



GENDER DIVERSITY COALITION PRESS STATEMENT

Call for Action after UCT VC's Harmful Seminar on LGBTQA+ Community

September 7, 2021

The Gender Diversity Coalition is calling for urgent action in the wake of a harmful and hurtful public seminar hosted by UCT Vice-Chancellor Mamokgethi Phakeng on social media platforms this weekend.

The Gender Diversity Coalition notes the letter from the University of Cape Town dated 6 September in response to the seminar held on 5 September 2021 with Dr Kgomotso Mathabe, a practising urologist and a member of the Steve Biko Academic Hospital's Gender Clinic.

We are appalled that the Vice-Chancellor of UCT would curate a seminar titled, "What does science says about LGBTQA+".

The public outrage on all social media platforms responds to the innate violence and harms this seminar has caused on Trans and Intersex persons and their families who

feel the daily violence of medical and pathologized diagnosis that have no positive outcome on their lives.

In the discussion, Dr Mathabe provided misinformation regarding Intersex born children. She said: *“Intersex is a condition that is potentially life threatening. And what intersex is in its simplest terms is when a baby is born, we must be able to look at the genitals, the external genitals of the baby, and be able to say whether it's a boy or a girl. And if a trained medical health professional can't make that call, then we call that intersex and then it opens up a whole door. I mean, you know, these are done a certain pathway. So because we have had to get the skill sets to be able to manage the intersex baby, because you look at the baby and you're like, I'm not sure way that this is a small penis or whether this is a large clitoris ... And then in terms of aesthetics, because how you are in the world depends a lot also on your physical appearance.”*

The Gender Diversity Coalition outrightly condemns intersex genital mutilation (IGM) and the harming of Intersex born children. Human bodies include a wide spectrum of healthy variations in sex characteristics at birth that are part of human diversity, which must be valued, respected and protected, NOT medically and surgically violated.

Dr Mathabe further confuses what Trans affirming healthcare is, stating: *“It's about having conversations. And so the transgender community at Steve Biko all start with a psychiatrist. They all start with a psychiatrist. He must spend a lot of time having conversations, figuring out together with them what is going on, because we need to know, is this just a crossdressing situation? Is it just, you know, it's a male who likes to wear female clothes. Is this homosexuality? Like what is going on with this particular individual? So we speak very much in medical science about individualizing therapy, but sometimes we just paying lip service to it as best we can. But in this space, we can't. In this space, it is one individual who we really need to draw down and drill down deep...”*

The Gender Diversity Coalition has long ascertained that the Steve Biko Hospital Gender Clinic is a violent and medically unsafe place for Intersex born children and for Trans persons who wish to medically transition, either through hormones and or surgeries. The gatekeeping of psychiatry and the medical intention of “correcting Trans bodies” and diagnosing Trans persons as mentally ill, has been condemned by the World Health General Assembly in 2018.

The WHO scrapped gender identity disorder from the International Classification of Diseases (ICD) and adopted new ICD11 codes which places gender incongruence under a new chapter called “Conditions related to sexual health.”

This reflects evidence that trans-related and gender diverse identities are not conditions of mental ill-health, and classifying them as such can cause stigma. There is sufficient evidence that shows the link between Trans suicidality and poor gender-affirming care due to dysphoric pathological practices and medical gatekeepers that have and continue to harm Trans persons. This seminar has done

just that and confirmed the gatekeeping and immense medical harm that resides in the false notion that Trans and Intersex persons require medical validation.

We outrightly condemn this practice and its assertion of correction. This erodes our human right to bodily autonomy and our right to self-determine who we are. If we state we are Trans, we don't need medical scrutiny to affirm this. This is an archaic medical practice, similar to earlier studies on Black bodies by white medical practitioners wishing to affirm that Black persons were intellectually inferior.

The medical harm and bodily violations must stop immediately.

We call on the Minister of Health to stop denying that the Department's commitment to IGM and medical gatekeeping is hindering Trans persons from attaining their human dignity.

We, therefore, demand the following:

- We call on UCT to issue a strong statement with an appropriate response and commitment to action. This includes engagement with the community by the Vice-Chancellor, the UCT council, and the heads of UCT's medical and clinical schools.
- We demand an engagement with the Steve Biko Academic Hospital Gender Clinic, in particular with Dr Gerhard Grobler, as the head of Psychiatry and Dr Kgomoetso Mathabe.
- We demand a meeting with the Minister of Health to discuss IGM and Trans health care practices within South Africa.
- We demand the Department to urgently develop a circular for all health facilities to integrate the Hormonal Replacement Therapy, including affirmative SRHR Service.
- We demand an investigation and national inquiry on IGM by the Commission for Gender Equality.
- We demand that the Department of Home Affairs repeal the archaic law titled Act 49 of 2003, Alteration of Sex Description and Sex Status. It must be replaced with gender-affirming laws that remove all medical gatekeeping. We Must remove the notion that only binary gender options exist; we demand a third undetermined marker to be included.
- We demand legislation that prohibits Intersex genital mutilation with immediate effect and that all doctors performing unnecessary medical surgeries be charged with child medical abuse. They are guilty of an offence of grievous bodily harm that must be charged in terms of all applicable criminal law and civil laws.

The Gender Diversity Coalition serves as a resource to many government departments, academic institutions, religious groups and corporate bodies and we will remain open to bringing accurate and clear human rights health information to all. We will continue to fight for the right to a health care system that is depathologised and affirming of gender identities, gender expression and sex

characteristics, our that all health care services are free and available to Trans and Intersex persons.

The Gender Diversity Coalition members are: Iranti, Gender Dynamix, Triangle Project, Women's Legal Centre, Legal Resources Centre, Matimba, Be True 2 Me, Access Chapter 2, Same Love Toti, Uthingo Network, Marion Stevens, founding Director of SRJC, panellist WHO Gender Advisory Panel, and parent of non-binary child, Xanny Stevens, Plus Committee, Westerford High School and non-binary child, Peter Benjamin, ED, Health Enabled, Sanja Borman, Dr Anastacia Tomson, The Lesbian and Gay Community and Health Centre, Trans Hope.

For more information contact:

Jabu Pereira, Director, Iranti +27829575349

Zoey Black, Media Specialist, Iranti +27714203222

Estian Smit, Research, Advocacy, Policy Manager, Triangle Project +27214220255

Marion Stevens, Parent +27832560825
