

### **Written evidence submitted by Ms Andrea Maynard (GRA0071)**

I am currently employed as a Civil Servant and I am a Trans woman and have been presenting as my preferred gender for over 20 months.

I was born in Scotland and as such could not do a deed poll to change my name who ever I had to have my birth certificate changed to reflect my preferred name. This I have done.

I have been on the waiting list for an appointment with my nearest GIC in Exeter for over 3 years now and still no sign of an appointment.

Applying for a GRC with the current or the proposed changes are discriminatory in as much as I am already fully committed to living the rest of my life in my preferred gender but for me to change the details on one document, My Birth Certificate, I have to wait for an appointment which could be yet another 2 years away followed by 2 further appointments be diagnosed with gender dysphoria.

I then have to live a further 2 years in my preferred gender before applying for a GRC.

So, a total of 9 years to change one little detail on my birth certificate.

I have already changed my passport and driving licence to match my preferred gender.

All that this required was a letter from my employer confirming my role and working in my preferred gender. A letter from my GP confirming I have started transition and my birth certificate (or deed poll) showing name change.

No other process requires such a lengthy waiting time. If gender at birth was carried out using this process, then a birth certificate would not be issued for up to 9 years after a child was born. We would as a society not be willing to accept this as the consequences on the child's development would be greatly impacted.

Surely this alone shows that the process is flawed and is unjust and discriminatory.

Moving onto the cost and moving it online. This has been on the cards for a considerable time even before the GRA Review was instigated, in line with all government departments applications processes. The cost is still likely to be significantly high enough to be prohibitive to large numbers of the trans community who have been forced out of employment, have under gone family break ups, been alienated by "friends" and family, just for wishing to live their life as there true self.

On looking at this most will only see the application cost but there are numerous additional costs involved such as letters from GP are normally a chargeable item. The statutory declaration involves a cost so what may appear to be a single fixed fee is anything but.

No other life choice inflicts this level of hardship on an individual so again this points to the GRA in it's current and proposed form as discriminatory.

Accessing proper health care as a member of the trans community is a minefield at best and can only be described as flawed.

Gender dysphoria is not a mental condition and was declared by the World Health Organisation, in ICD-11, as a gender incongruence is defined as a marked and persistent incongruence between a person's experienced gender and assigned sex.

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) released in 2013 no longer shows gender dysphoria as a mental condition.

Our very own NHS also has confirmed that it is not a mental health condition.

<https://www.nhs.uk/conditions/gender-dysphoria/>

### **“Gender dysphoria and gender identity**

Many people with gender dysphoria have a strong, lasting desire to live a life that "matches" or expresses their gender identity. They do this by changing the way they look and behave.

Some people with gender dysphoria, but not all, may want to use hormones and sometimes surgery to express their gender identity.

Gender dysphoria is not a mental illness, but some people may develop mental health problems because of gender dysphoria.”

So why does the GRA still require that a psychological diagnosis of gender dysphoria is a requirement for the application for a GRC? This shows a contempt for a leading World Authority on the basis that this is a trans related condition therefore insisting it is a requirement is itself transphobic and discriminatory.

Regarding the statutory declaration I think this should still be a requirement to provide the necessary “checks and balances” that ensure it is not abused.

With regards the provision and use of single sex and separate sex spaces and facilities. I have personally not experienced any negative outcomes from using bathrooms and toilet facilities that are designated as Female. However where I have used them, they are in areas and venues that are inclusive, so the likelihood of a negative experience is reduced. However, when it comes to public facilities, I am more inclined to avoid using them unless absolutely necessary and then when I do, I get in and out as quickly as possible.

The current Equalities Act already makes the use of these spaces a given right which I and many of the trans community appreciate and certainly do not abuse for the alternative is far worse.

Changes to the use of these spaces to “Birth Sex” could create far more problems and would be very destructive. Fortunately, this was not to be changed so any future action to change this would not be welcome.

Regarding Spousal Approval. As is common in most cases I am separated from my spouse and this provision is not only not required but can and will be problematic. We have no intention at this time to divorce but in order to obtain a full GRC under current and proposed legislation we would need to have the marriage annulled.

Failing to have it annulled would then restrict me to having only a temporary GRC when my status is anything but temporary. So, from a personal view point I think this provision should

either be removed or amended to allow for a situation where a couple have been separated for more than 6 months but choose not to divorce a full GRC should be available.

Regarding the age limit. At the age of 16 you are legally allowed to enter into a marriage, you can give consent to medical procedures, leave home and setup home in a new location so why is applying for a GRC to be restricted to the minimum age of 18 it makes no sense. When you are transgender and have come to terms with your gender status you need to be able to follow your life and being told that you have to wait for 2 years for a piece of paper that can change one item but can affect you throughout life is not acceptable.

The proposed changes are not really changes, but a policy that has been ongoing within government departments moving application forms online. The only change is the price but that has still not been disclosed and is likely to be prohibitive to most. So, to answer the question of what impact this will have on applicants. Effectively the impact will be the same as for the current legislation and will still be restrictive, invasive and cruel.

The Scottish Government proposed Bill offers a much better service both as a means of providing the GRC and giving the applicant sufficient time to confirm their desire for the GRC. From what I have been informed no medial diagnosis of gender dysphoria a great start, presenting in preferred gender for 3 months prior to applying for a GRC is a much friendlier approach. Then to have a 3month cooling off period before the GRC is issued which effectively means that you will have been presenting full time for 6 months. This would be a deterrent for false claimants and also gives the individual enough time to discover if this is truly what they want. Still having the statutory declaration is a good idea as this has to be done in front of a Notary Public or a judge therefore adding the required checks and balances that need to be applied. Overall a much better option which the vast majority of the trans community would be happy to accept if it was applied throughout the UK.

#### **Wider issues concerning transgender equality and current legislation:**

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

As previously stated the current and proposed process is both financially prohibitive, invasive and demeaning. Most do not wish this level of hardship enforce on them just to change one letter on a birth certificate.

- 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.

From personal experience the language in the GRA needs to be updated to match the Equality Act

- 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?

As previously stated the current provision should not be changed.

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

The Equality Act 2010 is heading in the right direction and for the most is good. Some employers and educational facilities are lacking therefore better education is a must to ensure that the community as a whole learn to be more inclusive of all human beings irrespective of their age, race, gender, religious belief, disability, sexual orientation, marital status, or any other difference.

We are ultimately all the same race, the same species human beings.

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

The requirement to have to attend a Gender Identity Clinic to progress with treatment when they are limited in number (7 in England, 3 in Scotland, 2 in Northern Ireland and 1 in Wales) often involves travelling costs which far out way normal NHS travel costs.

The waiting lists are a complete joke with waiting times in the South West rapidly reaching 5 years for a first appointment, then still having to wait a further 2 years for the 2<sup>nd</sup> and 3<sup>rd</sup> appointment required for a formal diagnosis of gender dysphoria is completely unacceptable. This is all before treatment can commence, this then forces individuals to seek other sources such as self-medicating. When your GP is informed of this self-medicating which is deemed as self-harming in most cases the GP's are not willing to prescribe a bridging treatment which goes against the guidance of the GMC (<https://www.gmc-uk.org/ethical-guidance/ethical-hub/trans-healthcare#mental-health-and-bridging-prescriptions>). This can make existing conditions worse and result in members of the trans community attempting to end their existence as they feel discriminated against by the very profession that is supposed to care and help.

- Are legal reforms needed to better support the rights of gender-fluid and non-binary people? If so, how?

Yes most definitely, being anywhere on the gender spectrum still means that you are human. As such should afford you the same protection under the Equality Act, but because they are not a protected category they have no legal protection from discrimination, yet they suffer similar levels of discrimination as other members of the LGBTQ+ community so should be afforded the same level of protection.

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