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## **HUMAN RIGHTS VIOLATIONS AGAINST LGBTQ+ COMMUNITIES IN THE UNITED STATES**

**Submission to the United Nations Universal Periodic Review of the  
United States of America, Fourth Cycle, November 2026,  
Fiftieth Session of the UPR, Human Rights Council**

Submitted on April 9, 2026, by:

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### **I. Introduction**



**ACCESS • JUSTICE • IMPACT**



**HUMAN  
RIGHTS  
WATCH**

1. During its 2020 Universal Periodic Review cycle, the United States of America (U.S.) received recommendations from Iceland, Belgium, France, and Malta regarding LGBTQ+<sup>1</sup> rights. Iceland called upon the U.S. to “strengthen activities and laws aimed at eliminating discrimination in society and other forms of intolerance against minorities and other groups, including based on ... sexual orientation and gender identity.”<sup>2</sup> Belgium recommended that the U.S. “[t]ake 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.”<sup>3</sup> Subsequently, France advised the U.S. to “[g]uarantee the protection of lesbian, gay, bisexual, transgender and intersex persons and put an end to the discrimination they suffer.”<sup>4</sup> Malta further urged the U.S. to “[s]trengthen 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.”<sup>5</sup>
2. The U.S. accepted these recommendations, citing Executive Order 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation,” which directed federal agencies to develop a plan to fully implement laws that prohibit sex discrimination, including sexual orientation and gender identity discrimination.<sup>6</sup> In January 2025, however, the Trump Administration issued Executive Order 14168, titled “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government,” stating that the federal government recognizes only two sexes, male and female, and that gender identity does not provide a meaningful basis for identification.<sup>7</sup> The order rescinded the previous administration’s Executive Order 13988 and instructed agencies to engage in gender identity discrimination by excluding transgender people from spaces and services inconsistent with their sex assigned at birth.<sup>8</sup>
3. In recent years, at the state and now the federal level, discrimination against LGBTQ+ people has worsened significantly. In 2025, the American Civil Liberties Union tracked 616 bills that it described as anti-LGBTQ+ in the U.S.<sup>9</sup> Although not all of these bills became law, they demonstrate the widespread danger that LGBTQ+ people face.
4. Recent state laws particularly target the rights of transgender people. Alarming, many states maintain harsh restrictions on health care for transgender children despite this being a group disproportionately at risk for harm. (The term “children” is used in the Convention on the Rights of the Child to describe those below the age of eighteen; in this submission “youth” is at times used to refer more generally to children and young adults.) As of April 2026, twenty-seven states ban some form of gender-affirming health care for transgender children, and six of these states make it a felony crime to provide them with certain forms of medical care that are widely regarded as best practice.<sup>10</sup> Fourteen states explicitly exclude gender-affirming care from their state employee health benefits, and two states have passed legislation that explicitly permits private insurers to refuse coverage for gender-affirming care.<sup>11</sup> Restrictive laws extend to educational settings as well. Twenty-nine U.S. states ban transgender students from participating in sports that align with their gender identity.<sup>12</sup> Twenty-one states have a law or policy which interferes with transgender people’s access to bathrooms or facilities according to their gender identity.<sup>13</sup> Six states require school staff to out transgender students to their families if

they make specific disclosures about their gender identity, two states require school staff to do so if parents ask for the information, and seven additional states require outing of transgender youth before school staff can use a student's preferred name and pronouns.<sup>14</sup> Twelve states explicitly censor discussions of LGBTQ+ issues throughout school curricula, and nine states require advance parental notice of any LGBTQ+ related curricula.<sup>15</sup>

5. As stated by the United Nations (UN) High Commissioner for Human Rights, the “[a]pplication of international human rights law is guided by the fundamental principles of universality, equality, and non-discrimination. All human beings, irrespective of their sexual orientation and gender identity, are entitled to enjoy the protection of international human rights law.”<sup>16</sup> This submission relies on the following in its analysis:
  - UN human rights treaties the U.S. has ratified: the International Covenant on Civil and Political Rights (ICCPR),<sup>17</sup> Convention Against Torture (CAT),<sup>18</sup> and International Convention on the Elimination of All Forms of Racial Discrimination (ICERD);<sup>19</sup>
  - The Universal Declaration of Human Rights (UDHR),<sup>20</sup> the foundational document for the UN human rights system, which the U.S. played a pivotal role in drafting;
  - Three treaties the U.S. has signed although not yet ratified: the International Covenant on Economic, Social, and Cultural Rights (ICESCR),<sup>21</sup> Convention on the Rights of the Child (CRC),<sup>22</sup> and Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)<sup>23</sup>—as a signatory, the U.S. has “an obligation to refrain, in good faith from acts that would defeat the object and the purpose of the treaty.”<sup>24</sup>
6. Laws promoting discrimination against LGBTQ+ people undermine the fundamental human right to equality.<sup>25</sup>
7. Additionally, LGBTQ+ people in the U.S. face intersectional discrimination based on factors such as gender, race, and socioeconomic status. While LGBTQ+ individuals experience higher rates of homelessness than non-LGBTQ+ individuals, for example, this disparity is particularly pronounced among transgender individuals and LGBTQ+ people of color.<sup>26</sup> One study found that while only three percent of cisgender and genderqueer sexual minority adults had a recent experience with homelessness, that statistic rose to eight percent for transgender adults across all sexual orientations.<sup>27</sup> Racial and ethnic differences were also significant, with six percent of Black sexual minority people experiencing recent homelessness as compared to two percent among their white counterparts.<sup>28</sup> While more than one in five LGBTQ+ adults are living in poverty,<sup>29</sup> these rates increase for transgender people of color. Forty-five percent of Latinx transgender adults and forty percent of Black transgender adults are living in poverty.<sup>30</sup> Transgender individuals are particularly at risk of violence. Since 2013, 372 transgender and gender-expansive individuals have been victims of fatal violence in the U.S.,<sup>31</sup> and sixty-one percent of these victims were Black transgender women.<sup>32</sup>
8. Further, discrimination against LGBTQ+ individuals exists to an alarming degree against children, with lawmakers failing to protect and sometimes actively targeting these vulnerable members of the LGBTQ+ community. Despite the obligation of states to respect the rights of all children and protect them from discrimination,<sup>33</sup> lawmakers have

isolated transgender children by limiting their health care, freedom of expression, access to information, and access to facilities. These policies are particularly dangerous because LGBTQ+ children are already disproportionately faced with hardships that yield negative effects later in life.<sup>34</sup> Regarding homelessness, for example, LGBTQ+ youth are 120% more likely to experience homelessness compared to non-LGBTQ+ youth, in part because of family rejection.<sup>35</sup> Even though only ten percent of the general youth population identifies as LGBTQ+, they make up forty percent of the total homeless youth population.<sup>36</sup> Studies show that LGBTQ+ individuals tend to face a higher risk of developing mental health conditions compared to heterosexual individuals because of an increased exposure to hardships such as child abuse, housing adversity, and intimate partner violence.<sup>37</sup> These mental health conditions are exacerbated by the lack of gender-affirming care in many states.<sup>38</sup>

9. This climate of animosity, fueled in part by discriminatory laws, erodes LGBTQ+ people's ability to enjoy their rights, impacting every aspect of daily existence, including education,<sup>39</sup> health, and housing.<sup>40</sup> It also threatens the fundamental right to live with dignity that underpins all human rights.<sup>41</sup> As the Human Rights Committee has explained, "the right to life is a right that should not be interpreted narrowly. It concerns the entitlement of individuals . . . to enjoy a life with dignity."<sup>42</sup> Thus, states must "take appropriate measures to address the general conditions in society that may give rise to direct threats to life or prevent individuals from enjoying their right to life with dignity."<sup>43</sup>

## II. Analysis

### A. Education

**"Book banning is part of a larger scheme to erase LGBTQ+ people from schools."**

- *Simone Chriss, Director of Transgender Rights Initiative, Southern Legal Counsel*<sup>44</sup>

**"You don't need to punish that many teachers to make them afraid."**

- *Trey Walk, Human Rights Watch Researcher*<sup>45</sup>

10. Since 2021, states and school districts across the U.S. have enacted bans on educational materials and books addressing gender, sexuality, and race, both in school curricula and in public libraries,<sup>46</sup> as well as prevented classroom discussion on sexual orientation and gender identity.<sup>47</sup> A school book ban is any content-based action—whether by parents, administrators, or government officials—that results in a book being completely removed from student access or having its availability restricted or diminished within educational settings.<sup>48</sup> These bans fundamentally compromise student accessibility to educational materials and infringe upon the rights of students, educators, and authors.<sup>49</sup> Such discriminatory bans and censorship also violate the right to freedom of expression, including the "freedom to seek, receive and impart information and ideas of all kinds,"<sup>50</sup> and the right to education,<sup>51</sup> erasing the visibility of LGBTQ+ communities. As the Special Rapporteur on the Right to Freedom of Opinion and Expression has noted, "banning of books is an undemocratic practice in any part of the world."<sup>52</sup> The Yogyakarta Principles, which provide expert guidance on the application of international human rights law to sexual orientation and gender identity, further explain that the right

to freedom of expression “includes the expression of identity or personhood through . . . choice of name, or any other means, as well as the freedom to seek, receive and impart information and ideas of all kinds, including with regard to human rights, sexual orientation and gender identity.”<sup>53</sup>

11. PEN America has recorded 22,810 cases of book bans across 45 states and 451 school districts since 2021, with 39% of books banned in two or more school districts in 2023-2024 focusing on LGBTQ+ topics.<sup>54</sup> This censorship actively erases vital resources and representations. Books on topics like transgender identities are no longer available in many libraries.<sup>55</sup> Books with these topics are crucial guides for families and act as a resource for LGBTQ+ individuals.<sup>56</sup> Additionally, government websites have been scrubbing the “TQ” from LGBTQ+, signaling a larger effort to erase transgender and queer identities from public discourse.<sup>57</sup> This broader coordinated effort functions to push LGBTQ+ identities and issues out of schools and public spaces.<sup>58</sup>
12. Executive Order 14190, “Ending Radical Indoctrination in Schools,” issued by President Trump in January 2025, directs federal agencies to eliminate funding for schools that incorporate what it calls “gender ideology” and “discriminatory equity ideology,” effectively censoring LGBTQ+ inclusive curricula.<sup>59</sup> Additionally, it encourages the prosecution of teachers and school officials who support students in their gender transition, labeling some such actions “illegal.”<sup>60</sup>
13. Under the Biden Administration, Title IX was interpreted to prohibit discrimination based on gender identity; under new Executive Order 14168, titled “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government,” however, the current administration has reversed this stance.<sup>61</sup> This executive order also pledges to defund universities that provide key protections for transgender students.<sup>62</sup>
14. In a 2025 case, *Mahmoud v. Taylor*, the U.S. Supreme Court ruled that not allowing parents to opt their children out of reading storybooks as part of an LGBTQ+ inclusive curriculum burdened their religious freedom and could not be justified by the school’s interest in protecting LGBTQ+ students from stigma and isolation.<sup>63</sup> This decision stigmatizes LGBTQ+ students and families and will likely foster the further expansion of discriminatory censorship.<sup>64</sup>
15. At the state level, a flurry of “Don’t Say LGBTQ+” laws and restrictions in school districts and schools have been sweeping the country that effectively prevent classroom discussions on sexual orientation and gender identity and even the use of transgender students’ names and pronouns. Many of these laws violate the right to freedom of expression<sup>65</sup> and are inconsistent with the right to education.<sup>66</sup> As of 2026, twelve states have laws broadly restricting LGBTQ+ topics in schools, with nine states requiring parental notification for LGBTQ+ inclusive instruction, either allowing parents to opt out or requiring them to opt in.<sup>67</sup> Between 2022 and 2025, nine states passed “Don’t Say LGBTQ+” laws.<sup>68</sup> Almost half of U.S. states have no law protecting LGBTQ+ students from discrimination in schools, and two states have laws preventing schools or districts from adding LGBTQ+ protections to nondiscrimination policies.<sup>69</sup> As of 2024, fifteen states have censored discussions on sex-based structural inequality in schools.<sup>70</sup>

16. Moreover, these laws are often coupled with legislation to restrict classroom discussions of race and racism, and a number of states have distorted the teaching of Black history.<sup>71</sup> At the federal level, the current administration has suggested that teaching about concepts of systemic and structural racism, white privilege, and unconscious bias is illegal and has threatened federal funding for schools that engage in discussions of race or racism that the agency determines “create a hostile environment based on race” for students who participate.<sup>72</sup> ICERD obligates states to “adopt immediate and effective measures, particularly in the fields of teaching, education, culture and information, with a view to combating prejudices which lead to racial discrimination.”<sup>73</sup> Education about historical injustices and education about racism play a critical role in preventing future prejudice and discrimination. While proponents frame these restrictions on teaching and expression in the classroom as an exercise of “parental rights,” in practice these are discriminatory and censor instruction for all students, even those whose parents might support a more inclusive education, and function to deprive others of their freedom of expression.<sup>74</sup>
17. State and federal restrictions on inclusive education have also limited LGBTQ+ youth’s access to adequate sexuality education.<sup>75</sup> Comprehensive sexuality education is a necessary factor in building awareness of healthy relationships, sexuality, bodily autonomy, and health care resources.<sup>76</sup> Schools with LGBTQ+-inclusive sexuality education curricula see improvements in mental and sexual health for LGBTQ+ students and in school climate for all students.<sup>77</sup> However, despite public and professional support for comprehensive sexuality education, a 2021 GLSEN national study found only 7.4% of youth received LGBTQ+-inclusive sexuality education.<sup>78</sup> As of 2026, only seven states explicitly require an inclusive curriculum, while nineteen other states’ have at least one LGBTQ+-specific school censorship law.<sup>79</sup> The Trump Administration’s recent executive orders censoring gender-inclusive curricula<sup>80</sup> actively disincentivize inclusive, comprehensive sexuality education and make it more likely that schools will implement harmful, non-inclusive, abstinence-only curricula.
18. This rollback exacerbates existing disparities by limiting access to medically accurate and inclusive sexuality education, leaving many students without essential knowledge. The lack of inclusive, comprehensive sexuality education curricula exacerbates the negative sexual health outcomes experienced by LGBTQ+ youth, as compared with their non-LGBTQ+ peers.<sup>81</sup> Additionally, exclusive sexuality education promotes a heteronormative environment, fostering homophobic bullying and marginalizing LGBTQ+ youth.<sup>82</sup> Research links homophobic school environments and inadequate sexual health resources to the disproportionately negative mental health outcomes, such as depression and suicidality, faced by LGBTQ+ youth.<sup>83</sup> These issues are even more prevalent among LGBTQ+ youth of color.<sup>84</sup>

## **B. Health**

**“I can say that if I hadn't sought gender-affirming care, I wouldn't be here now.”**

**- Nico Watson, Former Miami Teacher<sup>85</sup>**

**“[Gender-affirming care bans] will leave us incapable of treating a large number of patients. It never occurred to me when I became a doctor that I would ever, in this country,**

**be forced to withhold care of a treatable condition.”**

- *Dr. Sara Danker, Assistant Professor of Surgery, University of Miami Miller School of Medicine*<sup>86</sup>

19. U.S. policy at both the federal and state levels has impeded access to critical health care for LGBTQ+ individuals in general and transgender individuals in particular. Denial of gender-affirming care forces incongruence with one’s gender identity for individuals with gender dysphoria<sup>87</sup> and implicates the overarching rights to physical and mental integrity,<sup>88</sup> consisting of the rights to privacy,<sup>89</sup> security of person,<sup>90</sup> and freedom from cruel, inhuman, and degrading treatment,<sup>91</sup> as well as the rights to health<sup>92</sup> and life.<sup>93</sup> Yogyakarta Principle 6, which examines the right to privacy, specifically calls on states to “[r]epeal any law. . . that denies to individuals the opportunity to change their bodies as a means of expressing their gender identity.”<sup>94</sup>
20. Gender affirming care is considered the gold standard in medical care by numerous health care providers and practitioners. The American Medical Association,<sup>95</sup> American Academy of Pediatrics,<sup>96</sup> American Psychological Association,<sup>97</sup> American Academy of Child and Adolescent Psychiatry,<sup>98</sup> and World Professional Association for Transgender Health (WPATH)<sup>99</sup> have all published guidelines and policy statements on the provision of appropriate gender-affirming care, including care that is essential in treating gender dysphoria.<sup>100</sup> According to one author, “more than a dozen studies of more than 30,000 transgender and gender-diverse young people consistently show that access to gender-affirming care is associated with better mental health outcomes.”<sup>101</sup> In fact, impeding access to medically necessary treatment to alleviate gender dysphoria is linked to higher rates of depression, anxiety, and suicidality,<sup>102</sup> jeopardizing the right to life.<sup>103</sup>
21. As noted above, within hours of his inauguration, President Trump signed an executive order titled “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government.”<sup>104</sup> This order recognizes only two sexes—male and female—based on “biological characteristics” and directs agencies to immediately withdraw federal funding from any entity promoting “gender ideology,” or “the false claim that males can identify as and thus become women and vice versa.”<sup>105</sup> Additionally, the order directs federal employees to interpret the terms “sex,” “male,” “female,” “women,” “boys,” and “girls” in line with the order’s definitions, and to apply this to all “statutes, regulations, or guidance in all other official agency business, documents, and communications.”<sup>106</sup> This means that federal documents such as passports, Social Security records, and other government-issued identification now have to be changed to reflect an individual’s sex assigned at birth.<sup>107</sup> In a 2025 case, *Trump v. Orr*, the Supreme Court granted a stay application in favor of the U.S. government, allowing the U.S. State Department to begin enforcement of this policy with regard to passports.<sup>108</sup> Moreover, under the direction of President Trump, Secretary of Defense Pete Hegseth indefinitely paused all gender-affirming care for transgender active-duty service members,<sup>109</sup> and the Veterans Administration ended such care for veterans.<sup>110</sup>
22. Executive Order 14187, “Protecting Children from Chemical and Surgical Mutilation,” signed on January 28, 2025, severely restricts access for transgender youth to best

practice gender-affirming care.<sup>111</sup> The order calls for heads of federal agencies to “immediately take appropriate steps to ensure that institutions receiving Federal research or education grants” end support for gender-affirming care for youth.<sup>112</sup> The language of the executive order defines “child” to mean an individual 19 years old or younger, encompassing some youth who are over 18 years old.<sup>113</sup> The order prohibits the following:

“[T]he use of puberty blockers, including GnRH agonists and other interventions, to delay the onset or progression of normally timed puberty in an individual who does not identify as his or her sex; the use of sex hormones, such as . . . estrogen, progesterone, or testosterone . . . and surgical procedures that attempt to transform an individual’s physical appearance to align with an identify that differs from his or her sex . . .”<sup>114</sup>

23. In response to the executive orders, many U.S. hospitals paused gender-affirming care for patients under 19, although the Los Angeles Children’s Hospital and some other facilities subsequently restored that care.<sup>115</sup> The administration has praised “health systems in Colorado, Virginia, and other states [that] had paused such services or canceled appointments.”<sup>116</sup> The ensuing denial of care and legal confusion around the litany of executive orders signed by President Trump have left LGBTQ+ youth “depriv[ed] . . . of necessary medical care solely on the basis of their sex and transgender status.”<sup>117</sup> The administration’s executive orders have also had a broader chilling effect on critical health information.<sup>118</sup> In response to funding threats, universities and hospitals are defunding or revoking research grants in a proactive manner.<sup>119</sup> The Food and Drug Administration’s website has deleted previous summaries of “listening sessions with transgender adults and teens aimed at understanding barriers to obtaining healthcare and unmet medical needs.”<sup>120</sup>
24. At the state level, twenty-six states ban best practice gender-affirming medication and surgical care for transgender children, and one state bans gender-affirming surgical care for transgender children. Six of these states make it a felony to provide gender-affirming care to transgender children.<sup>121</sup> In 2023, Tennessee enacted a law that prohibits doctors from providing puberty blockers or hormones to any minor for the purpose of validating their gender identity, yet permits the use of these interventions to treat other conditions.<sup>122</sup> In 2025, the Supreme Court upheld this ban in *United States v. Skrametti*, finding that the law did not violate the Fourteenth Amendment’s equal protection guarantee.<sup>123</sup>
25. In addition to specifically targeting gender-affirming care for transgender individuals, U.S. health care law, policy, and practice impose upon LGBTQ+ people broad systematic barriers to accessing general health care. In one study, 8% of LGBTQ individuals reported that a health care provider has refused to see them due to the individual’s actual or perceived sexual orientation.<sup>124</sup> Additionally, in that same study, 29% of transgender individuals reported that a health care provider has refused to see them due to their actual or perceived gender identity.<sup>125</sup> Even when not barred from care altogether, many LGBTQ+ individuals experience discrimination and mistreatment when seeking health care. One recent study found that LGBT adults were twice as likely as non-LGBT adults to report having had a negative experience while receiving health care in the past three

years, including having a provider ignore a question or request or blame them for a health problem.<sup>126</sup> Moreover, many health care professionals lack adequate training in LGBTQ+ health issues and may be unaware of the unique health risks LGBTQ+ individuals face or hold unconscious biases that affect their treatment decisions.<sup>127</sup>

26. Discrimination that impedes access to health care leads to negative health outcomes for members of the LGBTQ+ community. LGBT adults are more likely than non-LGBT adults to report adverse health consequences due to discrimination or mistreatment by a health care provider.<sup>128</sup> Lack of adequate health care and discrimination contribute to higher rates among LGBTQ+ individuals of mental health disorders such as depression and anxiety, delayed diagnoses, substance abuse, and premature mortality due to suicide, homicide, cardiovascular disease, cancer, and HIV/AIDS-related causes.<sup>129</sup> According to a 2022 survey, 26% of LGBTQ+ individuals avoid medical offices, mental health providers, or hospitals to avoid discrimination.<sup>130</sup> Moreover, a shortage of health care providers, especially in rural areas, means that many LGBTQ+ individuals cannot find alternative care providers after experiencing discrimination.<sup>131</sup> LGBTQ+ patients are also less likely to disclose their identity to providers due to mistrust and fear of discrimination, resulting in a decreased standard of care and lack of education on relevant health issues affecting sexual minority populations.<sup>132</sup>
27. Discrimination in the provision of health care is legally allowed in some states with religious exemption laws. Ten states in the U.S. have targeted religious exemption laws that allow health care providers to discriminate against LGBTQ+ patients based on the provider's own religious views.<sup>133</sup> Twenty-eight states have broad religious exemption laws that permit individuals or organizations to seek exemptions from state laws that burden religious belief.<sup>134</sup> Some of these broad exemption laws afford providers an avenue through which they may seek and receive license to discriminate against LGBTQ+ patients.<sup>135</sup> Moreover, the actions of President Trump in his second term have exacerbated the lack of access to health care for LGBTQ+ individuals. In addition to its executive orders targeting transgender individuals, the Trump Administration has rolled back previous expansions to the Affordable Care Act<sup>136</sup> and prohibited programs that receive federal funds from recognizing gender identity other than sex assigned at birth. Following the recent executive orders, federal agencies, including the Centers for Disease Control and Prevention (CDC), removed webpages containing crucial information about LGBTQ+ health.<sup>137</sup> In particular, the CDC removed access to the Youth Risk Behavior Survey, which previously provided data from studies on LGBTQ+ youth health trends.<sup>138</sup> Health experts have warned that the data, which is now inaccessible, was crucial to providing health care services to LGBTQ+ individuals.<sup>139</sup>
28. Many U.S. states have restricted licensed medical professionals from engaging in conversion therapy, a discredited practice that attempts to change a person's sexual orientation or gender identity.<sup>140</sup> Major medical associations have condemned conversion therapy as ineffective and harmful, and have raised concerns that it is often done on children under the age of 18 without regard for their right to be heard and have their views taken into account.<sup>141</sup> In 2026, the US Supreme Court ruled in *Chiles v. Salazar* that bans on conversion therapy must be scrutinized under a stringent test for free expression, restricting states' ability to regulate these and other harmful practices in healthcare settings.<sup>142</sup>

### C. Housing

**“Many states are now environments that are hostile for members of LGBTQ+ communities to live in.”**

- *Yasemin Smallens, LGBT Rights Program Officer at Human Rights Watch*<sup>143</sup>

29. LGBTQ+ individuals in the U.S. face disproportionate housing insecurity and homelessness due to factors including discrimination, exclusion based on gender identity, and economic barriers to the right to adequate housing.<sup>144</sup>
30. A disproportionately high number of unhoused youth identify as LGBTQ+ or gender non-conforming.<sup>145</sup> Youth who identify as LGBTQ+ have been found to have a “120 percent higher risk of reporting homelessness compared to youth who identify as heterosexual and cisgender.”<sup>146</sup> According to the Human Rights Campaign, “LGBTQ youth comprise up to 40 percent of the total unaccompanied homeless youth population, despite [being] just [5] to 10 percent of the overall youth population.”<sup>147</sup> Homelessness in the LGBTQ+ community often begins during youth due to stigma and family rejection. 75% of LGBTQ+ youth surveyed by True Colors United identified parental abandonment and abuse at home, triggered by their LGBTQ+ status, as the reasons for their homelessness.<sup>148</sup>
31. Many transgender individuals face a hostile environment and particular obstacles in securing housing due to federal orders and state laws specifically targeting transgender individuals and a “cultural and political narrative that portray[s] transgender people in a dehumanizing or stereotypical light.”<sup>149</sup> Utah recently passed legislation that bans transgender students from living in public college dorms consistent with their gender identity.<sup>150</sup> Additionally, structural inequalities like a lack of access to economic resources, diminished educational opportunity, and workplace discrimination often make it harder for transgender people to secure adequate housing, particularly in combination with racial discrimination.<sup>151</sup> According to one study, 51% of Black transgender women and 59% of Native American transgender women have experienced homelessness.<sup>152</sup> The 2022 U.S. Transgender Survey found that 34% of respondents were experiencing poverty, the unemployment rate of respondents was 18%, and that 30% of respondents had experienced homelessness in their lifetime.<sup>153</sup>
32. On his first day in office, the Department of Housing and Urban Development (HUD) Secretary announced that HUD would stop enforcing the Equal Access Rule, which requires homeless service providers to ensure equal access for individuals based on their gender identity, making it more likely that transgender individuals will be refused services.<sup>154</sup> The agency later included a provision in grant agreements requiring grantees to certify they would not promote “gender ideology” in line with the Administration’s discriminatory Executive Order 14168.<sup>155</sup> Because of the gendered nature of many homelessness services, many are not accessible to unhoused transgender people and transgender survivors. According to Human Rights Watch, “many religiously affiliated providers [will] not shelter or counsel people” if they are transgender.<sup>156</sup> In one large-scale survey, 30% of transgender people reported experiencing homelessness at some point in their lives.<sup>157</sup> Six percent of those who experienced homelessness and sought

shelter said they were denied access to one or more shelters.<sup>158</sup> Another 26% did not seek shelter in the first place out of fear of being mistreated.<sup>159</sup> Of those who did find shelter, 70% reported a negative experience like harassment, assault, or being forced out of the shelter because they were transgender.<sup>160</sup>

### **III. Recommendations**

#### **A. General**

- The U.S. should immediately repeal the executive order, “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government.”
- The U.S. should enact comprehensive legislation to expressly prohibit any discrimination based on sexual orientation and gender identity in areas such as education, health care, housing, and public accommodations.
- States should repeal discriminatory laws targeting individuals based on their sexual orientation or gender identity and should enact comprehensive protections prohibiting discrimination on those grounds.
- States should enact legislation expressly prohibiting discrimination based on sexual orientation or gender identity.
- U.S. governments at both the federal and state level should remove legal barriers to inclusive sexuality education, expand access to LGBTQ+ specific sexual health resources, and align federal and state policy with expert guidance on effective sexuality education programs.

#### **B. Education**

- The U.S. should immediately repeal the executive order, “Ending Radical Indoctrination in K-12 Schooling.”
- The U.S. should either clarify that Title IX’s prohibition against sex discrimination includes discrimination on the basis of gender identity and sexual orientation or enact new legislation that codifies such protections.
- The U.S. Department of Education should continue its work investigating complaints of discrimination and rights violations based on sexual orientation and gender identity. The U.S. should robustly fund and promote this mechanism.
- The U.S. should provide resources to incentivize increased access to books and curricula with LGBTQ+ themes and history.
- States should lift bans on books and classroom instruction with LGBTQ+ themes and prohibit such bans by school districts.
- States should adopt rights-respecting policies ensuring coverage of LGBTQ+ topics in school curricula.
- U.S. and state governments should require and ensure resources for inclusive, comprehensive school sexuality education programs.

#### **C. Health**

- The U.S. should immediately repeal the executive order, “Protecting Children from Chemical and Surgical Mutilation.”

- Through the Office of the Surgeon General or the Department of Health and Human Services, the U.S. should provide detailed guidance to states on rights-respecting, medical best practice for the provision of gender-affirming care.
- States should create safeguards that ensure transgender people, including youth, will have access to necessary gender-affirming care.<sup>161</sup> States should rely on the evidence-based, best practice standards for transgender health established by professional organizations such as WPATH in lifting barriers to medically prescribed gender-affirming care.<sup>162</sup>
- States should amend broad and targeted religious exemption laws to prevent health care providers from using religious exemptions to discriminate against LGBTQ+ patients.
- The U.S. should strengthen federal protections for health care and insurance for LGBTQ+ individuals as well as strengthen the Affordable Care Act.

#### **D. Housing**

- The U.S. should increase funding for HUD to address discrimination in housing based on gender identity or sexual orientation.
- States should implement policies that ensure LGBTQ+ people do not face discrimination in access to shelters, rental housing, or homeownership.
- Federal, state, and local actors should ensure that LGBTQ+ people have adequate access to shelters, transitional housing, permanent supportive housing, and other options to alleviate homelessness.
- Federal and state actors should provide funding for emergency and transitional housing for LGBTQ+ youth and ensure social service providers are adequately trained and culturally competent.

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<sup>1</sup> In keeping with common usage in the United States, this submission uses the acronym “LGBTQ+” to include lesbian, gay, bisexual, transgender, and queer people, as well as others who are not exclusively cisgender and heterosexual.

<sup>2</sup> *Report of the Working Group on the Universal Periodic Review for the United States*, Recommendation 26.140, U.N. Doc. A/HRC/46/15 (Dec. 15, 2020).

<sup>3</sup> *Id.* Recommendation 26.146.

<sup>4</sup> *Id.* Recommendation 26.147.

<sup>5</sup> *Id.* Recommendation 26.148.

<sup>6</sup> *Report of the Working Group on the Universal Periodic Review for the United States*, ¶ 6, U.N. Doc. A/HRC/46/15/Add.1 (Mar. 4, 2021); Exec. Order No. 13988, 86 F.R. 7023 (2021).

<sup>7</sup> Exec. Order No. 14168, *Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government*, 90 Fed. Reg. 8615, § 2 (Jan. 30, 2025).

<sup>8</sup> *Id.*

<sup>9</sup> AMERICAN CIVIL LIBERTIES UNION, *Mapping Attacks on LGBTQ Rights in U.S. State Legislatures in 2025*, <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2025> (accessed Mar. 4, 2026).

<sup>10</sup> MOVEMENT ADVANCEMENT PROJECT, *Bans on Best Practice Medical Care for Transgender Youth*, [https://www.lgbtmap.org/equality-maps/healthcare/youth\\_medical\\_care\\_bans](https://www.lgbtmap.org/equality-maps/healthcare/youth_medical_care_bans) (accessed Mar. 4, 2026).

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<sup>11</sup> MOVEMENT ADVANCEMENT PROJECT, *Healthcare Laws and Policies*, [https://www.lgbtmap.org/equality-maps/healthcare\\_laws\\_and\\_policies](https://www.lgbtmap.org/equality-maps/healthcare_laws_and_policies) (accessed Mar. 28, 2025).

<sup>12</sup> MOVEMENT ADVANCEMENT PROJECT, *Bans on Transgender Youth Participation in Sports*, [https://www.lgbtmap.org/equality-maps/youth/sports\\_participation\\_bans](https://www.lgbtmap.org/equality-maps/youth/sports_participation_bans) (accessed Mar. 4, 2026).

<sup>13</sup> MOVEMENT ADVANCEMENT PROJECT, *Bans on Transgender People Using Public Bathrooms and Facilities According to their Gender Identity*, [https://www.lgbtmap.org/equality-maps/nondiscrimination/bathroom\\_bans](https://www.lgbtmap.org/equality-maps/nondiscrimination/bathroom_bans) (accessed Mar. 4, 2026).

<sup>14</sup> MOVEMENT ADVANCEMENT PROJECT, *Forced Outing of Transgender Youth in Schools*, [https://www.lgbtmap.org/equality-maps/youth/forced\\_outing](https://www.lgbtmap.org/equality-maps/youth/forced_outing) (accessed Mar. 4, 2026).

<sup>15</sup> MOVEMENT ADVANCEMENT PROJECT, *LGBTQ Curricular Laws*, [https://www.lgbtmap.org/equality-maps/curricular\\_laws](https://www.lgbtmap.org/equality-maps/curricular_laws) (accessed Mar. 4, 2026).

<sup>16</sup> Off. of the United Nations High Comm’r for Hum. Rts. (OHCHR), *Discrimination and Violence Against Individuals Based on their Sexual Orientation and Gender Identity*, ¶ 9, U.N. Doc. A/HRC/29/23 (2015); see also OHCHR, *Ending Violence and Discrimination Against Lesbian, Gay, Bisexual, Transgender and Intersex People* (Sept. 2015), <https://www.who.int/news/item/29-09-2015-ending-violence-and-discrimination-against-lesbian-gay-bisexual-transgender-and-intersex-people> (joint statement endorsed by 12 UN entities that brings attention to the link between human rights abuses against LGBTQIA+ people and discrimination, asking states to protect individuals from violence, repeal discriminatory laws, and protect individuals from discrimination).

<sup>17</sup> International Covenant on Civil and Political Rights (“ICCPR”), *ratified* Jun. 8, 1992, 999 U.N.T.S. 171.

<sup>18</sup> Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (“CAT”), *ratified* Oct. 21, 1994, 1465 UNTS 85.

<sup>19</sup> International Convention on the Elimination of All Forms of Racial Discrimination (“ICERD”), *ratified* Oct. 21, 1994, 660 UNTS 195.

<sup>20</sup> Universal Declaration of Human Rights (“UDHR”), G.A. Res. 217 (III) A, U.N. Doc. A/810 (Dec. 10, 1948).

<sup>21</sup> International Covenant on Economic, Social, and Cultural Rights (“ICESCR”), *signed* Oct. 5, 1977, 993 U.N.T.S. 3.

<sup>22</sup> Convention on the Rights of the Child (“CRC”), *adopted* Nov. 20, 1989, 1577 U.N.T.S. 3.

<sup>23</sup> Convention on the Elimination of all Forms of Discrimination Against Women (“CEDAW”), *signed* Jul. 17, 1980, 1249 U.N.T.S. 13.

<sup>24</sup> United Nations, Dam Hammarskjöld Library, *What is the Difference Between Signing, Ratification and Accession of UN treaties?* (Jan. 28, 2025), [ask.un.org/faq/14594](https://ask.un.org/faq/14594); RESTATEMENT (FOURTH) OF THE FOREIGN RELATIONS LAW OF THE UNITED STATES § 304 (AM. L. INST. 2018).

<sup>25</sup> G.A. Res. 217 (III) A, Universal Declaration of Human Rights (Dec. 10, 1948).

<sup>26</sup> CHARLOTTE-MECKLENBURG HOUSING & HOMELESSNESS DASHBOARD, *Addressing LGBTQ+ Homelessness: Challenges, Disparities, and Promising Practices*, <https://mecklenburghousingdata.org/frontpage-article/addressing-lgbtq-homelessness-challenges-disparities-and-promising-practices> (accessed Jan. 3, 2025).

<sup>27</sup> BIANCA D.M. WILSON, ET AL., UCLA SCH. L. WILLIAMS INST., *HOMELESSNESS AMONG LGBT ADULTS IN THE US* (May 2020), <https://williamsinstitute.law.ucla.edu/publications/lgbt-homelessness-us>.

<sup>28</sup> *Id.*

<sup>29</sup> HUMAN RIGHTS CAMPAIGN, *The Wage Gap Among LGBTQ+ Workers in the United States*, <https://www.hrc.org/resources/the-wage-gap-among-lgbtq-workers-in-the-united-states> (accessed Mar. 22, 2026).

<sup>30</sup> *Id.*

<sup>31</sup> HUMAN RIGHTS CAMPAIGN, *The Epidemic of Violence Against the Transgender & Gender-Expansive Community in the U.S.*, <https://reports.hrc.org/an-epidemic-of-violence-2024#epidemic-numbers> (accessed Jan. 3, 2025).

<sup>32</sup> *Id.*

<sup>33</sup> CRC, *supra* note 22.

<sup>34</sup> Katie A. McLaughlin, *Disproportionate Exposure to Early-Life Adversity and Sexual Orientation Disparities in Psychiatric Morbidity*, 36 CHILD ABUSE & NEGLECT 645, 645 (2012).

<sup>35</sup> NAT’L COALITION FOR THE HOMELESS, *Homelessness Among the LGBTQ Community*, <https://nationalhomeless.org/lgbtq-homelessness> (accessed Jan. 3, 2025).

<sup>36</sup> *Id.*

<sup>37</sup> McLaughlin, *supra* note 34, at 645.

<sup>38</sup> See MOVEMENT ADVANCEMENT PROJECT, *supra* note 10 and accompanying text.

<sup>39</sup> U.S. DEP’T OF EDUC., *Education in a Pandemic: The Disparate Impacts of COVID-19 on America’s Students* 27-28 (June 9, 2021) (identifying a lack of safety, mental health concerns, missing school, avoiding restrooms, and homelessness as particular concerns for LGBTQ+ students, even prior to the COVID-19 pandemic).

homelessness (accessed Aug. 8, 2023).

<sup>41</sup> ICCPR, *supra* note 17, art. 6.

<sup>42</sup> Hum. Rt. Comm., *General Comment No. 36: Article 6: Right to Life*, ¶ 3, U.N. Doc. CCPR/C/GC/36 (Sept. 3, 2019); *see also Report of the Special Rapporteur on Extrajudicial, Summary or Arbitrary Executions*, ¶ 21, U.N. Doc. A/HRC/69/182 (2016) (emphasizing that the right to life “is not merely a right to continued physical existence [ ], but rather that what is protected is dignified life.”).

<sup>43</sup> Hum. Rt. Comm., *General Comment No. 36: Article 6: Right to Life*, ¶ 26, U.N. Doc. CCPR/C/GC/36 (Sept. 3, 2019).

<sup>44</sup> Interview with Simone Chriss, Director, Transgender Rights Initiative, Southern Legal Counsel (Feb. 28, 2025).

<sup>45</sup> Interview with Trey Walk, Democracy Researcher and Advocate, U.S. Program, Human Rights Watch (Mar. 10, 2025).

<sup>46</sup> PEN AMERICA, *The Normalization of Book Banning* (Oct. 1, 2025), <https://pen.org/report/beyond-the-shelves/#heading-5>. <https://pen.org/report/the-normalization-of-book-banning/#heading-4>; PEN America, *America's Censored Classrooms 2024* (Oct. 8, 2024), <https://pen.org/report/americas-censored-classrooms-2024>.

<sup>47</sup> *Id.*

<sup>48</sup> PEN AMERICA, *The Normalization of Book Banning* (Oct. 1, 2025), <https://pen.org/report/the-normalization-of-book-banning/#heading-2>.

<sup>49</sup> *Id.*

<sup>50</sup> ICCPR, *supra* note 17, art. 19; *see e.g.*, Hum. Rts. Committee, *Concluding Observations on the Eighth Periodic Report of the Russian Federation*, ¶ 13, U.N. Doc. CCPR/C/RUS/CO/8 (Dec. 1, 2022) (indicating that states should repeal laws “banning the dissemination of ‘propaganda’ on nontraditional sexual relations among minors and any other legislation stigmatizing or discriminating against lesbian, gay, bisexual and transgender persons”).

<sup>51</sup> UDHR, *supra* note 20, art. 26; ICESCR, *supra* note 21, art. 13(1); CRC, *supra* note 22, art. 24(e).

<sup>52</sup> Frank La Rue, *Full Text of the Press Statement Delivered by the UN Special Rapporteur on the Promotion and Protection of the Right to Freedom of Opinion and Expression, Mr. Frank La Rue, After the Conclusion of His Visit to the Republic of Korea* (May 17, 2010), <https://www2.ohchr.org/english/issues/opinion/docs/ROK-Pressstatement17052010.pdf>.

<sup>53</sup> *The Yogyakarta Principles - Principles on the Application of International Human Rights Law in Relation to Sexual Orientation and Gender Identity*, Principle 19 (Mar. 2007), [http://yogyakartaprinciples.org/wp-content/uploads/2016/08/principles\\_en.pdf](http://yogyakartaprinciples.org/wp-content/uploads/2016/08/principles_en.pdf) [hereinafter Yogyakarta Principles].

<sup>54</sup> PEN AMERICA, *The Normalization of Book Banning* (Oct. 1, 2025), <https://pen.org/report/the-normalization-of-book-banning/#heading-4>; PEN America, *Banned in the USA: Beyond the Shelves* (Nov. 1, 2024), <https://pen.org/report/beyond-the-shelves/#heading-5>.

<sup>55</sup> Interview with Yasemin Smallens, Officer, LGBT Rights Program, Human Rights Watch (Feb. 3, 2025).

<sup>56</sup> *Id.*

<sup>57</sup> Jo Yurcaba, *Government Agencies Scrub LGBTQ Web Pages and Remove Info About Trans and Intersex People*, NBC News (Feb. 3, 2025), <https://www.nbcnews.com/nbc-out/out-politics-and-policy/government-agencies-scrub-lgbtq-web-pages-remove-info-trans-intersex-p-rcna190519>.

<sup>58</sup> Interview with Simone Chriss, *supra* note 44.

<sup>59</sup> Exec. Order No. 14190, 90 C.F.R. 8853 (2025).

<sup>60</sup> HUMAN RIGHTS CAMPAIGN, *Background on Trump Executive Order Attacking LGBTQ+ Students, Their Educators, and the Freedom for All Children to Learn* (Feb. 3, 2025), <https://www.hrc.org/press-releases/background-on-trump-executive-order-attacking-lgbtq-students-their-educators-and-the-freedom-for-all-children-to-learn>; Exec. Order No. 14190, *supra* note 56.

<sup>61</sup> Exec. Order No. 14168, *supra* note 7.

<sup>62</sup> *Id.*

<sup>63</sup> *Mahmoud v. Taylor*, 606 U.S. 522, 524, 568 (2025); *See also* LAMBDA LEGAL, *Civil Rights Organizations React to Supreme Court Ruling in Mahmoud v. Taylor* (June 27, 2025), [https://lambdalegal.org/newsroom/us\\_20250627\\_civil-rights-organizations-react-to-supreme-court-ruling-in-mahmoud-v-taylor/](https://lambdalegal.org/newsroom/us_20250627_civil-rights-organizations-react-to-supreme-court-ruling-in-mahmoud-v-taylor/).

<sup>64</sup> *See* PEN America, *The Normalization of Book Banning*, *supra* note 46; GLAAD, *Fact Sheet: Mahmoud v. Taylor, the U.S. Supreme Court Case About Banning LGBTQ-inclusive Books* (Apr. 10, 2025), <https://glaad.org/fact-sheet-mahmoud-v-taylor-banning-lgbtq-books/>.

<sup>65</sup> UDHR, *supra* note 20, art. 19; ICCPR, *supra* note 17, art. 19; CRC, *supra* note 22, art. 13.

<sup>66</sup> UDHR, *supra* note 20, art. 26; ICESCR, *supra* note 21, art. 13(1); CRC, *supra* note 22, art. 24(e).

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<sup>67</sup> MOVEMENT ADVANCEMENT PROJECT, *supra* note 15.

<sup>68</sup> *Id.*

<sup>69</sup> MOVEMENT ADVANCEMENT PROJECT, *Safe Schools Laws*, [https://www.lgbtmap.org/equality-maps/safe\\_school\\_laws/discrimination](https://www.lgbtmap.org/equality-maps/safe_school_laws/discrimination) (accessed Mar. 4, 2026).

<sup>70</sup> GLSEN, *Inclusive Curricular Standards Policies* (Dec. 13, 2024), <https://maps.glsen.org/inclusive-curricular-standards-policies/>.

<sup>71</sup> Sterling Johnson, *Legislating Black History*, BILL OF HEALTH (Apr. 10, 2023), <https://blog.petrieflom.law.harvard.edu/2023/04/10/legislating-black-history> (noting that five states have prohibited discussion of “critical race theory” in public universities).

<sup>72</sup> Exec. Order No. 14190, *supra* note 59; U.S. Dep’t of Educ., Off. of Civ. Rts., Assistant Sec’y, *Dear Colleague Letter* (Feb. 14, 2025), <https://www.ed.gov/media/document/dear-colleague-letter-sffa-v-harvard-109506.pdf>; U.S. Dep’t of Educ., Off. of Civ. Rts., *Frequently Asked Questions About Racial Preferences and Stereotypes Under Title IV of the Civil Rights Act 5-7*, <https://www.ed.gov/media/document/frequently-asked-questions-about-racial-preferences-and-stereotypes-under-title-vi-of-civil-rights-act-109530.pdf> (last accessed Apr. 3, 2025); U.S. Dep’t of Educ., *Reminder of Legal Obligations Undertaken in Exchange for Receiving Federal Financial Assistance and Request for Certification under Title VI and SFFA v. Harvard* (Apr. 3, 2025), <https://www.ed.gov/media/document/reminder-of-legal-obligations-undertaken-exchange-receiving-federal-financial-assistance-and-request-certification-under-title-vi-and-sffa-v-harvard-april-3>.

<sup>73</sup> ICERD, *supra* note 19, art. 7.

<sup>74</sup> See Hum. Rts. Comm., *General Comment No. 34: Freedoms of Opinion and Expression*, ¶ 21, U.N. Doc. CCPR/C/34 (Sept. 12, 2011) (explaining that “when a State Party imposes restrictions on the exercise of freedom of expression, these may not put in jeopardy the right itself”); Hum. Rts. Comm., *General Comment No. 22: Freedoms of Opinion and Expression*, ¶ 32, U.N. Doc. CCPR/C/34 (Sept. 12, 2011) [hereinafter HRC General Comment No. 22] (noting that “any such limitations [on the freedom of expression] must be understood in the light of universality of human rights and the principle of non-discrimination”).

<sup>75</sup> United Nations Educ., Sci., & Cultural Org. (UNESCO), *Revised Edition: International Technical Guidance on Sexuality Education: An Evidence-Informed Approach* 16 (2018), [https://cdn.who.int/media/docs/default-source/reproductive-health/sexual-health/international-technical-guidance-on-sexuality-education.pdf?sfvrsn=10113efc\\_29&download=true](https://cdn.who.int/media/docs/default-source/reproductive-health/sexual-health/international-technical-guidance-on-sexuality-education.pdf?sfvrsn=10113efc_29&download=true).

<sup>76</sup> Cora C. Breuner & Gerri Matson, *Sexuality Education for Children and Adolescents*, 138 PEDIATRICS, e1, e4-e5 (Aug. 2016) (reaffirmed in January 2022), <https://doi.org/10.1542/peds.2016-1348>; See also AM. PSYCH. ASS’N, *LGBTQ+ Inclusive Curricula: School Curricula Inclusive of LGBTQ+ History, Culture, and People; Sex Education*, <https://www.apa.org/topics/lgbtq/lgbtq-inclusive-curricula> (accessed Apr. 6, 2025); AM. PUB. HEALTH ASS’N, *Sexuality Education as Part of a Comprehensive Health Education Program K to 12 Schools* (Nov. 18, 2024), <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2015/01/23/09/37/sexuality-education-as-part-of-a-comprehensive-health-education-program-in-k-to-12-schools>.

<sup>77</sup> Breuner & Matson, *supra* note 76; see also THE TREVOR PROJECT, *School-Related Protective Factors for LGBTQ Middle and High School Students* 1-2 (2023), <https://www.thetrevorproject.org/research-briefs/school-related-protective-factors-for-lgbtq-middle-and-high-school-students-aug-2023>.

<sup>78</sup> JOSEPH G. KOSCIW ET AL., THE 2021 NATIONAL SCHOOL CLIMATE SURVEY: THE EXPERIENCES OF LGBTQ+ YOUTH IN OUR NATION’S SCHOOLS, GLSEN (2022), <https://www.glsen.org/sites/default/files/2022-10/NSCS-2021-Full-Report.pdf>.

<sup>79</sup> MOVEMENT ADVANCEMENT PROJECT, *supra* note 15.

<sup>80</sup> Exec. Order No. 14168, *supra* note 7; Exec. Order No. 14190, *supra* note 59.

<sup>81</sup> See generally Ceili Charley et al., *Sex Education for LGBTQ+ Adolescents*, 15 CURRENT SEXUAL HEALTH REPORTS 180, (2023) <https://doi.org/10.1007/s11930-023-00361-2>; Brittany M. Carlton et al., *Sexual Orientation Differences in Teen Pregnancy and Hormonal Contraceptive Use: An Examination Across 2 Generations*, 209 AMER. J. OBSTETRICS AND GYNECOLOGY 204e.1, (2013), <https://doi.org/10.1016/j.ajog.2013.06.036>; THE TREVOR PROJECT, *SEXUAL VIOLENCE AND SUICIDE RISK AMONG LGBTQ+ YOUNG PEOPLE* 4-5 (Mar. 24, 2024), <https://www.thetrevorproject.org/research-briefs/sexual-violence-and-suicide-risk-among-lgbtq-young-people>.

<sup>82</sup> KOSCIW ET AL., *supra* note 78; GLSEN, *Laws Prohibiting “Promotion of Homosexuality” in Schools: Impacts and Implications* 3 (2018), <https://www.glsen.org/sites/default/files/2019-10/GLSEN-Research-Laws-that-Prohibit-Promotion-of-Homosexuality-Implications.pdf>; Chelsea N. Proulx et al., *Associations of Lesbian, Gay, Bisexual, Transgender, and Questioning–Inclusive Sex Education with Mental Health Outcomes and School-Based Victimization in U.S. High School Students*, 64 J. ADOLESCENT HEALTH 608 (2019), <https://doi.org/10.1016/j.jadohealth.2018.11.012>.

<sup>83</sup> See Elizabeth McDermott et al., *Understanding How School-Based Interventions Can Tackle LGBTQ+ Youth Mental Health Inequality: A Realist Approach*, 20 INT’L J. ENVTL RESEARCH PUB. HEALTH (2023), <https://pmc.ncbi.nlm.nih.gov/articles/PMC10001812>; see also THE TREVOR PROJECT, *2024 U.S. National Survey on the Mental Health of LGBTQ+ Young People* (2024), <https://www.thetrevorproject.org/survey-2024/#mental-health-suicide-risk>.

<sup>84</sup> See Sarah Smith Kuehnle, *Abstinence-Only Education Fails African American Youth*, 86 WASH. U. L. REV. 1241 (2009); Liza Fuentes et al., NATIONAL LATINA INSTITUTE FOR REPRODUCTIVE HEALTH, REMOVING STIGMA: TOWARDS A COMPLETE UNDERSTANDING OF YOUNG LATINAS’ SEXUAL HEALTH (2010); see also SEICUS: SEX ED FOR SOCIAL CHANGE, A CALL TO ACTION: LGBTQ+ YOUTH NEED INCLUSIVE SEX EDUCATION 8-13 (2021).

<sup>85</sup> Interview with Nico Watson, trans resident of Florida (Mar. 15, 2023).

<sup>86</sup> Interview with Doctor Sara Danker, Assistant Professor, Division of Plastic Surgery, University of Miami Miller School of Medicine (Oct. 21, 2022).

<sup>87</sup> Gender dysphoria refers to severe distress due to a discrepancy between a person’s gender identity and that person’s sex assigned at birth.

<sup>88</sup> OHCHR, *International Standards on the Right to Physical and Mental Health*, Special Rapporteur on the Right to Health, <https://www.ohchr.org/en/special-procedures/sr-health/international-standards-right-physical-and-mental-health> (accessed Aug. 24, 2023); see also *The Yogyakarta Principles Plus 10 - Additional Principles and State Obligation on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Expression and Sex Characteristics to Complement the Yogyakarta Principles*, Principle 32, The Right to Bodily and Mental Integrity (Nov. 10, 2017).

<sup>89</sup> ICCPR *supra* note 17, art. 7 (“No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.”); UDHR *supra* note 20, art. 12.

<sup>90</sup> UDHR, *supra* note 20, art. 3; ICCPR *supra* note 17, art. 9.

<sup>91</sup> ICCPR *supra* note 17, art. 17 (“No one shall be subjected to arbitrary or unlawful interference with his privacy, family, home or correspondence, nor to unlawful attacks on his honour and reputation.”); see also *Yogyakarta Principles Plus 10*, *supra* note 88, Principle 32 (noting that “[e]veryone has the right to bodily and mental integrity and self-determination irrespective of sexual orientation, gender identity, gender expressions or sex characteristics,” Which requires states to “[g]uarantee and protect the rights of everyone, including all children, to bodily and mental integrity, autonomy and self-determination.”); Universal Declaration of Human Rights, G.A. Res. 217 (III) A, U.N. Doc. A/RES/217(III), art. 5 (Dec. 10, 1948).

<sup>92</sup> ICESCR, *supra* note 21, art. 12.

<sup>93</sup> ICCPR *supra* note 17, art. 6 (“Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.”); UDHR, *supra* note 20, art. 3.

<sup>94</sup> Yogyakarta Principles, *supra* note 53, Principle 6(D).

<sup>95</sup> AMER. MED. ASS’N, *AMA Reinforces Opposition to Restrictions on Transgender Medical Care* (2021), <https://www.ama-assn.org/press-center/press-releases/ama-reinforces-opposition-restrictions-transgender-medical-care>; Amer. Med. Ass’n, *March 26, 2021: State Advocacy Update* (Mar. 26, 2021), <https://www.ama-assn.org/health-care-advocacy/advocacy-update/march-26-2021-state-advocacy-update>.

<sup>96</sup> AMER. ACAD. OF PEDIATRICS, *Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents* (Oct. 1, 2018), <https://publications.aap.org/pediatrics/article/142/4/e20182162/37381/Ensuring-Comprehensive-Care-and-Support-for>.

<sup>97</sup> AMER. PSYCHOL. ASS’N, *APA President Condemns Texas Governor’s Directive to Report Parents of Transgender Minors* (Feb. 24, 2022), <https://www.apa.org/news/press/releases/2022/02/report-parents-transgender-children>; AMER. PSYCHOL. ASS’N, *Resolution on Supporting Sexual/Gender Diverse Children and Adolescents in Schools* (2020), <https://www.apa.org/pi/lgbt/resources/policy/gender-diverse-children>.

<sup>98</sup> AMER. ACAD. OF CHILD & ADOLESCENT PSYCHIATRY, *AACAP Statement Responding to Efforts to Ban Evidence-Based Care for Transgender and Gender Diverse Youth* (Nov. 8, 2019), [https://www.aacap.org/AACAP/Latest\\_News/AACAP\\_Statement\\_Responding\\_to\\_Efforts-to\\_ban\\_Evidence-Based\\_Care\\_for\\_Transgender\\_and\\_Gender\\_Diverse.aspx](https://www.aacap.org/AACAP/Latest_News/AACAP_Statement_Responding_to_Efforts-to_ban_Evidence-Based_Care_for_Transgender_and_Gender_Diverse.aspx).

<sup>99</sup> WPATH, STANDARDS OF CARE FOR HEALTH OF TRANSGENDER AND GENDER DIVERSE PEOPLE, version 8 (2022), <https://www.tandfonline.com/doi/full/10.1080/26895269.2022.2100644>.

<sup>100</sup> See A4TE (Advocates for Trans Equality), *A4TE’s Trans Health Project, Medical Organization Statements*, <https://transhealthproject.org/resources/medical-organization-statements> (accessed Apr. 6, 2025) (collecting statements in support of gender affirming care by leading medical organizations, including the American Academy of Family Physicians and the American College of Obstetricians and Gynecologists); Amer. Med. Ass’n, *March 26, 2021: State Advocacy Update* (Mar. 26, 2021), <https://www.ama-assn.org/health-care-advocacy/advocacy->

update/march-26-2021-state-advocacy-update (“Every major medical association in the United States . . . recognizes the medical necessity of transition-related care for improving the physical and mental health of transgender people.”).

<sup>101</sup> Heather Boerner, *What the Science on Gender-Affirming Care for Transgender Kids Really Shows*, SCI. AM. (May 12, 2022), <https://www.scientificamerican.com/article/what-the-science-on-gender-affirming-care-for-transgender-kids-really-shows>; see also Jack Turban, *The Evidence for Trans Youth Gender-Affirming Care*, PSYCHOL. TODAY (Jan. 24, 2022), <https://www.psychologytoday.com/us/blog/political-minds/202201/the-evidence-trans-youth-gender-affirming-medical-care> (describing the studies).

<sup>102</sup> AMER. MED. ASS’N, *Health Insurance Coverage for Gender-Affirming Care of Transgender Patients* (2019), <https://www.ama-assn.org/system/files/2019-03/transgender-coverage-issue-brief.pdf>; see also Boerner, *supra* note 94; see also Samuel Mann, Travis Campbell & Duc Hien Nguyen, *Access to Gender-Affirming Care and Transgender Mental Health*, 10 AM. J. HEALTH ECON. 162 (2024) (finding that making gender-affirming care accessible to low-income transgender individuals through health insurance programs like Medicaid improves their mental health).

<sup>103</sup> UDHR, *supra* note 20, art. 3; ICCPR, *supra* note 17, art. 6.

<sup>104</sup> *Id.*

<sup>105</sup> *Id.*

<sup>106</sup> *Id.*

<sup>107</sup> Ceylan Yeginsu, *Transgender and Nonbinary Americans Face New Passport Restrictions Under Trump Administration*, N.Y. TIMES (Feb. 27, 2025), <https://www.nytimes.com/2025/02/27/travel/trans-nonbinary-passport-changes-trump.html>.

<sup>108</sup> *Trump v. Orr*, 146 S. Ct. 44, 46 (2025).

<sup>109</sup> Exec. Order No. 14183, 90 FR 8757 (Jan. 27, 2025), <https://www.federalregister.gov/d/2025-02178> (ending support for gender-affirming care and banning transgender individuals from serving in the military); see Deena Zaru, *Hegseth Orders Immediate Pause on Gender-Affirming Medical Care for Transgender Service Members*, ABC NEWS (Feb. 10, 2025), <https://abcnews.go.com/Politics/hegseth-orders-immediate-pause-gender-affirming-medical-care/story?id=118662488>.

<sup>110</sup> Brook Migden, *VA Halts Gender-Affirming Care for Transgender Veterans*, THE HILL (Mar. 17, 2025), <https://thehill.com/policy/defense/5199118-va-reverses-transgender-medical-treatment>.

<sup>111</sup> Exec. Order No. 14,187, 90 Fed. Reg. 5678 (Jan. 28, 2025), <https://www.whitehouse.gov/presidential-actions/2025/01/protecting-children-from-chemical-and-surgical-mutilation>.

<sup>112</sup> *Id.*

<sup>113</sup> *Id.*

<sup>114</sup> *Id.*

<sup>115</sup> Emily Alpert Reyes, *Children's Hospital LA Lifts Recent Limits on Hormonal Therapy for Transgender Youth*, L.A. TIMES (Feb. 21, 2025), <https://www.latimes.com/california/story/2025-02-21/chla-lift-pause-hormonal-therapy-transgender-youth>.

<sup>116</sup> Emily Alpert Reyes, *Children's Hospital to Stop Initiating Hormonal Therapy for Trans Patients Under 19*, L.A. TIMES (Feb. 5, 2025), <https://www.latimes.com/california/story/2025-02-05/childrens-hospital-to-stop-initiating-hormonal-therapy-for-trans-patients-under-19>.

<sup>117</sup> PFLAG, Inc. v. Trump, No. 1:25-cv-00337-RDB, at 2 ¶ 6 (D. Md. Feb. 4, 2025), <https://assets.aclu.org/live/uploads/2025/02/pflagvtrump.pdf>.

<sup>118</sup> Jenna Portnoy, *Federal Judge Blocks Trump Order on Health Care for Transgender Youth*, WASH. POST (Feb. 13, 2025), <https://www.washingtonpost.com/health/2025/02/13/federal-judge-blocks-trump-transgender-health-order>.

<sup>119</sup> *Id.*

<sup>120</sup> *Id.*

<sup>121</sup> MOVEMENT ADVANCEMENT PROJECT, *Bans on Best Practice Medical Care For Transgender Youth*, [https://www.lgbtmap.org/equality-maps/healthcare/youth\\_medical\\_care\\_bans](https://www.lgbtmap.org/equality-maps/healthcare/youth_medical_care_bans) (accessed Mar. 4, 2026).

<sup>122</sup> *United States v. Skrmetti*, 605 U.S. 495, 495, 145 S. Ct. 1816, 1820 (2025).

<sup>123</sup> *Id.* at 525, 145 S. Ct. at 1837; see also *Proud & Free: United for Trans Power in the Wake of U.S. v. Skrmetti*, LAMBDA LEGAL, <https://lambdalegal.org/us-v-skrmetti-faq/> (last visited Mar. 26, 2026).

<sup>124</sup> Shabab Ahmed Mirza & Caitlin Rooney, *Discrimination Prevents LGBTQ People From Accessing Health Care*, CTR. FOR AM. PROGRESS (Jan. 18, 2018), <https://www.americanprogress.org/article/discrimination-prevents-lgbtq-people-accessing-health-care>.

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<sup>126</sup> Alex Montero et al., *LGBT Adults' Experiences with Discrimination and Health Care Disparities: Findings from*

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<sup>127</sup> Matthew Morris et al., *Training to Reduce LGBTQ-Related Bias among Medical, Nursing, and Dental Students and Providers: A Systematic Review*, 19 BMC MED. EDUC. 325 (2019), <https://doi.org/10.1186/s12909-019-1727-3>.

<sup>128</sup> Montero et al., *supra* note 126.

<sup>129</sup> See Mark L. Hatzenbuehler et al., *Structural Stigma and All-Cause Mortality in Sexual Minority Populations*, 103 Soc. Sci. & Med. 33 (2014), <https://pmc.ncbi.nlm.nih.gov/articles/PMC3818511>; see also Lisa A. Eaton et al., *Experiences of Stigma and Health Care Engagement Among Black MSM Newly Diagnosed with HIV/STI*, 41 J. BEHAVIORAL MED. 458 (2018), <https://pmc.ncbi.nlm.nih.gov/articles/PMC6031458>; Sara Wallach et al., *Address Exacerbated Health Disparities and Risks to LGBTQ+ Individuals during COVID-19*, 22 HEALTH HUMAN RIGHTS J. 313 (2020), <https://pmc.ncbi.nlm.nih.gov/articles/PMC7762918>; see Ilan H. Meyer, *Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence*, 129 PSYCH. BULL. 674 (2003), <https://pmc.ncbi.nlm.nih.gov/articles/PMC2072932>; see also King M et al., *A Systematic Review of Mental Disorder, Suicide, and Deliberate Self-Harm in Lesbian, Gay and Bisexual People*, 8 BMC PSYCH. 70 (2008), <https://pmc.ncbi.nlm.nih.gov/articles/PMC2533652/1>; Laura E. Durso & Ilan H. Meyer, *Patterns and Predictors of Disclosure of Sexual Orientation to Healthcare Providers Among Lesbians, Gay Men, and Bisexuals*, 10 SEXUALITY RESEARCH SOC. POLICY 35, 35 (2013), <https://link.springer.com/article/10.1007/s13178-012-0105-2#citeas>.

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<sup>131</sup> Mirza & Rooney, *supra* note 124.

<sup>132</sup> Durso & Meyer, *supra* note 129.

<sup>133</sup> MOVEMENT ADVANCEMENT PROJECT, *Religious Exemption Laws*, [https://www.lgbtmap.org/equality-maps/religious\\_exemption\\_laws](https://www.lgbtmap.org/equality-maps/religious_exemption_laws) (accessed Mar. 30, 2025); MOVEMENT ADVANCEMENT PROJECT, *Religious Exemptions Laws 2* (Mar. 30, 2025), <https://www.lgbtmap.org/img/maps/citations-religious-exemption.pdf>.

<sup>134</sup> MOVEMENT ADVANCEMENT PROJECT, *Religious Exemptions*, [https://www.lgbtmap.org/equality-maps/religious\\_exemption\\_laws](https://www.lgbtmap.org/equality-maps/religious_exemption_laws) (accessed Mar. 4, 2026).

<sup>135</sup> See *id.*

<sup>136</sup> Exec. Order No. 14148, 90 Fed. Reg. 8237 (Jan. 28, 2025).

<sup>137</sup> Kayla Epstein, *US Federal Websites Scrub Vaccine Data and LGBT References*, BBC (Feb. 1, 2025), <https://www.bbc.com/news/articles/cgkj8gx1vy6o>; see also Exec. Order No. 14168, *supra* note 6; see Memorandum from the U.S. Office of Personnel Management on Initial Guidance Regarding President Trump's Executive Order *Defending Women* to the Heads and Acting Heads of Departments and Agencies (Jan. 29, 2025), <https://www.opm.gov/media/yvhlh1r3i/opm-memo-initial-guidance-regarding-trump-executive-order-defending-women-1-29-2025-final.pdf>.

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<sup>139</sup> Roni Rabin & Apoorva Mandavilli, *Health Resources Vanish Following D.E.I. and Gender Orders*, N.Y. TIMES (Jan. 31, 2025), <https://www.nytimes.com/2025/01/31/health/trump-cdc-dei-gender.html>.

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<sup>152</sup> ADAM ROMERO, ET AL., UCLA SCH. L. WILLIAMS INST., *LGBT PEOPLE AND HOUSING AFFORDABILITY, DISCRIMINATION, AND HOMELESSNESS* 15 (Apr. 2020), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Housing-Apr-2020.pdf>.

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