



MO HB419, HB463, and HB540

Written Testimony from [Women's Liberation Front](#)

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SUPPORT for MO HB419, HB463, and HB540 – “Missouri's Children Deserve Help Not Harm” Act, “Missouri Save Adolescents from Experimentation (SAFE)” Act, and “Missouri's Children Deserve Help Not Harm Act”

Women's Liberation Front (WoLF) is pleased to have the opportunity to submit written testimony in support of MO HB419, HB463, and HB540. These bills provide mechanisms to protect children and adolescents from unnecessary, life-altering, and permanent medical interventions. It is extremely important to consider the profound impact that “gender affirming” treatments have on children and adolescents, and we appreciate your concern for this issue.

Over the past few years, increasing numbers of children in the United States have indicated that they identify as “transgender,” “non-binary,” “gender fluid,” or as other types of identities that do not necessarily conform with socially-created sex stereotypes. [According to GLSEN](#), around 92% of these children are female. [These children and their parents](#) have been informed by myriad special interest groups, as well as some healthcare providers, that radical and permanent medical interventions will help improve the children's mental health. However, long term studies suggest that individuals' mental health actually worsens after medical interventions. Some special interest groups and healthcare providers even claim that medical interventions will save children's lives; they insinuate – and sometimes even directly state – that children who do not receive so-called “gender affirming treatment” [will die by suicide](#). This claim is not supported by evidence.

According to the [Gender Mapping Project](#), the number of medical intervention providers for vulnerable children and adolescents has dramatically grown over the past decade; there are now more than 800 clinics that provide services related to so-called “gender affirmation” or gender dysphoria treatments for children.

These clinics offer a range of experimental medical services to children and adolescents, including cross-sex hormones, puberty-blocking drugs, double mastectomies, radical hysterectomies, and numerous other procedures. Independent for-profit surgeons also advertise to children on social media platforms like TikTok and



Instagram. Young people immersed in online social media are, in many instances, swept into an online fantasy, fuelled by shiny, glossy stories of the “wonders” of permanent physical modifications such as double mastectomies. Increased public promotion of drugs and surgeries to alter children’s superficial appearances, along with threats that their children will die by suicide if they do not receive these treatments, have caused many parents to believe that it is appropriate and even necessary for their children and teenagers to undergo permanent and life-altering medical interventions.

Unnecessary surgeries, puberty-blocking medications, cross-sex hormones, the removal of healthy body parts, and other cosmetic surgical procedures on young people have harmful, long-lasting, and often permanent effects. It doesn’t matter if a child is 10, or 14, or 17 – the child will undoubtedly be affected for the rest of his or her life by medical professionals who were responsible for profound, life-altering decisions about the child’s body, future health, and future fertility.

HB419 and HB540 provide a detailed list of the many different ways in which “gender affirming care” will harm the health of children and adolescents. We share the concerns stated in these bills, and we encourage you to review [our recent submission to the National Institutes of Health](#); in our NIH submission, we provided detailed discussions about some of the harms caused by unnecessary medical interventions. HB419, HB463, and HB540 appropriately place the burden of responsibility on medical professionals and hold these professionals accountable for causing harm to children and adolescents. We agree that medical professionals should absolutely be held accountable when they encourage, promote, and/or provide unnecessary, permanent, and life-altering medical interventions to children and adolescents. HB419 and HB540 prohibit public funds from being directly or indirectly used to provide “gender transition procedures,” and they also state that parents of child victims should not be held liable. We support both of these strategies. Public funding should absolutely not be used to promote harmful and unnecessary medical treatments. We urge caution against criminalizing parents who are simply trying to provide support to their children. Unfortunately, many parents have been indoctrinated into believing that “gender affirming care” is the only viable option for their children, and we do not want these parents to be prosecuted when they are simply following the advice given to them by political activists, healthcare professionals, and even some educators.



While we firmly believe that medical professionals should be held responsible, we also want to note that many practitioners have been repeatedly informed by their professional associations, mentors, and colleagues that “gender affirming” treatments are the *only* appropriate responses for minors who might be “gender dysphoric” or for minors who identify as transgender, non-binary, etc. In fact, some professional associations now normalize or encourage “gender affirming” treatments and medically unnecessary interventions for children. Therefore, medical professionals may be placed between “a rock and a hard place” when it comes to making decisions about how to respond to minors’ requests for surgeries, puberty-blockers, and other medical interventions. We would like to urge caution against assuming that all healthcare providers are malicious or are intentionally taking advantage of vulnerable children. Some (or perhaps many) medical professionals are simply following advice and guidance that is now considered mainstream or even “best practice.”

For more information, please review the [amicus brief](#) that we submitted in support of the Arkansas SAFE Act, which prohibited “gender affirming” surgeries and drugs for children.

Thank you for reviewing our written testimony. We support MO HB419, HB463, and HB540, and we are available and willing to discuss these important, complicated issues with you. We welcome your questions and we are happy to serve as a resource for you.



References:

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