



Verbal Testimony in Opposition to SB163 - First Hearing

Hello, I am here representing the Libertarian Party of Nevada. We advocate for a free market in medicine and therefore oppose all coverage mandates, but our greater concern with this bill is the inclusion of minors.

It is wildly unethical to treat a mental health disorder in a child by permanently modifying their body. Despite claims by activists and financially interested professionals, these treatments are not safe. Puberty blockers impact bone and brain development, cross-sex hormones can sterilize the user and destroy future sexual function, and the potential complications from the more complex surgeries are genuinely horrifying.

An adult can consent to these treatments, but children are incapable of consenting to procedures of this magnitude. Parental rights derive from our responsibilities towards our children – to protect them and act in their best interest. To disrupt the development of a child into an adult, and to transform them into a lifelong medical patient is manifestly a violation of that duty.

Dr. Stephan Levine is an expert in this area and sits on the Cochrane Review committee currently evaluating the literature on this. He states that the body of evidence does not indicate that these treatments improve long term outcomes or lower the risk of suicide for children and adolescents. While children with gender dysphoria do have suicidal thoughts at a higher rate, there is no evidence that they act on those feelings at a higher rate than other children.

He also states that without these interventions, the vast majority of children will “desist” – meaning their body discomfort will resolve and they will not identify as “trans” in adulthood.

On the other hand, the evidence suggests that social transition and “affirmative care” sharply increase the rate of persistence. Almost all children who are given



puberty blockers will later take hormones and have surgeries. Adults who identify as transgender DO have a very high suicide rate, but this is not impacted by whether they were able to transition early.

Pharmaceutical and surgical intervention for gender dysphoria in minors is not justifiable by the evidence. It is medical malpractice and it is unacceptable to force all Nevadans who pay premiums into financing medical abuse of children. Vote no on SB163.



Verbal Testimony in Opposition to SB163 - Second Hearing

Hello, I am here representing the Libertarian Party of Nevada. We strongly oppose this bill, as it would require all Nevadans to fund medical practices that are scientifically dubious and wildly unethical.

This bill requires that insurers cover pharmaceutical and surgical interventions for minors as treatment for a mental health disorder. These interventions are not safe or reversible, no matter what activists and financially interested professionals may claim.

Puberty blockers impact bone and brain development, cross-sex hormones can sterilize the user and destroy future sexual function, and the potential complications from the more complex surgeries are genuinely horrifying, AND the rates of complication are startlingly high.

Dr. Stephan Levine is an expert who sits on the Cochrane Review committee currently evaluating these interventions. He was also an early member of WPATH and helped draft an earlier version of their standards of care. He states while children with gender dysphoria do report more suicidal thoughts, there is no evidence that they act on those feelings at a higher rate than other children.

He also notes that without these interventions, the vast majority of children will “desist” – meaning their body discomfort will resolve and they will not identify as “trans” in adulthood. On the other hand, the evidence suggests that social transition and “affirmative care” sharply increase the rate of persistence. Almost all children who are given puberty blockers will later take hormones and have surgeries.

Adults who identify as transgender DO have a very high suicide rate, but this is not impacted by whether they were able to transition early. Describing these interventions as “lifesaving care” is completely erroneous and does not comport with reality. They are experimental, and all over Europe we are seeing nations that



previously allowed minor transition to change their laws and prohibit it based on mounting evidence that is not helpful in the long run.

The people who argue in support of these interventions are ideologues. They believe that gender is somehow unrelated to the physical body, that it is “non-binary, fluid and changeable”, to the point where the term gender means little more “feelings”. Simultaneously they state that little children are capable of knowing a “true gender” that differs from their natal sex, with such certainty that we should permanently alter their bodies and minds with drugs and surgeries. This is an incoherent position. It is not grounded in biological reality or anything we know about child development.

Adults can do what they like with their own bodies. Children are incapable of consenting to procedures of this magnitude. Furthermore, there is no parental right to medically abuse a child. It is unacceptable to force all Nevadans who pay premiums into financing this nonsense. Please take a stand for reality, get on the right side of history, as they say, and vote no on SB163.