



United States of America
Stakeholder Report for the Universal Periodic Review (Fourth Cycle)
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Human Rights of Intersex and Transgender Individuals
in the United States of America

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1. **Outright International** works with partners around the globe to strengthen the capacity of the lesbian, gay, bisexual, trans, intersex, and queer (LGBTIQ) human rights movement, documents and exposes human rights violations against LGBTIQ people, and

advocates for inclusion and equality. Founded in 1990, with staff in over a dozen countries, Outright works with the United Nations (UN), regional human rights monitoring bodies, and civil society partners. Outright holds consultative status at the United Nations, where it serves as the secretariat of the UN LGBTI Core Group. *This submission specifically focuses on human rights violations against intersex people as well as transgender people in the United States.*

Human Rights of Intersex Persons

Introduction

2. Intersex people are born with innate physical variations of sex characteristics, such as genitals, internal reproductive organs, chromosomes, and/or hormones, that don't align with typical notions of either a female or a male body. Intersex people are not that rare; up to 1.7 percent of the population are born with intersex traits.ⁱ Often discovered at birth or early in childhood, intersex traits are more common than identical twinsⁱⁱ and equal to about 135 million people globally and more than three million in the United States. Intersex individuals suffer lifelong physical and emotional harms resulting from nonconsensual, medically unnecessary surgical interventions as infants and children and from lack of access to intersex-affirming and competent health care services as adults. These human rights violations exist at the intersection of children's rights, disability rights, women's and reproductive rights, as well as LGBTIQ people's human rights.
3. Over the last 12 years, there has been a notable increase in the recognition of intersex people's rights by UN human rights monitoring mechanisms.ⁱⁱⁱ The rights of intersex people to live free from discrimination and violence, including in medical settings, have been affirmed by multiple UN bodies, as well as regional human rights mechanisms.^{iv} In a 2013 report, the World Health Organization opposed early sterilizing surgeries on intersex children.^v The UN Committee on the Rights of the Child has called on states to ensure that no child is subjected to unnecessary medical or surgical treatment during infancy or childhood and to guarantee every child's bodily integrity, autonomy, and self-determination.^{vi}
4. In 2024, the UN Human Rights Council passed the first-ever resolution on intersex people's human rights, calling on member states to enhance efforts to combat discrimination, violence, and harmful practices against intersex people, including harmful surgeries on infants and children.^{vii} According to that resolution, a comprehensive report by the UN Office of the High Commissioner for Human Rights is expected in September 2025.

Protection from discrimination and violence

Status of Implementation: Accepted, Not Implemented

5. In its third cycle UPR, the United States accepted a recommendation to guarantee the protection of intersex persons and end the discrimination they suffer.^{viii}
6. However, the continued practice of intersex genital mutilation and other violations of the right to health of intersex persons in the country demonstrate that this recommendation has not been fully implemented.

Intersex Genital Mutilation

7. The leading human rights issues impacting intersex individuals born with intersex traits are the medically unnecessary and irreversible surgeries done without their consent as children to “normalize” their healthy bodies.^{ix}
8. Human rights defenders commonly refer to these harmful practices as intersex genital mutilation (IGM). Intersex genital mutilation is wrongly perceived by some medical professionals and families as medical, therapeutic, and in a child's best interest. However, as with female genital mutilation, medical practitioners carry out these surgeries for biased cultural or sociological reasons. Parents and other caregivers often believe the intervention is in the best interest of the child for cultural reasons, which include looking “normal,” having “proper sexuality,” and being a “proper woman” or a “proper man.”
9. Rather than recognizing the wide variety of sex characteristics, many view the birth of an intersex child as a tragedy best responded to secretly and as a matter of urgency.^x
10. Despite decades of advocacy by intersex activists and a growing acknowledgment of these human rights violations by both UN bodies and human rights organizations, these harmful surgeries continue to happen in hospitals across the United States.^{xi}
11. In fact, in the last five years, more than two dozen states have passed laws banning gender-affirming care for trans youth *while also explicitly excluding genital mutilation of intersex minors*.^{xii} While these laws do not *require* so-called normalizing interventions for intersex minors, they, for the first time, effectively reinforce the legality of performing surgical interventions on intersex infants and children without their consent.^{xiii} These legislative bans spreading across the United States deny health care access to trans youth while also affirming the use of intersex genital mutilation, serving as state-sponsored mechanisms for enforcing binary sex and gender conformity.
12. Current research shows that, as with female genital mutilation, surgically modifying the bodies of intersex infants and children causes more harm than it overcomes. These procedures can involve the removal of healthy gonads, the cutting of girls’ clitorises, the

creation of a vagina in a toddler, and multiple surgeries on a boy's penis. They can also include forced and excessive genital exams, medical displays, and genital photography. Even when experienced as an infant or toddler, there are serious, harmful physical and emotional consequences impacting children through adulthood. These include loss or impairment of sexual sensation, poorer sexual function, painful scarring, painful intercourse, urinary incontinence and other problems with passing urine, increased sexual anxieties, problems with desire, less sexual activity, lifelong trauma, and mental suffering.^{xiv}

13. Article 5 of the Universal Declaration of Human Rights provides for freedom from torture and degrading treatment;^{xv} and the UN Special Rapporteur on Torture has specifically described these non-consensual, medically unnecessary interventions on children as a form of torture in medical settings.^{xvi}
14. Often, a person's intersex status, as well as the surgeries done in infancy and childhood, are hidden from the individual, and it is common for them to discover the concealed truth later in adolescence or adulthood. This leads to feelings of anger and medical mistrust and can result in shame, depression, and suicidal ideation.^{xvii} These non-consensual and concealed medically unnecessary interventions violate not only an intersex individual's right to bodily and mental integrity but also their right to truth, as affirmed by the Yogyakarta Principles.^{xviii}

Access to Health Care

15. Overall, intersex individuals are not able to enjoy their right to health as they disproportionately struggle to access appropriate health care and experience health disparities. A study of 198 intersex adults in the United States found that over 43 percent of participants rated their physical health as fair/poor, and 53 percent reported fair/poor mental health.^{xix} Another U.S. study found 62 percent of intersex respondents had experienced an adverse reaction from a health care provider when they disclosed their intersex status, and 36 percent reported that they fear seeking medical treatment.
16. The challenges faced by intersex individuals in attempts to secure their right to health reveal severe violations under international human rights law. Article 25 of the Universal Declaration of Rights provides the right to medical care.^{xx} Principle 17 of the Yogyakarta Principles provides for the right to the highest attainable standard of health.^{xxi} The various experiences of intersex individuals in health care settings are directly at odds with these standards.

Past UPR Recommendations Not Implemented

17. 2020 UPR Cycle 36: Ratify the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities (Afghanistan and Sudan).
Status: *Still unratified*
18. 2) 2020 UPR Cycle 36: Guarantee the protection of lesbian, gay, bisexual, transgender, and intersex persons and put an end to the discrimination they suffer (France).
Status: *Regression observed under 2025 federal policies*

Recommendations

19. Ratify the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of Persons with Disabilities, and the International Covenant on Economic, Social, and Cultural Rights.
20. Repeal President Trump's Executive Order, *Defending Women From Gender Ideology Extremism, And Restoring Biological Truth to The Federal Government* and legally recognize the existence of intersex people.^{xxii}
21. Align federal policies with HRC Resolution 55/14 (2024) on combating intersex discrimination by passing the Federal Equality Act, inclusive of anti-discrimination protections based on sex characteristics.^{xxiii}
22. Align federal policies with the Yogyakarta Principles + 10 by banning IGM on minors by law and ensuring access to childhood medical records.^{xxiv}
23. Protect the human rights of intersex individuals and promote bodily and mental integrity in all health policies by adopting the published best practice recommendations proposed by US Health and Human Services in January 2025.^{xxv}
24. State attorneys general should investigate the practice of conducting medically unnecessary surgeries on intersex children without their consent in state hospitals and enforce applicable state laws, such as those on FGM and sterilization.

Human Rights of Transgender Persons

Introduction

25. International human rights law protects transgender individuals through principles of non-discrimination, privacy, health, and equality. Treaty bodies have consistently clarified that the provisions of international treaties and customary international law include the human rights of all, including trans and nonbinary people.
26. In the United States, recent developments at the federal level have led to a reversal of legal and policy protections for trans and nonbinary individuals. Trans and nonbinary people also face an increased risk of discrimination and violence. In 2025, the United States began systematically violating the human rights of trans and nonbinary people through discriminatory laws, policies, and practices. Actions taken by federal and state governments in 2024 and 2025 have intensified attacks on the rights of trans and nonbinary individuals in areas such as health care, legal recognition, safety, and dignity. This report highlights significant violations and offers recommendations to address these systemic issues.

Protection from discrimination and violence

Status of Implementation: Accepted, Not Implemented

27. In its third cycle UPR, the United States accepted four recommendations to enact measures to prevent and combat discrimination and violence against transgender persons based on their gender identity.^{xxvi}
28. Laws, policies, and practices at the federal and state levels that deny gender-affirming health care, restrict the legal recognition of gender identity and criminalize freedom of expression directly violate transgender persons' right to non-discrimination and further expose them to violence.

Denial of Gender-Affirming Health Care

29. State Bans: 26 states criminalize or restrict gender-affirming care for trans youth, violating health rights (ICESCR Art. 12) and perpetuating cruel, inhuman, or degrading treatment.
30. Federal Actions: A January 2025 executive order revoked federally subsidized Medicaid/TRICARE coverage for gender-affirming health care and mandated Department of Justice investigations into providers, instilling widespread fear of prosecution.^{xxvii}

31. Prison Health Care: With the recently signed Executive Order 14168, incarcerated trans people are denied hormone therapy and surgeries, violating the Mandela Rules.^{xxviii}

Legal Erasure and Identity Document Restrictions

32. Federal Recognition: A January 2025 executive order redefined sex as “fixed at conception,” erasing federal recognition of transgender identities and restricting passport updates.
33. State-Level Barriers: 18 states prohibit gender marker changes on birth certificates, increasing risks of harassment, employment discrimination, and violence.

Criminalization of Public Expression

34. Drag Bans: 14 states have passed laws conflating drag performances with “adult entertainment,” censoring LGBTIQ cultural and artistic expression under the guise of “protecting children.”^{xxix}
35. Educational Censorship: Bans on transgender-inclusive curricula and library books violate the right to information and freedom of expression (ICCPR Art. 19) and cultural participation.^{xxx}

Military and Immigration Discrimination

36. Military Ban: A January 2025 order reinstated the ban on transgender military service, reversing Biden-era protections^{xxxi}.
37. Detention Policies: The US Immigration and Customs Enforcement detains transgender migrants in facilities inconsistent with their gender identity, exposing them to abuse^{xxxii}.

Surge in Legislative Hostility

38. 2025 Bills: Over 120 anti-trans bills have been filed in 2025, targeting health care, education, and public accommodations—a 50 percent increase from 2024.^{xxxiii}

Recommendations

Past UPR Recommendations Not Implemented

39. 2020 UPR Cycle 36. Strengthen measures to prevent and combat violence, especially the rate of murder of transgender women of color, as well as the violence experienced by the broader lesbian, gay, bisexual, and transgender community. (Malta 26.148)

Status: Regression observed under 2025 federal policies.

40. 2020 UPR Cycle 36: Strengthen measures to combat discrimination against LGBT individuals. (France 26.147; Belgium 26.146; Iceland 26.140)

Status: Regression observed under 2025 federal policies.

Recommendations

Health Care Access

- 41. Repeal state bans on gender-affirming care
- 42. Restore federal health care funding
- 43. Train medical providers on WHO standards for gender-affirming health care (ICD-11)

Legal Recognition

- 44. Revoke Executive Order 14168 restricting federal gender recognition and allow gender marker changes on all federal documents based on self-determination.
- 45. Reinstate federal recognition of nonbinary gender markers on all federal documents, including US passports.
- 46. Encourage states to adopt the model of self-determined legal gender recognition.

Anti-Discrimination Protections

- 47. Enforce Title IX to protect transgender students and athletes from discrimination in schools and sports.^{xxxiv}
- 48. Pass the Equality Act to prohibit discrimination in employment, housing, and public services on the basis of sexual orientation, gender identity, gender expression, and sex characteristics.

Accountability and Monitoring

- 49. Collaborate with the UN Independent Expert on SOGI to investigate state-level human rights violations based on sexual orientation, gender identity, gender expression, and sex characteristics.^{xxxv}
- 50. Collect disaggregated data on anti-trans violence through the Centers for Disease Control and Prevention (CDC).

- ⁱ “Intersex People,” UN Free & Equal, accessed March 21, 2025, <https://www.unfe.org/know-the-facts/challenges-solutions/intersex>.
- ⁱⁱ Joyce Martin et al., “Births: Final Data for 2016,” *US Center for Disease Control National Vital Statistics Reports* 67, no. 1 (2018): https://www.cdc.gov/nchs/data/nvsr/nvsr67/nvsr67_01.pdf.
- ⁱⁱⁱ Zelayandia-Gonzalez, E. The Growing Visibility of Intersex Demands at the United Nations: A Review of the Treaty Bodies’ Concluding Observations, *Soc. Sci.* **2023**, 12, 73.
- ^{iv} United Nations Office of the United Nations High Commissioner for Human Rights, *Technical Note on the Human Rights of Intersex People: Human Rights Standards and Good Practices*, 2023, <https://www.ohchr.org/en/documents/tools-and-resources/ohchr-technical-note-human-rights-intersex-people-human-rights>.
- ^v WHO, UN OHCHR, UN Women, UNAIDS, UNDP, UNFPA, UNICEF and WHO, “Eliminating forced, coercive and otherwise involuntary sterilization: an interagency statement,” joint statement, May 3, 2014, [https://www.who.int/publications/i/item/9789241507325#:~:text=Download%20\(785.2%20kB\)-,Overview,making%20of%20the%20person%20concerned](https://www.who.int/publications/i/item/9789241507325#:~:text=Download%20(785.2%20kB)-,Overview,making%20of%20the%20person%20concerned).
- ^{vi} Ibid.
- ^{vii} H.R.C. Res. 55/14 (combating discrimination, violence and harmful practices against intersex persons), A/HRC/55/14 (April 4, 2024), <https://digitallibrary.un.org/record/4045699?v=pdf&ln=en>. *persons*, adopted April 5, 2024
- ^{viii} 26.147 Guarantee the protection of lesbian, gay, bisexual, transgender and intersex persons and put an end to the discrimination they suffer (France).
- ^{ix} Human Rights Watch, *I Want to Be Like Nature Made Me*, 2017, <https://www.hrw.org/report/2017/07/25/i-want-be-nature-made-me/medically-unnecessary-surgeries-intersex-children-us>.
- ^x Melinda Jones, “Intersex Genital Mutilation – A Western Version of FGM,” *The International Journal of Children’s Rights* 25, no. 2 (2017): 396-411, <https://doi.org/10.1163/15718182-02502008>.
- ^{xi} Human Rights Watch, *I Want to Be Like Nature Made Me*, 2017, <https://www.hrw.org/report/2017/07/25/i-want-be-nature-made-me/medically-unnecessary-surgeries-intersex-children-us>.
- ^{xii} Human Rights Watch, *US: Anti-Trans Bills Also Harm Intersex Children, Explicit Exceptions in Legislation Allow Risky “Normalizing” Surgery*, October 26, 2022.
- ^{xiii} Ido Katri and Maayan Sudai, The Yale Law Journal, Vol. 124 No. 5, *Intersex, Trans, and the Irrationality of Gender-Affirming-Care Bans*, 134:1521, March 2025.
- ^{xiv} Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services, *Advancing Health Equity for Intersex Individuals*, 2025, p. 8.
- ^{xv} United Nations General Assembly Resolution 217A Universal Declaration of Human Rights, *Article 5: Freedom from Torture and Degrading Treatment*, 1948.
- ^{xvi} Juan E. Mendez, UN Special Rapporteur, *Report on torture and other cruel, inhuman or degrading treatment or punishment*, 2013.
- ^{xvii} Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services, *Advancing Health Equity for Intersex Individuals*, 2025, p. 9.
- ^{xviii} Principle 37 of the Yogyakarta Principles +10 affirms that every victim of a human rights violation on the basis of sex characteristics “has the right to know the truth about the facts, circumstances and reasons why the violation occurred.” Yogyakarta Principles Plus Ten: Additional Principles and State Obligations on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics to Complement the Yogyakarta Principles, 10 November 2017, http://yogyakartaprinciples.org/wp-content/uploads/2017/11/A5_yogyakartaWEB-2.pdf.
- ^{xix} Rosenwohl-Mack, A., Tamar-Mattis, S., Baratz, A. B., Dalke, K. B., Ittelson, A., Zieselman, K., & Flatt, J. D. (2020). A national study on the physical and mental health of intersex adults in the U.S. *PLOS ONE*, 15(10), e0240088.

<https://doi.org/10.1371/journal.pone.0240088>

^{xx}United Nations General Assembly Resolution 217A Universal Declaration of Human Rights, [Article 25: Right to Medical Care](#), 1948.

^{xxi}International Panel of Experts in International Human Rights Law, Sexual Orientation, Gender Identity, Gender Expression, and Sex Characteristics, [The Yogyakarta Principles](#), Principle 17, 2006.

^{xxii}U.S. President Donald Trump, Executive Order, [Defending Women From Gender Ideology Extremism, And Restoring Biological Truth to The Federal Government](#), January 20, 2025.

^{xxiii}H.R.C. Res. 55/14 (combating discrimination, violence and harmful practices against intersex persons), A/HRC/55/14 (April 4, 2024), <https://digitallibrary.un.org/record/4045699?v=pdf&ln=en>. [persons](#), adopted April 5, 2024.

^{xxiv}International Panel of Experts in International Human Rights Law, Sexual Orientation, Gender Identity, Gender Expression, and Sex Characteristics, [The Yogyakarta Principles Plus 10: Additional Principles and State Obligations on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Identity, Gender Expression, and Sex Characteristics to Complement the Yogyakarta Principles](#), 2017, Principles 32 and 37.

^{xxv}Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services, [Advancing Health Equity for Intersex Individuals](#), 2025.

^{xxvi}26.140 Strengthen activities and laws aimed at eliminating discrimination in society and other forms of intolerance against minorities and other groups, including based on race, ethnicity, sexual orientation and gender identity (Iceland); 26.146 Take all possible steps at the state and federal levels to prohibit discrimination based on sexual orientation or gender identity in credit, education, employment, housing, jury service, public accommodation and taxpayer-funded programmes (Belgium); 26.147 Guarantee the protection of lesbian, gay, bisexual, transgender and intersex persons and put an end to the discrimination they suffer (France); 26.148 Strengthen measures to prevent and combat violence, especially the rate of murder of transgender women of colour, as well as the violence experienced by the broader lesbian, gay, bisexual and transgender community (Malta).

^{xxvii}Lindsay Dawson, *President Trump's Executive Order on Gender Affirming Care: Responses by Providers, States, and Litigation*, <https://www.kff.org/policy-watch/president-trumps-executive-order-on-gender-affirming-care-responses-by-providers-states-and-litigation/> February 11, 2025

^{xxviii}United Nations Office of Drugs and Crime, *The United Nations Standard Minimum Rules for the Treatment of Prisoners*, https://www.unodc.org/documents/justice-and-prison-reform/Nelson_Mandela_Rules-E-ebook.pdf

^{xxix}Ibid.

^{xxx}Advocates for Trans Equality, *The State of Trans Healthcare Laws in 2025*, <https://transequality.org/news/state-trans-healthcare-202> , January 13, 2025

^{xxxi}Jo Yurcaba & Garrett Haake, NBC News, *Trump signs executive order barring transgender people from military service*, <https://www.nbcnews.com/nbc-out/out-politics-and-policy/trump-executive-order-transgender-military-dei-rcna189470> , January 27, 2025

^{xxxii}Immigration Equality, National Immigrant Justice Center & Human Right First, “No Human Being Should Be Held There” - *The Mistreatment of LGBTQ and HIV-Positive People in U.S. Federal Jails* <https://immigrantjustice.org/sites/default/files/content-type/research-item/documents/2024-06/No%20Human%20Being%20Should%20Be%20Held%20There%20-%20THE%20MISTREATMENT%20OF%20LGBTQ%20AND%20HIV%20POSITIVE%20PEOPLE%20IN%20U.S.%20FEDERAL%20IMMIGRATION%20JAILS.pdf>

^{xxxiii}Advocates for Trans Equality, *The State of Trans Healthcare Laws in 2025*, <https://transequality.org/news/state-trans-healthcare-202> , January 13, 2025

^{xxxiv}Advocates for Trans Equality, *New Title IX Rules Protect Our Trans Students*, <https://transequality.org/news/new-title-ix-rules-protect-our-trans-students>, April 24, 2024

^{xxxv}United Nations, Office of the Human Right High Commissioner, *Independent Expert on Sexual Orientation and Gender Identity*. <https://www.ohchr.org/en/special-procedures/ie-sexual-orientation-and-gender-identity>, 2025