Debunking transphobic talking points

A new zine by



What this is

A zine to help allies challenge transphobic talking points in everyday life.

Ideas for constructively responding to your transphobic relative or colleague.

What this isn't

Encouragement to engage with the trolls.

There's no point wasting your time on committed bigots.

'Cis' is a slur.

In talking about gender, 'cis' plays very much the same role that 'straight' does when talking about sexuality, and 'abled' does when talking about disability.

These terms are important because they are alternatives to stigmatising distinctions between 'normal' people, and 'other' people.

In fact, the word 'cis' comes from the same Latin origins as 'trans' does.

Trans-inclusive language causes womanhood to be erased.

There is no single 'common experience' of being a woman.

For example, 'people who menstruate' is not synonymous with 'women'. It doesn't apply to post-menopausal women but it does apply to trans men.

Trans-inclusive language isn't a replacement for existing words but it does help to accurately reflect more people's experiences.

Trans rights undermine women's sex-based rights.

As people who experience misogyny alongside cis women, trans women and trans men have always been a part of feminist struggles.

The concept of 'sex-based rights' is a very new one. Feminists have historically focused on equal rights - rights that people are entitled to by virtue of being human.

Allowing trans people to self ID would let predatory men into women's spaces.

Many Western countries allow self-ID, including Denmark, Finland and Ireland. None of these have recorded an increase in crime.

Current and historical records of assault indicate that there are easier ways for predatory men to access women than going through transition.

Gender non-conforming children are being told they are trans.

Children and young people need time to explore in a supportive environment. They also know themselves and have agency. When trans young people grow up in hostile conditions, they are at high risk of mental distress.

A study of young people showed 98% of trans youth who went through gender-affirming healthcare continue their treatment into adulthood.

Trans-identifying children are being given cross-sex hormones.

Puberty blockers are not the same thing as crosssex hormone treatments.

Puberty blockers are largely reversible, and have been used and tested for decades.

Young people cannot be given cross-sex hormones until they are at least 16.

Trans people are more likely to be autistic or mentally ill. Can we be sure they are trans?

Autistic people are more likely to be trans. This might be because they are more likely to question social constructs.

Trans people also have higher rates of mental health conditions, as do almost all communities that experience systemic marginalisation.

Neurodivergence or mental ill health is not a cause to doubt trans identity.

Trans people are a new phenomenon and being trans is just a trend.

Trans people (and people with identities outside of the binary framework) have existed across cultures and throughout history.

But Western culture has criminalised, ignored and otherwise suppressed gender non-conformity, which may be why trans people have been less visible in the recent past.

Most people eventually regret transitioning.

Less than 10% of people detransition. Often this is due to community stigma, and retransition is very common.

Regret rates for genderaffirming surgery are as low as 0.03%. By contrast, the regret rate for knee surgery is 6-30%.

Join us in resistance

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to join our mailing list, meet people on our Discord forum, and learn more.