GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2023

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HOUSE BILL 808

Short Title:	Youth Health Protection Act.	(Public)	
Sponsors:	Representatives Blackwell, Pless, Fontenot, and Torbett (Primary S For a complete list of sponsors, refer to the North Carolina General Assemb	, , , , , , , , , , , , , , , , , , ,	
Referred to:	Health, if favorable, Families, Children, and Aging Policy, if favora 1, if favorable, Rules, Calendar, and Operations of the House	ble, Judiciary	
	April 19, 2023		
A BILL TO BE ENTITLED AN ACT TO PROTECT MINORS FROM ADMINISTRATION OF PUBERTY BLOCKERS AND CROSS-SEX HORMONES AND OTHER RELATED ACTIONS, PROCEDURES, AND TREATMENTS.			
Whereas, the State of North Carolina has a compelling government interest protecting the health and safety of its citizens, especially vulnerable children; and			
Whereas, the sex of a person is the biological state of being female or male, based on sex organs, chromosomes, and endogenous hormone profiles, and is genetically encoded into a person at the moment of conception, and it cannot be changed; and			
Whereas, some individuals, including minors, may experience discordance between their sex and their internal sense of identity, and individuals who experience severe psychological distress as a result of this discordance may be diagnosed with gender dysphoria; and			

Whereas, the cause of the individual's impression of discordance between sex and identity is unknown, and the diagnosis is based exclusively on the individual's self-report of feelings and beliefs; and

Whereas, this internal sense of discordance is not permanent or fixed, but to the contrary, numerous studies have shown that a substantial majority of children who experience discordance between their sex and identity will outgrow the discordance once they go through puberty and will eventually have an identity that aligns with their sex; and

Whereas, as a result, taking a "wait-and-see" approach to children who reveal signs of gender nonconformity results in a large majority of those children resolving to an identity congruent with their sex by late adolescence; and

Whereas, some in the medical community are aggressively pushing for interventions on minors that medically alter the child's hormonal balance and remove healthy external and internal sex organs when the child expresses a desire to appear as a sex different from his or her own; and

Whereas, this course of treatment for minors commonly begins with encouraging and assisting the child to socially transition to dressing and presenting as the opposite sex. In the case of prepubertal children, as puberty begins, doctors then administer long-acting GnRH agonist (puberty blockers) that suppress the pubertal development of the child. This use of puberty blockers for gender nonconforming children is experimental and not FDA-approved; and

Whereas, after puberty blockade, the child is later administered "cross-sex" hormonal treatments that induce the development of secondary sex characteristics of the other sex, such as causing the development of breasts and wider hips in male children taking estrogen and greater



1 muscle mass, bone density, body hair, and a deeper voice in female children taking testosterone.

Some children are administered these hormones independent of any prior pubertal blockade; and Whereas, the final phase of treatment is for the individual to undergo cosmetic and other surgical procedures, often to create an appearance similar to that of the opposite sex. These surgical procedures may include a mastectomy to remove a female adolescent's breasts and "bottom surgery" that removes a minor's healthy reproductive organs and creates an artificial form aiming to approximate the appearance of the genitals of the opposite sex; and

8 Whereas, for minors who are placed on puberty blockers that inhibit their bodies from 9 experiencing the natural process of sexual development, the overwhelming majority will 10 continue down a path toward cross-sex hormones and cosmetic surgery; and

11 Whereas, this unproven, poorly studied series of interventions results in numerous 12 harmful effects for minors, as well as risks of effects simply unknown due to the new and 13 experimental nature of these interventions; and

Whereas, among the known harms from puberty blockers is diminished bone density; the full effect of puberty blockers on brain development and cognition is yet unknown, though reason for concern is now present. There is no research on the long-term risks to minors of persistent exposure to puberty blockers. With the administration of cross-sex hormones comes increased risks of cardiovascular disease, thromboembolic stroke, asthma, COPD, and cancer; and

Whereas, puberty blockers prevent gonadal maturation and thus render patients taking these drugs infertile. Introducing cross-sex hormones to children with immature gonads as a direct result of pubertal blockade is expected to cause irreversible sterility. Sterilization is also permanent for those who undergo surgery to remove reproductive organs, and such persons are likely to suffer through a lifetime of complications from the surgery, infections, and other difficulties requiring yet more medical intervention; and

Whereas, several studies demonstrate that hormonal and surgical interventions often do not resolve the underlying psychological issues affecting the individual. For example, individuals who undergo cross-sex cosmetic surgical procedures have been found to suffer from elevated mortality rates higher than the general population. They experience significantly higher rates of substance abuse, depression, and psychiatric hospitalizations; and

Whereas, minors, and often their parents, are unable to comprehend and fully appreciate the risk and life implications—including permanent sterility—that result from the use of puberty blockers, cross-sex hormones, and surgical procedures; and

Whereas, it is of grave concern to this legislature that the medical community is allowing individuals who experience distress with their biological sex to be subjects of irreversible and drastic non-genital gender reassignment surgery and irreversible, permanently sterilizing genital gender reassignment surgeries, despite the lack of studies showing that such extreme interventions have benefits that outweigh their risks or chances of cure. In fact, they may increase the risk of suicide; and

Whereas, for these reasons, the decision to pursue a course of hormonal and surgical interventions to address a discordance between the individual's sex and sense of identity should not be presented to or determined for minors who are incapable of comprehending the negative implications and life-course difficulties attending to these interventions; Now, therefore,

44 The General Assembly of North Carolina enacts:

45 **SECTION 1.(a)** Chapter 90 of the General Statutes is amended by adding a new 46 Article to read:

"Article 1M.

"Youth Health Protection Act.

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49 "<u>§ 90-21.140. Definitions.</u>

50 <u>The following definitions apply in this Article:</u>

	General Assem	bly Of North Carolina	Session 2023
1	(1)	Government agent Any agent, employee, volunte	er, or contractor of a
2		public child services agency, private child placing ag	ency, court, or school
3		district.	•
4	<u>(2)</u>	Medical professional. – Any physician, surgeon, physician	sician assistant, nurse,
5		clinical nurse specialist, nurse practitioner, anesth	etist, psychiatrist, or
6		medical assistant licensed under this Chapter.	
7	<u>(3)</u>	Mental health care professional or counselor Any lic	ensed medical, mental
8		health, or human services professional licensed under t	this Chapter, including
9		any psychologist, social worker, psychiatric nurse, all	lied mental health and
10		human services professional, licensed marriage and far	nily therapist, certified
1		rehabilitation counselor, licensed clinical mental healt	h counselor, or any of
2		their respective interns or trainees, or any other person	designated or licensed
3		as a mental health or human service professional.	
4	<u>(4)</u>	Minor. – Any individual who is below 18 years of age.	-
5	<u>(5)</u>	Political subdivision Any division of local gove	ernment, county, city,
6		assessment district, municipal corporation, special p	urpose district, board,
7		department, commission, or any division of local gov	-
8		right to exercise part of the sovereign power of that sub	
9	<u>(6)</u>	Sex The biological state of being female or male,	based on sex organs,
20		chromosomes, and endogenous hormone profiles,	-
1		individual's psychological, chosen, or subjective exper-	
2		rohibition of certain practices and health care service	
3		ithstanding any other provision of law, it shall be unla	•
24	*	nental health care professional or counselor to knowingl	
25	• •	ces upon a minor, or cause them to be performed for the	
26		arance of or affirm the minor's perception of his or her	gender or sex, if that
7		erception is inconsistent with the minor's sex:	
8	<u>(1)</u>	Performing surgeries that sterilize, including ca	•
9		hysterectomy, oophorectomy, orchiectomy, or penecto	•
0	<u>(2)</u>	Performing surgeries that artificially construct tissue	
1		genitalia that differs from the individual's sex, incl	uding metoidioplasty,
2	(2)	phalloplasty, and vaginoplasty.	
3	$\frac{(3)}{(4)}$	Performing a mastectomy.	
4	<u>(4)</u>	Prescribing, administering, or supplying gonadotrop	-
5		analogues or other synthetic drugs used to stop lute	-
86 77		follicle stimulating hormone secretion, synthetic antia	
7	(5)	block the androgen receptor, or any drug to suppress or	
8	<u>(5)</u>	Prescribing, administering, or supplying testost	
9		progesterone to a minor in an amount greater than	•
0		produced endogenously in a healthy individual of that	at individual's age and
1		<u>Sex.</u>	mont on tinner
2 3	(b) (b)	Removing any otherwise healthy or nondiseased body	-
		Il be unlawful for any medical professional or mental he	
4		knowingly engage in conduct that aids or abets the	-
-5 -6		this section to a minor. This section may not be construed	a to impose hadnity on
	· · ·	cted by federal or State law.	ouncelor who encodes
17 18		dical professional or mental health care professional or c ctices identified in subsection (a) of this section or causes	
18 19	• •		-
50		ed to have engaged in unprofessional conduct and shall b a minimum of one year and other appropriate disci	
50 51		ensing or certifying board. The medical professional sha	
1	professional's ne	ensing of certifying board. The medical professional sna	an also de subject to a

Genera	l Assem	bly Of I	North Carolina Se	ession 2023
civil per	nalty of i	in to on	ne thousand dollars (\$1,000) per occurrence. The clear proces	eds of civil
		-	n this subsection shall be remitted to the Civil Penalty and Forfe	
-	-		. 115C-457.2.	<u> </u>
<u>(d)</u>			does not apply to any of the following:	
<u>(0)</u>	(1)		good-faith medical decision of a parent or guardian of a minor	r born with
	<u>1-7</u>		edically verifiable genetic disorder of sexual development, inc	
			e following:	
		<u>a.</u>	A minor with external biological sex characteristics	s that are
			irresolvably ambiguous, such as a minor born havin	
			chromosomes with virilization, 46 XY chromosomes	-
			under-virilization, or having both ovarian and testicular tiss	sue.
		<u>b.</u>	When a physician has otherwise diagnosed a disorder	of sexual
			development, in which the physician has determined throu	igh genetic
			testing that the minor does not have the normal sex ch	iromosome
			structure, sex steroid hormone production, or sex steroid	d hormone
			action for male or female sexes.	
	<u>(2)</u>		treatment of any infection, disease, or disorder that has been	
			erbated by the performance of a procedure described in subsec	
			section, whether or not the procedures were performed in accor	dance with
			e or federal law.	
	<u>(3)</u>	-	procedure undertaken because an individual suffers from	
		-	rder, physical injury, or physical illness that is certified by a phy	-
			would place the individual in imminent danger of death or imp	<u>pairment of</u>
	NT (or bodily function unless surgery is performed.	1 1.1
<u>(e)</u>	-		ding any other provision of law, it shall be unlawful for any $C = 0.2111$ that receives State funds to furnish provide	
-			G.S. 90-21.11, that receives State funds to furnish, provide, that constitutes the performance of or preparation for a gende	-
	re to a m		that constitutes the performance of or preparation for a gende	
	1.142. C		ling	
-			ency, political subdivision of the State or local governme	ent or any
		-	prity to license or discipline the members of a profession may no	•
-			t take any adverse action against any individual who gives of	-
			ice, or any other speech or communication, whether described	
		•	onsistent with conscience or religious belief.	i 7
			on of parental rights.	
(a)			rdians, or custodians, in exercising the fundamental right to ca	tre for their
child, m	nay withl	nold cor	nsent for any treatment, activity, or mental health care service	ces that are
designed	d and in	tended t	to form their child's conceptions of sex and gender or to tr	eat gender
dysphor	ia or gei	nder nor	onconformity. The State, its agents, and political subdivision	<u>is shall not</u>
infringe	upon or	impede	e the exercise of this right under this section.	
<u>(b)</u>			nent agent, nor any employee of this State, any political subdivi	
	-		ernmental entity, except for law enforcement personnel, shall	
			thhold information from the minor's parent. Nor shall any such	
			's parents information that is relevant to the physical or menta	
			t that parents interested in and responsible for the well-being	
			hand and should be apprised of. Such conduct shall be g	
	ne of the	employ	byee, in addition to any other remedies provided to a parent	under this
Article.	TC			
$\frac{(c)}{(c)}$			nent agent has knowledge that a minor under its care or supe	
			gender dysphoria, gender nonconformity, or otherwise dem	
<u>aesire to</u>	b be treat	ed in a i	manner incongruent with the minor's sex, the government age	<u>nt or entity</u>

	General Assembly Of North Carolina	Session 2023
1	with knowledge of that circumstance shall immediately notify, in v	vriting, each of the minor's
2	parents, guardians, or custodians. The notice shall describe all of the	relevant circumstances with
3	reasonable specificity.	
4	"§ 90-21.144. Whistleblower protection.	
5	(a) No person shall be discriminated against in any manner b	because the person does any
6	of the following:	
7	(1) Provided, caused to be provided, or takes steps	to provide or cause to be
8	provided to his or her employer, the Attorney Ger	neral, any State agency, the
9	United States Department of Health and Human S	ervices, or any other federal
0	agency any information or an act or omission provision of this Article.	that is a violation of any
2	(2) Testified or prepared to testify in a proceeding co	ncerning a violation of this
3	Article.	-
4	(3) Assisted or participated in a proceeding concernin	g a violation of this Article.
5	(b) Unless a disclosure or report of information is specific	ally prohibited by law, no
6	person shall be discriminated against in any manner because the perso	n disclosed any information
7	under this Article that the person believes evinces any of the following	ng:
8	(1) <u>Any violation of law, rule, or regulation.</u>	
9	(2) Any violation of any standard of care or other	ethical guidelines for the
)	provision of any health care service.	
1	(3) Gross mismanagement, a gross waste of funds,	
2	substantial and specific danger to public health or	<u>safety.</u>
3	" <u>§ 90-21.145. Civil remedies.</u>	
4	(a) <u>A civil action for compensatory or special damages, inj</u>	
5	relief available under law may be brought by any person for any vi	
6	this Article against the clinic, health care system, medical pro	fessional, or other person
7	responsible for the violation.	
8	(b) Any party aggrieved or harmed by any violation of this	
9	bring suit for violation of this Article no later than two years after	•
)	accrued. Minors injured by practices prohibited under this Article in their grant and may bring on action in their grant.	• • •
1 2	their minority through a parent and may bring an action in their own nation at any time from that date until 20 years from the date the minor atta	
3	(c) Persons who prevail on a claim brought pursuant to this se	
3 4	the finding of a violation, to recover the following:	ection shan be entitled, upon
+ 5	(1) Monetary damages, including all psychological, er	notional and physical harm
6	suffered.	notional, and physical harm
7	(2) Total costs of the action and reasonable attorneys'	fees
8	(3) Any other appropriate relief.	1005.
9	(d) Standing to assert a claim or defense under this section	n shall be governed by the
)	general rules of standing.	i shah be governed by the
1	"§ 90-21.146. Preemption.	
2	(a) A political subdivision of this State is preempted	from enacting adopting
3	maintaining, or enforcing any order, ordinance, rule, regulation, police	
4	that prohibits, restricts, limits, controls, directs, or otherwise inter	
5	conduct and judgment of a mental health care professional or co	
5	undertaken within the course of treatment and communication w	• •
7	persons, or the public, including therapies, counseling, referrals, and	-
3	(b) The Attorney General or a mental health care professiona	
)	action for an injunction to prevent or restrain violations of this sec	• •
)	professional may recover reasonable costs and attorneys' fees incurre	
1	under this section.	

	General Assembly Of North CarolinaSession 2023
1	(c) Sovereign and governmental immunity to suit and from liability is waived and
2	abolished to the extent of the liability created by this section."
3	SECTION 1.(b) Article 6 of Chapter 143C of the General Statutes is amended by
4	adding a new section to read:
5	"§ 143C-6-5.6. Limitation on use of State funds for gender transition procedures.
6	No State funds may be used, directly or indirectly, for the performance of or in furtherance
7	of gender transition procedures or to support the administration of any governmental health plan
8	or government-offered insurance policy offering gender transition procedures."
9	SECTION 2. G.S. 90-21.5 reads as rewritten:
10	"§ 90-21.5. Minor's-Emanicipated minor consent sufficient for certain-medical health
11	services.
12	(a) Subject to subsection (a1) of this section, any minor may give effective consent to a
13	physician licensed to practice medicine in North Carolina for medical health services for the
14	prevention, diagnosis and treatment of (i) venereal disease and other diseases reportable under
15	G.S. 130A-135, (ii) pregnancy, (iii) abuse of controlled substances or alcohol, and (iv) emotional
16	disturbance. This section does not authorize the inducing of an abortion, performance of a
17	sterilization operation, or admission to a 24-hour facility licensed under Article 2 of Chapter
18	122C of the General Statutes except as provided in G.S. 122C-223. This section does not prohibit
19	the admission of a minor to a treatment facility upon his own written application in an emergency
20	situation as authorized by G.S. 122C-223.
21	(a1) Notwithstanding any other provision of law to the contrary, a health care provider
22	shall obtain written consent from a parent or legal guardian prior to administering any vaccine
23	that has been granted emergency use authorization and is not yet fully approved by the United
24	States Food and Drug Administration to an individual under 18 years of age.
25	(b) Any minor who is emancipated may consent to any medical treatment, dental and
26	health services for himself or for his child."
27	SECTION 3. If any provision of this act or its application is held invalid, the
28	invalidity does not affect other provisions or applications of this act that can be given effect
29	without the invalid provisions or application and, to this end, the provisions of this act are
30	severable.
31	SECTION 4. This act becomes effective October 1, 2023.