

Whopper of the Week: Healthcare for Trans Kids is Medicine, Not Ideology

IN SUMMARY:

Last December, Secretary Kennedy held a [press conference](#) to announce that the government would withhold federal payments to any hospital that offered any gender-affirming care for children under 18 years old. Kennedy, who is not a doctor, claimed that transgender care “fails to meet professionally recognized standards.” He called gender-affirming care “malpractice” and said that the government was “done with junk science driven by ideological pursuits.” Gender-affirming care is a legitimate, well-established, multi-disciplinary branch of medical practice supported by decades of research.

WHY IS THIS A WHOPPER?

The most prestigious medical societies recognize gender-affirming care as science-based and medically necessary. The American Academy of Pediatrics ([AAP](#)), American Medical Association ([AMA](#)), Endocrine Society ([ES](#)), Pediatric Endocrine Society ([PES](#)), American Academy of Nursing ([AAN](#)), the American Psychological Association ([APA](#)) have all issued statements in support of the rights of children and their families to make decisions with their physicians about what care is best for them, free from interference by politicians or government officials.

Gender-affirming treatments for kids are rare. Most transgender kids receive no medical interventions at all. The standard-of-care for these kids includes accessing mental health, initiating family counseling, and support for social transitions, like using preferred names, pronouns, and clothing.

Transgender medical care is grounded in data from decades of [clinical research](#) and hundreds of studies. Puberty delaying medicines have been used since the 1980s. Studies have consistently found that gender-affirming care improves [mental health](#)—particularly depression, anxiety, suicidality, and [mood and life](#) satisfaction—in transgender and non-binary kids. One recent [study](#) found that transgender kids from 13 to 20 years old receiving gender-affirming care had 60 percent lower odds of moderate or severe depression and 73 percent lower odds of considering suicide than those who did not get treatment. A [Dutch study](#) of 720 people who started puberty blocking therapy as teenagers found that 98 percent continued using gender-affirming hormones at 20 years old, suggesting that the decision to transition is stable and consistent over time.

Several medical societies have created clinical guidelines to help physicians caring for transgender youth, including the Pediatric Endocrine Society [Guidelines](#) and the World Professional Association for Transgender Health (WPATH) [Standards of Care](#), which were first

issued in 1979 and have been updated and expanded eight times to include care over the course of a person's entire life span. Even the [World Health Organization](#) is developing evidence and implementation guidance to improve access and use of health services by trans and gender diverse people globally. These clinical standards are not "radical gender ideology"; they reflect decades of carefully reviewed research and real-world experience.

Gender-affirming care for young people is a long-term process, guided by teams including doctors and mental health professionals who carefully follow guidelines. What RFK Jr. and the Trump administration say about transgender care is simply false.

WHY IT MATTERS:

Kennedy and the Trump administration are trying to take away life-saving medical care from young people. In December 2025, according to [STATNews](#), the "Centers for Medicare and Medicaid Services proposed two rules to withhold federal funds in connection with gender-affirming care for trans minors, including puberty blockers, hormones, and surgery. The most stringent [rule](#) would bar facilities that offer this care from receiving any funding from the federal Medicare or Medicaid programs, a move that would effectively force most medical centers to cease providing it." Kennedy is proposing to cut off all reimbursements for any type of service from federally funded programs to any hospital or clinic that provides gender affirming care. This represents an unprecedented level of political interference into the practice of medicine.

These proposed rules have not yet gone into effect ([public comments](#) are open until February 17) and they will surely be challenged in court. However, should the rules be adopted, transgender kids across the country will be impacted. In the quest for appropriate mental and physical health care, kids will face longer waits and greater travel times, if they are able to access care at all. Out of sheer desperation, some gender-affirming care may go "underground" and escape professional oversight and quality controls, creating needless risks.

The Trump administration is also trying to erase data about transgender and non-binary kids. In 2025, the CDC closed public access to the [Youth Risk Behavior Surveillance Study](#), which provides important information about the numbers of transgender and non-binary youth in the U.S. Access was restored by court order but the administration calls the survey "gender ideology" and its future is uncertain.

Kennedy is, once again, deliberately prioritizing political ideology over science and medicine. Withholding treatment from transgender kids is cruel and dangerous and will result in higher rates of depression, anxiety, and suicidal ideation. If Kennedy succeeds in stripping the right of children to access transgender health care, he sets an incredibly dangerous precedent for political interference in medicine as a whole.

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