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EXECUTIVE DIRECTOR



February 3, 2020

The Hon. Anthony Sabatini
Florida House of Representatives
1101 The Capitol
Tallahassee, FL 32399

RE: Support for HB 1365 (Vulnerable Child Protection Act)

Dear Representative Sabatini:

Thank you for filing HB 1365 (The Vulnerable Child Protection Act). Minors with feelings of gender dysphoria truly comprise a vulnerable population, and are deserving of particular and effective care. The radical chemical interventions and surgical mutilations prohibited by this legislation have irreversible physical and psychological consequences, and are well beyond the scope of appropriate treatment.^{1,2}

Bill considers long-term safety concerns

Despite claims that these interventions prevent suicides, research indicates that the opposite is true. A 30-year longitudinal study in Sweden³ found that the suicide rate of those receiving these manipulations was 20 times the rate of the general population. These surgical/chemical interventions provide false hope of relief and have tragic comorbidity associations.

Note on Human Development

Growing children pass through many normal developmental phases where they learn to relate to, bond with and differentiate from those of the same and opposite sex. It is normal for minors to experience levels of gender dysphoric feelings, and it is vitally important to protect the healthy, safe and integrative development of their sexuality. This legislation protects the normal process of maturation and allows children valuable time to mature unimpeded by controversial medical interventions.

Neuroscience has shown that the human brain is not fully developed, and along with it, executive function, until a person reaches their early to mid-twenties. It is irresponsible to allow irreversible, life-altering procedures that result in sterilization on minors who are too young to give valid consent.⁴ Parents are often intimidated by threats from their children, pressured by members of the medical or educational community and may feel overwhelmed or pushed into giving consent.

¹ Schmidt L, Levine R. Psychological outcomes and reproductive issues among gender dysphoric individuals. *Endocrinol Metab Clin N Am* 2015;44:773-785

² Jeffreys, S. The transgendering of children: gender eugenics. *Women's Studies International Forum* 2012;35:384-393.

³ Dhejne C, Lichtenstein P, Boman M, Johansson ALV, Långström N, Landén M (2011) Long-Term Follow-Up of Transsexual Persons Undergoing Sex Reassignment Surgery: Cohort Study in Sweden. *PLoS ONE* 6(2): e16885. <https://doi.org/10.1371/journal.pone.0016885>.

⁴ Johnson SB, Blum RW, Giedd JN. Adolescent maturity and the brain: the promise and pitfalls of neuroscience research in adolescent health policy. *J Adolesc Health* 2009;45(3):216-221

Key Considerations

As you and your colleagues consider this bill and address the situation in Florida, several items merit highlighting:

- ***Twin studies debunk the assertions that children are born “trapped in the wrong body”***
Researchers conduct studies of twins to determine biological and non-biological factors in the expression of traits, since identical twins contain identical DNA from conception and are exposed to the same prenatal hormones. If the assertion that genes and prenatal hormones determined feelings of transgenderism, the percentage of twins experiencing transgenderism should be near 100%. In the largest study of twin transgender adults, Dr. Milton Diamond noted both twins identified as transgender in only 28% of the cases.⁵
- ***Puberty blockers not proven safe; prevent healthy resolution of dysphoria***
The fact that cross-gender identification apparently persists for virtually *all* who undergo puberty suppression, while most of those who do *not* take suppressors resolve to their biological sex, could indicate that these treatments increase the likelihood that the patients’ cross-gender identification will persist. Suffice to say, the data regarding the safety of puberty suppressors for gender dysphoria patients is lacking.
- ***Cross-sex hormones are dangerous***
Adult studies have clearly identified the risks associated with cross-sex hormones, including increased cardiac disease, high blood pressure, blood clots, strokes, diabetes and cancers.⁶ The hormones used in these procedures are not approved by the Federal Drug Administration for these purposes.
- ***Biology is determinative: DNA in every cell reflects biological sex***
It is notable that one’s genetic makeup – reflected in DNA – cannot change. Sex is biological and unchangeable at the cellular level.⁷ Chemical and surgical manipulations may alter an individual’s appearance, but biological sex remains unchanged. Further, practice across other health issues, both medical and psychological, counsel that where emotional perception and observable reality are incongruent, reality is determinative.

This bill protects minors from medical manipulations that are dangerous to both the physical and psychological, and developmental wellbeing of children. Thank you for filing this good bill.

Sincerely,



Ken J. Kniepman, M. Ed.
Associate for Health

cc: House Health Quality Subcommittee
Most Rev. Enrique Delgado, FCCB Moderator for Health
Michael Sheedy

⁵ Milton Diamond (2013) Transsexuality Among Twins: Identity Concordance, Transition, Rearing, and Orientation, International Journal of Transgenderism, 14:1, 24-38, DOI: [10.1080/15532739.2013.750222](https://doi.org/10.1080/15532739.2013.750222)

⁶ [Eva Moore](#), [Amy Wisniewski](#), [Adrian Dobs](#)
The Journal of Clinical Endocrinology & Metabolism, Volume 88, Issue 8, 1 August 2003, Pages 3467–3473, <https://doi.org/10.1210/jc.2002-021967>

⁷ Institute of Medicine Committee on Understanding the Biology of Sex and Gender (2001) Exploring the Biological Contributions to Human Health: Does Sex Matter? National Academies Press <https://www.ncbi.nlm.nih.gov/books/NBK222288/>