

Wise Women Glasgow

Question 1. Do you have any comments on the proposal that applicants must live in their acquired gender for at least 3 months before applying for a GRC?

This is a response to Q1 & 2 as comments are the same.

To be honest we questioned the right we have as a service which comprises of (currently) biological females who are not in a position of questioning or having to consider our gender status to have an opinion on this. This is not a process we have (as individuals) had to consider.

However we are a highly experienced Survivor led service of 27yrs working with women in local communities who are dealing with issues concerning their physical, emotional and social health, living with discrimination, marginalisation and complex social circumstances. We work with women who have multiple experiences of violence and abuse which has left some of them with few options therefore targets for exploitation from others and sometimes unable to make positive life choices.

The new proposals have stated a wish to make the application process easier for transgender people. We would support this however it will open up the process to a much larger group of people than the original law ever intended and given the removal of required medical monitoring, support and safe guarding it could be subject to exploitation and misuse (see Self-ID)

We recognise that the medicalisation of Trans people is inappropriate, offensive and degrading. However the removal or lack of monitoring, support and safe guarding throughout both declaration and consideration stages greatly concerns us for a number of reasons including the following

1. What evidence is required to prove the applicant has been living in their acquired gender for 3 months prior to an application given that many trans people (as stated in the proposals) do not feel safe to do so? This means some Trans people would be unable to provide this evidence.

Alternatively they could simply Self-ID declaring that, for example, despite living as a openly biological man and continuing to do so they can identify as a woman therefore able to access women's services, safe accommodation, women's changing facilities. (Also see Q4&5)

2. How can assurances be given that the applicant isn't being forced, coerced, manipulated to make this change particularly if the age of declaration is being reduced from 18 to 16.

In addition our work with young women survivors often highlights the problematic relationship they have with their bodies and pressures to conform to social norms with many citing a hatred of their bodies. Consultations with our service users on body image highlighted concerns that a desire to change our bodies now doesn't just mean fad diets or plastic surgery but gender reassignment.

The links between sexual abuse and body trauma are common with one young woman stating...

"sometimes I think it would be easier to be a man. At least I would be safer"

Safe guards need to in place to help identify the above issues and sign posting to appropriate support services.

3. Whether an applicant is 100% certain they are a trans person, this change will inevitably bring challenges and possible barriers which could place the applicant in a highly vulnerable situation opening them up to risk and possible exploitation. Safety Assessments' have to be carried out.

4. Body Dysmorphia Disorder (OCD) Action research shows us that approx 0.5- 0.7 of the UK population has BDD. Removing assessment and monitoring processes will potentially greatly increase applications for sex change surgery possibly leading to requests to de transition at a later stage which may not be possible under the new proposals.

5. Risk assessments' must be in place to ascertain if an applicant's sole intent is being able access single sex services and accommodation with the view to exploiting the process for the purposes of sexual violence and abuse.

Whilst the proposals state that fraudulent claims will be a criminal offence, how will that be identified and responded to?

Proposal: Given our comments we would propose during declaration at least 3 compulsory support , safe guarding, monitoring and risk assessment sessions are held with a further 3 during the 3 month reflection time.

Question 2. Do you have any comments on the proposal that applicants must go through a period of reflection for at least 3 months before obtaining a GRC?

Yes see above.

Question 3. Should the minimum age at which a person can apply for legal gender recognition be reduced from 18 to 16?

No

We have concerns that the removal of support, safe guarding, monitoring and risk assessment processes (see previous comments) will inevitably increase the number of applications from 16 year olds with possible requests to de-transition at a later stage also increasing. Given de-transitioning may not be possible it would have a major detrimental impact on a young persons, mental, social, physical health and personal development.

We recognise that 16 year olds already have the right to marry, vote, determine medical procedures, work and immigrate etc. however these are rights that an

individual can choose to assert / use / opt into or out much easier than an emotional and medically problematic de-transitioning process.

We feel for reasons stated in Q 1 &2 and however reluctantly we would say 18 should remain as the minimum age.

Question 4. Do you have any other comments on the provisions of the draft Bill?

There is much confusion about the status of the Bill in Scotland considering our current legislation meets European Law and that some of the proposed changes are reserved issues for Westminster.

At the same time it is widely acknowledged that in pursuit of equality for Trans communities some aspects need to be reviewed and updated. However, the Scottish Government proposals have failed to fully take into account the complexities and potential impact of allowing a person to Self-Identify as the opposite sex without any assessment, monitoring, support and safe guarding and the effect this could have on other protected characteristic groups.

i) Violence Against Women is a fact and the most common and damaging expression of sexism and misogyny there is. This is acknowledged in Scotland, the UK and Globally with strategic policies and practice to in place to address, challenge and reduce the threat, harm and risk to women and girls.

"The Scottish Government's vision is of a strong and flourishing Scotland where all individuals are equally safe and respected, and where women and girls live free from all forms of violence and abuse - and the attitudes that help perpetuate it. No woman or girl in Scotland should be subjected to violence or abuse of any kind (physical, emotional, sexual or psychological) and no child or young person should have to experience gender based violence or have to live with the impact of it". (Scottish Government Equally Safe Strategy)

Wise Women's Equally Safe Consultation for the Scottish Government highlighted that 112 women experiences 515 different types of Abuse (not incidences) Perpetrators were overwhelmingly men including: Domestic Abuse 92%, Rape 100%, Sexual assault 98%, Child Sexual Abuse 100%.

These acts are not the fault or responsibility of trans people. However the self-declaration of sex without any form of monitoring or risk assessment will not only contradict Scottish Governments intent to reduce and eliminate violence against women and girls but will, in fact, provide an open door to predatory men to gain access to women safe spaces, toilets, changing rooms, female survivor groups, support service and most worryingly women's supported accommodation. This is already happening.

Women in local communities are extremely poorly informed about these proposed changes. This means women are unable to self-risk assess whether they will use certain services if biological men posing as women are allowed access.

Women are not necessarily at risk from trans women or trans men. We are at risk from those men who would choose to use these proposals and the GRA to its fullest to further exploit women, girls and boys. And they will. Can the Scottish Government really afford to take that risk? We can't?

ii) Self-ID and Public Services:

Any guidelines and proposals need to be clear in their definition of Sex and Gender. Removing the biological meaning of 'man' and 'woman' is majorly problematic. In taking this further if it means a man purely by self-declaring is a woman, what does that mean for women's rights? Also the provision of organisations reliant on designing, monitoring and responding to services based on biology and anatomy (NHS male and females have different health indicators, single sex wards, request to be seen by a particular GP) Criminality and criminal justice (biological males identifying as women being charged with sexual offences and if charged placed in women's prisons) Rehab facilities (that recognise the safety and need for female only space to minimise the risk of abuse, commercial sexual exploitation and drugs relapses), Cultural and Religious services.

Question 5. Do you have any comments on the draft Impact Assessments?

We did not feel the Impact assessments has taken into consideration the full potential impact on single sex services as a result of any policy or legislative changes around the Gender Recognition Act (this includes single sex men's services of which there are woefully few).

A full and in depth impact assessments would highlight for example:

- The adverse risk of abuse and exploitation of women and girls by reducing safe spaces.
- The risk to women's services providing support to females who wish to gender reassign to a man and maintaining its single sex status under the current Sex Discrimination Act
- The potential impact on women from other cultural and religious backgrounds if male bodied women or men wish to attend the same services/ groups etc.
- The lack of specific services for the trans community including a lack of funding for LGBT organisations
- The invisibility of Trans Men
- The impact of skewed data collection based on biology.

The Scottish Governments desire to find a "balance of opinions" is, we feel, ill thought out. We believe more time is required to get a fuller more balanced discussion from services who work directly with a wide range of protected characteristic groups and not only Strategic Policy based services who are far removed from the communities who will be affected by any change in policies.