

## Written evidence submitted by David Barnsdale (GRA0313)

I am a gender non-conforming male, likely due to autogynephilia, who to that extent falls under (the admittedly rather broad) trans umbrella.

1 **The contention that access to a Gender Recognition Certificate should be based on self-ID is based on a belief that transwomen are just like other women - there is little reason to believe that's the case. The need for single sex prisons puts the potential problems of self-ID into stark relief. On the other hand adequate talk therapy for those with gender dysphoria is lacking.**

### Autogynephilia

2 Ray Blanchard's two types of transsexual are the homosexual and the autogynephilic heterosexuals. Autogynephilia is an identification with the desired sex which can become a desire to actually be the desired sex. (Why this concept has become controversial is explained by Ray Blanchard himself here: <https://quilllette.com/2019/11/06/what-is-autogynephilia-an-interview-with-dr-ray-blanchard/>) As such it is more a sexual orientation than a gender identity. The implications of this is that someone who is autogynephilic may well very closely imitate their idea of a women while at the same time displaying very typical heterosexual male behavior.

### Self-ID

3 Self-ID is justified as respecting people for who they are. But having a strong desire to be someone different does not make you that desired image. Autogynephilia can lead to intense gender dysphoria and that may be resolved by transition and part of that resolution may involve legal transition. That transition, however, is a legal fiction that is justified by therapeutic need. That most people who identify as transgender do not apply for a GRC is not surprising and reflects how broad the trans umbrella is.

4 There are good reasons that women have special protections such as women only spaces. As at the moment the numbers applying for a GRC are much lower than the number who identify as transgender the conflict of rights manageable. However, increasingly people who simply identify as transgender are treated as if they had a GRC.

### Single Sex Prisons

5 For over a hundred years prisons have been single sex. There are good reasons to maintain this due to the dramatically greater proportion of male prisoners who commit violent offenses than women. The difference is even more stark when it comes to sexual crimes. Because separate records are not kept for transwomen it is not possible to know the proportion of transwomen in prisons who have been convicted of violent offenses. Nonetheless, the information available points to a comparable pattern of violence to that of heterosexual men. This is what we would expect if the majority of transwomen are autogynephilic differing from other heterosexual men only in a desire to be the object of their desires. Transferring a significant number of individuals with male pattern violence poses a significant risk to biological women prisoners but also changes the whole prison regime. Because convicted women are far far less likely to be violent, women's prisons can be run in a far more relaxed way than is normally practical for men's prisons. The problem of violence against transwomen in men's prisons could be solved by setting up a separate prison specifically for trans people. Doing this it seems to me would be a valid exceptions under the Equality Act 2010 as a proportionate means of achieving a legitimate aim but the law might need clarification.

### Talk Therapy

6 Rather than making it easier to get a Gender Recognition Certificate, the lives of those with gender dysphoria could be genuinely improved with greater funding for talk therapy. When one option is hormone treatment that culminates in surgery (the hormones bringing irrevocable changes just as much as the surgery), less

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drastic options must be the first recourse. Providing talk therapy is not cheap but expecting surgery to solve psychological problems is a recipe for a large number of detransitioners who, finding that transition was a false solution to their original problems, must live with now regretted changes to their bodies.

7 While the cause of autogynephilia is uncertain there is reason to believe it is deep rooted. That does not mean that therapy can not help a significant number find peace with the body they have. Even for those who after therapy wish to undergo full transition the self knowledge gained by therapy will give them greater confidence that the decision was right for them.

8 Arguing for extra funding for talk therapy in the post covid19 world will be harder than ever but that is no excuse for resorting to the superficially easy option of self-ID for Gender Recognition Certificates. It is based of a denial of biological realities and will prove to be a false solution to those it purports to help.

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