

February 1, 2023

Vermont House Judiciary Committee Meeting on H.89

Renee McGuinness

Vermont Family Alliance testimony

Vermont Family Alliance (VFA) defends the Rights and Responsibilities of Parents and their due process regarding their children at the local and state level.

I have read H.89 and listened to Legislative Counsel's walkthrough.

Shielding practitioners and persons seeking care against "abusive litigation" seems to be the heart of this bill.

I will be focusing on shielding practitioners who provide **exclusively gender-affirming care for minors** in regards to "abusive litigation."

Pages 4 and 5 of H.89 read as follows:

12 Sec. 1. 1 V.S.A. § 150 is added to read:

13 § 150. LEGALLY PROTECTED HEALTH CARE ACTIVITY

14 (a) "Gender-affirming health care services" means all supplies, care, and

15 services of a medical, behavioral health, mental health, surgical, psychiatric,

16 therapeutic, diagnostic, preventative, rehabilitative, or supportive nature

17 relating to the treatment of gender dysphoria. Gender-affirming health care

18 services does not include conversion therapy as defined by 18 V.S.A. § 8351.

While the State of Vermont has adopted an exclusively gender-affirming approach to care of minors and youth presenting with gender dysphoria, studies show there is no international consensus on the Standard of Care.

Pages 4 and 5 of H.89 read as follows:

19 (b)(1) "Legally protected health care activity" means:

1 (A) the exercise and enjoyment, or attempted exercise and

2 enjoyment, by any person of rights to reproductive health care services or

3 gender-affirming health care services secured by this State or the provision of

4 insurance coverage for such services; or

5 (B) any act or omission undertaken to aid or encourage, or attempt to

6 aid or encourage, **any person** in the exercise and enjoyment, or attempted
7 exercise and enjoyment, of rights to reproductive health care services or
8 gender-affirming health care services secured by this State or to provide

The terms “any person” in lines 2 and 6 fail to provide protections for minors and usurps parental rights and responsibilities for their minor children.

Vermont Family Alliance is opposed to shielding gender care practitioners from litigation that we consider NOT necessarily abusive when the Standard of Care for minors in Vermont is exclusively gender-affirming.

There is no international consensus on the Standard of Care for minors and youth presenting with gender dysphoria, particularly for birth-registered females - a demographic for which presentation of gender dysphoria has grown dramatically in recent years.

I will review the Summary section of the 112-page [Cass Review Interim Report](#) on Gender Dysphoria Services for children and youth initiated by the UK NHS.

[Dr. Hilary Cass](#) was appointed by NHS England and NHS Improvement to chair the Independent Review of Gender Identity Services for minors at Tavistock Gender Clinic in 2020. The study came after a lawsuit against Tavistock was filed, and concludes, in part:

- A significant increase in referrals to Tavistock’s Gender Identity Development Services (GIDS).
- Lack of control measures that are typically applied when new treatments are introduced.
- Lack of discussion and consensus on treatment protocols.
- Diagnostic overshadowing (healthcare issues other than gender-related distress are overlooked).
- Pressure on staff to adopt an unquestioning affirmative approach which is at odds with the standard process of clinical assessment and diagnosis.

In addition, the Summary states:

- “Evidence on the appropriate management of children and young people with gender incongruence and dysphoria is inconclusive both nationally and internationally.”

- “The Review is not able to provide definitive advice on the use of puberty blockers and feminising/masculinising hormones at this stage, due to gaps in the evidence base.”

“The UK's only children's gender identity development service (GIDS), run by the Tavistock and Portman NHS Foundation Trust, [is to be sued by ‘at least a thousand families’](#) who allege that their children were rushed into taking life-changing puberty blocking drugs. As a result, they were facing ‘physical and psychological permanent scarring that will last the rest of these victims’ lifetimes’, alleged the law firm involved.” [The Tavistock clinic was ordered to close.](#)

Vermont Family Alliance calls upon legislators to study and consider the findings of the Cass Review Interim Report and the [lawsuit against Tavistock Gender Clinic](#) along with detransitioner Chloe Cole’s suit against [Kaiser Permanente](#) before passing any legislation regarding the treatment of minors presenting with gender dysphoria and incongruence.

Vermont Family Alliance also calls upon legislators to bring in balanced testimony on gender ideology and its impact on minors.

As we walk through key points in the Summary section of the Cass Interim Report, I ask you to keep two questions in mind:

1. What will be considered "abusive litigation" when there is no consensus on the Standard of Care for gender identity services for children and youth?
2. As you consider whether to shield Vermont’s exclusively gender-affirming system of care, I ask you to consider recent international findings and on-going research on gender identity care, and that you consider the potential negative impacts on both in-state and out-of-state children, youth, and their parents by shielding a system of care for which there is no consensus on the Standard of Care.

Renee McGuinness

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