

## **Attachment 11: psychological approaches to gender incongruence in the Catholic school system**

This attachment is about care for trans and gender incongruent student. We ask that this attachment only be made available to members of the committee.

\*\*\*

From March 2021 we began receiving reports that students in Catholic schools who came out as trans or gender diverse were to be referred to a psychologist named Dianna Kenny.

Dianna Kenny has been very vocal in her opposition to trans and gender diverse identities. She believe "transgenderism is a cult" and "a disorder" comparable to anorexia, that it is caused by an "underlying psychopathology" and that it is transmitted by "social contagion" similar to "the Inquisition" and "the madness of crowds"<sup>1</sup>.

She peddles misinformation including that "88% of young gender dysphoric individuals will desist by late adolescence or early adulthood"<sup>2</sup>, when global and Australian research shows the figure is 1% or less<sup>3</sup>.

She has opposed the Tasmanian Law Reform Institute's proposed ban on conversion practices and has spelt out the conversion belief that trans and gender diverse identity is a flaw that can be fixed<sup>4</sup>.

It should go without saying that we strongly oppose Dianna Kenny being permitted to counsel young people with gender incongruence or who identify as trans or gender diverse.

The only appropriate counsellors are those whose approach is approved by respected medical bodies such as the Australian Medical Association and the the Royal Australian and New Zealand College of Psychiatrists

---

<sup>1</sup> <https://www.mercatornet.com/how-can-we-bring-sanity-to-the-devotees-of-this-transgenderism-cult>

<sup>2</sup> ibid

<sup>3</sup> <https://theconversation.com/transgender-regret-research-challenges-narratives-about-gender-affirming-surgeries-220642> also

<https://jamanetwork.com/journals/jamapediatrics/article-abstract/2815512>

<sup>4</sup> <https://diannakenny.com.au/presentation-to-the-forum-hosted-by-australian-free-speech-association-on-changes-to-law-proposed-by-the-tasmanian-law-reform-institute-tlri-on-conversion-therapy/>

(RANZCP). The key messages in the RANZCP's clinical guidelines are as follows<sup>5</sup>:

### **Key messages**

- The RANZCP acknowledges the evidence (both scientific and historical) that the spectrum of human gender diversity, has long existed in many parts of the world, civilisations, and cultures.
- Being Trans or Gender Diverse does not represent a mental health condition.
- TGD people experience higher rates of mental illness than the general population. Stigma, discrimination, trauma, abuse, and assault contribute to this mental distress.
- Psychiatrists have a responsibility to counter stigma, discrimination and violence directed towards TGD people.
- TGD people should be supported with person-centred and non-judgemental care which involves family and whānau where appropriate.
- TGD people should have equity of access to health care settings for their general health care needs which must be underpinned by culturally safe practice.
- Distress associated with gender may in some situations be related to a range of psychosocial issues or mental health conditions.
- Psychiatrists must have regard to the relevant laws and professional standards in relation to assessing capacity and obtaining informed consent, including the [RANZCP Code of Ethics](#).
- There are methodological limitations in studies which assess the effectiveness of all models of treatment on the mental health of children and adolescents with Gender Dysphoria. Psychiatric practice will be informed by further emerging evidence.

---

<sup>5</sup> <https://www.ranzcp.org/clinical-guidelines-publications/clinical-guidelines-publications-library/role-of-psychiatrists-working-with-trans-gender-diverse-people>