

Saturday January 28th 2023

Legal Affairs and Safety Committee Secretariat
Parliament House
George Street

BRISBANE QLD 4000

Dear members of the Committee,

I am making this submission to express my concern about the Queensland Attorney-General and Minister for Justice, Shannon Fentiman's proposed Bill: The Births, Deaths and Marriages Registration Bill 2022.

I am a psychiatrist practising in South Australia in both the private and public sector for the last twenty-seven years. I have developed a special clinical interest in Gender Dysphoria (GD) and Gender Diverse people (TGD) over the last four years, and have peer-reviewed publications in Gender Mental Health.

In recent years the dominant model of care for GD and TGD has been the Affirmation Model of Care promoted internationally by WPATH and nationally by AusPATH. The Affirmation Model of Care consists of:

1. Social Transition: changing of name and pronouns, including identification documents, dressing in the clothing of the identified gender, and adoption of gender stereotypes, in keeping with the desired gender.
2. Medical Transition: use of medications to suppress the changes associated with puberty in minors, and of cross-sex hormones to promote physical changes in the body more consistent with the desired gender.
3. Surgical Transition: use of surgical procedures to cosmetically alter the appearance of the body to be more in keeping with the desired gender.

The Affirmation Model of Care is based on one small study (N=55 subjects, with only complete data for 40) reported in two publications, collectively known as the Dutch Protocol^{1,2}. The only attempt to replicate this study failed to replicate the results reported in the Dutch Protocol³. A recent comprehensive review of the original study concluded that had the Dutch studies been published today for the first time, the "innovative practice" of using hormones and surgery to gender-transition children and young adults

would never have been permitted to enter general medical settings due to the very low quality of the research, and problematic outcomes experienced by several of the young people⁴.

Over the last five years there has been considerable scientific scrutiny of the Affirmation Model of Care, including four systematic reviews of the literature in four different jurisdictions⁵⁻⁹. Following these systematic reviews of evidence, three European countries; Sweden, Finland and England, have begun to articulate new and much more cautious treatment guidelines for gender dysphoric youth, which prioritise noninvasive psychosocial interventions while sharply restricting the provision of hormones and surgery¹⁰⁻¹³. In Florida, such was the concern about the risks of medical affirmation, and the lack of evidence of benefit, that this practice has been made illegal for minors.

Of more immediate relevance to the Legal Affairs and Safety Committee is the conclusion from the UK's Independent review of gender identity services for children and young people, that *social transition* is a form of psychosocial intervention and not a neutral act, as it may have significant effects on psychological functioning. The NHS strongly discouraged social transition in children, and clarified that social transition in adolescents should only be pursued in order to alleviate or prevent *clinically-significant distress* or significant *impairment in social functioning*, and following an *explicit informed consent process*. This has direct implications regarding the Queensland's Government proposed Bill. Rather than the Bill enabling every Queenslanders to live authentically and allow their rights to be preserved, it may in fact be endorsing a social experiment with very significant future risks for a significant number of vulnerable members of Queensland society.

I recommend that The Births, Deaths and Marriages Registration Bill 2022 be suspended until the Queensland Government can arrange an independent Inquiry into the management of Gender Dysphoria and Gender Diverse people in Queensland, and of Gender Services in Queensland; and this Inquiry has publicly reported its findings.

Thank you for the opportunity to make this submission.

Yours Faithfully,

Dr Patrick Clarke

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