**This submission is made by The LGB Alliance Ireland**

**LGBAI is a group representing LGB people on the island of Ireland, who have concerns about LGB rights in relation to gender identity theory. If you have any questions regarding our response, we can be reached** at: lgballianceireland@gmail.com

*1. Has the State adopted, in public policy, legislation or jurisprudence, working definitions of gender and related concepts (for example gender theory, gender-based approaches, gender perspective, gender mainstreaming) aiming to address violence and discrimination based on sexual orientation and gender identity? If so, please give examples, with commentary as needed to explain context, scope and application.*

1. *if that is the case, has the State carried out evaluations, assessments or evidence-gathering about the impact of the implementation of such actions and, if so, what are the main trends identified?*
2. *if that is not the case, please provide information as to the reasons.*

**Answer:**

We do not understand why gender and sexuality have been conflated in this question. Sexual orientation has nothing to do with gender identity.

People in Ireland can “self ID” as the opposite sex, with the legislation even declaring that the “biological sex” of the person seeking a gender recognition certificate (GRC) actually changes. This is a legal fiction. Biological sex cannot be changed.

Sexual orientation has been clearly defined by society for a long time. Homosexuality means same-sex attraction. That means men who are attracted to men or women who are attracted to women, i.e. people of the same biological sex. Bisexuals are attracted to both sexes. Sexual orientations refer to biological sex. In order to protect the rights of sexual minorities, there is no need to define the term "gender".

In order to protect the rights of women, for example, the right not to be incarcerated with males, sex based protections must take precedence over the right of trans identified individuals to access services not pertaining to their biological sex.

*1.*

*What kinds of information and data are collected by States to identify forms of violence and discrimination faced by people based on sexual orientation and gender identity? Is the data designed to capture causes and patterns of violence and discrimination against lesbians, gay men, bisexual women, bisexual men, trans women, trans men, and gender diverse persons?*

*a*

*does this data collection take an intersectional approach (for example, connecting an individual’s multiple social categories to enable more precise analysis (e.g. collecting data about LGBT persons by identities such as race, age, national status and ethnicity)?*

*B.*

*does the data include information on the relationship between victims and perpetrators?*

Accurate data collection regarding violence and discrimination based on sexual orientation and gender identity in Ireland is impossible. The state has self ID laws, which mean that any male can declare himself a female, without any medical gatekeeping whatsoever. This means that if a violent criminal declares himself to be a woman, during his trial, and pays thirty five euro for a gender recognition certificate, the state must recognise his crime as a female crime, and house him in the female estate.

Given that violent prisoners used to pretend to be clinically insane to get easier prison time, it seems likely that a number of prisoners will take advantage of this loop hole regarding self ID.

Ireland is also bringing in a piece of government legislation on hate crime. This bill is so extreme that it criminalises perfectly ordinary, and very widely held views. Questioning the presence of a fully intact male in the women’s changing room will become a transphobic hate crime. A lesbian saying that she is same sex, not same gender attracted, and would not date a transwoman, will become a hate crime. Saying that transwomen maintain male patterns of violence after transition will become a hate crime.

Correctly stating the sex of a person, like Alex Drummond, who has a full beard and claims to be a lesbian, will become a hate crime. Advocating for more comprehensive treatment for dysphoric individuals, instead of the affirmation model, will become a hate crime. Supporting women’s rights online, even asking questions such as “do you think people with penises should be allowed to change with women and girls” may become a hate crime.

This is not good for women, it’s not good for trans people, and it’s not good for the country.

The conceptual problem with the hate crime legislation is that almost anything could be regarded as “transphobic” and a hate crime. Even talking about women’s issues such as cervical screening, breastfeeding and childbirth may be regarded as “transphobic” by some, as it excludes transmen/ transwomen. It is not clear what the badly drafted legislation will criminalise.

All this makes it very difficult to collect and understand accurately the extent of actual homophobic and transphobic hate crime. It is worth noting that policing is not necessarily done in an even handed way. For example, a teenager in Kerry sent a series of abusive text messages to Ian Wright after his Fifa character performed badly, in the teen’s computer game. He was prosecuted and a conviction obtained for hate crime. Meanwhile, the members of LGBIA have had countless death and rape threats online, which were all merely recorded as “hate incidents” and no action taken.

*4.*

*Is comprehensive sexuality education taught in schools?*

1. *if yes, please provide information as to the respective programs. Please provide examples (e.g. copies of curricula, citations to polices).*
2. *if not, are there efforts deployed by the State to establish and promote comprehensive sexual education, which incorporates diverse sexual orientation and gender identity perspectives? What have been the obstacles to adopt such policies or programs? Also, is the State adopting any alternative measures?*

**Answer:**

An organisation called “BeLonGTo” goes into schools in Ireland and claims to teach gender and sexuality. However, even a cursory glance at their materials shows that their approach is skewed towards gender and away from sexuality, and is actively dangerous to young people.

• It is mentioned in a casual way that LGBT+ people are more likely to commit suicide, but no guidance is provided around suicide prevention. There are well-established guidelines on how to speak about suicide however these are not adhered to by the BeLonGTo programme.

• BeLonGTo reinforce harmful stereotypes by suggesting that girls who prefer to dress in trousers and have short hair are really boys, and that boys who like make-up and glitter are really girls. Gender nonconforming children should not be encouraged to medicalise their existence in order to conform with stereotypes. Almost nobody’s “gender identity” completely corresponds to their biological sex.

• The guidance is completely unbalanced in favour of trans issues. There are 47 mentions of the word “trans,” but only 4 of “lesbian” and “bisexual,” and 8 of “gay.”

• The guidance does not include the word “homosexual,” which means that students are unaware of their protections under the Equal Status Act. This is also a purposeful attempt to redefine sexual attraction as attraction to genders: biological sex is mentioned 10 times, and gender 41.

• Existing safeguarding best practice is that children should not be asked to keep secrets, or to contact people online who they don’t know in person. However, BELongTo encourage children to make contact online and to keep secrets from their parents.

• In a situation where a child says they “are” trans, but doesn’t want to take any action, a teacher could keep the confidence of that student. However, if a child wishes the school to refer to them differently, treat them differently etc, the family should not be excluded from this process. No such distinction is made in this guidance.

• The guidance states that trans identified students should be able to use toilets/ locker rooms/ showers/ sleep in dorms “corresponding to their gender identity.” We appeal to the good sense of teachers. Would you be happy with a fifteen-year-old, trans identified, male bodied child, to shower with girls, sleep in the same dormitory with girls on overnight trips, and play on the girls rugby team? How would the parents of these girls react? How can mixed sex showers and dormitories be compatible with even the most basic safeguarding of girls?

• In direct contravention of the Dept of Education’s guidelines, this guide suggests that trans children should not be obliged to participate in PE. Encouraging self-exclusion from sport on the basis of gender identity is damaging to the trans identifying child, it prevents the potential of social inclusion as well as impacting their mental and physical health.

• The guidance is marketed as LGBTI+ guidance, including intersex under the LGBT umbrella. Intersex is only mentioned once in the guidance, and the definition suggests that intersex is “not fitting in with typical male or female bodies.” In fact, all intersex people are either male or female, and being intersex is not an identity, it is a disorder of sexual development.

• Most intersex people find out they are intersex during their teens. Most intersex people do not want to be included under the LGBTI+ banner. We ask teachers to imagine a child who has just found out that they are intersex finding that they are nominally included in LGBT lesson materials, but that the definition of their condition is offensive to them, and their issues are not covered in any meaningful way.

• BeLonGTo choose not to include any information about detransitioning despite the high numbers of young women detransitioning and despite the ongoing court case in the UK taken by Keira Bell who transitioned as a 16-year-old girl and now, at the age of 23, regrets having had a mastectomy and full medical transition. Keira has stated how she believes the “affirmative” approach to her distress led her to make an inappropriate transition when she was young and vulnerable.

Dr John Money, a psychologist and sexologist, was one of the original proponents of gender identity theory, which drives so much of the modern approach to gender. He forcibly “reassigned” a boy called David Reimer, whose genitals were severely damaged during a botched circumcision, as a girl. Money subsequently forced Reimer and his brother to engage in sexualised activities, which Reimer states that he photographed on one occasion. We find it hard to understand why Money’s theories of gender identity are so widely adopted, given how controversial its origins were.

Giving children honest information about gender and sexuality, in childhood, is vital; mistakes in this area can be catastrophic, as they were for David and his brother, both of whom committed suicide as adults.

http://www.hawaii.edu/PCSS/biblio/articles/1961to1999/1997-sex-reassignment.html

*7. Are there examples in which narratives or “gender ideology,” “genderism” or other gender-related concepts have been used to introduce regressive measures, in particular but not limited to LGBT persons or communities?*

In our view, genderism itself is a regressive measure. We believe that boys should be free to wave fairy wands and wear dresses, and girls should be free to climb trees and make mud pies, without somebody telling them that they are “born in the wrong body.” We believe that women should be able to shave their heads, drive forklift trucks, make their lives with women, and be free to walk through the world without judgement for that. We believe that men should be able to wear whatever they like, dance with whoever they like, and be as expressive and emotional and fabulous as they want to be, without anybody thinking that makes them into women.

Gender ideology is unable to define what it means to “be trans” without referring to stereotypes.

1. Have there been public expressions or statements by political and/or religious leaders that have led to indefinite extension, modification or suppression of actions, activities, projects, public policies or application of gender frameworks?

There have been extraordinary statements from our elected representatives in the House, including a statement telling “terfs” to “suck coal” (a colloquial expression here for eat sh\*t).

**General Statement:**

We found all of the questions in this consultation highly problematic, and skewed to one particular type of answer, so have struggled to answer them. In particular, we struggled with the following:

1. LGB issues are muddled up with T issues. They are, in fact, separate groups with separate interests.
2. In some cases, those interests conflict. For example, most gay men state that they would not date a transman. Many trans rights activists regard this as transphobic. Many lesbian dating apps kick lesbians off for saying they are same sex, not same gender attracted. If men can become women, then lesbians are erased. If the gay can be transed away, there can be no fight for gay rights.
3. Most LGB people do not support “gender theory” and consider it dangerous, misogynistic and homophobic.
4. There is a conflation between intersex and trans, which is made worse by the inclusion of “assigned at birth” in trans ideology. Intersex people have asked that they are left out of the trans debate; instead they are being used as human shields.
5. This theory denies all biology and science. Moreover, it renders the concept of "sexual orientation" meaningless, since sexual orientation refers to biological sex. People can be sexually attracted to either the opposite sex, the same sex, or both. However, if it is no longer possible to define sex and what that means, sexual minorities will likewise be unable to define their sexuality. Accordingly, it will be impossible to legally protect lesbians, gays, or bisexuals from discrimination and violence because it will no longer be possible to legally define them. So, according to the theory, everyone could theoretically be lesbian, gay or bisexual. However, in the truth of biology, this is not the case.
6. Gay men are attracted to other males (men), just as lesbian women are attracted to other females (women). They are attracted to the same biological sex. If, for example, a biological man "feels" like a woman according to Gender Theory, he in fact is and remains still a biological man. Lesbian women are not sexually attracted to him. It is important to separate this! As an example, a heterosexual male with a beard and a penis can self-identify as a lesbian, and his female partner can also refer to herself as a lesbian. That erases the existence of female homosexuals, i.e. lesbians.
7. We demand a public debate about the dangers that we, lesbians, gays and bisexuals, see in gender theory. A discussion about this is widely suppressed in politics and society. When we talk about the dangers, we are often called transphobic and excluded from debates. When we say we are attracted to the same biological sex, as described above, we are also portrayed as transphobic. However, the sexual orientation of homosexuals by its very nature excludes those of the opposite biological sex. So according to the supporters of Gender Theory, as homosexuals we would have to force ourselves to have sexual contact with people of the opposite biological sex in order to not be transphobic, or at least pretend that we are willing to. It is important, for the protection of LGBs, that this is spoken about publicly. Homosexuals have been subject to death threats or threats of violence on social media for speaking openly about this.
8. Accordingly, we also want to state here that we do not see LGBs and Ts as a community with exactly the same concerns and interests. The interests of LGBs are in certain areas opposed to the interests of some supporters of gender theory, i.e. the T. This is also very important to note in order for an overview to be developed of the rights and protections afforded by different countries and the interests of different minority groups.
9. There is already a growing number of detransitioners in different countries at this time, that is, people who saw themselves as trans but now no longer do. Many report internalized homophobia in childhood and adolescence that drove them to feel they belonged to the opposite sex. Indeed, it is believed that many lesbian, gay and bisexual people many suffer from gender dysphoria in childhood that resolves itself by adulthood.
10. Additionally, women are exposed to sexualization by society, which they supposedly can escape by transitioning to the opposite sex. People who do not fit into society's prevailing gender roles (e.g., men are strong and don't cry, women are quiet and emotional) in their childhood and adolescence, as many LGBs also report, are at increasing risk of being seen as trans by parents and institutions. They take these ideas and their sense of self is built around the idea of themself as the opposite sex. Linked to this are often life-changing medical interventions into the healthy body, combined with a lifetime of taking hormones.
11. There are numerous other effective strategies and possibilities for children and adolescents affected by gender dysphoria to be treated. In our opinion, medical surgery should be a method of last resort. It is of great importance that there is more social education about this. Conversion therapy legislation in certain jurisdictions has lead to an affirmation only approach being adopted (i.e. affirming only that the patient is transgender). There appears to be limited scientific evidence for this model and some detransitioners report that it has been unhelpful to them to be affirmed as being transgender. It is also of huge concern that parents now face prison sentences in some countries for refusing to affirm their child.
12. There have also been several recent developments with regard to transgender medicine -  WPATH has backtracked from its previous position on affirmation only and admitted that its recommended treatment is simply a set of guidelines. Both Thomas Steensma and Annelou de Vries, creators of the so called ‘Dutch protocol’ for paediatric transition used in numerous countries have urged caution with regard to its use - the cohort of patients has greatly increased and is now mostly made up of biological females, rather than biological males as in the past.
13. Another major issue for us is safe spaces. It is important for LGBs to have their own spaces where they can be among themselves and exchange ideas. We also see these spaces in danger because of gender theory. If biological men can identify as women, it gives them access to, for example, exclusive lesbian spaces. Lesbians can no longer feel safe there and discuss important topics among themselves, since there is always the possibility that biological men are also present.
14. We also see that trans people are exposed to discrimination and violence and that they must be protected from this, but this must not happen in such a way that LGB rights, that have been fought for, suffer and are weakened. We are in favor of creating safe spaces for trans people, but not to abandon having the safe spaces created by homosexuals.