

Obama/Biden Era Transgender Policies Should be Repealed, not Reinstated

President Joe Biden's Inauguration Day [Executive Order](#) prohibited discrimination based on gender identity or sexual orientation, and a second [Executive Order](#) imposed those policies on the **Department of Defense**. A proposed [amendment](#) to the **National Defense Authorization Act (NDAA) for 2023** that would have codified current transgender policies was withdrawn, but extreme **Obama/Biden Administration** mandates are being imposed administratively.

Pronouns, Privacy, and Athletic Competitions

Biden's first Executive Order specifically opened doors for transgender men who *want* "**access to the restroom, the locker room, or school sports**" reserved for women.

- Under a [DoD Instruction](#), all military personnel must endorse and act on the notion that gender is "assigned at birth," even though human DNA and chromosomes in every cell determine **biological sex** long before birth.
- The Pentagon has hired a contractor to [research](#) ways to accommodate "[non-binary](#)" personnel, even though officials refuse to define what "non-binary" is.
- Reality-denying groupthink also politicizes **pronouns**. A **Navy video** demonstrates awkward ways to address persons identifying as transgenders, and anyone "misusing" designated pronouns could be [punished](#) for harassment.
- Codification of Biden transgender policies threaten female **athletic programs** at all Department of Defense schools and military service academies, in the same way that biological males have used physical advantages to beat young women in several sports.

Instructions and training materials state that military women must accept the presence of biological men in private living and shower facilities.

- An Obama-era [Army Training Manual](#) (2016) expressed little concern for "other [female] Soldiers [who] have expressed discomfort showering with a female who has male genitalia." (Vignette #8, p. 23) A 2021 Biden Administration version of the same Army Vignette reportedly [teaches](#) military men that they might encounter in "male barracks, bathroom, and shower facilities . . . a Soldier [who] still has female genitalia."
- Training materials (2016) authorized what is called "**real life experience**" (RLE) – time off for as long as a year prior to confirmed "transition." (p. 7) The Manual also discussed off-duty cross-dressing (Vignette #1, p. 16) and a male pregnancy in a soldier who did not have "sex-reassignment surgery" and stopped taking male hormones. (Vignette #6, p. 21)

These mandatory policies and unreasonable expectations violate minimal expectations of privacy and elevate risks of demoralizing tension and sexual misconduct.

Personal Convictions, Medical Ethics and Concerns About Religious Liberty

A self-diagnosis of gender dysphoria permits only one course of treatment, moving toward

Over, please . . .

“transition,” instead of compassionate counseling and competent medical care that fully informs the patient of risks and irreversible consequences of treatments that do not change biological sex.

- Doctors, nurses, and chaplains must provide or support controversial treatments for gender dysphoria, including life-long hormones or irreversible surgeries, regardless of their own **medical ethics** or **religious convictions**. Dissent, which is not an option, ends careers.
- As with **COVID** vaccination mandates, the administration has consistently disregarded concerns about medical ethics or rights of religious liberty.
- As **James Mattis** [testified](#) in 2018, any discussion of problems with Obama-era transgender policies was not permitted, for reasons of “privacy,” and a [DoD Instruction](#) confirms why we don’t hear about problems with transgender policies. (p. 17)
- LGBT activist groups are demanding extension of transgender treatments to **veterans**, at enormous cost, and puberty blocking hormones and surgeries to military **dependent children** who are too young to make decisions about irreversible radical surgeries.

Consequences of Retaining Persons with Gender Dysphoria

In 2018, then-Defense Secretary James Mattis signed a [Memo](#) recommending a [nuanced policy](#) regarding persons with gender dysphoria. The Mattis Memo quoted findings of a panel of experts, whose six months of research [reported](#) significant costs and problems with transgender policies in effect during the Obama years, from **October 1, 2015**, to **October 3, 2017**. For example:

- During this time, **994** active-duty service members diagnosed with gender dysphoria accounted for **30,000 mental health visits**. Medical care costs for these personnel increased **three times**, or **300%**. (p. 22 and p. 41)
- Data showed that cumulatively, transitioning service members in the **Army** and **Air Force** averaged **167** and **159 days** of limited duty, respectively, over a one-year period. (p. 33)
- Some commanders reported that it was necessary to divert **operational and maintenance funds** to pay for active-duty transgender servicemembers’ extensive travel throughout the United States to obtain specialized medical care. (p. 41)
- "A review of the administrative data indicates that Service members with gender dysphoria suffer from **high rates of mental health conditions** such as anxiety, depression, and substance disorders . . . [and] are **eight times more likely to attempt suicide** than Service members as a whole." (**12%** versus **1.5%**) The panel found little evidence that gender dysphoria remedies were effective, adding “Nor do any of these studies account for the **added stress of military life, deployments, and combat.**” (pp. 21-24)

Members of Congress and the next President should objectively review and revoke current transgender policies that politicize medical care and detract from morale and overall readiness.

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The Center for Military Readiness is an independent public policy organization that reports on and analyzes military/social issues. More information is available www.cmrlink.org.