



Biologisms on the left and the right

Angelique Richardson

To cite this article: Angelique Richardson (2022) Biologisms on the left and the right, Ethnic and Racial Studies, 45:13, 2496-2518, DOI: [10.1080/01419870.2022.2102933](https://doi.org/10.1080/01419870.2022.2102933)

To link to this article: <https://doi.org/10.1080/01419870.2022.2102933>



© 2022 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group



Published online: 15 Aug 2022.



Submit your article to this journal [↗](#)



Article views: 5425



View related articles [↗](#)



View Crossmark data [↗](#)

Biologisms on the left and the right

Angelique Richardson 

Department of English, University of Exeter, Exeter, UK

ABSTRACT


Victorian Britain saw the rise of biologism, the practice of attributing biological cause to that which is explicable either wholly or in part by environment. Its most extreme expression was eugenics, first disseminated by Galton through *Macmillan's Magazine* in 1865. I explore early British eugenics as a biologicistic discourse centred on class which took aim primarily at the “residuum”, or “submerged tenth”, the section of the working class alleged to be least productive. It was framed by racism, the biologism on which much late-Victorian imperialism was based. I consider ways in which biologisms inform distinct twenty-first-century discourse and practice, from policies around child benefit to Covid19, and focus on one thread of biologicistic thought as it extends to debates on gender identity – the idea that gender is both a feeling but also innate and brain-based. I conclude that gender identity theory risks, however inadvertently, reinscribing biologicistic ideas and stereotypes.

ARTICLE HISTORY Received 15 June 2022; Accepted 28 June 2022

KEYWORDS Imperialism; biologism; stereotypes; gender identity; neoliberalism

Introduction

Wherever eugenics was practised (or preached) in the western world in the last two centuries, it was underpinned by binaries of insider and outsider, desirable and undesirable (according to variable criteria). Nineteenth-century advocates used the rhetoric of kindness to present it as somehow a humane practice, even as it drummed up prejudice against the working class (Richardson 2003, 58–67). With the move into the twentieth century, anyone considered economically unproductive was held socially (and, by conflation, biologically) expendable and undesirable by advocates of eugenics, who actively sought to reduce the number of working-class children being born while increasing the middle-class demographic (Spektorowski and Ireni-Saban 2013). Germany in 1895 saw the publication of Otto

CONTACT Angelique Richardson  A.Richardson@exeter.ac.uk

© 2022 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group

This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivatives License (<http://creativecommons.org/licenses/by-nc-nd/4.0/>), which permits non-commercial re-use, distribution, and reproduction in any medium, provided the original work is properly cited, and is not altered, transformed, or built upon in any way.

Seeck's *History of the Downfall of the Ancient World*, which warned against dysgenic influences, and of *The Fitness of Our Race and the Protection of the Weak* by Alfred Ploetz, founder in 1905 (two years before the Eugenics Education Society was founded in Britain) of the world's first eugenics society, the Society for Racial Hygiene. In the US between 1907 and 1939 approximately 30 states (starting in Indiana) enacted laws that allowed authorities to sterilize in state homes and hospitals 60,000 individuals who were considered mentally unfit (Reilly 2015, 351-368). During the Third Reich, one of the groups, alongside Jews, targeted and sterilized by the Third Reich were gay males (see Grau 1995; Caplan 2011; Marhoefer 2016). While most gay men survived persecution, they were watched, arrested, registered, prosecuted, segregated and sent to concentration camps. Some were castrated and some killed.

In the last century and a half, eugenics has found expression in policies that seek to reduce poverty by checks on reproduction and through more direct acts of sterilization. These discount the value of improving living conditions, including educational support. The strong ideological currents that gave rise to eugenics by overlooking evidence – evolutionary change is slow and unpredictable: it does not lend itself to zealots – now risk obscuring the continuity of its practices, which are levelled against those who are most vulnerable, socio-economically, physically, and emotionally. These practices have been evidenced, most recently, in the current Covid pandemic. Vigilance against a social media that feeds on enmity and algorithmic aggregation along reductive, binary and polarized lines will be crucial if we are to conduct the detailed and undistracted research necessary to the anti-eugenic project. Such modes of interaction disable interconnection, actual community, and the recognition of our shared humanity.

The attraction of eugenics to the right is not difficult to comprehend, given right-wing investments in notions of superior biology and in attributing to an uninterrogated idea of nature differences that are explicable in social or economic terms. Historically, left-wing thought has tended to resist seeing in biologicistic terms that which is social (poverty, for example, as well as cultural stereotypes in their many and varied expressions); it has typically rejected biologism, the impulse to give a pseudo-biological underpinning to concepts of class or race. This rejection of biologicistic explanatory frameworks is based on the understanding that many states of being (for example homelessness or hunger) have environmental explanations (which may range from socio-economic conditions to schools, the playing fields of England, and the provision of libraries) and that differences in ability can either be explained along similar lines or can be understood to express nature and nurture in relations that are co-constitutive and not easy to separate.

The history of eugenics, with its reliance on the state, and, in its early stages, the subordination of the individual to the collective, demonstrates the authoritarianism of biologism. Fabianism, a socialist movement and

theory that developed from the Fabian Society, founded in London in 1884, evidences that the left is not immune from advocating coercive forms of control. Leading Fabians Sidney and Beatrice Webb, George Bernard Shaw and H. G. Wells pushed forward eugenics in the early twentieth century, although Wells later became more ambivalent (Wells 1940; see Richardson 2015). In 1931 the Fabian paper the *New Statesman and Nation* declared “the legitimate claims of eugenics are not inherently incompatible with the outlook of the collectivist movement. On the contrary, they would be expected to find their most intransigent opponents amongst those who cling to the individualistic views of parenthood and family economics” (From a Scientific Correspondent, 1931). In the same year, the British feminist Mona Caird wrote her openly anti-eugenic novel *The Great Wave*, set in Weimar Germany.

While purporting to be scientific, the apotheosis of reason, eugenics was the reverse, conceived by its founder, Galton, and his followers as a new religion (see e.g. Mügge 1909), though one which had recourse to science and sought to make authoritative claims about nature. While Darwin’s emphasis on natural selection and, subsequently, sexual selection may have given eugenics some of its impetus, he dismissed it as both unethical and unviable (Richardson 2014); heredity remained for him complex and mysterious: “The laws governing inheritance are quite unknown” (1859, 13). In the *Descent*, Darwin would show that the races “graduate into each other”, undoing the notion of racial fixity: “it is hardly possible to discover clear distinctive character between them” (1874, I: 226). *Descent* carried with it this sense of the held in common. Declaring himself “a liberal, or a radical”, Darwin had expressed hesitancy towards, followed by a more direct rebuttal of, Galton’s eugenic ideas, remarking to him in a letter of 1875 that if Galton rejected the Lamarckian idea of modification by use and disuse during the life of the individual then “I differ widely from you, as every year I come to attribute more and more to such agency” (Darwin, November 7th, 1875, cited in Richardson 2014; see also W. Darwin 1883, Stack 2012 and Richardson 2022; see also Richardson 2010). He emphasized in the *Descent* “Nor could we check our sympathy, even at the urging of hard reason, without deterioration in the noblest part of our nature”; “if we were intentionally to neglect the weak and helpless, it could only be for a contingent benefit, with an overwhelming present evil” (1874, I: 134). Radicals, reformers and writers such as the feminist Mona Caird, the humanitarian novelist and poet Thomas Hardy and the catholic G. K. Chesterton directly challenged biologicistic thought and eugenic practice at the turn of the century and in the first decades of the next, arguing against the reductionism of innatism and hereditarian thought (see Richardson 2001, 2010, and 2011). In this they drew on the philosopher and, from 1865 to 1868, Liberal MP, J. S. Mill, who had argued that “to regard all the marked distinctions of human character as

innate ... whether between individuals, races, or sexes" was "one of the chief hindrances to the rational treatment of great social questions" (Mill 1873, 184).

Finding support from both the left and right, eugenics, arguably more than any practice, calls into question clear distinctions between the two on questions not only of coercion but inequality. Beatrice Webb expressed strong approval in a diary entry that George Bernard Shaw was dealing with "the most important of all questions, this breeding of the right sort of man" (16 January 1903, cited in Webb 1948, 257). The statistician Karl Pearson, Galton's protégé, combined a socialist view of the crisis of capitalism with a disdain for class struggle and with a nationalist veneration of the state. The confusion of that which is social and historical with that which is natural is a hallmark of the right but can also be found on the left, alongside fundamentalism. Sidney Webb declared in 1909 that "the present Poor Law, costing nearly twenty millions a year was almost entirely anti-eugenic in its tendencies" ("Eugenics and the Poor Law", 1909), telling the National Birth Rate Commission in 1917 that rates and taxes fell most heavily on those who should have most children but presented no impediment to "the thriftless and irresponsible, the reckless" (*National Birth Rate Commission* 1918–1920, 65). Ventriloquizing the "New Civilization" speaking to the old in his 1922 introduction to the first edition of Margaret Sanger's *Pivot of Civilization*, Wells wrote "We cannot go on giving you health, freedom, limitless wealth, if all our gifts to you are to be swamped by an indiscriminate torrent of progeny."

Authoritarianism and coercion are not absent from the left, which risks the totalitarianism it purports to oppose. When biologicistic thought is looked to in order to address socio-economic or socio-psychological issues, the possibility of the coercion of biologism becomes more likely. Equally, biologism can also underpin the very discourses that purport to be working for inclusion. Extremism, wherever it arises, risks prompting further extremism.

The global circulation of eugenics

Under powers granted to the Hereditary Health Courts in Germany between 1934 and 1944 (when the population was 73 million), doctors sterilized at least 400,000 persons. Alongside Jews, this included those with mental or physical disabilities, and homosexual men (Reilly 2015). In a number of northern European countries governments situated on the left pushed for illiberal and eugenic policies. These included isolation and sterilization – between 1935 and 1975 Sweden sterilised some 63,000 men and women – and eugenics favoured a language of professionalism, and middle-class experts (see Crook 2007) as can be seen in countries such as Sweden with a more "productivist" socialism which developed in the first half of the twentieth-century (Lucassen 2010).

In the 1970s, Mexican women were often sterilized without their consent (Stern 2005) and following Caesarean sections, often as a result of prejudiced surgeons (Kluchin 2007). India, where patriarchal structures are dominant (and cannot be laid at the door of European feminism, as some intersectional discourses risk claiming), created its first commission on population five years after independence and in the 1970s the most aggressive effort to date was conducted to reduce family size. Some 10 million persons were sterilized, often coercively (Haub and Sharma 2006), with the poorest couples given financial incentives to undergo sterilization (18). In India today more than 90% of all sterilizations are performed on women (Reilly 2015). In China between 1971 and 2013 222 million sterilizations and 336 million abortions were carried out, with the vast majority of the sterilizations performed on women (Jian 2013), and sex-selection abortions further evidence of the reach of misogyny. In China today, for example, in the age group 10–19 there are approximately 120 males for every 100 females (Chen 2020; Feng, Cai, and Gu 2012; Pletcher 2021).

Gender identity

Sterilization has entered the public consciousness most recently in relation to the theory of gender identity, a term without precise definition (see Suissa and Sullivan 2021; Burt 2020; Byrne 2019) but which is generally used to mean the personal sense of being male or female, neither or both: a form of self-identification that tends to be experienced, or presented, as innate, brain-based (see e.g. Mascarelli 2015), with a material aspect, though it otherwise rejects materiality for feeling. The website of the Tavistock and Portman NHS Foundation Trust Gender Identity Development Service (GIDS) directs to the Stonewall list of terms, which defines gender identity as “a person’s innate sense of their own gender”, while defining gender itself, seemingly in contradiction with this, as “largely culturally determined”. This is to confuse or elide three related but analytically distinct concepts, sex, gender, and gender identity, where sex is biological, gender is social (referring to stereotypes and roles that may be imposed according to sex) and gender identity is psychological. But to blur these distinctions is to impede clarity and articulacy in a context already severely compromised by “no debate” (see Sullivan 2021b), where clarity of terms is vital, not least given the vulnerability of all involved, and the nature of decisions being made. “Intersex” is a term that is indistinct and, in a context of semantic and ontological confusion, open to ideological misrepresentation as an identity, or misuse as a means to challenge the concept of sex. It has been largely replaced by “differences of sex development” (DSD) or “variation in sex development” (VSD). The charity dsdfamilies notes that each year in the UK approximately 150 children are diagnosed with Differences of Sex Development (see <https://dsdfamilies.org/charity>) though

this figure was exponentially inflated (from 0.018% to 1.7%, nearly 100 times) by Fausto-Sterling who defines intersex as “any deviation from the Platonic ideal” (Blackless et al. 2000, p. 161; for evidenced refutation of this inflation see Sax 2002; see also “Listen to Us” 2019; Ahmed et al. 2016).

In 2017 the European Court of Human Rights (ECtHR) ruled that legal gender transition cannot be made conditional upon pursuing medical treatment, surgical operation or sterilization and that this requirement by some European countries amounted to a violation of Article 8 of the Convention for the Protection of Human Rights and Fundamental Freedoms (A. P., Garçon, E., and Nicot, S. v. France). The ruling set a new legal standard for the 47 member states of the European Convention on Human Rights (Stack 2017) although it was already the case that many of these did not require sterilization (sterilization is not and has not been a requirement of the UK Gender Recognition Act, for example). As Kristina Harrison, a trans woman, notes, the ruling both protects human rights and makes stronger the case for the availability of “gender-neutral” and single-person facilities alongside single-sex ones (Stanford 2021; see also, for a recent piece on the under-researched area of some women from minoritized ethnicities excluding themselves from public spaces, Dillon 2022; on self-identification as open to abuse by men rather than trans women see Harrison 2018 and Asteriti and Bull 2020; see also Murray, Blackburn, and Mackenzie 2020). Such provision is to be welcomed and reduces the pressure on a person wishing to transition to do so surgically, with possible resultant infertility, when they would not otherwise choose to do so. The ruling, however, is not uncontroversial, registering a shift in the definition of woman from the biological to the psychological, expressed as gender identity. This definitional shift has the potential to conflict with the protected characteristics of sexual orientation, whereby same-sex attraction is replaced by same-gender attraction (see e.g. BBC News style guide), and sex, including the right to single-sex spaces.

Notwithstanding the ECtHR 2017 ruling, loss of fertility through medical intervention continues to be an issue in regard to young people seeking to transition. Advocates of gender identity theory such as Stonewall, particularly when it comes to the diagnosis and treatment of gender dysphoric children, risk reinscribing aspects of biologicistic thought, however different their intentions. Gender identity theory is not eugenic. Eugenics, centred on class in Britain, has historically been concerned with the notion of national and/or racial “stock”, framed by imperialism, and it has been a largely top-down movement. By contrast, gender identity theory is centred on individual autonomy and seeks to alleviate gender dysphoria. In current discourse, both academic and popular, the term “eugenics”, coined by Galton in 1883, is often used inaccurately to describe situations or practices we may not agree with (for exploration of the substitution of moral denunciation for argument see Sullivan 2021b). This devalues the meaning of the word and detracts from the

possibilities of illuminating the past. Clear definitions of terms are needed or dialogue becomes impossible. While most expressions of biologism are not eugenic in intention or outcome, this should not detract from acknowledgment of their potential reinscription, however inadvertent, of forms of deterministic thought that can include misogyny and homophobia.

Often foregrounding choice while at the same time seeming to posit that gender identity is not a choice, gender identity theory at times comes close to sharing the rhetoric of neoliberalism. If we are to understand the left as a current that opposes the injustices and inequalities of the capitalist system, that seeks to at least reduce them, and which is concerned with civil rights and liberties (see Malik 2021), then eugenics might appear to align more obviously with the right. Indeed, there are clear parallels between Galtonian discourse and the hostile environment that high-income countries have developed in response to refugees and low-income migrant workers. In his unpublished 1910 eugenic fiction “Kantsaywhere”, Galton, who described himself as a Tory (see Richardson 2014), tells us that “all immigrants are more or less suspected” (Galton 1910). An exam is sat in Kantsaywhere which determines the number of children a couple are allowed, in a conflating of class, biology, and intelligence. In the US during the Clinton administration the Personal Responsibility and Work Opportunity Reconciliation Act (1996) introduced a welfare cap, giving states the option of refusing additional support to families on Temporary Assistance to Needy Families (TANF) (see O’Connor 2001 and Pierson-Balik 2003) and in 2017 the UK introduced a two-child benefit cap, reinscribing similar Malthusian-inspired prejudices against class and reproduction, and seeking to curb working-class profligacy, defined against middle-class prudence.

However, the distinction between the state and the private sector, or the left and the right, becomes negligible when both are driven by a neoliberalism underpinned by hyper-marketisation and by the rhetoric of the individual as sovereign, where the individual is divorced from social relations. Galton both denied the value of the individual and promulgated a form of eugenics based on the individual choices of elites to whose knowledge, skills and control others must surrender. Eugenic theory had no concern for the social implications or effects on the individuals concerned. The narrator of “Kantsaywhere” records “they think much more of the race than of the individual”; “a person is . . . more important as a probable progenitor of many others more or less like to him in constitution than as a mere individual” (Pearson 1914, 415). Oscar Wilde, persecuted for homosexual acts, warned that, without individualism, socialism might become authoritarian, noting that “many of the socialist views that I have come across seem to me to be tainted with ideas of authority, if not of actual compulsion” (1891, 132). While sexual acts between men were decriminalised in England and Wales in 1967, in Scotland in 1980, and in Northern Ireland in 1982 (Parliament

UK; on the limitations of the Act see Weeks 2007), treatments to change homosexuals into heterosexuals peaked in the 1960s and early 1970s (Smith, Bartlett, and King 2004; King and Bartlett 1999). In the US in the first three quarters of the twentieth century, until the American Psychiatric Association removed homosexuality from its *Diagnostic and Statistical Manual*, medical and psychological efforts were directed towards “conversion” therapy (Rosario 2002, 187).

Gender identity theory risks endangering the reproductive capacity of young people from minority and/or marginalized groups, i.e. young people who may be, or are, gay, lesbian or bisexual, as recent policy reviews and legal cases in the UK have highlighted (see Appleby 2021; Bailey 2022; Cass 2022; Bannerman 2019). One Tavistock clinician recounts a parent saying “I’m so glad at least my child is not gay or lesbian”, and observes that the parent is “implying that having a trans outcome would be better for their child” (BBC Newsnight 2020). Another remarks “Maybe we are medicating gay kids, maybe we are medicating kids with autism, maybe we are medicating traumatized children?” (BBC Newsnight 2020). There will be families that foster an environment of care and support rather than prejudice towards any group, and, indeed, the rigid and sex-based stereotypes that underpin homophobia often also inform hostility to trans people. But in some families and contexts these stereotypes find common cause with gender identity theory. The Tavistock transcripts record homophobia “running through” families in which children have been put on transition pathways (BBC Newsnight 2020). In Iran, even though trans people face significant prejudice, there is increasing pressure from an authoritarian state for gay men and lesbians to undergo gender reassignment (see Hamedani 2014; “Homosexuals in Iran” 2020; “Why Iran is a hub for sex-reassignment surgery” 2019).

Young people, with a disproportionate increase of natal females (the Tavistock website notes that between 2009–2010 and 2018–2019 referrals increased from 32 to 1740 in this group and from 40 to 624 for males; see also Cass 2022 87), are at risk of being placed, at a vulnerable stage, on pathways that may lead to loss of fertility (see e.g. Bell 2021; Cooke 2021; Littman 2021). The Tavistock clinic held back figures which show an almost complete progression (98%) from puberty blockers to synthetic cross-sex hormones, only releasing these after they were cautioned by the court (Barnes and Cohen 2020). And the number of detransitioners, and the lack of support from them, is just starting to be recognized. One site for detransitioners, *r/detrans* | Detransition Subreddit (<https://www.reddit.com/r/detrans/>), founded in 2017, has 35,000 members. The process of detransitioning suggests that a transgender identity is not, as is sometimes claimed, innate or unchanging. Noting that detransitioners have experienced a culture of victim-blaming and censorship from both within the trans community as well as outside, the website requests civility and tolerance, and reminds

users that the expression of differing philosophical and political theories and beliefs, lightly or passionately, does not entail the disparaging of others. A recent study in the *Journal of Homosexuality* revealed that 87% of the detransitioners responding reported the need for hearing about other detransition stories, and noted the isolation and lack of support they experience: “only 13% of the respondents reported having received support from an LGBT+ or trans-specific organization while detransitioning, compared to 51% while transitioning”; some female detransitioners “expressed the need for being valued as a woman, for learning about feminist theories and for more gender-nonconforming role models” (Vandenbussche 2021). On its webpage description the Tavistock appears to interpret non-conforming to sex-based stereotypes, including instances where male children may “play with toys that other people say are ‘for girls’”, as evidence of a child “experience[ing] difficulties in the development of their gender identity”, although such childhood behaviour and adolescent sexual orientation has and continues to have a long scholarly recognition in research on adult homosexuality (see, for example, Li, Kung, and Hines 2017). And not conforming to expectations or stereotypes may also indicate nothing more or less than this. In September 2020 the Department for Education issued guidance stating that “teachers should not suggest to a child that their non-compliance with gender stereotypes means that either their personality or their body is wrong and in need of changing”.

To acknowledge the existence of sex provides a way of resisting reductive biologicistic notions of its meaning and significance and requires that the social and cultural pressures and expectations around sex-based stereotypes are addressed. A rejection of this distinction between sex and sex stereotypes – a distinction that is central to second wave feminist theories – risks compromising an understanding of gender dysphoria that acknowledges wider environmental factors and pressures.

Historically, biologisms on both the left and the right have instrumentalised women. Both have in effect surrendered reproduction to the control of the state or have sought to limit it to the family, itself understood as an agent of the nation state. Andrea Dworkin has pointed to the elements of misogyny here that transcend political division: “To right-wing men, we are private property. To left-wing men, we are public property” (1983). Acknowledgment of women as a sex-based and heterogenous class is a prerequisite for the effective analysis of their various, but fundamental, positionings and roles in the development of eugenic ideas and of the ways in which they are vulnerable to becoming objects of biologicistic thought.

The burden of objectification weighs heaviest on the socio-economically disadvantaged, who lack the means to protect themselves or seek redress. But a move away from sex in data collection, in response to lobbying, is rendering analysis of some inequalities impossible. The sociologist Alice Sullivan

notes that “accurate data on sex is fundamental to any analysis of the differences and inequalities between women and men, girls and boys” but “the drive to undermine sex-based data collection” is “a form of silencing” which is making certain facts “unknowable and unspeakable” (2021b). As she points out, “no one would deny that gendered roles have changed over time”, but she asks whether that really implies that humans “no longer have just two sexes” or that “sex is no longer relevant to our lives”. What we are seeing is a denial of biology largely because of what biologism has done, as evidenced in histories of racism, and patriarchal and class oppression. It would be a sad irony if, at a point when women, particularly in the west, have more freedom than they have historically had, we are seeing a resurgence of sex-based stereotypes.

Alice Sullivan and the philosopher Judith Suissa have traced the consequences of denying the materiality and political salience of sex as a category, noting that both students and university staff have been involved in the harassment of academics and students who argued for the rights of women as a sex class (2021a). One undergraduate recalls that whenever they wrote “sex” or “female” in an essay, “the marker had corrected it to gender or gender identity... Some of the sentences no longer even made sense. I thought the whole point of university was to uphold freedom of speech and promote discussion and debate” (<https://www.gcacademianetwork.org/>). In 2022 Bristol County Court and the University of Bristol accepted that Raquel Rosario Sánchez, a postgraduate student, had suffered “unacceptable behaviour particularly in the form of ... threat[s] of violence” (para 111). The court ruled that her detriments had not been inflicted specifically by the defendant (the University of Bristol) but by an/other student/s, who was/were not a party to the case, and considered her akin to a victim of crime (para 113). Suissa and Sullivan underline the importance of academic freedom and the sharing of ideas and evidence in places of learning, and of knowledge as a public good in a democracy. An authoritarian left would do well to reconsider its implicatedness in the stifling climate of “no debate” (see Sullivan 2022; Suissa and Sullivan 2021; Reindorf 2020). This position renders women and feminists unable to describe and oppose the ways in which women as a sex class are the objects of biologicistic thought.

Informed consent

While gender identity theory centres the sovereignty of the individual, it raises issues of consent with regard to the treatment of children. In the reasonable absence of trust in governments it will fall to medical practitioners to insist on informed consent for any interventions likely to lead to infertility (see Reilly 2015). Involuntary sterilization has a long history (see e.g. Dowbiggin 2008 and Stern 2016), and medical treatments which could result in loss

of fertility require vigilance and informed consent. While gamete storage is one medical means of reducing the probability of infertility (see Faye 2021, 113), this option is not possible for prepubertal boys, and the eggs of prepubertal girls are not capable of being fertilized. In 2021 Sweden's Karolinska Hospital stopped following the "Dutch protocol", which allows gender-dysphoric children to receive puberty blockers (GnRH agonists) at age 12 (and, in some interpretations, at the Tanner 2 stage of puberty which can occur in girls at 8), and cross-sex hormones at 16 (Society for Evidence-Based Gender Medicine, May 2021). It was also the first country to depart significantly from WPATH (World Professional Association for Transgender Health) guidance (Swedish National Board of Health and Welfare, February 2021). The UK NICE evidence review (2020) similarly found the risk/benefit ratio of hormonal interventions for minors highly uncertain, and echoes growing international concern over the proliferation of medical interventions that have a low certainty of benefits, while carrying a significant potential for medical harm (Society for Evidence-Based Gender Medicine, May 2021; see also Clayton et al. 2021 and Biggs 2020 on the methodological oversights of the studies which seek to establish a causal link between puberty blockers and decreased suicidality, and Entwistle 2020 and Dubicka 2021). Finland has made a similar decision, and in 2021 the UK Court of Appeal stated in *Bell v Tavistock* that the treatment of children for gender dysphoria raised "not only clinical medical issues but also moral and ethical issues." *Child and Adolescent Mental Health* noted a "pressing need for research and services for gender desisters/detransitioners", observing that while the actual number of those who desist (i.e. stop transitioning before medical transition begins) or who detransition (i.e. reverse transitioning following medical treatment) are not known, estimates vary from 98% to 73% (Butler and Hutchinson 2020; see also Ristori and Steensma 2016). Even factoring in those who returned to gender clinics in adolescence or adulthood, an estimated 85% of children choose to stop transitioning before medical transition (Steensma and Cohen-Kettenis 2015). In 2021 *Frontiers in Psychiatry* published the results of the largest sample to date of pre-pubertal boys clinic-referred for gender dysphoria, with regard to gender identity and sexual orientation, with follow up at a mean age of 20.5 yrs. It found 12.2% persistence, 87.8% desistance and 63.6% gay (Singh, Bradley, and Zucker 2021).

In February 2022 Sweden's National Board of Health and Welfare issued a national policy update closely mirroring the policy adopted by the Karolinska (*Summary of Key Recommendations from the Swedish National Board of Health and Welfare*, February 2022) and in March 2022 France's National Academy of Medicine called for the greatest caution in view of the side effects of "impact on growth, bone weakening, risk of sterility, emotional and intellectual consequences and, for girls, menopause-like symptoms", pointing out that surgical treatments, "specifically mastectomy, which is allowed in

France at the age of 14", and "surgeries relating to the external genitalia", are irreversible. It cautioned that "the risk of over-diagnosis is real, as evidenced by the growing number of young adults wishing to detransition", and that "the phase of psychological care" should be extended (National Academy of Medicine, France, March 2022). In the same month, the UK's Cass Review noted in its interim report that the Tavistock was "not a safe or viable long-term option", urging the importance of "children and young people with gender-related distress" having access to "the same level of psychological and social support as any other child or young person in distress". It concluded that the evidence base for an affirmation-only model is severely lacking and that puberty blockers appeared to lock children into a medicalised treatment pathway.

Issues of consent have been highlighted in reports and legal rulings. In September 2021, the Appeal Court judgment in *Bell v Tavistock* shifted responsibility from the law to medical authorities and the family. It cited the Care Quality Commission report (2021), which rated the service inadequate overall and flagged issues of competency and capacity to consent appropriately (para 93). The High Court judgment had concluded that there was "no age appropriate way to explain to many of these children what losing their fertility or full sexual function may mean to them in later years" (paras 143 and 44). The Court of Appeal sidestepped the question of ethics with the ambiguous phrase "we think that it would have been better to avoid controversial factual findings". This left it unclear in what way the facts are controversial or whether the act of finding them was controversial in that it lay outside the narrow area of law, and left the question of harm to legal cases following treatment: "clinicians will be alive to the possibility of regulatory or civil action" (para 92).

Also in September 2021, the UK Employment Tribunal in *Appleby v Tavistock* noted "patients' limited understanding, the premature use of blockers, failure to address the fact that some children lived in homophobic environments", with staff "afraid to report these issues within the Trust" (Appleby 2021). For some staff, gender identity felt like "conversion therapy for gay children"; "There was a dark joke among staff that there would be no gay people left" (Bannerman 2019). Interventions in reproduction, in assigning (to a greater or lesser degree) reproductive decision-making to medical authority, can risk becoming expressions of biologicistic thought and inadvertently reflecting and reinforcing existing power relations. It is unwise to assume that this cannot sometimes be the case in relation to gender reassignment, in particular in relation to children (where complex issues surrounding consent, homophobia and clinical negligence are being flagged in reports and rulings) because the language of individual, liberal choice is deployed.

In July 2022 Dr Hilary Cass issued further advice to NHS England (Cass 19 July 2022), underlining "gaps in the evidence base" that her interim report had highlighted and noting the "uncertainties regarding long-term outcomes of medical intervention, and the broader knowledge gaps in this area". The

advice included recommendation of an emphasis on exploratory care: “There should be a whole system approach to care across the network so that children and young people can access a broad range of services relevant to their individual needs, including supportive exploration and counselling.” Cass reiterated that “the most significant knowledge gaps are in relation to treatment with puberty blockers”, noting that there was least information about their use as a “‘pause’ for decision making”, and a lack of knowledge about “the impact of stopping these hormone surges on psychosexual and gender maturation. We therefore have no way of knowing whether, rather than buying time to make a decision, puberty blockers may disrupt that decision-making process.” She also observed (referencing Sisk 2017) that “adolescent sex hormone surges may trigger the opening of a critical period for experience-dependent rewiring of neural circuits underlying executive function (i.e. maturation of the part of the brain concerned with planning, decision making and judgement)”; noting “the very limited research on the short-, medium- or longer-term impact of puberty blockers on neurocognitive development”, she concluded that puberty blockers “could have significant impact on the ability to make complex risk-laden decisions, as well as possible longer-term neuropsychological consequences.”

On 28 July 2022 NHS England announced that it would be closing down its Gender Identity Development Service (GIDS) at the Tavistock clinic by spring 2023. This would be replaced by two Early Adopter services which, consistent with Cass’s advice, would be “led by experienced providers of tertiary paediatric care to ensure a focus on child health and development, with strong links to mental health services. These will generally be specialist children’s hospitals.” It noted that the Cass Review was a response to “a complex and diverse range of issues” which included “a significant and sharp rise in referrals”: “marked changes in the types of patients being referred which are not well understood”; “scarce and inconclusive evidence to support clinical decision making”; and “long waiting times for initial assessment and significant external scrutiny and challenge surrounding the clinical approach and operational capacity at GIDS”. It observed “staff should maintain a broad clinical perspective to embed the care of children and young people with gender uncertainty within a broader child and adolescent health context” (NHS England 28 July 2022). The clinic now faces prospective legal action in respect of a “failure of care” group claim on behalf of multiple young people (see Lovett 2022 and Meredith 2022).

The conflating of race and sex

Gender identity has become a subject over which questions of race, sex and insufficiently evidenced medical intervention coalesce. Most notably, it is presented in universities in the west as a non-western belief system even though

it originated in North America. A number of people of colour, based primarily in the UK – including Allison Bailey, Sonia Sodha, Raquel Rosario Sánchez, Onjali Raúf, Keira Bell, Chimamanda Ngozi Adichie and Tomiwa Owolade – are increasingly speaking out against the biologicistic aspects of gender identity theory and challenging the duplicitous contention that such objections are a form of racism (see e.g. Sodha 29 May 2022a and 31 July 2022b). And yet it has become something of a taboo in western universities to acknowledge these voices.

Ideologies become more entrenched and difficult to challenge when they claim to serve those who are in fact vulnerable to their potential, albeit unintended, harm, which the rhetoric of kindness can mask. In western academic culture, the notion of decolonizing has taken up gender identity and, by conflating sex and race, reworked its coordinates so that acknowledgement of sex is itself presented as a form of racism. But it is biologicistic thought – a way of thinking that foregrounds determinism but denies the immediacy of materiality, and material conditions, and the limits of biology – that underpins all forms of racism.

The conceptual and historical connection with race and racialization is fuelled by the historically inaccurate claim by activists that the “gender binary” was a western colonial invention (see e.g. Lugones 2007). Such narratives, while purporting to decentre reproduction, in practice disable a genuinely intersectional feminism that centres women as a sex class (see Hartnell 2022) and eclipse and deny the reproductive exploitation of both white women and women of colour in colonial practice: white women were expected to populate colonized spaces, and enslaved women were commonly viewed as breeders. As Hartnell notes, following the abolition of slavery black children were no longer considered “valuable commodities”: in a flipping of the coin the rights of African American women to have children were curbed and they became “the targets of sterilization policies that continued into the 1990s” (Hartnell 2022; see also Ross and Solinger 2017, 9-57).

In addition to concerns over the medicalization of young people, with a risk of infertility depending on the level of intervention, there are conflicts of interests between the nine protected characteristics of the Equality Act 2010. Some of the most notable instances of such conflicts of interest have involved women of colour. Raquel Rosario Sánchez is one case in point, and in July 2022 the Employment Tribunal found that Allison Bailey, who litigated in respect of detriment with regard to the conflicted relation between sex and gender, had been discriminated against and victimised. She was awarded £22,000, £2,000 of which is aggravated damages, with regard to Garden Court Chambers, where she works. The Employment Tribunal noted that these damages are “to compensate the distress caused by high-handed insulting or oppressive behaviour - *Broome v Cassell* 1972 1 All ER

801 - or by conduct motivated by spite, animosity or vindictiveness” (Bailey [July 2022](#); see also Cross [27 July 2022](#)). In 2021 Sonia Appleby, Tavistock safeguarding officer, brought a whistleblowing case to the Employment Tribunal and was found to have experienced detriment arising from the processing of safeguarding concerns in respect of the conflicted relation between sex and gender. The British Muslim anti-trafficking campaigner and anti-racist writer Onjali Raúf has recently risked vilification for her commitment to sex-based rights (Kirkup [2022](#)), and in 2021 the Nigerian novelist Chimamanda Ngozi Adichie, a feminist who challenges sex-based stereotypes, wrote: “we have a generation of young people on social media so terrified of having the wrong opinions that they have robbed themselves of the opportunity to think and to learn and to grow” (2021, see also Flood [2021](#) and Owolade [2022a](#) and [2022b](#)).

Ideology has the potential to distort our understanding of the past, which has notable ramifications both for the public understanding of history and for the humanities as taught in universities. The claim now popular in academic decolonising discourse that heterogenous women, neatly homogenized as “white feminists”, were all colonialists overlooks the strong resistance to imperialism, and to the biologisms that underpinned it, from a number of feminists who were white such as Mona Caird, Evelyn Sharp and Olive Schreiner. That they shared the critique of imperialism developed by feminists of colour such as Sophia Duleep Singh, Sushama Sen, Sarah Parker Remond, Lolita Roy and Sojourner Truth and socialist women of all ethnicities (Hannam and Hunt [2001](#)) exposes the category of “white feminism” as a reductive misnomer, based on ideological fervour, and renders the claim that earlier waves of feminist activism were inevitably imperialist incoherent.

If “white feminism” as a category implies that white women are racist, it makes assumptions about behaviours and beliefs based on race, while the goal of anti-racism is, or should be, to challenge such essentialist thought. The play of identity politics (which emerged on the right) can be seen at work here, whereby an emphasis on intersectionality, which seeks to include rather than exclude, in practice brings about new and reductive divisions and splits (see Sánchez [2021](#); see also Táiwò [2022](#)). The term intersectionality was coined by the U.S. law professor Kimberlé Crenshaw ([1989](#)) and as Crenshaw has recently noted, it was never her intention to exclude women defending their sex, but rather to provide a lens “for the way in which various forms of inequality often operate together and exacerbate each other”: referring to recent distortions, she reminds us that the image of the citizen is still male and that intersectionality is not “identity politics on steroids” (Steinmetz, [2020](#)). Based on ideals of good and bad, such politics recalls nineteenth-century notions of purity and superiority that underpin schemes of moral regeneration, re-entrenching a hierarchy of contempt for and discrimination

against outsiders (see Richardson 2003) and omitting meaningful mention of economic class (see al-Gharbi, *forthcoming*; Owolade 2023).

In the last two years, Covid19 has thrown into sharp relief the UK's class and race fault-lines, and disproportionately high mortality rates among ethnic minorities have highlighted the effects of ongoing and entrenched iniquities – poor housing, low-paid jobs, and racism have physiological as well as social consequences (See Appelman 2021, Resnick, Galea, and Sivashanker 2020). The combination of the pandemic and a government that has a history of increasing social inequality provided ample scope for the socio-economic causes of what are assumed to be genetic or cultural to be obscured (see Raleigh 2022). Without a vaccine, herd immunity was a strategy with clear eugenic undertones (see Dowdy and D'Souza 2020 and Aschwanden 2020). But a left distracted from material conditions and socio-economic disadvantage, and captured by ideological conformity, is not well placed to address such pressing questions.

We would guard best against biologisms today by concerted international effort to end an economic system that prioritizes profits over people. Vital to this is education, not only of the next generation through schools and universities, but with respect to public understanding. The mantra of “no debate” that has descended on universities is exacerbated by a confusion of people and ideas that must be challenged if universities are to fulfil their intellectual and pedagogical role. Entering into dialogue with people with whom we disagree, challenging ideas but without expressions of hostility to those who hold them, is key to this role. To do otherwise is to commit the “genetic fallacy” (Scalambrino 2018) and the fallacy of *ad hominem* argument. Narrow alignments and failures to communicate lead to the positions of moral superiority that obscure the complexity of the material world and our ability to work with this. Biologistic thought becomes more likely when those on the left as well as on the right lose sight of the economic conditions that drive social, racial and sexual inequalities, and of the power relations that underpin them. While twenty-first century expressions of biologism that seek to alleviate gender dysphoria are motivated quite differently from biologisms that have been driven by active and intended discrimination, we would do well to consider vexed questions around consent, and such unintended consequences as infertility, as well as the new forms of discrimination and exclusion, notably with regard to feminist women of all ethnicities, that these current expressions can entail. Recourse to objectivity, non-alignment, and broad accommodations will be vital in resisting reductive biologistic answers to complex social and economic questions, and addressing the increasingly varied ways in which biologisms are reasserting themselves in the twenty-first century.

I would like to thank the Leverhulme Trust for supporting my research on the cultural history of biologisms through a Research Fellowship.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

This work was supported by The Leverhulme Trust [grant number RF-2022-572].

ORCID

Angelique Richardson  <http://orcid.org/0000-0002-9847-3564>

References

Reports, court rulings and related websites

- A.P., Garçon, E., and Nicot, S. v France. 6 April 2017. European Court of Human Rights Judgment 79885/12 52471/13 and 52596/13. <https://hudoc.echr.coe.int/eng?i=001-172556>; <https://www.parliament.uk/about/living-heritage/transformingsociety/private-lives/relationships/overview/sexuality20thcentury/>.
- Allison Bailey. July 2022. v Stonewall Equality Ltd, Garden Court Chambers Ltd, Rajiv Menon QC and Stephanie Harrison QC. <https://www.judiciary.uk/wp-content/uploads/2022/07/Bailey-judgment.pdf>.
- Allison Bailey Witness Statement. 14 April 2022. <https://allisonbailey.co.uk/wp-content/uploads/2022/05/Witness-Statement-of-Allison-Bailey.pdf>.
- Ms S. Appleby v Tavistock and Portman NHS Foundation Trust. 3 September 2021. https://assets.publishing.service.gov.uk/media/6149eb48d3bf7f05ac396f79/Ms_S_Appleby_vs_Tavistock_and_Portman_NHS_Foundation_Trust.pdf.
- BBC News style guide. <https://www.bbc.co.uk/newsstyleguide/all/#g>.
- Bell v Tavistock High Court judgment. 1 December 2020. <https://www.judiciary.uk/wp-content/uploads/2020/12/Bell-v-Tavistock-Judgment.pdf>.
- Bell v Tavistock Appeal Court judgment. 17 September 2021. <https://www.judiciary.uk/wp-content/uploads/2021/09/Bell-v-Tavistock-judgment-170921.pdf>.
- Care Quality Commission Inspection Report. 20 January 2021. <https://api.cqc.org.uk/public/v1/reports/7ecf93b7-2b14-45ea-a317-53b6f4804c24?20211223172416>.
- Cass, H. 19 July 2022. [Cass-Review-Letter-to-NHSE_19-July-2022.pdf](https://www.nhse.uk/cass-review-letter-to-nhse-19-july-2022.pdf).
- Cass Review interim report. February 2022. <https://cass.independent-review.uk/publications/interim-report/>.
- Department for Education. 24 September 2020. <https://www.gov.uk/guidance/plan-your-relationships-sex-and-health-curriculum>.
- National Academy of Medicine, France. 2 March 2022. "Medical Care of Children and Adolescents with Transgender Identity." Press release translation, Society for Evidence-Based Gender Medicine.
- "Listen to Us." 2019. https://dsdfamilies.org/application/files/8015/5447/3715/repor_tdsdf-2019.pdf.

- National Birth-Rate Commission. 1918-1920; 1920. *Problems of Population and Parenthood: Being the Second Report of and the Chief Evidence Taken by the National Birth-Rate Commission*. New York.
- NHS England. 28 July 2022. <https://www.england.nhs.uk/commissioning/spec-services/npc-crg/gender-dysphoria-clinical-programme/implementing-advice-from-the-cass-review/>.
- NICE. 2021. *New Systematic Reviews of Puberty Blockers and Cross-Sex Hormones*. Published by NICE | SEGM.
- Reindorf, A. 2020; publication version of report 16 September 2021. Report. <https://www.essex.ac.uk/-/media/documents/review/events-review-report-university-of-essex-september-2021.pdf>.
- Society for Evidence-Based Gender Medicine. May 2021. "Sweden's Karolinska Ends All Use of Puberty Blockers and Cross-Sex Hormones for Minors Outside of Clinical Studies." https://segm.org/Sweden_ends_use_of_Dutch_protocol.
- Swedish National Board of Health and Welfare. 27 February 2022. Summary of Key Recommendations from the Swedish National Board of Health and Welfare (Socialstyrelsen/NBHW). <https://segm.org/segm-summary-sweden-prioritizes-therapy-curbs-hormones-for-gender-dysphoric-youth>.
- Tavistock website. <https://tavistockandportman.nhs.uk/care-and-treatment/our-clinical-services/gender-identity-development-service-gids/>.
- Sánchez, R. R. 2021. Crowdjustice statement. <https://www.crowdjustice.com/case/bullying-and-harassment-enable-bristol-university/>.
- Sánchez, R. R. v University of Bristol. 21 April 2022. <https://1chancerylane.com/wp-content/uploads/2022/04/Sanchez-v-Uni-Bristol-final-21.4.22.pdf>.
- Adichie, C. N. 2021. "It is Obscene: A True Reflection in Three Parts." https://www.chimamanda.com/news_items/it-is-obscene-a-true-reflection-in-three-parts/.
- Ahmed, S. F., J. C. Achermann, W. Arlt, A. Balen, G. Conway, Z. Edwards, S. Elford et al. 2016. "Society for Endocrinology UK Guidance on the Initial Evaluation of an Infant or an Adolescent with a Suspected Disorder of Sex Development." *Clin Endocrinol* 84 (5): 771–788. doi:10.1111/cen.12857.
- al-Gharbi, M. *Forthcoming*. *We Have Never Been Woke: Social Justice Discourse, Inequality and the Rise of a New Elite*. Princeton: Princeton University Press.
- Appleman, L. 2021. "Hiding in Plain Sight: Public Health, Eugenics, and COVID-19." *HPRH* 30. <https://hphr.org/30-article-appleman/>.
- Ashwanden, C. October 21 2020. "The False Promise of Herd Immunity for COVID-19." *Nature*. <https://www.nature.com/articles/d41586-020-02948-4>.
- Asteriti, A., and R. Bull. 2020. "Gender Self-Declaration and Women's Rights." *Modern Law Review* 83 (3): 539. <https://www.modernlawreview.co.uk/asteriti-bull-sharpe/>.
- Bannerman, L. 2019. "It Feels Like Conversion Therapy for Gay Children, Say Clinicians." <https://www.thetimes.co.uk/article/it-feels-like-conversion-therapy-for-gay-children-say-clinicians-psvckdvq2>.
- Barnes, H., and D. Cohen. 2020. "Tavistock Puberty Blocker Study Published after Nine Years." <https://www.bbc.co.uk/news/uk-55282113>.
- BBC Newsnight. 19 June 2020. "NHS Child Gender Clinic: Staff Welfare Concerns 'Shut Down'." <https://www.youtube.com/watch?v=zTRnrp9pXHY>.
- Bell, K. 7 April 2021. "Keira Bell: My Story." <https://www.persuasion.community/p/keira-bell-my-story?s=r>.

- Biggs, M. 2020. "Puberty Blockers and Suicidality in Adolescents Suffering from Gender Dysphoria." *Archives of Sexual Behavior* 49 (7): 2227–2229.
- Blackless, M., A. Charuvastra, A. Derryc, A. Fausto-Sterling, K. Lauzanne, and E. Lee. 2000. "How Sexually Dimorphic are we? Review and Synthesis." *American Journal of Human Biology* 12 (2): 151–166.
- Burt, C. H. 2020. "Scrutinizing the US Equality Act 2019: A Feminist Examination of Definitional Changes and Sociolegal Ramifications." *Feminist Criminology* 15 (4): 363–409.
- Butler, C., and A. Hutchinson. 2020. "Debate: The Pressing Need for Research and Services for Gender Desisters/De-transitioners." *Child and Adolescent Mental Health* 25 (1): 45–47.
- Byrne, A. 2019. "What Is Gender Identity? The Elusive True Gender Self." <https://arcdigital.media/what-is-gender-identity-10ce0da71999>.
- Caplan, J. 2011. "The Administration of Gender Identity in Nazi Germany." *History Workshop Journal* 72 (1): 171–180.
- Chen, S. 2020. "China's Gender Imbalance may Take Decades to Resolve". *Global Times*. <https://www.globaltimes.cn/content/1209713.shtml>.
- Clayton, A., W. J. Malone, P. Clarke, J. Mason, and R. D'Angelo. 2021. "Commentary: The Signal and the Noise-Questioning the Benefits of Puberty Blockers for Youth with Gender Dysphoria—a Commentary on Rew et al." *Child and Adolescent Mental Health*. doi:10.1111/camh.12533.
- Cooke, R. 2 May 2021. "Tavistock Trust Whistleblower David Bell: 'I Believed I was Doing the Right Thing'." *Observer*. <https://www.theguardian.com/society/2021/may/02/tavistock-trust-whistleblower-david-bell-transgender-children-gids>.
- Crenshaw, K. 1989. "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics." *University of Chicago Legal Forum* 140: 139–168.
- Crook, P. 2007. *Darwin's Coat-Tails: Essays on Social Darwinism*. New York: Peter Lang.
- Cross, M. 27 July 2022. "Chambers Discriminated Against Barrister in Gender-critical Row." *The Law Society Gazette*. <https://www.lawgazette.co.uk/news/chambers-discriminated-against-barrister-in-gender-critical-row/5113252.article>.
- Darwin, C. R. 1859. *On the Origin of Species by Means of Natural Selection, or the Preservation of Favoured Races in the Struggle for Life*. London: John Murray.
- Darwin, C. R. First edition 1871; second edition 1874. *The Descent of Man, and Selection in Relation to Sex*. 2 vols. London: John Murray.
- Darwin, C. 7 November 1875. In F. Burkhardt et al., eds., *The Correspondence of Charles Darwin*. Cambridge: Cambridge University Press 1985–2022, and UCL Library Services, Special Collections (GALTON/1/1/9/5/7/19). <https://www.darwinproject.ac.uk/letter/?docId=letters/DCP-LETT-10245.xml>.
- Darwin, W. 4 January 1883. *Recollections of Charles Darwin*. CUL-DAR112.B3b-B3f.
- Dillon, S. 2022. "An Interview with Muslim Women." <https://shonaghdillon.co.uk/muslim-women-focus-group/>.
- Dowbiggin, I. 2008. *The Sterilization Movement and Global Fertility in the Twentieth Century*. New York: Oxford University Press.
- Dowdy, D. and D'Souza, G. 2020. "Early Herd Immunity Against COVID-19: A Dangerous Misconception." Johns Hopkins Coronavirus Resource Center. <https://coronavirus.jhu.edu/from-our-experts/early-herd-immunity-against-covid-19-a-dangerous-misconception>.
- Dubicka, B. 2021. "Editorial: Evidence, Policy and Practice – Gold Standard, Good Enough or Doing it Differently?" *Child and Adolescent Mental Health* 26 (1): 1–2.
- Dworkin, A. 1983. *Right-Wing Women*. New York: Perigee.

- Entwistle, K. 2020. "Debate: Reality Check – Detransitioners' Testimonies Require us to Rethink Gender Dysphoria." *Child and Adolescent Mental Health* 26 (1): 15–16. doi:10.1111/camh.12380.
- "Eugenics and the Poor Law." December 1909. *British Medical Journal* 2 (2556): 1808.
- Faye, S. 2021. *The Transgender Issue: An Argument for Justice*. London: Allen Lane.
- Feng, W., Y. Cai, and B. Gu. 2012. "Population, Policy, and Politics: How Will History Judge China's one-Child Policy?" *Population and Development Review* 38 (1): 115–129.
- Flood, A. 16 June 2021. "'It is Obscene': Chimamanda Ngozi Adichie pens Blistering Essay Against Social Media Sanctimony." *Guardian*. <https://www.theguardian.com/books/2021/jun/16/chimamanda-ngozi-adichie-social-media-sanctimony>.
- From a Scientific Correspondent. 25 July 1931. "Sterilisation of Defectives." *New Statesman and Nation*, 102–103.
- Galton, F. 1910. "The Eugenic College of Kantsaywhere" Enclosed in a Letter from Millicent Galton Lethbridge to Edward Galton Wheeler-Galton (c. 1911) *Galton Papers*, University College London 138/6.
- Grau, G. 1995. *Hidden Holocaust? Gay and Lesbian Persecution in Germany 1933-45*. London: Cassell.
- Hamedani, A. 5 November 2014. "The Gay People Pushed to Change Their Gender." <https://www.bbc.co.uk/news/magazine-29832690>.
- Hannam, J., and K. Hunt. 2001. *Socialist Women Britain, 1880s to 1920s*. London and New York: Routledge.
- Harrison, K. 3 July 2018. "A System of Gender Self-identification Would Put Women at Risk." *The Economist*. <https://www.economist.com/open-future/2018/07/03/a-system-of-gender-self-identification-would-put-women-at-risk>.
- Hartnell, A. 2022. "Women, Climate Justice, and the Politics of Population Control." *Radical Notion* 6: 7–13. <https://theradicalnotion.org/women-climate-justice-and-the-politics-of-population-control/>.
- Haub, C., and O. P. Sharma. 2006. *India's Population Reality: Reconciling Change and Tradition*. *Population Bulletin* 61.3 Washington: Population Reference Bureau.
- "Homosexuals in Iran are Having Sex Reassignment Surgery to Avoid Execution." 2020. *Jerusalem Post*. doi:10.1017/cbo9780511984402.004.
- Jian, M. March 2013. "China's Brutal One-Child Policy." *New York Times*. A23.
- King, M., and A. Bartlett. 1999. "British Psychiatry and Homosexuality." *British Journal of Psychiatry* 174: 106–113.
- Kirkup, J. 26 May 2022. "There's Nothing Right-wing about Gender Critical Views." <https://www.spectator.co.uk/article/there-s-nothing-right-wing-about-gender-critical-views>.
- Kluchin, R. M. 2007. "Locating the Voices of the Sterilized." *Public History* 29 (3): 131–144.
- Li, G., K. T. F. Kung, and M. Hines. 2017. "Childhood Gender-Typed Behavior and Adolescent Sexual Orientation: A Longitudinal Population-Based Study." *Developmental Psychology* 53 (4): 764–777. doi:10.1037/dev0000281.
- Littman, L. 2021. "Individuals Treated for Gender Dysphoria with Medical and/or Surgical Transition Who Subsequently Detransitioned: A Survey of 100 Detransitioners." *Archives of Sexual Behavior* 50 (8): 3353–3369. doi:10.1007/s10508-021-02163-w.
- Lovett, S. 11 August 2022. "Tavistock gender clinic facing legal action over 'failure of care' claims." *Independent*. <https://www.independent.co.uk/news/health/tavistock-gender-clinic-lawyers-latest-b2143006.html?amp>.
- Lucassen, L. 2010. "A Brave New World: The Left, Social Engineering, and Eugenics in Twentieth-Century Europe." *International Review of Social History* 55 (2): 65–296.

- Lugones, M. 2007. "Heterosexualism and the Colonial/Modern Gender System." *Hypatia* 22 (1): 186–209.
- Malik, K. 19 Dec 2021. "Strange Beasts, These 'libertarians' who Love to Curb the Freedom of Others." *Observer*.
- Marhoefer, L. 2016. "Lesbianism, Transvestitism, and the Nazi State: A Microhistory of a Gestapo Investigation, 1939–1943." *American Historical Review* 121 (4): 1167–1195. doi:10.1093/ahr/121.4.1167.
- Mascarelli, A. 2015. "Gender: When the Body and Brain Disagree." *Science News for Students*.
- Meredith, S. 11 August 2022. "1000 Families to Sue Tavistock Gender Service." *Medscape*. <https://www.medscape.co.uk/viewarticle/1000-families-sue-tavistock-gender-service-2022a10021ac>.
- Mill, J. S. 1873. *Autobiography of John Stuart Mill*. New York: Columbia University Press. 1960.
- Mügge, M. A. 1909. "Eugenics and the Superman: A Racial Science and A Racial Religion." *Eugenics Review* 1 (3): 184–193.
- Murray, K., L. H. Blackburn, and L. Mackenzie. 2020. "Reform 'Under the Radar'? Lessons for Scotland from the Development of Gender Self-Declaration Laws in Europe." *Edinburgh Law Review* 24 (2): 281–289.
- O'Connor, B. 2001. "The Protagonists and Ideas Behind the Personal Responsibility and Work Opportunity Reconciliation Act of 1996: The Enactment of a Conservative Welfare System." *Social Justice* 28 (4): 4–32.
- Owolade, T. 2022a. "In Defence of Wokeness." *Unherd*. <https://unherd.com/2022/03/in-defence-of-wokeness/>.
- Owolade, T. 2022b. "The Most Pressing Diversity Issue in Publishing? Groupthink." *Prospect*. <https://www.prospectmagazine.co.uk/arts-and-books/the-most-pressing-diversity-issue-in-publishing-groupthink>.
- Owolade, T. 2023. *This is not America: Why We Need a New Conversation About Race*. London: Atlanta.
- Pearson, K. 1914. *The Life, Letters, and Labours of Francis Galton*. 4 Vols. Cambridge: Cambridge University Press.
- Pierson-Balik, D. A. 2003. "Race, Class, and Gender in Punitive Welfare Reform: Social Eugenics and Welfare Policy." *Race, Gender, and Class* 10 (1): 11–30.
- Pletcher, K. 15 Sep. 2021. "One-child Policy." *Encyclopedia Britannica*. <https://www.britannica.com/topic/one-child-policy>.
- Raleigh, V. S. 2022. "Ethnic Differences in Covid-19 Death Rates." *British Medical Journal* 376. doi:10.1136/bmj.o427.
- Reilly, P. R. 2015. "Eugenics and Involuntary Sterilization: 1907–2015." *Annual Review of Genomics and Human Genetics* 16: 351–368.
- Resnick, A., S. Galea, and K. Sivashanker. 18 March 2020. "Covid-19: The Painful Price of Ignoring Health Inequities." *British Medical Journal*. <https://blogs.bmj.com/bmj/2020/03/18/covid-19-the-painful-price-of-ignoring-health-inequities/>.
- Richardson, A. 2001. "'People Talk a lot of Nonsense About Heredity': Mona Caird and Anti-Eugenic Feminism." In *The New Woman in Fiction and in Fact: Fin de Siècle Feminisms*, edited by A. Richardson and C. Willis, 183–211. London: Palgrave.
- Richardson, A. 2003. *Love and Eugenics in the Late Nineteenth Century: Rational Reproduction and the New Woman*. Oxford: Oxford University Press.
- Richardson, A. 2010. "Darwin and Reductionisms: Victorian, Neo-Darwinian and Postgenomic Biologies." *19: Interdisciplinary Studies in the Long Nineteenth Century* 11. doi:10.16995/ntn.583.
- Richardson, A. 2011. "Against Finality: Darwin, Mill and the end of Essentialism." *Critical Quarterly* 53 (4): 21–44.

- Richardson, A. 2014. "‘I Differ Widely from You’: Darwin, Galton and the Culture of Eugenics." In *Reflecting on Darwin*, edited by E. Voigts-Virchow, B. Schaff, and M. Pietrzak-Franger, 17–40. Farnham: Ashgate.
- Richardson, A. 2015. "Eugenics and Victorian Literature." In *Blackwell Encyclopedia of Victorian Literature I*, edited by D. F. Felluga, P. K. Gilbert, and L. K. Hughes, 544–550. Oxford: Blackwell.
- Richardson, A. 2022. "Instinctive Moral Actions: Darwin and the Ethics of Biology." In *After Darwin*, edited by D. Griffiths, and D. Kreisel. Cambridge: Cambridge University Press.
- Ristori, J., and T. D. Steensma. 2016. "Gender Dysphoria in Childhood." *International Review of Psychiatry* 28 (1): 13–20.
- Rosario, V. A. 2002. *Homosexuality and Science: A Guide to the Debates*. Santa Barbara: ABC-Clío.
- Ross, L. J., and R. Solinger. 2017. *Reproductive Justice: An Introduction*. Oakland: University of California Press.
- Sánchez, R. R. 2021. "Intersectionality Hijacked." In *Spinning and Weaving*, edited by E. Miller. Tidal Time Press. <https://www.filia.org.uk/latest-news/2021/5/3/intersectionality-hijacked>.
- Sax, L. 2002. "How Common is Intersex? A Response to Anne Fausto-Sterling." *Journal of Sex Research* 39 (3): 174–178. doi:10.1080/00224490209552139.
- Scalambrino, F. 2018. "Genetic Fallacy." In *Bad Arguments: 100 of the Most Important Fallacies in Western Philosophy*, edited by R. Arp, S. Barbone, and M. Bruce. Hoboken: Wiley.
- Singh, D., S. J. Bradley, and K. J. Zucker. 2021. "A Follow-Up Study of Boys with Gender Identity Disorder." *Frontiers in Psychiatry* 12: 632784. doi:10.3389/fpsy.2021.632784.
- Sisk, C. 2017. "Development: Pubertal Hormones Meet the Adolescent Brain." *Current Biology* 27 (14). doi:10.1016/j.cub.2017.05.092.
- Smith, G., A. Bartlett, and M. King. 2004. "Treatments of Homosexuality in Britain Since the 1950s —an Oral History: The Experience of Patients." *British Medical Journal (Clinical Research ed)* 328 (7437): 427. doi:10.1136/bmj.37984.442419.EE.
- Sodha, S. 29 May 2022a. "If a Lesbian Only Desires Same-Sex Dates that’s not Bigotry, it’s her Right." *Observer*. <https://www.theguardian.com/commentisfree/2022/may/29/if-lesbian-prefers-same-sex-dates-thats-not-bigotry-desire-personal-thing>.
- Sodha, S. 31 July 2022b. "Don’t Buy the Stonewall Line on Gender Identity? Fine. You Can’t be Sacked for that Now." <https://www.theguardian.com/commentisfree/2022/jul/31/dont-buy-stonewall-line-gender-identity-cant-sack-you-now>.
- Spektorowski, A., and L. Ireni-Saban. 2013. *Politics of Eugenics: Productionism, Population, and National Welfare*. Abingdon: Routledge.
- Stack, L. 12 April 2017. "European Court Strikes Down Required Sterilization for Transgender People." *New York Times*.
- Stack, D. 2012. "Charles Darwin’s Liberalism in ‘Natural Selection as Affecting Civilised Nations’." *History of Political Thought* 33 (3): 525–554.
- Stanford, P. 16 Oct 2021. "The Trans Women who Support Women’s Rights." *Telegraph*.
- Steensma, T. D., and P. T. Cohen-Kettenis. 2015. "More Than two Developmental Pathways in Children with Gender Dysphoria." *Journal of the American Academy of Child & Adolescent Psychiatry* 54 (2): 147–148.
- Steinmetz, K. 20 February 2020. "Kimberlé Crenshaw: She Coined the Term ‘Intersectionality’ Over 30 Years Ago. Here’s What It Means to Her Today." *TIME*. <https://time.com/5786710/kimberle-crenshaw-intersectionality/>.

- Stern, A. M. 2005. "Sterilized in the Name of Public Health: Race, Immigration, and Reproductive Control in Modern California." *American Journal of Public Health* 95 (7): 1128–1138.
- Stern, A. M. 2016. "Eugenics, Sterilization, and Historical Memory in the United States." *Historia, Ciências, Saúde–Manguinhos* 23: 195–212. doi:10.1590/S0104-59702016000500011.
- Stonewall list of terms. <https://www.stonewall.org.uk/help-advice/faqs-and-glossary/list-lgbtq-terms>.
- Suissa, J., and A. Sullivan. 2021. "The Gender Wars, Academic Freedom and Education." *Journal of Philosophy of Education* 55 (1): 55–82. <https://onlinelibrary.wiley.com/doi/full/10.1111/1467-9752.12549>.
- Sullivan, A. 2021a. "Sex and the Office for National Statistics: A Case Study in Policy Capture." *Political Quarterly* 92 (4): 638–651. <https://onlinelibrary.wiley.com/doi/full/10.1111/1467-923X.13029>.
- Sullivan, A. 2021b. "Why we Need Data on Both Sex and Gender Identity." *Political Quarterly* 92 (4): 638–651. <https://politicalquarterly.org.uk/blog/why-we-need-data-on-both-sex-and-gender-identity/>.
- Sullivan, A. 2022. "Why UCL are Shutting the Door on Stonewall." *The Critic*. <https://thecritic.co.uk/why-ucl-are-shutting-the-door-on-stonewall/>.
- Táiwò, O. 2022. *Against Decolonisation: Taking African Agency Seriously*. London: C. Hurst & Co.
- Vandenbussche, E. 2021. "Detransition-Related Needs and Support: A Cross-Sectional Online Survey." *Journal of Homosexuality* 69 (9): 1602–1620.
- Webb, B. 1948. *Our Partnership*, edited by B. Drake and M. Cole. New York: Longmans, Green and Company.
- Weeks, J. 2007. *The World We Have Won: The Remaking of Erotic and Intimate Life*. London and New York: Routledge.
- Wells, H. G. 1922. "Introduction" to *Margaret Sanger, Pivot of Civilization*. New York: Brentano's.
- Wells, H. G. 1940. *The Rights of Man, or What Are We Fighting For?* London: Penguin.
- "Why Iran is a Hub for Sex-reassignment Surgery." 2019. *The Economist*. doi:10.21236/ada388242.
- Wilde, O. 1891. "The Soul of Man Under Socialism." In *The Soul of Man Under Socialism and Selected Critical Prose*, edited by L. Dowling. London: Penguin.