



An American export:

Trans-ideology and the manufacturing of Gender Dysphoria

What is a woman? - “We don’t know yet.”





Contents

To the Reader	3
Introduction: “We don’t know yet.”	4
Pregnant men and The Parasitic Mind	6
Post-Modernism in action (out of the University and on the streets)	9
On Relativism.....	10
On Safetyism.....	11
The American University Madrassa System	15
Psychosis.....	17
Woke Religion: A taxonomy	18
What is a Woman?	20
Abigail Shirer.....	22
What is Gender Dysphoria?.....	25
Dr. Littman: Adolescent girls and peer contagion.....	27
Lupron: Pharma and the business of Gender Dysphoria.....	30
Lupron: On Infertility	33
Lupron: Chemical Castration turned pubertal “pause button”	34
Hansel and Gretel	36
“St George in retirement” syndrome	38
Victoria (Australia).....	40
Mark Latham in NSW (Australia)	41
Dr. Toby Rogers and my thoughts on mass vaccination	42
Detransitioning	43
The story of Nathan Verhelst	44
On Intuition	46
Turn Off the News	49

To the Reader

This was meant to be a Substack piece.

By the time I had finished writing it and putting it together within Substack with all the embedded links and videos it came in at almost 14,000 words...I was fine with that...I clicked SEND and it turns out Substack was not fine with it. I hadn't had an article blocked because of its length before.

So, I decided to split it into a Part 1 & 2 and "rebuild" the two articles, but in doing so I decided to remove some sections including the one on Intuition. I wasn't sure whether it really belonged in the piece. Anyway, a couple of days passed, and I regretted taking them out, so I've come back but this time put both articles together into this eBook, added the parts I had removed plus some other thoughts not found in the articles.

The Trans subject is not one I plan on spending much time on, I wanted to write something that supported the wonderful Matt Walsh documentary titled **What is a Woman?** and in doing so, a stream of thought threads poured out that I wove into this. I have put a version number on it because I might come back and add bits to it once or twice a year and this eBook might "snowball" over time.

The purpose of this eBook is to support the documentary, if you have already watched it, to encourage you to watch it if you haven't and regardless of the documentary if you know nothing about the subject, or think that you know a little, this can be a gateway into this most complex of subjects. I have relied on and referenced many books, if you were to read any of them you will know more about the matter than 99% of other people and certainly know more about it than what the medical, government and media establishment want you to know (there's that [MGM Triad](#) again).

Hope you enjoy the eBook. I suspect I'll create more in the future.

Regards

Unbekoming

(related to [Ken Mubongi](#))

Introduction: “We don’t know yet.”

This is not a subject I particularly wanted to go deep into, but having watched **What is a woman?** yesterday (much more on that later), it brought up so many interconnected thoughts that I decided to tackle the subject and put this VERY long piece together.

So, let’s get going...

I bumped into an acquaintance about two months ago that I hadn’t seen in a while. I asked him where he had been, and he told me that they’d just had their first child 6 weeks earlier. I congratulated him and asked him the next obvious question:

Me: “What have you got, a boy or a girl?”

Him: “We don’t know yet.”

Realising that, after reading about “it” for many years, I had finally come in direct contact with trans-ideology in Sydney, Australia in April 2022, I looked at him, a little bit dazed from the shock but fully aware what had just happened and said:

Me: “Don’t do that.”

Him: “Ok, it’s a boy.”

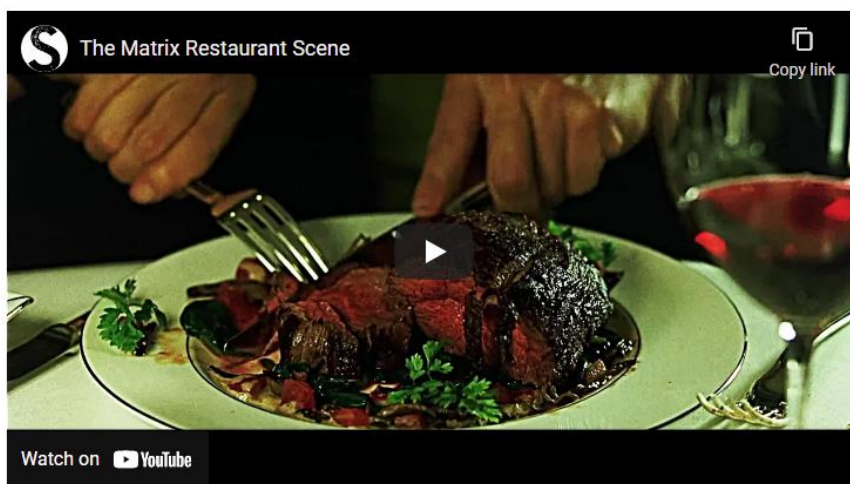
“It’s” here. It’s been here for a while, I think.

Some of you probably have no idea what the “it” is and some of you understand perfectly and many of you I think sort of understand it but would struggle to explain it if you had to (trust me, I know the feeling).

What he meant was, “we won’t know what we have until our child chooses their gender.”

If you are new to this, you might want to sit down and take a moment to process this. This is going to be a long piece, and if you are new to this material, you will not be the same person at the end of this piece as you will have woken up from a deep sleep and there is no going back to sleep after that. Again, I know the feeling!

When I first watched The Matrix, I loved it, but I now realise that all those years that I loved the movie, I was actually asleep, I wasn’t “red-pilled” on anything at all. Now I know what it means to wake up, it’s unpleasant, but it turns out I need to know what is true (or likely to be true), that’s just me. This is my favourite scene from The Matrix, I absolutely understand what Cypher (the guy about to eat the steak) is saying and feeling.



<https://youtu.be/vkvdAznoFqY>



I don't know when I started to pay attention to all of this, if I had to pick a starting point it was probably 5 years ago after I listened to Jordan Peterson for the very first time on Sam Harris's podcast.

<https://podcasts.apple.com/au/podcast/62-what-is-true/id733163012?i=1000380235965>

Harris would say that it was the worst podcast he ever did, while I thought it was one of the best podcasts I had ever listened to because for two hours they debated what "true" meant.

I used to love Harris, he was peak rationalism and the poster child of modern atheism, but I cannot stand the man anymore, he probably hasn't changed much at all, most of the change has been in me. As for Peterson, I've spent a lot of time reading and listening to him and basically waking up to worlds of subjects and perspectives I was entirely ignorant of.

Peterson would often talk about Marxism, Neo-Marxism and Post-Modernism and I thought I knew a bit about the first and absolutely nothing about the second two.

Pregnant men and The Parasitic Mind

Post-Modernism then connected me with the likes of Gad Saad, who here in this clip talks a bit about Post-Modernism and his 2002 encounter with the girlfriend of one of his students.



<https://youtu.be/a55gvPE7k8s>

2002, 20 years ago (!), is telling as to how long this solvent been brewing deep within the bowels of American universities and has broken through to now flood and dissolve Western culture. To dissolve “modernity” and take us beyond and “post” modernity.

Saad tells the story in his great little book, [The Parasitic Mind](#), I think its even better reading the story:

Men Get Pregnant and Women Have Penises

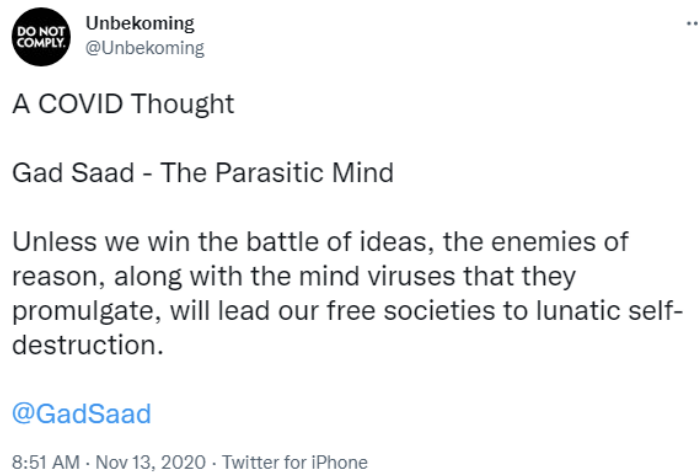
In 2002, I had a Kafkaesque chat that served as a prophetic warning sign of the lunacy that would eventually fully engulf not just university campuses but our legislative chambers as well. One of my doctoral students had recently defended his dissertation, so we set up a celebratory dinner to mark the moment. Four people attended the infamous dinner: my wife and I along with my doctoral student and his date. My student had warned me that his date was a graduate student committed to postmodernism, radical feminism, and cultural anthropology, the perfect tsunami of anti-science “thinking.” When in mixed company, the norm is to avoid a discussion of politics and religion, and this person’s beliefs were akin to a political ideology or a quasi-religious cult, so I reluctantly agreed to be on my best behavior. Surely my student knew me well enough to know that this was a tenuous promise at best. In the immortal words of Bette Davis in the classic film *All About Eve*, “Fasten your seat belts, it’s going to be a bumpy night.”

Postmodernism proclaims that there are no objective truths. Evolutionary psychologists like myself recognize that human universals exist precisely because they constitute elements of a shared biological heritage. Inevitably, my student’s companion and I ended up in a debate. She scoffed at my first principles, and I scoffed at hers, so I laid out a challenge to my interlocutor: I would offer what I considered to be a human universal, and she would tell me



why I was wrong. I began with what I was sure was an incontestable example: when it comes to Homo sapiens, only women bear children. She rolled her eyes at my gargantuan “stupidity” and told me of a Japanese tribe where men somehow “spiritually” bear children. She scolded me for focusing on the material and biological realm because this was what kept women barefoot, pregnant, and in the kitchen. Apparently, my first example was too toxic and triggering, so I made a second less “controversial” attempt. I proposed to her that sailors have always relied on the fact that the sun rises in the East and sets in the West, and this was an objective universal truth. How do you think she “dismantled” my second example? She went into her toolbox of postmodernist bullshit and deployed a deconstructionist retort: she questioned my use of the “arbitrary labels” East, West, and sun. She then added that what I refer to as the sun, she might call dancing hyena (I’m not kidding). Our conversation soon sputtered out. Over the next dozen years, conversations like this started to stack up, especially regarding “gender” (For example, subsequent to a lecture that I delivered at Wellesley College in 2014, one student suggested to me that professors should poll students at the start of class regarding their gender identities.) If language creates reality, as postulated by deconstructionists, then to misgender someone becomes an affront to that person’s “reality.”

I found this old Tweet of mine, from when I was learning up on this stuff:



Here is a [thread](#) I put together after reading Saad’s book:



The journey also connected me with James Lindsay, who for me is the world expert on this subject matter and the one who has done the most in explaining the “coding” and the mechanics of these interwoven ideas and ideologies to an ignorant public. His website is a treasure trove of material that is accessible by the curious layman.

[New Discourses](#)

He is slowly building an encyclopedia on the meaning of all the words.

[Translations from the Wokish - New Discourses](#)

If you want to understand what the hell Neo-Marxism is (and why it matters), you can start here.

[A Summary of Neo-Marxism - New Discourses](#)

Anyway, I digress just a bit, but if you want to understand the back story to “We don’t know yet” you need to do some work, you need to understand whether the steak is real or fake. If you would prefer to keep believing that the steak is real...do not read on!

Who am I writing this for? If I had to pick one reader and one reader only, it would be a curious parent of a young child. You cannot fight that which you don’t see, you cannot defend your child from that which you do not understand.



Allie Beth Stuckey
@conservmillen

Two dudes steal first & second place from female cyclers and kiss on the podium while real winner tends to her baby girl.

Remember “we just want to be left alone?” It was always a lie.



Biological males win women’s cycling event, kiss while third place female cares for child

Bridges was cycling and winning competitions in male categories as recently as February.

thepostmillennial.com

June 4th 2022

889 Retweets 3,583 Likes

<https://twitter.com/conservmillen/status/1533171616447975427?s=20&t=iBC-zyuyufDICu9kq6ytjg>

Post-Modernism in action (out of the University and on the streets)

One of the points that stood out for me in the documentary was when Matt Walsh, the presenter and interviewer, was talking to people on the street asking them what they thought if he told them that “he was a woman”, all the responses were different versions of the same answer:

“I don’t care...if it’s true to you...if it’s your truth.”

“If that’s your reality.”

“I don’t care. Whatever makes you happy.”

This would be a similar response today if you did the same thing in many Australian cities, certainly all Australian universities. Remember, America is an exporter of culture and we Aussies are big importers of that culture, in many ways we are America-Lite.

These answers from the public are the product of at least two estuaries coming together:

- Relativism: where everything is relative, and nothing is true and grounded (that’s a post-modern estuary).
- Safetyism: as it plays out by prioritising Feelings over Facts. Western culture for decades has placed the safeguarding and preservation of feelings above the primacy and importance of facts. This, by the way, is another American export.

On Relativism

Relativism has well and truly gone mainstream. It's a foundational pillar of Post-Modernism.

[Cynical Theories: How Activist Scholarship Made Everything about Race, Gender, and Identity - And Why this Harms Everybody : Pluckrose, Helen, Lindsay, James: Amazon.com.au: Books](#)

A fundamental change in human thought took place in the 1960s. This change is associated with several French Theorists who, while not quite household names, float at the edges of the popular imagination, among them Michel Foucault, Jacques Derrida, and Jean-François Lyotard. Taking a radically new conception of the world and our relationship to it, it revolutionized social philosophy and perhaps social everything. Over the decades, it has dramatically altered not only what and how we think but also how we think about thinking. Esoteric, academic, and seemingly removed from the realities of daily existence, this revolution has nevertheless had profound implications for how we interact with the world and with one another. At its heart is a radical worldview that came to be known as “postmodernism.”

What, though, is postmodernism? The online Encyclopedia Britannica defines postmodernism as:

a late 20th-century movement characterized by broad skepticism, subjectivism, or relativism; a general suspicion of reason; and an acute sensitivity to the role of ideology in asserting and maintaining political and economic power.

Walter Truett Anderson, writing in 1996, describes the four pillars of postmodernism:

1. The social construction of the concept of the self: Identity is constructed by many cultural forces and is not given to a person by tradition;
2. Relativism of moral and ethical discourse: Morality is not found but made. That is, morality is not based on cultural or religious tradition, nor is it the mandate of Heaven, but is constructed by dialogue and choice. This is relativism, not in the sense of being nonjudgmental, but in the sense of believing that all forms of morality are socially constructed cultural worldviews;
3. Deconstruction in art and culture: The focus is on endless playful improvisation and variations on themes and a mixing of “high” and “low” culture; and
4. Globalization: People see borders of all kinds as social constructions that can be crossed and reconstructed and are inclined to take their tribal norms less seriously.

I could go on and on, but I just want you to understand that what all these normal people are saying on the streets is “Relativism” in action, in the wild (not in a social studies university department) and that Relativism is a pillar of Post-Modernism, it's an egg laid by a bigger, post-modernist chicken.



On Safetyism

This from **The Coddling of the American Mind**

[The Coddling of the American Mind: How Good Intentions and Bad Ideas Are Setting Up a Generation for Failure](#) : Lukianoff, Jonathan Haidt and Greg: Amazon.com.au: Books

Twenge's analyses suggest that there are two major generational changes that may be driving the rise of safetyism on campus since 2013. The first is that kids now grow up much more slowly. Activities that are commonly thought to mark the transition from childhood to adulthood are happening later—for example, having a job, driving a car, drinking alcohol, going out on a date, and having sex. Members of iGen wait longer to do these things—and then do less of them—than did members of previous generations. Instead of engaging in these activities (which usually involve interacting with other people face-to-face), teens today are spending much more time alone, interacting with screens. Of special importance, the combination of helicopter parenting, fears for children's safety, and the allure of screens means that members of iGen spend much less time than previous generations did going out with friends while unsupervised by an adult.

The bottom line is that when members of iGen arrived on campus, beginning in the fall of 2013, they had accumulated less unsupervised time and fewer offline life experiences than had any previous generation. As Twenge puts it, "18-year-olds now act like 15-year-olds used to, and 13-year-olds like 10-year-olds. Teens are physically safer than ever, yet they are more mentally vulnerable." Most of these trends are showing up across social classes, races, and ethnicities. Members of iGen, therefore, may not (on average) be as ready for college as were eighteen-year-olds of previous generations. This might explain why college students are suddenly asking for more protection and adult intervention in their affairs and interpersonal conflicts.

The second major generational change is a rapid rise in rates of anxiety and depression. We created three graphs below using the same data that Twenge reports in iGen. The graphs are straightforward and tell a shocking story.

Studies of mental illness have long shown that girls have higher rates of depression and anxiety than boys do.¹² The differences are small or nonexistent before puberty, but they increase at the start of puberty. The gap between adolescent girls and boys was fairly steady in the early 2000s, but beginning around 2011, it widened as the rate for girls grew rapidly. By 2016, as you can see in Figure 7.1, roughly one out of every five girls reported symptoms that met the criteria for having experienced a major depressive episode in the previous year. The rate for boys went up, too, but more slowly (from 4.5% in 2011 to 6.4% in 2016).

In Sum

1. The national rise in adolescent anxiety and depression that began around 2011 is our second explanatory thread.
2. The generation born between 1995 and 2012, called iGen (or sometimes Gen Z), is very different from the Millennials, the generation that preceded it. According to Jean Twenge, an expert in the study of generational differences, one difference is that iGen is growing up more slowly. On average, eighteen-year-olds today have spent less time unsupervised and have hit fewer developmental milestones on the path to autonomy (such as getting a job or a driver's license), compared with eighteen-year-olds in previous generations.
3. A second difference is that iGen has far higher rates of anxiety and depression. The increases for girls and young women are generally much larger than for boys and

young men. The increases do not just reflect changing definitions or standards; they show up in rising hospital admission rates of self-harm and in rising suicide rates. The suicide rate of adolescent boys is still higher than that of girls, but the suicide rate of adolescent girls has doubled since 2007.

4. According to Twenge, the primary cause of the increase in mental illness is frequent use of smartphones and other electronic devices. Less than two hours a day seems to have no deleterious effects, but adolescents who spend several hours a day interacting with screens, particularly if they start in their early teen years or younger, have worse mental health outcomes than do adolescents who use these devices less and who spend more time in face-to-face social interaction.
5. Girls may be suffering more than boys because they are more adversely affected by social comparisons (especially based on digitally enhanced beauty), by signals that they are being left out, and by relational aggression, all of which became easier to enact and harder to escape when adolescents acquired smartphones and social media.
6. iGen's arrival at college coincides exactly with the arrival and intensification of the culture of safetyism from 2013 to 2017. Members of iGen may be especially attracted to the overprotection offered by the culture of safetyism on many campuses because of students' higher levels of anxiety and depression. Both depression and anxiety cause changes in cognition, including a tendency to see the world as more dangerous and hostile than it really is.

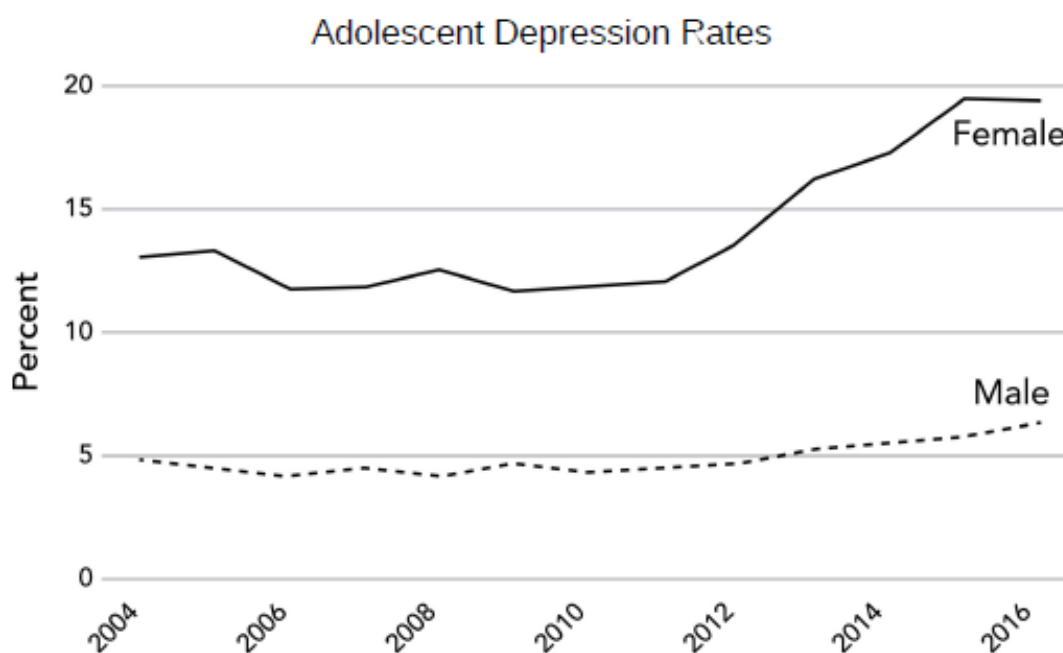


FIGURE 7.1. Percent of adolescents aged 12–17 who had at least one major depressive episode in the past year. Rates have been rising since 2011, especially for girls. (Source: Data from National Survey on Drug Use and Health.)

This theme of teenage girls will pop up later, it's not only a teenage girl problem but it's biased that way for further.

Here is Haidt talking to Lex Fridman about the impact of social media. His point is that “dosage” or screen time, actually doesn't matter, that any use can push child or teenager towards anxiety and depression. Parents, you need to make tough decisions.

[People should quit social media - YouTube](#)



Haidt goes out of his way to mention a book, Free-Range Kids by Skenazy.

[Free-Range Kids: How Parents and Teachers Can Let Go and Let Grow : Skenazy, Lenore](#)

Here are 14 of the chapters (not all of them), I think you get the picture.

1 Know When to Worry

Play Dates and Axe Murderers: How to Tell the Difference

2 Turn Off the News

Go Easy on the “Law and Order,” Too

3 Avoid Experts

Who Knew You Were Doing Everything Wrong? . . . Them!

4 Boycott Baby Knee Pads

And the Rest of the Kiddie Safety-Industrial Complex

5 Don't Think Like a Lawyer

Some Risks Are Worth It

6 Ignore the Blamers

They Don't Know Your Kid Like You Do

7 Eat Chocolate

Give Halloween Back to the Trick-or-Treaters

8 Study History

Your Ten-Year-Old Would Have Been Forging Horseshoes (or at Least Delivering Papers)

9 Be Worldly

Why Other Countries Are Laughing at zee Scaredy-Cat Americans

10 Get Braver

Quit Trying to Control Everything. It Doesn't Work Anyway

11 Relax

Not Every Little Thing You Do Has That Much Impact on Your Child's Development

12 Fail

It's the New Succeed

13 Lock Them Out

Make Them Play—or Else!

14 Listen to Your Kids

They Don't Want to Be Treated Like Babies (Except the Actual Babies, of Course)

All of this might seem like a diversion from the main subject matter, that of Trans-Ideology, but I don't believe so, I think there is direct connection between parenting philosophy within an environment of cultural Safetyism and the impact that has on a child to interact directly with the "risks" of the world which connects with children's anxieties and other psychological disorders which then connects with the tendency of the child to seek refuge in "explanations" culturally provided or leave the child open to direct manipulation.

So, yes, I think it's very related.

The American University Madrassa System

You might be wondering, where does all this come from, can we blame those French thinkers? Is Foucault to blame? No, not really.

It's the American University that has whipped up this dish, and it all really started to take shape and form in the early nineties, so about 40 years ago. The second generation "thinkers" then were building on Neo-Marxist and Post-Modern ideas sourced from the 60s and 70s, but those ideas would not have had the influence they have today without a second and third generation of thinkers and professors in American Universities that have ended up influencing a generation that has then gone out into the world and redesigned that world along those ideas. We are all paying the price today.

The right way to think about the American University as a generator and propagator of these ideas is the way that you already think about The Madras as potentially an indoctrinating breeding ground for Islamic Extremism.

[Madrasas in Pak, Afghanistan becoming breeding grounds for terrorists: UN report | World News - Hindustan Times](#)

[Madrassas In Bangladesh A Breeding Ground For Extremism? – Analysis – Eurasia Review](#)

There is no easy way to say this but Yale, Stanford Harvard and a long list of other "prestigious" universities have become (or at the most generous "include") Madrassas of dangerous indoctrination pumping out brainwashed graduates that are disconnected from what is true and disconnected from reality...they have "their" reality, "their" truth.

Remember, what comes out of the American Madrassa gets exported to the rest of the world, with Australia (America-Lite) being a primary importer.

The first major American story that rang the warning bell about what was happening in American Madrassa's was the Evergreen story of Bret Weinstein and Heather Heying.



<https://youtu.be/FH2WeWgcSMk>

This from a University "Professor" in the doco.

 **Seth Dillon**
@SethDillon

This is brilliant. With simple, dispassionate questions, [@MattWalshBlog](#) reveals that mere curiosity about the truth is enough to offend people who've built their careers and lifestyles on the back of its suppression.



June 2nd 2022

4,191 Retweets 18,419 Likes

https://twitter.com/SethDillon/status/1532208535974645760?s=20&t=mq3WSKhOD1oWzdupN6_L1g

Psychosis

I will forever be grateful to Dr. Mark McDonald for explaining what “psychotic” means. From [United States of Fear](#);

It is not necessary to be a non-functioning psychiatric inpatient to suffer from a delusional disorder. Many people go about their lives working, traveling, and even raising a family while maintaining a delusional thought process. All delusions, though, are by definition irrational. This is what makes them pathologic. The harm they bring to the individual who holds them comes from a diminished capacity to live with reality.

They are also impervious to reason; otherwise, they would simply be wrongheaded opinions that change once confronted with reality. As I tell my patients, learning to live with reality—whatever that may be—is a necessary component of growth and emotional health. Failing in that task bodes a poor outcome for the patient.

When a number of associated delusions organize themselves into an irrational belief system, a state of psychosis can develop. When the man who believes the world is out to get him also insists that his restaurant food is poisoned, that his wife is having a lesbian affair with the neighbor’s daughter, and that his boss is somehow involved in both—he is psychotic.

He may still be able to function quite well despite this, insisting that he be allowed to bring his own food with him when eating out, for example. Those around him may consider his behavior to be odd, but what if every diner in the restaurant brought his own food with him? Would that behavior still be considered odd? What if every restaurant insisted that customers brought their own food with them “to ensure everyone’s safety?” The one patron choosing to instead order from the menu would be seen as irresponsible and even dangerous.

This trans-ideology as it exists today and as it operates today is (yet) another mass psychosis, a contagion that we need to build defences against by first understanding it, so that we can get to work protecting the minds of our young and highly impressionable kids.

When I listen to people like Drs Bowers and Forcier from the documentary (and highlighted late in this eBook), and when I read about Saad’s discussion with a graduate from an elite American university, I know that they too have a psychosis.

I will be generous to them and assume that they believe in everything that they are saying, in that case they have a psychosis which makes them psychotic as they have a number of delusions that have organised themselves to create their irrational belief system...yet they are “leaders in the field”.

Woke Religion: A taxonomy

[Woke Religion: A Taxonomy \(substack.com\)](#)

The link above takes you to a wonderful pdf that has a taxonomy (a scheme of classification) for all the “woke religions”, the spirits as I like to think of them, that are swirling the planet today. What is wonderful about this table is how it lays out the same underlying “chassis” and scaffolding for all these different spirits, from climate change to racism etc. Here is the Trans-Ideology framework:

1. Original Sin: What happened in the past to make things so terrible today

- Sex or gender spectrum reduced to just two sexes and genders

2. Guilty Devils: The people who made things so terrible

- People who view sex as biologically determined
- Opponents of legal requirements to use trans pronouns
- TERFs
- Opponents of allowing trans women athletes to compete with biological women athletes

3. Myths: Creation story

- Trans women or trans men are identical to biological women or biological men
- Violence against trans people is on the rise, disproportionate, and due to being trans

4. Sacred Victims: People who continue to be harmed by original sin

- Trans people
- Nonbinary people

5. The Elect: Those chosen to make things right

- Trans activists
- GLAAD
- HRC
- ACLU

6. Supernatural Beliefs: Beliefs beyond scientific understanding or known laws of nature

- Puberty blockers and surgery can change your biological sex
- A person can immediately change their sex simply by identifying as the opposite sex, or as non-binary

7. Taboo Facts: Things forbidden to say

- Social acceptance of trans people is increasing
- Trans kids and kids with gender dysphoria often benefit from parental involvement
- Trans activism can hurt trans and gender-dysphoric children
- Many children who think they're trans have gender dysphoria
- Many de-transitioners say they wish there had been more obstacles to changing their sex
- Gender dysphoria is sometimes correlated with mental health problems
- There is little evidence that transitioning reduces the risk of suicide



8. Taboo Speech: Words that trigger anger among the elect

- Sex heavily influences gender
- Gender dysphoria is real
- “De-transitioners”

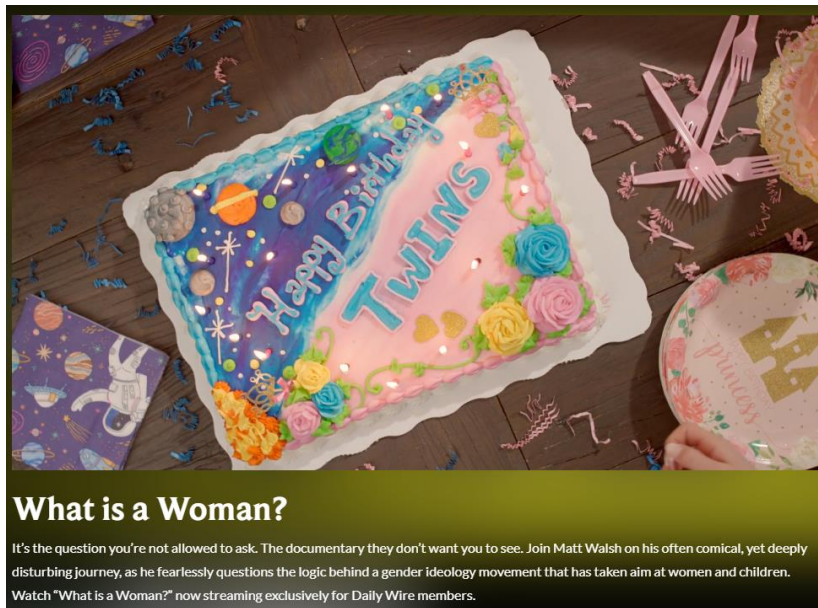
9. Purifying Rituals: Acts perceived to make people innocent of guilt and responsibility

- Announcing one’s pronouns
- Educating people about trans

10. Purifying Speech: Words people use to be perceived as virtuous

- “Cis-”
- “Speech is violence”
- “Silence is violence”
- “Trans women are women”

What is a Woman?



I watched **What Is A Woman?** yesterday, that is the first and best place to start, it was useful even for someone who's paid quite a bit of attention to this subject, but if you are new to the subject matter, it's a perfect crash course.

[What is a Woman? | The Daily Wire](#)

You need to subscribe to The Daily Wire to watch this documentary, but trust me it's worth doing, even if only for 1 month and then cancel. There is no better education on the subject than this documentary at the moment.

If you did nothing but listen to Scott Newgent, who is featured in the doco, you will get your monies worth.



Scott was booted off Twitter but seems to be back on now, you can find him here:

<https://twitter.com/trevoices?s=20&t=nekZV8cbkHP2NKmeTNRxeg>

And here:

[TReVoices.org - Trans Scott Newgent | SCREAMING To Stop Transing Kids](#)

Here are some bullet points of what you will learn in the doco.

[The Daily Wire Comes Under ‘Sustained DDoS Attack’ Intended To ‘Disrupt’ Premiere Of ‘What Is A Woman?’ | The Daily Wire](#)

“[What Is A Woman?](#)” gives viewers a jaw-dropping look at:

- Issues of gender dysphoria confusion that activists use to encourage sex-change operations on children not old enough to vote or drink.
- Transgender (biologically male) athletes’ destruction of girls’ sports and the denial of opportunities for elite female athletes — particularly the case of NCAA women’s swimming champion Lia Thomas.
- The Pronoun Police and the Left’s attempts to use character assassination and censorship to advance a radical agenda.
- Absurd claims about “birthing persons” and that “having a penis doesn’t make one male” — along with other lies and doublespeak used to mainstream radical gender theory.
- The disturbing case of male-registered sex offender Darren Merager, who claims to be female and who is accused of terrorizing under-aged girls by walking around the women’s locker room in a Los Angeles spa with an erect penis.
- The three great casualties of this radical movement:
 1. Women, whose identities are being appropriated and erased by activists who shun science and biology.
 2. Children, who are, at best, being indoctrinated to believe lies about basic facts and, at worst, guided into harmful, irreversible medical “transition” procedures.
 3. And, ultimately, the truth.

Kisin did a good, short, review of it here.

[Review: What Is a Woman? - Konstantin Kisin \(substack.com\)](#)

Abigail Shirer

I got my first deep dive into trans-ideology when I listened to Peterson interview Abigail Shirer, author of [Irreversible Damage](#).



<https://youtu.be/fSKQfATa-1I>

Peterson admitted in the beginning of the interview that he was afraid of doing the podcast as he was worried that YouTube might cancel his account (and its 5m+ subscribers). Thankfully he did the podcast and his channel is still with us. It is a stunning interview and insight into how far this dangerous trans-ideology has infected the government-medical-pharma establishments. Some comments to the podcast:

Natalie K

When i was growing up in the 90's it was all the rage to diagnose children with ADD. Then well-meaning parents would immediately dose them with large quantities of prescription ritalin or adderrall. I was one of those children who got used to a strong stimulant 7 days a week with breakfast from age 7 onward. Let's just say things didn't go well for me later on in life. Now we're handing out hormones and irreversible surgery like halloween candy. What could go wrong?

ramblestation1

I was a tomboy, wanted to be cool like the boys.. if this was happening at that time I would have been so confused. I am a woman, when I went through puberty, I realized that I am a woman that likes boxing and sports and feminine but not the strict feminine stereotype. I am married to a man and have children, and I feel whole. I am so happy that this was not happening when I was a child.

Cancan 2

My sister, who had depression and anxiety, also blamed gender for her personal problems. First, she said she was gay, then she started dressing more masculine and asking for teachers to refer to her with male pronouns. She was also very active in following troubled trans youths and young adults on social media, taking in all of the community's struggles and internalizing them as her own.

Crystal Hull

My son had gender dysphoria for EIGHT years. He is 11 now and finally comfortable being his biological gender. Jordan, your body of work was majorly instrumental in helping me understand his issues, seeing the truth in it, and helping him through it. I'd love to one day tell you our story!

This is a section from the podcast where Shrier is talking about Gender Dysphoria and how it has changed from basically being a diagnosis in very young boys (for all of its history) to very recently becoming a diagnosis mainly in teenage girls.

Well, I actually asked a bunch of you know, I interviewed I conducted nearly 200 interviews for the book and I actually asked a lot of scientists once I had some numbers, what do you call this? What is it when we have 100 year diagnostic history of gender dysphoria and it always afflicted boys and men. OK, and now for the very first time in the last decade, there has been a giant surge in a different population claiming to be gender dysphoria. It has shifted from from onset in young boys and to teenage girls with no childhood history. And it's shifted from men to women. So I asked them, when you have a demographic jump and all of a sudden they are as these teenage girls now the leading demographic.

So these are girls who, as a population, experienced virtually no gender dysphoria throughout history. Suddenly being the leading demographic. I would ask them, what do you call that? Is there a scientific term for this? And they would almost all say, yes, an epidemic.

Said another way, it is a psychological contagion and teenage girls especially are prone to that phenomenon.

JP: You talk about the former about the occurrences at the. Mental Health Institute in ACAM in Toronto.

AS: Yes, that's right, I mean, you had, you know, Ken Zucker truly a giant in the field of gender dysphoria who actually oversaw the authoring of the definition of gender dysphoria. He was fired.

JP: Right, let's talk about Ken Zucker for a moment or two. So as you said, he occupied a very a prestigious position in the world of transgender treatment and I think was universally regarded as the most outstanding and most objective scientist working in this field. I've spoken to him about it on some occasions, not publicly ever. And he struck me as a dedicated clinician and researcher and he advocates, advocated for and still advocates for, as far as I know, **wait and see treatment method** based on the presupposition that most children with gender dysphoria who evince an interest in transforming their body to that of the other sex, should be encouraged to wait, because if a waiting technique, it's not a technique even, I suppose. If waiting is, with sufficient patience, most of the children who manifest these concerns desist, I think it's 70 to 80 percent of them, a certain percentage fairly high, come to the conclusion that they're gay. And it's perhaps the case that that's driving some of their early gender dysphoria, confusion about their identity. And Zucker was fired from CAMH and also pilloried in a variety of newspapers and other publications as a consequence of what was essentially his mainstream stance.

Now, I believe and I haven't followed this up recently, but I believe that he was engaged in a number of court battles with the publications that had gone after him. And I believe that he won his legal cases.

AS: He did. They had to apologize and then they settled with him. I mean, what they really wronged him. I mean, that's what happens when professionals speak out on this issue. And of course, when I say speak out, all they're expressing is concern that there is an

overdiagnosis here. You're seeing young teenage girls who do not seem to have typical gender dysphoria, nonetheless, be immediately fast tracked towards transition.

Here is Zucker supporting Shrier's work;

“In Irreversible Damage, Abigail Shrier provides a thought-provoking examination of a new clinical phenomenon mainly affecting adolescent females—what some have termed rapid-onset gender dysphoria—that has, at lightning speed, swept across North America and parts of Western Europe and Scandinavia. In so doing, Shrier does not shy away from the politics that pervade the field of gender dysphoria. It is a book that will be of great interest to parents, the general public, and mental health clinicians.” - KENNETH J. ZUCKER, PH.D., adolescent and child psychologist and chair of the DSM-5 Work Group on Sexual and Gender Identity Disorders

In a nutshell, it used to be young boys, who mostly grew out of the confusion (no chemicals, no surgery) and those that didn't were discovered mostly that they were gay, which left you with a very small population (stats on this later) that were genuine, long term, gender dysphoric and candidates for intervention. But today, in the space of a decade or so, the “phenomenon” has flipped to mainly teenage girls who are being fast-tracked into chemical intervention (chemical castration, more on this later and radical surgery).

I am reminded by Jung's truism: We don't have ideas, ideas have us.

What is Gender Dysphoria?

From Shrier and Irreversible Damage;

Gender dysphoria—formerly known as “gender identity disorder”—is characterized by a severe and persistent discomfort in one’s biological sex. It typically begins in early childhood—ages two to four—though it may grow more severe in adolescence. But in most cases—nearly 70 percent—childhood gender dysphoria resolves. Historically, it afflicted a tiny sliver of the population (roughly .01 percent) and almost exclusively boys. **Before 2012, in fact, there was no scientific literature on girls ages eleven to twenty one ever having developed gender dysphoria at all.**

In the last decade that has changed, and dramatically. The Western world has seen a sudden surge of adolescents claiming to have gender dysphoria and self-identifying as “transgender.” For the first time in medical history, natal girls are not only present among those so identifying—they constitute the majority.

Why? What happened? How did an age group that had always been the minority of those afflicted (adolescents) come to form the majority? Perhaps more significantly—why did the sex ratio flip: from overwhelmingly boys, to majority adolescent girls?

Note: 0.01 percent is 1 in 10,000. This is actually very optimistic, as Dr. Miriam Grossman, one of the few sane people in *What is a woman?* says that the incidence is between 1 in 30,000 to 1 in 110,000.



But the phenomenon sweeping teenage girls is different. It originates not in traditional gender dysphoria but in videos found on the internet. It **represents mimicry** inspired by internet gurus, a pledge taken with girlfriends—hands and breath held, eyes squeezed shut. For these girls, trans identification offers freedom from anxiety’s relentless pursuit; it satisfies the deepest need for acceptance, the thrill of transgression, the seductive lilt of belonging.

Some small proportion of the population will always be transgender. But perhaps the current craze will not always lure troubled young girls with no history of gender dysphoria, enlisting them in a lifetime of hormone dependency and disfiguring surgeries. If this is a social contagion, society—perhaps—can arrest it.

No adolescent should pay this high a price for having been, briefly, a follower.



I happen to have met a man who transitioned to a woman.

[Daniel Kertcher transitioned to a woman, with support of wife Julie and family | Daily Mail Online](#)

Around 2015 I had some business dealings with the owner of a business, Daniel. It was a brief interaction, and we didn't end up working together. A few years later I heard that he had transitioned to Savannah. I have also had the pleasure of meeting his wife, Julie. I have zero doubt in my mind that Daniel had gender dysphoria, that he was the 1 in tens of thousands and that medical intervention was a blessing and necessity for him.

I cannot begin to imagine the torment of the condition, feeling trapped in someone else's body, the suicidal ideation that would come with it, the terror of being found out, the social prejudice if it became public. The issue is not whether 1 in tens of thousands is the real deal, we know it is, the question is what are all the others? Where have they come from and how are we manufacturing gender dysphoria on scale?

Anyone looking at the subject matter honestly can conclude that the diagnosis has been expended and weaponised beyond any reasonable cost/benefit calculation and that the "standard of care" has been changed without any sound medical basis or long term studies (sound familiar?).

Dr. Littman: Adolescent girls and peer contagion

From **Irreversible Damage**:

Dr. Littman is often accused by her attackers of being “right-wing” or assumed to be a religious Christian. Both characterizations are wrong to the point of being absurd: Dr. Littman has never voted Republican. For years, she and her husband Michael were members of a progressive Humanistic Jewish Congregation. But her truest religion, the one in which she has perfect faith—is Family.

“Was it fun raising kids?” I ask her.

“Oh my God, yes. It was everything,” she says.

The thread of family alienation that ran through the transgender sites and the parent reports troubled Dr. Littman and spurred her interest in the topic. Even after all the hate she has received, the attacks on her reputation, the loss of a job she loved, it’s this worry over families splitting apart that sustains her research interest in this topic. “To see kids turning on their parents... I found that very heartbreaking,” she said. “It’s kind of my worst nightmare.”

Psychologists who study peer influence ask what it is about teenage girls that makes them so susceptible to peer contagion and so good at spreading it. Many believe it has something to do with the way girls tend to socialize. “When we listen to girls versus boys talk to each other, girls are much more likely to reply with statements that are validating and supportive than questioning,” Amanda Rose, professor of psychology at the University of Missouri, told me. “they’re willing to suspend reality to get into their friends’ worlds more. For this reason, adolescent girls are more likely to take on, for instance, the depression their friends are going through and become depressed themselves.”

This female tendency to meet our friends where they are and share in their pain can be a productive and valuable social skill. Co-rumination (excessive discussion of a hardship) “does make the relationship between girls stronger,” Professor Rose told me.

But it also leads friends to take on each other’s ailments. Teenage girls spread psychic illness because of features natural to their modes of friendship: co-rumination; excessive reassurance seeking; and negative feedback seeking, in which someone maintains a feeling of control by angling for confirmation of her low self-concept from others. It isn’t hard to see why the 24/7 forum of social media intensifies and increases the incidence of each. Dr. Littman developed a survey to explore her hunch that gender dysphoria might be one more peer contagion to have hit adolescent girls.

According to the DSM-5, gender dysphoria in children is a condition defined by the presence of at least six of the following symptoms:

1. A strong desire to be of the other gender or an insistence that one is the other gender
2. A strong preference for cross-dressing or simulating [other gender] attire
3. A strong preference for cross-gender roles in make-believe play or fantasy play
4. A strong preference for the toys, games, or activities stereotypically used or engaged in by the other gender
5. A strong preference for playmates of the other gender
6. A strong rejection of toys, games and activities typically associated with birth sex
7. A strong dislike of one’s sexual anatomy
8. A strong desire for the primary and/or secondary sex characteristics that match one’s experienced gender

These are not the sorts of things a small child can easily conceal from parents; five are readily observable behaviors and preferences.

Dr. Littman created a ninety-question survey consisting of multiple choice Likert-type (scale-of-agreement based) and open-ended questions. Data were collected anonymously from 256 parents whose kids had not met the criteria for gender dysphoria in childhood, but had suddenly identified as transgender in adolescence. Among Dr. Littman's findings (in her own words, lightly edited):

- Over 80 percent of the adolescents were natal females, with a mean age of 16.4 years.
- Most were living at home with parents at the time of their transgender announcement.
- The vast majority had had zero indicators of childhood gender dysphoria (in addition to universally failing to meet the six-criteria requirement for child-onset gender dysphoria).
- Almost a third of the adolescents did not seem at all gender dysphoric, according to parents, prior to the adolescents' announcement of being trans.
- **A majority had had one or more psychiatric diagnosis and almost half were engaging in self-harm prior to the onset of the gender dysphoria.**
- Forty-one percent had expressed a non-heterosexual sexual orientation before identifying as transgender.
- Nearly half (47.4 percent) had been formally assessed as academically gifted.
- **Nearly 70 percent of the teenagers belonged to a peer group in which at least one friend had also come out as transgender. In some groups, the majority of the friends had done so.**
- Over 65 percent of teens had increased their social media use and time spent online immediately prior to their announcement of transgender identity.
- Among parents who knew their children's social status, over 60 percent said the announcement brought a popularity boost.
- Over 90 percent of the parents surveyed were white.
- More than 70 percent of the parents had earned bachelor's or graduate degrees.
- Over 85 percent of parents reported supporting the right of gay couples to marry.
- Over 88 percent of parents surveyed reported being supportive of transgender rights.
- Nearly 64 percent of parents had been called "transphobic" or "bigoted" by their children for such reasons as: disagreeing with the child about the child's self-assessment of being transgender, recommending that the child take more time to figure out if the child's feelings of gender dysphoria persisted, calling their child by the wrong pronouns, telling their child that hormones or surgeries were unlikely to help, calling their child by his or her birth name, or recommending that the child work on other underlying mental health issues before undergoing medical transition.
- Fewer than 13 percent of the parents believed that their adolescents' mental health had improved after transgender identification. Over 47 percent reported that mental health had worsened.

Dr. Littman never suggested that gender dysphoria doesn't exist or that these girls didn't have it. What she hypothesized was that these adolescents' gender dysphoria had an atypical etiology, that is, a set of causes that differed from the classic diagnosis. Unlike traditional gender dysphoria, this one seemed encouraged and intensified by friends and social media.

But what part of this, exactly, was contagious? Dr. Littman hypothesized three things (again, I have lightly edited her words):

- 1. the belief that non-specific symptoms should be perceived as gender dysphoria and that their presence is proof of being transgender*
- 2. the belief that the only path to happiness is transition*
- 3. the belief that anyone who disagrees with the self-assessment of being transgender or opposes the plan for transition is transphobic, abusive, and should be cut off*

She theorized that the drive to transition might represent a "maladaptive coping mechanism" for dealing with legitimate stressors and strong emotions. She considered the possibility that this atypical strain of gender dysphoria might itself constitute a form of intentional self-harm. She stated expressly that her analysis did not imply that no adolescents would benefit from transition. Instead, she concluded merely that "not all [adolescents] presenting at these vulnerable ages are correct in their self-assessment of the cause of their symptoms."

Never before had gender dysphoria sufferers "come out" as trans based on the encouragement of friends or following self-saturation in social media. Never before had identification as "transgender" preceded the experience of gender dysphoria itself.


Two weeks after Dr. Littman's study was published, in response to activist outcry, PLoS One announced it would conduct a post-publication review of her paper and that a "correction" would be forthcoming. Dr. Littman was subjected to a battery of revision. "A lot of Ben and Jerry's ice cream happened along the way," she told me. "It was pretty stressful." In March 2019, seven months after the initial publication, PLoS One issued Littman's "correction."

None of her results had changed.

Lupron: Pharma and the business of Gender Dysphoria

Scott Newgent from “What is a woman?” makes the point that each child “convinced” generates \$1.3m (USD) to Pharma.



Best selling LGBT children's author Matt Walsh 
@MattWalshBlog

...

Scott Newgent is the hero of the film. Such a remarkable contrast between the raw openness and honesty in this interview and the evasiveness and defensiveness from the “experts” I spoke to.

Watch the full film at WhatIsAWoman.com



2:03 AM · Jun 3, 2022 · Twitter for iPhone

3,183 Retweets 473 Quote Tweets 12.1K Likes

https://twitter.com/MattWalshBlog/status/1532392581568638978?s=20&t=IFCm_zabZoj5ijQz64N1DQ

Let’s pause for a minute, are you surprised that there is a financial component to this story?

Are you surprised that there is Pharma involved in this story? This is June 2022 and if you have even partially woken up during the last 2.5 years, then finding out that Pharma have a stake in this game shouldn’t come as any surprise.

[“Blockers”: Chemical castration](#)

Wherever Pharma has a pay day, they will reinvest as far up stream as they can get to create the “science” and the conditions and the narratives and the beliefs necessary to make sure that whatever trickles, or pours, down does so into their open mouth.

[Gender dysphoria: a modern pandemic? | The Spectator Australia](#)

The High Court subsequently ruled in 2020 that children under 16 were not able to give consent. Prior to this, children as young as 8 had been given hormone blockers, with the potential for permanent sterility, moving on invariably to take cross-sex hormones at puberty.

With the knowledge that three-quarters, left untreated, change their minds at puberty, and as many as half presenting with mental disorders, it is staggering that this situation has been allowed to occur. The growth in gender reassignment surgery, which usually follows, is even more disturbing, with operations increasing in Europe and America with 10,000 to 15,000 having had surgery in France alone.



We are starting to witness the blowback, with those permanently disfigured looking for legal redress.

Australia has also seen an explosion in numbers referred to gender clinics. In 2003, the Melbourne Royal Children's hospital had **only a single case, they now have 200**.

Studies from the US have suggested that as many as 10 per cent of students now believe themselves to be transgender, this for a condition that as recently as 20 years ago, was thought to occur in 2 or 3 per 100,000. The ongoing concern is that medical and surgical interventions may turn 'a healthy child into a patient for life'.

And this from 2018

[Transgenderism Is Just Big Business Dressed Up In Civil Rights Clothes \(thefederalist.com\)](#)

Transgenderism, a purported civil rights movement, now intersects at every juncture of the global marketplace. It is hard to remember it came out of the medical industrial complex as a term for the most intense body dysphoria. Children are being prescribed puberty blockers and cross-sex hormones, sterilized, and groomed into lifelong medical patients and consumers in more than [50 U.S. gender clinics](#) that weren't here ten years ago. It's all because of transgenderism and that people fighting to live free of discrimination are hailed as heroes and celebrities for feeling alienated from their own biology.

[Gender ideology a boon to Big Pharma and threat to parental rights \(nypost.com\)](#)

Actually, that bit about the latest science isn't quite right. Medroxyprogesterone acetate, a common drug in "gender-affirming therapy," **has long been used to chemically castrate sex offenders**.

Another widely used medication is Lupron, a controversial hormone blocker. Lupron was initially developed to lower testosterone levels in men with prostate cancer, effectively chemically castrating them. It's now used as a puberty blocker in the booming business of "transitioning" children.

Lupron manufacturer AbbVie made \$726 million on the drug alone in 2018. AbbVie has joined other major pharmaceutical companies in lobbying to keep drug prices high while virtue-signaling about diversity and inclusion.

Transgender people require lifelong medical support, making them ideal customers for the health-care industry, and the well-documented phenomenon of "[peer contagion](#)" - kids pressuring each other into thinking they're all trans — ensures an endless supply of consumers.

Not that this should come as any surprise, but there is a Lupron Class Action in the US.

[What You Should Know About Lupron Class Action Lawsuit - Law Answer](#)

BrittanyMay 2, 2022, 6:36 pm

I was on lupron when I was 7 or 8 because of precocious puberty and when I was 19 I was diagnosed with hypothyroidism and have had trouble getting pregnant, luckily I was able to get pregnant with my 11 year old son and my unborn son I am currently pregnant with. Lupron was horrible, the side effects were just down right horrible.

L.MccallJuly 27, 2021, 5:08 am

My daughter was prescribed Lupron for precocious puberty. She got the injection and year or 2 later diagnosed with thyroid cancer.

[The Lupron Money Trail- Hormones Matter](#)

The [Kaiser Report](#) identified that in a 2 year period of time Lupron's manufacturer, AbbVie, had paid \$157,066 to the lead investigator of Lupron's precocious puberty clinical trials, Dr. Peter Lee (a pediatric endocrinologist). According to ProPublica's "Dollars for Docs", for the years [2015](#), [2014](#), and [2013](#), Lee received from AbbVie a total of \$102,325 for "Promotional Speaking/Other" for Lupron. (Payments by AbbVie to Lee for Lupron related "Consulting", "Travel and Lodging" and "Food and Beverage" were not tallied, but figures are available at 'Dollars for Docs'/ProPublica for each of those 3 years.)

The Kaiser Report also identified that both AbbVie and investigator Lee did not answer specific questions about the *omission* of serious adverse events (a bone disorder and a pathological fracture) in a key pediatric clinical trial of Lupron. How is this acceptable? If the drug company and lead clinical trial investigator will not answer questions about adverse events in the trial – who will?

In the drug company's campaign to promote Lupron for precocious puberty (entitled "Too Soon"), they claimed (in 2003) "[t]here are [almost 5,200 children](#) who have central precocious puberty and grow up too soon" (see Question/Answer # 10). Lee was [a member](#) of the editorial board of "Too Soon", and [Lee is a consultant for AbbVie](#), and "has received payment for the [development of educational materials](#) by AbbVie".

It goes without saying that during a promotion of something (especially if one is being monetarily compensated for doing so), such promotion usually results in a loyalty to, and liking for, 'the thing'. And especially so if 'the thing' is a ["cash cow"](#) (stated in a 'CafePharma' post of August 8, 2011 @ 3:47 pm).

In 28 months (August 2013 through December 2015), AbbVie made [69,173 payments](#) related to Lupron for [a sum of \\$16.9 million to 24,910 doctors](#), and Lee came in [second place in 'top doctors](#) receiving payments related to Lupron'.

Lupron: On Infertility

From **Irreversible Damage**:

Katherine began reading everything she could about Lupron. Originally used in cancer treatment and in kids with precocious puberty, it is now prescribed off-label to prepubescent kids to halt the onset of puberty before beginning cross-sex hormones (typically administered up to two years later). The goal is to block the secondary-sex characteristics that would make eventual “passing” as the opposite sex more difficult if one continues on the path to medical transition.

But the more Katherine read, the more disturbed she became. When the medical papers she read cited studies, she tracked down those and read them, too. “So first of all, the studies show that when a kid is put on puberty blockers, almost 100 percent will go on to do cross-sex hormones.”

This is true, though the reasons are not entirely clear. One possibility is that a young person would only go on puberty blockers in the first place if she was reasonably certain of wanting to lead a transgender life. Another is that, after years of socially identifying as a person of the opposite sex, the social costs of taking it all back are quite steep. It’s hard to change your mind about something you’ve been insisting on for so long—even if you might wish you could.

But it was the next thing she learned that sent Katherine spinning. “When you’ve stopped puberty with puberty blockers and go straight to cross-sex hormones, you absolutely guarantee that you will be infertile.”

When the gender clinicians pushed Katherine to start her preteen child on hormone blockers, they were proposing that she put Maddie on a path toward infertility. Her faith in the gender therapists fell apart.

Katherine could not understand how psychologists would encourage this, how doctors would allow it, or why medical professional standards would permit parents to consent to eliminating such a vital human capacity on behalf of their minor children. And yet, right in front of her, schools were encouraging it, parents were going along with it, the media was celebrating it, and everyone was acting as if this were perfectly kosher. It was enough to make her think she might be losing her mind.



Lupron: Chemical Castration turned pubertal “pause button”

From **Irreversible Damage**:

Remember “Katherine Cave”? She’s the mom whose daughter came out as “trans” at twelve after a school presentation, and Katherine—not knowing what else to do—took her daughter to a gender clinic. One of the first things the counselors pushed, as an essential first step, was that her daughter be put on “puberty blockers.”

Puberty is a sweeping metamorphosis. If your kid’s pretty sure she’s going to want to be a trans man, why make her travel there by way of breasts, hips, and menses? Gender doctors like to insist that halting puberty at onset (**typically, ages eight to thirteen**) is a **neutral intervention, or “pause button,”** since if the blockade is withdrawn, normal puberty should resume. Like freezing your eggs, blocking puberty is presented as simply allowing a young woman to put nature on hold while keeping her options open.

Once used in chemical castration of sex offenders, Lupron is the go-to puberty blocker, FDA-approved to halt precocious puberty. If your four year-old daughter is spontaneously developing breasts, Lupron shuts off part of her pituitary to slow puberty down, until her brain and peers catch up.

What the FDA has not approved is using Lupron to halt normal puberty in anyone—transgender-identified or otherwise. In general, doctors don’t like to interrupt healthy endocrine signaling based on the say-so of minors, and gender dysphoria has no observable diagnostic criteria. There are as yet no reliable studies that show Lupron is safe for these kids. All available studies note the “low quality” of evidence, or contain similar caveats. Nevertheless, endocrinologists have been administering Lupron “off-label” to gender dysphoric minors in ever-rising numbers for a decade.

But is Lupron actually a neutral, low-risk intervention? Imagine you’re a fifteen-year-old girl. But unlike all of your friends, you have no pubic hair; you’ve never had a period; you have no breasts; you’ve never experienced orgasm. In terms of size and function, you have the vagina of a prepubescent girl. Sound like a neutral intervention?

We wouldn’t consider a drug that stunted your growth in height and weight to be a psychologically neutral intervention—because it isn’t one.

No surprise, then, that in a clinical trial 100 percent of children put on puberty blockers proceeded to cross-sex hormones. That is a stunning statistic, especially considering that when no intervention is made, roughly 70 percent of children will outgrow gender dysphoria on their own. Far from being “neutral,” the psychosocial effects seem closer to radical.

Suppression of normal bone density development and greater risk of osteoporosis, loss of sexual function, interference with brain development, and possibly suppressing peak IQ are all risks puberty blockers carry. The degree and level of certainty of each is anyone’s guess, since we have no good long-term studies on children who were given puberty blockers for gender dysphoria. What we do know is that these risks increase dramatically if an adolescent moves straight from puberty blockers to cross-sex hormones. In that case, infertility is almost guaranteed—and sexual development and potential for orgasm may be foreclosed for good.

Adolescent and adult endocrinologist Dr. William Malone is one of the country’s most outspoken critics of administering puberty blockers and cross-sex hormones to minors. He told me that the risks of shutting off the pituitary without observable medical justification are dire. “After a certain period, basically the way to think of this is that the system ‘goes to sleep’ and at some point it may not wake up,” he said.

It's worth noting how great a departure this is from normal medical protocol. When we allow parents to consent to medical procedures for teens or tweens, it is typically to permit doctors to save, cure, or alleviate an observable medical problem. But in the singular instance of transgender medicine, we allow a parent to consent to intervention that halts normal, healthy biological functioning—essentially, introducing the “disease state” brought on by a pituitary tumor—all based on self-reported mental distress.

From **Trans** (by Helen Joyce)

[TRANS: The Sunday Times Bestseller : Joyce, Helen: Amazon.com.au: Books](#)

Doctors are usually cautious when treating children, especially when interrupting normal physical development. But very surprisingly, puberty blockers have never been put through clinical trials for use in gender medicine, and are not licensed by their manufacturers for this purpose. Their main uses are to treat hormone-related conditions in adulthood, in particular endometriosis and prostate cancer, **and to ‘chemically castrate’ sex offenders**. The two studies that looked at what happened when they were used to delay puberty in animals suggested this caused defects in spatial memory and increased behaviours thought to be **analogous to depression in humans**.

Their only licensed paediatric use is to treat ‘central precocious puberty’, a rare condition in which children’s bodies mature far earlier than normal. This causes major physical and social issues, but even so, there are concerns that the side effects are unacceptable. **The drugs stop calcium being laid down in bones**, and studies suggest a significant drop in IQ. American women treated in childhood for precocious puberty are suing the manufacturer of one puberty blocker, Lupron, alleging that it caused brittle bones, mental problems and chronic pain.

Whether blockers cause such direct harms will not be known for years. But there is no doubt about an indirect harm that will be suffered by any children who start taking them young enough to avoid puberty altogether: sterility. Cross-sex hormones cause the secondary sex characteristics of the desired sex to develop – breasts, beards and so on – but only a person’s own sex’s hormones can cause their ovaries or testicles to mature.

Hansel and Gretel

When watching *What is a woman?* you will come across two of its leading insane characters.



https://twitter.com/MattWalshBlog/status/1532047084865593347?s=20&t=mq3WSKhOD1oWzdupN6_L1g



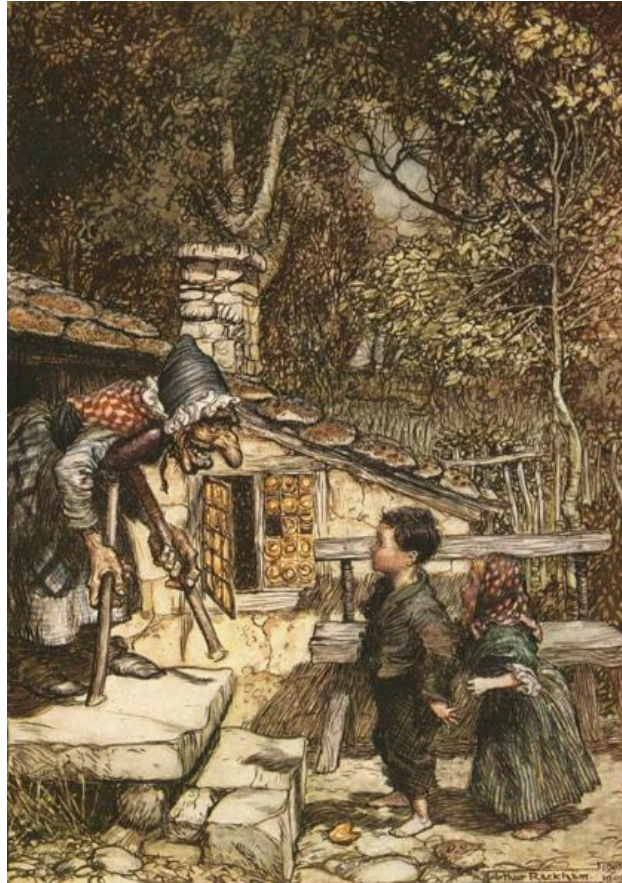
https://twitter.com/MattWalshBlog/status/1532347722111516672?s=20&t=mq3WSKhOD1oWzdupN6_L1g

Over the last two years I have thought more and more about the Hansel and Gretel story, and its meaning, especially as it relates to the “devouring feminine”.

Both Bowers and Forcier are the modern day embodiment of the cannibal “old woman” in Hansel and Gretel.

[Hansel and Gretel \(americanliterature.com\)](#)

"We will bake first," said the old woman, "I have already heated the oven, and kneaded the dough." She pushed poor Gretel out to the oven, from which flames of fire were already darting. "Creep in," said the witch, "and see if it properly heated, so that we can put the bread in." And once Gretel was inside, she intended to shut the oven and let her bake in it, and then she would eat her, too.



While we are on the subject of fairy tales here is a therapist (a sane one) from the documentary talking about how teachers cannot question it is a student identifies as an animal (yep, you read that right).

https://twitter.com/MattWalshBlog/status/1533250360168652800?s=20&t=mq3WSKhOD1oWzdupN6_L1g

“St George in retirement” syndrome

I got this from Douglas Murray in his book [The Madness of Crowds](#). It well explains how organisation that set out to achieve something, once achieved cannot simply pack up and retire. They need to find new and ever expanding causes. The initial causes might have been true but the ever expanding list of new causes is not.

What everyone does know are the things that people will be called if their foot even nicks against these freshly laid tripwires. ‘Bigot’, ‘homophobe’, ‘sexist’, ‘misogynist’, ‘racist’ and ‘transphobe’ are just for starters. The rights fights of our time have centred around these toxic and explosive issues. But in the process these rights issues have moved from being a product of a system to being the foundations of a new one. To demonstrate affiliation with the system people must prove their credentials and their commitment. How might somebody demonstrate virtue in this new world? By being ‘anti-racist’, clearly. By being an ‘ally’ to LGBT people, obviously. By stressing how ardent your desire is – whether you are a man or a woman – to bring down the patriarchy.

And this creates an auditioning problem, where public avowals of loyalty to the system must be volubly made whether there is a need for them or not. It is an extension of a well-known problem in liberalism which has been recognized even among those who did once fight a noble fight. It is a tendency identified by the late Australian political philosopher Kenneth Minogue as **‘St George in retirement’ syndrome. After slaying the dragon the brave warrior finds himself stalking the land looking for still more glorious fights. He needs his dragons. Eventually, after tiring himself out in pursuit of ever-smaller dragons he may eventually even be found swinging his sword at thin air, imagining it to contain dragons.** If that is a temptation for an actual St George, imagine what a person might do who is no saint, owns no horse or lance and is being noticed by nobody. How might they try to persuade people that, given the historic chance, they too would without question have slain that dragon?

In the claims and supporting rhetoric quoted throughout this book there is a good deal of this in evidence. Our public life is now dense with people desperate to man the barricades long after the revolution is over. Either because they mistake the barricades for home, or because they have no other home to go to. In each case a demonstration of virtue demands an overstating of the problem, which then causes an amplification of the problem.

But there is more trouble in all of this, and it is the reason why I take each of the bases of these new metaphysics not just seriously but one by one. With each of these issues an increasing number of people, having the law on their side, pretend that both their issue and indeed all these issues are shut down and agreed upon. The case is very much otherwise. The nature of what is meant to be agreed upon cannot in fact be agreed upon. Each of these issues is infinitely more complex and unstable than our societies are currently willing to admit. Which is why, put together as the foundation blocks of a new morality and metaphysics, they form the basis for a general madness. Indeed a more unstable basis for social harmony could hardly be imagined.

This syndrome plays out in many ways and it a window into understanding the ever increasing letters of [LGBTQIA+](#), I guess they just decided to stick a plus sign at the end to leave it open ended. Hardly anyone understands what all these letters stand for, let alone the policies that each of these letters campaigns for. The T alone is the subject of this stack, my longest so far I think, and frankly I am just scratching the surface.



Which brings me to the Mardi Gras;

[Who we are - Sydney Gay and Lesbian Mardi Gras](#)

When people go and celebrate it, they sort of know that it “proudly provides a platform for our LGBTQIA+ communities”, they do not understand that the “T” for example advocates for increasing gender confusion in little kids, then advocates for “affirming” that confusion, and then advocates for providing chemical castration and mastectomies to these confused kids. So, all these people celebrating Mardi Gras have no idea what is within each letter. Don’t get me started in the “Q”. Blissful ignorance. Remember that steak in The Matrix?

[Gender dysphoria: a modern pandemic? | The Spectator Australia](#)

Three-quarters of these gender issues in children are female to male, whereas in the adult group the sex ratio is for some reason reversed, with an incidence of 0.005-0.014 per cent in males and 0.002-0.003 per cent in females; the reason for this difference is unclear. Surveys of adults from America suggest a higher range, between 38 and 500 per 100,000 (0.38 to 0.5 per cent), with as many as 1 in 4 seeking surgery. In Europe, 1 per 30,000 adult males seek gender reassignment surgery and 1 per 100,000 females.

Despite these tiny numbers, the LGBTQ+ lobby has already invaded the debate by suggesting the whole population should adjust personal pronouns to accommodate gender fluidity. They go further by demanding that the ability to identify as a different sex should be determined by the individual, without medical or legal input, a situation courting disaster.

Victoria (Australia)

Victoria is the wokest State so far, but others will follow suit. This contagion has plenty of steam within it. We have Labor (hard left) government now at federal level and every state (except NSW). The capacity to hold back this tide, by using the tools of elected government, is currently inadequate. We may need several election cycles to balance the pendulum in this country.

[Transgender law reform to allow Victorians to change birth certificate gender without surgery - ABC News](#)

[Resources in Victoria - Parents of Gender-Diverse Children \(pgdc.org.au\)](#)

[Victorian Equal Opportunity and Human Rights Commission | Victorian Equal Opportunity and Human Rights Commission](#)

Here is the Federal government providing its support for gender confirmation surgery.

[Gender confirmation surgery | healthdirect](#)

As you can see from the What is a woman documentary, a “gender dysphoria” diagnosis has become big business and as you can see from the Australian government site, they will pick up the tab. So, again, we have an industry-government collaboration in “supporting” and promoting a “standard of care” that has thrown out the tried and tested “wait and see” approach immediate chemical and surgical intervention.

Based on the recent *Victorian Change or Suppression (Conversion Therapy) Prohibition Practices Act 2021* there are risks to parents who do “not affirm” their child’s “condition”. I expect this to spread to other States.

[Not affirming transgender children is family violence in Victoria - Human Rights Law Alliance \(hrla.org.au\)](#)

[Parents who don't affirm kids' sexual confusion could be jailed for 10 years under new Australian state law - LifeSite \(lifesitenews.com\)](#)

And this from our Northern Territory

[Gender dysphoria: a modern pandemic? | The Spectator Australia](#)

The current trend of gender education at an earlier age is likely to produce more candidates for gender confusion, leading to hormone therapy or worse. That this could possibly happen without parental input in those who are below the age of consent, should set alarm bells ringing. The recent Northern Territory plan to treat those identifying as transgender without parents’ consent, at as young as 14, has taken the debate to another level.

Mark Latham in NSW (Australia)

Nobody has done more to try to stave off the gender fluidity agenda in NSW than Mark Latham. He has been fighting, almost singlehandedly against the Leviathan.

[Mark Latham vows to oppose rainbow activism in NSW schools - Binary](#)

There has been an ongoing battle in NSW where the Safe Schools “anti-bullying” program acted as trojan horse to introduce gender fluidity ideology. This was dropped in NSW in 2017.

[Safe Schools program ditched in NSW, to be replaced by wider anti-bullying plan - ABC News](#)

But the NSW education department insists on finding a way to get this stuff into young kids.

[NSW Education Department has been caught out. Again. - Binary](#)

Binary spokeswoman, Kirralie Smith, said all parents should be concerned.

“The government has done little to protect children from exposure to harmful ideological programs. Parents send their children to school for an education, not indoctrination. It is unacceptable that the Education Department is encouraging and promoting such material against the explicit demands of parents in NSW.”

And recently the NSW government has said it will not support the Latham’s bill to keep this stuff out of our schools.

[NSW government rejects Mark Latham's anti-trans education bill \(qnews.com.au\)](#)

Most parents of NSW kids don’t know this battle is going on and those that do know, have no idea what it’s about. They think Latham is a “transphobe” and that a few extra “harmless pro-nouns” cannot hurt.

They have no idea what gender dysphoria is, that it can be manufactured, that it can be “affirmed” by the medical establishment, that they could get into trouble if “they don’t also affirm” and that medical intervention including chemical castration and mastectomies are not off the table if their child gets caught up in this “manufactured psychological contagion”.

Dr. Toby Rogers and my thoughts on mass vaccination

I stumbled onto Rogers some time back when he wrote this wonderful stack on autism in Sept 2021.

https://tobyrogers.substack.com/p/the-political-economy-of-autism?r=lo15j&s=r&utm_campaign=post&utm_medium=web

Rogers is the ONLY person I know to discuss the consequences of societal vaccine injury. For example here:

https://tobyrogers.substack.com/p/car-radio-by-twenty-ne-pilts-as-a?r=lo15j&s=r&utm_campaign=post&utm_medium=web

So what does that new culture look like? It's brilliant (because lot of people on the spectrum are absolutely brilliant), autistic (social relations are hard, meltdowns are frequent and long), and fascistic (not quite sure why, but something about both the extreme need for order and an excited energy that is untethered from traditional ethics seems to be part of what happens with society-wide vaccine injury).

I could be completely wrong about all of this. But ask yourself the question — why are both major political parties in the U.S. drawn to fascism right now? I think it's because there is a huge market for it, neurologically, in the population, because so many people, particularly those 35 and younger, are vaccine-injured. Over the coming decade autistic authors, autistic singers, and autistic politicians, to name a few (all high-functioning of course) will be in great demand.

So, my question is: What is the likelihood that there is a connection (obviously not sole connection) between the 72 vaccine doses that US kids get (40+ in Australia) and their psychological health and their propensity to latch onto gender fluidity as an explanation for their anxieties and mental health problems?



Detransitioning

From **When Harry became Sally** (NOT on Amazon)

[When Harry Became Sally: Responding to the Transgender Moment by Ryan T. Anderson, Paperback | Barnes & Noble® \(barnesandnoble.com\)](#)

Crash rejects the idea that transitioning is the only solution, even for severe dysphoria, since it doesn't fix the "root problems," and it may actually deepen the alienation from one's body. The process of detransition requires learning how to deal with the underlying issues that transitioning did not resolve. It's a long process, she says, but worth the effort.

Detransitioning is as much about facing trauma as it is about figuring out how to live in an altered body. Transitioning was all about trying to get away from what hurt us and detransitioning is finally facing that and overcoming it. It's about making connections between how other people have treated us and how we've seen ourselves and our bodies. It's about remembering terrible, scary, upsetting memories and integrating them. It's about making sense of what happened, giving up old explanations that no longer work and coming up with new ones that fit our experience better. In the process we often reject much of what we believed when we were trans because it no longer suits us or seems true. It's about understanding how the society around us has influenced us and shaped how we thought, felt and came to view ourselves. It's not just figuring out how specific people hurt us but how our culture has restricted and attacked us and all women. It's about connecting both with other women who transitioned and then stopped and to women in general. Feeling like we couldn't be women, being cut off from other women is one of our deepest wounds and healing it means finally finding common ground and community with other women.

Detransitioning is learning to accept and be fully present in your body. It is about finding different ways to cope with and heal from dysphoria. Transitioning is not the only viable treatment for dysphoria, however severely it may manifest. We have learned this through experience and often with great difficulty and sacrifice. And many of us found that transitioning made our dysphoria worse instead of improving it. Many of us found some relief through changing our bodies but found even greater peace and happiness coming to accept our bodies as female. I was very satisfied with the physical changes caused by testosterone. They never felt wrong. But changing my body did not get at my root problems, it only obscured them further. My actual problems were trauma and hating myself for being a woman and a lesbian. Since I started dealing with my trauma and finding ways to be more present in my body, I have felt a lot more joy, strength and power than I ever felt taking t [testosterone]. Learning to accept the body and fully inhabit it is an effective way to treat many people's dysphoria. Many detransitioned and dysphoric women have found ways to re-connect with our bodies, such as meditating, yoga, working out, exercising or doing physical labor, and we combine these practices with working through the trauma that caused dissociation from the body in the first place. It is often a long and difficult process that takes years but the rewards are well worth it.

The story of Nathan Verhelst

Here is Nathan's story from Douglas Murray and **The Madness of Crowds**;

Every age before this one has performed or permitted acts that to us are morally stupefying. So unless we have any reason to think we are more reasonable, morally better or wiser than at any time in the past, it is reasonable to assume there will be some things we are presently doing –possibly while flushed with moral virtue – that our descendants will whistle through their teeth at, and say ‘What the hell were they thinking?’ It is worth wondering what the blind spots of our age might be. What might we be doing that will be regarded by succeeding generations in the same way we now look on the slave trade or using Victorian children as chimney sweeps?

Take the case of Nathan Verhelst, who died in Belgium in September 2013. Nathan had been born a girl and was given the name Nancy by her parents. She grew up in a family of boys and always felt that her parents preferred her three brothers to her. There was certainly plenty that was strange about the family. After Verhelst's death his mother gave an interview to the local media in which she said, ‘When I saw “Nancy” for the first time, my dream was shattered. She was so ugly. I had a phantom birth. Her death does not bother me. I feel no sorrow, no doubt or remorse. We never had a bond.’

For reasons that this and other comments make clear, Nancy grew up feeling rejected by her parents and at some stage settled on the idea that things might be better if she was a man. In 2009, in her late thirties, she began taking hormone therapy. Shortly after this, she had a double mastectomy and then a set of surgeries to try to construct a penis. In total she had three major sex-change operations between 2009 and 2012. At the end of this process ‘Nathan’, as he then was, reacted to the results. ‘I was ready to celebrate my new birth. But when I looked in the mirror I was disgusted with myself. My new breasts did not match my expectations and my new penis had symptoms of rejection.’ There was significant scarring from all the surgery Verhelst had undergone, and he was clearly deeply unhappy in his new body. There is a photograph of Verhelst as ‘Nathan’ on a sparsely populated Belgian beach. He is squinting from the sunlight as he looks into the camera. Despite the tattoos covering part of his chest the scarring from the mastectomy is still visible. In a photo from another occasion he is lying on a bed in shoes and a suit, looking uncomfortable in his body.

The life that Nathan had clearly hoped for had not come about, and depression soon followed. So in September 2013, at the age of 44 – only a year after the last sex-change procedure – Verhelst was euthanized by the state. In his country of birth euthanasia is legal and the relevant medical authorities in Belgium agreed that Verhelst could be euthanized due to ‘unbearable psychological suffering’. A week before the end he held a small party for some friends. Guests reportedly danced and laughed and raised glasses of champagne with the toast ‘To life’. A week later Verhelst made the journey to a university hospital in Brussels and was killed by lethal injection. ‘I do not want to be a monster,’ he said just before he died.

It is not hard to imagine future generations reading such a story in a spirit of amazement. ‘So the Belgian health service tried to turn a woman into a man, failed and then killed her?’ Hardest of all to comprehend might be the fact that the killing, like the operations that preceded it, was performed not in a spirit of malice or of cruelty, but solely in the spirit of kindness.

Of course the case of Verhelst is unusual in all sorts of ways. But it is worth focusing on precisely because some of the lessons it raises are reflected upon so little. What is trans? Who is trans? What makes someone trans? Are we sure that it exists as a category? And if so, are we certain that attempting to turn somebody physically from one sex to another is always possible? Or even the best way to deal with the conundrum this presents?

Among all the subjects in this book and all the complex issues of our age, none is so radical in the confusion and assumptions it elicits, and so virulent in the demands it makes, as the subject of trans. There is no other issue (let alone one affecting relatively few people) that has so swiftly reached the stage whereby whole pages of newspapers are devoted to its latest developments, and where there is a never-ending demand not just to change the language but to make up the science around it. The debate around gay rights moved too swiftly for some people, but it still took decades to go from acceptance that homosexuality existed and might need to be accommodated to the position where gay marriage was legalized. By contrast trans has become something close to a dogma in record time. Conservative ministers in the British government are campaigning to make it easier for people to change their birth certificates and alter their sex at birth. A local authority has issued educational guidelines suggesting that in order to make transgender children feel more accepted, teachers in primary schools should tell children that 'all genders', including boys, can have periods. And in the US a Federal bill was passed in May 2019 which redefines sex to include 'gender identity'.

Everywhere the feeling is the same. Among the crowd madnnesses we are going through at the moment, trans has become like a battering ram – as though perhaps it is the last thing needed to break down some great patriarchal wall. The British gay rights group Stonewall is back with a new version of its old gay rights T-shirt. This one says, 'Some people are trans. Get over it.' But are they? And should we?

On Intuition

As for Safetyism, we were lucky to come across Gavin De Becker, [The Gift of Fear](#), when the kids were very young and the thing that stuck with us and impacted our parenting style for years to come was that the best defence for a child against the dangers of the world was a “working and trustworthy intuition” and to develop that intuition you had to allow the child the opportunity to develop it...which led us to encourage the kids to go up and talk to strangers...the exact opposite of what conventional parenting tells you to do “stranger danger”. It is classic fast thinking vs slow thinking dynamics. Our 4 and 5 year old kids would walk around our quiet street, by themselves and knock on doors and introduce themselves and see if there were any kids inside that wanted to play...let’s just say that we were the “weird” family in the street. They have turned out beautifully and very well equipped to handle and manage risk...I wouldn’t change a thing.

THE TECHNOLOGY OF INTUITION

“Technology is not going to save us. Our computers, our tools, our machines are not enough. We have to rely on our intuition, our true being.” - Joseph Campbell

“I walked into that convenience store to buy a few magazines and for some reason, I was suddenly... afraid, and I turned right around and walked out. I don’t know what told me to leave, but later that day I heard about the shooting.”

Airline pilot Robert Thompson is telling me about dodging death right here on the ground. I ask him what he saw, what he reacted to.

“Nothing, it was just a gut feeling. [A pause.] Well, now that I think back, the guy behind the counter looked at me with a very rapid glance, just jerked his head toward me for an instant, and I guess I’m used to the clerk sizing you up when you walk in, but he was intently looking at another customer, and that must have seemed odd to me. I must have seen that he was concerned.”

When free of judgment, we inherently respect the intuition of others. Sensing that someone else is in that special state of assessing hazard, we are alerted, just as when we see the cat or dog awaken suddenly from a nap and stare intently into a dark hallway.

Thompson continues. “I noticed that the clerk was focused on a customer who was wearing a big, heavy jacket, and of course, I now realize that it was very hot, so that’s probably where the guy was hiding the shotgun. Only after I saw on the news what kind of car they were looking for did I remember that there were two men sitting in a station wagon in the parking lot with the engine running. Now it’s all clear, but it didn’t mean a thing to a me at the time.”

Actually, it did then too,” I tell him. Combining what amounted to fear on the face of the clerk, with the man in the heavy coat on the hot day, with the men in the car with its engine running, with Thompson’s unconscious knowledge of convenience store robberies from years of news reports, with his unconscious memory of frequent police visits to that store, which he’d driven past hundreds of times, and with countless other things we might never discover about Thompson’s experience and knowledge, it is no wonder he left that store just moments before a police officer happened in and was shot dead by a man he surprised in the middle of a robbery.

What Robert Thompson and many others want to dismiss as a coincidence or a gut feeling is in fact a cognitive process, faster than we recognize and far different from the familiar step-by-step thinking we rely on so willingly. We think conscious thought is somehow better, when in fact, intuition is soaring flight compared to the plodding of logic. Nature’s greatest accomplishment, the human brain, is never more efficient or invested than when its host is at risk. Then, intuition is catapulted to another level entirely, a height at which it can accurately

be called graceful, even miraculous. Intuition is the journey from A to Z without stopping at any other letter along the way. It is knowing without knowing why.

At just the moment when our intuition is most basic, people tend to consider it amazing or supernatural. A woman tells a simple story as if it were mystical: “I absolutely knew when the phone rang that it would be my college roommate, calling after all these years.” Though people act as if predictions of who is calling are miraculous, they rarely are. In this case, her old roommate was reminded of her by reports of the explosion of the space shuttle. Is it a miracle that both women happened to watch the same news event along with a billion others? Is it a miracle that their strongest association with space travel was the angry belief they shared in college that women would never be astronauts? And a woman astronaut died in the space shuttle explosion that morning, and the two women thought of each other, even after a decade.

These non-critical intuitions, which at first impress us, are often revealed to be somewhat rudimentary, especially in contrast to what the mind delivers when we might be in danger.

In *A Natural History of the Senses*, author Diane Ackerman says, “The brain is a good stagehand. It gets on with its work while we’re busy acting out our scenes. When we see an object, the whole peninsula of our senses wakes up to appraise the new sight. All the brain’s shopkeepers consider it from their point of view, all the civil servants, all the accountants, all the students, all the farmers, all the mechanics.” We could add the soldiers and guards to Ackerman’s list, for it is they who evaluate the context in which things occur, the appropriateness and significance of literally everything we sense. These soldiers and guards separate the merely unusual from the significantly unusual. They weigh the time of day, day of the week, loudness of the sound, quickness of the movement, flavor of the scent, smoothness of the surface, the entire lay of the land. They discard the irrelevant and value the meaningful. They recognize the survival signals we don’t even (consciously) know are signals.

After years of praising intuition as the cornerstone of safety, I just recently learned to my surprise and appreciation that the root of the word intuition, *tuere*, means “to guard, to protect.” That is what it did for Robert Thompson. Shaken by his narrow miss, he later wondered why the police officer did not intuit what he did. It may be that the officer saw different things. Thompson saw only one car in the parking lot, but the officer saw two, likely giving the appearance of a business patronized by a few customers. Though the clerk’s face had sent Thompson a fear signal, the police officer probably saw relief in that same face as he entered the store. It is also likely that the seasoned officer suffered the disadvantage that sometimes comes with being expert at something. He was operating with the accurate but (in this case) misleading knowledge that armed robberies are less frequent in the daytime than at night.

Many experts lose the creativity and imagination of the less informed. They are so intimately familiar with known patterns that they may fail to recognize or respect the importance of the new wrinkle. The process of applying expertise is, after all, the editing out of unimportant details in favor of those known to be relevant. Zen master, Shunryu Suzuki said, “The mind of the beginner is empty, free of the habits of the expert, ready to accept, to doubt, and open to all the possibilities.” People enjoying so-called beginner’s luck prove this all the time.

Even men of science rely on intuition, both knowingly and unknowingly. The problem is, we discourage them from doing it. Imagine that you go to see a doctor, a specialist in some particular malady, and before you even sit down in his examining room, he says, “You’re fine; please pay my receptionist on the way out.” You might understandably feel that the opinion he rendered intuitively was not worth paying for, though it might be the exact same diagnosis you would get after his poking and prodding you with fancy equipment. A friend of

mine who is a doctor has to prove his scientific acumen to patients before they'll accept his intuition. "I call it the tap dance. After I do a few steps, patients say 'Okay, I see you can dance,' and then they believe me."

The amateur at the convenience store teaches us that intuition heeded is far more valuable than simple knowledge. Intuition is a gift we all have, whereas retention of knowledge is a skill. Rare is the expert who combines an informed opinion with a strong respect for his own intuition and curiosity. Curiosity is, after all, the way we answer when intuition whispers, "There's something there." I use it all the time in my work because it can unlock information that clients are hiding from themselves.

Turn Off the News

I cannot lay claim to having read Skenazy's book, *Free-Range Kids*, at the time we raised our two kids, but we did turn off the news, in fact we got rid of the TV altogether. We had a projector and a pull down screen that was available generally only in the evening and even then, they only watched Animal Planet and the Discovery Channel and some of National Geographic (before it went full *Climate Crazy*). So, yes, our kids went through their ENTIRE childhood and teenage years without ever watching the news ONCE at home.

We were "weird" parents in many other ways, but we have been proven right.

I think the turning off of the news is such an important point I'm going to put Skenazy's chapter on the subject here. But please I strongly recommend that you buy and read the book.

Turn Off the News

Go Easy on the "Law and Order," Too

Is there one single reason we are so much more scared than our parents? One person, place, or thing that left us so shaken that we spend literally four times as much time supervising our kids than our own moms and dads did in 1975? Yes, and I'll give you a hint:

It has white hair, seems to be on CNN about twenty hours a day, and has piercing blue eyes so brimming with empathy that you want to hold him tight no matter what your sexual orientation. Or his.

Of course, it's not just Anderson Cooper that's driving us crazy with fear about crime. But he's part of the problem, just like cable news is, and local news is, and Larry "Let's Talk About Little Caylee Anthony One More Time" King is. And Nancy G. And Law and Order, and Law and Order, and Law and Order, and the other Law and Order. The one with the special victims. Or, as TV historian Robert Thompson says, "The Law and Order for people who like to see crimes that are grossly sexually fetishized and practiced on children or vulnerable adults."

What's not to like?

The problem with all these shows, from the news to the dramas ripped from the news, is that they present us with a world so focused on the least common, most horrific crimes that we get a totally skewed picture of what it's like out there. How skewed? Let's take a look at the TV listings.

Well, hmm. This week you could watch a double murder on *The Mentalist*. That's nice. Then it says there's a "dismembered, headless body" discovered on *Bones*. I guess *Bones* did some test marketing and realized that a merely dismembered body might lose some viewers. ("Forget it! If the head's still attached, I'm not watching.") Then there's *CSI: NY*. The episode I just watched showed, oh, a guy's stomach sliced open because he swallowed a key. And a body dredged up from a swamp. Then there was a woman almost drowned by a madman in a bathtub, but she survived—only to stumble around and accidentally impale her breast on a towel hook. (I hate it when that happens.) On the local news right after that, there was a guy on fire, and a guy who plunged to death, naked. And *Law and Order* featured a fourteen-year-old girl raped by a Serbian war criminal. Well, we didn't see the actual rape. But we saw her going, "Mph! Mphmmph!" through the duct tape over her mouth as the leering guy reached for her thigh. (She was, of course, bound with a phone cord—like anyone still has a cord phone—and blindfolded.)

I'll get to real news shows in a minute, because we all know how they can make you feel totally depressed about the world. But less attention has been paid to the fact that even

these so-called entertainment shows (Rape! Bondage! Towel-hook impaling! That's entertainment) end up changing our whole outlook.

The problem is that once we see horrific images, only half of our brain takes the time to say, "Wow. That makeup person did an incredible job with those puncture wounds. And hats off to the wonderful writing staff!" (If, indeed, any part of the brain ever thanks writers.) The other half of our brain just takes in those gruesome images wholesale and files them under "Sick World, comma, What we live in."

In his book *The Science of Fear*, Daniel Gardner explains that once an image gets into that "reptilian" part of the brain, not only can you not shake it, you also can't extricate it from all the other images and feelings jostling around in there, either. After all, it's only been the last hundred years or so that the brain has started seeing realistic-looking images (TV, movies) that weren't directly applicable to its fate (lions, spears). So it hasn't figured out yet how to separate the real from the manufactured. Especially whatever's manufactured by Jerry Bruckheimer.

Thus the fight-or-flight, feel-it-in-your-guts reptilian brain treats *The Dark Knight* and a commercial for *Dexter* and the nightly news as one and the same. So when we are faced with a situation we think might be risky and we are trying to figure out what to do, it starts rummaging through all the horrible stuff it has seen and comes to the conclusion, "Jeez Louise! Look what can happen! Run for your life!"

Now, if you're wondering why our reptilian brains would be making us more scared today than our parents' reptilian brains made them just a generation ago, one reason is that when our parents were raising good ol' us, they didn't see this kind of TV. They saw *Bonanza*. Or maybe *Medical Center*. They weren't seeing dead bodies with realistic towel-hook holes in them. They weren't seeing all those autopsies on *CSI* or horrific dismemberments or decaying bodies dredged from the river. In fact, says TV historian Thompson, "I don't think there's a single episode of *Law and Order* that could have even been shown before 1981." That's because, until then, graphic images like the girl with the duct tape, rapist, and phone cord were taboo. In fact, they were the stuff of porn.

What happened?

In 1971, the rules changed. From 1929 up to that point, says Thompson, broadcasters held themselves to a code of conduct so strict that they couldn't even use the word "pregnant." They couldn't use bad language. They couldn't show a toilet bowl on TV. (That's why the Ty-D-Bol man was always in the tank.) Through the Great Depression, a world war, two nuclear bombs, and the civil rights movement, the material you could hear on the radio and see on TV stayed pretty much the same. Tame. Then, in '71, along came *All in the Family*.

That groundbreaking show became a huge turning point in our media and our culture. Every week, *All in the Family* broke another taboo. It talked about impotence, molestation, constipation. It flushed a toilet! And the ratings went through the roof. It became the number-one-rated show for five years straight—a feat never surpassed (though the *Cosby Show* did, later, tie it).

Naturally broadcasters said, "Number one for five years? Let's make five thousand of these!" So they started throwing in all the sex and grit and bodily functions they could. As did TV news. And let's not forget that, this being the seventies, plenty of social upheaving was going on outside the boob tube, too.

In 1981, things lurched dramatically again, as cable TV came into its own and started segmenting the hitherto mass audience. You wanted to watch women writhing in leather bustiers? You had your MTV. Or your Playboy Channel. Or your HBO. Whatever. You had a

lot of channels. You wanted weepy stories of women with unusual diseases? You had Lifetime. And if you wanted news all day long? You turned on CNN.

Let's stop here and think about what that meant: an entire twenty-four hours to fill with news. Every day. How on earth could you keep people watching the same channel for hours on end?

There is one proven and tested way. Pick a sensational tabloid story and treat it seriously, earnestly, gravely, as if all you really want is the best for your viewers. Repeatedly broadcast the same heart-wrenching footage, looping back again and again, right after this message, to create a sense of the most compelling, continuing, crying-shame story ever to dominate a news cycle. A story so gripping, viewers would feel almost guilty turning it off. A story you could drag out (like this paragraph) for hours and hours, days and days, even if you had only tiny crumbs of info to add. And to date, the best story anyone has ever found turns out to be . . . a missing child.

"Missing kids are everybody's fear," said a cable exec I can't quote by name because she's still in the biz (even though she's not happy about it). "Especially when there's a story with somebody who looks normal," she said. "People really respond to that. They think, 'That could be me.'" "Me" being a middle- to upper-middleclass white person, usually.

The granddaddy of this programming was the 1983 two-part miniseries, *Adam*, based on the story of Adam Walsh, a six-year old boy who was abducted from a Florida Sears and beheaded in 1981. It makes me sick just to type that.

The series about him—a ratings blockbuster—introduced America to Adam's dad, John Walsh, who appeared with his wife at the end of the show with photos of other missing children. Walsh became a crusader for children's safety and went on to host America's Most Wanted. He also helped found the National Center for Missing and Exploited Children. You probably came of age eating breakfast with those kids.

"The whole milk carton phenomenon begins at this time," says Thompson, referring to the phenom of dairies printing the photos of missing children on their cartons—without even clarifying whether the child was kidnapped by a stranger (extremely rare), taken by a divorced parent in a custody dispute (more likely), or had simply run away (also quite likely). Mornings became pretty somber as we ate our Rice Krispies with the milk carton kids staring us in the face. In fact, it began to feel as if millions of kids were being taken, willy-nilly, across the country. And all together, this set the template for our modern-day fear of abduction.

That fear, as I'll say again and again in this book, bears no relation to reality. The statistics cited by the National Center for Missing and Exploited Children itself show that the number of children abducted and killed by strangers holds pretty steady over the years—about 1 in 1.5 million. Put another way, the chances of any one American child being kidnapped and killed by a stranger are almost infinitesimally small: .00007 percent. Put yet another, even better way, by British author Warwick Cairns, who wrote the book *How to Live Dangerously*: if you actually wanted your child to be kidnapped and held overnight by a stranger, how long would you have to keep her outside, unattended, for this to be statistically likely to happen?

About seven hundred and fifty thousand years.

But if we rarely heard about kidnapped children before the eighties (with the exception of the Lindbergh baby), they have since become a staple of TV. A particular child's story that captures the public's interest can go on for months—sometimes years. To this day, the Jon Benet Ramsey case can still start an argument, even though the mother was exonerated and has gone to her grave. Between that case and Elizabeth Smart and Maddie McCann and Caylee Anthony, we all feel as if we "know" someone who disappeared. We've watched their home videos. We've "met" their families on TV. And because we've heard about them so

much, their stories start to seem tragic, yes, but not totally surprising. They fit perfectly into a worldview that says, “Just another example of kids getting snatched and killed.” Our brain has stored all the other stories before it, so each new one just confirms our belief that child abductions are happening all the time.

So now, when you’re thinking about whether you could ever let your kids hang out by themselves in the video game department at Target—which is where we deposit ours, because otherwise they’d moan and groan the whole time we’re trying to concentrate on various Mr. Coffee features—you automatically think about Adam Walsh snatched from the Sears. Even though that was in 1981. Even though, every day, millions of parents go shopping with their whiny kids, and the kids wander off for a while, and the parents panic and then they find them in the toy department and everyone’s OK. It’s hard to remember, but we should: the likelihood of something truly tragic happening is, thank God, extremely low.

Now let’s look at how the folks in the TV biz work to make us feel otherwise.

“As a former TV news producer,” a dad confessed in an e-mail to Free-Range Kids, “I can tell you that news is all about fear. Sometimes, the first criteria we used when judging a story involving children or families was, ‘Is it scary enough?’”

When the answer was “no,” that didn’t necessarily kill the story. It just changed the way it was reported—and teased.

“A tease has to hit people in their heartstrings, where you know your words are going to have some impact: their personal safety, or the safety of their family,” said another former TV news producer, Thomas Dodson. “It has to grab the viewers’ attention, and you have a very short time to do it.”

So instead of saying, “If your child is under age three and you happen to have shopped at that little toy store on Elm Street where the proprietor bought some funky wooden blocks from Finland, please note that these could pose a choking hazard if your kid put several of them in his mouth at once, which he probably wouldn’t, since they taste bad,” you would say (according to Dodson): “A massive recall of toys! Is something in your child’s toy box on the list?”

(To which, by the way, a friend once remarked: “If something that terrible is out there, threatening my children, why the hell are they making me wait till eleven to find out?”)

TV stations love those toy recalls because that way their newscast gets to scare people (good for ratings) while also doing a public service (good for the soul). It’s like exposing OSHA violations at a strip club.

Now maybe there is some point to telling us the most anguishing stories of our day, every day. But I’ve been a reporter for twenty years, and I’m still not quite sure what that point is. Is it to warn us about a dangerous neighborhood? That’s helpful, I guess. Or to remind people to look both ways when crossing the street or to drive safely? Can’t overemphasize those. Is there an exploding rattle out there that we shouldn’t buy? Tell all! But, as former Tucson anchorwoman Tina Naughton Powers says, “On local news, it’s, ‘Good evening and welcome to death, doom, and destruction. Here’s what didn’t happen to you today, but it could so we’ll keep you in fear!’”

So when Anderson Cooper hosts an hour-long special on missing children, as he did in 2007, he never says, “First off, remember: this will probably never, ever, ever happen to you. In fact, it’s almost ridiculous that I’m even here talking about it.” No, he turns to the camera with those devastatingly earnest eyes and says, “It is every parent’s nightmare.”

Then he interviews the parents who lived that nightmare—their boy rode off on his bike, never to be seen again. Then he talks to a “safety expert” who talks about kids getting snatched from their bikes and calls it “a common scenario.”

Common? It is so not common that it almost never happens. About twenty times more kids are killed by drowning—is that common? Forty times more are killed by car accidents. Forty for every kidnapped kid. But would you call a fatal car accident common? Tragic, yes. Common, no.

“Not a word about probability has been spoken,” notes *The Science of Fear* author Gardner. “Having just seen a string of horrifying examples, [one might] conclude that the chances of this crime happening are high.”

And, in fact, that’s exactly what people do. “Aren’t kids always getting pulled off their bicycles in the suburbs?” a city friend asked me last year. She was serious. And scared.

Night after night, a vision of the world comes into our living rooms and our lives that is sad, sadistic, and totally at odds with the odds. Turn it off and you’ll probably be a little more at peace. A little less worried about your kids’ safety.

That may sound like I’m saying, “Ignore the awful truth and go live in La-La Land.” But I’m trying to say that that horror concentrated on the tube is a fake land of its own—Agh! Agh! Land. It’s a soul-freezing, hope-crushing place. If you lived there, you’d be dead now.

Or at least impaled on a towel hook.

I could write quite a bit about this, because we did it, we lived it for years. His point about being less afraid as a consequence is spot in, and I’m talking about myself, a grown man, let alone the kids.

Turn off the news, ideally get rid of the TV, and remove the firehose directly bumping fear into your and your families’ minds.

Only bad things comes of it.