

American College of Pediatricians The Best for Children

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November 23, 2015

Nova Classical Academy 1455 Victoria Way W. St Paul, MN 55102

Attn: Mr. Eric Williams

Dear Mr. Williams:

I write on behalf of a group of parents concerned about policy changes that may be adopted by Nova Classical Academy on behalf of a male kindergarten student who is gender non-conforming. My understanding is that in response to these developments, the administration and several teachers are pushing to teach gender fluidity to children as young as 5 years old. As President of the American College of Pediatricians, I encourage you to enact policies that preserve the optimal well-being for all students. This will require upholding anti-bullying policies while simultaneously ensuring bodily privacy and parental rights for all students.

Prior to 2014, biologically normal children who expressed the belief that they were or desired to be the opposite sex were diagnosed with Gender Identity Disorder (GID). The recently revised 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) published by the American Psychiatric Association (APA), renamed this disorder Gender Dysphoria (GD) in an effort to reduce the stigma often experienced by those afflicted with it. The DSM is used as the recognized standard by mental health professions in the U.S. and some other countries for identifying and describing mental disorders. Although GD may cause great distress for children, when treated early with long-term family therapy, the vast

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majority of cases resolve. According to the DSM-V, up to 98% of boys with this condition will develop a gender identity in accordance with their biological sex by the time they pass through puberty.

This is wonderful news for the children with GD who would otherwise be faced with the decision of using toxic puberty blocking medications as young as age 9, followed by a life-time of toxic and carcinogenic cross-sex hormones and numerous surgeries to pass as the opposite sex. Reinforcing a child's gender confusion, however, can result in making their confused thinking so intractable that the family will believe they have no choice but to hand their child over to a life time of these toxic medications and multiple surgeries.

Clearly, it is of vital importance to avoid gender fluid curricula and policies for the sake of the gender confused student. There are also significant reasons to avoid them for the sake of his or her peers. First and foremost, adopting gender fluid teachings and policies will challenge all students' gender identity development and also cause anxiety regarding privacy protection such as in restrooms and locker rooms.

I have had a number of middle school and high school girls raise this latter concern to me in recent years. One girl, who has a mild degree of special needs, went so far as to tell her local school committee that she would be so anxious if they adopt a "transgender" restroom and locker room policy that she would "have no choice" but to drop out of the district's unified sports league. This is understandable, as psychiatrist Keith Ablow succinctly explains, "[These policies] shak[e] the certain knowledge in boys and girls of whether they can count on not being seen naked by the opposite gender, not to mention whether they are themselves actually the gender they thought they were." He goes on to characterize the promotion of gender fluid ideology as "a powerful, devious and pathological way to weaken [children] by making them question their sense of safety, security and certainty about anything and everything." Finally, in so far as gender fluid policies are ideologically based beliefs about sexuality, they unjustly usurp parents' right to be the primary religious and moral educators of their children.

Some school officials fear they must acquiesce to gender ideology or else risk losing their Title IX funding. This is not necessarily the case. The belief in gender fluidity is not scientific fact; it is rooted in the ideology of three researchers who were also pedophiles: Dr. Alfred Kinsey, Dr. John Money and Dr. Harry Benjamin. The fact of biological sex, in contrast, is rooted in science, and is binary: male and female. *Children and adults who believe they are, or desire to be, the opposite sex do not comprise a third sex;* hence Title IX is not violated when restrooms and private spaces are segregated by biological sex. Additionally, identical twin studies establish that no boy or girl is born "transgender." By definition, all self-

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identified "transgender" individuals who believe they are "trapped in the wrong body" have normal DNA and hormones. If these children, including the student at your school, did have an abnormality in their DNA or hormonal axis, he or she would be diagnosed as having a disorder of sexual differentiation (DSD). This is not the case. Rather, individuals who believe they are the opposite sex are either physically healthy boys with XY chromosomes and a normal endocrine system, or physically healthy girls with XX chromosomes and a normal endocrine system.

To reiterate, no child should be harassed for his or her unique characteristics. Schools should encourage an environment of respectful self-expression for all students, and no group should be singled out for special treatment. Parental involvement should be a school's primary method of resolution for particular cases with programs emphasizing general respectfulness serving to set the tone in the classrooms. It is both in keeping with this spirit of respectfulness and imperative for the optimal health of all students, to avoid all curricula, books and other media, and policies, that promote gender fluid ideology. This includes maintaining restrooms and other private spaces that are segregated according to one's biological sex.

Sincerely,

Michelle A. Cretella, MD

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cc: Board of Directors of Nova Classical Academy