I am reporting myself to the GMC because of my conscientious objection to using so-called ‘transgender’ pronouns. I have never knowingly used such pronouns throughout my medical career, and my approach to this never attracted any complaint.

However, in 2018 I accepted a job offer from the Department for Work and Pensions as a disability assessor, and was instructed at a training session to use whatever pronouns a client might require in writing our reports. I then explained my beliefs on that issue to the DWP and the employment agency through which I was employed (Advanced Personnel Management (UK) Ltd.). In consequence, I was dismissed from my job.

I subsequently brought a claim in the Employment Tribunal against DWP and APM for discrimination on the grounds of my religious or philosophical beliefs. The claim was unsuccessful, and my appeals against that outcome have now been dismissed by the Employment Appeal Tribunal and then by the Court of Appeal. I feel that the respective decisions of the Employment Tribunal, the Employment Appeal Tribunal and the Court of Appeal can be reasonably understood as endorsing the DWP’s decision to dismiss me.

In those circumstances, I consider it appropriate to refer myself to GMC, to enable GMC to determine whether my fitness to practice is impaired due to my ‘gender-critical’ beliefs.

Enclosed herewith are:

1. My witness statement made in the Employment Tribunal proceedings;
2. The decision of the Employment Tribunal;
3. The decision of the Employment Appeal Tribunal;
4. The decision of the Court of Appeal.

In summary, my belies are as follows:

1. I am a Christian doctor, and I believe in taking a compassionate, honest, respectful, and caring approach to all patients and colleagues.
2. I believe in the objective or propositional nature of the truth. I reject the relativist philosophy which maintains that something may be true for one person but not for another.
3. I believe that a person’s sex as male or female is a matter of objective truth, not of subjective ‘gender identity’. This belief is rooted both in my religion and in my knowledge of the relevant science. There is not a medical paper anywhere in the world that can demonstrate that a woman has become a man, or that a man has become a woman.
4. I believe in the importance of practising scientific, evidence-based medicine. The medical profession therefore must not support the notion (driven by a political expedient rather than science) that a person can change sex. To do so would be to lose our professional integrity.
5. I therefore believe it is morally wrong for myself as a doctor to use ‘transgender’ pronouns, and thereby knowingly to promote and perpetuate a lie.
6. Moreover I believe that the medical profession has a clear professional duty to state, unequivocally, that a person cannot change sex. Failure to do this has led to abuses such as the promotion in some schools of telling young children that they can choose their sex and that they can change sex. The medical profession’s failure to state the scientific truth without fear or favour is putting vulnerable at risk and undermining the society and public morals.

For those reasons, I refuse to maintain a pretence that a ‘transgender man’ is a man or that a ‘transgender’ woman is a woman, by using their preferred pronouns or otherwise. Of course I acknowledge the need to be sensitive when dealing with people, and to avoid causing offence to them, but not at the expense of the truth. If consistent with integrity and the patient’s best interests, I would use my best efforts to avoid causing offence, for example by avoiding using sex-specific pronouns altogether. However ultimately, if asked a direct question, I would give the truthful answer to the best of my knowledge and belief. In any event, I cannot directly or indirectly promote a falsity by using a pronoun which does not pertain to a person’s real sex.

I am aware that my views are seen by some as controversial, if not criticised as ‘transphobic’. I wholly reject any such criticisms.

However, I acknowledge that it is a matter for the GMC to determine whether my professional fitness to practice is impaired by my position as stated above. Hence is this self-referral.

Dr David C. Mackereth MBChB.