if a girl does not like her vagina, she must transition to be a boy, and that this will make her happier. It will not. There is no evidence to support this, despite what activists claim. A girl who is told by adults that it is possible to “transition” to become a “boy” and that this will comfort and fulfill her will, in fact, destroy her body for life, be rendered infertile and unable to experience sexual pleasure, with no recourse. All because adults have imposed an ideology on children, and because doctors and therapists have been convinced they must transition children who request it lest they be accused of “transphobia,” lose their jobs or practice, and now, possibly be sent to jail.

Do we want therapists and medical practitioners to be able to do their jobs with ethically? Or do we want them to be beholden to activists who tout a religion that says non-believers must be silenced, ostracized, destroyed, fired, and even killed.

We — women and feminists — have been shouting from the rooftops, begging to be heard. We are very concerned about these laws and practices and, to date, our government has not listened. The very people meant to represent our interests, who we vote for, will not so much as hear our concerns, never mind take them seriously. We tried to speak out when Bill C-16 was being passed, and were ignored by media and politicians alike. The whole world now has seen the consequences of gender identity legislation, as males are assaulting female inmates in prison, women are being forced out of shelters unless they are willing to share rooms with strange men, and vexatious male predators are dragging female estheticians to court on account of their refusal to wax male genitals. We are banned from social media and our events are shut down. We are dropped by our publishers, removed from our political parties, and fired from our jobs.

We are not bigoted, we are concerned.

We are now seeing more and more girls caught up in this trend, being put on puberty blockers and hormones that have irreversible impacts (despite what activists claim), and are being fast tracked toward surgeries that are definitely not reversible.

Give girls a chance. Puberty is hard. Being a girl is hard. It is not comfortable. It can be scary. But the solution is not to turn them into boys. The solution is not to cut off their breasts, give them hysterectomies, prescribe them testosterone, and tell them this will somehow resolve their angst.

Indeed, the term “conversion therapy,” in this context, is ironic. Many of the girls who attempt to transition to become “men,” then desist, turn out to be lesbians. The confusion and fear of being lesbian in a world where homophobia remains, combined with the trans trend, is converting young lesbians into heterosexual boys.

If Bill C-6 is passed, no therapist or medical practitioner will feel safe to suggest a “watchful waiting” approach — waiting to see if a youth’s feelings of “gender dysphoria” persist (in 80% of cases, the feelings disappear with time) — or suggest a child or teen try to feel comfortable with the body they have, before disfiguring it for life. Already, trans activism and gender identity ideology and legislation have had a chilling effect.

In 2015, Dr. Kenneth Zucker was fired from the Centre for Addiction and Mental Health (CAMH) Gender Identity Clinic (GIC) in Toronto, which he had run for more than 30 years, after trans activists accused him of “conversion therapy.” His approach was simply one of “watchful waiting” — rather than immediately starting children who think they have gender dysphoria on the transition process, he thought it better to first try to “help children feel comfortable in their own bodies.” If the dysphoria persisted, Zucker would support them in their path to transitioning.

Even those who believe that transitioning youth can sometimes be of help (I do not believe any minor can consent to such a process) are quelled. Is criminalizing such people really the best way forward?

Minors cannot vote, buy alcohol or cigarettes — does the government of Canada think they can consent to something that has a much more serious impact: something that remains experimental — even advocates for transitioning youth admit that long term impacts are not known, as there are no long term studies — and that we know will change that child’s future in monumental and possibly dangerous ways. Children are not equipped to decide that they no longer want their body parts, or to reproduce, or enjoy sex as adults.

This bill, if passed, will not only be a horrific stain on Canadian history, when we look back in shame, and as the legal cases from regretful transitioned people pile up, but it will result in thousands of lives ruined — not only those of therapists and medical practitioners, and the institutions promoting and offering these transitions, but those of Canadian youth whose lives will be marked forever by this regressive, homophobic, sexist, dangerous, practice.

I implore you to reconsider before it is too late.

To learn more about the very serious concerns surrounding Bill C-6, please join us for an online panel, Friday, Nov 13, 2020: <https://www.youtube.com/watch?v=lcbSzoyVkMU>

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