

PINK or BINE?

Guiding Parents Through the Transgender Issue

by Brittany Farrell

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he excitement that accompanies a gender reveal party invitation is nearly universal. Siblings, grandparents, aunts, uncles, and friends gather to celebrate the joy of new life and focus on one of life's most basic facts—the human species is comprised of males and females. Shortly after finding out a new human being has come into existence, but long before knowing that being's personality or preferences, ultrasound technicians and blood tests uncover whether this new creation is a boy or a girl. That determination is a scientific fact. No matter how badly mom and dad wanted a "Momma's boy" or "Daddy's little princess," nature speaks a truth with facts: Junior is male or female, and his or her body tells the tale.

Over the last decade or so, these facts of life have been seen less as facts and more as suggestions at best—and shackles—at worst. A combination of misguided, but often well-intentioned groups have tried to erase the facts of life and expose children as young as possible to the idea that sex is changeable and dependent on nothing more than feelings. Many parents and adults who work with and care about children are justifiably concerned at this growing trend to push the idea of changeable genders and force gender affirmation at earlier and earlier ages, particularly in schools.



A surprising combination of groups, including Family Policy Alliance, The Heritage Foundation, The Kelsey Coalition, Parents of ROGD Kids, and Women's Liberation Front, have answered the pleas of desperate parents for a resource to help navigate these increasingly intense and dangerous waters. Despite their sometimes strong areas of disagreement, these unlikely partners have a shared concern: the negative consequences that result when society regards bodily sex as irrelevant. NC Family hopes that the following introduction to "Responding to the Transgender Issue: Parent Resource Guide" will give parents the confidence to have important conversations with both their children and school leaders, while better understanding the role of science and parental rights on the topic of transgenderism. Like many Americans, the authors

of this guide believe that schools, adults, and children need more information

and more empowerment to properly respond on the topic of transgenderism. This guide can help readers understand the consequences of the transgender trend and its implications in schools, as well as explain parental and constitutional rights and encourage parents, communities, and schools to work together.

Words Have Meaning

One difficulty in discussing or considering gender identity, rather than biological sex, is that gender identity is an individual's self-perceived or desired status as a male, female, both, or neither. Therefore, it is subject to change over time, making it impossible for a stable set of guidelines, rules, or parameters to govern its impact on everything from language to athletics. Sex, on the other hand, has natural limitations and advantages, because it is unchangeable.

Additionally, discrimination is a term heard often in discussions related to gender policies. Discrimination is the "recognition and understanding of the differences between one thing [or person] and another," and can sometimes involve "the unequal or unfair treatment of a person based on one or more personal characteristics." Boys and girls are different. Molecular biology—not feelings, hormones, or surgery—determine whether a member of the human species is male or female. It is not bigotry to acknowledge the biological differences between men and women.

The Facts Of Life

Increasingly today, personality diversity is squashed in favor of gender stereotypes, often by the very people who claim to disbelieve in gender stereotypes. Rarely do children's personalities and preferences at a given moment completely conform to the societal expectations for their sex. Certainly, children should not be led to fear that their unique preferences indicate a need to change their identity or their bodies.

Sex stereotypes vary between cultures and historical eras, and conformity to them is not an accurate indication of one's biological identity. Boys and girls have a wide variation of personality traits and preferences that in no way contradict their sex. To the contrary, encouraging kids in their nonstereotypical interests may help them to understand that there is no rigid or fixed way to be a boy or a girl.

	AFFIRMATIVE MODE Examples	Ages	Risks
ocial Transition	Change hairstyle, clothing, name, pronouns, access restrooms of the opposite sex	Toddlers to adults	Increases likelihood of persistence
Puberty Blockers	Gonadotropin-releasing hormone analogs such as leuprolide and histrelin	Early puberty, around 9-11	Brittle bones, joint problems, ³² impaired memory. ³³ Puberty blocked kids go on to use cross-sex hormones in nearly 100% of cases, ³⁴ which causes permanent sterility.
Cross-Sex Hormones	Testosterone for girls, Estrogen, plus androgen inhibitor for boys	Around 14 to adult	Sterility if used after puberty blockers. For women: lowered voice, weight gain, balding, possible cardiova cular disease, type 2 diabetes, bone density loss, and increased risk of cancers (breast, cervical, ovarian, and uterine). For men: breast growth, gallstones, weight gain, blood clots, sexual dysfunction, possible cardio- vascular disease, type 2 diabetes, and breast cancer. ³⁵
Sex Reassignmer Surgery	"Top" surgery: Double mastectomy or breast implants; "bottom" surgery Alterations to or removal of, genitalia or reproductive organs	Around 14 to adult	Loss of sensation, infections, irreversibility. Post-surgical complications to genital SRS are common in both men and women. ³⁶
Legal Document Changes	Changing sex recorded on birth certificates, school records, or other official identification	Any age	Inaccurate recording of vital statistics; mistaken sex in medical care. www.GenderResourceGuide.com 23

The "gender affirmative" model that is being increasingly used in schools and by many medical professionals enables and encourages false beliefs that children have about themselves. Parents and medical professionals do not encourage an anorexic child to lose weight, even when she is insistent that she is overweight. Instead, as Dr. Ryan Anderson points out in his book When Harry Became Sally, children "need medical professionals who will help them mature in harmony with their bodies, rather than deploy experimental treatments to refashion their bodies."1 Sadly however, too many children who express individuality in play and personality find themselves subjected to the opposite of this approach.

There are no long-term studies to support medical interventions for children who are confused about their sex, yet parents are increasingly being told² by medical professionals³ to assume that the best way to treat⁴ their child's transgender feelings is with social and medical transition. Doctors are now under pressure⁵ from transgender activists to enable medical transition without questioning the patient's motivation for doing so, even when the patient is a child.6

2 Diane Ehrensaft, "Gender nonconforming youth: current perspectives," Adolescent Health, Medicine and Therapeutics 8, (May, 2017): 57-67, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5448699/. 3 Jason Rafferty, et al., "Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents,' American Academy of Pediatrics, 142, no. 4, (October 2018), https:// pediatrics.aappublications.org/content/142/4/e20182162..info; See also: Guidelines for Psychological Practice With Transgender and Gender Nonconforming People," American Psychological Association, 70, no. 9, (2015), https://www.apa.org/practice/ guidelines/transgender.pdf. 4 Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People, 7th Version," The World Professional Association for Transgender Health (WPATH), (approved September 14, 2011), https://www. wpath.org/media/cms/Documents/SOC%20v7/SOC%20V7_English.pdf. 5 Jamie Doward, "Politicised trans groups put children at risk, says expert," The Observer, July 27, 2019, https://www.theguardian.com/society/2019/ jul/27/trans-lobby-pressure-pushing-young-people-to-transition. 6 Bob Withers, "In 20 years we'll look back on the rush to change our children's sex as one of the darkest chapters in medicine, says psychotherapist," Daily Mail, November 18, 2018, https://www.dailymail. co.uk/debate/article-6402003/amp/Well-look-rush-change-childrens-sexone-darkest-chapters-medicine.html?__twitter_impression=true.

The "gender affirmative" model enables and encourages false beliefs that children have about themselves.

In just seven years. there has been a nearly transgender identity to their 2,000% peer group, the number of increase transgender-identified was

Identifying as

transgender or

nonbinary may be

spectrum disorders.

Children with autism

spectrum disorders are

7 times more likely

linked to autism

to want to be the

opposite sex than the

Girls as young as 13

double mastectomies and boys as young as **17**

are undergoing

are undergoing full

genital sex

surgeries.8,

reassignment

general population.⁵

FAST FACTS

One study showed that

when a teen announces a

friends who also became

3.5

or a girl.

come to

their sex by

adulthood.4

Studies show that

100% of children

who use puberty blockers

will go on to use cross-sex

Science demonstrates that there are two

sex chromosomes-two X chromosomes in

every single cell in our bodies.1

females and an X and a Y in males—in nearly

hormones, leaving them

permanently sterile.7

accept

per group.2

Up to **98%**

of children who struggle

with their sex as a boy

in children seeking treatment for sexual identity confusion in the United Kingdom.³

After sex reassignment surgery, transgenderidentified people are nearly

times more likely to die from suicide than the general population 6



The long-term effects

of puberty blockers and cross-sex hormones have not been studied.10



Some transgender-



www.GenderResourceGuide.com

¹ Ryan T. Anderson, When Harry Became Sally

⁽New York: Encounter Books, 2018), 144.

Thus, children are being medicalized based on a selfdiagnosis. As a result, some individuals⁷ are reporting⁸ that they were offered prescriptions for cross-sex hormones and referrals for surgery instead of appropriate psychological treatments.⁹

Physical and Mental Health

Before taking cross-sex hormones, puberty blockers are used to prevent secondary sex characteristics like breasts or facial hair from developing in children who are transgender-identified, so they can successfully mimic the opposite sex later in adolescence. **100% of children who use puberty blockers go on to use crosssex hormones, which leave them infertile.**¹⁰ Furthermore, puberty blockers have been observed to lower IQ¹¹, to increase depression symptoms,¹² and to harm bone development.¹³

Many young people who identify as transgender have a serious coexisting mental health diagnoses that may be leading them to identify as such.¹⁴ One study looked at mental health in 1,347 transgender and gender nonconforming youths retrospectively between 2006 and 2014 and found that these youths had 3 to 13 times higher rates of mental health conditions compared to youth who do not identify as transgender or gender nonconforming.¹⁵

A Level Playing Field

An entire resource could be written about the deleterious effects of the transgender movement on athletics. Basic quantifiable, biological facts make it clear that no amount of therapy—mental, hormonal, or surgical—can erase the physical differences between men and women. For example consider:

- Males' bone structure generally results in broader shoulders and larger feet and hands, granting an advantage in sports like volleyball, swimming, and basketball.^{16 17}
- Their larger hearts and lungs allow males to carry more blood and oxygen to the body's tissues.¹⁸
- Before hormone levels are interfered with medically, the average male body has four times more testosterone than the female body, bringing about increased muscle mass and strength, and increased bone size and density.¹⁹

Even more important than athletic competitions are athletic facilities. Good school policy will respect the physical differences between the sexes without resorting to an unverifiable gender identity as the determination of who can use certain bathrooms, showers, and locker rooms. Policies that strip girls of their right to privacy reinforce the notion they are not in control of who can see their bodies when they use intimate facilities.²⁰ With concern about invasion of privacy and sexual assault at an all-time high, it makes no sense to tell young women to drop their guard.

The primary concern related to facilities is not that transgender users will seek to harm anyone in the locker room, but rather that ill-intentioned criminals will take advantage of this crack in the door to prey on women. A 2018 study showed that there were three times more voyeurism offenses in Target retail stores after the public announcement of their mixed-sex restroom and fitting room policy.²¹ Furthermore, a UK investigative report by *The Times* found that of 134 reported incidents that included voyeurism, harassment, sexual assault, and rape in swimming pool and sports center changing rooms, 120 were committed in mixed-sex spaces.²²

⁷ Olivia Loveridge-Greene, "'My biggest mistake' Transgender man regrets sex op 15 years ago," Daily Star, November 4, 2018, https://www. dailystar.co.uk/real-life/740477/transgenderregret-sex-operation-heartache-lee-harries-debbie-karemer/ amp?__twitter_impression=true.

^{8 &}quot;Female detransition and reidentification: Survey results and interpretation," *Guide on Raging Stars*, accessed on December 21, 2018, https:// guideonragingstars.tumblr.com/post/149877706175/ female-detransition-and-reidentification-survey.

⁹ Ryan Flanagan, "Ontario transgender care doctor no longer allowed to practise medicine," *CTVNews*, October 10, 2018, https://www.ctvnews.ca/health/ont-transgender-care-doctor-no-longer-allowed-to-practise-medicine-1.4128071.

¹⁰ Polly Carmichael, et al., "Gender Dysphoria in Younger Children: Support and Care in an Evolving Context", 2016 WPATH Symposium Amsterdam, World Professional Association for Transgender Health, June 19, 2016, ("Persistence was strongly correlated with the commencement of physical interventions such as the hypothalamic blocker (t=.395, p=.007) and no patient within the sample desisted after having started on the hypothalamic blocker. 90.3% of young people who did not commence the blocker desisted.") http://wpath2016.conferencespot.or /62620-wpathv2-1.3138789/ t001 1.3140111/f009a-1.3140266/0706 000523-1.3140268. 11 Maiko A Schneider, et al., "Brain Maturation, Cognition and Voice Pattern in a Gender Dysphoria Case under Pubertal Suppression" Frontiers in Human Neuroscience, vol. 11, 528, (November 14, 2017), https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5694455/. 12 J. Macoveanu, "Sex-Steroid Hormone Manipulation Reduces Brain Response to Reward," Neuropsychopharmacology, 41, no.4, (2016):1057-65, https://www.ncbi.nlm.nih.gov/pubmed?Db=pub med&Cmd=ShowDetailView&TermToSearch=26245498. 13 Christina Jewett, "Women Fear Drug They Used To Halt Puberty Led To Health Problems," Kaiser Health News, February 2, 2017, https://khn.org/ news/women-fear-drug-they-used-to-halt-puberty-led-to-health-problems/. 14 Riittakerttu Kaltiala-Heino, et al., "Gender dysphoria in adolescence: current perspectives. Adolescent health, medicine and therapeutics," Adolescent Health, Medicine and Therapeutics 9, (March, 2018): 31-41, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5841333/. 15 Trans youth more often diagnosed with mental health conditions," Kaiser Permanente, April 16, 2018, https://about. kaiserpermanente.org/our-story/ health-research/news/ transgender-youth-more-often-diagnosed-with-mental-health-condit.

^{16 &}quot;Biological sex differences: bones & muscles," Fair Play For Women, July 7, 2017, https://fairplayforwomen.com/ biological-sex-differences/?fbclid=IwAR0CVB7UYNjIUJO2 edQfDnuWWDkqc9nNOuvk5sPW7Wh5AgVojD_hemUEE10. 17 "The Anatomical and Physiological Reasons for Differences in Performance Between Female and Male Athletes," Femuscle Blog, October 15, 2015, https:// femuscleblog.wordpress.com/2015/10/15/the-anatomical-and-physiologicalreasons-for-differences-in-performance-between-female-and-male-athletes/. 18 Doriane Lambelet Coleman, "Sex, Sport, and Why Track and Field's New Rules on Intersex Athletes Are Essential," New York Times, April 30, 2018, https://www.nytimes.com/2018/04/30/sports/track-gender-rules.html. 19 "Testosterone," Allina Health, accessed on February 28, 2019, https://wellness.allinahealth.org/library/content/1/3707. 20 Alexis Lightcap, "My high school's transgender bathroom policies violate the privacy of the rest of us," USA Today, November 29, 2018, https://www.usatoday.com/story/ opinion/voices/2018/11/29/ transgender-bathroom-debate-privacy-school-lawsuit-column/2123946002/. 21 "New Study Shows Gender-Inclusion Policy at Target Stores Associated with Increased Sexual Violence," Woman Means Something, accessed December 21, 2018, http://womanmeanssomething.com/target-study-press-release/. 22 Andrew Gilligan, "Unisex changing rooms put women in danger," The Times, September 2, 2018, https://www.thetimes.co.uk/article/ unisex-changing-rooms-put-women-in-danger-8lwbp8kgk.

Parents As Primary

Parents are increasingly finding out that their parental rights may be ignored, overridden, or even terminated if they do not toe the gender affirmative line. Still, the U.S. Supreme Court has found that parents have a fundamental right "to make decisions concerning the care, custody, and control" of their children.²³ Parents have the right to teach their children that there is a difference between the sexes,²⁴ and they must be proactive on this issue. Depending upon individual state laws, parents may even have the right to control their child's exposure to sensitive materials like transgender-themed books and curricula in the classroom.²⁵ ²⁶

Here are some tips for parents as they exercise their rights:

- At school
 - Review the classroom curricula that your child will be using for the year, especially asking to see anything that pertains to gender, sexuality, intimate relations, family life issues, and bullying.
 - Request notification when gender, sexuality, diversity, or family life issues are going to be presented to your child in the classroom, during school presentations, or during anti-bullying assemblies.
 - If you encounter concerning material, express your concern and displeasure to your teachers and school administrators, including the principal, school board members, and superintendent. Encourage like-minded parents to do the same. A sample letter is included in the full resource guide.

• At home

- Be overly communicative in expressing your unfailing love for your children and their uniqueness as individuals. Discuss the incredible specialness of boys being boys and girls being girls, and how amazingly different and similar individuals of each sex are.
- Stress kindness and love, not just in your family relationships, but also in how your own children view and treat others. No child should be bullied, belittled, or teased for being different in any way. Encourage your children to love their classmates the same way you love your children.

Take Heart

How we approach the transgender issue in our schools will make all the difference in the lives of all children, and especially those who are struggling to accept their bodies as male or female. Every child deserves to hear that there is nothing they need to change about their body in order to gain acceptance from their peers or the adults in their lives. Young people need to know they are beautiful just the way they are, and there is no one better positioned to bring this positive view of human identity to public schools than parents.

By respectfully speaking out, parents can help to ensure that school boards hear what the research makes clear: our sex does not change according to our feelings, and school policy that ignores that fact ends up hurting our kids. Many school boards are pressured by outside activist organizations to pass policies that treat bodily sex as irrelevant, but parents are the real stakeholders in a school, not activist groups.

Take heart knowing that objections to the transgender issue are coming from people across the political spectrum. This is not a "right" or "left" issue. Take courage, gather a community, and speak up—our children deserve nothing less.



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Thank you again to our friends at the Minnesota Family Council for compiling and publishing the Parent Resource Guide.





If you would like a copy of the full Parent Resource Guide, please mail this form to NC Family with an enclosed donation, or visit my.ncfamily.org/ParentResourceGuide and we will send one to you.

(North Carolina Family Policy Council, P.O. Box 20607, Raleigh, NC 27619)

Name Address Email Phone

²³ Troxel v. Granville, 530 U.S.57, 66 (2000), ("As our case law has developed, the custodial parent has a constitutional right to determine, without undue interference by the State, how to best raise, nurture, and educate the child."); See also *Wisconsin v. Yoder*, 406 U.S. 205, 233, (1972).
24 See generally *Pierce v. Society of Sisters*, 268 U.S. 510 (1925), (Parents and guardians have the right to direct the upbringing and education of children under their control.) https://scholar.google.com/scholar_case?case=609450 1649208458004&cq=pierce+v+soci-ety+of+sisters&hl=en&cas_sdt=6,244.
25 See generally *Meyer v. Nebraska*, 262 U.S. 390 (1923), (Recognizing a common law right to guide the education of one's children.) https://scholar.google.com/scholar_case?case=16175793893966 768030&cq=+Meyer+v.+Nebraska&chl=en&cas_sdt=6,243.
26 "Parents' Bill of Rights-for Public Schools," *True Tolerance*, accessed on August 10, 2019, https://truetoleran.wpengine.com/2012/parents-bill-of-rights-for-public-schools/.