SOURCES:

- 1. Anti-trans NHS clinicians including key Barnes sources and their associated organisations are mapped here: https://tinyurl.com/4azw8hpd
- 2. The science confirming the positive impact of gender-affirming healthcare for kids: https://tinyurl.com/4z6vacjs and https://tinyurl.com/4wu43mbk
- 3. From a meta-analysis of 27 studies from around the world and nearly 8,000 patients: https://tinyurl.com/2y3r7erv Notably, this care in the UK required an average 95 week wait time: https://tinyurl.com/2zmx7m9v
- 4. The Lancet provides a more balanced view of puberty blockers, and the incredible harm caused by denying them to young trans people: https://tinyurl.com/5xjhjn86
- 5. Gender GP gives a good summary of the Gillick Competency test and its role in healthcare for trans youth: https://tinyurl.com/bdz69c6c
- 6. See: https://tinyurl.com/yc3ne7k3 and https://tinyurl.com/feddm9r7

FURTHER READING:

- The majority of Tavistock clinicians (50 out of 85) find the Tavistock closure
 was politically motivated and will have a negative impact on children's
 healthcare. Here is their open letter: https://tinyurl.com/yfdj9k9j
- The non-profit Health Liberation Now provides good information about trans healthcare and the right-wing campaigns against it in the UK: https://healthliberationnow.com
- Well-sourced analysis of the problems with the Hannah Barnes book, see the "Puberty Blockers" podcast episode by Prominent Corrections, available here: https://tinyurl.com/bcjde8fv

Brought to you by:



Our award-winning campaign is here to protect the LGBTQ+ community at LSE. Don't forget to listen to all sides!

TIMETO KEEPTHINKING

This book is biased and doesn't centre trans people

- Hannah Barnes and the sources she cites are not neutral. At least 6 of the clinicians interviewed were found to be associated with anti-trans groups that support conversion therapy. 1
- Suggesting "the science is not settled" is misleading. No science is complete, but the key facts about trans healthcare are settled, such as that trans gender-affirming care broadly helps, while doing nothing isn't 'safe' or 'neutral'—it is gender disaffirming and harmful. ²
- Just 1% of trans people regret gender-affirming care, much less than the average of 14% of other surgery regrets (which don't have reactionary books). People who need this treatment understand and want it.
- Puberty blockers are described in a biased way, centring fear-mongering, uncommon uses and side-effects, rather than their many happy recipients (including for everyday uses like period pain).
- Legal guidelines for minors' consent to medical decisions already exist. Gillick Competency should apply to all healthcare. When underage women seek contraceptive care, their bodily autonomy is prioritized and taken into consideration. Minors are people too. ⁵
- Did you notice nobody on stage was trans? This event was a group of people discussing the rights of a minority they are not a part of. Trans people have also criticised the Tavistock Center for healthcare inefficiency.
- Would you be comfortable with your estranged parents talking about your experience? One whole chapter centres the parents' feelings while admitting the actual person, who is now an adult, is not in communication with them. Time to think why.