

WEAPONIZING INNOCENCE: THE DANGER OF ANTI-TRANS LEGISLATION

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When I was four years old, I confidently told my parents, “I am a boy,” and I demanded they call me Kade. Like most parents might do, they laughed it off, claiming they had a tomboy. However, my feelings persisted, and it wasn’t until I was eleven years old that I discovered the language to describe what I had been feeling. I have gender dysphoria; I am transgender. I was lucky enough to start my medical transition in my teens. At fifteen years old, I began testosterone, and, at sixteen years old, I got top surgery. If my parents had denied me access to gender-affirming care (GAC), I would not be here today. Unfortunately, that is the reality facing transgender youths in the United States.

In early 2020, the effort to restrict gender-affirming care began as states started proposing bills to ban such care for minors. The U.S. Department of Health and Human Services defines gender-affirming care as “a supportive form of healthcare” (HHS Office of Population 1) made up of “psychological, social, medical, and legal aspects” (Substance Abuse 37). This care involves interventions such as social affirmation, legal name and gender change, therapy, puberty blockers, hormone replacement therapy, and gender-affirming surgeries. As someone nearing their sixteenth birthday at that time, I was terrified. The COVID-19 pandemic delayed these bills from passing, but 2021 brought a surge of even more anti-trans bills. Shortly after my seventeenth birthday, on April 6, 2021, Arkansas became the first state to ban GAC for youth when they enacted House Bill 1570—the Save Adolescents From Experimentation (SAFE) Act. The situation has only gotten worse since. For example, Tennessee Senate Bill 1 (SB1) will go into effect on July 1, 2023. This bill prevents minors from accessing GAC and demands that youths already receiving GAC (such as puberty blockers or hormones) must stop it by March 31, 2024. I have never been so glad to be an adult.

This surge of anti-trans legislation began due to the increased visibility of the transgender community. The HBO documentary *Transhood*, released on May 28, 2020, specifically sparked outrage. *Transhood* follows four children (ages four, seven, twelve, and fifteen at the beginning) over five years as they navigate their gender identities. Although this film cannot be held accountable for the anti-trans legislation, it exacerbated a long-standing controversy by portraying the realities of gender-diverse children, ultimately leading to the final breaking point for some conservatives. On X, political commentator Matt Walsh (@MattWalshBlog) quote-posted a clip of *Transhood* with the message, “[b]y the way, this is from a new HBO documentary called ‘Transhood.’ I can tell you it’s even worse and more exploitative and dangerous and sadistic than ‘Cuties’ was, and it should provoke an even stronger backlash from us.”

The clip shows four-year-old Phoenix being too shy to tell their congregation they are a girl, so their mother does it for them. Walsh's claim that *Transhood* is worse than *Cuties* is grossly misleading. *Cuties* is a Netflix film with young girls in sexually suggestive scenes—which prompted Republican Congress members to appropriately call *Cuties* child pornography (Banks 1). Walsh then posts about Phoenix again: “A mother puts her 4 year old son in a dress and reads him LGBT propaganda. You're literally watching her brainwash the child into thinking he's a girl. It's no mystery how children end up 'trans.' This is it. Right here.” Walsh's posts brought public attention to *Transhood*, and the film received much more criticism from the public. For example: “[s]uch a horrific video, transing children is a crime and people involved in this should be held accountable for their actions,” as one citizen posted (qtd. in Wynne). Thus, proponents of such legislation argue that transgender youths do not actually exist—it is an ideology that parents are forcing onto their kids; it is abuse. People on this side of the debate believe that all GAC is inherently harmful and will cause irreversible damage to children. According to this logic, it must be prohibited since minors do not understand what they are “consenting” to.

On the other hand, opponents of such legislation believe youth know more about their gender identity than anti-trans adults give them credit for. They think we should use a gender-affirmative model to provide youth with GAC that is deemed essential. For example, one X user said, “[w]ithholding gender affirming care from trans youth is absolutely abusive. This will kill children” (@EuphoriTori). Montana State Representative Zooley Zephyr (@ZoAndBehold) posted a clip of herself addressing the House alongside the quote: “If you are denying gender-affirming care and forcing a trans child to go through puberty, that is tantamount to torture, and this body should be ashamed. If you vote yes on this bill, I hope the next time you bow your heads in prayer, you see the blood on your hands.” Parents of trans youth have also spoken out that they fear this type of legislation will kill their children, a fear exemplified in the perspectives collected in a study by Kidd et al. One parent shared, “I asked [my child] the other night how he thinks his life would look without [puberty blockers]. Without needing to think about it, he said, ‘I'd probably be dead.’ He's 14” (1084). Another parent expressed, “[Legislators] may as well provide the blade for my child to slit his wrists with” (1084).

So, while the passage of bills such as the Arkansas SAFE Act and Tennessee's SB1 has garnered national attention and sparked controversy, the impact on transgender youth cannot be understated. As someone who accessed gender-affirming care as a minor, I know firsthand how beneficial it is and that its positive impact on one's mental health can be outstanding. However, the political debate overlooks complex ethical issues that the debate surrounding transgender youth has raised. Both sides of the debate argue that they are “thinking of the children,” albeit in different ways, but neither side addresses the actual impact of this legislation on all transgender people.

Thus, the question arises: how do anti-trans legislative measures contribute to a harmful and dangerous climate for transgender individuals?

Now, to understand where both sides are coming from in the context of “protecting the children,” it will be helpful to understand what “the child[ren]” means. Literary critic and scholar Lee Edelman analyzes the concept of “the Child” in American politics and culture. Edelman reveals that the idea of the child is a symbol of futurity—a representation of the continuation of society. However, queerness does not fit into this vision of the future because “[t]he Child... marks the fetishistic fixation on heteronormativity: an erotically charged investment in the rigid sameness of identity” (Edelman 21). That is, invoking “the Child” is a way to replicate the past and maintain the heteronormativity of society. Edelman argues that “the sacralization of the Child thus necessitates the sacrifice of the queer” (28) because conservatives seek to eliminate the “queerness of resistance to futurism” (27). Queer identity inherently resists this idea of a future-oriented society, as the normative ideas inherent in futurism—such as reproduction and traditional family structures—marginalize queer people whose mere existence challenges them. The right-wing tries to eliminate queerness through confrontation and repression. As the issue of trans youth healthcare has become completely politicized, it is productive to examine the legislation through the lens of Edelman’s understanding of “the Child” to understand the negative impact on the trans community.

As it happens, the Arkansas SAFE Act displays how the right-wing desires “the elimination of queers” (28). The title of the act, “Save Adolescents from Experimentation,” immediately sets the tone of the bill, implying that GAC is an unproven and inherently dangerous experiment on adolescents. The opening line emphasizes this: “Arkansas has a compelling government interest in protecting the health and safety of its citizens, especially vulnerable children” (State of Arkansas, Legislature, House 1). People associate the use of words such as “compelling,” “protecting,” “safety,” and “vulnerable” with the manipulation of innocents. In turn, the general public is more likely to agree with the bill, as such images will remain in mind. The bill uses the word “irreversible” five times, all in the context of infertility and sterilization (3, 5). This repetitiveness and focus on the ability to reproduce aligns with Edelman’s theory of futurism. The Arkansas SAFE Act cares about “reproduc[ing] the past” and maintaining the heteronormativity of society (Edelman 31). Tennessee SB1 also opens with a similar message: “The legislature declares that it must take action to protect the health and welfare of minors” (State of Tennessee 1). This language is slightly less emotive but has the same intent as the Arkansas SAFE Act. Plus, Tennessee SB1 also uses phrases such as “harmful” (1, 2, 4), “experimental” (1, 2), “minor’s best interest” (2), “protecting minors” (2) “minor injured” (4), and “threat” (5) to evoke the same message found in the Arkansas SAFE Act. The word “purported” shows up 12 times in the bill (1-4), delegitimizing the lived experience of transgender people and further pushing the message of coercion. The fear-mongering

language purposefully evokes the image of a helpless and highly impressionable child, pushing the notion that children cannot make decisions for themselves and implying that children are being manipulated or forced into transitioning.

Thus, the proponents of anti-trans legislation argue that children do not have the right to autonomy for “decisions” as consequential as their gender. This lack of autonomy comes from the notion that children constantly play make-believe, so a child claiming they are not their assigned gender at birth (AGAB) is just pretending. Indulging children in this “fantasy” by allowing them to transition sets them up for future regret. Walsh expresses this viewpoint well in a conversation with Tucker Carlson about *Transhood* when Walsh states, “Children literally cannot differentiate between fact and fiction, reality and fantasy. I have a four-year-old boy who thinks he’s a stegosaurus, so I’m not going to take him to Jurassic Park” (Carlson 3:24-34). In this same conversation, Carlson claims that “four-year-olds don’t make decisions like that. They can’t,” when referring to Phoenix (1:35-8). Journalist Jesse Singal builds off Walsh and Carlson by reminding us that teenagers are constantly going through phases and trying to be rebellious. Singal goes on to explain that teenagers are often lost and trying to find their place in society, so teenagers believing they are not their assigned gender at birth “[stems] from rigid views of gender roles that [are] internalized” (91). Ultimately, this argument against GAC for minors boils down to what some believe will result in their future regret. They believe the minor in question will regret transitioning because they did not understand the repercussions, and they will then detransition and live as a broken, scarred version of their AGAB. So, by banning GAC, they are “saving” the children from “radical gender ideology” (Shapiro 1:04:14-15). They are “fighting for the children” by protecting them from “abusive” parents. They are trying to ensure what they believe will be a healthy future as their AGAB. They are arguing that they know what’s better for children in the long run than the parents and doctors of these children and, especially, the children themselves.

However, children are not too young to know their gender. Biologist and activist Julia Serano explains subconscious sex as “this unconscious self-understanding that (for many trans people) precedes any conscious or deliberate grappling with questions of gender identity” (178). Most people know their gender without consciously thinking about it and the language that describes it. Plus, evidence supports that “children develop the ability to label gender groups and to use gender labels...between 18 and 24 months,” begin developing an “awareness of their own ‘self’ at roughly 18 months,” and develop an understanding of gendered stereotypes by age three (Martin and Ruble 3). So comprehending gender stereotypes helps children understand what role they want to play in society, which can lead to “falsely” identifying as trans. However, even then, that misunderstanding occurs at an age when only a social transition would occur anyway. There is no harm in allowing children to explore their gender. Even Singal agrees. For example, a boy wearing “girls” clothes is only deemed unacceptable because of the rigid gender roles that Singal claims cause people to regret transitioning.

Furthermore, the anti-trans argument stems from the idea that gender and sex are entirely biological. These individuals believe that genetics dictate gender, so, if a child claims they are transgender, the parents are forcing that identity onto their child, or elderly trans people are indoctrinating the child. For example, while reviewing *Transhood*, Walsh claimed that parents (primarily mothers) supporting their trans kids is an example of “Munchausen Syndrome by proxy” (Walsh, “SHOCKING” 9:20-22), a condition in which parents convince their healthy children that they are sick and force them into unnecessary medical procedures. Walsh and Carlson are not alone in this belief. One “whistleblowing” educator expressed her concerns about the growing number of children identifying as trans. This teacher believes children are “easily influenced” and learn to identify as trans from older students and *YouTube* stars (Manning). This article describes younger children as “vulnerable,” “exploited,” “brainwashed,” and “tricked.” The story portrays the *YouTube* stars and older trans kids as villains, describing them with words such as “to blame,” and “groom[ers]” (Manning). The article weaponizes trans identity and transition, characterizing them as “mutilation,” “harmful,” “tragedy,” “nightmare,” “agenda,” and so on (Manning). Such language portrays children as being harmed and requiring protection. This piece uses such language to create a pedophilic overtone that further pushes the idea of these children needing to be saved from trans ideology.

Popular books also showcase this opinion. One of *The Economist’s* 2020 books of the year gives the same message as above. *Irreversible Damage* uses “indoctrination,” “cult,” “coach,” and “propaganda” repeatedly, as well as “brainwashed” (Shrier). This type of language evokes the image of people endangering and coercing innocent children, promoting the erasure of queerness and transness from the public view. The reason kids identify as trans, according to this thinking, is because they were tricked and forced to by older trans people or parents who have fallen victim to “radical left-wing gender theory” (Walsh, “SHOCKING” 9:59-10:00). Some of this legislation banning GAC for youth was born from people like Walsh and Carlson voicing their “concerns.” Such legislation publicizes the belief that children need to be prevented from mutilating their bodies and causing irreversible damage, simultaneously promoting the belief that trans adults are sick and damaged. However, these anti-trans advocates fail to acknowledge all of the scientific and medical research showing how vital GAC is for mental health and overall well-being, only focusing on the minute number of people who detransition (Coleman et al. S41).

The medical consensus is that gender-affirming care is lifesaving for many trans individuals. “[R]esults align with past literature, suggesting that pubertal suppression for transgender adolescents who want this treatment is associated with favorable mental health outcomes,” and “participants’ suicidality scores...significantly decreased following administration of [gender affirming hormones], . . . [and] participants’ general well-being scores significantly increased” (Turban et al. 1; Allen et al. 307). A study published in 2022 followed 317 binary trans children (between ages three and

twelve) who had already socially transitioned over a five-year timeline. After five years, only 7.3% of those children changed their identity; a mere 2.5% detransitioned, and the rest maintained a transgender identity (Olson et al. 2-3). This indicates that just 2.5% ultimately identified with their AGAB, while the majority continued to identify as transgender, albeit with some fluctuations in certainty during the study period (the 7.3%). Plus, most adults who stop transitioning do so due to external pressures, not the regret that anti-trans advocates suggest (Roberts 2).

While some may claim that anti-trans rhetoric comes from concern for children, this rhetoric in fact seems to come from hate and ignorance. Those who spread this rhetoric do not understand that there are many guidelines for treating transgender youth—all of which give timelines on when to start medical care. For example, individuals must reach Tanner stage 2 of puberty before starting puberty blockers “because the experience of physical puberty may be critical for further gender identity development for some” adolescents (Coleman et al. S64). Individuals must be at least fourteen (and usually sixteen) years old to start hormones, and eighteen years old to get genital surgeries (Mahfouda et al. 486). Plus, surgeons (no matter their patient’s age) typically require at least two letters from mental health care professionals supporting the patient getting the surgery (Milrod and Karasic 628). For me to access any gender-affirming medical procedures, even as an adult, I had to fulfill the requirement of living as male for at least a year and obtaining letters from both a therapist and an evaluative psychologist. Perhaps, then, this anti-trans rhetoric comes not merely from hate or ignorance, but from a desire to do battle with the queer and trans survival instinct that Professor Jack Halberstam would call “failure” (88). Halberstam argues that mainstream society is oppressively obsessed with the notion of success, so failure is a way to resist these dominant structures—and queer people have long been resisting social norms. Heteronormative society has made it so that “the queer body and queer social worlds become the evidence of that failure” (94). Queer people have long been seen as “failures” in society because they subvert societal norms, and queer people have learned to embrace that, making it their version of success. Those spewing anti-trans rhetoric fear the redefining of “success,” as they need to maintain the heteronormativity of society. The only way to do so is to protect children from seeing happy queer and trans adults. The so-called epidemic of trans youth threatens the “default heteronormativity of modern culture with its worst nightmare, a queer planet” (Warner 16).

Thus, bills such as the Arkansas SAFE Act and Tennessee SB1 are crucial aspects of a much larger problem facing the transgender community. These extreme anti-trans bills make less severe bills, such as the bathroom bills, look reasonable. They stoke fear against transgender people, making us seem like a public enemy with our supposedly predatory ways, which, in turn, emboldens transphobia and gives people a sense of justification for hating trans people—so much so that, nationwide, there were 615 anti-trans bills proposed in 2023 (Trans Legislation Tracker). Some bills try to

make it illegal for me to continue hormones, as I am younger than 26 (State of Texas 6). In other states, I can go to jail if I do not use the women’s restroom (State of Arkansas, Legislature, Senate 2). States are trying to write us out of existence by doing the very thing they are accusing us of doing: redefining “sex” (State of Montana 1). Ultimately, anti-trans legislation does more than deny medical care—it erodes the humanity of trans people. By framing trans existence as a threat to children, society denies us our right to live authentically. These bills are not about protecting society but about dehumanizing, criminalizing, and erasing trans people. These bills restrict our lives, take away our rights, and oppress us with the goal of making it impossible for us to exist. My survival is a testament to the life-saving power of GAC—and my story is just one of thousands that reflect this sentiment. At the Conservative Political Action Conference in 2023, Michael Knowles said, “[T]ransgenderism must be eradicated from public life entirely,” and the crowd cheered (qtd. in Hawkinson). It was never about “the children”; it was always about the utter elimination of transgender people.

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