



Written by [Selwyn Duke](#) on April 19, 2022

Trans-insanity: Male U.K. Cops “Identifying” as Women May Strip-search Female Suspects

Just recently, a man placed in a women’s prison because he “identified” as female impregnated two inmates. That happened in New Jersey. But nearer to the old Jersey, in Britain, men claiming womanhood now have yet another opportunity:

If they’re police officers, they’ll be allowed to strip-search female suspects — and anyone objecting may be accused of a “hate crime.”

The *Daily Mail* [reports](#) on the story:

Female suspects can be strip-searched by police officers who were born male but identify as women — and could be accused of a hate crime if they object....

New guidelines issued to forces around the country state: “Chief Officers are advised to recognise the status of Transgender colleagues from the moment they transition, considered to be, the point at which they present in the gender with which they identify.

“Thus, once a Transgender colleague has transitioned, they will search persons of the same gender as their own lived gender.”

The controversial advice, issued by the National Police Chief’s Council (NPCC) — the body representing British police chiefs — says it may be “advisable” to replace the person carrying out the search if the detainee objects, but adds: “If the refusal is based on discriminatory views, consideration should be given for the incident [to] be recorded as a non-crime hate incident unless the circumstances amount to a



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recordable crime.”

If you were wondering earlier how a MUSS (Made-up Sexual Status, aka “transgender”) man can impregnate a woman, as in the [aforementioned New Jersey case](#), the answer is in the above:

Though “transitioning” isn’t actually possible because no one can become the opposite sex, the term no longer refers only to taking cross-sex hormones and having mutilative genitalia surgery. Rather, the individuals simply have to “present in the gender with which they identify.”

So the true commitment of body alteration is passé — you merely have to claim you’re the opposite sex and, in the British police’s case, have a doctor’s note verifying you’re “gender dysphoric” (GD).

The kicker: There is no authentic medical test for GD — no blood chemistry test, no identifiable genetic marker, no brain scan. The diagnosis is based solely on *feelings*.

Thus, if a person goes to a doctor and states, to use today’s (inaccurate) psychological terminology, that he has “strong and persistent feelings of cross-gender identification that have lasted longer than six months,” he can be labeled gender dysphoric. It’s as legitimate a diagnostic method as that of a cardiologist who, without performing any medical tests, “confirms” you have heart disease simply because you have persistent feelings that you do.

Yet far from inspiring a malpractice suit, this fanciful, feelings-over-facts standard has in Britain (and elsewhere) the approval of law. As commentator Andrea Widburg [informs](#):

Understanding how low that “transition” bar is requires looking to England’s [Gender Recognition Act of 2004 \(as amended\)](#). The act allows so-called “transgender” people to apply for a Gender Recognition Certificate, which then “proves” they are the claimed sex.

The requirements for qualifying are simple. The person must convincingly prove that he, she, or it

- (a) has or has had gender dysphoria,
- (b) has lived in the acquired gender throughout the period of two years ending with the date on which the application is made,
- (c) intends to continue to live in the acquired gender until death, and
- (d) complies with the requirements imposed by and under section 3.

To comply with section 3, the application must provide a detailed report from a physician or psychologist practicing in the gender dysphoria field affirming that the person has gender dysphoria. As we’ve all seen with children in America, that’s an easy call for many of these “health” practitioners. Just as to a hammer everything is a nail, to gender specialists, everyone claiming gender dysphoria has it. Under the act, it’s irrelevant if the applicant has had surgery modifying sexual characteristics, although practitioners can include the details in the report.

And that’s it: in Britain, to obtain a Gender Recognition Certificate, men are not required to take estrogen or get gelded, while women are not required to take testosterone and get mastectomies. All they have to do is tell a convincing tale.



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Thus are heard stories such as that of Scott (aka “Lia”) Thomas, the MUSS University of Pennsylvania swimmer who made waves competing against women and breaking their records. As Breitbart [wrote](#) in January, “Thomas, who has claimed to have ‘transitioned’ to being a woman, has never gone through any surgical procedures and is still fully endowed with male genitalia. And according to reports, Thomas’s parading around in locker rooms with male genitalia has upset some of the natural-born female team members, the *Daily Mail* reported.”

“‘It’s definitely awkward because Lia still has male body parts and is still attracted to women,’ the unnamed source told the *Mail*, adding that Thomas tells teammates that he is still attracted to women,” the site continues.

So these women felt uncomfortable, just as many (if not all) who’d be strip-searched by a man surely would. This brings us to a matter almost never mentioned in these controversies:

Since this is all about feelings — they’re the GD diagnosis’ basis, and heard is how MUSS individuals mustn’t *feel* excluded — why do the feelings of a minuscule minority take precedence over those of a majority (women)? “Whatever happened to the good of the many outweighing the good of the few?” one could ask.

In reality, though, enabling and perhaps exacerbating people’s psychological problems does them no good at all. Love means giving people what they need — not necessarily what they want.



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