



INTERNATIONAL FEDERATION FOR
THERAPEUTIC & COUNSELLING CHOICE

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May 4, 2022

Re: Proposed UN CEDAW-based ordinance in San Diego County, California, USA

Honorable San Diego County Board of Supervisors,

San Diego County has proposed a gender civil rights ordinance based on a proposed UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) wherein “women and children” would be defined by gender identity [1]. In prioritizing gender over sex, the proposed ordinance bizarrely prioritizes a person’s perception of their sex—a changeable social construct, over a person’s inborn sex—who someone unchangeably is.

A global Consensus Statement on intersex and related disorders by several endocrine societies around the world makes it clear that gender incongruence is not an inborn biological trait. It is not an intersex condition of the brain. The Consensus Statement says there is no consistent evidence that the brains of gender incongruent people are different from the brains of gender congruent people. It says feminine and masculine aspects of the brain develop gradually over time through the interaction of biological influences and psychological and social life experiences (“biopsychosocial” development) [2].

What kinds of psychological experiences may be causes? International research in Australia, Finland, the United States, and Canada has found that adverse childhood experiences, bullying for reasons other than gender, psychiatric disorders, neurodevelopmental disabilities, and suicidality commonly exist *prior to onset* of gender incongruence or distress [3,4,5,6]. Therefore, these may be causal influences. They may predispose a person to believe they would feel more secure or valued if they were another sex [7,8]. The Recommendation for treating gender distress from Finland’s government and from the United Kingdom Secretary of Health is that gender distress in minors should be addressed by treating underlying psychiatric conditions or causes, not by medical affirmation [9,10]. The Swedish government also is prioritizing psychotherapy for minors, and the National Academy of Medicine in France is following Sweden [11,12]. Societal affirmation deprives gender distressed people from knowing what may really help them.

Increasing societal and medical affirmation over nearly half a century has made little to no change in the higher rates of psychiatric disorders, attempted suicides, and

completed suicides of gender incongruent people over the long term of their lives [13,14,15]. The proposed UN CEDAW-like ordinance would falsely tell gender distressed people that their condition is like being a member of a race or an ethnic group, further preventing them from seeking help to understand their conflict between their innate body and their changeable feelings and the distress they may feel about this conflict. Increasingly, gender incongruent people are regretting the social and medical affirmation that has failed them, that has not heard them and their deep underlying stress. They are detransitioning in growing numbers and making their voices of protest heard online [16,17].

There is no scientific justification for misleading suffering gender incongruent people. The additional cost of erasing biological women and girls and their rights in San Diego County ordinances will not likely increase much needed empathy for gender incongruent people in San Diego. This proposed ordinance is in the end a lose-lose for everyone.

Respectfully,

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