

# Current Disputes on the Natures of Transgender Conditions, and a Commentary on the Cass Review: Part 1, Diagnosis<sup>1</sup>

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## 1:0 Introduction

### 1:1 Overview

This paper is the first of two papers: It concentrates of diagnosis of transgender conditions. The second companion paper concentrates on implementation. Both papers can be cited and accessed using the links provided below. These form part of a series of documents which examine the current disputes on the natures and origins of transgender conditions: They are also commentaries on the Cass Review. Full lists of references and cross-references to original sources are provided in the more detailed of these documents. The full list of the documents and the links for downloading them are given at the end of this article. I use the word “*Transgender*” in these documents to describe the full range of transgender conditions. People often use the word “*Trans*” or “*Trans\**” to avoid making a distinction. I use the words “*Gender Identity*” to describe the sense of identity, which arises through the separation of the self from the other and social relationships in society. I use the words “*Sexual Identity*” to describe the sense of identity, that arises through sexual orientation and love in relationships that are made. Although it is a preferred identification, I avoid using the description “*Trans Woman*” in these accounts: because the definition of the word “*Woman*” is a contested term. The confusion that this can create is well illustrated within these documents when people conflate gender with sex. For want of a better description and in these accounts only, I use the word “*Transsexual*” to describe those who as immigrants or emigrants seek to totally cross a notional and binary gender divide.

The nature and origins of transgender conditions are currently the subject of an intense dispute between The Word Authorities and Professional Medical Institutions who now define transgender identities as “*naturally expected variations of the human condition, intrinsic to the personality created, arising very early in life, and cannot be changed either by the individual concerned or by the predations of others in subsequent life*”: against the attitudes of gender-critical feminists, religious groups, and others who define these conditions as “*paraphilias, perversions, or disruptions to the gender role*”. The different methods required for managing personality variations and personality disruptions are well known. They are encountered in many other situations. And when the motives, timescales and methods of management differ to the extent that what one side considers to be those of compassion and concern are almost inevitably regarded as recruitment, grooming, capture, and coercion by the other, it should be easy to tell them apart. There is also disagreement within the feminist communities between those who accept male-to-female transsexuals as the women they say they are: because that is the way they interact with society and see them as true allies in the feminist cause. While other feminist groups understand that no man, or male-to-female transsexual, can ever become a true feminist and no male-to-female transsexual can ever be identified as a woman, because biology or social conditioning means they will always be seen to seek power over women and threaten women’s identities, safety, and lives. There is therefore a medical, a social and a political focus to these disputes. No magic is needed for the correct management of transgender conditions when the diagnosis is correct: For the differences between managing personality variations and personality disruptions are well known and are encountered in many other situations. However transgender people represent a small and often hidden minority in the general population. History shows that all gender and sexually variant people for centuries

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have been the victims of misrepresentation, scapegoating, fears and lies: And today that fear is greatly increased by social media attacks. It is further increased when transgender conditions: Which one side considers to be compulsive searches for a coherence of identity and being oneself, are diagnosed by the other, as mere feelings involving behaviours associated with the desire for a role or the attractions of sex. Where both sides can produce cogent but opposing arguments to justify their views, which depend on the starting point that is taken: The answer therefore depends on getting the diagnosis of transgender conditions correct. And why that has been so difficult, is examined in this account.

Around 1965 Girard used his observations of the behaviour of very young children to put forward a theory of infant development where the process is driven by the need to seek what another infant possesses. This is for possession in its own right. It is not possession for any other purpose. Girard defined this type of possessive imitation as mimesis. He called the behaviour mimetic desire. This is a self-reinforcing process where each feature builds on the preceding one. Girard also showed that the driving forces behind this process are so strong that any awareness of an individual incident or the thought that triggers it loses significance. The dynamics take over and any awareness of the cause often becomes lost. As an anthropologist he was interested in how personalities and identities; including tribal identities, are created. Therefore, according to Girard, the core elements of personality and identity coalesce from early fragmented thought through the actions of strong, innate, self-reinforcing, and pro-active forces, which dominate from birth.

Dawkins and others identify a different form of mechanism which is innate and operates from birth. In 1976 Dawkins defined the Meme as single strand of thought which competes with others in the mind in order to achieve superiority. The process which Dawkins presents predicts a similar power and contagion to that which Girard describes. He argued that imitation and contagion in the broad sense are the ways in which such memes can replicate. Individual strands combine together to form memplexes, which give the concepts of self and identity each person possesses. Girard and Dawkins would have disagreed about many things, but they still had this common approach. Although Dawkins defines a separate mechanism from Girard. Dawkins, like Girard, argue that cognition and coherences of identity coalesce from early fragmented thought, which is driven through the action of strong, innate, and pro-active forces that dominate from birth.

Gallese in the 1990s suggested that an alternative form of we-centred mimesis takes place very early in life before any separation of the self from the other is made. Because gender and other identities depend on interaction with others, they cannot form before birth. From extended studies, Gallese showed the physiological bases for empathy, imitation and inhibition depend on the action of fundamental powerful and innate neural forces, involving mirror neurons, possessive imitation, empathy, and the like. These likewise dominate from birth and only gradually come under control as the powers of cognition come into increasing effect. This separation of the self from the other is a crucial issue; and I argue that it develops; or is greatly accelerated, at the time when coalescence occurs. Imitation is therefore built into physiology and the foremost challenge to be explained is not *about how learning develops but about but how well these processes can be held in check*. This work by Girard, Dawkins, Gallese, and others paves the way for the understanding I use in this analysis. That is supported by further developments in neuroscience in recent years. Because of the continuing confusion and disagreement, an examination of these later advances is included in this account

For many centuries the criminalisation and condemnation of all gender and sexually variant behaviour, by Western Christianity in particular, as intrinsically disordered sexually motivated perversions or disruptions of physical morality and the gender role could never be challenged. However, access to the experiential evidence and research which has become available from the 1960s has transformed the situation into one where people now recognise that these activities are instead about searches for identity; and can celebrate them in same-sex marriages and other acts. In many cases these changes have been accepted. But in many others, where fears of abuse and reliance on traditional values or traditional theologies still dominate, the reverse is the case: And in many parts of the world, and in many religious traditions, very severe social and legal penalties against all gender and sexually variant people continue to be applied.

This disagreement, and the consequence of these failures by many to take account of the advances in science and understanding by many since the 1960's means that it is absolutely essential for Cass to equitably consider both sets of arguments in these toxic disputes. However, I conclude that she does not do

this. Instead, she adopts as the terms of reference and evidence base for her report, a definition of gendered behaviour and gender identification by Kohlberg that dates from 1966, which considers only the impact of the gender role: She also disregards the effects of the massive neural and cognitive changes and transformations that take place during the first three to four years of life, which were identified by Gallese, Dawkins, Girard and others: even though she acknowledges their effects during puberty. Her rejection of sexual impulses together with the drives of psychodynamic theories, also places Cass alongside Kohlberg, Maccoby; Berger; Bannerjee; Slaby, Frey; Martin, Ruble; and others who, using Piaget and similar theories; sought to attribute the development of gender identity entirely to social learning processes, and to its associations with the gender role. Therefore, Cass ignores the pre-cognitive neurological impacts of development which dominate during the first three to four years of life, and dismisses the impact of psychodynamic theories, which fast-track early development: And which together inform the views of the World Authorities and Professional Institutions, who consider gender identity to be a core or foundational element of the personalities and identities that are created. Thus, by definition Cass considers only one approach to be legitimate in her analysis: That is the views of the gender-critical groups, religious groups, and others who confine the understanding of transgender conditions to “*paraphilias, perversions, or disruptions to the gender role*”. In any independent review of any toxic dispute, all approaches must be equally considered: In this examination I demonstrate that Cass does not do this. For these reasons, I conclude that the Cass Report is not an independent report. Nor do I consider it to be a neutral report, since I conclude that Cass continues to try to enforce a diagnosis of transgender conditions as personality disruptions when a diagnosis of personality variations should instead be made. Nevertheless, these differences continue to be matters of toxic dispute: And strong disagreements still exist. For these reasons, a full comparison of both diagnoses is provided in the analysis which I present in these documents.

By treating transgender conditions as case studies to examine how personalities and identities for everyone develops, I additionally aim to provide a greater understanding of how early development for everyone progresses. Because of the continuing confusion, an overview of this work, and an examination of later developments, is given in these accounts. However, that should not strictly be needed; since the work of Girard, Dawkins, Gallese and others, which forms the basis for this particular study, and the results of experiential evidence, have been available for many years.

## 1:2 Disputes

In the end any solution comes down to resolving the dispute about whether transgender conditions are compulsions in search of a coherence of identity and being oneself and rejection of what is wrong, or merely of feelings which involve desires for a role and/or the attractions of sex. Also, since the motives, timescales, and the methods for management needed for the two diagnoses differ so greatly, that must also have a profound effect on transgender children’s lives. However, these dismissals by Cass and others do not only apply to children and transgender conditions. If Cass is to be able to justify her arguments, she must also dismiss much of the research on how personality and identity for everyone; including gender, develops. And that must include the anthropometric and neurological work of Girard, Dawkins, Gallese, which has been available from the 1960s, together with the continuing work of many others since then.

Another element in these disputes is the disagreement between those engaged in neuroscientific research, where parallel disputes arise. These early neural studies by Girard, Dawkins, Gallese and others show that, far from the development of gender and other elements of personality and identities being receptive or reactive in nature: which is in line with the traditional social learning and psychodynamic theories: They are instead driven by strong innate forces involving possessive imitation, mirror neurons, empathy, and the like: These dominate from birth: And they only progressively come under control over a period of at least three years: as the organising powers of cognition take greater effect. Although Freud recognised the existence and impact of these innate forces in accelerating development, the constructs he used still meant he relied on cognition for their explanations: and this reliance on cognition did not allow him to explain them. Therefore, he regarded this first three years as a time of seething emotions, where little constructive takes place. However, he did note that strong forces are needed to fast-track development forward, and he attributed these to motives of sex. Social learning theories, by definition, do not attempt to address this issue: So that the effects of changes during this period are likewise ignored. This also means that many psychologists and others,

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including Freud, have presumed that development proceeds as if from a blank canvas from about the age of three years.

It additionally means that neither the psychodynamic theories which rely entirely on cognition for their explanations, nor the social learning theories which also rely exclusively on cognition, but additionally cannot explain why psychodynamic theories are needed to fast-track development forward.... Are able to adequately explain what happens during this pre-cognitive period, which lasts from birth to around the ages of three to four years. That raises major concerns.

Instead of treating the contribution this early period makes to the development of personality and identity, including gender identity, as unknown; gender-critical groups vociferously deny that it has any effect. Other groups and protagonists, including McHugh in the United States, who rely on Freud and social learning theories presume, like Cass that it has no influence. Before access to the research and experiential evidence which became available in the UK from the 1960s onwards, no other challenges to this be made. Gender identities also depend on interactions with others; therefore, therefore they cannot form before birth. In addition, there is little disagreement between transgender people, gender-critical groups and others about how disturbances to the gender role should be managed: Here all are likely to agree that methods of management appropriate to personality disruptions, instead of personality variations should be used. Therefore, instead of ignoring what happens during these first three to four years, understanding what does happen is of crucial importance.

Therefore, instead of just focussing on transgender conditions in the study, which is described in these documents, I have used these conditions as case studies to examine how personality and identity for everyone develops, crucially during this early period from birth, up to the age of three to four years. By assuming that gender identity is determined a collectively created concept, determined entirely through interactions of the gender role, Cass ignores the effects of any such changes in her report. With differences as great as these, and in any independent review, it is essential that all aspects are equitably considered. I have attempted to do this in the analysis here presented. This examination is reported in two companion papers. In this first paper I consider some of the current issues in sociology, psychology and psychiatry affecting transgender conditions. I then describe how I have used transgender conditions as case studies to examine how personality and identity for all of us develop. In the second paper I consider the social implications: Here I examine how gender-critical groups, religious groups and others seek to justify their arguments, including a consideration of the social consequences that arise, then I discuss the independence of the Cass report, before concluding my account. Both papers can be downloaded using the links provided.

## 2:0 Nature of Transgender Conditions

### 2:1 Understandings

We have seen that this is at source a dispute between the World Authorities and Professional Medical Institutions who consider gender identity to be a core element of the personality that is created against gender-critical groups and others, who argue that its development is confined to that of the gender role. Which means that, to justify their viewpoints, gender-critical groups, who conclude that gender identities are merely collectively created social concepts arising entirely through allegiance to the gender role must specifically deny that anything of significance happens during this pre-cognitive period. Thus, for example, the cognitive neuroscientist, Gina Rippon dismisses the idea that anything of significant transformation in relation to gender identity takes place during this pre-cognitive period as “*Whack-a-mole*” myths: She defines these as untruths which are repeated so often they come to be believed. This approach is in concert with Kathleen Stock and other philosophers who likewise deny these early influences, and who argue that cognition alone drives development forward. Equivalent failures arise with the arguments of Money, McHugh, Blanchard, and others who attempt to use Freudian psychodynamics to explain transgender conditions. And where; instead of any developments of such significance during the first three years simply being ignored or being treated as unexplained or unknown, their effects on the development of gender identity during this early period, are

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actively dismissed, discredited or denied. And where, like Freud, the presumption of sexual motives continues to be applied. Cass likewise attributes the development of gender identity to the social learning processes alone: Thus, both the effects of these early development processes, and the impacts of the pro-active drives of psychodynamic theories, together with the sexual impulses which Freud presumes to fast-forward early development, are correspondingly dismissed or denied.

The experiential evidence, which has been available from the 1960s, also challenges these views. That evidence has resulted in a complete transformation in the attitudes of many in society, not just in relation to transgender conditions, but to all gender and sexually variant people: This is from ones which had previously considered their behaviours to be sexually motivated perversions or disruptions; to ones that now celebrate these relationships in same sex marriages and accepts them as true expressions of love and identity instead. But for others who rely on traditional doctrines, understandings and theologies, it also means that this is still profoundly denied. And that has led to the scapegoating, criminalisation, and condemnation of all gender and sexually variant people, which continues in many parts of the world, religious or social communities, and conservative traditions today. In order to retain the argument that gender identities are merely collectively created concepts; determined entirely by association with the gender role, requires that, not only this experiential evidence, but also the advances in neuroscience pioneered by Gallese, Girard, Dawkins and others from the 1960s, together with the views of the World Authorities and Professional Institutions, and others... Which likewise have been gained over the last sixty years, must equally be denied. Therefore, taking account of the effects of both these experiential and these neurological elements of early development completely reverses the perspective: That is from one whereby these pre-cognitive elements and neurological advances during the first three years could be disregarded, into one in which; what happens during the first three years of life becomes of crucial importance instead.

Most modern understandings of gender identity divided it into two components. The first is the core gender identity describes an inner sense of belonging without behavioural implications, whereas the gender role identity develops from what society expects. Because gender other identities arise through interactions with others, they cannot form before birth, and they depend on the relationships, behaviours and interactions that have already been formed: They are therefore consequential effects. Neural studies today also overwhelmingly show that gender identities; expressed in terms of social interactions and relationships: and sexual identities; expressed in terms of love and sexual attractions, form together as part of a single complex very early in life: Although, as part of a fragmented process, each can go their separate ways.

In these documents I show how the “*core gender identity*”, which relies on intuition and involves the ability to distinguish the self from the other, forms during these pre-cognitive stages of early development: While the “*gender role identity*”, which relies on cognition and social interaction; subsequently develops through the allegiances, expectations, and interactions which society and others expect: Furthermore, the first must be present before the second can take effect. I further show that transgender conditions represent a search for coherence of identity and being oneself instead of the opposing behavioural motives of desire or sex: And this is manifested in the core gender identity. Yet, despite these advances, the continued emphasis placed on social learning and psychodynamic theories on learning and development, means that these pre-cognitive elements continue to be disregarded by many practitioners in sociology, psychiatry, education, and psychology. Not least because all of this happens before we can be consciously aware of them, therefore they are only recognised through their effects. The work by Girard has found support in many quarters. This includes my own work for reconciliation in societies divided by tribal violence: However, it has generally been regarded as idiosyncratic by the mainstream in sociology, psychology and society: And it has usually been ignored, or rarely been properly applied. The work by Dawkins and Gallese appears to be disregarded, as far as gender identity is concerned. This means that the primary organisational force driving early development forward is still presumed to be that of cognition alone: I conclude therefore, that until many in psychiatry, sociology, education, and psychology are prepared to recast the concept of cognition, from one which defines it as the primary organising force which drives development forward into one which creates order out of disorder, transgender conditions will be misdiagnosed, and the impact of these early and innate forces will continue to be denied.

## 2:2 Approach

The analysis I present in this account is essentially a Freudian analysis, in which the driving forces behind it are those of the innate forces identified by Gallesse, Dawkins, Girard and others: and the motives which drive it, are those for the search for a coherence of identity and being oneself, instead of Freud's presumption of the drives of sex. Psychodynamics theories, like those of Freud, also differ from social learning theories in that they recognise the need for some strong and deep-seated force to fast-track development forward. In addition, at least some ability to separate the self from the other must be present before identification with the expected social roles can come into effect. Freud also recognised that the need for this ability to separate the self from the other must take place at an early date, and he chose the Oedipal complex to describe it. However, he had to place its timing to between the ages of three to five years because he needed the powers of cognition to explain the constructs he used. In this analysis I argue that the same ability to separate the self from the other starts instead to rapidly coalesce from previously fragmented thoughts around a median age of two years. This is the time when an explosion in neural interconnectivity and cognition takes place, after which capabilities that are most used are strengthened, and those which are not, become diminished or lost. This I argue is also made manifest in the core gender Identity, which describes the innate sense of belonging with no behavioural implications involved. This can develop through intuition alone. Also, at a time when the expectations of others have limited effect: And where peer group interactions play an important role. I further argue that the often hidden or unconscious sense of core gender identity gives us the continuities, stabilities and coherences of identity, with the constancies we need to bring order to life. Whereas in contrast, the wide-ranging variability of the gender role identity: Which depends on the expectations and assumptions of others, together with the extreme lifelong flexibilities in brain adaptability, permeability, and plasticity, and neural development give us the rich varieties of personalities and identities that we all encounter at all later times of life.

When incongruence is absent there may be little impact. But if incongruence occurs at the time when the core elements of personality and identity are at first being created, this can have a major effect. I further show that attacks on the legitimacy of the core gender identity ravage the foundations of self-identity that all of us possess: And its destruction leaves an emptiness inside. This is why conversion therapies are always considered to fail, not just for transgender conditions, but for all gender and sexually variant conditions, and why methods of management appropriate to personality variations, which may parallel those of compulsions, are required.

This treatment of gender incongruences as personality variations is in contrast to this requirement to treat disturbances to the gender role identity as personality disruptions, where the methods of management appropriate to perversions, paraphilias or disorders instead are required: Since these disturbances only involve motives of behaviour; feelings; and desire, the core gender identity and senses of selfhood are not disturbed. This means that our conscious awareness of gender is a combination of these: where the gender role identity acts as an overlay on the core gender identity that has already been created. As the core gender identity becomes established before we can consciously be aware of it: the impact of this can be hidden from view unless some disturbance occurs. Thus, its impact can too easily be ignored. And it is why It is crucial that both elements are considered. However, as we have seen, Cass for example totally ignores these early influences; and ascribes the creation of the core gender identity entirely to the relationships with the gender role.

Although an outline of how early development proceeds is given in this document, these issues and processes are examined in the more detailed and a fully referenced description which is presented in commentary document of this series, and in other papers which are available for download via clicking on the bibliography tab on my website: [www.tgdr.co.uk](http://www.tgdr.co.uk). In these I show that although strong and stable core gender identities are created, they need not always follow biological sex. I also show why stable core elements of personality and identity must be established at an early date. And why this is needed to bring order, stability, continuity, and coherence to life. There is no significant disagreement between transgender people and others over how the gender role identity develops. Therefore, the focus of these disputes lies in the existence, relevance or otherwise of the core gender identity: and correct management crucially depends on getting the diagnosis correct. We have seen that there may also be little impact when incongruences of personality and

identity are absent; so, for most people it seems natural to presume that gender and sexual identities should always be congruent with biological sex. This is also why cognition alone cannot explain how early development takes place: And I have noted that until the required recasting of the concept of cognition occurs; from one where cognition alone is considered to be the primary organising force which drives development forward, into one which recognises that it creates order out of disorder, transgender and other foundational elements of identity, will continue to come under attack.

The temperature of these disputes is greatly raised, when Stock, along with other advocates of the gender-critical approaches, dismiss any argument which challenges their understandings as the work of transgender activists, apply arguments that they are not based on credible science, and impute the integrity of those people and groups who support these views. In the United States, similar condemnations by McHugh and others are encountered. McHugh used Freudian psychodynamics to try to explain the origin of transgender conditions. His view that there is no other credible approach led him to the conclusion that the work of Stoller, as well as the arguments of the Professional Associations, must likewise be discredited or denied: Here, delusion is a term that McHugh and others have sometimes used. A correct assessment of these disputes is crucial, for both sides can create coherent but opposing arguments to justify their positions: And each of these depends on the starting point that is taken. Cass must of course be free to express her own views. But Cass was commissioned to write an independent report.

From these considerations I conclude that the decision by Cass to set the terms of reference for her report, which from the outset use definitions from 1966, that considers only the impact of the gender role. Which also by definition rejects the views of the World Authorities and Professional Institutions: Which additionally requires her to impose a diagnosis of transgender conditions as personality disruptions onto transgender people. And when these are taken together with her disregard of the massive neural advances and transformations in cognitive links, capabilities and profiles during the first three to four years through the terms of reference she sets, provides my justification for concluding that the Cass Report is not an independent report.

### 2:3 Clinical Implications

That has major implications. The first of these concerns the use of puberty blockers. Their administration can be a justifiable action when transgender conditions are diagnosed as personality variations, but if these conditions are understood to be personality disruptions involving the gender role, driven by suppressed sexual emotions, a consequence of any administration would be to reinforce a runaway drive towards transition instead. The correct administration of any drug or treatment must always be a balance between the benefits it brings and the harms of any side effects, so no judgment or statement can be valid if the diagnosis is incorrect. Furthermore, in her diagnosis, I do not find that Cass gives any credence to the views of the World Authorities and Professional Institutions. In contrast, I come to the view that in place of accepting their diagnosis of these as personality variations, she tries to impose this diagnosis of personality disruptions upon them instead. This includes her allegations that clinicians are deceiving parents and patients in pursuit of their own ideologies. I further conclude that she attacks much of the research which supports the view that these conditions should be treated as personality variations by imposing a diagnosis of personality disruptions upon them, and by criticising their methodologies instead of properly considering the substance of their results. That questionable use of research is the subject of many other reviews of the Cass report, and these should be fully consulted. In her report I observe that Cass returns to the understanding in that Kohlberg presented in 1966, where gender identity develops through association with the gender role, and to social learning experiences alone. By rejecting sexual influences and the drives of psychodynamic theories, I also consider that she disregards the fast-tracking of early development which the psychodynamic theories provide. Which imposes a timescale for development, which is far longer than the psychodynamic analyses predict, and experiential evidence provides. And because the motives, timescales, and methods of management differ so greatly, these all must have major consequences as far as transgender children are concerned.

From these considerations, I argue that her analysis gives rise to conclusions which ignore the reality of transgender people's lives. Not only does her approach diminish the legitimacy of transgender identities. It incorrectly dismisses the use of puberty blockers, it decrees that these conditions must be managed as

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personality disruptions, instead of personality variations, and it imposes timescales for the development of gender identity which are far longer than those known to exist from the massive amounts of clinical, medical, and experiential evidence which is now available. I do nevertheless agree that there are significant deficiencies in some areas of research related to transgender conditions, as the University of Oxford studies commissioned by Cass show. This includes the absence of long-term follow up studies and the relative absence of double-blind studies, which for ethical reasons, are difficult to conduct: Much other medical research can also be challenged on that basis.

In instances where conflicts or deficiencies occur, these absences must be fully considered. And no study which claims scientific justification can have an excuse for disregarding information that is already available. The more general studies on the neuroscience of early development and how gender identities for everyone develop, must not also be disregarded or ignored. The argument that more research is needed also falls flat when these advances in neuroscience and experiential evidence are dismissed or unnoticed. Cass argues that transgender children are failed because the research work which is undertaken does not have a secure evidence base. But the evidence base which Cass uses dates from 1966 and considers only the impact of the gender role. I conclude that these absences mean that, instead of protecting transgender children, it is transgender children themselves who are being let down by the Cass Report. There are also many instances where the correct methods of treatment and management of clinical, medical and other conditions are determined through the correct and impartial use of clinical, medical and other evidence, where the cause is unknown. I believe that the major difficulties for transgender people in the Cass report arise from the argument that it gives credence to only one side of the quarrel in a toxic dispute, and because of the misdiagnosis that is applied.

In summary I have concluded that Cass from the outset dismisses the viewpoints of the professional organisations which treats transgender conditions as searches for coherence of identity and being oneself, and instead demands a diagnosis of these conditions, which presumes that they are driven by feelings, desires and behaviours which may or may not be created by motives of sex. That is a misdiagnosis which imposes a presumption that is totally opposite to the reality of transgender people's experiences. Where the truths of these encounters show that these conditions are instead driven by the rejection of what is wrong, and the search for a coherence of identity and being oneself in place of motives of desire, behaviour or sex: Where many have fought the compulsions that have been created, before the need to transition becomes an overwhelming drive. So that attempts to apply "*Conversion Therapy*" also invariably fail: Not least because many transgender people have been trying to practice this on themselves without success for many years: And they then have to deal with the dismissals of others, with the emptiness and guilt, which its attempted imposition and the enforcement which social and religious ideologies provide.

## 2:4 Management

I have equally noted that the techniques for managing personality variations and compulsions are also well known. Methods of managing personality variations do not seek to remove the variation, instead they aim to alleviate the distress by first of all obtaining the self-esteem that arises from accepting the reality of the variation: And then by using this to find the best ways to manage its demands. That is in total contrast to methods of managing perversions or disruptions, where the aim is to remove or divert the disruption, and to use approaches which seek to suppress or nullify its demands. Thus, one diagnosis expresses the search for identity the other the desire for a role. I further argue that attempting to treat transgender conditions as personality deviations or disruptions when the diagnosis should be that of personality variations is potentially disastrous, because the time when transgender children and their parents most need help to manage these conditions occurs from early childhood, not later in life. Also, that these conflicts are not about desires to be men or women: they are about searches to be themselves. Many today accept non-binary gender identities. And after transition, many transsexuals merge invisibly into society as the men and women they believe themselves to be, leading ordinary, happy, and everyday lives.

We have seen that Cass is not alone in her arguments. Traditional social learning and psychodynamic theories used by gender-critical-feminists, and proponents who rely on Freud such as McHugh, Money, and others cannot adequately explain how early development takes place, because they disregard the impact of

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the early innate forces and rely on the powers of cognition alone to explain their arguments. There are many practitioners in the mainstream of psychology, sociology and psychiatry who continue to presume that the powers of cognition alone provide the organising forces which drive development forward. And where the impact of these innate and pro-active neural forces identified by Dawkins, Girard, Gallese and others continues to be ignored or misdiagnosed. We have already noted that Freud recognised that powerful and innate forces are needed to fast-track development forward, but in the absence of any other explanation available to him, he chose the motives of sex. In this document I have shown that these sexual forces, which were identified by Freud are subsets of the innate neural forces identified by Dawkins, Girard, Gallese and others, where the search is for a coherence of identity and being oneself instead of motives of sex. These dominate from birth and only gradually come under control as cognition increases its effect. Freud did make an important distinction between inversion and perversion, but he still needed to rely on the powers of cognition to explain their effects. Although sexual dimorphism forms at an early date, gender identification and gender identities depend on making relationships with others. Therefore, these cannot form before birth: so, they must be consequential effects. These core elements represent our inner senses of belonging which are independent of behaviour and the gender role; and are manifest as intuitions alone. Despite the evidence which has been available for the last sixty years, many practitioners still continue to ignore the influences and roles of the innate neural forces identified by Girard, Dawkins, Gallese and others, and the legitimacy of transgender identities is denied.

## 2:5 Early Development

The approach I have taken in my own study is to attempt to use transgender conditions as case studies to examine how personality and identity for everyone develops. But there are broader implications, and in this section, and the following sections, I consider in more how personality and identity for all of us come to be formed. While the social learning processes are receptive and cognitive in nature, the psychodynamic processes, identified by Girard, Gallese, Dawkins and others, are pre-cognitive and strongly pro-active. That has major effect in fast-tracking the rate at which the core elements of personality and identity, including the gender identities are created. A notable feature in human development is the long delay in the maturation of the neural prefrontal cortex, when compared to the delays in other species. This is the part of the brain which manages perception, understanding and conscious thought: (I exclude intuition here for reasons given later in this account). This is primitive at birth, but its capabilities expand greatly during early development. It is and has been argued that too short a delay in its maturation in a strongly pro-active process, makes us more closely resemble clones of each other: But with too long a delay; excessive disorder occurs. By mapping how development takes place during the first three to four years of life I have shown elsewhere that the psychological and physiological aspects of brain development act pro-actively together in these early years to form a finely tuned system in which the maximum amounts of individuality, possessiveness, intelligence, and inquisitiveness, together with the minimum degrees of energy expenditure are generated. The effects of the pro-active nature of the forces which drive early development, when combined with the wide range of human physiology, may lead us to expect that gender and sexually variant identities can be created without any obvious cause.

A fully cross-referenced description of the processes is given in the commentary document provided in this series, and in additional documents available by my website [www.tgdr.co.uk](http://www.tgdr.co.uk). In these I show how the core elements of personality and identity coalesce from previously fragmented thought during the rapid expansion of neural interconnectivity around a median age of two years. The words "*quorum sensing*" have been used to describe the process. That matches with an explosion in language capabilities, a unique peak period in early neural development, and a time when an awareness of gender difference first appears. The ability of the core gender identity to separate the self from the other is also needed. And it must be secure before cognition and the identification with the gender role can fully come into effect: That is considered to happen later, around a median age of three years. However, children do not develop sufficient awareness (called *Theory of Mind*) until about a median age of four years. Therefore, these processes for the children themselves, and for all others, are usually hidden from view. This makes transgender people, and all gender and sexually variant people vulnerable because of the hidden nature of these conflicts. And it may lead some transgender people to argue that "*they are born into the wrong body*". For most people, religious groups, and others, this resulting lack of knowledge and awareness, means that it is natural to assume that, unless some sexually motivated

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disorder or disruption occurs, gender identity should always be congruent with biological sex. And these differences open up a potential credibility gap. Transgender people represent a small minority in the general population, there may be little evidence of any conflict when no incongruence exists. Many have to rely on what others say about them, and these make transgender people, along with all other gender and sexually variant people, more vulnerable to misrepresentation and abuse.

When taken together, the results of the analysis I present confirm both the viewpoints of the World Authorities and Professional Institutions. They match the results of Stoller and other early investigators: even though Stoller's description of how gender identity develops could not be correct. They confirm today's definitions of gender identity, which divides it into two components. Where the core gender identity describes an inner sense of belonging without behavioural implications, and the gender role identity responds to what society expects. So that, even though I show that strong and stable core identities are created, these need not always follow biological sex. These core elements also become established very early in life, in the same way as other core elements of personality and identity. And they provide stable foundations: or the cornerstones, upon which the many and varied concepts of self-identity, which respond to the rich variety of human experience, can be built.

## 2:6 Gender Confusion

None of this can ignore the nature of the present arguments and I also show that there is a contradiction in the gender-critical approach. Those feminist groups who argue that gender identity is a "*nebulous and undefinable social construct determined only by association with the gender role*", also means that gender identity must be a choice or be products of desire for everybody. That would place Cass alongside the feminist pioneers such as Simone De Beauvoir, Judith Butler, and others, all of whom have defined gender entirely in the context of its performance and how men and women interact with each other in society... But that contradicts the view of other feminists who argue that because of biology and or social conditioning, transgender people who claim to identify as women are always be seen to seek power over women and threaten women's identities, safety, and lives. It further means that, in place of the egalitarianism of the feminist pioneers, these groups attempt to enforce a dogma of gender complementarity and exercise an exclusion, which places them alongside, and bears close comparison, to the traditional teaching of the Christian Church. These perceptions allow only two definitions of gender: each of which must coincide with the expectations of biological sex: And it is the application of both definitions at the same time which exposes this fundamental contradiction in the gender-critical arguments. Not surprisingly, when this happens, confusion is bound to occur. By some of his statements and actions Pope Francis for example, appears to recognise the sincerity, and integrity of transgender identities, and quite rightly condemns a fictional "*gender ideology*" imposed by gender-critical groups on transgender people, which alleges that these people believe they can "*choose, change or deny biological sex*". But he, the Catholic Church, gender-critical groups and others then go to the other extreme, by imposing a gender complementarity which presumes that gender identities should always be congruent with biological sex. Cass also contributes to the confusion through her apparent attitude which treats transgender conditions in adults as personality variations, which is in line with the approaches of the gender identity clinics, and yet she reverts to treating these as personality disruptions when transgender children are examined. Her seemingly complete acceptance of the effects of the neural transformations which take place during puberty, combined with her total disregard of the even greater transformations which take place during the first three to four years of life, could be seen as her justification for this approach. However, we have seen that both approaches also misdiagnose transgender conditions: because these must be managed as compulsions in search of a coherence of identity and being oneself, not merely as feelings involving desires for a role, or the attractions of sex. These conflicts go far beyond just considering how transgender children should be treated. Instead, they are about getting the concepts and motives correct

## 2:7 Gender Identities

Because of these contradictions it is not surprising that a great deal of confusion arises. However, we are not clones of each other, and the current understandings show that, although on average there are significant differences in male and female behavioural patterns, with men more prone to engage in physical violence, considerable overlap occurs. Since gender identities are derived from interactions and behaviours, and

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because they develop through the capabilities and allegiances which have previously been created, it means they are consequent effects. That allows all women, including male-to-female transsexuals: acting as women with women, to pursue the same feminist arguments with the same vigour, from a stronger base. Equally for any female-to-male transsexual: acting as men with men, to pursue any equivalent male arguments from a similarly stronger base. Because the core gender identity can be described as an inner sense of belonging without behavioural implications, it further means that gender-critical ideology, whichever way it is interpreted, must be the less effective approach. It recognises the proud history male-to-female transsexuals have in the fight for women's rights. And the feminist demands for equality are not attacked. It also means that Cass, the feminist pioneers, the gender-critical advocates such as Stock and others, for different reasons misdiagnose transgender conditions, and none can be completely correct.

So far in this account I have shown that a child's initial associations, if unconscious, with personality and identity coalesce from previously fragmented thoughts during the peak period of neural development around this median age of two years. This fragmentation means that a different endpoint for every individual exists. These same processes of gender identification apply to everyone. Thus, the same deep intensities and profundities of their allegiance to a gender identification occur in all gender and sexually variant people, as well as those whose gender identities are in harmony with their biological sex. Gender identities do not form as part of a "what makes me, me?" network, they form as part of a "who am I network?" and the great variety of gender identities, which we all possess, together with the roles we all occupy in society, are integral parts of who we are... And these are ours by right. Experiential evidence shows that there is as wide a range of sexual orientations and identifications in the transgender communities as there are in the general population. It follows from this that gender identity instead of biology should be used as the marker to guide the legislation and to allow or restrict those behaviours which are based on how people socially interact:

The feminist pioneers confined the definition of the word "Woman" to a description of gender alone. In opposition to this, gender-critical groups are trying to confine the definition of the word "Woman" to that of biological sex. To restrict the definition of the term "Woman" to cover someone who only "lives as a woman" is too restrictive, because it is far more important that that. To confine the term to gender identity but to use it instead to define "someone who completely interacts with society as a woman" would be more correct. It recognises that gender identity, along with sexual identity or orientation; and the behaviours associated with them, should both be regarded as core elements of the personality that is created: It also means that non-binary identities can be recognised. In addition, it recognises that each can express themselves independently of the other. And that both gender identity and sexual identity or orientation, should have equal status as protected characteristics in the legislation that any government enacts.

## 2:8 Who am I?

However, how we become aware of these senses of identity, the strength of their drives, and the confusions that are created, is an issue still to be addressed. We may note that gender identities depend on how we interpret these interactions. And how we define ourselves, depends on several things. That includes a compendium of conscious or unconscious thoughts, reasonings, intuitions, and perceptions, which rely on cognition, and define "who we are". However, some additional agency is needed to determine how they are managed. Many parts of the brain act together in the context of an underlying default mode network involving many different brain areas and capabilities; some of which precede the development of cognitive abilities, and some needed for survival may be present from birth; or become active very early in life. The amygdala is an obvious candidate; although other brain areas are involved: This is the major processing centre for emotions which links many different brain abilities, especially memories, learning and our senses together. It is a small part of the brain, also active from early in life, whose role is to organize physiological and psychological responses based on the cognitive information available. And it plays a key role in the management of compulsions and incongruences, including the "fight or flight" mode, which responds to the fears of the unknown, however these arise. When, these two elements are considered together, they may be said to create a sense of "what makes me, me". And that is the approach I adopt in this examination. However, that still does not answer the question of "who am I": Not least because much of this is not our own property: since we define the "I" through our relationship with others. And that changes; and always changes throughout life. However, we also interpret it as a personal identity. Recent work at Stanford University shows that a

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previously unrecognised and computationally separate “*Who am I?*” neural network in the brain also exists: What is also notable is that it is independent of the “*What makes me, me?*” network. So, stimulating one area has little effect on the others. And that may impact on our earlier considerations of the independence of the relationships between the core gender identity, and that of the gender role. This offers the prospect of new insights into how consciousness, and how the stable core elements of personality and identity for all of us, come to be formed.

Nevertheless, this area is also the subject of an intense dispute between cognitive neuroscientists, such as Rippon, who argue that the core elements of personality and identity, along with the consequent neural differentiations, first arise through the cognitive interactions alone. Against this are the behaviourist neuroscientists, including Fordor and others who consider additional pre-cognitive elements to be involved. Both use MRI studies, one group to deny earlier influences, the other to explain them. Cass recognises the existence of this deeper level, since she refers to elements of the default mode network and describes their effects during puberty; but she eliminates any reference to their impacts during early development, and she does not provide any suggestion or evidence that this dispute between neuroscientists exists; anywhere in her report.

These development processes give rise to intriguing possibilities. In this study we have seen how questions of “*Who we are?*”, “*What makes me?*”, and “*Who am I?*” are being answered. But these by themselves do not provide a stable base upon which judgements can be made. We have noted that by mapping how development takes place during the first three to four years of life, the psychological and physiological aspects of brain development act pro-actively together to form a finely tuned system in which the maximum amounts of individuality, possessiveness, intelligence, and inquisitiveness, together with the minimum degrees of energy expenditure are generated. I have also shown that the that the core elements of personality and identity coalesce from previously fragmented thought during the rapid expansion of neural interconnectivity around a median age of two years: Also, that the ability of the core gender identity to separate the self from the other must be secure, before cognition and the identification with the gender role can fully come into effect: That is considered to happen around a median age of three years. We have also noted that children do not develop sufficient awareness (called *Theory of Mind*) until about a median age of four years. Therefore, those early processes are usually hidden from view, and that may lead to the allegations that transgender people believe they are “*born into the wrong body?*” being made. These development processes may also provide missing key elements in furthering our understandings of how consciousness, personality and identity for all of us are created. Compulsions may also come into effect when the innate neural forces still dominate early development; at a time when the ability to separate the self from the other is forming; when the coherence of identity and being oneself is being created; and when the organising powers are too weak to keep these processes in check. Whereas personality disruptions only involve disturbances to the gender role.

We can never be aware of incongruences that have been created because before cognition comes into effect. All that remains is the core elements of personality and identity which have already been created, with the compulsions that drive them, which to us have been present from birth. There is also a strong bipolarity encountered: And these may only explode into conscious awareness and action at any time of life. If we are able to give consistent answers to the question of “*Who am I?*” from the age of four years; and from that time onwards also become aware of the individualities and incongruence that arise, it suggests that by then, we all have conscious minds. And if the analysis I present in these documents provides coherent and stable core senses of identity and personality, upon which the judgements of “*Who am I?*” and “*What makes me, me?*” can consistently be made, this may provide greater insights in to how consciousness develops. Nevertheless, much more work is needed, and if consciousness depends on how we organise our perceptions of reality and identity, or “*Free energy theories?*” where the role of cognition is to decrease entropy or limit surprise, then when taken together with the results of this analysis, perhaps these are some of the tools we may use.

But fears and incongruence do not wait for explanations of reason. Many compulsions, phobias, or incongruences are concerned with fear of the safety, security and integrity of the individuals concerned. They may not have obvious causes, long term impacts need not be understood, and they can be evident from an early date. Transgender people frequently feel a sense of discomfort with the gender roles and identities assigned to them from about the age of four years. The failure to recognise the effects of any of these from

the time they arise may lead to the misdiagnosis of transgender conditions: And to lives being destroyed when the wrong methods of treatment and management are applied. The social implications of this have major consequences, and that is covered in the second companion paper, where I examine how gender-critical groups, religious groups, and others seek to justify their arguments, and interpret their results.

### 3:0 Discussion and Conclusions

As we have seen this is a conflict between The Word Authorities and Professional Medical Institutions who now define transgender identities as “*naturally expected variations of the human condition, intrinsic to the personality created, arising very early in life, and cannot be changed either by the individual concerned or by the predations of others in subsequent life*”: against the attitudes of gender-critical feminists, religious groups, and others who define these conditions as “*paraphilias, perversions, or disruptions to the gender role*”. However, it is not a new conflict. It goes back to the time when Money McHugh and others were using Freudian psychodynamics to try to explain the nature and origins of transgender conditions, against Stoller and the American Professional Medical Institutions who recognised gender identities to be core elements of the personalities that are created very early in life. Nevertheless, Stoller could not adequately explain how gender identities are created. That is also the case for those groups who rely on Freud for their explanations: since both social learning theories and Freudian psychodynamics rely on the powers of cognition to give the explanations they require. It follows therefore that how personalities and identities, including gender identity develop during the first three to four years of life remain largely unknown. And that uncertainty still exists today. Therefore, it is the gender-critical groups, who specifically argue without foundation, that the first three years make little or no contribution to how gender identities develop. And who, by disparaging all other viewpoints, are the ones who are adopting ideologies, which are “*not based on credible science*” instead.

This continued uncertainty has led me to conduct my own investigation, which is described in these two papers and in the accompanying documents: It confirms the viewpoints of Stoller and the American Professional Medical Institutions. However, Cass does not even attempt to do any such comparison. Instead, Cass adopts as the terms of reference and evidence base for her report, a definition of gendered behaviour and gender identification by Kohlberg that dates from 1966, which considers only the impact of the gender role. And by refusing to consider any change to this base, I conclude that Cass dismisses the advances in understanding that have since taken place. Also, that she uses this to dismiss the credibility of subsequent research. I fully accept that Cass may genuinely believe that she is acting in the best interests of transgender children, and that she totally rejects the accusation of the gender-critical groups, but the fact remains that, in the Cass report, the impact of these early innate forces first identified by Gallese, Girard, Dawkins and others, continue to be ignored.

With disagreements as great as these, experiential evidence must stand in their place. Access to this experiential evidence and the research which has become available from the 1960s has transformed the situation without needing an explanation, from one where all gender and sexually variant behaviour was considered to be intrinsically disordered perversions, which involve desires for a role or the attractions of sex, into one where people now recognise that these activities are instead about searches for a coherence of identity and being oneself; and can celebrate them in same-sex marriages and other acts. To require two lesbian or gay people to undergo a medical examination by an anonymous medical panel, and to produce all the confirming documentation and certification before they could enter a legally recognised same-sex marriage would cause an outrage in today’s society. And allowing transgender people to self-identify their gender is part of that same rationale. Today, Judith Butler and other feminist pioneers, who were regarded by many in the 1990’s as opponents of transgender people; now base their present strong support for transgender people and their condemnations of the gender-critical viewpoints on the vast amount of experiential evidence that has since become available, as is amply demonstrated in Butler’s recent book: “*Who’s Afraid of Gender*”. There is now a large range of well documented peer reviewed scientific studies from many other sources, based on experiential evidence, which confirm these results.

Although Cass seems to accept this experiential evidence for transgender adults as being reliable, in the case of transgender children she denies it. This is despite the understanding that there are no grounds for defining transgender conditions for adults as personality variations, while at the same time defining them as

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personality disruptions for children instead. And her criticisms apply to all: transgender children and adults as well. In the introduction, to her report, Cass states: *“Polarisation and stifling of debate do nothing to help the young people caught in the middle of a stormy social discourse, and in the long run will also hamper the research that is essential to finding the best way of supporting them to thrive. This is an area of remarkably weak evidence, and yet results of studies are exaggerated or misrepresented by people on all sides of the debate to support their viewpoint. The reality is that we have no good evidence on the long-term outcomes of interventions to manage gender related distress”*. Cass is absolutely correct to condemn these abuses. But stripping away all these excesses still shows that the conflict is between the conclusions of the World Authorities and the Professional Medical Institutions who now treat transgender conditions as personality variations and as compulsions in search for a coherence of identity and being oneself, and the opposing conclusions of gender-critical groups which consider them to be personality variations and merely as feelings driven by desires for a role or the attractions of sex

That is what I believe Cass should have addressed in her report. However, by disregarding the effects of the massive neural and cognitive changes and transformations that take place during the first three to four years of life in the terms of reference she sets for her report: even though she acknowledges their effects during puberty, means that the only viewpoint she considers to be correct is that of the gender-critical groups, and others, who, instead treating these conditions as personality variations driven by a compulsive search for coherence of identity and being oneself, treats them as personality disruptions: and merely as feelings driven by desires for a role or the attractions of sex. When the motives, timescales and methods of management differ to the extent that what one side considers to be those of compassion and concern are almost inevitably regarded as recruitment, grooming, capture, and coercion by the other, any misdiagnosis can have a harmful effect.

Nor do I conclude that there is any justification for her dismissal of the advances in knowledge and experiential evidence since the 1960s on the nature of transgender conditions for everyone to be very weak: When I argue that she tries to enforce a diagnosis which treats these conditions as personality disruptions, instead of personality variations: Uses the terms of reference for her report to impose only one unchangeable diagnosis, also from the 1960s on how gender identities for all of us develop: Only considers how transgender conditions differ: Ignores the consequences of the neural transformations during the first three to four years and the effects of the pro-active and innate forces predicted by Girard Dawkins and others from the 1960s onwards; which dominate development from birth: Also, when I argue she attacks the methodologies of transgender research without properly considering the substance of the results. And when she confirms these dismissals with the throwaway remark that the analysis presented by Kohlberg and others *“still resonates today”*. This questionable use of research and experiential evidence is the subject of many other reviews of the Cass report, and these should be consulted for other more detailed accounts. I do not dispute the claim by Cass that she believes she is acting in the best interests of transgender children. But seeking to impose a diagnosis of transgender conditions as mere feelings involving desires for a role or the attractions of sex; in place of the compulsions which search for a coherence of identity and being oneself, destroys the advances of more recent years, imposes incorrect methods of management, stifles research, and takes us back to a time when it was presumed that all gender and sexually variant people were driven by motives of desires for a role and attractions of sex.

In this account I have shown that the core elements of personality and identity coalesce from fragmented thought during a peak period of neural development around a median age of two years. That these involve the creation of the ability to separate the self from the other: And that this is needed before the gender role identity, which responds to the expectations of the other can be created. Although the development of the gender role identity may be considered to be the product of cognition, the core gender identity is pre-cognitive in nature: Where it involves the creation of the coherences of identity which provides the stabilities we need to bring order and continuity to life. Traditional psychodynamic and social learning theories cannot properly explain how these core elements are created since they rely on cognition for their explanations. Because of this, they ignore the advances in knowledge and understanding which have taken place over the last sixty years; including the work of Girard, Dawkins, Gallese and others which show development is instead propelled by strong innate and pro-active forces which dominate from birth. And they presume that the primary organising forces which drive development forward are due to cognition alone. Despite these advances in

experiential evidence and science, the effects of these forces continue to be denied by many practitioners in the fields of sociology, psychiatry and psychology today. Until the concept of cognition is recast from one which considers it to be the primary organising force which drives development forward, into one which creates order out of disorder, these advances in science and understanding, as well as the legitimacy of transgender conditions, will continue to be denied. And incorrect methods of management will be applied.

Cass was commissioned to write an independent report which should have considered these issues. But Cass sets the terms of reference for her report to deny them. Therefore, regardless of merit, I conclude, that Cass attempts to enforce a diagnosis on transgender people which considers these conditions to be perversions, paraphilias or disruptions to the gender role. I also conclude that her attempts to use social learning theories alone to diagnose transgender conditions does not just diminish the legitimacy, depth, and integrity of transgender conditions. It also leads Cass to identify a timescale for gender identity development which is far longer than that shown by the experiential evidence, and by what the fast-tracking of early development provided by the psychodynamic theories would expect. I fully agree with Cass when she notes that many children do go through a period of questioning their gender before they grow out of it, and that considerable caution is needed before any irreversible action is taken. But that crucially depends on using a diagnosis that is correct. And when the motives, timescales and methods of management differ to the extent that what one side considers to be those of compassion and concern are almost inevitably regarded as recruitment, grooming, capture, and coercion by the other, any misdiagnosis can have a harmful effect.

There are broader issues to be considered. The approach in my study has been to use transgender conditions as case studies to examine how personalities and identities for all of us are created. The results of this investigation do not just confirm the viewpoints of the World Authorities and Professional Institutions. They show that strong and stable core elements of personality and identity are the products for a search for a coherence of identity and being oneself, which is drawn from fragmented sources: and becomes securely established very early in life. That may give greater insights into how conditions such as autism may arise. Earlier in this account I have shown that a child's initial associations, if unconscious, with personality and identity coalesce from previously fragmented thoughts during the peak period of neural development around a median age of two years. This fragmentation means that a different endpoint for every individual exists. These same processes of gender identification apply to everyone. Thus, the same deep intensities and profundities of allegiance to a gender identification occurs in all gender and sexually variant people, as well as those whose gender identities are in harmony with their biological sex. The current understandings show that, although on average there are significant differences in male and female behavioural patterns, with men more prone to engage in physical violence, considerable overlap occurs. Since gender identities are derived from interactions and behaviours: And because they develop through the capabilities and allegiances which have previously been created, this means they are consequent effects. That allows all women, including male-to-female transsexuals: acting as women with women, to pursue the same feminist arguments with the same vigour, from a stronger base. Equally for any female-to-male transsexual: acting as men with men, to pursue any equivalent male arguments from a similarly stronger base. Because the core gender identity can be described as an inner sense of belonging without behavioural implications, it further means that gender-critical ideology, whichever way it is interpreted, must be the less effective approach, and that gender identity, alongside sexual orientation should be listed a protected characteristic in any legislation that is provided. We cannot have an identity unless we are conscious of it. The existence of a stable base provides a secure framework, upon which concepts of "*What makes me, me*", and "*Who am I*" can be created: And when taken together, these may give greater insight into how consciousness is formed. It may also give better insight into why some conflicts should be treated and managed as compulsions, while others should be managed as perversions and disruptions instead. We are not clones of each other; and by mapping how development takes place during the first three to four years of life, I show elsewhere that the psychological and physiological aspects of brain development act pro-actively together in these early years to form a finely tuned system in which the maximum amounts of individuality, possessiveness, intelligence, and inquisitiveness, together with the minimum degrees of energy expenditure are generated.

We can never be aware of any cause or reason for the incongruences that are created before cognition comes into effect: But their impact still remains, and I argue that the lifelong tension between the innate and pro-active forces which drive development forward acting against the feedback forces of cognition which

keeps them in check, provides the stimulus whereby the highest human potentials are created. The effects of the pro-active nature of the forces which drive early development, when combined with the wide range of human physiology, can lead us to expect that both gender and sexually variant identities would be created without any obvious cause. And I also conclude that it is because of these experiences, each of us can come to recognise who we are; and can celebrate the full richness of life.

This paper, on Diagnosis, is the first of two companion papers. The second, on Implementation, can be downloaded using the link in the Resources section below.

## 4:0 Independence of the Cass Report

The arguments I present in this account may be wrong or they may be right. I do not claim any professional status or reputation to maintain, or any professional accreditation for these views. Nor do I attempt to prescribe. I have never been a patient or sought support from the Gender Identity Clinics. Or medical interventions of any kind. I continue to balance the life I have built, against the demands of a compulsive drive. As an academic I am well aware of the importance of the peer review process, including the use of original sources. All of my material is intended to meet these standards: so it is up to others to judge, on their merits, the arguments I present. Full references and cross-references original sources are given in the more detailed of these documents. However, that is not the point: In any independent review all sides in any argument must be fully considered. And in place of closing of ranks against any challenges, objective, informed and impartial decisions must be made. At the clinical level this is a dispute about whether transgender identifications should be treated merely as desire or behaviour driven disturbances involving only the gender role, or as personality variations and searches for coherence of identity and being oneself which lie at the core of the personalities that are created. No report which accepts the first and uses its terms of reference to deny the validity of the second can justify any claim to be independent. And no report which relies for its foundation on definitions of gender and gender identity which date from the 1960s, and which fails to take account of the subsequent understandings of how gender identities for all of us develop, can justify its claim to have authority. These are also matters of intense dispute and there is no evidence of that in the Cass Report. Therefore, I conclude that the Cass report is not an independent report.

In place of the approaches of the previous United Kingdom Conservative Government which have pursued policies which have maximised the exclusion of transgender people from everyday life, and who have misdiagnosed these conditions: The present Labour Government claims to seek inclusion instead. These issues are more fully addressed in the companion paper, which considers implementation. However, this Labour Government has at present accepted in full the recommendations of the Cass report. Because the Cass Report considers only one side of the arguments presented in a toxic dispute, I urge the present Labour Government to reconsider its full acceptance of the Cass report. And because it misdiagnoses transgender children and adults, I call for at least a judicial review of its conduct, content, and conclusions, while strongly advocating for the complete withdrawal of the Cass report.

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## 5:0 Resources

The results of this examination are presented in a family of documents

These two companion papers are available at:

Gilchrist, S. (2024): *“Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review: Part 1, Diagnosis”*: <https://www.tgdr.co.uk/documents/255P-CassTransDiagnosis.pdf>.  
(This document: Text: 16 pages)

Gilchrist, S. (2024): *“Current Disputes on the Natures of Transgender Conditions, and a Commentary on the Cass Review: Diagnosis”*. 255P

First Issued: 1 August 2024. Last update: 26 November 2024  
Access via: <https://www.tgdr.co.uk/articles/bibliography.htm>

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Gilchrist, S. (2024): "Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review: Part 2, Implementation": <https://www.tgdr.co.uk/documents/255P-CassTransImplementation.pdf>.  
( pages)

#### All Documents

(cross-references to other documents containing full references and cross-references to original sources may be given in each of these documents)

Gilchrist, S. (2024): "Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review: Preface to the Series": <https://www.tgdr.co.uk/documents/255P-CassFinalPreface.pdf>.  
(Text: 1 page)

Gilchrist, S. (2024): "An Examination of Current Disputes on the Natures of Transgender Conditions, and a Commentary on the Cass Review: Abstract": <https://www.tgdr.co.uk/documents/255P-CassFinalAbstract.pdf>.  
(Text: 1 page)

Gilchrist, S. (2024): "What We Need to Know About the Cass Report": <https://www.tgdr.co.uk/documents/255P-CassKnowledge.pdf>  
(Text: 6 pages)

Gilchrist, S. (2024): "Religion and Psychology in Transgender Disputes": <https://www.tgdr.co.uk/documents/255P-ReligionPsychology.pdf>.  
(Text: 6 pages)

Gilchrist, S. (2024): "The Cass Review and the Treatment of Transgender Conditions: An Introduction": <https://www.tgdr.co.uk/documents/255P-CassTreatmentIntroduction.pdf>.  
(Text: 11 pages)

The companion presentation is available on

Gilchrist, S. (2024): "The Cass Review and the Treatment of Transgender Conditions: Presentation": <https://www.tgdr.co.uk/documents/255P-CassTreatmentSlides.pdf>.  
(59 slides)

Gilchrist, S. (2024): "Current Disputes on the Natures of Transgender Conditions: A summary and a Commentary on the Cass Review": <https://www.tgdr.co.uk/documents/255P-CassSummary2.pdf>.  
(Text: 5 pages)

Gilchrist, S. (2024): "A Summary of Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review": <https://www.tgdr.co.uk/documents/255P-CassFinalSummary.pdf>  
(Text: 4 pages)

Gilchrist, S. (2024): "Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review: Part 1, Diagnosis": <https://www.tgdr.co.uk/documents/255P-CassTransDiagnosis.pdf>.  
(Text: 16 pages)

Gilchrist, S. (2024): "Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review: Part 2, Implementation": <https://www.tgdr.co.uk/documents/255P-CassTransImplementation.pdf>.  
(Text: pages)

Gilchrist, S. (2024): "Current Disputes on the Natures of Transgender Conditions, and a Commentary on the Cass Review: Diagnosis". 255P

First Issued: 1 August 2024. Last update: 26 November 2024  
Access via: <https://www.tgdr.co.uk/articles/bibliography.htm>

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[spap4144@gmail.com](mailto:spap4144@gmail.com)

Gilchrist, S. (2024): *“An Overview of Current Disputes on the Natures of Transgender Conditions and a Commentary on the Cass Review”*: <https://www.tgdr.co.uk/documents/255P-CassFinalOverview.pdf>  
(Text: 20 pages) (full references and cross-references to original sources are given)

Gilchrist, S. (2024): *“On the Diagnosis of Transgender Conditions: A Study of Current Understandings and a Commentary on the Cass Review”*: <https://www.tgdr.co.uk/documents/255P-CassFinalCommentary.pdf>  
(Text: 63 pages) (full references and cross-references to original sources are given)

The following documents may also be of interest:

(cross-references to other documents containing full references and cross-references to original sources may be given in each of these documents)

Gilchrist, S. (2024): *“Why the Present United Kingdom Government Advice on Transgender Children Must be Challenged”*. <https://www.tgdr.co.uk/documents/040B-GovAdviceTransChildren.pdf>

Gilchrist, S. (2024): *“Transgender Misdiagnoses: EHRC and Government Advice”*: <https://www.tgdr.co.uk/documents/040B-MisdiagnosesAndAdvice.pdf>

Gilchrist, S. (2022): *“Transgender Disputes, Conversion Therapy and Government actions” (Presentation)*: <http://www.tgdr.co.uk/documents/254p-PresTransDisputesAndGovActions.pdf>  
(full references and cross-references to original sources are given)

Gilchrist, S. (2022): *“No Blacks, No Irish, No Homosexuals, No Transgender People”*: <http://www.tgdr.co.uk/documents/252P-NoBlacks.pdf> (full references and cross-references to original sources are given)

More documents can be accessed and downloaded via the bibliography tab on my website: [www.tgdr.co.uk](http://www.tgdr.co.uk)

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