

Meeting date: 08/03/2023

GLADD Representative in attendance: Dr Duncan McGregor

GLADD Statement at General Medical Council (GMC) Strategic Equality, Diversity and Inclusion Forum (SEDIAF), March 2023

I am pleased to see the importance of the BMA discrimination surveys discussed earlier today and thank you to the team for allocating appropriate space in the agenda to discuss these.

I am also pleased to have been involved with the development of the updated Trans Healthcare ethical hub on the GMC website, which is a very positive supportive step for trans patients, and I look forward to seeing this launched in due course.

At the last SEDIAF meeting, I had invited the GMC to sign as a supporting organisation to the GLADD Medical Schools Charter, and I have sent this out ahead of this meeting for your perusal. This is an important document which encourages UK Medical Schools to recognise the harms of conversion therapy, and to support their LGBTQ+ students and staff. Within the pledges is one which specifically calls upon the GMC to recognise the harm of 'conversion therapy' and how participation in the delivery of 'conversion therapy' breaches the core ethical principles of a doctor.

At present, over 80% of current UK Medical Schools have signed the charter, alongside supporting organisations including the BMA, the Academy of Medical Educators and the Association for the Study of Medical Education. I would like today to again formally invite the GMC to sign as a supporting organisation to the important work of this charter.

At the previous SEDIAF meeting, I had also raised an issue that I have been involved with relating to an accusation of conversion therapy that I had significant concerns that the GMC had not taken this case seriously. I put to the forum that a statement from the GMC on the topic of conversation therapy had made very clear that any accusations of such would be taken very seriously. Since the last meeting, I have had further meetings to discuss this, and I am disappointed to find that no further course of review is available for this case short of judicial review. I was informed, however, that the case will be discussed at

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an internal GMC forum to review whether there are any lessons to be learned from the case, and I look forward to being informed of any outcomes of this process.

I am far from convinced that the GMC as an organisation “take very seriously any allegation about a doctor engaging in so-called conversion therapy” as it has stated. It seems that the GMC stance is “I know it when I see it”, akin to the famous legal threshold used by the US Supreme Court ruling to determine obscene material in the 1960s. We know that conversion therapy practices are insidious, subtle and manipulative, and I feel that there is insufficient evidence to suggest that the GMC as an institution really understands that.

In previous meetings, Charlie has explained that the GMC’s aim is to seek out and address bias and discrimination actively, an impressive aim indeed. I would like to invite the GMC to do so with respect to any policies and procedures relating to accusations of so called conversion therapy, to prove to my community that such accusations will indeed be taken seriously. Myself and GLADD would like to offer ourselves to support this, perhaps to support the writing of a specific conversation therapy policy from the GMC, including specific definitions. The government are continuing to delay legislation on this topic, and I am afraid that the GMC cannot afford to wait for the government to act. You have a responsibility to protect LGBTQ+ patients, and now is the time that we need you to prove that you can and will.