

# THE TRANSGENDER LEVIATHAN

## Executive Summary

In our time, the so-called “affirmative care” model toward young people confused about their gender has dominated the intellectual, moral, and cultural climate. Heterodox perspectives on transgenderism invite scathing attacks imbued with religious fervor that, even if well-meant, impede constructive debate over the consequences of transition therapy pushed on younger and younger Americans. Indeed, the model itself is hardly ever interrogated and instead, the discussion centers on to what degree we should affirm and intervene as we attempt to keep up with demand, which has grown exponentially over the last decade. [...]

The sheer immensity of ... the “transgender leviathan” is, in some ways, unprecedented relative to the size of the group it claims to represent. The amount of money moving through corporations, nongovernmental organizations (NGOs), political action committees (PACs), and governments is staggering; the number of powerful individuals involved is myriad and includes Republicans and Democrats. It would be impossible to exhaustively list all the various entities involved in such a small space. Instead, this report highlights and provides background on key individuals, institutions, and organizations so readers can inform themselves on how we arrived at this point, where it might lead next, and why we must fight back.

### 1- Patient Zero

To understand how we got here, it is helpful to revisit the “John/Joan” case, an experiment by the influential psychologist and sexologist John William Money. Its main subject, David Reimer, was a kind of patient zero for transgender children. Many aspects of this story prefigured things all too familiar in our time: the media’s role in promulgating and popularizing radical ideas, the involvement of the state—Money received funding from the National Institutes of Health (NIH) throughout his life—and the complicity of the medical establishment and healthcare companies.

### 2- Bad Medicine

In 2009, The Journal of Clinical Endocrinology & Metabolism, published by the influential Endocrine Society, recommended treating diagnosed “transsexual adolescents” with puberty blockers. “There was an attitudinal shift to be able to say that The Endocrine Society supports this,” said Norman Spack, a pediatric endocrinologist at Boston Children’s Hospital who helped author the study. Spack founded the Gender Management Service (GeMS) clinic, America’s first clinic for transgender children, in 2007. Two years later, puberty blockers started becoming generally available in the United States, partly thanks to the Endocrine Society’s endorsement. What followed was the explosive growth of a new industry.

### **3- Big Medicine**

When the formalism—the supposedly supporting “facts” of the matter—in which ideologues shroud the affirmative care model melts away, the very real world of power and profit remains. In a video from 2018 surfaced by journalist Matt Walsh, Dr. Shayne Taylor, a university professor and a physician at the Vanderbilt Clinic for Transgender Health, explained during a lecture how she convinced Nashville to get progressive on the issue. She highlighted that transgenderism is a “big money maker,” especially because the surgeries require a lot of “follow ups.” ... Taylor is right: there is a lot of money to be made from transgender patients, who are, in fact, repeat customers by necessity.

### **4- Coming for Your Kids**

There are already numerous examples of hospitals and social workers forcibly facilitating or attempting to facilitate the transition of a child over parental concerns, as documented by journalist Abigail Shrier and others. However, the starting point is often the classroom, where children are exposed to transgenderism or even transitioned behind their parents' backs.

### **5- The Politics of Transgenderism**

The advocates of transgenderism like to present themselves as scrappy underdogs, fighting for the marginalized, but the amount of institutional support behind them is immensely well-funded and far-reaching. [...]

Overall, the Democratic Party is the biggest political beneficiary of giving related to LGBT rights and issues, the banner under which transgender ideology is advanced. In the 2020 election cycle, Open Secrets data show groups in this space spent \$6.9 million supporting Democrats and only \$79,800 on Republicans.... Still, all this is just a small part of the astoundingly large and influential leviathan imposing its will in a top-down manner that belies the narrative of transgenderism ascending on the spontaneous winds of progress.

### **6- Social Contagion**

In 2018, Dr. Lisa Littman, assistant professor of the practice of behavioral and social sciences at Brown University, published a study in the PLOS ONE scientific journal that convincingly established the concept of “rapid onset gender dysphoria.” Littman noted that parents have described “that the onset of gender dysphoria seemed to occur in the context of belonging to a peer group where one, multiple, or even all of the friends have become gender dysphoric and transgender-identified during the same timeframe.” Parents have also reported “that their children exhibited an increase in social media/internet use prior to disclosure of a transgender identity.” The impact of peers and other social influences on an individual’s development are, as Littman wrote, described with the terms peer contagion and social contagion, respectively.

### **7- The Way Forward**

Setting America on a better path, one in which the vulnerable are not encouraged to self-destruct and sickness does not subvert health, requires challenging key institutions that act as the engines of transgender ideology. For a long time, politics have been perceived as downstream of culture. But the fact that transgenderism and like ideologies have been imposed by a manifestly top-down approach shows that it is possible to change the culture through political action. It is possible, in other words, to do more than merely slow the tide.