



WHAT ARE THEY HIDING?

*The Case for a Royal Commission
into Australian Gender Clinics*





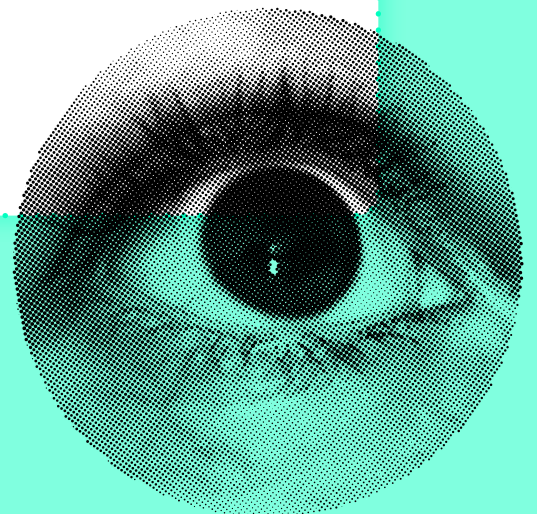
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WHAT IS A ROYAL COMMISSION?

Put simply, a Royal Commission is a public inquiry, the highest and most in depth form of inquiry available to the Australian Government. It is reserved for matters of serious importance.

Given terms of reference with key areas to investigate, a Royal Commission has the power to gather information and call witnesses both from organisations and individuals, to provide evidence.

A Royal Commission has a set timeline in which the findings must be returned, revealing an in depth investigation of the matter at hand. These Inquiries are able to reveal information on matters of public importance that would otherwise be kept hidden by those being investigated.





WHY WE NEED A ROYAL COMMISSION

Let's throw a light into the dark corners of Australia's Gender Clinics, the hospital services where parents take children confused about their gender, expecting help.

Instead of helping confused children learn to accept their body, the only option presented to them is to receive what is known as 'gender-affirming care'.

This means doctors simply believe a child or adolescent who says they're transgender and conversations begin about the pathway to transition. If you were born a boy, and now identify as a girl, they'll do what they can to change your body accordingly.

The trans activists say there is nothing to see here – it's just transgender children getting the 'healthcare' they need. When that means puberty blockers, cross-sex hormones and breast removal they applaud.

But what if the Gender Clinics get it wrong?

For years Australian parents – and some doctors – have been warning about the dangers of the 'affirmation-only' approach to childhood gender dysphoria, and the dangers of treating children with experimental and irreversible medication and surgery.

Until very recently, those warnings were ignored by politicians and health bureaucrats, ignored until a landmark legal case in the UK led to the closure of London's Tavistock Gender Clinic.

According to the ABC:

"Tavistock had become a major influence globally in how to treat young people who are transgender or who are questioning their gender identity."

However, the so-called treatment offered to these vulnerable children was experimental and deeply flawed.

The gender clinic did not have a proper understanding of the side-effects and long-term impacts of the irreversible treatments. As a result, there is now a major inquiry into Tavistock's disastrous treatments.

Again from the ABC:

"But a review found the clinic failed vulnerable children, with families now arguing their children were rushed into treatment and given puberty-blocking drugs they now regret."

This kind of inquiry – nothing short of a Royal Commission – is exactly what we need in Australia.

Many countries that had previously embraced 'affirmation-only', have now moved to restrict access to these 'treatments' as long term studies are conducted into their harmful and dangerous consequences.

There are countless stories and examples of regret and 'buyers remorse', as awareness is raised on the issue.

A Sydney woman named Jay Langadinos is suing a psychiatrist for professional negligence after he approved hormone therapy, a bilateral mastectomy, and a hysterectomy in 2010 when Langadinos was just 19-years-old and wanted to transition medically into a man.

These cases show that this is a serious issue that requires as much oversight and care as possible. Currently in Australia, there is very little of either.

Only a Royal Commission into Australia's gender services will get to the bottom of this before it's too late for too many children.

The Australian public has a right to know what is happening in these services, and if Australian children are being subjected to the same experimental, irreversible, dangerous and harmful medical treatments that saw the Tavistock clinic sued and shut down.

Let's expose Australian Gender Clinics and the doctors, bureaucrats and activists who run them.

WHAT ARE GENDER CLINICS & WHAT TREATMENTS ARE THEY PRESCRIBING?

What are Gender Clinics?

A Gender Clinic is a medical facility that claims to provide "healthcare and gender affirmation services to transgender, gender diverse and non-binary" people".

In practice, 'gender affirmation services' is a euphemism for irreversible and experimental medical interventions that attempt to medically alter a person's body to 'match' their inner feeling of gender. In Australia, Gender Clinics operate exclusively under the 'gender affirmation protocol'. This protocol – currently under intense global scrutiny – involves affirming a patient's self-described gender confusion and beginning the pathway to medical transition.

Alarming, this lifelong path of medicalisation is entirely avoidable given research shows 80-90% of children who are not medically transitioned grow out of their gender dysphoria by the end of normal puberty. We should not be rushing these vulnerable, gender non-conforming children into puberty blockers, cross-sex-hormones, and surgeries.

What 'treatments' are they prescribing?

'Gender-affirming care' – as it's known – involves experimental regimens of puberty blocking drugs, cross-sex hormones, and even surgeries in an attempt to change one's body to align with their mind.

Side effects of even the most supposedly benign treatments, puberty blockers, **include total loss of adulthood sexual satisfaction, infertility, osteoporosis, impaired brain development, heart disease, and stroke.**

Concerningly, key data on the treatments and patients receiving them are largely unknown. The number of patients seen, the type of treatments, the ages of patients, speed of prescription, and what – if any – psychiatric services are offered before the medical transition pathway begins, are all questions in need of answers.



HERE ARE THE 5 REASONS WHY

WE NEED A ROYAL COMMISSION



ONE

70% OF GENDER CLINIC
ADMISSIONS ARE HIGH
SCHOOL AGED GIRLS

The rapid explosion in children and adolescents enrolled in 'Gender Clinics' – 70% of whom are girls – has experts concerned.

Between 2014 and 2021, the number of Australian children and adolescents being referred to Gender Clinics has risen exponentially – in the thousands of percent. In Victoria, the number more than doubled between 2020 and 2021 alone.

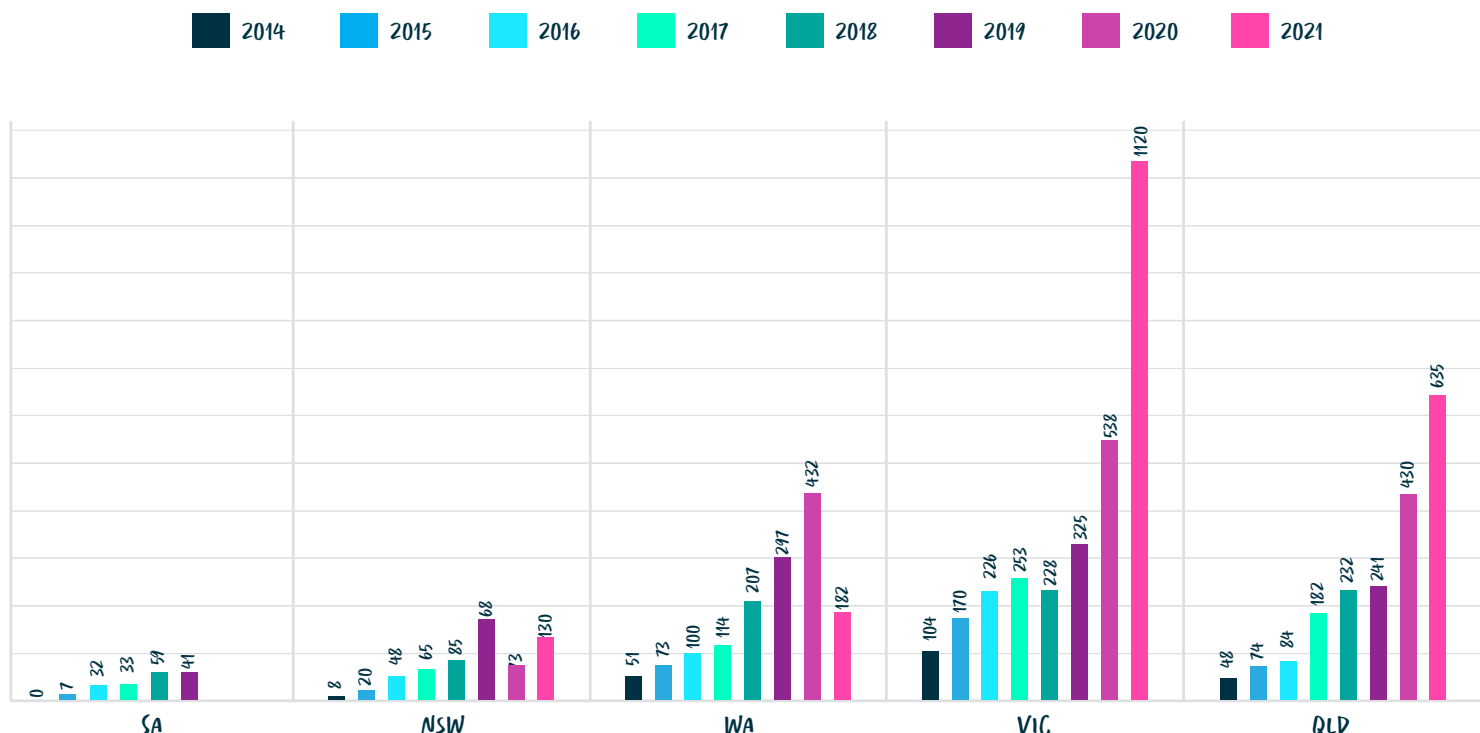
According to Professor Dianna Kenny, these numbers only show young people receiving treatment in public hospitals, and not those being 'treated' by private practitioners or in new clinics such as Maple Leaf in Newcastle for which no figures are available¹.

Around the world, many parents, academics, doctors, psychologists and psychotherapists are deeply concerned this trend is not organic but rather attributable to social contagion spread through peer, cultural, and social media influence.

One of the most disturbing features of this social contagion is that across western countries, over 70% of Gender Clinic admissions are high school aged girls between ages 12 and 17.

A Royal Commission will allow us to better understand the true causes behind this sharp rise and ensure patients are not being rushed down a life-long medicalised pathway.

Number of children and young people enrolled in GD Clinics by state in Australia 2014-2021



¹ Dianna Kenny is a former Professor of Psychology at the University of Sydney, currently practising as a consultant psychologist and psychotherapist.

TWO

'Gender affirmation' treatments are experimental, irreversible, and lack beneficial evidence.

Many doctors around the world have been warning about the use of puberty blockers and the dangers of using them in Gender Clinics.

Paediatrician Dr Dylan Wilson is one of them¹. In an open letter to all Australian doctors, Wilson wrote:

"When [Gender Clinics] say puberty blockers are a 'pause' to give children time to think, they are certainly being economical with the truth. They know that those children are now set along this pathway. There is no pause. There is no reversal."

The first stage of 'gender affirming healthcare' is the prescription of puberty blockers which stop the natural release of hormones that occur during puberty. Children as young as 10 receive blockers usually through to their mid-late teens – some of their most formative developmental years of their lives. Side effects include total loss of adulthood sexual satisfaction², infertility, osteoporosis, impaired brain development, heart disease, and stroke³.

A Royal Commission can tell us the truth about the drugs these Gender Clinics are giving to physically healthy Australian children.

¹ Dr Dylan Wilson: Open Letter to Australia's Doctors.

² Dr Marci Bowers, prominent 'gender-affirming' doctor

³ Healthline: 'What Is Chemical Castration?'



"[These treatments are] not fit for purpose and children's needs are being met in a woeful inadequate manner, and some will live on with the damaging consequences."

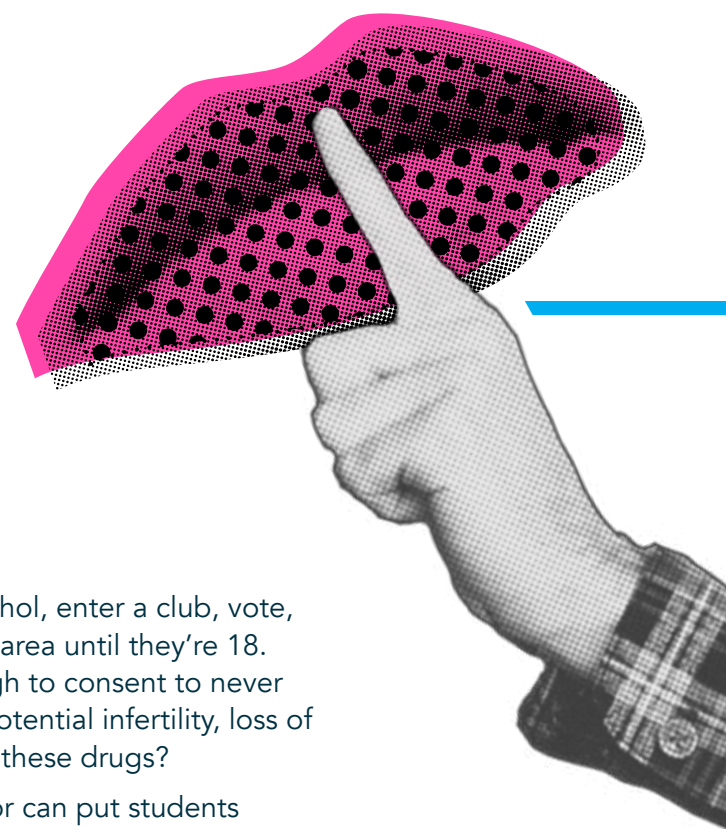
PSYCHIATRIST DR DAVID BELL,
UK TAVISTOCK GENDER CLINIC WHISTLEBLOWER

"There is no other field of medicine where such radical interventions are offered to children with such a poor evidence base."

DR STEPHAN LEVINE,
CLINICAL PROFESSOR OF PSYCHIATRY



THREE



Children and adolescents cannot give informed consent.

In 2020, the UK High Court ruled that under-16s cannot give informed consent to treatment with puberty blockers. Yet in Australia, children as young as 10 continue to be prescribed these life altering drugs¹.

We don't allow children to smoke, drink alcohol, enter a club, vote, get a tattoo, or get a piercing in an intimate area until they're 18. How then could a child be developed enough to consent to never experiencing sexual intimacy in the future, potential infertility, loss of bone density, or an endocrine disorder from these drugs?

In some states, a school teacher or counsellor can put students on a transition pathway without the consent of their parents or consultation with a psychologist.

¹ UK High Court Judgement: *Bell v Tavistock*.

² Department of Education and Training Victoria, 'LGBTIQ Student Support: Parental Consent'



FOUR

The rest of the world is stopping.

Many countries around the world are putting the breaks on the medical transitioning of minors as we gain a better understanding of the negative long term impacts.

Places like Sweden, France, and Finland have banned these 'gender affirmation' treatments for children while the UK is undergoing a major review¹.

In the UK, major gender clinic Tavistock has been told to close their doors after former adolescent patients, now in adulthood, have testified of their negative consequences from treatment. Over 1000 families are expected to join a class action law suit against the Tavistock gender clinic² *alleging vulnerable children have been misdiagnosed and placed on a damaging medical pathway.*

In light of growing evidence, New Zealand's Ministry of Health also has changed it's official position on Puberty Blockers, removing the words "safe and fully reversible medicine" from it's guidelines.

¹ Cass Independent Review: Interim Report

² The Times UK: Tavistock gender clinic 'to be sued by 1,000 families'

THE TIMES

TAVISTOCK GENDER CLINIC 'TO BE SUED BY 1,000 FAMILIES'

NATIONAL
REVIEW

April 6, 2022

**France's Academy
of Medicine Urges
'Great Medical
Caution' in
Blocking Puberty**



SEGM
SOCIETY FOR EVIDENCE
BASED GENDER MEDICINE

May 5, 2021

**Sweden's Karolinska Ends All Use of Puberty
Blockers and Cross-Sex Hormones for Minors
Outside of Clinical Studies**



FIVE



Gender Clinics have not been collecting relevant data or tracking long term outcomes of patients.

In an open democracy like Australia, the public has the right to know how public money is being used. This means full transparency on how Gender Clinics operate and guidance from the top down.

Yet, as Professor Dianna Kenny points out, we don't know the full extent. We don't have the numbers from private clinics, we don't know what vulnerable children are being told, and we don't know the potential harm being done.

In a democracy, public health is just that, public. We're best served by a transparent health department and system.

"In December last year, after being contacted by doctors and psychiatrists concerned at the lack of data available on this trend in Australia, I wrote to the chair of the Health Chief Executives Forum, requesting public release of the data and responses provided by states and territories. I noted in my letter: 'The release of the data provided by states and territories would enable experts and practitioners to better understand this trend and study the underlying causes. It is evident that a significant amount of policy development in this area has occurred without public transparency, independent scientific oversight or adequate collection of data and evidence.'"

Professor Dianna Kenny

In June 2020 the Health Chief Executives Forum asked member jurisdictions to provide advice on this issue. Jurisdictions operating Gender Clinics were asked to provide information of referral pathways, the clinical services provided, what clinical guidelines are adhered to, what data is collected and whether any long-term monitoring is undertaken. So far, so good. But, after outlining what information was sought from the states, the letter goes on to say: "No information about the number or nature of patients was collected." After discussion, members agreed the Health Chief Executives Forum would not progress this work.

Australian doctors have been warning for years about the dangers of gender ideology, and particularly the affirmation-only approach and a medical pathway for physically healthy children.

But the gender activists pushed on anyway.

They put the lives of young Australians at risk and promoted an ideology that preys upon legitimate mental health issues.

A Royal Commission will tell us how much these Gender Clinics have known about the dangers and chosen to ignore.

