

Lesbian Persistence

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Dame Annie Hudson
Chair, Independent Review of Social Work Regulation

By email to:
socialworkregulation.review@education.gov.uk

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Dear Dame Annie Hudson

Consultation Response from Lesbian Persistence on the Independent Review of Social Work Regulation

Lesbian Persistence is a grassroots organisation open to Scotland-based lesbians who believe in sex-based rights. We engage with national and international organisations, to provide a lesbian perspective, and to advocate for lesbian rights and for our voices to be heard.

In the context of the Independent Review of Social Work, we have members who are social workers, who work with and manage social workers. Some of our members also have experience of living and working across the United Kingdom.

In setting out our position on the Independent Review, we have made use of our members collective experience and knowledge in campaigning politically for the rights of lesbians to express themselves fully without fear of repercussions, to act in ways consistent with their own professional codes of conduct, and to speak out politically when there are issues of importance to the lesbian women of today and in the future.

Broadly, speaking our concerns are as follows:

1 By **Targeting and harassing lesbian and/or gender critical social workers** because of their gender-critical views, Social Work England has not only failed in its duty to protect the rights of practising social workers to speak freely on topical safeguarding issues of our time, but has also contributed to damaging the public perception of the role that social workers play in safeguarding the public, arguably one of the most critical elements of any social worker's job and function

2 The **failure of Social Work England to provide an evidenced-based position on the harmful medicalisation** of children and young people experiencing what is commonly known as Gender Dysphoria has harmed the development of children and young people, 70% of whom, had they not been medicalised, would have simply grown up to be lesbian or gay¹. Some of this damage will continue to unfold in the lives of adults who have been unnecessarily medicalised, and the thousands of young lesbian women who have been encouraged to consider themselves as male or masculine, instead of the healthy normal lesbian young people they are. The absence of intervention has also led to a culture of silence within the profession where social workers are fearful of speaking out about such harmful practices. There is also evidence of a failure to adapt to a changing world, post covid, which means that young lesbian women, and the lesbian women within the Social Work workforce have been told a narrative that harms their healthy functioning and development.

¹ Cass Review,
<https://webarchive.nationalarchives.gov.uk/ukgwa/20250310143933/https://cass.independent-review.uk/home/publications/final-report/>

Failure to protect workers and safeguard lesbians

Following the Sullivan Review², and recent guidance from the Equality and Human Rights Commission (EHRC), Social Work England³ eventually agreed to adopt data categories which are more closely linked to the Equality Act 2010 definition of sex and gender reassignment, rather than some lobbyist's preferences for the vague and harmful transgender based definitions. It is disappointing that it took guidance from the EHRC to change this practice given the role and function of Social Work England in encouraging and supporting the elimination of prejudice and discrimination against lesbians.

Furthermore, it appears that despite making this public pledge, the survey mechanism for this Independent Review of Social Work Regulation uses an equality monitoring process that continues to contravene this new standard in upholding the Equality Act 2010. See screen shots below.

Question PC02. What is your sex/gender?

(Required)

☐ Female

☐ Male

☒ Non-binary

☐ Prefer to self-describe (please state below)

☐ Prefer not to say

☐ Not applicable

Question PC03. Is your gender identity the same as the sex you were assigned at birth?

(Required)

☐ Yes

☐ No

☒ Prefer not to say

☐ Not applicable

Neither of these questions is consistent with what Social Work England have reported is a change in practice to how data is gathered,⁴ and this leads us to the conclusion that the practice of monitoring this data must also be flawed. This affects the organisation's ability to understand and meet the needs of lesbian women.

Targeting Social Workers and the effect on Child Safeguarding practices and public perception of Social Workers

- transitioning young lesbian children and young people and targeting professional social workers who raise concerns about the current trend in gender identity ideology. The case of Rachel Meade⁵ against Social Work England and her employer, Westminster City Council for the sanctions imposed on her after she shared what is commonly referred to as

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<https://www.gov.uk/government/publications/independent-review-of-data-statistics-and-research-on-sex-and-gender>

3

<https://www.socialworkengland.org.uk/news/social-work-england-will-proceed-with-proposed-changes-to-their-registration-rules/>

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<https://www.communitycare.co.uk/2025/08/18/regulator-drops-requirement-for-social-workers-to-report-gender-identity/#:~:text=Social%20Work%20England%20will%20instead%20ask%20practitioners,gender%20identity%20when%20registering%20with%20the%20regulator.>

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<https://sex-matters.org/case-briefings/rachel-meade-v-westminster-city-council-and-social-work-england/>

“gender-critical views” on her private Facebook page. Such beliefs were found to be protected under the Equality Act see Forstater 2022) and sanctioning them is unlawful and discriminatory on the grounds of belief. Furthermore, the sanctions were considered by the Employment Tribunal to have infringed on Meade’s human right to freedom of thought and expression.

– The Social Work England’s Professional Standards state

As a social worker I will

1.2 Respect and promote the human rights, views, wishes and feelings of the people I work with, balancing rights and risks and enabling access to advice, advocacy, support and services.

1.5 Recognise differences across diverse communities and challenge the impact of disadvantage and discrimination on people and their families and communities.

1.6 Promote social justice, helping to confront and resolve issues of inequality and inclusion.

3.1 Work within legal and ethical frameworks, using my professional authority and judgement appropriately.

4.3 Keep my practice up to date and record how I use research, theories and frameworks to inform my practice and my professional judgement.

4.4 Demonstrate good subject knowledge on key aspects of social work practice and develop knowledge of current issues in society and social policies impacting on social work.

4.5 Contribute to an open and creative learning culture in the workplace to discuss, reflect on and share best practice.

5.0 I Will not

5.1 Abuse, neglect, discriminate, exploit or harm anyone, or condone this by others.

5.5 Treat someone differently because they’ve raised a complaint.

5.6 Use technology, social media or other forms of electronic communication unlawfully, unethically, or in a way that brings the profession into disrepute.

6.1 Report allegations of harm and challenge and report exploitation and any dangerous, abusive or discriminatory behaviour or practice.

6.5 Raise concerns about organisational wrongdoing and cultures of inappropriate and unsafe practice.

The inconsistency of a worker(s) being subjected to public shaming over her gender critical views when her own code of conduct not only allows for, but obliges her to speak out against harmful practices, and to do so in a way which does not undermine public trust and confidence, is at odds with the manner in which Social Work England pursued their case against her. Given the scale and impact of public debate on this topic, it could be argued that Social Work England failed in its duty to uphold the Equality Act, and more significantly, has failed to act in the best interests of children and young people swept up in what is now considered to be a harmful ideological trend that harms the healthy development of lesbians.

A summary of the Meade case⁶ as reported via Sex Matters citing the Employment Tribunal’s judgement concluded:

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<https://sex-matters.org/case-briefings/rachel-meade-v-westminster-city-council-and-social-work-england/>

- Social Work England allowed its processes to be subverted to punish and suppress the Claimant's lawful political speech. [paragraph 86]
- "We [The Employment Tribunal] consider it wholly inappropriate that an individual such as the claimant espousing one side of the debate should be labelled discriminatory, transphobic and to pose a potential risk to vulnerable service users." [paragraph 279]
- "It is apparent that the views expressed by the Claimant were not extreme but rather represented her expressing her opinion in an ongoing public debate." [paragraph 278]
- "The fact and duration of her suspension had a very profound effect on her, and would inevitably have fundamentally eroded her dignity, given that her career was very important to her." [paragraph 240]

SWE did eventually overturn its finding of impaired Fitness to Practice but this points to a number of concerning failures by Social Work England with regard to its core functions under the Children and Social Work 2017. Specifically, if a social worker cannot contribute to an ongoing public debate about the effects of any, but in this case, gender-identity ideology, then how can she/he evidence an ability to uphold ethical practice, raise concerns about organisational wrongdoing and potential harm to children and young people.

To remedy this, it would have been helpful if the risk registers, position papers, briefing and training and development for staff and managers had been developed by Social Work England to take account of what has been regarded by many practicing social workers, lesbians and heterosexual, as an extremely damaging period of gender-identity ideology seeping into SWE as a public institutions with few checks or balances.

The failure of Social Work England to provide an evidenced-based position on the harmful medicalisation

In the past, it would not have been rare to see social workers at the forefront of speaking out against ideologies that harm children and young people, yet in the past decade there is evidence of a failure to consider the existence of gender identity ideology or to recognise the scale and prevalence of how such views have influenced society, our children and young people and their carers and social work practice. A summary of the professional and institutional capture of Social Work is provided by Transgender Trend⁷ and the following are excerpts relevant to effects of capture on children who are looked after.

"The figures are stark. A study of Tavistock GIDS referrals 2009 – 2011 found:

- *Looked after children make up 0.58% of the general population but 4.9% of GIDS referrals.*

Adopted children account for another 3.8% of referrals. (Gender Dysphoria in looked-after and adopted young people in a gender identity development service [Matthews et al 2019](#))

The Cass Review final report documented the percentages from a systematic review (Taylor et al: Patient characteristics):

- *loss of parent through abandonment resulting in adoption (1-8%), foster care (1-12%) or children's home placement (0.5 – 5%).*

The Review also included figures from the Tavistock GIDS:

However, a review of the first 124 cases seen by GIDS (Di Ceglie et al., 2002) found that just over a quarter of all referrals had spent some time in care and nearly half of all referrals had experienced living with only one parent. It showed that 42% of the children covered by the audit experienced the loss of one or both parents, mainly through separation; 38% had family physical health problems; and 38% had family mental health problems. Physical abuse was documented in 15% of cases. [p. 94]"

⁷ <https://www.transgendertrend.com/social-work-history-ideological-capture/>

This data illustrates not only that protecting children from gender-identity ideology should have formed part of the safeguarding activities of Social Workers and Social England, but it also points to the fact the children and young people in the care of the local authority were at risk of institutional harms arising from the organisation's approach to gender dysphoria. Children and young people who are or may grow up to be lesbian or gay are not there to validate the needs and feelings of the adult world around them. Indeed, it is a social worker's duty to protect children and young people from harms they should not have to suffer, but do, often by virtue of their age, family dynamics, poverty, exclusion, and the many other factors affecting the healthy development of children.

Furthermore, evidence from a review of Hannah Barnes' book⁸ Time to Think illustrates that a review of the Tavistock data from child patients seeking help for gender dysphoria, that 70% of children and young people had comorbidities in terms of their mental health. 35% of children were on the autism spectrum, and 10% of children referred to the Tavistock had a parent on the sex offenders register⁹.

It would appear that as a profession Social Work lacked professional curiosity into this trend and would benefit from a renewal of systems and practices to encourage evidence-based practice.

It is also likely that Social Work England found itself behind the curve of the sheer volume and influx of online activity that filled the minds of impressionable young lesbian women at a time of lockdown. This failure to recognise the effects of near constant online life for young people remains a safeguarding concern arising from the covid/post covid era.

Our Ask

We appreciate that as a learning, professional organisation, Social Work England is undertaking this review to improve standards in social work practice and to support more effective regulatory functions. In that regard, Lesbian Persistence would make the following recommendations:

Social Work England should,

1. Where a plurality of views is likely on a topic of public interest such as gender identity, or where such a topic has the potential to create a hostile, degrading or harmful effect on the lives of lesbians, including young people whose sexual orientation is not yet formed or fixed, that
 - a. develops and promotes a better understanding into the needs of lesbians such that the effects of pursuing a particular strategy is understood prior to actions being taken against individual workers
 - b. accurately identifies the risks to young people, social workers, and the public image of the profession, and supports individuals in governance terms by a risk register with mitigation
2. Foster and encourage professional debate in a culture that is tolerant of difference, and understand its full range of functions in relation to the needs of lesbians in the workplace and in safeguarding practice.
3. Review a wider range of evidence based practice as it affects or has the potential to affect lesbians among the population that is served by social workers and the workforce.
4. Ensure that, for children and young people who are looked after, where action has the potential for institutional harm a duty is placed on managers of social workers to evidence any given course of action which has potentially life changing consequences.
5. Uphold the Equality Act 2010 as it is, and not as some would wish it to be, as it relates to all functions within Social Work England.

⁸ <https://pmc.ncbi.nlm.nih.gov/articles/PMC10325606/>

⁹

<https://childprotectionresource.online/cafcass-guidance-on-working-with-children-and-gender-identity/>

We would welcome the opportunity to contribute to future research and data gathering exercises that evidence the needs of lesbians. Thank you for taking the time to read and understand our position. We hope that our contributions assist in taking forward restorative actions for the benefit of children and young people and lesbians in the social work workforce.

Sally Wainwright

For and on behalf of Lesbian Persistence