

SUPPORT DETRANSITIONERS

[Bill Donohue](#)

March 12 is Detransition Awareness Day, the most important LGBT day of the year. Those who are responsible for transgenderism, the pernicious ideology that holds that the sexes are not binary and are interchangeable, will never call attention to this day, and that is because it seriously undercuts their crusade. But we at the Catholic League are not afraid to celebrate it.

The tide is turning. The insane idea that biology doesn't matter—we can self-identify our sex—has peaked. It is true that the Biden administration continues to promote transgenderism. It is also true that elite American institutions in the behavioral sciences and the medical community continue to misinform the public. But the good news is that, even there, many are rethinking their position, coming over to our side.

Our side is the side of science. Their side is the side of politics.

Jamie Reed is a middle-age woman who calls herself a queer and says she is politically to the left of Bernie Sanders. She is married to a woman who thinks he is a man, a so-called transman. She took a job in 2018 at a transgender center at St. Louis Children's Hospital and saw how children with gender dysphoria are treated. She left last November because of what she witnessed.

"By the time I departed," she wrote, "I was certain that the way the American medical system is treating these patients is the opposite of the promise we make to 'do no harm.' Instead, we are permanently harming the vulnerable patients in our care."

To those who think this is just anecdote, they're wrong.

The American College of Pediatricians recently did a review of more than 60 studies on the issue of adolescents who have transitioned. They concluded that "There are no long-term studies demonstrating benefits nor studies evaluating risks associated with the medical and surgical interventions provided to these adolescents." Similarly, there is "no long-term evidence that mental health concerns are decreased or alleviated after 'gender-affirming therapy.'"

The same organization found that "there is strong evidence that children and adolescents who identify as transgender have experienced significant psychological trauma leading to their gender dysphoria." Therefore, they said, they "cannot condone the social affirmation, medical intervention, or surgical mutilation of children and adolescents identifying as transgender or gender nonconforming."

By all accounts, the Europeans are way ahead of the Americans. The medical profession there has woken up and begun to realize that transgenderism should not be promoted. Even the Dutch, who were the first to tout its benefits in 2011, have concluded their enthusiasm for transitioning was not based on strong data.

The *Economist*, an influential British liberal weekly, wants desperately to believe in transgenderism, but has to admit that the medical evidence in support of it is "worryingly weak." It cites a review of this subject conducted by the National Institute for Health and Care Excellence. "The academic evidence it found was weak, discouraging and sometimes contradictory...."

Tavistock, the English institute, is the world's largest pediatric gender clinic. It was closed last year after an independent review. According to the Society for Evidence Based Gender Medicine, the clinic was "not a safe or viable

long-term option.” This is because their work was “based on poor evidence and its model of care leaves young people ‘at considerable risk’ of poor mental health.”

The authors of an article published last year in the journal of the Danish Medical Association found their initial well-meaning intentions were based on insufficient evidence—they encouraged transitioning—but came to realize that they were doing more harm than good and sharply reversed course.

Dr. Riittakerttu Kaltiala, a Finnish-born psychiatrist who heads the department of adolescent psychiatry at Finland’s Tampere University Hospital, was among the first physicians in the world to head a gender identity clinic for minors. She, too, has reversed course.

In a statement she wrote that was signed by 20 clinicians from nine countries, she said, “Every systematic review of evidence to date, including one published in the *Journal of the Endocrine Society*, has found the evidence for mental health benefits of hormonal interventions for minors to be of low or very low certainty.” She knows why so many professionals have been snookered. “Medicine, unfortunately, is not immune to dangerous groupthink that results in patient harm.”

Last year, a group of five professionals in Norway examined what the medical community was promoting and took them to task for not following the science. Sex-affirming treatment with hormones and surgery, they said, was “not correct.” They explained why. “Such treatment methods, which have irreversible and significant consequences, have a weak knowledge base.”

In a lengthy piece published in February by the *New York Times*, it found that young people who have detransitioned, and medical professionals who no longer support transgenderism, are often stigmatized for doing so.

Those who have detransitioned, or are contemplating it,

deserve our widespread support. They do not need to be marginalized by bullies who are too ideologically corrupt, or greedy, to realize that transgenderism is a monumental fraud.