



For attention: Adv. Lynn Coleridge-Zils
Advisor office of the Minister at Western Cape Provincial Government

Per email: Lynn.Coleridge-Zils@westerncape.gov.za
19 June 2020

Dear Adv. Coleridge-Zils

Written Submission on the Draft Guidelines On Gender Identity and Sexual Orientation in Public Schools

Doctors For Life International (DFL) is a NPC (Non Profit Company) that was founded and established in South Africa (SA) in 1991. We currently have about 1,500 members that are medical doctors and specialists, dentists, and veterinarians from within South Africa and internationally. We bring together medical professionals to form a united front to uphold sound science in the medical profession.

In this submission we would like to address the deep concerns we have regarding the proposed “guidelines on gender identity and sexual orientation in public schools” as they do not hold up to prudence.

Our submission consists of medical and scientific evidence, testimonies of former homosexuals and transgenders, and statements from experts and accredited institutions. This document includes media impact reports on other countries that have implemented the Lesbian, Gay, Bisexual, and Transgender (LGBT) guidelines. DFL will demonstrate in this submission how similar proposals, if not the same, have become problematic across the world.

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Our youth are the most vulnerable part of our society, and a failed experiment on them will have dire consequences on their future. Every effort should be made to be prudent in what we allow them to be educated on or exposed to.

You are welcome to contact us: 032-481 5550 / mail@dfi.org.za

Regards
Liza Lombard

1. Concerns & predictions

Some of our concerns are based on what unfolded in the USA and in the UK. Both these countries accepted similar LGBT guidelines for their schools. If the same approach is applied in South African schools, we could expect the same results or worse. These include sexual predators that gained access to female toilets, or boys that were caught filming and circulating footage of girls using toilets. School staff members that were charged for child pornography because they filmed children in toilets. Peeping incidents also occurred and an exponential rise in children identifying as transgender then seeking hormone and surgery treatment.

The gender identity and sexual orientation guidelines for schools,^[1] put forth by the DA, propose that schools allow children who identify as transgender, to use any changing rooms and toilet facilities of their choice. Transgender boys and girls are seemingly also permitted to participate in opposite-sex sports activities. Life Orientation lessons are bringing LGBT issues to the center of attention.

DFL, along with world renowned experts on the topic, do not agree with encouraging children to ‘cross-dress’ according to their “gender identity” which will inevitably lead to surgery for some. We highly discourage these guidelines because it leads the youth to falsely believe that a girl or a boy can be born in the wrong body. Johns Hopkins University who pioneered sex reassignment surgery (SRS) for transgender persons back in the 1960’s eventually shut the program down. The transgender individuals who had SRS back then had much the same problems with relationships, work, and emotions as before – nothing improved. Dr Paul McHugh, a professor of psychiatry at Johns Hopkins University, was involved with the research at that time and he compared medical intervention for the transgender youth to “performing liposuction on an anorexic child”.^[2]

Dr Paul McHugh said that transgender people suffer from a disorder of “assumption” where they believe they are trapped in the wrong body. Those who suffer from a similar delusion such as anorexia nervosa and bulimia, suffer from the deluded assumption that they are overweight while actually being dangerously thin. These assumptions depart from physical reality. ^[3]

Toilets and changing rooms separate boys and girls for good reason. It encourages privacy and modesty. In the USA lawsuits have followed legislation that allowed boys to compete in girls’ sports. Students from across started suing to restore privacy and segregation to girl’s bathroom and changing rooms, as well as girls’ sports. Labelling female students ‘transphobic’, or anyone who objects to these transgender laws, can be considered abuse and intimidation. Below is - a list of articles that serve as examples of what we can expect when transgender guidelines and LGBT issues enter schools and the general public:

2. Science and Transgender

Dr Paul McHugh (as introduced on page 2) one of the leading psychiatrists in the world, together with other scientists have stated in the journal – The New Atlantis ^[4] (page 7,8,9) that:

- “The idea that people are “born that way”—is not supported by scientific evidence.”
- “The hypothesis that gender identity is an innate, fixed property of human beings that is independent of biological sex—that a person might be “a man trapped in a woman’s body” or “a woman trapped in a man’s body”—is not supported by scientific evidence.”

Last year December 200 people showed up for the world’s first gender de-transition conference in England. The sold-out event included a panel of medical and psychological health experts as well as young women who are “de-transitioning” from attempts to make them men. The event also marked the official launch of the De-transition Advocacy Network headed by Charlie Evans, 28, a woman who identified as a man for a decade. Evans decided to found the group to help the hundreds of young people she says have reached out to her after regretting their own experiments with hormonal treatments and surgeries. ^[5]

Psychotherapist James Caspian, also in the UK, works with transgender and transsexual people and says that a growing number of transgenders now *regret having the surgery*. ^[6]

Dr Miroslav Djordjevic a urologist in Belgrade, Serbia, who specializes in gender reassignment surgery *warns of a rise in transgender patients that seek reversal surgeries*. He

explains how patients who want to reverse the surgery show high levels of depression and suicidal thoughts. ^[7]

The American College of Paediatricians calls the encouragement of children to transgender child abuse. *“Today’s institutions that promote transition affirmation are pushing children to impersonate the opposite sex, sending many of them down the path of puberty blockers, sterilization, the removal of healthy body parts, and untold psychological damage.”*

The American College of Pediatrics also urged healthcare professionals, educators and legislators to ^[8] *“reject all policies that condition children to accept as normal a life of chemical and surgical impersonation of the opposite sex. Facts – not ideology – determine reality.”* The also outlined the following;

- Human sexuality is an objective biological binary trait: every single cell in a person’s body is either “XY” or “XX” which are genetic markers of being a male or female. These not genetic markers of a disorder that needs to be changed through transitioning.
- A person’s belief that he or she is something they are not is, at best, a sign of delusional thinking. When an otherwise healthy biological boy believes he is a girl, or an otherwise healthy biological girl believes she is a boy, an objective psychological problem exists *that lies in the mind not the body, and it should be treated as such.*
- Rates of suicide are nearly twenty times greater among adults who use cross-sex hormones and undergo sex reassignment surgery, even in Sweden which is among the most LGBTQ – affirming countries. What compassionate and reasonable person would condemn young children to this fate knowing that after puberty as many as 88% of girls and 98% of boys will eventually accept reality and achieve a state of mental and physical health?
- Conditioning children into believing that a lifetime of chemical and surgical impersonation of the opposite sex is normal and healthful is child abuse.

Professor Michelle Moore, an expert in inclusive Education and Disability Studies in the UK, leads Human Rights projects across the world to support children and their families. Prof Moore expressed her concerns that schools are being influenced by LGBT organisations that teach children in Primary School about gender issues. This is before children even understand sex and gender concepts and she calls this dangerous. Below are a few statements from Prof Moore: ^[9]

- “Children are being blind-sighted into self-identifying as transgender because there is no dialogue and questions aren’t allowed to be asked. Children are given no one else to turn to if they should change their mind about transitioning as 80% of them do.”
- Self-identifying as transgender does not serve the best interest of the children or young people. Rather it opens up the way to normalize transgender teaching and dissociation from your natural body. It fixes a child on a medical & pharmacological intervention pathway for life
- “Prof Moore says that some trans adults have a vested interest in lobbying very hard for gender self-identification of children in order to naturalize their own gender and sexual preferences. Transitioning children and young people is an experiment on the bodies of our children.”
- Once transgender surgery is done, fertility is compromised and lifelong blood transfusion is needed. Infection, scars, and Post-traumatic stress disorder is the result and yet 80 % of transgender adults don’t even insist on medicalization for themselves. ^[9]

One of Australia’s top gender experts, Stephen Stathis, a psychiatrist had concerns that adolescents are ‘trying it out to be transgender’ to stand out or gain attention from their peers. ^[10]

In the UK a transgender charity gave schoolgirls age 13 potentially dangerous breast-flattening devices without telling their parents. The ultra-tight garments can cause ‘horrendous’ health problems including breathing problems, chronic back pain and broken ribs, increasing the chance of a punctured lung. ^[11]

There is a distinct pattern that follows when LGBT issues enter schools. The LGBT lifestyle seems to be promoted as consequence-free and encourages sexual activity before the child/teen is emotionally and intellectually ready. Early sexual exploration among teens is already known to be damaging and has a negative impact on their behaviour. ^[12]

3. Health implications of the LGBT lifestyle

The Gay & Lesbian Medical Association (GLMA) are well aware of the negative health impact linked to the LGBT lifestyle. In three publications ^[13] called “10 things Gay | Lesbian | Transgender individuals should discuss with their Healthcare Practitioner” GLMA outline that LGBT individuals compared to the general public suffer:

- 3.1 Increased risk of HIV infection
- 3.2 Use substances (drugs) at a higher rate
- 3.3 Depression and anxiety (mental disorders) are experienced at a higher rate
- 3.4 Men who have sex with men are at an increased risk for Hepatitis (serious condition of the liver that can be fatal)
- 3.5 Sexually Transmitted Infections occur at a higher rate. (this includes STI's for which no cure is available).
- 3.6 Risk for death by prostate, testicular, or colon cancer is higher
- 3.7 Higher rates of alcohol dependence and abuse exist in the LGBT community compared to the general public
- 3.8 Tobacco is used at much higher rates
- 3.9 Problems with “body image” eating disorders, diabetes, high blood pressure, and heart disease affect the LGBT community even more than their heterosexual peers.
- 3.10 Homosexual men are at higher risk for human papilloma virus, anal cancer... the rate of infection that spreads between partners is very high.

Lobbying groups have tried blaming these results on discrimination that LGBT persons suffer. This claim was researched by Dr Paul McHugh from John Hopkins University, and the results were published in a journal – The New Atlantis ^[14] (page 7,8,9) they found that:

- “This hypothesis— which holds that stressors like stigma and prejudice account for much of the additional suffering observed in these subpopulations (the LGBT community)—does not seem to offer a complete explanation for the disparities in the outcomes.”

This rings true especially in countries like Denmark and Sweden who affirm the LGBT lifestyle the most. Despite this, the LGBT community still suffer high rates of suicide, drug abuse, alcohol abuse, HIV infection – the list goes on.

DFL wonders whether this tragic side of the LGBT lifestyle will also be taught in Life Orientation lessons or will it only be glorified?

4. Media reports of LGBT guidelines in schools, sports and public sphere

- 4.1 Teacher among 16 facing child porn charges, also accused of filming with tablet in bathroom ^[15]
- 4.2 MMA Fighter Male-to-Female transgender Fallon Fox cracks skull of biological female opponent. ^[16]
- 4.3 In the USA, a male teacher was punished by the school for refusing to watch a girl claiming to be a transgender male, shower in the boy's locker rooms. 5-year-old girl was sexually assaulted in a bathroom by a "gender-fluid" male after transgender policy allowed him access ^[17]
- 4.4 Man dressed as woman and secretly videotaped females using stores bathroom. ^[15]
- 4.5 Sexual predator jailed after claiming to be 'transgender' to assault women in shelter. ^[15]
- 4.6 Man strips in front of girls' locker room, says transgender law allows it. ^[15]
- 4.7 University of Toronto dumps Transgender Bathrooms after peeping incidents. ^[15]
- 4.8 14-year-old boy video-taped a 13-year-old student in the bathroom and forwarded the video to other students. ^[15]
- 4.9 Gay Pride event, a little girl no older than six is waving an LGBT flag as she watches a near-naked man perform sexual dance moves in nothing but his underwear. ^[18]
- 4.10 12-year-old boy in Thailand called Nes along with Desmond have become media darlings for performing in sexually-tinged female attire, and both are hailed by pro-LGBT activists. Why would anyone want to see children dressed in sexually provocative clothing? Pedophiles are known for doing these things. The magazine is justifying inappropriate behaviour by pointing claiming that the boy could buy a house for his family because of his sexualized modelling. ^[19]
- 4.11 11-year-old drag kid "*Desmond Is Amazing*" danced on stage at a New York gay bar while adult male patrons tossed money his way as if he were a male stripper. Homosexuals and the general public criticised this. ^[20]
- 4.12 10-year-old boy, known as Queen Lactatia, was shown posing with a nude adult male during a photo shoot for Huck Magazine. ^[21]
- 4.13 In the UK a transgender clinic in London lost 18 specialists in just three years because children are being rushed into affirming transitions without exploring other underlying causes that might be responsible for the child's sexuality confusion. ^[22]
- 4.14 It is worth mentioning that five counties in the UK ^[23] and a Fifteen States in the USA have considered legislation that will limit/prohibit certain transgender guidelines pertaining to opposite sex toilet use by anyone, sports participation where men compete against women, and transgender surgery on minors. A breakdown and specified list can be found in the links below. ^[24]
- 4.15 The Equalities Minister in the UK blasted a document containing LGBT guidelines for schools. The document asserted that schools have a legal and moral duty to

embed LGBT teaching in the curriculum, and suggests that schools ignore the concerns of parents and carers who object. The LGBT guidelines document also told schools to ignore advice from groups such as Transgender Trend, A Woman's Place UK and Fair Play for Women, because these groups do not fully endorse the affirmative approach to gender confusion. The LGBT guidelines document further made false claims that "refusing a child or young person access to the changing room or toilet of their gender identity would constitute an act of discrimination". [25]

4.16 Hungary is another example where parliament voted 133 to 57 to ban transgender individuals from changing their gender/sex on identity documents. [26]

5. Legislative response in other countries

- 5.1 New Hampshire, West Virginia, Ohio, Tennessee, South Carolina, Georgia, Alabama, Mississippi, Louisiana, Missouri, Iowa, Kansas, Arizona, and Idaho (Fourteen states) are considering withdrawing transgender laws concerning transgender bathroom access, and biological sex sports participation. [27]
- 5.2 Iowa, Illinois, Missouri, Oklahoma, Ohio, Alabama, South Carolina, and Tennessee consider prohibiting transgender surgical interventions on children. [27]
- 5.3 Massachusetts, New Jersey, Georgia, Tennessee, Michigan, Iowa, Kansas, and Washington moves to protect the religious beliefs and moral convictions of citizens. [27]

Some of these withdrawals have been enacted and some are still in progress.

- 5.4 In the UK, Warwickshire, Shropshire, Oxfordshire, Kent, and Barnsley counties have decided to drop transgender guidelines for their schools which similarly seek to allow transgender students access to single-sex spaces. [28]

Many more examples can be provided. DFL asks whether South Africa is ready to face the countless cases that will mount once we accept these problematic guidelines that have only proven to cause more problems than it claimed to solve.

6. Former Homosexuals/Transgenders Testify

In a few documentaries, some done by the British Broadcasting Corporation (BBC), Family Watch International, and Russia Today (RT) we observe transgender or sex-change regret. The mainstream media often purposefully omit reporting on these stories. It gives a false impression to the public that affirmation of a transgender or homosexual lifestyle leaves no one unhappy. This is simply not true.

Here are a few former homosexual and transgender testimonies.

6.1 Charles Kane, from the UK, is another example in a BBC documentary called “One Life: Make me a Man Again.” He regrets transitioning and describes how female hormones made him want the surgery and this all happened after he had a nervous breakdown. ^[29]

6.2 A two-week survey done on Facebook and Tumblr in the USA on August 2016 revealed some interesting information that sharply contradicts the statements of transgender activists. The survey was completed by 203 respondents who formerly described themselves as being transgender. 117 of these respondents had transitioned socially and/or medically, and subsequently de-transitioned due to regrets.

By far, the two most common reasons for de-transitioning were shifting political/ideological beliefs at 63%, and finding alternative coping mechanisms for dysphoria, at 59%.

Transgender activists however, tell the general public that de-transitioning occurs due to financial concerns, lack of social support, and institutional discrimination.

But these reasons were among the lowest, at 18%, 17%, with institutional discrimination being at the lowest scoring category 7%. ^[30]

6.3 RT released a documentary called “I want my sex back” which covers the stories of three males who felt uncomfortable with their sex and underwent sex-reassignment surgery believing it would relieve their distressing condition. However, becoming female only brought more problems, disappointment and regret. ^[31]

6.4 From The Pique Resilience Project (PRP) which is driven by four young women that de-transitioned as a result of experiencing regret over transitioning:

PRP advises gender-confused teens to think deeper about the reasons they dislike their bodies, sometimes it's due to a history of sexual abuse, and to explore other causes for the issue. Don't rush into surgery as the solution because even full gender "reassignment" surgery fails to resolve the individuals' tendency to self-harm. ^[32]

- 6.5 Understanding Same-Sex Attraction is another 30 min. documentary which extensively covers scientific evidence, expert witnesses, former homosexual experiences and the Adverse Health implications of the lifestyle. It also addresses false scientific claims made by radical LGBT groups. ^[33]

The following are a few quotes of former homosexual men taken from the documentary:

Caleb

“When I was about 5 or 6 years-old, a male molested me”

Rob

“same-sex attraction for me began when I was about 12 years-old, when I was sexually molested by a next door neighbour person at that age. It happened to be someone that I looked up to, someone that I admired that was really what shaped me down this path”

Stephen

“A very strong addiction developed very soon during my adolescence towards pornography”

Sean

“My motivation for seeking therapy was because the (homosexual) lifestyle was causing me a lot of pain and unhappiness in my life”

Rob

“to say that you can’t change your sexual orientation, that comes from so many people who have tried so hard and it never worked and when someone comes along and says it does, they get so incredibly offended by someone else being successful when they weren’t. I can understand it, that makes sense that some people are going to be upset about it, but the reality is many people have.”

7. Conclusion

DFL considers it illogical to promote the LGBT lifestyle in schools as ‘normal’ or ‘consequence-free’. It’s nonsensical to promote unscientific ideas like being “born that way” or being “born in the wrong body”. We should rather address the hurt and confusion caused by underlying issues so often associated with the LGBT lifestyle like traumatic experiences, mental abuse at home, history of sexual abuse and exploitation etc.

8. Recommendation

Children who reveal homosexual or transgender behaviour should have the opportunity to have their condition evaluated through therapy to help them understand where these thoughts and feelings come from. Especially since child sexual abuse is a known factor shared by many LGBT individuals. There has been contention around the subject of change therapy mainly because some LGBT groups claim that sexual orientation change therapy “harms the individual and is ineffective”. Although they made these negative claims about change therapy, these LGBT groups have not produced any form of evidence. They have however referred to methods used long ago that included shock therapy and other unethical forms of treatment for homosexuality because the scientists at the time believed it would help. Many forms of medical treatment and therapy have evolved and improved with time. The change therapy of our time focusses on talk therapy which explores underlying causes rooted in a person’s childhood experiences.

In an online survey with 125 same-sex attracted (SSA) men who sought help with their unwanted desires, were questioned on factors which helped or harmed their change therapy.

[34] page 9, “Techniques for SOCE”

- 87% said understanding the causes of homosexuality better and their emotional needs and issues helped.
- 83% meditation and spiritual work, helped.
- 78% found that exploring the childhood and family experiences and their SSA were helpful; and
- 76% said learning to maintain appropriate boundaries were helpful.

The hypothesis that any technique to help change SSA is harmful, is strongly rejected by Neil E. Whitehead’s, PhD publication called *Effects of Therapy on Religious Men Who Have Unwanted Same-Sex Attraction*. [34] Dr Whitehead worked for the New Zealand government for 24 years as a scientific researcher. He also contributed to eight major twin studies which prove homosexuality is not genetic. He noted that Neutral academic surveys show that half of the homosexual/bisexual population (without reparative therapy or counselling) moves towards heterosexuality over a lifetime. In other words, ex-homosexuals outnumber actual homosexuals. [35]

- 64% sought therapy for religious reasons, and only
- 3.2% sought help due to pressure from family.

This survey strongly refutes the claims made by the American Psychological Association that homosexual persons only seek therapy because of pressure from family and culture.

Research by Behavioural Scientist Lisa Littman at Brown University shows how some teens become confused about their gender after joining peer groups with other gender-confused teens. ^[36]

The study found that:

- 63% of the teens had been diagnosed with at least one mental health disorder before deciding they were a different gender,
- 23% of teens expressed distrust in non-transgender people,
- 25% stopped spending time with non-transgender friends,
- 50% of teens tried isolating themselves from their families,
- 47% of teens only trusted information about Gender Dysphoria (GD) from transgender sources.

This could explain the sudden rise in teens identifying as transgenders.

Children who experience gender confusion or same-sex attraction deserve the best care available. We need sound science as a foundation to address their distress and confusion while showing compassion to the individual.

Having said that, labelling those with opposing views with derogatory terms like “homophobes” or “transphobes” are also neither helpful or factual. It is fictional to state that anybody who disagrees with the LGBT lifestyle or practices are hateful. It could not be further from the truth as to why Doctors For Life are submitting THIS guidance.

Isn't seeking medical or scientific help a prudent course to take? Isn't it prudent to listen to the testimonies of men and women that have lived through transgenderism? Aren't the examples mentioned in this submission which point out failures of this type of implementation reason enough to pause, learn from, and rather err on the side of caution? DFL therefore urges the DA to re-consider its proposed guidelines on gender identity and sexual orientation in public schools.

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