

12 December 2022

The Story behind the Upcoming Symposium

It is Tuesday afternoon. Imagine you are in the OPD, tired and hungry with an unusually large number of patients without appointments gathered in the waiting area. Your own child is ill at home. You missed tea due to an emergency in the ward. When the next patient enters your room, shuts the door, and with a determined look requests hormones, what do you say? How do you respond when she announces her plan to travel to Thailand for top surgery? How do you manage an adolescent with mobile in hand, stating he is suicidal and was born in the wrong body? Who do you consult? How do you counsel a mother whose lovely daughter berated her fiercely for not addressing her as 'he'?

Twenty-five years ago gender dysphoria was rare. Fifteen years ago the first gender clinic opened in the U.S.. Now by some reports there are over 100 clinics providing gender care with an estimated 300,000 young people in the U.S. identifying as transgender. For reasons which are disputed, there is a striking increase among teenage girls.

The major professional medical and psychological societies recommend gender affirmation treatment, which some specialists argue is not based on evidence. Highly regarded university clinicians have been demoted and fired due to their opinions. Colleagues that disagree are now disconnected. Sports are being splintered. Schools have incorporated gender curricula with disregard for parent's wishes. This is extended to younger and younger students. In fact, children have reportedly been told by teachers to not inform their parents of their gender transition. Parental consent may not be a requirement for treatment. Families are distraught. The U.S is divided. Chaos and animosity abound.

Is Bhutan now where the U.S. and other western countries were 10 to 15 years ago before the gender dysphoria phenomenon descended on these countries? Imagine if what has happened in these countries could be avoided in Bhutan. What could we do? Would informing the physicians and health workers help?

Maybe call it a symposium and make it available to everyone. Perhaps there would be a consensus of how to best care for disturbed youth in Bhutan. Would the harm and divisiveness that have infiltrated other countries be prevented, or at least lessened?

That is the story.

THE LINK *Bhutan*

