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Bill C-6 needs more nuance: Conversion therapy is wrong, but pushing kids to transition medically is worse

When I was in my early 20s, I dated an older lesbian named Bee. Bee was the life of the party; she was the person everyone wanted to be around. As fun-loving as she was, everyone who knew her realized that her parents and childhood should never be brought up. I tried in the year we were dating, but I never got far until one day as we were driving home from a Christmas party. Bee had a little too much to drink and started screaming about how the house had mild porn everywhere. I tried to calm her down, but each attempt only made her scream louder.

After an hour, I decided to go home; I left her in the bedroom as I gathered my things. When I returned to say goodbye, she was in a ball in the corner, wailing with cries that sent a chill up my spine. She told me a story that is seared into my conscience, something I think about at least every week of my life.

In Bee's early teens, her mother found a love note from a girl in her backpack. Her parents were evangelical Christians and were not going to have a lesbian as a daughter, so they shipped her off to a mental institution that would show her images of soft porn. Every time a woman appeared naked, she received such an intense shock that a mouthguard was placed in her mouth to ensure she didn't bite her tongue in half. She remained in this facility for over a year, until her 15th birthday. The treatment didn't work; there she was, 44, and still dating women. But the experience left her broken.

I lived as a lesbian for 25 years, and this is just one story of several I have heard. Each account is heartbreaking. My experience was different, and I am thankful that when I came out, my father said to me, "Kellie, are you telling me you're a lesbian? Being a lesbian means nothing to me, and it shouldn't matter to you either other than one thing: you are attracted to women. Guess what, my child, me too, women are awesome. Don't allow yourself to believe that being a lesbian means anything more than that. You hold your head up and find a life partner and do the right thing with your wife's heart."

That was it for me, and I didn't realize how lucky I was. Each woman I introduced to my father was one more woman he fell in love with, one more devastation whenever I moved on. My father's heart broke many times until I found my life partner. I always made a joke about this, and I wish now I could look him in his eyes and tell him what a gift he gave me.

Conversion therapy for homosexuality is wrong, it doesn't work, and it breaks the soul of a human. The studies tell us there is no benefit, just a detriment. We think this barbaric therapy is no longer around, but <u>that's not true</u>; my ex-wife attended one not long ago, and again it didn't take.

Being gay is something you are; it cannot be changed through psychological or medical treatment. It can also not be induced by medical treatment. Did you understand what I just said? You cannot medically turn a human being homosexual; there is no drug out there that can make a homosexual straight or turn a straight person homosexual. No drugs can be taken or injected to make us homosexual or make us straight. No corporations benefit financially from people claiming to be homosexual or straight. No one

benefits economically. Because of that, the playing field can't be tainted by greed, and acceptance can't be falsely avowed for the sake of a dollar.

However, that's not the case with transgenderism. Six years ago, I began to transition to a transman, and within that timeframe, my insurance and me personally have been billed just under \$1 million USD. I realize that medical care is a human right in Canada, and I have the utmost respect for this; I also believe that medical care is a human right, not an opportunity for profit. But unless every vial of testosterone/estrogen/puberty blockers is free to the provincial governments, I ask that you take my words of experience into consideration.

What I am going to say is controversial in Canada, but not when cameras are off and people aren't afraid of losing their jobs: Having gender dysphoria is not a choice, but being transgender is; it's a feeling, a desire, a want. Amazingly, we now have the medical technology that allows biological women to create an illusion of looking like males through testosterone therapy and surgery. This modern technology has brought me peace. But at a high cost: the process is brutal on the mind, body, and soul. Being transgender is now a want that you can turn into reality. It can be created through medical intervention, but the treatments are NOT reversible and have significant risks; many people with gender dysphoria believe hormones are reversible, but they are not. Many parents put their kids on puberty blockers, thinking they are reversible, but they are not.

In the UK, the <u>NHS</u> recently realized this and is changing its stance; but it's something Canada has refused to look at. Why? We forget the massive amount of revenue generated by pushing our kids to believe they are transgender. Moreover, the doctors, social workers, and gender clinics are not being transparent about the myriad risks of medical transition.

During my own transition, I had seven surgeries to change my appearance to male. As side effects, I also had a massive pulmonary embolism, a helicopter life-flight ride, an emergency ambulance ride, a stress-induced heart attack, sepsis, a 17-month recurring infection due to using the wrong skin during a (failed) phalloplasty, 16 rounds of antibiotics, three weeks of daily IV antibiotics, the loss of all my hair, (only partially successful) arm reconstructive surgery, permanent lung and heart damage, a cut bladder, insomnia-induced hallucinations—oh and frequent loss of consciousness due to pain from the hair on the inside of my urethra. All this led to a form of PTSD that made me a prisoner in my apartment for a year.

Medical transition comes with significant risks and long-term effects that have yet to be adequately studied. What we do know is that the *long-term use of synthetic hormone therapy* shortens lives. Specifically, these medications are associated with an increased risk of heart attacks, pulmonary embolisms, bone damage, liver and kidney failure, mental-health complications, and more. Almost a quarter of hormone-therapy patients on high-dose anabolic steroids (such as the testosterone taken by female-to-male transitioners) exhibit major *mood-syndrome symptoms*. Between three and 12 percent go on to develop symptoms of psychosis. Children who claim to be trans typically are receiving such drugs at a pivotal time in the development of brains and bones. They've become a generation of guinea pigs.

The only long-term study on transgenderism was done in <u>Sweden in 1973</u>; it followed 324 medically transitioned adults for 30 years and tells us that medical transition reduces suicidal ideation for a short time, like the 2019 study "<u>Reduction in Mental Health Treatment Utilization Among Transgender Individuals After Gender-Affirming Surgeries."</u> But then it returns each year, gaining traction until it is

often higher after the medical transition than before. This 2019 study had the authors come back in 2020 admitting that even their data of the surge in significant benefit from medical transition was false, but the media didn't publicize the update. The problem is that most studies published nowadays are short-term. They all say that suicidal ideation is reduced, and that is true — at the start. What these too-short studies don't tell you is what I as a transman with many adult trans friends will: Later in life doubt and suicidal thoughts creep back in. As a transperson, you have to deal with what you have done to your body, you have to learn how to move within this world differently, you have to face the reality of biology. It is not all glitter bombs and rainbow lollipops. It's extremely hard.

Conversion therapy is wrong but pushing kids to transition medically is worse. Challenging children and adolescents to understand why they want to medically transition and how they can grapple with their gender dysphoria is healthy.

Homosexuality can be decided, then redecided, and then decided again. I don't truly believe that, but claiming to be a lesbian at 14 and then marrying a man at 25 does not have any lasting repercussions. Medical transition does.

Medical transition for gender identity is different than homosexuality; we have to look at them separately. Homosexuality is an attraction to the same gender. Transgenderism is wanting to be the opposite gender. One is something you are, and the other is something you want, and this is a significant difference. One can never be denied while the other can be created. If you allow yourself to bunch them into one giant glitter bomb, you will not see the forest for the trees.

Questioning a child about why they feel like the opposite gender, why they want to medically transition, is not bigotry. It's called good parenting. We seem to have lost the meaning of the word parenting; it's a verb for a reason. It's something you must actively do. Having children speak to their parents and a professional who understands all sides of the issue of desiring to medically alter their bodies is mature. Lord knows, it's not the easy thing to do. The easy thing to do in Canada right now is to succumb to the glitter bombs and resist having to challenge a group that has become disproportionately politically influential. But we have to ask the hard questions, regardless of the feelings we hurt.

Gender dysphoria is a feeling of disconnection of one's born gender; it's a mental illness than can and has shown to improve with therapy. Transgenderism is acting on this feeling by undergoing a medical transition, and this, my friends, no matter how much you don't want it to be, is a choice akin to plastic surgery. I know that is bothersome to hear, but reality is not transphobia. Reality is healthy; delusions are not. We owe it to Canadian children to really think about and study medical transition, fully understanding what they are getting into. Allow these kiddos to ease their gender dysphoria with the least invasive actions possible first. No matter how much our toddlers want to eat Jolly Ranchers all day every day, we do not allow that because we know the consequences while the toddlers do not. Time to step up to the parenting plate, Canada. I know it's scary, but we are talking about your children.

As a transman, I am often asked why I care so much about what happens to kids who are being pushed to transition medically, and I wish I could say it's for all selfless reasons, but it's not.

You see, most transgender people like myself are in the closet without a need to come out, and we live our lives without knowing what is happening within transgender politics. I just happened to get deathly ill from my transition, and it forced me to see what was happening. In one afternoon I read the Swedish study and learned about a transwoman who shot herself in the head at nineteen, leaving a note that she

could not have children and now realized she was gay man who no longer wanted to live with her broken body. I wailed the same way Bee did that night she told me about her conversion therapy. I felt a burden land on my shoulders that has given me a recurring nightmare.

The nightmare starts with a transman in his 20s dialing his parents through sobs: "Mom, I can't have kids, I wear diapers, no one wants to date me, and my choices for a life partner are slashed by 90%. The doctor just told me I have early-onset osteoporosis, and I will be dependent on drugs for the rest of my life. Mom, I was a lesbian and a kid; why did you let me do this to my body? I am now trapped in the wrong body."

The child's mom tries to comfort her daughter through the phone but hears a boom as the 357 magnum sends a bullet through her child's brain.

Have you ever heard a mother screaming, knowing her child just died? I hear it every night as I jump out of bed; the sound will NEVER leave me.

What's the alternative to my dream? A loving home with a caring therapeutic process that challenges and protects children, nurturing them to either:

a. transition as an adult with a fully developed brain (after the age of 25) and full and complete knowledge of the process and side effects;

b. grow up and out of wanting to be the opposite gender and embrace themselves as either gay or gender-nonconforming or possibly autistic.

<u>'For decades, follow-up studies of transgender kids have shown that a substantial majority -- anywhere</u> from 65 to 94 percent -- eventually ceased to identify as transgender.'

You are being hornswoggled if you believe that medical transition is something a child should decide or be allowed to endure. That is why I urge Canada's politicians to remove "gender identity" from Bill C-6.

RECOMMENDATIONS:

- 1) Remove "gender identity" from Bill C-6.
- 2) If unable to entirely remove, make amendments to the language to clarify exactly what conversion therapy is and to distinguish it from regular therapeutic talk therapy, particularly regarding gender identity, which might help a child or adolescent (under the age of 25) be more comfortable with their natal sex, thereby helping them avoid irreversible changes to their body through surgical and medical interventions.

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