

Written evidence submitted by Ms Alexis Dexter (GRA0053)

Will the Government's proposed changes meet its aim of making the process "kinder and more straight forward"?

Should a fee for obtaining a Gender Recognition Certificate be removed or retained? Are there other financial burdens on applicants that could be removed or retained?

We are as yet uncertain of the precise nature of the Government's proposed changes beyond a promise to reduce the fee and move the process online. Regarding the fee, unless the process is de-medicalised the application fee is only a small proportion of the costs incurred - current estimates to assemble all documentation and psychiatric evaluations required are in the region of £500 to £1000. This is not an inconsiderable sum of money and effectively bars those of a low income or living on benefits from making an application. Furthermore 'moving the process online' is simply bringing the procedure into the 21st century and inline with all other application for Government issued identity documents, application for which has been online for some time. The fact this is being touted as some Great Leap Forward indicates more how archaic the current process is than any determination on the Government's part to properly modernise and streamline the procedure.

Should the requirement for a diagnosis of gender dysphoria be removed?

Yes. On May 25th 2019 the World Health Organization approved the removal of 'gender identity disorder' from ICD-11, redefining it as 'gender incongruence' and removing it from their list of 'mental disorders'; effectively rendering the demand for a diagnosis of gender dysphoria a demand for a diagnosis of a psychiatric disorder the world's leading health organisation no longer recognises. Not only does this suggest the demand for a diagnosis of a non-existent disorder is somewhat nonsensical but there is significant stigma still attached to such a demand in that it retains a strong implication that trans identities are a product of mental illness and not a natural variation of human experience, and this serves only to continue prejudice against, pathologisation, and delegitimation of trans experiences. Furthermore and for these reasons of undue prejudice, on 19th January 2015 WPATH stated: 'No particular medical, surgical, or mental health treatment or diagnosis is an adequate marker for anyone's gender identity, so these should not be requirements for legal gender change.'

Should there be changes to the requirement for individuals to have lived in their acquired gender for at least two years?

Yes. The current situation places trans people in the absurd situation of having to self declare their gender, and make all possible name and gender marker changes, often battling through processes that are uncertain and a bureaucracy that is ill-equipped to deal with these requests such, with a result that the same institutions will retain records in multiple identities and inadequately update their systems to reflect name and gender marker changes - all of this before and in order that their gender be legally recognised. Often we are dealing with staff ignorant of the law and their responsibility to update any data they hold before any change is legally recognised. Frequently there is no system in place to enable such changes, and evidential demands vary hugely between institutions, meaning trans people often find their requests arbitrarily denied and themselves forced into lengthy negotiations to get the changes they desire pushed through. This places an unnecessary burden of work on trans people at an already difficult time, in order to gain a legal document that would in retrospect make all

these changes more streamlined and easier. Essentially the process is operating in reverse of a simple and humane system.

Does the spousal consent provision in the Act need reforming? If so, how? If it needs reforming or removal, is anything else needed to protect any rights of the spouse or civil partner?

Yes, the spousal veto is, at least since the advent of same sex marriage, now both legally outdated and clearly violates human rights commitments to bodily autonomy and self determination. One struggles to think of any other situation in which a spousal veto would be considered an appropriate or reasonable restriction.

Should the age limit at which people can apply for a Gender Recognition Certificate (GRC) be lowered?

Some process should be put in place for people below the age of 18, possibly with parental consent, or else defined on a basis similar to Gillick competence. Clearly some people, after extensive psychological assessment, are identified trans as children, I certainly knew I was, therefore it seems unreasonable if they are able commence treatment and identify as such to deny them legal recognition.

What impact will these proposed changes have on those people applying for a Gender Recognition Certificate, and on trans people more generally?

The Government's currently proposed changes will have almost no impact on trans people, I doubt they will significantly change in either direction application for gender recognition certificates, they are inadequate and reflect the bare minimum of what is required by international law - they are clearly not designed to make trans people lives easier or more bearable.

What else should the Government have included in its proposals, if anything? Are legal reforms needed to better support the rights of gender-fluid and non-binary people? If so, how?

The Government should have included recognition of non-binary and intersex people, it's hard to see any reasonable justification, beyond prejudice, why such identities should not be recognised. In practical terms the availability of an 'X' marker on a passport is clearly necessary for those with anomalous bodies (trans or intersex), in an age when full body scans at airports have become the norm, leading to invasive questioning, unnecessary outing, with all the potential distress and danger this can cause. It also for many of us simply feels like an honest description of who we are, and that in itself should be enough.

Why is the number of people applying for GRCs so low compared to the number of people identifying as transgender?

One reason is unnecessary cost, another is simply why having done all the work to change all other identity markers, to have all our documents and id recognising our lived genders would we bother making this minor legal change that is expensive both monetarily and in effort and time - it makes almost no practical difference to our lives, as almost all changes it might have enabled are legally required before its issuance. Essentially in its current form it's a vanity, or

at best a change in how we might be recognised in our death. This is entirely irrelevant to most trans peoples' lives. Finally many people I know are reluctant to be placed on state list of applicants for gender recognition certificates - this might seem extreme, but for a minority who have and still suffer state sanctioned violence the idea of being identified by such a list induces a great deal of unease, to assume we will always be safe and protected from discrimination in any society is a privilege few of us feel.

Are there challenges in the way the Gender Recognition Act 2004 and the Equality Act 2010 interact? For example, in terms of the different language and terminology used across both pieces of legislation.

Yes, the Equality Act 2010 should be updated to redefine the protected characteristic as 'gender identity' rather than 'gender reassignment', as this would cover both non-binary and intersex individuals who may not be undergoing or intending to undergo any process of reassignment but whose identities are none-the-less valid, subject to prejudice, and in need of protection.

Are the provisions in the Equality Act for the provision of single-sex and separate-sex spaces and facilities in some circumstances clear and useable for service providers and service users? If not, is reform or further guidance needed?

They are not particularly clear and further guidance is likely needed. However it's important any single sex exemptions to trans peoples' access to services remain absolutely the exception rather than the rule otherwise we find ourselves in danger of restricting trans access to public life. For example, already many trans people are afraid of and avoid using public toilets, or toilets in shared spaces such as pubs, restaurants, or cinemas. This is clearly detrimental to their physical and mental health, as trans people deliberately dehydrate themselves simply to access the public realm, or else either avoid or cut short visits to places where their safe use of such facilities is uncertain. Trans peoples' rights of access to such spaces in line with their gender identity needs to be made explicitly clear - there is no evidence that trans people pose any undue threat in such spaces, nor that reform of the GRA to allow self-declaration will heighten any risk. There is evidence of fear mongering and prejudice inducement against trans people, especially regarding access to these spaces, and it should be made clear that this cannot and should not be weaponised against a vulnerable minority, and nor is it acceptable to harass members of this minority when accessing facilities in line with the law.

Does the Equality Act adequately protect trans people? If not, what reforms, if any, are needed?

No. As outlined above trans people are routinely harassed in accessing services to which they are legally entitled. Clear protections from such abuse need to be put in place and trans people better protected by the extension of 'aggravated offences' to include transphobic hate crimes. Better reporting mechanisms need to be put in place. As someone who is both disfigured and trans, and has been publicly abused and harassed for both of these reasons I know how difficult it is to report such events in the immediate aftermath - often the principle desire is to get home and get safe. Perhaps like Action Fraud some kind of online system for reporting hate crimes and abuse could be introduced so we at least have a record of incidents and locations so any patterns can be understood and investigated accordingly.

What issues do trans people have in accessing support services, including health and social care services, domestic violence and sexual violence services?

Since the public consultation was announced in 2018 waiting times for first appointments at the UK's leading gender identity clinic, colloquially called 'Charring Cross', have increased by almost a year to 36 months [<https://gic.nhs.uk/appointments/waiting-times/>] and likely longer for those referred now, meaning, as 2 appointments are required before treatment can begin, a wait likely in excess of 4 years from referral. This is clearly unacceptable by any measure, and deeply distressing for those whose lives it can often seem have been put on hold. This urgently needs to be addressed, and given the WHO's recent depathologisation of trans identities as no longer being mental disorders, the historic psychiatric gatekeeping function that gender identity clinics embody should perhaps be dismantled entirely and adult services provided on an informed consent basis. Given the current system of 'shared care' and provision of hormone prescriptions (under direction of the GIC psychiatrists) and ongoing health monitoring by general practitioners, it would seem that with proper education and training these professionals could themselves directly provide the treatment and services trans people require - they do after all treat clinical psychiatric conditions such as depression with SSRIs without any further demand for psychiatric consultation. Furthermore experience tells me very few health professionals are familiar with trans healthcare requirements and provision - just a very little training could vastly improve this situation and therefore trans peoples' experience of healthcare generally.

Finally I would like to add that trans peoples' representation in the media recently has been abominable. We are frequently associated with sexual predators, mental illness, and deviancy. One need only look at entirely fabricated stories such as those published in both tabloids and broad sheets claiming Ian Huntley was trans to see the kind of lies, harm, hate propagated by a largely trans hostile press, or else the kind of outing and harassment of Lucy Meadows and the hurt this very obviously caused. All this is without proper redress or consequence, and I feel it is behoven on any responsible government to properly protect vulnerable minorities from such egregious character assassination and verbal assault, as these serve only to demonise said minority and act to encourage and legitimise actual violence and physical assault against them. I don't think it unreasonable to expect media regulators to work with trans people and organisations to better ensure more realistic portrayals of trans people as well as more accurate reporting. We are too often portrayed as deranged, a threat, or else simply as a freak show, and if prejudice against us is to be effectively combatted this simply has to stop.

We are human beings, and deserve the same consideration and respect as do we all.

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