

*Meeting date: 12/09/2024*

*GLADD Representative in attendance: Dr Duncan McGregor*

## **GLADD Statement at General Medical Council (GMC) Strategic Equality, Diversity and Inclusion Forum (SEDIAF), September 2024**

I would like to begin by extending GLADD's thanks to the GMC for inviting myself and Professor Andrew Hartle to the GMC's offices last month. This was a follow up to the apology published by the GMC earlier this year for historic injustices done to doctors penalised under homophobic laws. We were incredibly privileged to view some of the GMC's archives containing details of these historic cases, and the experience was both humbling and sobering.

At the SEDIAF meeting this time last year, I had stated that my intention was to begin publishing the reports that I read at these meetings in full via the GLADD channels, and after some delay I can now confirm that this is in effect. For anyone who might be interested, my statements read at SEDIAF meetings dating back to October 2022 can now be found on the GLADD website under the 'Activism' page, and we intend to update these with each meeting.

The reason that I have elected to do this is so that the GLADD membership and the wider LGBTQ+ community can see the issues being raised in this forum and assess for themselves whether or not the GMC is adequately addressing them. It is with this in mind that I would like to now go back through the main issues that I have raised in these forums over this time.

In both the SEDIAF meetings in October 2022 and March 2023, the major issue that I raised was that of so-called 'conversion therapy'. Subsequently, two meetings were undertaken between the GMC, myself and representatives of another forum member with the GMC having undertaken useful work in between. Sadly, I have not heard back from this work in some time, despite the positive steps of those initial meetings. I would be grateful for an update on this work at the earliest convenience.

Next, in September 2023 – this time last year – I raised the issue of two particularly high profile doctors posting extreme queerphobic content on social

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media, neither of which cases seemed to generate interest for investigation from the GMC when referred. I had asked for assurance that my community could take to trust that the GMC takes seriously the safety of queer people. I have not had follow up on the matter of rampant queerphobia on social media and would be appreciative of some confirmation of whether or not this issue is going to be taken forward by the GMC in any way.

Finally, earlier this year at our meeting in March, I raised a query on behalf of a GLADD member regarding representation of LGBTQ+ issues in undergraduate curricula. I highlighted the concerns of Professor Catherine Meads, an eminent academic in the field of LGBTQ+ healthcare who stated that the reason that medical schools are not including LGBTQ+ healthcare in their curricula is because the GMC is not mandating them to. Professor Meads kindly offered to meet with the GMC to discuss further which I offered to facilitate, but have not had any feedback as yet on this offer. I am pleased that by chance in today's meeting one of the GMC Education team has passed on their e-mail to discuss this point, and I will take this forward with him.

I appreciate that the machinery of the GMC can, at times, grind slowly; and that the EDI team have a significant workload. However, for the sake of accountability to my community, I feel that it is appropriate that I highlight these issues I have previously raised that are yet to be addressed by the GMC. I would be greatly appreciative of further discussion and updates in separate meetings.