

Remove Gender Identity from the Equality Act

The Equality Act ([H.R.5](#)) proposes to redefine sex across all federal laws to include “gender identity,” an unprovable assertion based on one’s feelings. This bill, by amending the Civil Rights Act of 1964, will make “gender identity” a prohibited category of discrimination in public spaces.

This applies to all schools, colleges, therapists, and physicians. While laws protecting “gender identity” sound fair and may be well-intentioned, their [unintended harms](#) are quite serious.

Why is this anti-discrimination bill harmful?

Therapists and physicians may face legal repercussions merely for exploring reasons why a client or patient might wish to identify as the opposite sex. They will be legally required to affirm children's self-declared identities.

Meanwhile, increasing evidence shows that [many underlying factors](#) influence transgender identities: [mental health issues](#), [autism](#), [ADHD](#), [trauma](#), and [sexual confusion](#). A recent [CDC survey](#) found that 1 out of every 50 high school students identifies as transgender. [Preliminary research suggests this](#) is fueled by [peer and media influences](#).

A common, but non-evidence based, treatment protocol for children who identify as transgender consists of [puberty blockers and cross-sex hormones](#), which are known [to cause serious and irreversible side effects, including infertility](#). Physicians will be pressured to provide these risky medical treatments to all transgender-identifying children.

Secondary schools and colleges will be forced to treat students as the opposite sex based on entirely on how they self-identify. Secondary schools may be required to adopt policies that undermine parental rights. Administrators may change students' names and pronouns without parents' knowledge, and may include ["gender identity" curriculum](#) without parental consent.

Parents will be unable to find proper therapeutic support for their gender dysphoric children. The only legally permissible approach will involve automatic affirmation or fast-tracked medical intervention. Young people will gain easier access to life-altering hormones and surgeries, all without proper medical and mental health assessments. We will see more custody battles like [this](#).



We are parents of children who suddenly began identifying as transgender.

Some of our children are autistic, or have ADHD, and struggle to fit in with their peers. Many are intellectually gifted. Some appear same-sex attracted. Others have serious mental health issues.

When our children suddenly and unexpectedly announced that they were transgender, we were shocked; it seemed clear that something else was going on. Evidence of peer and online influences was abundant.

Influences are often right in our communities. In an attempt to foster acceptance of differences, some schools teach young students about being transgender. But this can and does lead vulnerable children to conclude that they were born in the "wrong body." Many of our sons and daughters learned about this for the first time at school, where transgender identities are common. When our children "came out" and requested name changes at school, we parents were not notified.

Therapy that explores possible causes of our children's distress is nearly impossible to find. When we tried to get help for our children, therapists told us that kids know who they are, and that our job as parents is to simply accept and "affirm" our children's new identities.

Some of us have been aggressively pushed to consent to hormonal treatments. We were not informed that these treatments cause serious side effects and that there are no long-term studies to support their efficacy.

Those of us with young adult children have watched helplessly as they received cross-sex hormones -- prescribed for lifetime usage -- at "informed consent" clinics. Some of our daughters have had mastectomies soon after deciding they were transgender. Many colleges encourage medical transitioning, and even offer these services as part of their health plans. Some of our children, within their first semester of college, became convinced they were transgender and needed to transition immediately. We have been blindsided.

And when we do voice concerns, we are labeled hateful, bigoted, and transphobic. Many compare us to parents who do not support their gay children, ignoring the obvious difference: being gay does not lead to surgeries or taking dangerous hormones for life.

We refuse to be silenced any longer. We are sharing our stories to help change the systems that have failed our kids.