



NSTC Subcommittee on Equitable Data
Office of Science and Technology Policy
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Submitted via email to equitabledata@ostp.eop.gov:
“Federal Evidence Agenda on LGBTQI” Equity RFI” (FR Doc. 2022-18219)

Introductory Note

The Women’s Liberation Front (WoLF) is a nonpartisan, nonprofit organization that works to restore, protect, and advance the rights of women and girls. Fighting against regressive gender roles is central to WoLF’s mission, and accurate, meaningful data collection is a crucial tool in the fight against misogyny, homophobia, and lesbophobia.

WoLF thanks the Office of Science and Technology Policy (“OSTP”) and the NSTC Subcommittee on Equitable Data (“NSED”) for the opportunity to provide information for the *Federal Evidence Agenda on LGBTQI Equity* (“the Equity Agenda”). The information provided in this document is intended to educate OSTP about the harms of redefining sex so that it is no longer an objective fact, but is instead subjectively experienced and individually determined. Some refer to the latter concept as a “gender identity.” In the context of law and policy, a more accurate term for it is “sex self-identification” (“self-ID”). Throughout this document “self-ID” is used to refer to the concept that a person’s sex is determined by their subjective, internal view of themselves without regard to things like anatomy or reproductive roles.

WoLF rejects self-ID as regressive and harmful to women, since it ignores the basis of women’s oppression by men. Men and women have unequal reproductive burdens; men are on average larger, faster, and stronger than women; men commit 90+% of violent crime including rape and homicide; and many cultures to this day use sex as a basis for discriminating against, exploiting, abusing, and subjugating women. Recognition of sex as

an objective characteristic by Federal agencies is foundational to ensuring that the agencies facilitate equal access to public life for women and girls. Since same-sex attraction is based on the existence of two sexes, the Equity Agenda cannot simultaneously promote equity for women who are lesbian or bisexual, or who identify as transgender or nonbinary, and at the same time promote self-identification of sex.

Self-ID interferes with (or even prohibits) the accurate collection of vital statistics, hindering efforts to achieve parity between men and women.¹ Health data which are critical to women's health and safety are compromised.^{2 3 4} This is also true for crime statistics - especially violent and sexual crimes. BBC reported that the number of female pedophiles doubled in the past four years, but FOI requests shows that this increase is most likely due entirely to male sex offenders being falsely recorded as female through self-ID.⁵ It is particularly important for Federal agencies and the Equity Agenda to be clear and accurate in collecting data related to sex given that state and private entities continue to take actions that limit the collection and availability of data that impact women and girls.⁶

If the Equity Agenda wishes to collect data on self-reported "gender identity," (self-ID), that must be collected separately instead of defeating the objective category of sex. Also, there is no justification for using self-ID for health data, as there is no medical intervention (drugs, hormones, or surgery) that would warrant classifying a male as a female.

Responses

Describing Disparities.

1. What disparities faced by LGBTQI+ people are not well-understood through existing Federal statistics and data collection? Are there disparities faced by LGBTQI+ people that Federal statistics and other data collections are currently not well-positioned to help the Government understand?

Existing Federal statistics and data collection are increasingly impaired over time with regards to disparities faced by lesbians, the demographic characteristics of lesbians, and the needs of lesbian women and their families. The civil rights struggles and harms to lesbians have traditionally come from and thus been focused on the political right, specifically the religious political right. However, there is a new and growing threat to lesbians - from the

¹ [141006-UNFPA-GenderManual2014-02-SCREEN.pdf](#)

² <https://committees.parliament.uk/writtenevidence/17054/pdf/>

³ [Changes to Census data collection on biological sex could hamper clinical research \(telegraph.co.uk\)](#)

⁴ [Drug Safety: Most Drugs Withdrawn in Recent Years Had Greater Health Risks for Women | U.S. GAO](#)

⁵ [Are Women Really Committing More Sex Offences Now? - Women Are Human](#)

⁶ [Washington Bill Would Cover Up How Many Men Are Housed in Women's Prisons](#)

mostly-secular political left - that is giving rise to all of the same disparities and harms, in a new form. This takes several forms:

- Complex medical “conversion therapy”
- Sexual coercion by heterosexual males who identify as lesbians^{7 8 9}
- For lesbians who reject self-ID, and instead believe that sexuality is defined by what sex you are and the sex(es) you are attracted to romantically or sexually¹⁰ (i.e. lesbians who are “biological” women who are only attracted to “biological” women):
 - Socio-cultural isolation/exclusion from “LGBT” spaces and services (including by heterosexual males who self-identify as “lesbians” and bisexual women who identify as lesbians despite having male partners).
 - Discrimination in employment, education, or public accommodations on the basis of their beliefs

Medicalization of “gender non-conformity” as a form of conversion therapy and eugenics

Self-ID and its ideological underpinnings are leading to increasing numbers of children and young adults being medicalized for not conforming to sex-based stereotypes. All current evidence suggests this group is massively, disproportionately same-sex attracted (LGB). Known as “gender-affirming care,” this medicalization takes the form of puberty blockers, cross-sex hormones, and surgical procedures on a person’s genitalia or breasts. These drugs and procedures serve no physical medical purpose, but rather are undertaken to try to resemble the opposite sex, ostensibly to treat clinically significant distress that a person experiences as a result of not appearing “masculine” or “feminine” enough. These drugs and procedures can lead to sterilization and adult sexual dysfunction; the children who “consent” to them are simply too young to meaningfully consent to permanent impairment of fertility or of adult sexual experiences that they cannot yet comprehend.

This is billed as progressive, but the “born in the wrong body” narrative has been notably embraced by countries such as Pakistan and Iran (where homosexuality is punished by death, but “sex change” is government subsidized).¹¹ This attitude may be more common than many realize - whistleblowers from a child “gender” clinic in the UK have stated that “gender-affirming” care is sometimes sought by families who prefer a “transgender” child over a gay child.¹² This has been reported in the U.S. as well. One conservative religious family believed their young son was gay; in response they sought conversion therapy and physically abused him to the point where he was suicidal.¹³ Unsurprisingly, once they allowed their son to play with whatever toys he wanted, wear what he wanted, and when

⁷ [RE: "Are genital preferences transphobic?" Give it up, Riley! - YouTube](#)

⁸ [RE: "your dating preferences are discriminatory" - YouTube](#)

⁹ [The lesbians who feel pressured to have sex and relationships with trans women - BBC News](#)

¹⁰ [The Cotton Ceiling: You don't respect trans women if you don't consider them women - YouTube](#)

¹¹ [The gay people pushed to change their gender - BBC News](#)

¹² [BBC Newsnight report on the Tavistock GIDS \(transgendertrend.com\)](#)

¹³ [Time Magazine Promotes 'Trans-the-Gay-Away' Child \(breitbart.com\)](#)

they stopped beating him for not adhering to stereotypical “male” behavior, he bloomed. There are many such families who would rather treat their son as a daughter than accept that their son wants to play with dolls and wear princess dresses.

Given the high rate of desistance from childhood gender dysphoria, as well as the very high number of dysphoric youth who are same-sex attracted, serious caution should be urged. It is pure eugenicism for our society to accept that the solution for distress experienced by gender-nonconforming young people is chemical castration and removing their healthy sex organs.^{14 15}

Lesbian and bisexual women in prison

Self-identification of sex in the correctional context deprives incarcerated women of the right to female-only prison housing. Importantly, between one-third and one-half of women in prison are lesbian or bisexual, disproportionately exposing this group to the male violence being perpetrated in places where mixed-sex prison housing is being implemented. All incarcerated women (and girls) regardless of sexual orientation are subject to the non-speculative risk of rape, pregnancy, and STIs.^{16 17} By some estimates, nearly 90% of women in prisons are themselves victims of sexual violence.

This is particularly troubling because data shows that a large proportion (up to 50%) of male prisoners who identify as transgender are convicted sex offenders.¹⁸ The dangers posed by these men in the correctional setting are not hypothetical: in 2021 the Bureau of Prisons identified “transgender status” in male inmates as being associated with rape perpetration in prisons.¹⁹ Meanwhile, President Biden reportedly seeks to impose self-ID in federal prisons under the guide of “LGBTQ Equality.”²⁰ It is imperative for robust data to be collected on this cohort using objective measures.

2. Are there community-based or non-Federal statistics or data collection that could help inform the creation of the Federal Evidence Agenda on LGBTQI+ Equity? Are there disparities that are better understood through community-based research than through Federal statistics and/or other data collection?

There is a dearth of research currently for LGB-specific things (especially in comparison to the large volume of research being done on gender); and there is a near-total absence of any

¹⁴ [Factors Associated With Desistance and Persistence of Childhood Gender Dysphoria: A Quantitative Follow-Up Study \(transgendertrend.com\)](#)

¹⁵ [Psychosexual outcome of gender-dysphoric children - PubMed \(nih.gov\)](#)

¹⁶ [Two NJ Women's Prison Inmates Impregnated by Male Criminal](#)

¹⁷ [California: Keep Prisons Single-Sex](#)

¹⁸ [CDCR-Response-on-Data-of-Offenders-Seeking-Transfer-to-Female-Facilities.pdf \(kpssinfo.org\)](#)

¹⁹ [prea_report_2021.pdf \(bop.gov\)](#)

²⁰ [Leaked Biden Plan Would House Violent Men In Women's Prison Cells \(thefederalist.com\)](#)

data or writings in the research or academic context for the impact of self-ID on lesbian and bisexual women.

Informing Data Collections

1. In some instances, there are multiple surveys or data collections that could be used to generate evidence about a particular disparity faced by the LGBTQI+ community. In addition to factors like sample size, timeliness of the data, and geographic specificity of related data publications, what other factors should be considered when determining which survey would best generate the relevant evidence?...

One factor that must be considered is how a certain source defines sex, and whether information is collected on sexual orientation (LGB) as well. Surveys or data collections that describe the experiences of lesbians (as defined by objective sex) would be of particular value. We are witnessing a concerted push to collapse the characteristic of ‘sex’ into the characteristic of ‘gender identity.’ This is rarely done for reasons of privacy or for practical concerns, but instead is usually for sociocultural or ideological reasons.

2. To protect privacy and maintain statistical rigor, sometimes publicly-released data must combine sexual and gender minority respondents into a single category. While this approach can provide valuable evidence, it can also obscure important details and differences. Please tell us about the usefulness of combined data, and under what circumstances more detailed data may be necessary.

Sex is an extremely important factor in all research on this issue, and WoLF urges continued attention to sex as an objective characteristic. In addition, acronyms such as “LGBT” or “LGBTQI+” are outdated umbrella terms that really ought to be retired. There are no “LGBTQI+” persons, and being same-sex attracted and identifying as transgender are distinct and unrelated things. A person cannot be both gay and bisexual, for example; and a person who identifies as transgender may be straight, gay, or bisexual - but regardless, their sexual orientation is distinct from their “gender identity.”

It is WoLF’s position that combined data is of very limited value, and this is broadly expressed in two ways:

- 1) People who are same-sex attracted (“LGB”) do not inherently share qualities, health needs, experiences of discrimination, etc. with people who identify as transgender (or people with characteristics or identities represented by additional letters after the “T” in the acronym.)

- 2) Women and girls who may be “LGBTQI+” rely absolutely on the recognition of ‘sex’ as a characteristic entirely separate and distinct from sexual orientation and “gender identity;” the characteristic of sex should always have an objective basis and not be “self-identified.”

When discussing issues that affect persons who are same-sex attracted, a more appropriate acronym is “LGB.” However, even the LGB “community” is not a monolith and individuals within this population should not be force-teamed in order to receive academic or political attention. For example, lesbians and gay men may have different needs regarding HIV prevention services, and a trans-identifying person’s need for HIV prevention services is based, statistically speaking, on their sex and the sex of the individuals with whom they are sexually intimate. Forcing any population to team with a group that may have divergent interests undermines data collection and provision of services to ensure adherence with rules on equity.

4. How can Federal agencies best communicate with the public about methodological constraints to collecting or publishing SOGI data? Additionally, how can agencies encourage public response to questions about sexual orientation and gender identity in order to improve sample sizes and population coverage?

Federal agencies should always be clear about the definitions of sex (and sexual orientation), and be transparent and accurate when communicating about what populations are included in a data set.

Self-ID does not refer to how an individual identifies themselves *to* a survey, data collector, etc., but rather how one determines their own sex. When this document criticizes “self-identification” of sex, it should not be taken as a demand to require “proof” of a person’s sex, merely that individuals should be instructed to report their objective sex. While we strongly oppose using phrases like “sex assigned at birth” (since sex is not assigned, but is observed and recorded at birth), it is acceptable for Federal agencies to use whatever language is most likely to garner an accurate response (“birth sex,” “natal sex,” “sex recorded at birth,” etc.). This is typically as simple as communicating to the subjects that that the data being sought is sex, not “gender identity.”

Privacy, Security, and Civil Rights

1. While the confidentiality of data collected by the statistical system is protected by statute, OMB and other agency policies, and experience in protecting the confidentiality of respondents through data governance, privacy-preserving technology, and disclosure limitation practices, a wide range of privacy protections apply to data collected for programmatic purposes, such as applications for Federal programs or benefits, compliance forms, human

resources data, and other data used to manage and operate Federal programs. What specific privacy and confidentiality considerations should the Subcommittee on SOGI Data keep in mind when determining promising practices for the collection of this data and restrictions on its use or transfer, especially in the context of government forms and other collections of data for programmatic use?

Federal agencies should understand that “LGBT” advocacy groups may be unfriendly to LGB interests, even those initially formed specifically to protect LGB interests, e.g. the National Center for Lesbian Rights. The LGB population has in recent years been effectively barred from collectively organizing. They have been prevented from forming civil organizations which exclusively serve their interests, and have largely been unrecognized as distinct populations under the law. In the U.S. and UK, former LGB advocacy groups have erased the concept of same-sex attraction, redefining it instead as “same-gender” attraction and denouncing lesbians and gay men who refuse opposite-sex partners. Groups that have formed to fill this gap in representation have been roundly excluded from public politics. An “LGBT” advocacy group engaged in a targeted campaign to end the career of a Black lesbian barrister who said that men cannot be lesbians.²¹

Regarding the collection and retention of data, Federal agencies should consider that groups who are in favor of self-identification of sex will not collect data from their constituents on that issue, and will always use self-ID to collect information. (For example, they will include both male and female people who self-identify as “lesbian”). The Equity Agenda should also consider the risks associated with gathering data through legacy groups (such as the ACLU, GLAAD, or the National Center for Lesbian Rights) or through groups explicitly in favor of sex self-identification (Transgender Law Center, HRC, etc.). As discussed elsewhere in this comments, the overt hostility to so-called “gender critical” beliefs is widespread, and lesbians who profess such views are particularly at risk of social ostracism or discrimination in employment, education, and public services.

This RFI response is submitted on behalf of Women’s Liberation Front (WoLF) by Lauren Adams Bone, Jackson Bone LLP.

If you seek further information, please do not hesitate to contact me at LBone@jacksonbonelaw.com or WoLF Executive Director Dr. Mahri Irvine at executivedirector@womensliberationfront.org.

Read more at www.womensliberationfront.org

²¹ [Allison Bailey](#)