

What is in a Gender Affirming Care Ban?

Gender affirming care (GAC) includes medical, psychological, and social supports that help people live in alignment with their [gender identity](#). As of 2025, more than 20 states have passed laws restricting or banning this care, often under the claim of “protecting children.”¹²³ However, there is no credible medical evidence that gender-affirming care harms children, despite claims that these laws are necessary to prevent harm.⁴ Extensive research shows that access to age-appropriate gender-affirming care is associated with improved mental health outcomes, while denial of care is linked to higher rates of depression, anxiety, and suicidality among transgender youths.⁵⁶⁷⁸⁹ This [Fact Checked](#) explains what gender-affirming care bans actually do and how they harm public health and civil rights.

Myth 1: Do gender-affirming care bans only ban surgery?

No, most bans go far beyond surgery. Gender-affirming surgeries on minors are extremely rare, and when they occur, they require extensive evaluation, parental consent, and medical approval.¹⁰¹¹¹² Despite this, many state laws prohibit reversible and safe treatments such as puberty blockers and hormone therapy. Some laws even restrict counseling that supports a young person’s [gender identity](#).¹³¹⁴¹⁵ Such counseling focuses on helping young people explore, understand, and articulate their feelings about gender in a developmentally appropriate way, not on directing or pressuring

¹ Dai

² Dawson

³ Movement Advancement Project

⁴ Georges, et al (2024)

⁵ Dai

⁶ Dawson

⁷ Movement Advancement Project

⁸ Restar

⁹ Schweikart

¹⁰ Brownstein

¹¹ Dai

¹² Rafferty

¹³ Dai

¹⁴ Dawson

¹⁵ Movement Advancement Project

them toward any particular identity or medical decision. In states like Arkansas, Tennessee, and Florida, these bans penalize providers, threaten their licenses, and undermine parents' ability to make medical decisions for their children.¹⁶¹⁷¹⁸ Rather than protecting children, these laws block age-appropriate care that major medical organizations consider safe, effective, and essential for well-being.¹⁹²⁰²¹²²²³

Myth 2: Do these laws only affect children?

No, for any adult receiving care for any issue (such as hormones for irregular periods, menopause, or chronic conditions), these restrictions create barriers that extend well beyond pediatric care.²⁴²⁵ Several states have expanded restrictions through insurance exclusions, Medicaid bans, or limits on telehealth and cross-state care.²⁶ In states like Florida and Missouri, providers who offer gender-affirming care to adults risk losing their licenses or facing lawsuits, which has led hospitals and clinics to restrict care and pharmacies to refuse to fill related prescriptions out of fear of legal liability.²⁷²⁸²⁹ For adults, these restrictions result in interrupted treatment, loss of trusted providers, delayed care, and increased mental health risk, particularly for those who rely on insurance, Medicaid, or rural and telehealth services.³⁰ These laws create confusion, fear, and gaps in care that endanger transgender adults as well as youth. Beyond their effects on youth, these laws also raise serious concerns about bodily autonomy and the right of transgender adults to make private medical decisions free from political interference.

Myth 3: Do these laws actually protect children from harm?

No, major medical organizations oppose these bans. Every major medical association in the United States, including the American Medical Association (AMA), American Academy of Pediatrics (AAP),

¹⁶Dai

¹⁷Dawson

¹⁸ Movement Advancement Project

¹⁹American Medical Association

²⁰American Psychological Association

²¹ Rafferty

²² Restar

²³Schweikart

²⁴Medina

²⁵ Movement Advancement Project

²⁶ Dawson

²⁷ IBID

²⁸ Movement Advancement Project

²⁹ The Trevor Project

³⁰ Medina

American Psychological Association (APA), and Endocrine Society, recognizes age-appropriate gender-affirming care as safe, evidence-based, and medically necessary.³¹³²³³³⁴³⁵³⁶ Supporters of these bans claim to prevent harm, but there is no credible evidence that gender-affirming care endangers youth.³⁷³⁸³⁹⁴⁰⁴¹⁴² These laws replace evidence-based medical judgment with political rhetoric, harming the very children they claim to protect.⁴³⁴⁴

Myth 4: Are gender-affirming care bans narrowly enforced?

No, gender-affirming care bans vary widely across states, but most use similar enforcement tools. These laws can impose criminal penalties on providers, expose families or clinicians to civil lawsuits, revoke or suspend medical licenses, and block insurance or Medicaid coverage for gender-affirming care.⁴⁵⁴⁶ Some states go even further: in Texas, for example, parents who support their transgender children risk being investigated by child welfare agencies.⁴⁷ Since 2021, more than 20 states have enacted or proposed such restrictions—many using nearly identical legislative templates—and several, including Arkansas, Alabama, and Florida, are currently being challenged in court.⁴⁸⁴⁹

These states do not operate in isolation; they are a part of a broader pattern of legislation that frames transgender people as threats in order to justify expanded state control over healthcare and family decision-making.⁵⁰⁵¹ Recognizing these patterns helps clarify how legislative attacks on

³¹ American Medical Association

³² American Psychological Association

³³ Brownstein

³⁴ Coleman et al

³⁵ Rafferty

³⁶ Restar

³⁷ American Medical Association

³⁸ American Psychological Association

³⁹ Brownstein

⁴⁰ Coleman et al

⁴¹ Rafferty

⁴² Restar

⁴³ Medina

⁴⁴ Restar

⁴⁵ Abbott

⁴⁶ Brandt et al v. Rutledge et al

⁴⁷ Abbott

⁴⁸ Dawson

⁴⁹ Movement Advancement Project

⁵⁰ GLAAD

⁵¹ King et al

gender-affirming care fit into a larger strategy of restricting bodily autonomy, human, and civil rights.⁵²

Policy Suggestion:

- **Reject the criminalization of healthcare.** Legislatures should not impose criminal penalties, civil liability, or professional discipline on clinicians for providing care consistent with established clinical standards. Instead, states should allow medical licensing boards to establish and oversee standards of care, just as they do for other areas of healthcare.
- **Protect provider discretion and patient privacy.** Medical decisions should be made between patients, families, and healthcare professionals. This includes prohibiting laws that require clinicians to report families to child welfare agencies, mandate disclosure of private medical information to state officials, or restrict providers from discussing lawful treatment options with patients.
- **Support evidence-based, age-appropriate care.** Gender-affirming care should be governed by the same ethical and medical standards applied to all healthcare, grounded in scientific research and established clinical guidelines, without legislative interference that disrupts treatment.

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⁵² IBID

of Psychological Practice and science.

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