

Misuse of evidence in sex and gender policy

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Abstract

Sex and gender policy has become a battleground for attacks on science and expertise. As researchers committed to rigorous evaluation of evidence, we examine how evidence is used and misused in debates on sex and gender policy affecting transgender people. Drawing on examples from healthcare, prison housing, and sport, we identify recurring pitfalls: elevating opinion as evidence; excluding trans expertise; discrediting scientific consensus; deploying decontextualized claims; and the influence of scientific disinformation. Amid rising societal transphobia, we call for greater integrity and transparency in evidence use, and for meaningful inclusion of trans people’s experiences and expertise in policymaking.

Introduction

Sex and gender policy has emerged as a frontline for attacks on science, expertise, and legitimate knowledge. As concerned researchers and topic experts who are committed to the rigorous evaluation of scientific research and expert claims, we offer this critical reflection to show how evidence has been used and misused in sex and gender policy and call for increased integrity and transparency. While our intervention is particularly focused on policy impacting transgender people, it will also be relevant to anyone interested in the role of scientific evidence and ideology in policymaking more broadly.

A cascade of policy decisions in recent years has had profound consequences for the lives of transgender people across diverse national and international settings. In the domains of healthcare, prison housing, and sports participation, policy makers frequently make appeals to “evidence” in justifying approaches that have very often been detrimental for transgender people. The term evidence does important work in this context, imbuing policy decisions with the appearance of moderation, reasonableness, and the authority of science. Yet, what counts

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as evidence is highly contested and vulnerable to political and ideological agendas (Goldenberg 2006).

What is evidence?

Most simply, we define evidence as information presented in the context of resolving practical problems. The construction of evidence in policy, legislative or judicial contexts is shaped by parameters and purposes specific to the field, which are defined in advance. As a result, evidence is always in some measure a selective collation and translation of available knowledge and expert claims (Head 2010).

A critical evaluation of evidence claims should interrogate what counts as evidence, how different forms of knowledge become hierarchically organized, what forms of knowledge are excluded, and who is authorized to present evidence. Such questions are particularly important in the case of sex and gender policy, where strong pre-existing beliefs risk impeding the rigorous and fair evaluation of presented evidence (Horton 2024). Instead, we observe that constructions of evidence in this context are often unclear and lack a transparent process and standards.

Common pitfalls in the use of evidence.

The social construction of expertise

Opinion as a weak form of evidence

In most established hierarchies of evidence, expert opinion is ranked as a weaker form of evidence than other types of claims (Greenhalgh et al. 2014). In sex and gender policy domains, by contrast, the opinion of certain experts is frequently favored as an authoritative form of evidence without a clear justification (Vere and Gibson 2021). For example, responding to the final report of the UK Cass Review's evaluation of care for transgender youth (Cass 2024), the UK Government treated the report's recommendation to considerably scale back access to medical interventions as authoritative on the basis of the project lead's status as a senior pediatrician, despite considerable debate within the British medical community (The British Medical Association 2024) and critical work highlighting the Cass Report's methodological flaws (Noone et al. 2025; McNamara, Baker, et al. 2024). Similarly, a "review" article (Hilton and Lundberg 2021) that claims insurmountable advantage in

transgender women without offering any methodology for said review is frequently cited by sports policymakers to justify the exclusion of transgender women from women’s competition (Hamilton et al. 2024). Although such an article should most appropriately be classified as opinion, it has been afforded the status of evidence.

Exclusion of relevant expertise

Perceptions of expertise and neutrality are unequally distributed across fields (Gieryn 1999) as well as across different individuals, with transgender people often denied the recognition afforded to cisgender experts (Pearce 2018; Medina 2013; Fricker 2007). While individuals with training in any field of the life sciences are readily deemed experts, regardless of their relative experience in the subject matter, the work of social scientists is often dismissed as unscientific or irrelevant (Pape 2019). Whereas policymakers often assume neutrality in the opinions of cisgender experts, experts who work directly with transgender people—and transgender people themselves—are frequently dismissed as biased (Ashley and Domínguez 2021).

The UK’s Cass Review “explicitly excluded trans people ... while sidelining most practitioners with experience in trans health care” (Horton and Pearce 2024). In *For Women Scotland Ltd. v The Ministers of Scotland*, in which it was ruled that “trans women are not women under the Equality Act 2010,” the UK Supreme Court heard evidence from numerous cisgender individuals and lobby groups opposing trans rights while no trans individuals were granted the opportunity to speak (O’Thomson 2025; Hunter 2025). Similarly, within the prison context, the lived experiences of transgender individuals in custody are consistently overlooked in decisions about housing arrangements (Maycock 2020).

By contrast, professionals affiliated with lobby groups opposed to transgender rights are often represented as independent. For example, the UK’s “Sullivan Review”, commissioned in 2023 as part of the UK government’s stated “kicking woke ideology out of science” agenda (Rabesandratana 2023), argued for transgender people to be categorized in surveys in terms of sex category assigned at birth, and not their lived sex/gender (Sullivan 2025). This has frequently been referred to as an “independent review”, despite the political context of its commissioning and the commissioned researcher holding an advisory role with a lobby group at the time of the review (Hipwell 2025; Todd and Callard 2026; Guyan 2026).

Discrediting of consensus

Despite consistent consensus on the benefits of gender-affirming care for young trans people from various medical organizations across diverse national contexts including Australia, Italy, Germany, Poland, Japan, Switzerland, and the United States, we observe efforts to undermine the expertise of established scientific bodies (Queensland Children’s Gender Service 2024; Tornese et al. 2025; Deutsche Gesellschaft für Kinder- und Jugendpsychiatrie, Psychosomatik und Psychotherapie (DGKJP) 2024; Gawlik-Starzyk et al. 2025; Japanese Society of Psychiatry and Neurology and Japanese Society of Gender Dysphoria 2024; Swiss National Advisory Commission on Biomedical Ethics 2024; LaFleur 2024). For example, an anonymous report by the U.S. Department of Health and Human Services (HHS), which opposed the access of transgender youth to medical care, sought to discredit the consensus positions of the World Professional Association for Transgender Health (WPATH) and other professional medical associations (Rider et al. 2025). In place of a rigorous review of existing evidence, the report offered a partial reading that disregarded “the totality of available data and the full spectrum of clinical outcomes” and relied instead “on select perspectives and a narrow set of data” (American Academy of Pediatrics 2025, para. 1; see also World Professional Association for Transgender Health 2025; American Psychological Association 2025).

Opening the black box of “science”

Unattainable standards

In debates over gender-affirming care (GAC), some claim that the evidence supporting its mental health benefits for transgender adolescents is “low-quality,” primarily due to the absence of randomized controlled trials (RCTs) (Ashley et al. 2024; Giordano and Holm 2020). This, however, overlooks the methodological and ethical limitations of conducting RCTs in the context of trans youth healthcare (Ashley et al. 2024). It also establishes an evidentiary standard that is not applied elsewhere in pediatric medicine and which is considered inappropriate for evaluating the effects of puberty blockers and gender-affirming hormone treatments (Giordano 2025; Horton 2024; Ashley 2026). There is also a “double standard” in evaluations of quality: in the Cass Review, all peer-reviewed qualitative studies and observational studies were automatically classified as low quality and excluded from the

analysis, while the final report relied heavily on the review's own non-peer reviewed qualitative data (Noone et al. 2025; Horton 2024)

Decontextualizing claims

In crucial instances, findings from scientific studies are presented in support of restrictive policy positions that misread or misrepresent the original purpose or context of the study. For example, in both the landmark UK *Bell v Tavistock* (2020) case and the Cass Report, it was argued that because adolescents do not have a fully developed frontal cortex, they are at risk of poor decision-making in the context of GAC. Although the frontal cortex indeed continues developing into a person's twenties, making adolescents more likely to engage in risky behavior (Casey et al. 2008), this only applies to certain contexts, such as snap decisions made while a person is excited. In contexts more relevant to the slow, deliberate and supported decision-making process of healthcare settings, studies actually show similar behaviors between adolescents and adults (Icenogle and Cauffman 2021).

Decontextualized claims are also observed in sport, where policymakers and researchers frequently rely on studies conducted for entirely different purposes. It has been claimed, based on research on performance differences between cisgender women and men and from transgender healthcare, that male puberty confers a lasting athletic advantage. However, these studies have limited relevance: cisgender men—used as proxies for transgender women—typically have not undergone testosterone suppression, while participants in transgender health studies often show wide variation in hormone levels and physical activity (Hamilton et al. 2024; Cheung et al. 2024).

Disinformation construed as science

In US state hearings, there has been a demonstrated trend of disinformation by actors positioning themselves as clinical experts, who present their statements against GAC as scientific facts (McNamara et al. 2023; Endocrine Society 2024). This includes insinuations that being trans is a mental illness or a product of social contagion and false claims about standard practices and safety, such as the claim that gender affirming surgeries are conducted on pre-pubescent children or are routine practice for minors (McNamara, McLamore, et al. 2024; Wuest and Last 2024). These types of claims echo psychopathologizing ideas about

transness from more than half a century ago, which have since been discredited by medical scientists time and time again (Gonsalves 2020; Meyerowitz 2024).

In England and Wales, policymakers have adopted prison housing policies that isolate transgender women from other women, based on a single isolated case that became the focus of distorting media coverage. Rather than fully addressing the acknowledged failings in the risk evaluation procedure, or addressing prisoner safety in a comprehensive manner, a new policy reinforced the assumption that all trans women prisoners pose a safety risk (Lamble 2023, 2025; Gorden and Hughes 2024). Conservative news outlets in Canada have used a similar disinformation strategy to undermine revisions to transgender detainees' rights (Ginsley and Cesaroni 2024).

The stakes of evidence in sex and gender policy

At stake in the misuse of evidence are the credibility of both scientific and political institutions. The tactics used to delegitimize certain sources of evidence in debates around sex and gender policy are now being deployed more widely to encourage distrust of science as a whole, leading in the US to efforts to dismantle key scientific institutions, such as the EPA (Glaberman et al. 2025), the Department of HHS, and diverse NIH grant programs and expert bodies (Restar et al. 2025).

Also at stake are the lives and living conditions of vulnerable groups. In a context of rising societal transphobia (Connolly et al. 2025), transgender people and other sex and gender minoritized groups are at particular risk of being harmed by the misuse of evidence (Lamble 2025; Murib 2025; Kennedy 2025; Horton 2026). This is even more so the case for transgender people of color and those without social or family support (Curth and Mayeux 2024; Taber and Stults 2024; Tan et al. 2025).

We call on researchers to heed these evidence pitfalls by critiquing appeals to neutrality, upholding standards of rigor in appeals to science, and insisting on the consideration of the voices, experiences and expertise of transgender people in the policy decisions that profoundly impact their lives.

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4. Eric Llaveria Caselles works at the intersection of social sciences, trans studies, and feminist theory. His PhD engages with gender identity as the dominant framework for understanding trans experiences, and develops alternative approaches informed by Marxist-feminist and critical theory traditions.
5. Dr Sheree Bekker (she/her) is an Associate Professor in the Department for Health, University of Bath, UK, and Co-Lead of the Feminist Sport Lab. She researches the intersections of sport, health, and social justice, focusing on how gender, power, and context shape injury prevention, risk, and safeguarding.
6. Jean-Sébastien Blanc is a lecturer at the Institute of Gender Studies and research associate at the Department of Geography and Environment, University of Geneva. He lectures at the Swiss Center of Expertise in Prison and Probation in Fribourg and currently serves as Vice-President of the Swiss National Commission for the Prevention of Torture.
7. Dinah Bons is a Dutch politician and former party leader and city councilor in Amsterdam. She works as a legal advocate, policy officer and data strategist at the HIV Association Netherlands. Her work centers marginalized communities through an intersectional lens, combining policy advocacy, community development and socially engaged theater.
8. Professor Guylaine Demers has spent most of her life promoting gender equality and inclusion in sport. Over the years, she has become a leading advocate for equity and LGBTIQ+ issues in Canadian sport, and since 2022 has directed Lab PROFEMS, Quebec’s first research laboratory for the advancement of women+ in sports.
9. Tara Gonsalves is an assistant professor of sociology and core faculty at Columbia University’s Institute for the Study of Sexuality and Gender. Gonsalves’ work examines how gender and sexual categories are produced, contested, and transformed, and has been published in the

American Sociological Review, *American Journal of Sociology*, and *Gender and Society*, among other venues.

10. Sarah Lamble is Professor of Criminology and Queer Theory at Birkbeck, University of London. Lamble's work addresses questions of gender, sexuality, and justice, with a focus on feminist alternatives to prisons, policing, and punishment.
11. Ruth Pearce is Senior Lecturer in Community Development at the University of Glasgow, and Senior Fellow at the Center for Applied Transgender Studies. Her research explores themes of inequality, marginalization, power, and political struggle from a trans feminist perspective. She is the author of *Understanding Trans Health* (Policy Press, 2018).
12. Dr Valo Vähäpassi, is a postdoctoral researcher with expertise in gender studies, media studies, trans studies and feminist science studies. Their PhD addressed co-articulations of transgender and violence in both trans affective publics and Christian right rhetoric. Additionally, they have published on the intersections of transgender studies and disability studies.