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To: Paul.Vazquez@flhealth.gov; BOM.MeetingMaterials@flhealth.gov
Subject: Submission re: gender medicine
Date: Monday, September 19, 2022 4:36:34 PM
Attachments: [Gender Identity - Fruitful Hypothesis or Dangerous Delusion \(Part I\).pdf](#)
[Gender Identity - Fruitful Hypothesis or Dangerous Delusion \(Part II\).pdf](#)

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Paul A. Vazquez, J.D.
Executive Director
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Mr. Vazquez,

The foundation for so-called "gender medicine" is that there is such a thing as "gender identity" and it is innate and immutable. This claim is without scientific merit. I respectfully submit to you an essay (in two parts) I have recently completed which addresses this question. Please include it in the record of submissions related to your upcoming discussions on these matters.

Thank you.

Yours,

Phillip Penna
North Bay, Ontario
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FDOH_000061398

Gender Identity

Fruitful Hypothesis

or

Dangerous Delusion?

Part II

**Further Reflection on the
Canadian Centre for Ethics in Sport Expert Working Group
2016 Statement**

**By Phillip Penna, MA
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17 July 2022

*“The [Canadian Centre for Ethics in Sport Expert Working Group] acknowledges the concern that transwomen athletes who grew up biologically male and who do not undergo hormonal intervention may be at a competitive advantage when competing in high-performance women’s sport. Nonetheless **it is recognized that transfemales are not males who became females. Rather these are people who have always been psychologically female, but whose anatomy and physiology, for reasons as yet unexplained, have manifested as male.”**¹*

Further to my comments in Part I of this essay, this statement deserves further scrutiny as it comes from a document which set the stage and forms the basis for so-called “Transgender Inclusion” policies being implemented by sports organizations throughout Canada. Though it has carried political weight, can the same be said for it intellectually? If not, then it behooves sporting organizations across Canada to – at a minimum - put a pause on these policies so a thorough and proper rethinking of the matter can be undertaken. Let us begin:

1. They use the term “transfemales.” This is important.
 - a. The word “woman” is a noun and means “adult human female.”
 - b. The word “female” is an adjective which means “the sex in animals or plants that produces or is capable of producing eggs or bearing young.” In other words, “female” is a biological term. So, the CCES EWG is making an appeal to *biology* when using this new term “transfemale.”
2. In sports, there are two categories for participation: male and female. Within each category, there are divisions based on age and skill (for example, boys AAA hockey; girls junior high school soccer).
3. The statement in question does not challenge this male/female binary for sports. Instead, what it does is offer a new definition for what determines someone to be “male” or “female.” More precisely, **they state emphatically, though without proof, that there is a heretofore unknown biological feature which determines the sex of a person.**
4. The statement directly speaks to the group of people who “grew up biologically male” but (they say) are actually female, or, as they refer to these people, “transfemales.” According to the CCES EWG these so-called “transfemales” are not males, rather they are females; what they mean by this is that they are *biologically female*² even though they have penises, larger bones and greater bone density, higher levels of testosterone, etc. The CCES EWG stated these people are and always have been females; always - from conception to the present. This is because they are, so they claim, “psychologically female.” The CCES EWG is arguing that it is *this* and nothing else which actually determines whether or not someone is female or male.
5. They base this argument on the claim this “female (and male) psychology” is part of everyone’s biological make-up. How do we know this is what they are stating? How else can one explain the following statement: **“these are people who have always been psychologically female, but whose anatomy and physiology, for reasons as yet unexplained, have manifested as male.”** (*emphasis mine*) In other words:

¹ Canadian Centre for Ethics in Sports, “Creating Inclusive Environments for Trans Participants in Canadian Sport: Guidance for Sport Organizations,” August 15, 2016, <https://cces.ca/sites/default/files/content/docs/pdf/cces-transinclusionpolicyguidance-e.pdf>; quotation found in *Unsporting: How Trans Activism and Science Denial are Destroying Sport*, by Linda Blade and Barbara Kay (2020 Rebel News Network Ltd.), page 87.

² We should not have to use these two words together. “Female” is biological term. “Biologically female” is redundant. O well...

- a. They are claiming these people should have had a female body because they have “always” – from conception onward – been psychological female;
 - b. Logically it is clear that they are stating that this psychological state is a biological reality because it should have had the impact on the developing fetus such that they should have had female anatomy.
 - c. Again, logically they are saying those people who have female anatomy and who say they are female have said female anatomy because the (hypothesized) biological principle of “female psychology” worked its magic properly.
 - d. But for some (or many) imponderable reason, this biological process did not work out for them and they were born with male anatomy.
6. It is clear, therefore, that the CCES EWG is not arguing for males to be included in and participate in female categories (or vice-versa) because, according to them, these people are in fact females, biologically, and therefore should be participating in the female category based on the (hypothesized and imponderable) biological principle of Gender Identity, their “inner sense” that they are female.
7. Indeed, all people who say they are female can only say that because of this inner sense. According to the CCES EWG, that is the foundation for sex determination, not DNA.

Is there a consensus in the scientific community that this is what determines sex? Is there verifiable proof that this is the reason why females who have female bodies are females, that is, because of Gender Identity? Like DNA, has this “inner sense” been isolated in a laboratory and proven to exist? If it has not, then how can it be claimed that it does exist? If it does exist, then we should be able to describe how it works to make a female body, and from there we should be able to determine why it sometimes does not do so. Then we could develop a test so as to be able to verify claims to be female, made by people with male bodies, are true.

But we don't have this test, and we don't have this test because we don't know how Gender Identity actually works biologically to create babies that correspond to this Gender Identity, and since we do not know how it works biologically, can we – like the members of the CCES EWG have done - say with any kind of scientific confidence that it is in fact Gender Identity which determines sex? Let me pose this question more directly: on what scientific grounds have so many sports organizations across Canada come to agree with what the CCES EWG has proposed in this statement?

Let's restate this differently:

1. If Gender Identity usually produces the correct body, what is the means of it doing so? If we do not know the means of it doing so, then how can it be said with any confidence that it does so? Indeed, how can we say with any confidence that it even exists?
2. We know DNA exists, and we have a pretty thorough knowledge of how DNA works. We know how disruptions in DNA can cause physical anomalies, and we even know how those disruptions happen; indeed, we have developed many tests to see and determine if some of these disruptions are present even while the child is *in utero*. Can any of this be said for Gender Identity?
3. The only proof offered is the person's claim. It is argued that a person would only make such a claim if it was true. This is circular logic, and such an esteemed group of people such as the

members of the CCES EWG should be more than a little embarrassed to use such logic.

Therefore, the answer to both of the above questions is negative.

4. Since the answer is negative, how can we “recognize” that these people with male bodies who say they are “psychologically female” are in fact females as is claimed? There is no test to determine if this is biologically true, and therefore the very claim that they are “psychologically female” is at best suspect and certainly should not be a determining factor for who gets to participate in the female category of sporting activities.

Let’s go one step further and apply the logic of the statement as if we were speaking of people who claim to be non-binary:

it is recognized that [transgender/non-binary individuals] are not males [or females] who became [non-binary]. Rather these are people who have always been psychologically [non-binary], but whose anatomy and physiology, for reasons as yet unexplained, have manifested as male [or female].

What exactly would that non-binary physiology look like coming out of the womb? Has there ever been an example in history of a person’s body being non-binary, that is, either having fully intact and working gonads of both female and male genitalia or of not having any vestiges of either that we can appeal to so as to make the case for a non-binary psychology, a non-binary Gender Identity? The answer is obvious: we do not have such an example.

Though this is enough to demonstrate the statement made by the CCES EWG, and as a result the whole document from which it comes, is without merit, I will discuss one more thing so as to drive home the point that this statement is woefully lacking; and all sports organizations in this country who have taken direction from this document and, acting upon it, implemented “transgender inclusion” policies (like Ringette Canada³) should be embarrassed to have done so.

The word “manifested”, what does it mean?

manifest (adjective): man-i-fest | \ 'ma-nə- fest \

1: readily perceived by the senses and especially by the sense of sight

Their sadness was manifest in their faces.

2: easily understood or recognized by the mind: OBVIOUS

manifest (verb): manifested; manifesting; manifests

transitive verb

: to make evident or certain by showing or displaying

evident (adjective): ev-i-dent | \ 'e-və-dənt , -və- ,dent \

: clear to the vision or understanding⁴

The CCES EWG says that these so-called “transfemales” anatomically “manifested as male.” If that is true, then, according to the definition of the word Manifest (a transitive verb), the evidence displays that they are Male. Further to this (as an adjective), it is readily (quickly, easily) perceived by the senses and recognized by the mind (it is obvious) that they are Male. In other words, what is being

³ <https://www.ringette.ca/trans-inclusion-policy-and-resources/> accessed 7 April 2022.

⁴ See <https://www.merriam-webster.com/>

made evident (verb) and easily understood (adjective) is that these people are Male. And since the CCES EWG is not arguing against the sex binary for participation in sports, these people should play and compete with other males like they themselves are. There is no counter-evidence that is easily perceived (or even difficult to perceive) to prove biologically (as they claim) to say that we can “recognize” (their word) them as females. Furthermore, as noted above, there is no way to prove that they are not males because there is no way to prove that there is such a thing as Gender Identity or that it is the foundation for the determination of sex. The CCES EWG making the claim that this is so is not enough to make it so. Saying “The Emperor is wearing clothes” does not make it to be so.

Thus we can see that there are two competing theories at play in this one paragraph: The first is that Gender Identity is a biological principle and it is responsible for determining sex (no matter the anatomical features of a person’s body); the second, is that DNA is the biological principle which determines sex. I have shown that the first is not verifiable while the second is easily so. Yet, the CCES EWG has chosen to side with the former. This goes against the basic and essential scientific and philosophical principle of Occam’s Razor,

*the maxim that, given a choice between two hypotheses, the one involving the fewer assumptions should be preferred. In other words, one should apply the law of parsimony and choose simpler explanations over more complicated ones. See also **elegant solution**. [William of Occam or Ockham (c. 1285–1347), English Franciscan monk and Scholastic philosopher]*

Elegant Solution

a solution to a question or a problem that achieves the maximally satisfactory effect with minimal effort, materials, or steps. In terms of theories or models of behavior, an elegant solution would be one that satisfies the requirements of the law of parsimony.

Law of Parsimony

*the principle that the simplest explanation of an event or observation is the preferred explanation. Simplicity is understood in various ways, including the requirement that an explanation should (a) make the smallest number of unsupported assumptions, (b) postulate the existence of the fewest entities, and (c) invoke the fewest unobservable constructs. Also called **economy principle; principle of economy; principle of parsimony**.⁵*

Principle of Parsimony

The principle of parsimony recommends that from among theories fitting the data equally well, scientists choose the simplest theory. Thus, the fit of the data is not the only criterion bearing on theory choice. Additional criteria include parsimony, predictive accuracy, explanatory power, testability, fruitfulness in generating new insights and knowledge, coherence with other scientific and philosophical beliefs, and repeatability of results. The principle of parsimony has four common names, also being called the principle of simplicity, the principle of economy, and Ockham’s razor (with Ockham sometimes Latinized as Occam).

⁵ From the APA Dictionary of Psychology <https://dictionary.apa.org/> accessed 7 April 2022.

*Parsimony is an important principle of the scientific method for two reasons. First and most fundamentally, parsimony is important because the entire scientific enterprise has never produced, and never will produce, a single conclusion without invoking parsimony. Parsimony is absolutely essential and pervasive.*⁶

There was and is no necessity (that is, no compelling evidence) for the CCES EWG to prefer the more complex hypothesis - rife with assumptions and invocations of “unobservable constructs” - of Gender Identity over the simple hypothesis of DNA. The latter can be and has been verified; whereas the former has not, nor, because of its imponderability, can it ever be so. The CCES EWG, and every other sports organization which has followed their lead, making this preference was and is in error. This is a big problem. As Thomas Aquinas correctly remarked, “a little error in the beginning leads to a great one in the end.”⁷ In this case, these errors work themselves out in individual lives with physically irreversible consequences. Sports organizations who have implemented “Trans Inclusion” policies have made themselves accountable for these consequences. (Perhaps they should start getting ready for the lawsuits, like all the parties who were involved with the Canadian residential school system.)

Post-script

It is clear that the CCES EWG made an appeal to biology when making the case in favour of the possibility that people can be “trans.” They had to, because it is sports we are talking about and it is bodies that play sports. As I have shown, their appeal to biology fails because there is no biological proof for what they have claimed and because it fails to meet the standard of Occam’s Razor.

It must be noted that their explanation for what makes for a person being “trans” is not at all what others state, namely, “gender distinction (male and female) stems from the soul rather than from the body.”⁸ In 1964, Psychoanalyst Robert Stoller first coined the term itself and defined it as “a complex system of beliefs about oneself: a sense of one’s masculinity and femininity. It implies nothing about the origins of that sense (e.g., whether the person is male or female). It has, then, psychological connotations only: one’s subjective state.”⁹

*Like some quasi-religious movement, the transgender community is bound together by faith in gender identity — the idea that we all have a soul-like essence that determines whether we are men or women.*¹⁰

So, on one hand, Gender Identity is presented as biological and innate - physical and objective - and on the other it is presented as “a system of beliefs,” something metaphysical and subjective. Which is it? In either case, both are presented as belief statements because neither camp can produce proof of its existence save the person saying they are “transgender.” In addition to this there are the Queer

⁶ PARSIMONY AND EFFICIENCY, Published online by Cambridge University Press: 05 March 2015, Hugh G. Gauch Jr, <https://www.cambridge.org/core/books/abs/scientific-method-in-practice/parsimony-and-efficiency/F8327BE6D73C3D00214B65AC04D350F2> accessed 7 April 2022.

⁷ De Ente et Essentia, Aquinas

⁸ See *Why Aquinas's Metaphysics of Gender Is Fundamentally Correct: A Response to John Finley* by William Newton Epub 2019 Nov 25, found at <https://pubmed.ncbi.nlm.nih.gov/32549637/>; and *The Metaphysics of Gender: A Thomistic Approach* by John Finley Published 5 April 2017 in The Thomist: A Speculative Quarterly Review (<https://www.semanticscholar.org/paper/The-Metaphysics-of-Gender%3A-A-Thomistic-Approach-Finley/93eb2e91f581ea58040b8bc840678ff3c3cf9224>)

⁹ “A History of Affirmation” published by Bayswater Support Group 24 May 2021 found at <https://www.bayswatersupport.org.uk/a-history-of-affirmation/>

¹⁰ “A gendered soul? The trans debate was less toxic when it was a process, not an identity” by Debbie Hayton 22 June, 2021 found at <https://thecritic.co.uk/a-gendered-soul/>

Theorists who say that gender is “performance,” that “all categories (including biological sex) are culturally constructed, and that body modification is a personal choice rather than a medical necessity.”¹¹

Thus we have before us an ontological question, namely, does “Gender Identity” exist and if so how can it be determined to exist and what is the nature of its existence? Perhaps those who say it exists should first come to an agreement amongst themselves on this question before the rest of us are forced to agree (through law) and play along (in sports) and allow our children’s bodies to be experimented on with the use of puberty blockers, hormones, and radical cosmetic surgical procedures. Of course, with each young person being a potential \$50,000 - \$150,000 worth of income for the medical industrialists that would not be good for business.¹² As any honest capitalist will tell you, the protection of (mother) nature cannot be a reason to hinder economic growth; and since we have cut down all the trees, we are just next in line. Step right up!

¹¹ “A History of Affirmation” Section V “Queering the Clinic”, <https://www.bayswatersupport.org.uk/a-history-of-affirmation/>

¹² “The Business Model of Youth Transitioning” by Catherine Karena found at <https://www.youtube.com/watch?v=BaeZCS6rUk4>

Some Helpful Resources

1. [Detrans Awareness Day Webinar](#): On Saturday March 12, 2022, Genspect hosted a webinar for Detrans Awareness Day. We handed the mic to detransitioners, so they could tell their own stories. No rules. No filters. No holds barred. The detransitioner community is growing fast, as more and more young people realize they received inadequate healthcare. Our brave guests spoke out about their own treatment pathways, what they've learned about the gender healthcare industry, and what they've learned about themselves.
 - Lots of good resource links in the video description
 - Time stamps
 - [0:00:00](#) – Introduction
 - [0:04:00](#) – Helena: “Trans, Tumblr and fandom”
 - [0:40:28](#) – Panel discussion: “Detrans 101: What you need to know”
 - [1:10:56](#) – Allie: “The autism angle”
 - [1:47:23](#) – Carol: “Butch lesbians and transgender identities”
 - [2:23:00](#) – Laura: “Trauma, transition and detransition”
 - [2:31:30](#) – Panel discussion: “Different for boys”
 - [3:15:55](#) – Michelle: “How health professionals are failing detransitioners”
 - [3:55:30](#) – Sinéad: “You are not broken”
 - [4:16:07](#) – Cat: “Losing my voice”
 - [4:22:44](#) – Panel discussion and audience Q&A
 - [4:53:27](#) – Keira: “What detransitioners need”

2. My Story of Rapid Onset Gender Dysphoria | Helena Kerschner

<https://youtu.be/GjOmko-9hSg>

3. [Whose Body is It?](#) (Youtube Channel - Warning: Some videos are very graphic and disturbing)

- Jennifer Bilek: Transhumanism & Autogynephilia; The Industry of Identity Medicine
 - https://www.youtube.com/watch?v=9kQ_o0G7D38&t=6s
- The Attack on Our Sexed Bodies with Jennifer Bilek
 - <https://youtu.be/jvBMGFOWH4M>
- The Abolition of Sex with Kara Dansky
 - https://www.youtube.com/watch?v=gll_gKkOELY

Note: What is of particular interest to me is the matter of language; at [45:47](#) Dansky states:

“It's important to note that it is the very trickery and the use of language that leads to all of these other things the use of language makes all the other things inevitable, absolutely inevitable”

- The Racist Origins of 'Gender Neutral' Language & Women's Bodies as Currency w/ Dr. Suzanne Vierling
 - <https://www.youtube.com/watch?v=OI8krO5SSdc>

4. [Gender: A Wider Lens Podcast](#) - Gender, Identity and Transition from a Psychological Perspective: Two therapists explore the expanding concept of "gender" from a psychological depth perspective.

5. [Genspect](#): A rational approach to gender - Genspect is an international alliance of professional groups, parent groups, and others who advocate for a rational and informed approach to gender issues.
 - o [Resource Page](#)
 - o [Youtube Channel](#)
6. [Gender Dysphoria Alliance Canada](#): For a more evidence-based, less ideological conversation about gender dysphoria
7. [TREvoices](#): Trans Adults & Others SCREAMING To STOP Childhood Medical Transition.
 - o Warning: Some things on this site can be very and disturbingly graphic
8. Various Youtube Channels I like:
 - o [The Honesty Project](#)
 - o [Save Women's Sports](#)
 - o <https://savewomenssports.com/>
 - o [Partners for Ethical Care](#)
 - o Transjacked: [Former Trans Kid, Petra](#)
 - o [Paradox Institute](#)
 - o [Graham Linehan](#): The Mess We're In
 - o Mess Episode #109: [Coach Blade](#)
 - o Mess Episode #114: [The Beginning of the End](#)
 - o The Mess We're In Ep. #119: [Terf Christmas Comes Early](#)
 - o Rewire the West - [The Seven Deadly Sins of Modernity](#)
9. ["MALE AND FEMALE HE CREATED THEM"](#) TOWARDS A PATH OF DIALOGUE ON THE QUESTION OF GENDER THEORY IN EDUCATION - CONGREGATION FOR CATHOLIC EDUCATION (for Educational Institutions), Vatican City, 2019.
10. ['If only I were a boy ...'](#): Psychotherapeutic Explorations of Transgender in Children and Adolescents - March 2022, British Journal of Psychotherapy, by Marcus Evans.
11. And for more linguistic commentary by Frank Zappa, I recommend the story relayed by Fido the dog in verse 3 of the classic piece [Stink-Foot](#) from the 1975 album "Apostrophe".

Fido gets the last word:

"Ain't this boogie a mess?"

Gender Identity

Fruitful Hypothesis

or

Dangerous Delusion?

Part I

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17 July 2022

Many scientific hypotheses take origin from flights of the imagination which at first seem wild, but which later stand up to sober scrutiny and detailed proof. Newton's notion that gravity was a universal which acted at enormous distances was a leap of the imagination which must have seemed absurd until he was able to demonstrate it mathematically. Kekulé's discovery of the ring structure of organic molecules originated from a dream-like vision of atoms combining in chains which then formed into coils like snakes eating their own tails. Einstein's special theory of relativity depended upon his being able to imagine how the universe might appear to an observer travelling at near the speed of light. These are examples of phantasies which, although originating in the imagination, nevertheless connected with external world in ways which illumined it and made it more comprehensible.

Other phantasies giving rise to supposedly scientific hypotheses have lacked this connection with the external world. Such creations of the imagination are ultimately discarded as delusions. Throughout the eighteenth century, for example, the standard explanation of combustion was the theory of phlogiston. Phlogistan was considered to be the material principle of combustibility. When something burned, it was supposed to lose phlogiston, which was thought of as an [imponderable fluid](#)¹. It was finally demonstrated that phlogiston existed only in the imagination, that nothing in the external world corresponded to it.

We see, therefore, that in the field of science, there are two kinds of phantasy. The first reaches out to the external world and, by maintaining a connection with the world which corresponds to its real workings, becomes a fruitful hypothesis. The second, making no such connection with the external world, is ultimately dismissed as [a delusion](#).²

Gender Identity: Fruitful Hypothesis or Dangerous Delusion?

In my first essay, I argued that the term "Gender Identity" was essentially meaningless because the word "Gender" was being improperly used. "Gender" formally speaking, is a grammatical term denoting

the classification of words, or the class to which a word belongs by virtue of such classification, according to the sex of the referent (natural gender) or according to arbitrary distinctions of form and syntax (grammatical gender). Modern English has few traces of grammatical gender, but Latin nouns all have gender, masculine, feminine or neuter, often contradicting natural gender. Adjectives and articles have gender insofar as they change form to agree with the noun they qualify...³

¹ "These imponderable fluids were mere names, and these forces were suppositions, representing no observed facts." From https://en.wikipedia.org/wiki/Imponderable_fluid accessed 8 April 2022.

² Storr, Anthony. *Solitude: A Return to the Self* (New York: Ballantine Books, 1988), pages 67-68.

³ *The New Lexicon Webster's Encyclopedic Dictionary of the English language Canadian Edition* published in 1988 main dictionary section copyright 1972 Librarie Larousse as Larousse Illustrated International Encyclopedia and Dictionary Revised and updated 1988.

The argument I made can be summed up as follows: it is not possible for someone to be “Transgender” because people don’t have “gender,” only words do.⁴ Terms such as “Transgender” and “Cisgender” are nonsense words that one would find in “nonsense poetry” which employ “fanciful language and meaningless, [made-up words](#).”⁵ Sadly, we now have laws which have enshrined these “made-up words” in the criminal code. Nietzsche was wrong: God is not dead, language is; as Frank Zappa sang

*You can't even speak your own f***ing language
You can't read it anymore
You can't write it anymore
Your language
[The future of your language](#)...*⁶

In this brief reflection I will consider “Gender Identity” as a scientific hypothesis, simply stated as follows:

1. Everyone has a “Gender Identity.”
2. “Gender Identity” is innate (and immutable) both in terms of psychology and biology.
3. Only the person themselves can verify their Gender Identity, their individual “innermost sense of [their own gender](#).”⁷

More descriptively, the “Gender Identity” scientific hypothesis is this:

- If a person “senses” that they are a woman, then they are a woman, and vice-versa, and somehow neither (among other seemingly endless options).
- Furthermore, this “innermost sense” is in fact the only determining factor of whether or not someone is a man, woman, both, neither, or something else together (like a cat).
- The argument is this: if a person who has a penis “senses” that they are a woman then they are in fact a woman and the scientific verification of this is this person’s own “innermost sense” because (so goes the hypothesis) this “sense” is immutable, part of your biological make-up, that is, one can only have that “sense” of being a woman if you were a woman, a man if you were a man, neither if you were neither, both if you were both, etc.
- What we would normally rightly call the human body has nothing to do with this. Gender Identity alone determines what you are and it, somehow, is inherent to you and is itself biological.

⁴ “Sex” is biological and “Gender” is grammatical.

⁵ <https://www.best-books-for-kids.com/nonsense-poems.html>, Accessed 2 April 2022.

⁶ Zappa, Frank. “[The Blue Light](#)” from the Album *Tinseltown Rebellion Band* originally released in 1981.

⁷ I recognize that Queer Theorists will disagree with the statement at Gender Identity is understood to be an innate psychological state rooted in biology. They would argue that Gender Identity is “performative” like when a couple gets married and the officiant states “I now pronounce you man and wife”, that is, when someone says that they are non-binary then they are non-binary. I am not addressing their conception of Gender Identity in this essay. I am addressing those who present Gender Identity in scientific terms.

Here is an example of this scientific hypothesis employed by Canadian Centre for Ethics in Sport Expert Working Group who wrote in a 2016 document in which they state they acknowledge

“the concern that transwomen athletes who grew up biologically male and who do not undergo hormonal intervention may be at a competitive advantage when competing in high-performance women’s sport. Nonetheless it is recognized that transfemales are not males who became females. Rather these are people who have always been psychologically female, but whose anatomy and physiology, for reasons as yet unexplained, have manifested as male.”⁸

In other words, according to the CCES EWG,

- We know these “transwomen” are women, not because of their “anatomy and physiology” but because of their psychological make-up, *that* is why they are women.
- Their psychological make-up should have resulted in them having a different biology reality; that is, because they are “psychologically female” they really should have been born with what we know to be a female body, but for some scientifically unknown (and [imponderable](#)⁹) reason this is not what happened. But despite this *in utero* mix-up, we know they are females because these “transwomen” tell us they are.

Who knew that a baby was formed in the womb and then born would have a body based on the child’s “psychological” make-up? Well, we don’t know this. It is simply a hypothesis, namely, that psychology is *the* biological force which determines what you are even if your body disagrees; and, again, according to the CCES EWG, we can confidently claim that this is true even though we don’t know why a body would disagree as the body has nothing to say about the matter. [This is quite a hypothesis.](#)¹⁰

This hypothesis was [first articulated by Dr. John Money in the 1950’s](#), and has increasingly been acted upon since then. For the past 10-15 years, it has been deemed by political, academic, medical, and corporate establishments to have been verified and true. We now teach this to children starting at age 4 and we have seen an explosion of medical clinics offering medical products and procedures ([in the US there was 1 ten years ago and now there are more than 300 in North America](#))¹¹ which we are told affirm people’s “gender identity”, this “scientific reality” which is verified by someone simply saying that they are “transgender.” With the thousands of (mostly) young people, particularly young females, having accessed these services over the past ten years (and [tens of thousands more hoping to do so](#)),¹² this “*reaching out to the external world,*” we should now be able to accurately see and state whether or not this hypothesis has been fruitful or delusional. What does the evidence reveal? Does it “*stand up to sober scrutiny and detailed proof?*”

⁸ Canadian Centre for Ethics in Sports, “Creating Inclusive Environments for Trans Participants in Canadian Sport: Guidance for Sport Organizations,” August 15, 2016, <https://cces.ca/sites/default/files/content/docs/pdf/cces-transinclusionpolicyguidance-e.pdf>; quotation found in *Unsporting: How Trans Activism and Science Denial are Destroying Sport*, by Linda Blade and Barbara Kay (2020 Rebel News Network Ltd.), page 87.

⁹ See definition at <https://www.vocabulary.com/dictionary/imponderable> accessed 8 April 2022.

¹⁰ See my [essay post-script](#) for a more detailed critique of this statement by the CCES EWG.

¹¹ “The Attack on Our Sexed Bodies with Jennifer Bilek” on Whose Body is It Podcast found at <https://youtu.be/jvBMGFOWH4M?t=3902> accessed 5 April 2022.

¹² Ibid., <https://youtu.be/jvBMGFOWH4M?t=2246> accessed 5 April 2022.

"You need to have a really, really good evidence base in place if you're going straight to an invasive treatment that is going to cause permanent changes to your body"¹³

"Surely medical organisations and children's hospitals wouldn't endorse these treatments without rock-solid evidence."¹⁴

1. **"Sweden drastically changes protocol, prioritizes psychotherapy"**¹⁵

The National Board of Health and Welfare is currently working to update the knowledge support for care of young people with gender dysphoria that was established in 2015. This is happening in stages and now the authority comes with new recommendations regarding puberty blocking and cross-sex hormone treatment in this group.

The National Board of Health and Welfare therefore calls for restraint with treatment in persons under 18 years of age. According to the authority, the risks of hormone treatment currently outweigh the possible benefits for the group as a whole.

The National Board of Health and Welfare relies, among other things, on a review of relevant studies on the effect and safety of hormone treatment carried out by the Swedish Agency for Medical and Social Evaluation (SBU). In the report¹⁶ . . . the SBU concludes that it is not yet possible to draw any definite conclusions regarding this.

Hormone treatment should henceforth be given within the framework of research, according to Thomas Lindén, head of department at the National Board of Health and Welfare. (Emphasis mine)

2. **"National Academy of Medicine in France Advises Caution in Pediatric Gender Transition"**¹⁷

*The National Academy of Medicine in France has issued a press release in which it cautions medical practitioners that the growing cases of transgender identity in young people are often socially-mediated and that great caution in treatment is needed. The Academy draws attention to the fact that hormonal and surgical treatments carry health risks and have permanent effects, and that **it is not possible to distinguish a durable trans identity from a passing phase of an adolescent's development.** (Emphasis added)*

¹³ "Doctors Have Failed Them, Say Those Who Regret Transitioning" By Alicia Ault 22 March 2022, <https://www.webmd.com/sex-relationships/news/20220322/doctors-have-failed-them-say-those-who-regret-transitioning>

¹⁴ "New media outlet examines the evidence for 'gender medicine': An Australian journalist is wading into one of the biggest medical controversies of our time." by Bernard Lane 15 March, 2022 <https://mercatornet.com/new-media-outlet-examines-the-evidence-for-gender-medicine/78051/>

¹⁵ <https://genspect.org/breaking-sweden-dramatically-changes-protocol-prioritizes-psychotherapy/> accessed 5 April 2022

¹⁶ <https://www.socialstyrelsen.se/om-socialstyrelsen/pressrum/press/uppdaterade-rekommendationer-for-hormonbehandling-vid-konsdysfori-hos-unga/> accessed 5 April 2022

¹⁷ <https://segm.org/France-cautions-regarding-puberty-blockers-and-cross-sex-hormones-for-youth> accessed 5 April 2022

3. UK – “[Cass Review Interim Report published](#)”¹⁸

The report says . . . the unquestioning affirmative approach is flagged in several places in reports from clinicians and therapists who feel that this is at odds with their professional training and standards:

“Some secondary care providers told us that their training and professional standards dictate that when working with a child or young person they should be taking a mental health approach to formulating a differential diagnosis of the child or young person’s problems. However, they are afraid of the consequences of doing so in relation to gender distress because of the pressure to take a purely affirmative approach. Some clinicians feel that they are not supported by their professional body on this matter. Hence the practice of passing referrals straight through to GIDS is not just a reflection of local service capacity problems, but also of professionals’ practical concerns about the appropriate clinical management of this group of children and young people.” (Emphasis added)

4. “[Finland Issues Strict Guidelines for Treating Gender Dysphoria](#)”¹⁹

Western countries around the world are grappling with how to treat the exponentially growing number of children and adolescents being referred to gender clinics for puberty blockers, cross-sex hormones and gender-affirming surgery. Finland recently issued very strict clinical guidelines for the treatment of children with gender dysphoria.

- There is clear differentiation in treatment guidelines between early-onset childhood gender dysphoria and adolescent-onset gender dysphoria.
- The guidelines acknowledge and recognize that identity exploration is a natural phase of adolescence and restrict medical interventions until “identity and personality development appear to be stable”.
- There is a prioritization of psychotherapeutic non-invasive interventions as the first course of action “due to variations in gender identity in minors”.
- Hormone therapy is initiated only if it is ascertained that “identity as the other sex is of a permanent nature and causes severe dysphoria” (ie medically necessary).
- **A requirement that there be “no contraindications” prior to initiation of puberty blocker or cross-sex hormone interventions.**
- No surgical interventions are allowed for children under the age of 18. (Emphasis added)

5. Australia and New Zealand:

In an updated **position statement**, the Melbourne-based Royal Australian and New Zealand College of Psychiatrists last year **underscored the importance of mental health evaluations of gender dysphoric youth over an “[affirmation only](#)” approach.**²⁰ (Emphasis added)

¹⁸ <https://www.transgendertrend.com/cass-review-interim-report/> accessed 5 April 2022.

¹⁹ <https://genderreport.ca/finland-strict-guidelines-for-treating-gender-dysphoria/> accessed 5 April 2022

²⁰ “Hitting the brakes on transgender treatments for youth: International medical groups call for caution on hormonal and surgical interventions”, by Mary Jackson; Posted 14March, 2022 https://wng.org/roundups/hitting-the-brakes-on-transgender-treatments-for-youth-1647283935?fbclid=IwAR1IScNqt_S6oW001NK7K8xpXcGJtzjG-L-QOouMRazRnOJRX8deqQn1q38

6. Detransitioners:

"I was a child, allowed to destroy my body permanently, under the assurance that I can always change my mind, and that it's a beautiful, harmless process," wrote Lgbtcos in February . "The informed consent model is a lie, because we are just guinea pigs to a medical experiment, my life is permanently afflicted, and I was not informed."

*The missive was on the Detrans subreddit, which currently has **23,000** members.*

...

[Athena] recently wrote on Reddit: "I'm gonna tell u from experience the coddling of transgender ppl and their delusions ... You are going against fundamentals of nature, immutable stuff, and damaging yourself!!! no such thing as sex change, only sterilization. people won't want to date you. your health declines. your body suffers. your social life suffers."²¹ (Emphasis added)

7. Back to the UK: **Sajid Javid inquiry into gender treatment for children - Health secretary compares political fears over trans issue to silence during Rotherham scandal**

Javid is said to be particularly alarmed by [Hilary Cass'] finding that some non-specialist staff felt "under pressure to adopt an unquestioning affirmative approach" to transitioning and that other mental health issues were "overshadowed" when gender was raised... "This has been a growing issue for years and it's clear we're not taking this seriously enough," an ally of the health secretary said. "If you look at Hilary Cass's interim report, the findings are deeply concerning and it's clear from that report that we're failing children..." "That overly affirmative approach where people just accept what a child says, almost automatically, and then start talking about things like puberty blockers — that's not in the interest of the child at all," the ally said. The Tavistock & Portman NHS Foundation Trust sees 2,500 children a year — 200 of whom access hormones. Referrals have increased 50-fold in the past decade, with far more female-born children now coming forward in a reversal of previous trends.

8. **Florida** (which seems to be well aware of everything I have noted above):

Systematic reviews on hormonal treatment for young people show a trend of low-quality evidence, small sample sizes, and medium to high risk of bias. A paper published in the International Review of Psychiatry states that 80% of those seeking clinical care will lose their desire to identify with the nonbirth sex. One review concludes that "hormonal treatments for transgender adolescents can achieve their intended physical effects, but evidence regarding their psychosocial and cognitive impact is generally lacking."²²

9. And the list goes on.

²¹ "We are just guinea pigs": Women describe trauma of transitioning as teenagers" 21 March, 2022 by Tori Richards, <https://www.washingtonexaminer.com/restoring-america/community-family/we-are-just-guinea-pigs-women-describe-trauma-of-transitioning-as-teenagers>

²² https://www.floridahealth.gov/documents/newsroom/press-releases/2022/04/20220420-gender-dysphoria-guidance.pdf?utm_source=floridahealth.gov&utm_medium=referral&utm_campaign=newsroom&utm_content=article&url_trace_7f2r5y6=https://www.floridahealth.gov/newsroom/2022/04/20220420-gender-dysphoria-press-release.pr.html accessed 2-May-2022.

If the Gender Identity hypothesis was true, then there would not be this retreat both at the institutional and individual levels. All one needs to do is listen to the four women on the [“Detrans 101: What You Need to Know”](#) panel to recognize that this hypothesis, when acted by and upon them, did not produce the results hypothesized, but rather produced more and irreversible harm.²³

Clearly the hypothesis has fallen short. In the words of Storr, having reached out to the external world, this phantasy made no connection with it and therefore should be *“dismissed as a delusion.”*

Should we be surprised by this? Not at all. The evidence of this hypothesis being wrong was provided to us by the work of [Dr. John Money](#) himself. His work with the Riemer twins of Winnipeg, Manitoba was clearly a abject and tragic failure. Despite this, he himself never admitted that the implementation of his “gender theory” with these twin boys to be so. This lack of acknowledging this failed experiment is tantamount to lying.²⁴ Everything that has happened in this field since then is based on this original lie, on the denial of the truth, the perpetuation of a failed hypothesis that should be *“dismissed as a delusion.”*

So why is this hypothesis still being acted upon as if it were not so? **Vested interests**

Vested interest #1: Trans Activists:

Why are bad experiences with gender medicine stigmatized, suppressed, discouraged, etc., by the trans community? As part of the push to “depathologize” being transgender, activists are now pushing for an informed consent model as an alternative to the diagnostic process. This removes all of the “gatekeeping” measures that were in place to try and manage regret and other negative experiences with transition.

So this is the dilemma for trans activists: if too many people report negative experiences with transition, health care providers will be forced to reassess whether the current model of care is ethical.

It is in their interest to keep this model, so it is in their interest to downplay negative experiences. The idea that a trans identity could be socially influenced is stamped out. The possibility that a young person might wrongly interpret symptoms of developmental disabilities or other mental health disorders as “gender dysphoria” must be suppressed. They repeat over and over that getting it wrong is very rare, and many of the people claiming to be detransitioners are just liars.

This is why I keep finding myself at odds with trans activists. Fully understanding all of the possible outcomes, including the negative ones, is essential to informed consent. You are not for “informed consent.” You are for getting what you want immediately when you want it — regretters be damned.

Ultimately, the stigmatizing of negative experiences — removing the ability to provide true informed consent when choosing medical transition — harms every single person who transitions. You were all failed by professionals and by the community just as much as I was.²⁵ (Emphasis added)

²³ <https://youtu.be/tFAS-i2Xghs?t=1365> accessed 5 April 2022.

²⁴ “The Truth About Gender with Miriam Grossman, MD” <https://youtu.be/RM3mQJ9N4l0?t=1005> accessed 17 July 2022.

²⁵ “Is Detransition the ‘Worst Possible Outcome’? Some thoughts on how I’ve observed people trying to control the narrative around detransition” by Michelle Alleva, posted 6 April, 2022 <https://somenuanceplease.substack.com/p/is-detransition-the-worst-possible?s=r>

Vested Interest #2: Money and Power

Why do we have laws such as Bill C-4 in Canada, the NCAA allowing males to compete and win in the female category, President Biden using terms such as ‘Transgender kids’, and more? I make the following hypothesis my own: it is because *“humanity is far more profitable as parts than we are as whole sexed beings. Corporate capitalism, already having colonized the entire planet and left a wasteland of our waterways, our soil, the air we breathe, and most other species, has now come for us.”*²⁶

More to the point, they have come for our kids.²⁷

*“...you have these big corporatists on their social media platforms like gender surgeons marketing their wares, their operations to young people. They don't understand the power of this. Transgenderism has been made cool, that's why they're doing it, that's part of why they're doing it, but they're dissociated; they're dissociated because also there's a lot of porn on their platforms. They're being sexually traumatized [in] an effort to get them to dissociate. **This is all about capturing the youth; they don't give a crap about us, you know, it's really the youth that they want. Any totalitarian regime goes after the youth because they'll take it into the next generation and children that don't know who or what they are are just vulnerable.** They're going to be like little drones for the state, for the corporate state ... and it's not my imagination. It's not that oh I've been like down this rabbit hole so long I think 'oh they're coming after the kids.' I have the receipts; Arcus Foundation, Denton's International, largest international law firm, Open Society Foundation; they're making these legal edifices for constructing this apparatus which is not true. **It's not real. There are no transgender children because there's no transgender. It's an ad. People have got to get that down. I just want to like do a chant like “it's an ad, it's an ad, it's an ad campaign.”**”²⁸ (Emphasis added)*

In conclusion, both my first and my second essays agree: “Transgender” is neither scientifically verifiable nor linguistically accurate. Like phlogiston, it is a mere name, a supposition, *“representing no observed facts.”* Experience in the real “external world” has shown this does not exist, and will continue to be shown to be so. Why? Because as Athena has told us:

*“You are going against fundamentals of nature, immutable stuff, and damaging yourself!!!
no such thing as sex change, only sterilization.”²⁹*

As the old saying goes, “A rose by any other name is still a rose.”

But there is money to be made³⁰ and politics to be won, so who cares?

²⁶ Bilek, Jennifer; “Corporate Complicity With the Gender Identity Industry is Not ‘Wokeness’”

<https://www.the11thhourblog.com/post/corporate-complicity-with-the-gender-identity-industry-is-not-wokeness> accessed 2 April 2022.

²⁷ Ibid; “Foundations Are Setting The Transgender Agenda And Targeting Children”, The American Conservative, 1 June, 2021; <https://www.theamericanconservative.com/articles/foundations-are-setting-the-transgender-agenda-and-targeting-children/> accessed April 2, 2022.

²⁸ “The Attack on Our Sexed Bodies with Jennifer Bilek” on Whose Body is It Podcast found at <https://youtu.be/jvBMGFOWH4M?t=1454> accessed 2 April, 2022.

²⁹ “‘We are just guinea pigs’: Women describe trauma of transitioning as teenagers” 21 March, 2022 by Tori Richards, <https://www.washingtonexaminer.com/restoring-america/community-family/we-are-just-guinea-pigs-women-describe-trauma-of-transitioning-as-teenagers>

And you might say, “It’s not my kid.” Are you sure about that? Apparently, only they can tell you and when they do, you *must* agree. It’s science after all. Just ask the CCES Expert Working Group who adopted this hypothesis even though they lacked the scientific expertise to make such an assessment.

Since the very reason for the committee’s existence involved contemplating a potential dramatic disruption of sport’s existential paradigm of biological categories, you would expect at a minimum, for example, to see the name of at least one disinterested biologist from a top Canadian university on the list of EWG members.

There was no biologist. The only representative from the domain of science was a medical doctor. Dr. Stephen Feder is head of the adolescent Health Clinic at the Children’s Hospital of Eastern Ontario, and a proponent of expeditious affirmation for youthful transition, a highly contested practice amongst sexologists and therapists specializing in the field of gender dysphoria. That’s one single scientist.

And by virtue of his work, he is far from a disinterested observer. Moreover, no one else on that committee except a biologist could have credibly interrogated from a scientific perspective the theories on which this [one medical doctor’s opinion](#) rests.³¹

O well, just forget the science! There are 40,000 young females raising money on GoFundMe to get [double mastectomies](#).³² It’s a bonanza and there is money to be made! Let’s go “get” while the “gettin” is good!

³⁰ “The Business Model of Youth Transitioning” by Catherine Karena found at <https://www.youtube.com/watch?v=BaeZCS6rUk4>

³¹ Blade and Kay, pages 85-86.

³² Bilek. <https://youtu.be/jvBMGFOWH4M?t=2245> accessed 9 April 2022.

From: [Redfern, Jeremy T](#)
To: [ONeil, Tyler](#)
Subject: Re: Fox News Media Request: Chloe Cole testimony, backstory
Date: Sunday, July 10, 2022 6:16:46 PM

Perfect. Thanks!

Jeremy Redfern
Press Secretary
Florida Department of Health
850-445-3260

On Jul 10, 2022, at 4:44 PM, ONeil, Tyler <Tyler.ONeil@FOX.COM> wrote:

EXTERNAL EMAIL: DO NOT CLICK links or open attachments unless you recognize the sender and know the content is safe.

Thanks for clarifying. I know the events are separate.

"I really didn't understand all of the ramifications of any of the medical decisions that I was making," Chloe Cole, 17, said at a public hearing Friday. She said she was medically transitioned from ages 13 to 16, taking so-called puberty-blocking drugs and testosterone, and undergoing surgery to remove her breasts at age 15. "I was unknowingly physically cutting off my true self from my body, irreversibly and painfully."

"I don't know if I'll be able to fully carry a child, and I might be at increased risk for certain cancers, mainly cervical cancer," Cole said in a separate private meeting with Florida Surgeon General Joseph Ladapo Friday, footage of which Ladapo posted on Twitter Sunday. "And because I do not have my breasts, ... I am not able to breastfeed whatever future children I have."

"That realization, actually, was one of the biggest things that led to me realizing that this was not the path that I should have taken," Cole added.

From: Redfern, Jeremy T <Jeremy.Redfern@flhealth.gov>
Sent: Sunday, July 10, 2022 5:43 PM
To: ONeil, Tyler <Tyler.ONeil@FOX.COM>
Subject: Re: Fox News Media Request: Chloe Cole testimony, backstory

Also - the video from the tweet is from a separate discussion. It was not video from the public rule hearing.

Jeremy Redfern
Press Secretary
Florida Department of Health
850-445-3260

FDOH_000017897

On Jul 10, 2022, at 4:35 PM, ONeil, Tyler <Tyler.ONeil@FOX.COM> wrote:

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On background – the testimony involved Rule 59G-1.050 related to Medicaid services – is there a text for this? Does the new rule prevent the use of Medicaid funding for medical transition for minors?

From: Redfern, Jeremy T <Jeremy.Redfern@flhealth.gov>

Sent: Sunday, July 10, 2022 5:23 PM

To: ONeil, Tyler <Tyler.ONeil@FOX.COM>

Cc: Christina Pushaw

<christina.pushaw@eog.myflorida.com>; Brock.Juarez@ahca.myflorida.com;
<Bryan.Griffin@eog.myflorida.com>

Subject: Re: Fox News Media Request: Chloe Cole testimony, backstory

You can remove the capitalization.

Jeremy Redfern
Press Secretary
Florida Department of Health
850-445-3260

On Jul 10, 2022, at 4:21 PM, ONeil, Tyler
<Tyler.ONeil@FOX.COM> wrote:

EXTERNAL EMAIL: DO NOT CLICK links or open attachments unless you recognize the sender and know the content is safe.

Thanks, Jeremy! Is physicians capitalized on purpose or should I uncap it in the quote?

Sent from my iPhone

On Jul 10, 2022, at 5:09 PM, Redfern, Jeremy T
<Jeremy.Redfern@flhealth.gov> wrote:

Comment from the Surgeon General:

“Medicalization of minors with gender dysphoria might advance the political views of Physicians involved in their care, but the data showing any benefits for the actual children is extraordinarily thin. The affirmation model runs an unacceptably high risk of harm. Parents are threatened with fears of suicide, but the treatments have not been shown to actually reduce this risk. These patients need compassionate care of their emotional and mental well being—not to be in embroiled in political views about sex/gender.”

I will try to get you the rest of Chloe’s clip tonight.

Jeremy T. Redfern
Press Secretary
Florida Department of Health
850-445-3260

Sent from my iPhone

On Jul 10, 2022, at 3:56 PM, ONeil,
Tyler <Tyler.ONeil@fox.com> wrote:

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Are there any other clips that are ready/is there a longer clip of Chloe Cole’s remarks that you can send me? I have watched her remarks in the public hearing here (<https://thefloridachannel.org/videos/7-8-22-agency-for-health-care-administration-hearing-on-general-medicaid-policy-rule/>) but would love to have a longer video like the one Ladapo posted.

From: ONeil, Tyler
Sent: Sunday, July 10, 2022 4:54 PM
To: Redfern, Jeremy T
<Jeremy.Redfern@flhealth.gov>
Subject: RE: Fox News Media
Request: Chloe Cole testimony,
backstory

Thanks, Jeremy! I'm on the media side, so I will be making clips you send available on <http://FoxNews.com>. I will also pass this along to Fox News Channel to let them know.

From: Redfern, Jeremy T
<Jeremy.Redfern@flhealth.gov>
Sent: Sunday, July 10, 2022 4:38 PM
To: ONeil, Tyler
<Tyler.ONeil@FOX.COM>
Cc:
Brock.Juarez@ahca.myflorida.com; Christina Pushaw
<christina.pushaw@eog.myflorida.com>; Bryan Griffin
<Bryan.Griffin@eog.myflorida.com>
Subject: Re: Fox News Media
Request: Chloe Cole testimony,
backstory

I'm working on getting a quote from the Surgeon General. I will send it to you once I have it.

And yes, you are free to use the clip across all of your platforms. They were filmed by the Department of Health and are therefore available to use by anyone. I am currently in the process of editing other clips, and I will get them to you as I get

them ready. Can you just let me know when you plan to have them air?

Jeremy Redfern
Press Secretary
Florida Department of Health
850-445-3260

On Jul 10, 2022, at 3:12 PM, O'Neil, Tyler <Tyler.O'Neil@FOX.COM> wrote:

You don't often get email from tyler.oneil@fox.com. [Learn why this is important](#)

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Thanks, Jeremy! Is there more of the event that I can watch? Would the surgeon general make a comment to Fox News on medicalizing minors with gender dysphoria and why is it important to push back on the "affirmative" care model? Is there testimony from an

endocrinologist
and/or a
psychotherapist that
you would share?

Finally, can we have
permission to use
the video of Cole
that Ladapo shared
on Fox News
Channel, Fox
Business Network,
Fox Nation, Fox
Weather and all Fox
News Edge affiliates
across all platforms
until further notice
with courtesy to
you? Do we also
need anyone else's
permission? Thank
you.

From: Redfern,
Jeremy T
<Jeremy.Redfern@flhealth.gov>

Sent: Sunday, July
10, 2022 4:02 PM

To: ONeil, Tyler
<Tyler.ONeil@FOX.COM>

Cc: Juarez, Brock
<Brock.Juarez@ahca.myflorida.com>;

Pushaw, Christina
<Christina.Pushaw@eog.myflorida.com>;

Griffin, Bryan
<Bryan.Griffin@eog.myflorida.com>

Subject: Re: Fox
News Media
Request: Chloe Cole
testimony, backstory

Hey Tyler,

The Surgeon General recently had the opportunity to sit down with detransitioners, parents, and experts in pediatric endocrinology and psychotherapy.

We are going to use this opportunity to educate the public on the unacceptable harm caused by the “affirmative” care model pushed by multiple professional and government institutions.

These conversations will also be included as part of our evidence gathering for when the Board of Medicine considers the Surgeon General’s letter requesting an official practice standard.

Jeremy T. Redfern
Press Secretary
Florida Department of
Health
850-445-3260

From: ONeil, Tyler
<Tyler.ONeil@FOX.COM>

Sent: Sunday, July

10, 2022 2:11 PM

To: Redfern, Jeremy

T

<Jeremy.Redfern@flhealth.gov>; Juarez,

Brock

<Brock.Juarez@ahca.myflorida.com>

Cc: zzzz Feedback,
Health

<Health@flhealth.gov>

Subject: Fox News

Media Request:

Chloe Cole

testimony, backstory

Some people who received this message don't often get email from tyler.oneil@fox.com. [Learn why this is important](#)

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Jeremy, Brock,

I am writing a story about the testimony of Chloe Cole, a teenage detransitioner whose story Surgeon General Ladapo shared on Twitter this afternoon. I'd like to hear more about the testimony, if it was part of an event, and whether

it is part of an effort to educate the public on transgender issues. Would Ladapo comment on the significance of testimony from former transgender people who have suffered due to what critics may claim is a rush to embrace transgender identity and champion medical interventions that may harm patients?

<https://twitter.com/FLSurgeonGen/status/1546164557072187398>

I am working on a deadline of 5:30 p.m. eastern and would appreciate a prompt response.

Best,

Tyler O'Neil
Digital Editor
Fox News
(303)956-8499

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intended solely for the named addressee(s). If you are not an addressee indicated in this message (or responsible for delivery of the message to an addressee), you may not copy or deliver this message or its attachments to anyone. Rather, you should permanently delete this message and its attachments and kindly notify the sender by reply e-mail. Any content of this message and its attachments that does not relate to the official business of Fox Corporation, or its subsidiaries must be taken not to have been sent or endorsed by any of them. No representation is made that this email or its attachments are without defect.

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