



FOR FAITH. FOR JUSTICE.

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Roadmap for Today

Session 3: Protecting Youth from Gender Affirming Care

Session 4: From Parents to the Legislature – What Can We Do?

TERMINOLOGY

Gender Affirming Care

TERMINOLOGY

Gender Affirming Care

VS.

"Gender Transition" Drugs and Surgeries

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A growing number of the children receiving care at the 100plus gender clinics across the United States are opting for
medical interventions – puberty-blocking drugs, hormones
and, less often, surgery. And they are doing so even though
strong scientific evidence of the long-term safety and
efficacy of these treatments for children is scant

Reuters Special Report (Nov. 18, 2022)

TRANSITIONING CHILDREN

SOCIAL MEDICAL

Social Gender Transition

- 1. Names / Pronouns
- 2. Dress / Behavior
- 3. Sex-Segregated Spaces & Activities
- 4. Identification Documents

WATCHFUL WAITING

VS

AFFIRMATION TREATMENT

WATCHFUL WAITING

VS

AFFIRMATION TREATMENT

Treat accompanying psychological issues

"Affirm" child's identity

Discuss gender norms

Begin social and medical transition

What is Medical Transition?

- Puberty blockers
- Lifelong cross-sex-hormones (testosterone for females; estrogen for males)
- Mastectomy or breast implants
- Removal of ovaries or testes
- Hysterectomy
- Surgical removal and revision of sex organs

Long-Term Consequences

- Arrest of a normal developmental process (puberty)
- Delayed brain development
- Irreversible physical changes
- Medical complications/ drug side effects
- Surgical complications
- Infertility

WATCHFUL WAITING

VS

AFFIRMATION TREATMENT

Dysphoria disappears in 80-95%

Dysphoria disappears in <20%

PHYSICAL RISKS

Drug side effects

Sterilization

Surgical complications

Loss of sexual response

Risks of lifelong reliance on cross-sex hormones (strokes and cardiovascular issues; bone/skeletal impairments)

MENTAL HEALTH RISKS

Depression 20%

Anxiety 10%

Suicidal ideation 11%

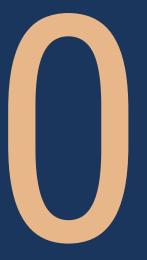
Suicide attempts 6%

Mental health services 16%

MENTAL HEALTH RISKS	Depression	20%	Trans Youth 50%
	Anxiety	10%	27%
	Suicidal ideation	11%	31%
Suicide attempts		6%	17%
Mental health services		16%	46%



suicide rate for fully transitioned individuals



of studies showing that affirming children reduces suicide, prevents suicidal ideation, or improves long-term outcomes vs. watchful waiting

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Therapy for young children that encourages transition cannot be considered to be neutral, but instead is an experimental procedure that has a high likelihood of changing the life path of the child, with highly unpredictable effects on mental and physical health, suicidality, and life expectancy.

Dr. Stephen Levine Founder, Case Western Reserve Univ. Gender Identity Clinic

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No one has a right to harm children.

Montana is protecting kids from harmful and unnecessary medical procedures pushed by politicized medical associations and interest groups.



Health authorities or medical associations in the following countries are working to limit medical transition for minors:

- United Kingdom
- Sweden
- Finland

- New Zealand
- Australia
- France (starting process)



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