

Dear Ms Phillipson,

RE: Draft Guidance (RSHE, GQC, KCSIE)

We are writing as teachers and other education professionals who are concerned about the safeguarding of children in schools in relation to issues of gender and sex.

We welcome that the Health Secretary has indicated he intends to make the ban on puberty blockers permanent.¹ Our concern is that this same protective approach is not currently required in schools.

The Cass Review described how a 'social justice model' had displaced an 'evidence-based model', leading to radical medical treatments being given to minors with no evidence of benefit.² It is likely that the coming years will see court cases where those who regret their transition sue for medical negligence.

The Cass Review also states that "the importance of what happens in school cannot be underestimated."³ It is therefore crucial that guidance for schools is similarly "evidence-based" about the risks to children rather than being dangerously blinkered by the 'social justice model'.

The current (2023) version of **Keeping Children Safe in Education (KCSIE)*** contains phrases introduced in response to lobbying from Stonewall.⁴ It states that 'being LGBT' (which conflates being gay with being trans) is not "in itself an inherent risk factor for harm".⁵ This prevents schools from acting on the risk that children who adopt a trans identity might harm themselves.

Because trans-identifying young people are self-medicating with irreversible cross-sex hormones obtained through the internet,⁶ we believe the draft 2024 guidance is correct in removing these Stonewall phrases. GenderGP, the private practice now operating from abroad, is providing information to children on how to obtain puberty blockers despite the ban.⁷ It is run by Helen Webberly, whose licence to practise has been revoked following multiple controversies over the prescription of puberty blockers and cross-sex hormones to children. Her husband was struck off for prescribing hormones without adequate psychological assessment to a teenager who then took their own life. The courts have also strongly criticised GenderGP after it prescribed a life-threatening dose of cross-sex hormones.⁸

Calls to roll back the 2024 changes to KCSIE must be rejected and consideration should be given to making clear that identifying as trans is sometimes a safeguarding issue where there is a risk it will lead to children self-medicating or breast-binding.

Similarly, though there was opposition from some quarters to the draft **Gender Questioning Children guidance**⁹, the Cass Review has considerably strengthened the case for its cautious approach to socially transitioning pupils in schools. Some schools are continuing to operate a policy of automatic 'affirmation', sometimes without involving parents. Many schools and teachers are uncertain and disempowered in the absence of this guidance and we urge you to issue it as soon as possible.

The draft **RSHE guidance** requires schools not to teach "gender identity", but to teach the facts about biological sex in response to questions.¹⁰ It removes inaccurate advice about the Equality Act,¹¹ and introduces minimum age limits for more sensitive material.¹² Claims that the age restriction inhibits the ability of schools to protect children from sexual abuse¹³ are utterly without foundation. The guidance instructs primary schools that they should provide teaching to protect children from sexual abuse¹⁴ and has an exemption to allow schools to address specific issues that have arisen where necessary, even where that would breach the minimum age requirements.¹⁵

We urge you to finalise all three items of draft guidance and issue them without delay.

Yours sincerely,

* We recognise the 2024 KCSIE guidance has been issued since this letter was first drafted. However page 55 remains under review.