



How to Talk About:
GENDER IDEOLOGY

Table of Contents

3	Five Key Points About Gender Ideology
4	Misperceptions v. Facts
12	Quiz
14	Quiz Answers
17	Gender Ideology in 60 Seconds
19	Social Media Kit
20	Additional Reading

Five Key Points About Gender Ideology

1 **Gender ideology teaches children that they were “assigned a sex at birth” and may have been “born in the wrong body.”** Gender ideology posits that children can choose their sex and that they can choose to be a boy, girl, both, or neither.

2 **Activists have created policies and “best practices” (as defined by the activists) requiring teachers, medical providers, and parents to “affirm” children who claim that they are no longer their biological sex.** These policies leave no room for consideration of underlying issues and comorbidities, such as depression, anxiety, autism spectrum disorder, ADHD, and childhood trauma.

3 **With the rise of gender ideology in society and schools, there has been an alarming and rapid rise in the number of children and young adults embracing gender identities different from their biological sex.**

4 **Because gender ideology has seeped into many of our institutions, including K-12 schools, higher education, and professional associations, children and young adults often find themselves steered in the direction of dangerous medical interventions, including puberty blockers, cross-sex hormones, and irreversible surgeries.**

5 **Gender ideology emotionally blackmails parents of gender-confused children by telling them that if they do not “affirm” their child’s gender identity, their child will commit suicide.**

Misperceptions v. Facts

MISPERCEPTION #1: Progressive thinking about gender liberates us from regressive sex stereotypes and helps to improve the mental health and well-being of children.

FACT: Gender ideology reinforces regressive sex stereotypes about male and female sex roles, encouraging those who don't conform to societal norms regarding femininity or masculinity to believe that doctors "incorrectly assigned their sex at birth."

MISPERCEPTION #2: Schools are simply responding compassionately to the growing number of trans-identifying students.

FACT: Activist organizations provide a steady stream of gender-ideology-themed professional development and classroom resources to schools across the United States. Teachers are encouraged to introduce materials that tell students that sex is arbitrarily assigned at birth and that ask students to choose from a dizzying array of gender identities.

FACT: Schools are actively transitioning children, often middle school girls who are struggling emotionally as they're starting puberty, and crafting "**Gender Support Plans**" designed to hide the child's new name, pronouns, and emotional challenges from their parents. It's more than understandable that parents have asked legislators to curb such gender-ideology activism in schools.

MISPERCEPTION #3: There are more than two sexes.

FACT: Humans, like other mammals, fall into one of two sex categories (male and female) with distinct reproductive functions. A tiny percentage (between .02 and .1%) of humans are born with differences of sexual development (DSD conditions), but they are not a third sex. They are a variation on the sex binary, the exception that proves the rule.

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MISPERCEPTION #4: Transwomen *are* women and transmen *are* men.

FACTS: Sex is objective and fixed, whereas one's "gender identity" is subjective. A man may identify as a woman (subjectively), but that does not (objectively) make him a woman. A girl may embrace a new gender identity, but that doesn't mean she is no longer female. The term "trans" (as in "transgender" or "trans-identified") typically refers to someone who wants to be perceived as a member of the opposite sex. It is also short for "transition," meaning that a trans-identifying person is someone who has taken steps to change the outward appearance of his or her sex. Although a person cannot change his or her sex, one can express masculinity or femininity in many different ways. A person born male might choose to live as a woman, but that person cannot scientifically *be* female and cannot *be* a woman.

MISPERCEPTION #5: A child may be a boy, girl, both, or neither.

FACT: Biological sex is real and true and children should be taught about the sex binary for humans as a scientific fact as they learn about other mammals and biology. Sadly, too many schools are encouraging young people to think that if they don't conform to sex-based stereotypes, they need to change themselves physically. That's sexist and cruel. Caring and responsible adults need to question why education and medical professionals are eager to rush children into transition services provided by Planned Parenthood or one of the 300 gender clinics that have emerged since 2007.

MISPERCEPTION #6: Schools must teach and practice "gender affirmation" to protect gender-questioning youth.

FACT: Children go through many phases as they mature, and caring adults should provide support and guidance, but not encourage children to make irreversible decisions during childhood. Schools must acknowledge that parents are ultimately responsible for the care and upbringing of their children and that all children need the emotional support, protection, and lifelong love that only parents can provide.

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State standards and recommended lesson plans should prioritize accurate academic instruction, rather than proselytize gender ideology

MISPERCEPTION #7: Society must socially and medically transition gender-nonconforming children at the earliest possible stage.

FACT: The medical community must re-embrace the ethic that they must first do no harm, and stop the unstudied and unverified medical transitioning of increasingly younger children. There are a growing number of detransitioners—people who believed that they were a different sex but have since come to recognize and embrace their biological sexes—who face serious lasting physical and mental harm. **Detransitioners** are people—often young adults—who sorrowfully acknowledge that they needed responsible, caring communities and mental-health support when they were younger, rather than a rush to puberty blockers, cross-sex hormones, and radical surgery, which did not resolve their underlying mental health challenges.

MISPERCEPTION #8: The U.S. is following evidence-based best practices by affirming children's and young adults' gender identities and encouraging them to undergo medical interventions.

FACT: Puberty blockers and cross-sex hormones negatively impact children's mental, emotional, and physical development. In fact, health authorities in the U.K., Sweden, and Finland have reduced minors' access to medical interventions after **systematic reviews of evidence** found that the risks of puberty blockers and cross-sex hormones outweigh the possible benefits. **Dr. Hilary Cass**, the British pediatrician who reviewed the U.K.'s Tavistock gender clinic, exposed how puberty blockers "lock in" children and young people down a treatment pathway (96-98% continue on to cross-sex hormones) and negatively impact cognitive development. Cass raised concerns about "the unknown impacts on development, maturation and cognition if a child or young person is not exposed to the physical, psychological, physiological, neurochemical and sexual changes that accompany adolescent hormone surges."

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MISPERCEPTION #9: Children will commit suicide if they are not socially and medically transitioned at the earliest possible stage.

FACT: According to a study entitled [Puberty Blockers, Cross-Sex Hormones, and Youth Suicide](#), “increasing minors’ access to cross-sex interventions is associated with a significant increase in the adolescent suicide rate.” The findings suggest that the policies and standards of care put in place in the name of protecting children from suicide must be re-evaluated.

FACT: The study also found that “closer and more positive relationships between children and parents promote mental well-being and is protective against suicide.” Our society must support parents, protect children, and keep families intact by turning away from propaganda centered around suicide threats. It is cruel to manipulate emotionally vulnerable young people with cult-like slogans about suicide, especially when they were often suffering from mental health challenges, including depression, anxiety, eating disorders, and self-harm, before they embraced a new gender identity.

MISPERCEPTION #10: Embracing gender ideology is kind and inclusive.

FACT: Pressuring a child to choose a new identity and name, and then hiding the child’s social transition from her parents is manipulative and cruel. The children caught up in the social contagion of gender ideology often have underlying conditions, including anxiety, depression, autism spectrum disorder, and ADHD, and struggle with lagging social skills and obsessive rumination. Both studies and the [stories shared by detransitioners](#) reveal a tendency to self-harm and suffering from eating disorders. Puberty is particularly hard for these highly-sensitive and emotionally-intense young people, and they’re understandably seeking the relief offered by the elusive promise of “trans joy.”

FACT: These vulnerable children, often girls, deserve their parents’ involvement as they struggle through puberty. The school policies that push children to transition and then hide the child’s new name and identity from parents intentionally drive a painful wedge between parents and children. Parents who love their children and would do anything

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to keep them safe are shoved aside by arrogant school staff who have the full power of the education bureaucracy behind them.

MISPERCEPTION #11: Children and young people can easily transition back if they change their minds.

FACT: Psychosocial transitions push children down a one-way path into medical transitions. No longer content with just changing her name and pronouns, a young girl who feels her gender identity does not “align” with her body will begin puberty blockers, cross-sex hormones, top surgery—which involves cutting off her healthy breasts—and even surgeries that remove skin from her arm or thigh to create a fake penis. Puberty blockers begin as early as age 8, hormones at 12 and 13, and breast removals at age 15 and sometimes earlier.

FACT: School staff, counselors, and medical professionals peddling gender ideology must acknowledge the irreversible damage that so many young people experience after medically transitioning, **including** negative impacts on bone density, cognitive development, cardiovascular health, fertility, and sexual function.

FACT: The New York Times recently exposed some of the **dangers of puberty blockers**, and Reuters questioned the **impact of social media and peer influence** on young women exploring gender identities and the **long-term safety and efficacy** of “gender-affirming care.”

MISPERCEPTION #12: Angry right-wing parents are creating a culture war by falsely claiming that gender ideology is pushed on young children.

FACT: Parents want schools to focus on academics, not indoctrination. When parents discovered that schools were pressuring children to choose their gender identity and to consider rejecting the name their parents lovingly chose for them, they started expressing concern.

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FACT: Activist organizations like Gender Spectrum and Advocates for Youth **have made gender indoctrination very easy** for teachers by creating identity-focused lessons plans, classroom materials, and YouTube videos, and ensuring that the publishing industry churns out colorful picture books and graphic novels that “break the binary” and teach children that they can be born in the wrong body.

FACT: Many parents believe that classroom teachers should not show young, impressionable children pictures that depict breast-binding or encourage physically altering their growing bodies. They don’t want children in early elementary grades to read books or use gender coloring books that encourage them to disassociate their minds from their bodies. Young children don’t need to be shown a Blue’s Clues Pride Parade video celebrating transgenderism and pansexuality, or Queer Kid Stuff videos that train them to ask people for their pronouns, or be told that doctors are sometimes wrong when “assigning gender.”

MISPERCEPTION #13: Schools aren’t hiding children’s new names, gender identities, and pronouns from parents.

FACT: Activist organizations such as GLAAD, the Human Rights Campaign, and PFLAG drafted school district and state policies that require “**Gender Support Plans**” to be developed as soon as a child chooses a new gender identity. The child may suddenly express a preference for the gender identity that’s trending in her social circle or online fandom. Once the request is made, the school jumps into action, crafting a plan that codifies the child’s new name and pronouns, and determines the bathrooms, locker rooms, and sleeping arrangements for overnight trips the child will use. If the student indicates that her parents might choose to affirm her biological sex, the plan instructs school staff to actively HIDE the new name and gender identity from the parents. The other students at the school are required to comply with the gender support plan, and the entire school is united against the parents as the school staff secretly and aggressively push the child down a path of social and likely medical transition.

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MISPERCEPTION #14: Legislators and school board members can stop teachers from preaching gender ideology in the classrooms by limiting the curriculum teachers can use.

FACT: In an era where teachers regularly seek out lesson plans on the Internet, rather than using an established curriculum, children are vulnerable to classroom materials created to fulfill a political agenda, rather than provide academically useful and age-appropriate instruction. Organizations like Planned Parenthood have taken advantage of this phenomenon by crafting sex-education lesson plans that encourage children to develop trans identities. Doing so is to the benefit of **Planned Parenthood** financially, as the organization provides opposite-sex hormones to transitioning children at hundreds of clinics across the United States.

MISPERCEPTION #15: Radical trans activists have only influenced a small number of left-leaning areas of the country.

FACT: In **school districts across the country**—not just in more progressive areas, but in the vast majority of districts—often without parental knowledge or consent, staff teach children about the gender spectrum, “affirm” their students’ chosen gender identities, provide gender-questioning students with secretive gender support plans, chest- and genital-concealing undergarments, and opposite-sex overnight accommodations. In some districts, administrators punish students who use biological pronouns to refer to classmates who recently decided to use different pronouns.

MISPERCEPTION #16: It’s too late to push back.

FACT: Now that they know what is happening, parents are demanding that legislators curb such gender-ideology activism in schools. The activists eager to erase biological sex, transition children, and hide vital information from parents vociferously and sometimes viciously oppose anyone impeding their agenda. They will fight parents’ demands for education freedom because they want to trap children in government-assigned schools so they can continue indoctrinating them. But parents will prevail.

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MISPERCEPTION #17: A majority of the American public supports gender-affirming policies.

FACT: A majority of Americans oppose socially and medically transitioning minors. According to three different polls from May 2022:

- 59% of voters supported laws requiring schools to notify parents if their child chooses a new gender identity ([OnMessage Inc.](#)).
- 61% favor requiring schools to receive parental consent before counseling about a student's new gender identity ([YouGov](#)).
- A majority of parents (59%) and non-parents (58%) think children should not be able to choose their preferred pronouns ([Harris Insights and Analytics](#)).

1 “Gender ideology” is:

- A.** the theory that biological sex is irrelevant.
- B.** the belief that human beings are able to choose whether they are male, female, or something else entirely.
- C.** a movement that aims to make children believe they need to choose their sex.
- D.** A, B, and C.
- E.** a right-wing, make-believe boogeyman.

2 True or False: Schools are developing and using “gender support plans” to change students’ identities, names, and pronouns without parental consent or knowledge.

- A.** True
- B.** False

3 True or False: Schools are providing transition closets that offer breast binders and tucking underwear for gender-questioning students so that students can suppress their biological sex while at school without their parents finding out.

- A.** True
- B.** False

4 True or False: Schools are encouraging gender-questioning students to room with students of the opposite sex on overnight trips.

- A.** True
- B.** False

5 True or False: Schools are punishing students who use biological pronouns to refer to trans-identified students.

- A.** True
- B.** False

6 What side effects may someone experience if he or she undergoes surgery or takes hormones or hormone suppressants in order to better resemble the opposite sex?

- A.** None. These treatments have no side effects and are totally reversible.
- B.** Increased risk for blood clots, heart attacks, and stroke, infertility, inability to orgasm for life.

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7 True or False: A growing number of young adults are “detransitioning,” or no longer embracing a gender identity that does not align with their biological sex.

- A.** True
 - B.** False
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8 Compared to the United States, European countries, which had promoted transitioning years before the United States, are:

- A.** making it easier for adolescents to get puberty blockers, cross-sex hormones, or surgeries to reshape their bodies to reflect their gender identity.
- B.** no different when it comes to this topic.
- C.** changing course, advising caution, and restricting these surgeries as well as treatments like puberty blockers and cross-sex hormones for kids and teens.

9 Which of the following statements is true:

- A.** A man can become a woman, and vice versa.
 - B.** Human beings choose their sex.
 - C.** Sex is an immutable characteristic that cannot be changed.
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10 The word “gender” is a synonym for “sex.”

- A.** True
- B.** False

Quiz Answers

Q1 ANSWER: D

Although activists claim they just want to protect the rights of trans-identifying people, their movement actually seeks to erase biological sex altogether.

Q2 ANSWER: A

True. In school districts across the country, staff teach children about the gender spectrum, “affirm” their students’ chosen gender identities, and provide gender-questioning students with secretive “gender support plans”—often without parental knowledge or consent. School staff quickly put these plans into place if a child claims to have the “wrong body” for his or her “gender.” The plans detail arrangements for bathrooms, locker rooms, and overnight trip accommodations, as well as the child’s chosen name and pronouns. If the child states that he or she is not comfortable with the parents knowing about the new identity, the school hides the new identity by using the biological name and pronouns with the parents. Parents in numerous states, including [Leon County](#) and [Clay County](#), Florida, [Iowa](#), [Massachusetts](#), [Wisconsin](#), [Virginia](#), [Maryland](#), and [California](#) are suing school districts for crafting these secretive plans. Sources: [Gender Spectrum](#); [IWF’s Identity Crisis Series](#); [Parents Defending Education](#)

Q3 ANSWER: A

True. Some school districts provide students with chest- and genital-concealing undergarments, and even offer students a special “transition closet” at school where they can change clothes to reflect their preferred identities without their parents’ knowledge. Source: [TheTransitionCloset.org](#)

Q4 ANSWER: A

True. When students have a gender identity that doesn’t match their sex, schools can and do offer opposite-sex overnight accommodations on school trips. Depending on state law and the student’s age, schools can do this without parental notification or consent. Sources: [Gender Spectrum](#); [IWF’s Identity Crisis Series](#).

Q5 ANSWER: A

True. For example, the Kiel, WI school district even filed sexual harassment complaints against three middle schoolers for calling a classmate “she” rather than “they.” Source: [Independent Women’s Forum](#), [New York Post](#)

Q6 ANSWER: B

Even if someone decides to “detransition,” or reverse course, sterility is often a lifetime

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effect of “gender-affirming care.” A **review** of 300 studies on the impact of puberty blockers found that they “can negatively affect the skeleton, cardiovascular system, thyroid, brain, genitals, reproductive system, digestive system, urinary tract, muscles, eyes, and immune system. GnRH agonists may be harmful to mental health, and may increase the risk of suicide.” Testosterone use in women can result in vaginal and uterine atrophy, sexual dysfunction, and the need for a hysterectomy. Source: **Healthline; National Institutes for Health; As More Transgender Children Seek Medical Care, Families Confront Many Unknowns** (*Reuters*); **They Paused Puberty, but is There a Cost?** (*New York Times*)

Q7 ANSWER: A

True. While “detrans” statistics are difficult to capture, as many gender clinics have no incentive to acknowledge the phenomenon or track the figures, the number of detransitioners **sharing their stories** and **testifying** before state legislatures is growing rapidly. The medical and therapy communities have been trained to encourage and facilitate transitions, but they **do not offer support** throughout the detransition process. A **study** on detransitioners by Dr. Lisa Lippman found “the majority are female (70%) and white

(90%), and over 80% have graduated from college or completed some college coursework...The female study participants were on average 20 years old when they sought care to transition and 24 when they decided to detransition.” Source: **Detrans Voices; Genspect; Individuals Treated for Gender Dysphoria with Medical and/or Surgical Transition Who Subsequently Detransitioned: A Survey of 100 Detransitioners**

Q8 ANSWER: C

European countries are reversing course. The National Academy of Medicine in France recently released a statement cautioning that pediatric gender trans-identification is an “epidemic-like phenomenon” that is socially mediated. Similarly, authorities in Finland and Sweden have recently stated that these treatments are predicated on uncertain science and that “the risks outweigh the benefits at present.” In the U.K., the National Health Service recently **announced plans** to close the world’s largest youth gender clinic after an independent report found that it was “not a safe or viable long-term option” and its model of care leaves young people “at considerable risk” of mental health issues. Sources: **The Daily Wire; Gender Report, French National Academy of Medicine,**

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Swedish National Board of Health and Welfare, EU Agency for Fundamental Rights, Society for Evidence Based Gender Medicine

Q9 ANSWER: C

Sex is a biological trait stamped permanently in every cell of our bodies. Even when people undergo medical treatments such as hormone therapy or surgery to alter the appearance or function of their bodies, they cannot change their DNA. People can ask others to use

different pronouns or otherwise treat them differently based on their gender identity, but biology does not change.

Q10 ANSWER: B

False. Sex and gender are not synonyms and should not be used interchangeably. “Sex” is an objective biological trait determined by chromosomes; “gender” is a word that refers to cultural or attitudinal characteristics (as opposed to physical characteristics of males and females).

Gender Ideology in 60 Seconds

WHAT'S AT STAKE?

Some teachers and school counselors are pushing children down a path of gender transition, often without their parents' knowledge or permission. But "affirming" a child's gender identity and encouraging him or her to pursue "gender-affirming care" carries serious medical risks.

School staff pressure emotionally vulnerable children to transition to a new gender identity.

- Schools tell highly sensitive children, often girls, that, regardless of their struggles with depression, anxiety, obsession rumination, or eating disorders, cutting off their breasts ("top surgery") and a lifetime of **high-risk testosterone injections** ("gender-affirming care") will bring them "trans joy."
- Public school policies punish school **staff**, **students**, and **parents** who do not adhere to this radical belief system.

State and district policies hide information from parents.

- Activist-drafted policies require schools to transition children and then hide their new names, identities,

and pronouns from parents through "**Gender Support Plans**."

- These plans are based on the radical assumption that the only option is an immediate and unquestioning affirmation of a new identity.

Most Americans do not want gender ideology taught in schools. And yet, gender activist-drafted **lessons**, **books**, and **materials** can be found in classrooms across the country.

THE WAY FORWARD

Policymakers should protect vulnerable children and preserve parental rights.

Some states are already taking action:

- Florida's **Parental Rights in Education law** ensures that young students are not exposed to gender ideology lessons.
- The Virginia Department of Education's revised "**model policies**" involve parents if a child requests a name and pronoun change.

Education freedom empowers parents to protect their children from gender ideology.

Parents desperate to protect their children from cult-like indoctrination

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and secretive gender transitions need to leave the public school system, but not all families can afford alternative options. If governors and state legislators are serious about empowering parents to direct the care, upbringing, and education of their own children, they must ensure that education funding follows students to education options chosen by parents.

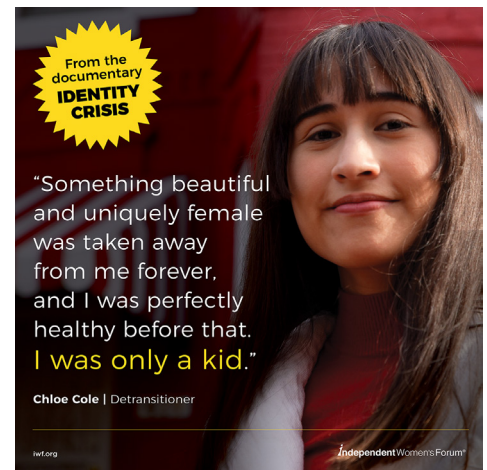
Social Media Kit

Post the below messages, videos, and graphics to social media and make your voice heard.

Tag us so we can RT/Share your post:

- **@IWV** (Twitter)
- **@IndependentWomensVoice** (Facebook)
- **@IndependentWomensVoice** (Instagram)

VISUALS: Include these and other visuals with any Twitter, Facebook or Instagram posts.
Download



Additional Reading

Whistleblower Exits the Unfinished Plane Of Youth Gender 'Transitions'

Makenna McCoy | February 14, 2023

'Detransitioners' Are Being Abandoned By Medical Professionals Who Devastated Their Bodies And Minds

Kelsey Bolar | February 23, 2023

Amanda's Story: Walking Children Back From the Cliff Of Gender Ideology

Kaylee McGhee White | February 6, 2023

Puberty Blockers Were Never Reversible Or Temporary

Kaylee McGhee White | December 13, 2022

Sex is Better Than Gender

Jennifer C. Braceras | September 2022

FACT CHECK: Do Double Mastectomies Make Girls Happier?

Ginny Gentles | September 29, 2022

Public School, Mental Health Professionals Deceive Mom To Secretly Affirm Daughter

California Mom Says Gender Ideology Drove Autistic Daughter Into Mental Breakdown

After Identifying as Trans, a Male Teacher Asked Her 11-Year-Old Daughter to Sleep In the Boy's Cabin

FACT CHECK: Are State Efforts To Protect Emotionally Vulnerable Youth Really Threatening Basic Personal Safety?

Ginny Gentles | June 27, 2022

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**New Study, Experts Debunk Trans Activists' Child Suicide Claims
In Puberty Blocker Debate**

Ginny Gentles | The Ohio Star | June 19, 2022

**States That Promote Giving Kids Puberty Blockers, Trans Hormones
Have Higher Suicide Rates: Study**

Ginny Gentles | The Christian Post | June 17, 2022

Transgender Activists Manipulate Parents With Suicide Threats

Ginny Gentles | The Daily Signal | June 17, 2022

The Three Craziest Moments From Matt Walsh's 'What Is A Woman?'

Kaylee McGhee White | June 13, 2022

LUKAS: Let Girls Be Girls. Protect Them From The Left's Gender Agenda

Carrie Lukas | Daily Caller | June 4, 2022

Pronoun Police Attempt Another Arrest

Jennifer R. George | Daily Caller | May 31, 2022

Gender Ideology Is Everywhere In Public Schools, And Biden Wants It That Way

Kaylee McGhee White | Washington Examiner | Restoring America | April 28, 2022

**Florida Is Following Europe's Lead On Gender-Dysphoria Guidelines: Trans
activists, to the contrary, rely on a clinical consensus for 'gender affirmation'
that does not exist**

Madeleine Kearns | National Review | April 28, 2022

Helena Kerschner Wants To Protect Children From Medical Malpractice

Ginny Gentles | April 20, 2022

Even The Left Is Beginning To Admit It Has Pushed Transgenderism Too Far

Kaylee McGhee White | Washington Examiner | Restoring America | April 18, 2022

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America's Parents Aren't 'Woke' But They Are Awake To Gender Ideology Education Plans

Ginny Gentles | Fox News | April 18, 2022

Florida's So-Called 'Don't Say Gay' Bill Is Not What You've Been Told It Is

Ginny Gentles | RealClear Education | March 4, 2022

How Feminists Gave Up On Females

Carrie Lukas | White Rose Magazine | February 27, 2022

The Erasure Of Women

Erin Hawley | InsideSources | October 27, 2021

The Troubled Girls The Transgender Movement Ignores

Ginny Gentles | National Review | August 3, 2021

Medical Professionals And School Districts Are Denying Girls Access To Mental Health Services

Ginny Gentles | Townhall | July 20, 2021

Erasing 'Sex' Differences From Law Is Bad For Women

Inez Feltscher Stepman | The Detroit News | March 25, 2021