



Written by [Raven Clabough](#) on January 23, 2020

House Committee in South Dakota Advances Bill to Prevent Gender Reassignment on Minors

A house subcommittee in South Dakota has voted to advance a bill that would criminalize gender reassignment treatment on minors in the state.

Titled the “Vulnerable Child Protection Act,” [House Bill 1057](#) prohibits medical professionals from “attempting to change or affirm the minor’s perception of the minor’s sex, if that perception is inconsistent with the minor’s sex.” This includes surgeries such as castration, penectomy, mastectomy, etc., medications to stop normal puberty or to increase biological hormones, and the removal of any nondiseased tissue or body parts. The legislation makes exceptions only in the case of a minor born “with a medically-verifiable genetic disorder of sex development,” such as one who is born with ambiguous sex characteristics or those who do not have the “normal sex chromosome structure for a male or female.”



KSFY reports HB 1057 passed 8-5 in a floor vote on Wednesday after the bill was amended to lessen the penalty from a felony to a Class 1 misdemeanor and remove penalties to medical professionals who do not directly prescribe the medications or perform the surgeries.

Predictably, the Left is slamming the bill as anti-transgender legislation.

Libby Skarin, policy director for the ACLU of South Dakota, which opposes the bill, stated that “Medical professionals, not politicians, should decide what medical care is in the best interest of a patient.”

But the bill’s proponents recognize that children are incapable of making medical decisions in their own best interest.

“Children need to wait until they’re mature to do it,” said State Representative Fred Deutsch, who introduced the bill.

A 2016 report in *The New Atlantis* by former Chief of Psychiatry at Johns Hopkins Hospital and Distinguished Service Professor of Psychiatry at Johns Hopkins University Dr. Paul McHugh and Arizona State University Professor of Statistics and Biostatistics Lawrence Mayer found that transgender individuals who undergo sex-reassignment have “a higher risk of experiencing poor mental health outcomes” and are about five times more likely to attempt suicide and 19 times more likely to die by suicide.

The researchers warned against the use of medical treatment for gender dysphoria in children.



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“Children are a special case when addressing transgender issues. Only a minority of children who experience cross-gender identification will continue to do so into adolescence or adulthood,” the report stated.

The researchers wrote that children who experience gender dysphoria should not undergo medical intervention because it is likely they will outgrow the condition.

The report argued that enabling acceptance of transgenderism through medical intervention is particularly harmful. “An area of particular concern involves medical interventions for gender-nonconforming youth. They are increasingly receiving therapies that affirm their felt genders, and even hormone treatments or surgical modifications at young ages,” the authors observed.

“There is no evidence that all children who express gender-atypical thoughts or behavior should be encouraged to become transgender,” they wrote.

Unfortunately, individuals who pursue gender-reassignment procedures do often go on to regret their decision, a phenomenon that is vastly underreported.

In a 2018 interview with Canada’s [National Post](#), Professor Miroslav Djordjevic from Belgrade, Serbia, stated that for the first time in his lengthy surgical career, he was encountering patients that asked him to reverse their “gender confirmation” surgeries. Djordjevic noted that his patients were undeterred by his warnings that such procedures were painful and expensive. According to Djordjevic, his patients reported debilitating depression and suicidal thoughts following their “gender confirmation” surgeries.

In 2016, PJ Media did a [piece](#) on individuals who underwent gender-reassignment procedures in their youth and regretted it. These patients were later dismissed by the doctors who performed their gender-reassignment procedures as being transphobic.

These are the exact situations HB 1057 seeks to prevent. Deutsch said the legislation is a way to hit the “pause button” on an “overwhelming and life-changing” decision.

House Bill 1057 would also protect children from overzealous parents who are intent on proving they are “woke,” even if that comes at the expense of their children’s well-being, as seen in the case of [James Younger](#) of Texas, whose mother claimed he was transgender and wanted to transition him against the will of James’ father.

According to Dr. Ken Zucker, former head of the Gender Identity Service at the Centre for Addiction and Mental Health in Toronto, the trendiness of transgenderism seems to have influenced its growth.

“The No. 1 factor is the Internet,” he said. “If you’re struggling to find out where you fit, the Internet is filled with things about gender dysphoria.”

“When we ask, ‘When did you first learn about this label of gender dysphoria’, they’ll say, ‘Me and Mom watched Oprah,’” added Dr. Hayley Wood, a member of Zucker’s team.

Alice Dreger, a bioethicist and former professor at Northwestern University’s Feinberg School of Medicine in Chicago, says parents who allow their children to change genders “are socially rewarded as wonderful and accepting,” while those who don’t are perceived as “unaccepting, lacking in affection and conservative.”

House Bill 1057 will now go before the full South Dakota House for consideration. NBC News reports similar bills have been [introduced](#) in Texas, Georgia, and Kentucky.

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