

COVER SHEET

TO:

Connecticut Commission on Human Rights and Opportunities
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FROM:

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RE:

GLAD Law Complaint Concerning Pediatric Gender Medical Interventions
Yale New Haven Health and Connecticut Children's Medical Center

DATE:

December 17, 2025

Dear Commissioners,

We write to the Connecticut Commission on Human Rights and Opportunities to urge caution, rigor, and a comprehensive human rights analysis in connection with the recent complaint filed by GLAD Law concerning Yale New Haven Health and Connecticut Children's Medical Center.

While the complaint frames the discontinuation of pediatric gender medical interventions as unlawful discrimination, we respectfully submit that this framing overlooks a profound and unresolved human rights concern: the medicalization of gender-nonconforming children—many of whom would otherwise grow up to be lesbian or gay—through experimental and irreversible interventions.

Pediatric gender transition is not a neutral act of accommodation. It is a medical and social intervention that reinterprets childhood distress, gender nonconformity, and same-sex attraction through a medicalized lens, often leading to irreversible physical consequences. Multiple international health authorities, including those in the United Kingdom, Sweden, Finland, and Norway, have now concluded—after systematic evidence reviews—that the routine medicalization of minors for gender-related distress lacks a sufficient evidentiary basis and carries significant potential for harm.

Of particular relevance to this Commission's mandate is the growing body of evidence demonstrating that a substantial proportion of children placed on medical transition pathways are same-sex attracted or gender-nonconforming youth. In practice, pediatric gender transition often functions as a redirection of homosexuality into a medical condition—transforming children who might otherwise reconcile their sexed bodies with same-sex attraction into lifelong medical patients.

From a human rights perspective, this raises grave concerns. International human rights frameworks emphasize the rights of children to bodily integrity, to freedom from non-therapeutic medical experimentation, and to protection from practices that pathologize or erase sexual orientation.

It is therefore not self-evident that hospitals choosing to pause or discontinue pediatric gender medical interventions are engaging in unlawful discrimination. To the contrary, such decisions may reflect an effort to comply with emerging medical ethics standards, to avoid foreseeable harm, and to protect vulnerable youth from irreversible outcomes in the absence of clear evidence.

The LGB Courage Coalition stands ready to assist the Commission should it wish to examine these issues further. Our leadership includes individuals with direct clinical, research, and whistleblower experience in pediatric gender medicine, as well as extensive engagement with international evidence reviews, legislative testimony, and affected families.

Protecting the rights of children requires more than enforcing access claims; it requires ensuring that vulnerable youth are not subjected to irreversible medical interventions that may foreclose healthy adult outcomes, including the acceptance of same-sex attraction.

Respectfully submitted,

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