



## Transgenderism: The World Turned Upside Down Brave Dissenters Discredit ‘Gender-Affirming Medical Care’ for Kids

In 1819, the celebrated American author Washington Irving published “Rip Van Winkle,” a short story about a Dutch-American colonial villager who, after drinking a magic potion, fell asleep only to wake up 20 years later. Having slept through the American Revolution, Van Winkle found his new world turned upside down. If someone fell asleep 20 years ago and woke up today, he would definitely find our world turned upside down.

Who would believe that in today’s America—and the whole Western world—people are arguing over whether young men and women, even children, can declare themselves members of the opposite sex and require that further sexual development be arrested through hormonal treatment or even castration for males or mastectomies for females? The dreamer awakened would be further surprised and perplexed by the fierce argument that biological males should be allowed to compete in women’s sports.

The world has indeed been turned upside down, and most observers of transgender activism today abhor what they see. It just does not meet the test of common sense. Sexual identity is a biological fact and saying otherwise does not alter that reality.

In May and June 2018, the *Mindszenty Report* did a two-part series on transgender ideology. Little did we know how rapidly this ideology would penetrate Western institutions and seduce countless young people. In March 2021, we described the Biden administration’s sweeping promotion of transgender rights, which has only increased since then. Fortunately, *a pushback is clearly taking shape, helped along by forces outside the U.S.*

A *Washington Post* poll in May 2023 revealed that close to 70 percent of U.S. adults opposed access to puberty-blocking medication for transgender children aged 10 to 14. Another 58 percent opposed access to hormonal

treatments for youth aged 15 to 17. Over 60 percent believed that transgender women and girls should not be allowed to compete with women and girls in sports at any level.<sup>1</sup> A newer 2024 poll by the NORC at U.Chicago found that 66 percent of U.S. adults believe trans-females should “never” or “in rare cases” get to compete against “cisgender” women.<sup>2</sup>

### Pope, Public Agree: Sex is Fixed

To his credit, *on March 25 this year Pope Francis signed off on a ringing condemnation of transgender ideology.* The document *Infinite Dignity*, issued by the Vatican’s Dicastery for the Doctrine of the Faith, declared both transgender surgery and surrogate motherhood to be grave violations of human dignity and of God’s plan for human life. It rejected the notion that one may change one’s biological sex. These were not new positions for the Catholic Church, but prior pronouncements were forcefully reaffirmed.

*The Catholic position that sex is not changeable is now shared by 65 percent of the American public,* based on a Pew Research Center poll released on June 6—up considerably from 53 percent in 2017. (The survey respondents were asked if whether someone is a man or a woman is “determined at birth.”)

Throughout the Covid-19 pandemic, Americans were told time and time again, “Trust the Science.” Transgender activists and supporters seldom chant “Trust the Science” today, because there is no persuasive science that supports the benefits of transgender medical treatment—puberty blockers or surgery—for kids identifying as transgendered.

In April 2024 Dr. Hilary Cass, former president of the British Royal College of Pediatrics and Child Health,

released an exhaustive study of the evidence for the benefits of medical treatment for transgender children. The 388-page study, known as the Cass Review, relied on extensive medical literature.<sup>3</sup> On the day of the release of the report, Dr. Cass wrote an op-ed in the *British Medical Journal* in which she summarized her findings, noting that she undertook her review in “full knowledge of the controversial nature of the subject, the polarization and toxicity of the debate, and the weakness of the evidence base.”<sup>4</sup>

## U.K. Leads Medical Resistance

Dr. Cass’s study was launched in 2020. Following her interim report in 2022, the University of York was commissioned by the National Health Service England to survey international medical literature and international guidelines for medical treatments for transgender youth. The resulting Cass Review, titled “Independent Review of Gender Identity Services for Children and Young People,” showed that international guidelines “lack rigor and transparency,” and the “rationale for early puberty suppression remains unclear.” Moreover, the “use of masculinizing/feminizing hormones in those under the age of 18 presents many unknowns, despite their long-standing use in the adult transgender population.”

The Cass Review presents a thorough review of the scientific evidence (or lack thereof) for hormonal or surgical treatment for children who identify as transgender. The full report’s main conclusions may be summarized as follows:

- There is no solid scientific basis for hormonal or surgical treatment for children identifying as transgender. The report states, “The reality is that we have *no good evidence on the long-term outcomes of interventions to manage gender-related distress.*”
- There needs to be an open discussion in the scientific community about transgenderism and best practices. “There are few other areas of healthcare,” the report observes, “where *professionals are so afraid to openly discuss their views*, where people are vilified on social media, and where name calling echoes the worst bullying behavior. This must stop.”
- *The use of puberty blockers as a form of treatment in Britain and Europe was based on a single Dutch study* concluding that such a treatment may improve psychological well-being for a narrowly defined group of children with gender incongruence. This study and the widespread use of puberty blockers as a form of treatment

did not weigh the risks and benefits of these life-changing decisions.

- The medical community needs further study of the outcomes of those identifying as transgender. Although some interviews with those who had transitioned indicated they were satisfied with their decisions, “*young adults looking back at their younger selves would often advise slowing down.*”
- Evidence is weak about the continuation of trans-identity. There is *no certainty that “children and young people will go on to have enduring trans-identity.”*
- *Adolescents identifying as transgender in the United Kingdom are primarily female and are growing in number.* A tracking study of adolescents in the years 2009-2016 showed that reported cases of sexual dysphoria in adolescent females rose from 15 cases in 2009 to 1,071 cases in 2016. The number of adolescent males rose from 24 to 426.
- “*For the majority of young people, a medical pathway may not be the best way to achieve*” better mental health.

## Europe Responds

The Cass interim report in 2022 drew broad attention in the U.K. and Europe, and the full 2024 report is expected to further the discussion. The influential British newsmagazine *The Economist* in its April 5, 2023 issue ran a ten-page article on the Cass study and other studies under the headline “The Evidence to Support Medicalized Gender Transitions in Adolescents is Worryingly Weak.”<sup>5</sup> The Cass Review’s final recommendations were endorsed by the National Health Service England and both the Conservative and the Labour parties in the U.K.

*The Economist’s* article went beyond the medical studies to provide examples of suffering caused by “gender-affirming care,” including the cases of three teenage American girls. A North Carolina girl who told her parents she was a boy struggled with anorexia and depression after a sexual assault. She began testosterone shots at the age of 17. A Nebraska girl had both breasts removed at the age of 16. A California girl had a double mastectomy at the age of 15 after taking testosterone and puberty blockers from age 13 following a sexual assault. All regretted their decisions—and they are not alone.

*The Economist* reported that gender dysphoria is rising primarily in wealthy Western countries. An estimated *42,000 American children were diagnosed with gender dysphoria in 2021, three times the count in 2017.* In Europe there are similar increases.

In Britain, Finland, France, Norway and Sweden, there has been a pronounced negative reaction to pharmacological and surgical treatments for gender dysphoria. Much of this began in response to the interim Cass report. An earlier Finnish review published in 2020 concluded that gender reassignment in children is “experimental” and that treatment by medical doctors should seldom proceed beyond psychological therapy. Swedish authorities found in 2022 that the risks of physical interventions—puberty blockers and surgery—“currently outweigh the possible benefits.”

In 2022, France’s prestigious National Academy of Medicine advised doctors to proceed with physical treatments with “great reserve” and “great medical caution.” In the U.K. the National Health Service closed down its only dedicated gender identity clinic for children and young people, the Tavistock Center, in March this year. The Norwegian Healthcare Investigation Board concluded in March 2023 that transgender surgeries, hormones and puberty blockers are experimental.<sup>6</sup>

Most surprising, in 2021 a Dutch team of researcher-clinicians that had conducted a 2016 study encouraging the use of puberty blockers, rejected its earlier study and warned medical doctors against “blindly adopting our research.” Thomas Steensma, one of the lead researchers on that team, told the press, “We don’t know whether studies we have done in the past can still be applied to this time. Many more children are registering [with gender dysphoria]. . .” but “*we believe parents and caregivers should fully realize the unpredictability of their child’s psychosexual outcome.*”<sup>7</sup>

## The American Debate

**I**n the United States, the debate over medical treatment for gender dysphoria is politicized—just as is every other issue related to transgenderism, from what goes on in the classroom to the sports field. The debate breaks along partisan lines, as might be expected.

At this point, *25 states have passed bans or restrictions on the use of cross-sex hormones, puberty blockers and surgery for minors.*<sup>8</sup> Trans activists see the bans as a suppression of human rights and ignore the changed medical recommendations in Europe. (As described above, a number of European nations have severely restrained such radical treatments, without adopting absolute bans.) Whatever the partisan rhetoric, there is no good scientific evidence supporting radical physical intervention for children and adolescents experiencing gender dysphoria.<sup>9</sup>

While early court challenges to such bans had some success in the U.S., more recently several higher courts have allowed the laws to go into effect. The U.S. Supreme Court will probably weigh in sooner or later.<sup>10</sup>

Trans activists have pressed their case in the states. Colorado, Illinois, Maryland, New Mexico and Minnesota have passed bills designed to protect transgender youth and health care professionals, allowing the prescription of puberty-blocker drugs and access to health care. California in 2022 passed a pro-transgender bill, declaring that California was a “refuge” state for transgender youth and their families. Last year, Oregon Democrats proposed a constitutional amendment to protect transgender care.

Following the passage of transgender medical protection legislation in Minnesota, Governor Tim Walz, a second-term Democrat, spoke at an LGBTQ rights rally, telling the crowd, “And I want to make note, not only do you belong here, you are needed here, you’re part of the fabric that makes Minnesota the best place to live in the country.” He boasted, “We are going to lead on this issue.”<sup>11</sup>

## Feds Strongly Push Trans Agenda

**M**eanwhile, *the Biden administration has continued to use the heavy hand of the federal government to press its pro-transgender agenda on many fronts, including health care.* In 2023 the White House boasted of 42 actions and policy initiatives in support of transgender people.

More recently, in early June the U.S. Department of Justice indicted Dr. Eithan Haim—a whistleblower surgeon who exposed Texas Children’s Hospital for secretly conducting transgender surgeries and treatments on minors—for alleged felony violations of a medical-records law. Both Dr. Haim and the fearless conservative activist Christopher Rufo, who helped expose the hospital scandal, deny that any patient confidential information was released. Many conservatives see the indictment as yet another piece of evidence of the selective weaponization of the Biden Justice Department against conservatives.

While some politicians and federal Cabinet members continue to support physical medical interventions, the American College of Pediatricians and allied groups calling themselves “Doctors Protecting Children” issued a declaration in June calling upon other American medical associations to abandon support for current medical interventions to treat gender-dysphoric children and adolescents.<sup>12</sup>

This declaration came after a Biden administration regulation under the Affordable Care Act became final in May, prohibiting discrimination by federally funded health care programs against transgender people, among other provisions.<sup>13</sup> The regulation contains no clear exemption for, say, religious hospitals that refuse to allow transgender surgeries.

In a congressional hearing in June, Rep. Mary Miller (R-IL) clashed with Health and Human Services Secretary Xavier Becerra over the administration's policy. Initially Becerra disputed Miller's characterization of the policy, but when pressed by Miller, he admitted, "If a health care facility is violating the law and not providing the service they're required to, they are not entitled to the resources."<sup>14</sup> The regulation is being challenged in court by several states.

## Never-Ending Polarization

**T**ransgender politics seem to permeate every aspect of our lives. Sometimes, for those with common sense, the debate has reached ludicrous heights. The Vermont Department of Children and Families found two Christian families unfit to foster or adopt any children. Why? Because these two families, who have already adopted five children between them, held a religiously inspired (and widely shared) belief that girls cannot become boys or vice versa. A lawsuit is challenging this ruling.

In addition, the courts have become a battleground for girls protesting trans-females participating in women's sports, female prisoners opposed to having males who self-identify as females in the same cells, and parents concerned with trans-education in their kids' classrooms. Numerous states are fighting a new Biden administration regulation that reinterprets the Title IX statutory ban on sex discrimination in federally funded education programs to also ban LGBTQ discrimination.

By ignoring or denying the paucity of scientific literature that supports physical intervention in treating minors for gender dysphoria, physicians, health care professionals, politicians and trans activists are betraying the first principle of good medicine: *Do no harm*. Instead, they pursue money-making opportunities and political agendas without a foundation in science. *Mutilation and sterilization of minors are not the answer.*

<sup>1</sup> <https://thehill.com/blogs/blog-briefing-room/3991685-majority-of-americans-oppose-gender-affirming-care-for-minors-trans-women-participating-in-sports-poll/>.

<sup>2</sup> <https://www.norc.org/content/dam/norc-org/pdf2024/norc-lgbtq+-health-equity-topline-final.pdf>. The NORC at U.Chicago was formerly known as the National Opinion Research Center.

<sup>3</sup> <https://cass.independent-review.uk/home/publications/final-report/>.

<sup>4</sup> <https://www.bmj.com/content/385/bmj.q814>.

<sup>5</sup> <https://www.economist.com/briefing/2023/04/05/the-evidence-to-support-medicalised-gender-transitions-in-adolescents-is-worryingly-weak>.

<sup>6</sup> Ibid. Also, see

<https://www.forbes.com/sites/joshuacohen/2023/06/06/increasing-number-of-european-nations-adopt-a-more-cautious-approach-to-gender-affirming-care-among-minors/?sh=6517d7a97efb>; <https://www.bbc.com/news/uk-62335665>; and <https://dailycaller.com/2023/03/10/norway-health-care-system-transgender-gender-affirming-care-evidence-based/>.

<sup>7</sup> <https://4thwavenow.com/2021/03/16/dutch-puberty-blocker-pioneer-stop-blindly-adopting-our-research/>.

<sup>8</sup> <https://www.hrc.org/resources/attacks-on-gender-affirming-care-by-state-map>; and [https://www.lgbtmap.org/equality-maps/healthcare/youth\\_medical\\_care\\_bans](https://www.lgbtmap.org/equality-maps/healthcare/youth_medical_care_bans).

<sup>9</sup> <https://www.city-journal.org/article/yes-europe-is-restricting-gender-affirming-care>.

<sup>10</sup> Jan Wolfe and Laura Kusisto, "High Court Pressed on Transgender Law," *Wall Street Journal*, May 16, 2024.

<sup>11</sup> <https://www.nprillinois.org/2023-04-21/minnesota-to-join-at-least-4-other-states-in-protecting-transgender-care-this-year>.

<sup>12</sup> <https://www.foxnews.com/health/american-college-pediatricians-issues-fiery-statement-condemning-child-gender-transition>.

<sup>13</sup> <https://www.kff.org/affordable-care-act/issue-brief/the-biden-administrations-final-rule-on-section-1557-non-discrimination-regulations-under-the-aca/>.

<sup>14</sup> <https://www.foxnews.com/politics/catholic-groups-pummel-hhs-secretary-becerra-after-heated-exchange-with-gop-lawmaker-on-transgender-surgeries>.

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