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SENATE BILL DRS45273-NB-92

Short Title: Youth Health Protection Act. (Public)

Sponsors: Senators Hise, Daniel, and Sanderson (Primary Sponsors).

Referred to:

1 A BILL TO BE ENTITLED
2 AN ACT TO PROTECT MINORS FROM ADMINISTRATION OF PUBERTY BLOCKERS
3 AND CROSS-SEX HORMONES AND OTHER RELATED ACTIONS, PROCEDURES,
4 AND TREATMENTS.

5 Whereas, the sex of a person is the biological state of being female or male, based on
6 sex organs, chromosomes, and endogenous hormone profiles, and is genetically encoded into a
7 person at the moment of conception, and it cannot be changed; and

8 Whereas, some individuals, including minors, may experience discordance between
9 their sex and their internal sense of identity, and individuals who experience severe psychological
10 distress as a result of this discordance may be diagnosed with gender dysphoria; and

11 Whereas, the cause of the individual's impression of discordance between sex and
12 identity is unknown, and the diagnosis is based exclusively on the individual's self-report of
13 feelings and beliefs; and

14 Whereas, this internal sense of discordance is not permanent or fixed, but to the
15 contrary, numerous studies have shown that a substantial majority of children who experience
16 discordance between their sex and identity will outgrow the discordance once they go through
17 puberty and will eventually have an identity that aligns with their sex; and

18 Whereas, as a result, taking a "wait-and-see" approach to children who reveal signs
19 of gender nonconformity results in a large majority of those children resolving to an identity
20 congruent with their sex by late adolescence; and

21 Whereas, some in the medical community are aggressively pushing for interventions
22 on minors that medically alter the child's hormonal balance and remove healthy external and
23 internal sex organs when the child expresses a desire to appear as a sex different from his or her
24 own; and

25 Whereas, this course of treatment for minors commonly begins with encouraging and
26 assisting the child to socially transition to dressing and presenting as the opposite sex. In the case
27 of prepubertal children, as puberty begins, doctors then administer long-acting GnRH agonist
28 (puberty blockers) that suppress the pubertal development of the child. This use of puberty
29 blockers for gender nonconforming children is experimental and not FDA-approved; and

30 Whereas, after puberty blockade, the child is later administered "cross-sex" hormonal
31 treatments that induce the development of secondary sex characteristics of the other sex, such as
32 causing the development of breasts and wider hips in male children taking estrogen and greater
33 muscle mass, bone density, body hair, and a deeper voice in female children taking testosterone.
34 Some children are administered these hormones independent of any prior pubertal blockade; and

35 Whereas, the final phase of treatment is for the individual to undergo cosmetic and
36 other surgical procedures, often to create an appearance similar to that of the opposite sex. These



1 surgical procedures may include a mastectomy to remove a female adolescent's breasts and
2 "bottom surgery" that removes a minor's healthy reproductive organs and creates an artificial
3 form aiming to approximate the appearance of the genitals of the opposite sex; and

4 Whereas, for minors who are placed on puberty blockers that inhibit their bodies from
5 experiencing the natural process of sexual development, the overwhelming majority will
6 continue down a path toward cross-sex hormones and cosmetic surgery; and

7 Whereas, this unproven, poorly studied series of interventions results in numerous
8 harmful effects for minors, as well as risks of effects simply unknown due to the new and
9 experimental nature of these interventions; and

10 Whereas, among the known harms from puberty blockers is diminished bone density;
11 the full effect of puberty blockers on brain development and cognition are yet unknown, though
12 reason for concern is now present. There is no research on the long-term risks to minors of
13 persistent exposure to puberty blockers. With the administration of cross-sex hormones comes
14 increased risks of cardiovascular disease, thromboembolic stroke, asthma, COPD, and cancer;
15 and

16 Whereas, puberty blockers prevent gonadal maturation and thus render patients taking
17 these drugs infertile. Introducing cross-sex hormones to children with immature gonads as a
18 direct result of pubertal blockade is expected to cause irreversible sterility. Sterilization is also
19 permanent for those who undergo surgery to remove reproductive organs, and such persons are
20 likely to suffer through a lifetime of complications from the surgery, infections, and other
21 difficulties requiring yet more medical intervention; and

22 Whereas, several studies demonstrate that hormonal and surgical interventions often
23 do not resolve the underlying psychological issues affecting the individual. For example,
24 individuals who undergo cross-sex cosmetic surgical procedures have been found to suffer from
25 elevated mortality rates higher than the general population. They experience significantly higher
26 rates of substance abuse, depression, and psychiatric hospitalizations; and

27 Whereas, minors, and often their parents, are unable to comprehend and fully
28 appreciate the risk and life implications—including permanent sterility—that result from the use of
29 puberty blockers, cross-sex hormones, and surgical procedures; and

30 Whereas, for these reasons, the decision to pursue a course of hormonal and surgical
31 interventions to address a discordance between the individual's sex and sense of identity should
32 not be presented to or determined for minors who are incapable of comprehending the negative
33 implications and life-course difficulties attending to these interventions; Now, therefore,
34 The General Assembly of North Carolina enacts:

35 **SECTION 1.(a)** Chapter 90 of the General Statutes is amended by adding a new
36 Article to read:

37 "Article 1M.

38 "Youth Health Protection Act.

39 **"§ 90-21.140. Definitions.**

40 The following definitions apply in this Article:

- 41 (1) Government agent. – Any agent, employee, volunteer, or contractor of a
42 public child services agency, private child placing agency, court, or school
43 district.
44 (2) Medical professional. – Any physician, surgeon, physician assistant, nurse,
45 clinical nurse specialist, nurse practitioner, anesthetist, psychiatrist, or
46 medical assistant licensed under this Chapter.
47 (3) Mental health care professional or counselor. – Any licensed medical, mental
48 health, or human services professional licensed under this Chapter, including
49 any psychologist, social worker, psychiatric nurse, allied mental health and
50 human services professional, licensed marriage and family therapist, certified
51 rehabilitation counselor, licensed clinical mental health counselor, or any of

1 their respective interns or trainees, or any other person designated or licensed
2 as a mental health or human service professional.

3 (4) Minor. – Any individual who is below 21 years of age.

4 (5) Political subdivision. – Any division of local government, county, city,
5 assessment district, municipal corporation, special purpose district, board,
6 department, commission, or any division of local government delegated the
7 right to exercise part of the sovereign power of that subdivision.

8 (6) Sex. – The biological state of being female or male, based on sex organs,
9 chromosomes, and endogenous hormone profiles.

10 **"§ 90-21.141. Prohibition of certain practices and health care services.**

11 (a) Notwithstanding any other provision of law, it shall be unlawful for any individual to
12 engage in any of the following practices upon a minor, or cause them to be performed, to facilitate
13 the minor's desire to present or appear in a manner that is inconsistent with the minor's sex:

14 (1) Performing surgeries that sterilize, including castration, vasectomy,
15 hysterectomy, oophorectomy, metoidioplasty, orchiectomy, penectomy,
16 phalloplasty, and vaginoplasty.

17 (2) Performing a mastectomy.

18 (3) Administering or supplying the following medications that induce transient or
19 permanent infertility:

20 a. Puberty-blocking medication to stop or delay normal puberty.

21 b. Supraphysiologic doses of testosterone or other androgens to members
22 of the female sex.

23 c. Supraphysiologic doses of estrogen or synthetic compounds with
24 estrogenic activity to members of the male sex.

25 (4) Removing any otherwise healthy or nondiseased body part or tissue.

26 (b) A medical professional who engages in any of the practices identified in subsection
27 (a) of this section or causes them to be performed shall be considered to have engaged in
28 unprofessional conduct and shall be subject to revocation of licensure and other appropriate
29 discipline by the medical professional's licensing or certifying board. The medical professional
30 shall also be subject to a civil penalty of up to one thousand dollars (\$1,000) per occurrence. The
31 clear proceeds of civil penalties provided for in this subsection shall be remitted to the Civil
32 Penalty and Forfeiture Fund in accordance with G.S. 115C-457.2.

33 (c) This section does not apply to the good-faith medical decision of a parent or guardian
34 of a minor born with a medically verifiable genetic disorder of sexual development, including
35 any of the following:

36 (1) A minor with external biological sex characteristics that are irresolvably
37 ambiguous, such as a minor born having 46 XX chromosomes with
38 virilization, 46 XY chromosomes with under-virilization, or having both
39 ovarian and testicular tissue.

40 (2) When a physician has otherwise diagnosed a disorder of sexual development,
41 in which the physician has determined through genetic testing that the minor
42 does not have the normal sex chromosome structure for male or female sexes.

43 (d) Notwithstanding any other provision of law, it shall be unlawful for any health care
44 provider, as defined in G.S. 90-21.11, that receives State funds, to furnish, provide, or perform
45 any health care service that constitutes the performance of or preparation for a gender transition
46 procedure to a minor.

47 **"§ 90-21.142. Counseling.**

48 A State office, agency, political subdivision of the State or local government, or any
49 organization with authority to license or discipline the members of a profession may not prohibit,
50 impose any penalty, or take any adverse action against any individual who gives or receives

1 counsel, advice, guidance, or any other speech or communication, whether described as therapy
2 or provided for a fee, consistent with conscience or religious belief.

3 **"§ 90-21.143. Protection of parental rights.**

4 (a) Parents, guardians, or custodians, in exercising the fundamental right to care for their
5 child, may withhold consent for any treatment, activity, or mental health care services that are
6 designed and intended to form their child's conceptions of sex and gender or to treat gender
7 dysphoria or gender nonconformity. The State, its agents, and political subdivisions shall not
8 infringe upon or impede the exercise of this right under this section.

9 (b) No government agent, nor any employee of this State, any political subdivision of this
10 State, or any other governmental entity, except for law enforcement personnel, shall encourage
11 or coerce a minor to withhold information from the minor's parent. Nor shall any such employee
12 withhold from a minor's parents information that is relevant to the physical or mental health of
13 their child and of a sort that parents interested in and responsible for the well-being of a minor
14 reasonably would demand and should be apprised of. Such conduct shall be grounds for
15 discipline of the employee, in addition to any other remedies provided to a parent under this Act.

16 (c) If a government agent has knowledge that a minor under its care or supervision has
17 exhibited symptoms of gender dysphoria, gender nonconformity, or otherwise demonstrates a
18 desire to be treated in a manner incongruent with the minor's sex, the government agent or entity
19 with knowledge of that circumstance shall immediately notify, in writing, each of the minor's
20 parents, guardians, or custodians. The notice shall describe all of the relevant circumstances with
21 reasonable specificity.

22 **"§ 90-21.144. Whistleblower protection.**

23 (a) No person shall be discriminated against in any manner because the person does any
24 of the following:

25 (1) Provided, caused to be provided, or takes steps to provide or cause to be
26 provided to his or her employer, the Attorney General, any State agency, the
27 United States Department of Health and Human Services, or any other federal
28 agency, any information or an act or omission that is a violation of any
29 provision of this Article.

30 (2) Testified or prepared to testify in a proceeding concerning a violation of this
31 Article.

32 (3) Assisted or participated in a proceeding concerning a violation of this Article.

33 (b) Unless a disclosure or report of information is specifically prohibited by law, no
34 person shall be discriminated against in any manner because the person disclosed any information
35 under this Article that the person believes evinces any of the following:

36 (1) Any violation of law, rule, or regulation.

37 (2) Any violation of any standard of care or other ethical guidelines for the
38 provision of any health care service.

39 (3) Gross mismanagement, a gross waste of funds, an abuse of authority, or a
40 substantial and specific danger to public health or safety.

41 **"§ 90-21.145. Civil remedies.**

42 (a) A civil action for compensatory or special damages, injunctive relief, or any other
43 relief available under law may be brought by any person for any violation of any provision of
44 this Article against the clinic, health care system, medical professional, or other person
45 responsible for the violation.

46 (b) Any party aggrieved or harmed by any violation of this Article shall be required to
47 bring suit for violation of this Article no later than two years after the day the cause of action
48 accrued. Minors injured by practices prohibited under this Article may bring an action during
49 their minority through a parent, and may bring an action in their own name upon reaching
50 majority at any time from that date until 20 years from the date the minor attained the age of
51 majority.

1 (c) Persons who prevail on a claim brought pursuant to this section shall be entitled, upon
2 the finding of a violation, to recover the following:

3 (1) Monetary damages, including all psychological, emotional, and physical harm
4 suffered.

5 (2) Total costs of the action and reasonable attorneys' fees.

6 (3) Any other appropriate relief.

7 (d) Standing to assert a claim or defense under this section shall be governed by the
8 general rules of standing.

9 **"§ 90-21.146. Preemption.**

10 (a) A political subdivision of this State is preempted from enacting, adopting,
11 maintaining, or enforcing any order, ordinance, rule, regulation, policy, or other similar measure
12 that prohibits, restricts, limits, controls, directs, or otherwise interferes with the professional
13 conduct and judgment of a mental health care professional or counselor, including speech,
14 undertaken within the course of treatment and communication with clients, patients, other
15 persons, or the public, including therapies, counseling, referrals, and education.

16 (b) The Attorney General or a mental health care professional or counselor may bring an
17 action for an injunction to prevent or restrain violations of this section. A mental health care
18 professional may recover reasonable costs and attorneys' fees incurred in obtaining an injunction
19 under this section.

20 (c) Sovereign and governmental immunity to suit and from liability is waived and
21 abolished to the extent of the liability created by this section."

22 **SECTION 1.(b)** Article 6 of Chapter 143C of the General Statutes is amended by
23 adding a new section to read:

24 **"§ 143C-6-5.6. Limitation on use of State funds for gender transition procedures.**

25 No State funds may be used, directly or indirectly, for the performance of or in furtherance
26 of gender transition procedures or to support the administration of any governmental health plan
27 or government-offered insurance policy offering gender transition procedures."

28 **SECTION 2.** If any provision of this act or its application is held invalid, the
29 invalidity does not affect other provisions or applications of this act that can be given effect
30 without the invalid provisions or application, and to this end the provisions of this act are
31 severable.

32 **SECTION 3.** This act becomes effective October 1, 2021.