

In a [landmark ruling](#) by the UK's High Court this week, children and teens seeking puberty blockers or cross-sex hormones will need to apply for a court order to commence medical transition. This means that supportive psychotherapy services will become a default treatment pathway for gender distressed youth in the UK, something that is not considered within [Bill C-6](#).

The purported goal of Bill C-6 is to ban the coercive and degrading practice of conversion therapy. But the language of the Bill targets services aimed at children in such an all-encompassing way that the effect will eliminate agenda-free psychotherapy services that can support trans-identified youth to manage or ameliorate gender dysphoria without pursuing an invasive medical pathway of transitioning.

Eva, Director of [Detrans Canada](#), a recently formed group of Canadian detransitioners says "Bill C-6 is harmful to gender dysphoric children, and denies resources to young people with internalized homophobia, body dysmorphia and other mental health concerns that often accompany and generate gender dysphoria. This law will punish therapists who try to help us, ban life-saving therapies that our members need, and force gender dysphoric children on a trajectory towards unnecessary medical risks."

There is significant debate around the world regarding the best way to treat gender dysphoria. The issue is receiving more scrutiny because of the recent exponential increase in young people, particularly a new population of adolescent girls, seeking gender transition. Referrals to Canadian gender clinics have increased [more than 1,000%](#) over the past decade.

At the same time, treatment protocols have changed to an informed consent model. Access to puberty blockers and cross-sex hormones has become very easy. [Five out of 10 Canadian gender clinics](#) no longer require any type of psychological assessment prior to starting puberty blockers or cross-sex hormones. Psychotherapy to resolve feelings of gender distress is considered a "barrier" to medical transition and in recent years has become synonymous with conversion therapy.

The UK high court, however, ruled that young people do not have the capacity to consent to these experimental medical treatments. A significant factor in their decision was the determination that the clinicians themselves do not fully understand the risks and benefits of the treatments. In [their ruling](#), the court expressed "surprise" at the lack of scientific rigour in terms of tracking outcomes and understanding the efficacy of the interventions "given the young age of the patient group, the experimental nature of the treatment and the profound impact that it has".

The UK's National Health Service has updated their [service specification](#) for gender identity to reflect the new requirement of a "best interests" court order prior to referring children to a pediatric endocrinology clinic (gender clinic).

On informed consent laws in Canada, Lisa Bildy, a lawyer with the [Justice Centre for Constitutional Freedoms](#), says “The situation varies by province, but generally, the onus is on the healthcare provider first to determine whether their young patient is competent to consent to care; and second to obtain their informed consent. The Bell case is a hopeful sign that courts are recognizing that children and adolescents may not be providing informed consent when signing up for puberty blockers. As the decision confirms, when puberty blockers are a probable first step on a path that includes cross-sex hormones and surgery, it is unlikely that a minor can actually understand what he or she is consenting to in terms of possible lost fertility or sexual function as an adult.”

The inclusion of gender identity in Bill C-6 will have the effect of using criminal law to interfere with decision making by health professionals in an area which is complex and poorly understood. The proposed law does not require the nature of the services targeted at children to be coercive in nature or be proven to cause harm, therefore the concern is that any and all psychotherapy services aimed at helping youth ameliorate feelings of gender dysphoria may become suspect as conversion therapy.

In [testimony](#) before the justice committee studying Bill C-6 this week, Dr Ken Zucker and Dr James Cantor expressed that the Bill in it's current form is completely unacceptable. While there is a clear exemption for medicalized gender transition-related services, there is no equivalent clarity that would exempt evidence-based or agenda-free psychotherapy services for gender dysphoric youth. In order to come up with an appropriate exemption, Dr Zucker called on the government to “convene a panel of experts in treating gender dysphoria to come up with consensus guidelines”.

Data has been collected through a survey done by Parents of ROGD Kids with the following results:

Of the 1,274 parents who have completed this survey to date:

- 962 (76.1%) have daughters.
- 96.4% of these girls had an onset of GD between the ages of 10 and 20 years old. Three quarters were between the ages of 12 and 16
- **60% of the parents reported that their daughters had a history of mental health issues.**
- **89.3% of their mental health issues began on or before the age of 14.**

Of the parents who reported that their daughters had mental health issues, 75% had received a formal diagnosis from a licenced medical professional. The most common diagnoses were (parents could check off more than one):

- Anxiety 72.3%
- Depression 66.1%
- ADHD 28.4%
- Autism Spectrum Disorder 15.6%

Clearly, mental health issues need to be addressed when dealing with children and teens who are coming to therapists with gender dysphoria or self identifying as transgender.

Therapists that aim to explore gender identity are already looked down upon in our society today. They cannot do their jobs properly because they are afraid of their professional and personal reputation getting tarnished and being fired. If this Bill C-6 gets passed with the current wording including gender identity, therapists will also have to also worry about being criminalized for doing their job thoroughly.

Now that mental health professionals will be heavily involved in developing exactly these kinds of guidelines and treatment protocols for the UK, it would be a serious mistake for the Canadian government to invoke a criminal law that limits the freedom of Canadian healthcare practitioners from applying evidence-based treatment protocols in Canada.

Canadian Gender Report, [Detrans Canada](#), Parents of ROGD Kids and other grassroots organizations strongly oppose Bill C-6 because it will limit necessary and agenda-free psychotherapy services for trans-identified youth and will limit healthcare professionals from pursuing evidence-based, best-practice treatment pathways in this rapidly evolving field.

Recommendation

We strongly recommend the removal of the term “gender identity” from this legislation, so that young and teen girls/boys will have access to talk therapy to get to the root of their discomfort. Calling this conversion therapy for this population is deceiving and dangerous.

Submitted by Dorothy Newcome, member of Canadian Gender Report and group leader of the Ottawa chapter of Parents of ROGD Kids.

About Canadian Gender Report

Canadian Gender Report is a non-partisan, non-sectarian group concerned about the exponential increase in youth being referred for medical gender transitioning, the lack of evidence-based practice in our healthcare system with respect to these invasive medical interventions, the promotion of gender identity teaching in our education system and the lack of parental rights to act in the best interests of our children.

About Parents of ROGD Kids

We are a non-partisan, non-sectarian group of parents whose children have suddenly decided they identify strongly with the opposite sex and are at various stages in transitioning. This is a new phenomenon that has been identified as [Rapid-Onset Gender Dysphoria \(ROGD\)](#), and it is reaching our vulnerable youth. We have facilitated the formation of in person groups of parents across North America, the UK and parts of the EU.