

By Corey Lynn



- A study by Johns Hopkins researchers [shows](#) “gender-affirming” surgeries have increased four-fold from 2000-2014.

- Less than 1% of the population identifies as transgender with 23% of them identifying as heterosexual.

- Only [4.5%](#) of American adults identify as LGBTQ, yet teaching about these different sexualities and sex has already made it into state law in four states and counting, while seeding young children's minds with the idea that switching genders is like choosing between an Almond Joy or a Snickers bar.
- There are over [25,000 adverse reports including 1500 deaths](#) on Lupron products for puberty blockers, endometriosis, and prostate cancer. Manufactured by [AbbVie](#), Lupron Depot-Ped is the number one prescribed puberty blocker, which is being used on children for early stages of gender transitioning, despite never having been approved by the FDA for that purpose.
- Multiple states now [offer](#) "Gender X," a non-binary third gender option on state ID cards, driver's licenses, and birth certificates, by way of using "discrimination" for passing new legislation. This is a global epidemic.

Why are transgender people being glamorized, the idea of switching genders pushed upon children, and it's all prohibited from being discussed or debated? The remaking of a population by creating mass confusion and chaos while dishing out puberty blockers as though it's the next best Botox treatment, has avalanched into dangerous territory. Faster than one could daringly speak the incorrect pronoun, gender clinics are popping up across this country, surgeons are sharpening their scalpels, and money is pouring into this agenda. With the suicide rate of transgenders being nineteen times greater than the general population and a large percent of transitioned transgenders wishing they hadn't done so, one wonders how this destructive agenda got its kickstart and who's really benefiting from it. Certainly not those dealing with gender dysphoria.

Part one will take you through the timeline and origins of the social engineering used to create this industry. Part two will cover the medical engineering behind this, and the danger to children. Part three will get into those funding this agenda and those profiting from it. Part four will show how they have manufactured a reality, who's assisted, and how it must be stopped.

Pivotal Moments & The Kickstart of Exploiting Transgenders to Manufacture an Industry

Though the first gay periodical dates back to 1896 in Berlin, the first pro-gay film was released in 1919, and the first gay bar in America was established in 1936, many transgenders are not gay. This isn't about sexual desires, but rather sexual identity. The timeline below focuses on the transgender movement specifically.

1918

Magnus Hirschfeld, a German physician in Berlin, coined the term transvestite at his Institute for Sexual Science. He was the first to offer gender reassignment surgery. Much of his work was allegedly destroyed in 1933 when the Nazis burned books. In 1922, he performed a castration. He went into exile during Nazi Germany and his Berlin institute was destroyed.

1931

In Berlin, Dora Richter born as Rudolph Richter, was the first known transgender woman to undergo vaginoplasty.

1947

Biologist Dr. Alfred Kinsey founded the Institute for Sex Research at Indiana University, now known as the Kinsey Institute. He received his Ph.D. in biology from Harvard University. In 1948 his first volume of results by the ISR research team was published, called 'Sexual Behavior in the Human Male,' which became number two on the New York Times bestseller's list.

1952 (Hollywood glamour kickstart phase 1: setting the stage for the pivotal push)

Christine Jorgensen was the first American to undergo a sex change operation, which was promptly featured in American national media in both The New York Times and the New York Daily News. She was glamorized and turned into an instant celebrity, who spent her life advocating for the transgender community, with Hollywood's help. The operations were performed in Denmark, and vaginoplasty done in New York with the oversight of Harry Benjamin. (more on this below)

1954 (more of setting the stage)

The first known British transgender woman, Roberta Cowell, began making headlines around the world.

1962 (the push on children)

The first gender identity research clinic opened at UCLA. They worked with children and adults on conversion therapy but did not perform surgeries.

1963

Reed Erickson became a patient of Harry Benjamin to transition into an American transgender man, then in 1964 created a foundation to donate millions to promote transgender and gay

equality, between 1964 and 1984. His foundation helped fund the creation of the Harry Benjamin Foundation and \$72,000 funded Johns Hopkins Gender Identity Clinic between 1967 – 1973.

1965 (first US clinic to perform surgeries)

John Money and Claude Migeon quietly opened the Johns Hopkins Gender Identity Clinic, the first sex reassignment surgery clinic in America, which was later shut down in 1979 over controversy because some of the psychiatrists believed that the patients were not better off after surgery. Though, somewhere along the way, they [began](#) doing surgeries again under the name 'Sex and Gender Clinic.'

1966

Harry Benjamin published a book titled 'The Transsexual Phenomenon.'

1969 (setting the stage for a disorder in children)

Marshall and Tanner [published](#) the results of their study of 192 white British girls. They [claimed](#) that the average age of thelarche (onset of secondary breast development, whereas the initial growth occurs in fetal development) was eleven years and they defined "precocious puberty" in girls if this began before age eight. For boys, it's if pubertal development occurs before age 9.

1969

Psychiatrist from New York, Richard Green and John Money, an assistant professor at Johns Hopkins, co-edited 'Transsexualism and Sex Reassignment,' which Johns Hopkins Press published. (more on Green and Money below)

1969 (setting the stage of victimhood as a focal point for the future)

LGBTQ people rioted after police raided the Stonewall Inn in Greenwich Village in New York City. The Stonewall Inn was a gay bar that transvestites, transgenders, hustlers, and even homeless youth went to.

1970 (building the discrimination wall)

The first gay and lesbian pride parade in the world kicked off in Chicago, followed by a march in New York and parade in Los Angeles, priming the public for accepting what was to come down the road, while building up a case of discrimination along the way.

1970

An LGBTQ class called 'Social Movement: Gay Liberation' was taught at USC.

1970s – 1980s

Transgender advocate and Hollywood celebrity, Christine Jorgensen, traveled the country to speak at university campuses, advocating for transgenders.

1971 (the medical push on children)

[Discovery](#) and synthesis of gonadotropin-releasing hormone (GnRH) [by two research teams](#),

Andrew Shally of the New Orleans Institute Laboratory, and [Roger Guillemin](#) from the Salk Institute in California. They devised analogs that led to a Nobel Prize in 1977. **This is what is used for puberty blockers, under the guise of a “disorder,” so it could be used for transgender transitioning in the future.**

1971

The University of Michigan established the first LGBT office.

1971

Richard Green was the founding 30-year-editor of ‘Archives of Sexual Behavior.’

1975

The Gender Dysphoria Clinic at Queen Victoria Hospital, Melbourne was established by Dr. Trudy Kennedy and Dr. Herbert Bower. Then, in 1979 the Victorian Transsexual Coalition and the Victorian Transsexual Association were formed, creating Australia's first transgender rights and advocacy organizations. (The industry was simultaneously being built across the globe. This is just one example of many.)

1976 (pushing it into the education system)

First course in LGBT studies were taught at UCLA.

1979

World Professional Association for Transgender Health (WPATH), previously named the Harry Benjamin International Gender Dysphoria Association, was founded by Paul A. Walker and headquartered in East Dundee, IL.

1979

The BBC put out a documentary about Julia Grant, a transgender woman, titled ‘A Change of Sex.’

1980 (health insurance push = more \$)

The American Psychiatric Association’s (APA) third Diagnostic and Statistical Manual (DSM-3) added “gender identity disorder” which helped transgender individuals to get access to healthcare.

1989 (creating medicine for a false need in children)

Patent for Supprelin was filed in May by The Salk Institute, which is a histrelin acetate injectable puberty blocker for children with “central precocious puberty.”

1991

Supprelin was [approved](#) by the FDA on December 24th as the first product of its kind. However, Johnson & Johnson’s were the pharmaceutical [company](#) selling it.

1993 (the political push)

Roberta Achtenberg became the first openly gay or lesbian person to be nominated by the president and confirmed by the U.S. Senate. She was appointed by President Bill Clinton. Though not transgender, this is included because both the Clintons and Obamas were cohorts in pushing the agenda full speed ahead.

1997 (Hollywood glamour kickstart phase 2)

Ellen DeGeneres came out on television as being gay. Though [DeGeneres](#) is not transgender, she became the Hollywood face of the gay community to push the LGBTQ agendas. It all connects.

1998 (discrimination push for future legislation)

The murder of transgender woman Rita Hester, lead to the 'International Transgender Day of Remembrance,' which began in 1999.

2000

Hillary Clinton became the first First Lady to march in a LGBT pride parade.

2002 (the legislation push)

The Transgender Law Center was founded in California to fight for discrimination against transgender people, and alter laws and opinions.

2003

The National Center for Transgender Equality was founded in Washington D.C. by transgender activist Mara Keisling, focusing on policy advocacy and media activism.

2007 (the push for children to change genders, as young as 3-years-old)

The first youth gender clinic opened at Boston Children's Hospital. They are a comprehensive general transitioning clinic for 3 to 25-year-olds. (more on this below)

2007

Supprelin-(R)-LA was [approved](#) by the FDA. Rather than being an injectable puberty blocker like their method designed in 1989, this is a subcutaneous implant that is inserted into the upper arm for a continuous release over a 12 month period.

2008 (backup support to alter children)

The Endocrine Society, with members in more than 100 countries, "approved" puberty suppressors as a treatment for transgender adolescents as young as 12 years old.

2011 (more backup support to alter children)

The World Professional Association for Transgender Health (WPATH) issued "standards of care" for the treatment of patients with gender dysphoria, including puberty suppression. WPATH was originally called the Henry Benjamin International Gender Dysphoria Association.

2011 (the push of laws to include LGBT in school's for children)

California passed a law requiring schools to teach LGBT history, and began distributing LGBT-inclusive textbooks for K-8 in 2017.

2012

The Janus Information Facility, University of Texas Medical Branch, published 'Information For The Family of The Transsexual and of Children with Gender Identity Disturbances,' funded by The Erickson Educational Foundation which closed in 1977. This [booklet](#) was digitized and made available in 2012.

2012

The BBC published an [article](#) on Jorgensen in 2012, stating "George Jorgensen, a quiet New Yorker, shocked a nation by returning from a trip to Denmark transformed into the glamorous Christine."

2013

President Barack Obama, the first sitting president who was okay with the same sex marriage, brought up gay rights issues in his inaugural address.

2013

The American Psychiatric Association's (APA) fifth Diagnostic and Statistical Manual (DSM-5) changed the "gender identity disorder" diagnosis to "gender dysphoria."

2014

Government appeals board [ruled](#) that Medicare must cover surgery for gender transitions, which overturned a policy dating back to the 1980s. WPATH [standards of care](#) studies on the benefits of sex reassignment therapy played a big role in this. It doesn't mean all sex reassignment surgeries will be paid for by Medicare, but it lifted the ban so they can submit documentation for coverage.

2015

President Barack Obama was the first president to state the words "gender identity," and did so while giving a speech about foster care when declaring May "National Foster Care Month." That same year, he appointed transgender activist Raffi Freedman-Gurspan, who served as the first openly transgender appointee to work inside the White House as an outreach and recruitment director in the presidential personnel office.

2015

Roby Mook became the first openly gay manager of a presidential campaign, for Hillary Clinton.

2015

In April, Olympic gold medalist Bruce Jenner came out as a trans woman, changing his name to Caitlyn. The same year, after this announcement, Jenner starred in a reality television series called “I am Cait,” which was all about his gender transition. He underwent the reassignment surgery in 2017.

2015 (decades of pushing it, now fully glamorized)

IMDB put out an [article](#) titled ‘70 Celebrities Who Are Actually Transgender People.’

2016

Barack Obama gave Ellen DeGeneres the Medal of Freedom award, while Bill and Melinda Gates sat behind them.



2016

Hillary Clinton wrote an op-ed for Philadelphia Gay News, which was the first time a major-party presidential candidate wrote an op-ed in an LGBT newspaper.

2016

President Barack Obama designated Stonewall Inn as a national monument, again focusing on discrimination. He tweeted about it in 2019.



Barack Obama ✓
@BarackObama

Follow



50 years ago, history was written at the Stonewall Inn when New York's LGBT community stood up, spoke out, and started a movement. In 2016 I was proud to designate it as a national monument—a reminder the arc of our history is an arc of progress as long as we keep pushing for it.



12:56 PM - 28 Jun 2019

2018

Angela Ponce competed in the Miss Universe contest as the first transgender to compete, and it made big [headlines](#) worldwide across every major news source.

2019

The Australian Psychological Society, representing 24,000 professionals, [says](#) the disapproval of both parents for a child to have reassignment surgery, should not inhibit a child under 16 from consenting to procedures and that hospitals should have the right to petition courts and change the parents minds.

2019

The Hill [reported](#) in October, “a federal judge overturned ObamaCare protections for transgender patients, ruling that a 2016 policy violates the religious freedom of Christian providers. The regulation prohibited insurers and providers who receive federal money from denying treatment or coverage to anyone based on sex, gender identity or termination of pregnancy. It also required doctors and hospitals to provide “medically necessary” services to transgender individuals as long as those services were the same ones provided to other patients.”

2019

CNN ran two LGBTQ Town Hall's for democratic presidential candidates to pander to them on live TV.

2019

Four states have already passed legislation [requiring](#) all schools to teach LGBT history in schools. California was the first state in 2011 but didn't approve of its first LGBT-inclusive textbooks for K-8 until 2017, followed by Colorado and New Jersey in 2019. Illinois will begin incorporating it into their schools in 2020.

The Social Engineering Origins

After reviewing the timeline, it is easy to see how the making of this industry was manufactured, glorified, and glamorized. A lot of work has gone into building up this industry, considering less than 1% of the population identifies as transgender. Much like the [climate hoax](#) that took decades to build upon, engineered by many of the same people and organizations, this agenda has moved past its infancy stage and is full steam ahead. I say "industry" because that is what they have built, and are pursuing with great determination. There are already over fifty youth gender clinics in this country, and that's just for youth!

Role models were put in place, turned into instant celebrities, and the media has done its job well. The medical industry created the illusion they needed in order to target children for the long game. Politicians, Hollywood, the media, and lawmakers all played their roles. But the health industry, from the scientists to the doctors and surgeons, pharmaceutical companies, and the organizations making the false claims, are by far the worst culprits of all in the manufacturing of this industry. The universities had a hand in all of it, and the education system for youth is now greatly at risk.

Meanwhile, legitimate transgender people are suffering, trying to work through difficulties, and they are being exploited for the benefit of the greedy. And whereas controlling society, creating cognitive dissonance, and targeting children is par for the course for their overall game, this is equally, if not more so, about the money. There is big money in this, and gender clinics across the country are lining up doctors for their next fat paychecks, while pharmaceutical companies are raking it in. It's appalling!

CITY
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EX-GI BECOMES BLONDE BEAUTY

Operations Transform Bronx Youth

—Story on Page 3



(NEWS Data-Computer 1955 by NEWS Syndicate Co., Inc.)

A World of a Difference

George W. Jorgenson Jr., son of a Bronx carpenter, served in the Army [A] for two years and was given honorable discharge in 1946. Now George is no more. After six operations, Jorgenson's sex has been changed and today she is a striking woman [←], working as a photographer in Denmark. Parents were informed of the big change in a letter Christine (that's her new name) sent to them recently.

—Story on page 3

Though there were a few others, one of the greatest spotlights was placed on [George William Jorgensen Jr.](#), who was born in New York and drafted into the Army at age 19 during World War II. George was given an honorable discharge in 1946. When he returned from the Army, he set off to Denmark to undergo a sex change operation, making him the first American to do so. Jorgensen began hormone replacement therapy under Dr. Hamburger's direction, a Danish endocrinologist in Denmark. He was given special permission from the Danish Minister of Justice to undergo several operations, and in 1951 had an orchiectomy, followed up by a penectomy in 1952. When she returned to the United States as Christine Jorgensen, a vaginoplasty was performed on her under the direction of Dr. Angelo, with Harry Benjamin as a medical advisor.

When she stepped off the plane in New York, she was turned into an instant celebrity, and used her platform to advocate for the transgender community. By the 1970s she was touring university campuses. What media was the driving force the moment she returned from Denmark? The New York Daily News and The New York Times. Headlines are as important as the media source putting them out. The New York Times titled their [piece](#) 'Bronx Boy is Now A Girl: Danish Treatments Change Sex of Former Army Clerk.' The New York Daily News titled theirs 'Ex-GI Becomes Blonde Beauty,' with a subheading of 'A World of a Difference.' It's interesting that both included the fact she had been in the Army in their headlines.



Jorgensen had gone to Dr. Christian Hamburger in Denmark to begin her process, because in 1952, there wasn't much in the way of healthcare for transgenders in the U.S. However, that quickly changed, once the spotlight was amplified. After all of the media attention, they allege other transgender Americans began writing to Dr. Hamburger for treatment, and he referred them to none other than Harry Benjamin, who of course had practices in New York City and San Francisco.

Prior to Jorgensen being drafted into the Army, she did a short 2-year stint at RKO studios, which was founded in 1928 and taken over by Howard Hughes in 1948. Over the years, Jorgensen was a socialite, pop singer, cabaret performer, photographer, filmmaker, and of course an advocate for the transgender community. Hollywood embraced her, she was invited to all of the big parties, and film contracts were streaming in. They built her into the perfect role model to glamorize the beginning stages of their new industry.

The BBC published an [article](#) on Jorgensen in 2012, stating "George Jorgensen, a quiet New Yorker, shocked a nation by returning from a trip to Denmark transformed into the glamorous Christine." A Danish doctor, Tiet Ritzau, who made a documentary about Jorgensen in the 1980s, said that she felt she was "a woman who happened to be in a man's body." And there it was – glamour, and being trapped in the wrong body – two of the most propagated and misleading tactics for the transgender community today. They then pushed a story that Jorgensen struggled with relationships because her birth certificate stated she was a man. What are we seeing right now? Gender X being added to birth certificates, state ID cards, and driver's licenses, and in some states transgenders are allowed to change their gender on their birth certificate to male or female.

Do you think it's a coincidence that George (Christine) Jorgensen read and learned about doctors doing hormone therapy while he was in the Army, received an honorable discharge, lived in New York, was able to get high-level permission for surgery in Denmark, only to step off a plane in New York to be made an instant celebrity pushed by Hollywood? Do you think it was coincidence that the universities welcomed her with open arms to advocate for transgenders, documentaries were made, and it was totally glamorized? These are the industries who create the narratives, push the agendas, and try to control society. Jorgensen died of cancer in 1989, at the age of 62.

Jorgensen's New York Doctor, Harry Benjamin, played a vital role in the making of this industry, along with others. Benjamin was born in Berlin in 1885, knew Magnus Hirschfeld and had spent time with him at his Berlin institute before Hirschfeld went into exile and his institute was destroyed. A few years after receiving his doctorate in 1912, he moved to New York. He became very interested in sexology in 1948 and treated a child with estrogen, despite the psychiatrists not agreeing with this treatment, and helped arrange for the mother and child to go to Germany where surgery could be performed. Benjamin went on to treat hundreds of patients, published papers, lectured extensively to professional audiences, published a book in 1966 called 'The Transsexual Phenomenon,' and in 1979 the Harry Benjamin International Gender Dysphoria Association was formed.



The Harry Benjamin International Gender Dysphoria Association is a group of psychologists and therapists who devised the “Standards of Care” for the treatment of gender identity disorder. Reed Erickson, a transgender patient of Benjamins, helped fund this association, as well as educational materials, medical conferences, and Johns Hopkins gender clinic. Paul Allen Walker was the founding president. He also ran the Janus Information Facility at the University of Texas and the gender clinic. In 1979 it changed its name to the World Professional Association for Transgender Health, and it has been instrumental with assisting in changing legislation.

Benjamin was introduced to Leo H. Green by John Money from Johns Hopkins University. Green was born in Brooklyn, New York and earned his MD from Johns Hopkins University School of Medicine in 1961, and J.D. from Yale Law School in 1987. He met Money during his medical studies at Johns Hopkins, and collaborated with him on boys showing cross-gender behavior. Green acknowledges that Benjamin further honed his career.

John Money, Green’s co-editor of ‘Transsexualism and Sex Reassignment,’ published by Johns Hopkins Press, was born in New Zealand and immigrated to the United States where he earned a Ph.D. from Harvard University in 1952. **He was a psychologist and sexologist, and served as a professor of pediatrics and medical psychology at Johns Hopkins University from 1951 until his death in 2006. He established the Johns Hopkins Gender Identity Clinic in 1965 with Claude Migeon.** They began performing reassignment surgery in 1966, though they kept this very hush hush, and it was shut down in 1979, only to reopen years later.



Money was the creator of many definitions used throughout history, beginning in the 1950s. He established a definition of gender, came up with “gender role,” and in a 1955 paper suggested that gender was not only on the basis of one’s genitalia but also on the basis of somatic and behavioral criteria that go beyond genital differences. Money also asserted that “affectional pedophilia” was about love and not sex. He believed affectional pedophilia is caused by a surplus of parental love that became erotic. A famous and disturbing quote from Money,

“If I were to see the case of a boy aged ten or eleven who’s intensely erotically attracted toward a man in his twenties or thirties, if the relationship is totally mutual, and the bonding is genuinely totally mutual, then I would not call it pathological in any way.”

Money is criticized for a particular 1966 case involving the involuntary sex reassignment of David Reimer at the age of 22 months. After a botched circumcision, his testicles were surgically removed. The parents agreed to hormone treatment, raising him as a girl, and naming him Brenda, but wouldn’t agree to an artificial vagina. Follow up appointments entailed Money

forcing Reimer and Reimer's twin brother Brian to rehearse sexual acts. He had his brother Brian press his crotch against David's (Brenda) buttocks, and also had them strip for genital inspections, whereby he took photos. For years Money reported that the sex reassignment was a success, until both brothers committed suicide. In 1997, seven years prior to his suicide, David (Brenda) told his story. It caught a lot of attention and intersex activists said that his unreported failure led to the surgical reassignment of thousands of infants as a matter of policy.

This is just a glimpse. It is a small handful of some of the folks who spearheaded this industry, which has escalated to dangerous levels in recent years. By glamorizing it, they have dismissed the trauma that those identifying as transgender suffer from. They have suggested that a person can be born in the wrong body as though they have a genetic defect, when that isn't the case. A [study](#) by the University of Rome proves this. Rather than addressing and helping them work through their issues, they were, and are, quick to insist that transitioning and reassignment surgery will make you "feel whole," when it couldn't be further from the truth. Forty percent of transgenders attempt suicide, more of whom felt this despair after surgery. So what exactly is the health industry selling?

I imagine most will be as stunned as I was, after reading part 2, where I get into the medical engineering origins that have long been targeting children and have recently upped their game. After all, to build an industry, you have to target the masses to keep a steady flow of income, and confusing and conditioning the minds of children has long been their game. Part 2 is by far the most critical chapter of this report.

[illegible]

Puberty blockers are being used by physicians around the globe to transition children, which can lead to chemical castration and sterilization as well as a myriad of other side effects. This is the precursor to moving toward gender reassignment surgery. Where did these puberty blockers originate from, are they FDA licensed, and how did science play their role in this?

"Many people are doing what amounts to an experiment on these young people without telling them it's an experiment. You need evidence for that and this is a very serious treatment. It is comparable to doing frontal lobotomies."

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Medical Engineering Origins

In 1969, Marshall and Tanner [published](#) the results of their study of 192 white British girls. They [claimed](#) that the average age of thelarche (onset of secondary breast development, whereas the initial growth occurs in fetal development) was eleven years and they defined “**precocious puberty**” in girls if this began before age eight. For boys, it’s if pubertal development occurs before age 9. What does this effect? Primarily, ones height. They could have a growth spurt to grow taller more quickly, then it stops, so when full grown they may be on the shorter side. It certainly wouldn’t put them out of the “norm,” but they’ve programmed a society based on vanity, so being slightly shorter is unacceptable. With girls, they may begin to develop breasts a few years earlier than their friends. With boys, their penis may begin to grow slightly faster than the average boy. In all cases, NONE of this has a negative health impact on the child. It doesn’t physically harm them, their organs, their bones, or their tissue. It comes down to vanity. Being as 1 in 5,000 – 10,000 children allegedly have “central precocious puberty,” it would seem that society would look upon this as “normal,” especially considering there are a lot of fairly short people in this world. Who really cares? They do, because they can monopolize on it, by suggesting it is a disorder. What happened next?

Immediately, scientists set out to find the genes to prevent this from happening. Miraculously, just two years later, in 1971, there was a [discovery](#) and synthesis of gonadotropin-releasing hormone (GnRH) [by two research teams](#), Andrew Shally of the New Orleans Institute Laboratory, and [Roger Guillemin](#) from the Salk Institute in California. They devised analogs that led to a Nobel Prize in 1977. **This is what is used for puberty blockers, under the guise of a “disorder,” so it could be used for transgender transitioning in the future.**

Sound Crazy? This is How The Mayo Clinic [Depicts](#) “Central Precocious Puberty:”

Precocious puberty signs and symptoms include development of the following before age 8 in girls and before age 9 in boys.

Symptoms

- Breast growth and first period in girls
- Enlarged testicles and penis, facial hair and deepening voice in boys
- Pubic or underarm hair
- Rapid growth
- Acne
- Adult body odor

When to see a doctor: Make an appointment with your child's doctor for an evaluation if your child has any of the signs or symptoms of precocious puberty.

There is “central precocious puberty” and “peripheral precocious puberty.” The difference is, if it’s central, puberty starts too soon, but the majority of children have no medical problem and no identifiable reason for early puberty, whereas with peripheral, it is caused by estrogen or testosterone in the child’s body. Of course, they toss in extremely rare medical conditions that are separate issues that require treatment of their own, and could possibly be the culprit for why a child may be displaying signs of “precocious puberty.” They list horrifying, scary “rare causes” such as; a tumor in the brain or spinal cord, radiation to the brain, injury to the brain or spinal cord, exposure to external estrogen or testosterone, McCune-Albright syndrome, and ovarian cysts or tumors, which would make any parent want to rush their child to the hospital upon seeing an unusual growth of acne on their face, right?

Here is what they indicate to be the “complications” if a child has this “problem.”

Complications

- **Short height.** Children with precocious puberty may grow quickly at first and be tall, compared with their peers. But, because their bones mature more quickly than normal, they often stop growing earlier than usual. This can cause them to be shorter than average as adults. Early treatment of precocious puberty, especially when it occurs in very young children, can help them grow taller than they would without treatment.
- **Social and emotional problems.** Girls and boys who begin puberty long before their peers may be extremely self-conscious about the changes occurring in their bodies. This may affect self-esteem and increase the risk of depression or substance abuse.

So in short (no pun intended), all of this hoopla over CPP was to make parents feel that their children would feel inferior unless the parents stepped in and got treatment for this “problem.” ABSURD! Instead of letting the body take it’s natural course, they are suggesting that parents are incapable of raising their children with self-esteem, and this is because the health industry and agenda pushers have done everything they can to break down the family unit. They want you reliant on them. The health industry has long created labels for alleged problems and disorders to line their pockets, while shaming society into keeping quiet about their newly-found disorder that makes them a “broken” person and a “victim.” Instead of everyone simply accepting we are all different, with varying heights, color, and features, they have programmed society to feel inferior so they can come to the rescue with their “cures.”

How much do these potential future complications cost to diagnose? They would like to do a physical exam, hormone tests, blood samples, possible thyroid testing, an MRI, x-rays and ultrasounds. Once they assess that your child has CPP, they want to do a monthly injection into their muscle, using puberty blockers such as Lupron Depot-Ped (approved since 1993) or Trelstar (just [approved](#) in 2017) until your child reaches the normal age of puberty.

How much do these treatments cost? A lot! The monthly injections run over \$1500 a month. Mind you, puberty blockers for CPP is often covered by insurance, only they are now being used on children for transitioning purposes, which may or may not be approved by insurance. If a parent prefers their child to get the Supprelin LA subcutaneous implant that is surgically placed under their skin, for a 12-month period, that could run them as much as \$39,000 according to Drugs.com.

What are the side effects to these puberty blockers? Let's look at Lupron Depot-Ped as an example, since they [claim](#) to be the number one prescribed treatment for CPP. In 2011, they [listed](#) few side effects on their label, approved by the FDA.

----- CONTRAINDICATIONS-----

- Hypersensitivity reactions. (4)
- Pregnancy. (4, 8.1)

----- WARNINGS AND PRECAUTIONS-----

- An increase in clinical signs and symptoms of puberty may be observed during the first 2-4 weeks of therapy since gonadotropins and sex steroids rise above baseline because of the initial stimulatory effect of the drug before being suppressed. (5.1)
- Convulsions have been observed in patients with or without a history of seizures, epilepsy, cerebrovascular disorders, central nervous system anomalies or tumors, and in patients on concomitant medications that have been associated with convulsions. (5.2)

-----ADVERSE REACTIONS-----

- Adverse events related to suppression of endogenous sex steroid secretion may occur. (6.1, 6.2)

To report SUSPECTED ADVERSE REACTIONS, contact Abbott Laboratories at 1-800-633-9110 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch

----- USE IN SPECIFIC POPULATIONS-----

- The use of LUPRON DEPOT-PED in children under 2 years is not recommended. (8.4)

See 17 for PATIENT COUNSELING INFORMATION

Revised: 08/2011

In 2016, the FDA required changes to their warning labels.



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA 020263/S-042

SUPPLEMENT APPROVAL

AbbVie Endocrine Inc.
Attention: Patti Neall
Associate Director, Regulatory Affairs
1 N. Waukegan Road
Dept. PA77/Bldg. AP30
North Chicago, IL 60064

Dear Ms. Neall:

Please refer to your supplemental New Drug Application (sNDA) dated and received November 17, 2016, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Lupron Depot PED (leuprolide acetate) depot suspension/injection.

We also refer to our letters dated October 28 and December 21, 2016, notifying you, under Section 505(o)(4) of the FDCA, of new safety information that we believe should be included in the labeling for GnRH agonists indicated to treat central precocious puberty. This information pertains to the risks of seizures and serious psychiatric adverse events in this patient population.

This supplemental new drug application provides for revisions to the labeling for Lupron Depot PED, consistent with our October 28 and December 21, 2016, letters and the labeling comments sent to you on February 14, March 7, March 23, and April 12, 2017.

APPROVAL & LABELING

We have completed our review of this supplemental application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed, agreed-upon labeling text and with the minor editorial revisions listed below and indicated in the enclosed labeling.

- Revision dates updated to reflect the date of approval of this supplement.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content

Reference ID: 4099980

Lupron wasn't the only medication that was required to update their warning labels due to **seizures and serious psychiatric adverse events**. Supprelin and Synarel were also required to make these updates. In this [109-page approval package](#) for Lupron Depot PED, they repeatedly state that the medicine is for children with "central precocious puberty." The FDA and Department of Health and Human Services also state this. **Nowhere in any of their documentation or FDA approvals does it state this medicine can be used in children to block their puberty for purposes of transitioning their gender.** Even though "central precocious puberty" is a manufactured "disorder," it still limits the use to those purposes. With the dangers these medications present, why isn't the FDA stepping in? Better yet, why isn't the Bureau of Consumer Protection under the FTC knocking down doors of these clinics, hospitals, and universities for false advertising and marketing, and clear misuse of these products? I've seen them knock down doors for a fraction of the manipulation game these folks are running. Yet, they are silent.

What is LUPRON DEPOT-PED?

- LUPRON DEPOT-PED is an injectable prescription gonadotropin releasing hormone (GnRH) medicine used for the treatment of children with central precocious puberty (CPP).
- It is not known if LUPRON DEPOT-PED is safe and effective in children under 2 years of age.

The full [breakdown](#) of warnings and precautions include:

- Psychiatric events of emotional lability, crying, irritability, impatience, anger, and aggression.
- Convulsions in patients with and without a history of seizures, epilepsy, cerebrovascular disorders, central nervous system anomalies or tumors.
- Injection site reactions and pain including abscess, headache, emotional lability, and hot flushes/sweating.
- Early phase of therapy can cause an increase in clinical signs and symptoms of puberty.
- In less than 2% of patients receiving treatment, adverse reactions of a broad scope of symptoms were reported, either effecting the respiratory system, cardiovascular, endocrine, musculoskeletal, skin and appendages, and urogenital system.

According to a 2019 investigation by ABC's KTNV 13 Las Vegas, there are over [25,000 adverse reports including 1500 deaths](#) on Lupron products for puberty blockers, endometriosis, and prostate cancer.

The ultimate question – as a parent, what do you feel is more dangerous? The "risk" of your child going through puberty a little earlier than the other children, potentially resulting in feeling self-conscious and possibly being shorter in height, or the "risks" listed above?

According to Drs. Paul Hruz, Michael Laidlaw and Quentin Van Meter, not only are they injecting Lupron into children who suffer from gender dysphoria, which has never been approved by the FDA for this use, there are no peer-reviewed studies done on the drug's long-term physical and psychological side effects on children. It's no wonder suicidal thoughts and actions are so high in the transgender community. These drugs not only come with serious side effects with [lasting](#) health problems, they can also lead to sterilization.

Despite this, physicians have been pushing for this for quite some time. In 1983, [Walt Heyer](#), who was a transgender woman for eight years, who later detransitioned after realizing that the sex change didn't solve his underlying issues, had sought out the top gender identity therapist of his time only to be told that he needed to go through gender reassignment during his first appointment, and was given a prescription for hormones at his second appointment. This is incredibly telling, when the top doctors, all the way back in the 80s, were pushing for this, without even attempting to address traumas, unresolved issues, and why it is they may be suffering from gender dysphoria. This also aligns with the agenda timeline documented in [part one](#) of this report. Heyer was an adult at that time, whereas now days, they are pushing this onto children as well.

Dr. Paul McHugh, a distinguished professor of psychiatry and behavioral sciences at Johns Hopkins University, recently [told](#) The College Fix he believes transgender people are being experimented on because the doctors treating their patients with hormones “don't have evidence that the treatment will be the right one.” He went on to state:

“Many people are doing what amounts to an experiment on these young people without telling them it's an experiment. You need evidence for that and this is a very serious treatment. It is comparable to doing frontal lobotomies.

I think their mental problems, often depression, discouragement are the things that need treatment. I'm not positive about this. It's a hypothesis, but it is a very plausible hypothesis, and it would explain why many of the people who go on to have treatment of their body discover they are just as depressed, discouraged and live just as problematic lives as they did before because they did not address the primary problem.

They're going to be in the hands of doctors for the rest of their lives, many of them are going to be sterilized not able to have their own children, and many will regret this. Can you imagine having a life where you need to seek doctors all the time, for everything, just to live? Getting your hormones checked, getting everything checked. That is something doctors should like to spare people of.

I believe it will be something like how we think of eugenics now. We will come to regret it when we discover how many of the young people that were injured regret it themselves.”

Johns Hopkins was at the forefront of this manufactured industry, and for this professor to come forward and speak the truth against his own community pushing this agenda, is powerful. If only more doctors would come forward, we could turn the tide and stop the insanity. And, he is absolutely correct about eugenics. Sadly, eugenics never ceased, it merely changed terminology, and this is precisely what is taking place in this case. You can read an extensive 6-part report on [eugenics](#) right here on Corey's Digs.

A Quick Timeline Recap & Other Key Points:

1969 - They decided children had a “disorder” and coined it “precocious puberty.”

1971 - Scientist miraculously found the solution for a cure.

In **1984**, none other than the Washington Post came out with one of the most fear mongering [stories](#) of all about an “affliction” to the young through an “outbreak” in Puerto Rico, where one child began menstruating at 17 months and a “9-year old boy’s estrogen levels exceeded that of an ovulating woman.” **They estimated 3,000 children were “affected” by precocious puberty**, but that in the United States and other countries, “this condition is rare.” Fast forward 35 years and they now claim that 1 in 5,000 to 10,000 children have CPP, while also stating it is rare and effects less than 1% of the U.S. population.

Puerto Rican doctors suspected a possible estrogen in the food chain causing this or an environmental contaminant. Imagine that. The director of pediatrics at Hospital De Diego in San Juan expressed that he had encountered the condition in the mid 1970s and had seen 778 affected children, most in between 1982 and 1984. After investigations, they determined there were high levels of estrogen in the poultry, only later to disprove their own findings by further chemical tests. An endocrinologist in Philadelphia ran tests and did find high levels of estrogen in the poultry. The USDA ended up sampling poultry, beef and eggs only to find they were not contaminated with estrogen, so they said. It then went to the CDC, where they ran statistical analysis on 130 cases of females that had been affected. Yet, after two years they had no conclusions. Of course in this story, they portrayed the stress of a mother whose daughter had cysts and enlarged breast tissue, which is its own separate issue that they attribute as a potential cause of CPP.

That was a big, bold push to bring awareness to this newly discovered “precocious puberty disorder.”

1989 - Patent for Supprelin was filed in May by The Salk Institute, which is a histrelin acetate injectable puberty blocker for children with “central precocious puberty.”

1991 - Supprelin was [approved](#) by the FDA on December 24th as the first product of its kind. However, Johnson & Johnson's were the pharmaceutical [company](#) selling it.

Comments and petitions should be submitted to the Dockets Management Branch (address above) in three copies (except that individuals may submit single copies) and identified with the docket number found in brackets in the heading of this document. Comments and petitions may be seen in the Dockets Management Branch between 9 a.m. and 4 p.m., Monday through Friday.

Dated: May 27, 1992.

Stuart L. Nightingale,

Associate Commissioner for Health Affairs.

[FR Doc. 92-12845 Filed 6-1-92; 8:45 a.m.]

BILLING CODE 4160-01-F

[Docket No. 92E-0133]

Determination of Regulatory Review Period for Purposes of Patent Extension; Supprelin®

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) has determined the regulatory review period for Supprelin® and is publishing this notice of that determination as required by law. FDA has made the determination because of the submission of an application to the Commissioner of Patents and Trademarks, Department of Commerce, for the extension of a patent which claims that human drug product.

ADDRESSES: Written comments and petitions should be directed to the Dockets Management Branch (HFA-305), Food and Drug Administration, Rm. 1-23, 12420 Parklawn Dr., Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: John S. Ensign, Office of Health Affairs (HFY-20), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-443-1382.

SUPPLEMENTARY INFORMATION: The Drug Price Competition and Patent Term Restoration Act of 1984 (Pub. L. 98-417) and the Generic Animal Drug and Patent Term Restoration Act (Pub. L. 100-670) generally provide that a patent may be extended for a period of up to 5 years so long as the patented item (human drug product, animal drug product, medical device, food additive, or color additive) was subject to regulatory review by

FDA before the item was marketed. Under these acts, a product's regulatory review period forms the basis for determining the amount of extension an applicant may receive.

A regulatory review period consists of two periods of time: A testing phase and an approval phase. For human drug products, the testing phase begins when the exemption to permit the clinical investigations of the drug becomes effective and runs until the approval phase begins. The approval phase starts with the initial submission of an application to market the human drug product and continues until FDA grants permission to market the drug product. Although only a portion of a regulatory review period may count toward the actual amount of extension that the Commissioner of Patents and Trademarks may award (for example, half the testing phase must be subtracted as well as any time that may have occurred before the patent was issued), FDA's determination of the length of a regulatory review period for a human drug product will include all of the testing phase and approval phase as specified in 35 U.S.C. 156(g)(1)(B).

FDA recently approved for marketing the human drug product Supprelin®. Supprelin® (histrelin acetate) is indicated for the control of the biochemical and clinical manifestations of central precocious puberty. Subsequent to this approval, the Patent and Trademark Office received a patent term restoration application for Supprelin® (U.S. Patent No. 4,244,946) from The Salk Institute for Biological Studies, and the Patent and Trademark Office requested FDA's assistance in determining this patent's eligibility for patent term restoration. FDA, in a letter dated March 25, 1992, advised the Patent and Trademark Office that this human drug product had undergone a regulatory review period and that the approval of Supprelin® represented the first commercial marketing of the product. Shortly thereafter, the Patent and Trademark Office requested that FDA determine the product's regulatory review period.

FDA has determined that the applicable regulatory review period for Supprelin® is 2,876 days. Of this time, 1,930 days occurred during the testing

phase of the regulatory review period, while 946 days occurred during the approval phase. These periods of time were derived from the following dates:

1. *The date an exemption under section 505(i) of the Federal Food, Drug, and Cosmetic Act became effective:* February 8, 1984. No investigational new drug application (IND) effective date was stated in the application for patent extension. FDA records indicate that the IND effective date was February 8, 1984, which was 30 days after FDA receipt of the IND.

2. *The date the application was initially submitted with respect to the human drug product under section 505(b) of the Federal Food, Drug, and Cosmetic Act:* May 22, 1989. The applicant claims May 19, 1989, as the date the new drug application (NDA) for Supprelin® (NDA 19-836) was filed. However, FDA records indicate that NDA 19-836 was submitted on May 22, 1989.

3. *The date the application was approved:* December 24, 1991. FDA has verified the applicant's claim that NDA 19-836 was approved on December 24, 1991.

This determination of the regulatory review period establishes the maximum potential length of a patent extension. However, the U.S. Patent and Trademark Office applies several statutory limitations in its calculations of the actual period for patent extension. In its application for patent extension, this applicant seeks 1,752 days of patent term extension.

Anyone with knowledge that any of the dates as published is incorrect may, on or before August 3, 1992, submit to the Dockets Management Branch (address above) written comments and ask for a redetermination. Furthermore, any interested person may petition FDA, on or before November 30, 1992, for a determination regarding whether the applicant for extension acted with due diligence during the regulatory review period. To meet its burden, the petition must contain sufficient facts to merit an FDA investigation. (See H. Rept. 857, Part 1, 98th Cong., 2d sess., pp. 41-42, 1984.) Petitions should be in the format specified in 21 CFR 10.30.

1993 - The FDA approved Lupron Depot-Ped for CPP. In 1993, when Abbott Laboratories (now AbbVie) sought to get their FDA license to utilize Lupron in children for CPP, an abstract was [published](#) on trials they had done on just 10 girls at Children's Hospital in Phoenix, AZ, to determine the efficacy and long-term effects. They ran this study on 10 girls and "Patients who finished treatment have been followed up for up to 5 years, and will continue in follow-up throughout their reproductive life."

2007 - Supprelin-(R)-LA was [approved](#) by the FDA. Rather than being an injectable puberty blocker like their method designed in 1989, this is a subcutaneous implant that is inserted into the upper arm for a continuous release over a 12 month period.

2008 - The Endocrine Society, with members in more than 100 countries, "approved" puberty suppressors as a treatment for transgender adolescents as young as 12 years old. It has never been licensed by the FDA for this purpose.

2011 - The World Professional Association for Transgender Health (WPATH) issued "standards of care" for the treatment of patients with gender dysphoria, including puberty suppression. WPATH was originally called the Henry Benjamin International Gender Dysphoria Association.

2014 - Government appeals board [ruled](#) that Medicare must cover surgery for gender transitions, which overturned a policy dating back to the 1980s. WPATH [standards of care](#) studies on the benefits of sex reassignment therapy played a big role in this. It doesn't mean all sex reassignment surgeries will be paid for by Medicare, but it lifted the ban so they can submit documentation for coverage. Between 2000 – 2014, surgeries increased four-fold.

2016 – The FDA requires all manufacturers of puberty blockers to add "risk of seizures and serious psychiatric adverse events in this patient population" to their safety warning labels.

2019 - The Hill [reported](#) in October, "a federal judge overturned ObamaCare protections for transgender patients, ruling that a 2016 policy violates the religious freedom of Christian providers. The regulation prohibited insurers and providers who receive federal money from denying treatment or coverage to anyone based on sex, gender identity or termination of pregnancy. It also required doctors and hospitals to provide "medically necessary" services to transgender individuals as long as those services were the same ones provided to other patients."

Big Business

Gender affirming hormone therapy is big business. In fact, it's so big, **Planned Parenthood has quickly climbed to be the nation's second largest provider.** Whereas nearly all, if not all, of their centers provide this service to those who are 18 years or older, some of them also provide prescriptions for puberty blockers. They do all of this under the guise of "reproductive rights."

In addition to hormone therapy, surgeries for breast augmentation and reassignment surgery have skyrocketed. When I stated that they have manufactured an industry, I wasn't hypothesizing. This is a huge market, with many funders, many profiteers, and a whole lot of dancing and shaking of hands taking place. They have taken advantage of, and completely exploited the transgender community. While portraying to show their support, what they are really doing is backing their agenda, which is to destabilize a country through cognitive dissonance, sterilize a country through hormones and surgery, and make themselves incredibly wealthy in the process.

Does anyone really believe they would have dedicated this much time, energy and money into less than 1% of the population for well over seven decades, if they didn't believe they could increase that 1% and monetize it while changing the fabric of our world forever? Part 3 will get into the funders and profiteers. Stay tuned.

Exploiting Transgenders Part 3: The Funders & Profiteers



The transgender community has been exploited since the 1950s, to glamorize and propel a manufactured industry. In [part one](#), it broke down the historical timeline and social engineering in creating this industry, and [part two](#) broke down the medical engineering origins, as well as puberty blockers now being used on children who are being told they have gender dysphoria. It is vital to read both chapters before moving on to the information below in part three.

Just how big has this industry grown, right under your noses? From 2000 to 2014, a [study](#) by Johns Hopkins researches shows that gender-affirming surgeries have increased four-fold. By 2016, they [were up](#) another 19 percent from the previous year. Since the inception of the first youth gender clinic erected in 2007 by Boston Children's Hospital, over fifty youth gender clinics have sprouted up. This doesn't even include all of the facilities available to adults. And who is the second largest provider of gender affirming hormone therapy, in the nation? None other than Planned Parenthood. Beginning to see just how large this manufactured industry has grown? Who was behind the funding, and who are the profiteers?

Who is Behind The Funding?

In 2018, Jennifer Bilek did an excellent [report](#) in the Federalist, breaking down who some of the biggest funders were. Interestingly, at the time she reported on it, there were 30 gender youth clinics, and there are now over 50. She did such a phenomenal job of illustrating the Pritzker family as a case study to show just how they move funds around to push the transgender movement through institutions and the education system, while simultaneously investing in the medical infrastructure. There are numerous billionaire families following this same model, ultimately shaping the narrative, normalizing transgenderism, and grooming students to propagate their agenda, making them all funders and profiteers.

Jennifer Pritzker, one of the many Pritzkers involved in this, was the national co-chair of Obama for America 2012 and national finance chair of Obama's 2008 presidential campaign. Pritzker helped create the National Institute for Innovation in Manufacturing Biopharmaceuticals (NIIMBL) while serving as Obama's secretary of commerce, and facilitated a \$70 million award to them, which was the first funding of its kind. Obama held the first meeting ever on transgenderism at the White House, and his administration went on to shift policies to serve this industry they were creating.

Bilek's [full report](#) is a necessary must read, as it goes hand-in-hand with my full report on the manufacturing of this industry and shows just how enmeshed multiple individuals, families, big tech, universities, the medical industry, the US government, and LGBT lobbying firms are with propelling this to be one of the biggest industries on the horizon. Some of the exceedingly rich individuals involved in this, aside from the Pritzker family, are George Soros, Martine Rothblatt, Tim Gill, Drummond Pike, Warren and Peter Buffet, Jon Stryker, Mark Bonham, and Ric Weiland. Funding toward transgender issues increased eightfold between 2003-2012.

Taxpayers Are Funding This Whether They Know it or Not

In digging through an [extensive list of Obama administration policies](#), I discovered that the Department of State "continues to grow the Global Equality Fund" which is a public-private partnership to advance the human rights of LGBT persons globally, and since the fund was launched in 2011, it has allocated \$30 million to "civil society organizations" (socialism) in 80 countries. Additionally, USAID launched the LGBTI Global Development Partnership and "Being LGBTI in Asia," and funded a range of LGBTI human rights programs. They even released a document called LGBT Vision for Action in 2014 to make sure "stakeholders" knew they were on board, and appointed a USAID Senior LGBT Coordinator to fully integrate LGBT into all aspects of USAID's work overseas. Of course, the State Department had to follow suit, so in 2015 they appointed the first-ever Special Envoy for the Human Rights of LGBTI Persons to advance LGBTI rights around the globe. Who's paying these salaries? Bingo. They even got HUD involved in 2009, and created the first-ever national study of discrimination against the LGBT community. Of course, one of their biggest moves was to get the US Department of Education

involved and to provide educators with information, such as the publishing of ‘Examples of Policies and Emerging Practices Guide for Supporting Transgender Students.’

What about health? Who’s funding the transgender community’s lifelong expenses for hormone therapy, as they continue to push them like candy, to forever sterilize those who have been sadly misled into believing they will feel “whole” again? For starters, HHS funded the Services and Advocacy for LGBT Elders (SAGE) to establish the first national resource center for older LGBT individuals. Transgender surgeries saw a huge increase in 2016 because of the big push in glamorizing it, but also because in 2014, Medicare ended a blanket denial of coverage. This created a huge spike. However, in 2019, a federal judge [overturned](#) this.

The US government has been dishing out grants to NGOs and universities for a very long time. This was all carefully designed, with specific people put into specific positions throughout history, for the purpose of facilitating these funds. It is like a giant cesspool of networks that feed one another to carry out their agendas. The money keeps cycling through all of the networks to push the social engineering, medical engineering, and construct a narrative to manufacture an industry, all in the name of socialism, one world governance, maintaining power, and lining their pockets with billions. Yes, taxpayers have been feeding the beast since the beginning of time. They devised a very turnkey environment for themselves, with laws in place to protect them, and where the laws couldn’t, people were in place to “take care of it.”

One of the biggest organizations the government funds is Planned Parenthood. Coincidentally, Planned Parenthood is now the second largest provider of “gender-affirming hormone therapy.” From 2016 to 2017, they [received](#) \$543.7 million in funds from all levels of government. From 2013 to 2015 they received \$1.5 billion in federal program funds. \$1.2 billion was from Medicaid, and \$289 million came from six separate departments within our government.

Bottom line, anyone or any organization that stands to make money from this manufactured industry, has put money into it, and has played a role in the social engineering of it.

Who Are The Profiteers?

Sadly, this industry has been turned into a money-making machine. Who isn't profiting would be faster to answer. They have glamorized a mental illness, created a trend, pushed a narrative that "gender" is something you choose, and socially engineered it into every institution and across every tv screen. They have been training doctors across the globe in vaginoplasty, phalloplasty, facial feminization surgery, and urethral procedures. Clinics are popping up everywhere, every university is on board, and hospitals and medical institutions are frothing at the mouth to get in on the [action](#). So, who's profiting?

- Scientists and researchers
- Drug manufacturers
- Biogenetics
- Pharmaceutical companies
- Pharmacies
- Psychiatrists and psychologists
- Endocrinologists
- Surgeons
- Hospitals and clinics
- Planned Parenthood
- Universities
- NGOs
- Shareholders and investors
- Billionaires invested in all of the above
- All of the corrupt receiving kickbacks

Aside from surgery, one of the big cash cows is hormone therapy, because once they begin, they will spend a lifetime visiting doctors, having blood drawn, and pumping themselves with hormones. Repeat business is the name of their game. There has been a big shift over the past decade to target children with confusing them and causing them to question their own gender, by suggesting they can "choose" their gender and if they want to "transition" they can begin with chemically sterilizing hormones. This is how Planned Parenthood draws them in, under the guise of "reproductive rights," with no therapy required.

The medical engineering origins behind puberty blockers was covered at length in [part two](#), but it's important to note a few key pieces of information when it comes to the manufacturers of these puberty blockers, which were licensed for Central Precocious Puberty, and are now being used to transition children's gender. Why so much focus on this specifically? Because, not only is it incredibly dangerous to children and can forever sterilize them, I can clearly see that this is the beginning stages of a huge market they have manufactured, and it needs to be stopped in its tracks!

Supprelin Puberty Blocker: A Profiteer

It's important to note that Supprelin was the first puberty blocker to be patented and FDA licensed, back in 1991. One of the research teams that discovered the GnRH gene analogs, was the Salk Institute for Biological Studies. It was founded in 1960 by Jonas Salk. Yes, the same Jonas Salk who [developed](#) the polio vaccine which was later found to be contaminated with the simian virus 40 (SV40). The CDC found that approximately 100 million children and adults in the US alone, were inoculated with the contaminated vaccine. According to a 2006 report by the Journal of Clinical Oncology, "reports of the detection of SV40 DNA in a variety of cancers have raised serious concerns as to whether the inadvertent inoculation with SV40 has led to the development of cancer in humans."

Interestingly, Scrip ran a [press release](#) about Johnson & Johnson's new Supprelin that has been recommended for approval in precocious puberty by the FDA's Endocrinologic and Metabolic Drugs Advisory Committee at its March 26, 1990 meeting, which wasn't technically licensed by the FDA until December, 1991. In this release, they described how that same committee had narrowly rejected Takeda-Abbott Pharmaceutical's (TAP) Lupron and Lupron Depot. They stated that the data provided by TAP on 62 children injected with Lupron and 20 with Lupron Depot was insufficient to demonstrate either formulation's clinical efficacy in precocious puberty. Just three years later, the FDA did in fact license Lupron Depot-Ped.

Something else caught my attention in this press release. They stated that precocious puberty has a frequency in one in 5,000 to 10,000 children in the US. Remember, this was in 1990. Yet, according to the [article](#) published in the Washington Post on the "precocious puberty outbreak" in Puerto Rico in 1984, just six years prior to this press release, they claimed that "in the United States and other countries this condition is rare." How did it evolve to one in 5,000 in just six years' time?

Takeda-Abbott Pharmaceutical's (TAP) / AbbVie Inc.: A Profiteer

Again, much about AbbVie was covered in the medical engineering in [part two](#), however, there are a few additional aspects I would like to include so that everyone is aware of the origination of this patent, prior to it being under AbbVie. Not to mention, there are some very interesting connections.

Takeda Pharmaceutical Co., Ltd. is the largest pharmaceutical company in Asia and has been around since 1781. They are headquartered in Tokyo, Japan and have over 50 subsidiaries. Takeda had a [patent](#) on the Leuprolide acetate compound in 1975, which is the synthetic analogue of GnRH used in the puberty blockers. In 1977, they hooked up with their first US company, which was Abbott Pharmaceuticals (Abbott Laboratories), which was founded in

1888. The patent was then transferred to Abbott in 1977. Abbott obtained FDA licensing in 1993 on Lupron Depot-Ped for central precocious puberty.

In 2001, Abbott Laboratories and Takeda Chemicals [paid](#) an \$875 million settlement to the Department of Justice for aggressively marketing Lupron by giving doctors **illegal kickbacks** in exchange for prescribing Lupron to patients, and assisted the doctors with billing Medicare or Medicaid hundreds of dollars for each dose.

On 2012 FDA [documents](#), it indicates that Lupron Depot and Lupron Depot-Ped (for children) are manufactured for Abbott Laboratories by Takeda Pharmaceutical Company Ltd. In 2013, AbbVie Inc. was birthed from Abbott as an independent company, which is the current name listed for Lupron products. AbbVie is now the world's sixth largest independent biotech company, with a revenue of \$32.75 billion in 2018. They [sell](#) Lupron products throughout the US and Canada, while Takeda markets them in Asia, and both sell to Europe. In 2016, Lupron alone generated revenue of \$821 million.

According to the [Saint Louis Zoo](#) and several [other](#) websites, Lupron is also being used in captive animals, primarily males, to suppress testosterone and sperm production.

There are several other puberty blockers on the market with more profiteers, but my focus was on the two forerunners for purposes of showing how this industry emerged.

An Interesting Web of Connections

In 2013, the **AbbVie Foundation**, **Takeda Pharmaceutical Company Ltd.**, Microsoft, and several others, as **Clinton Global Initiative (CGI) members**, [partnered](#) to bring a virtual mentoring STEM system to 15 high schools in Illinois. AbbVie went on to [donate](#) \$40 million to fund the rebuilding of North Chicago's middle school, Neal Math & Science Academy, in 2019, which was part of a \$350 million charitable contribution to nonprofit partners. \$15 million [went](#) to the University of Chicago's Education Lab.

In 2014, **AbbVie**, along with **Abbott**, Merck, and others, [partnered](#) with **CGI** to deliver emergency equipment to West Africa to fight Ebola.

2014 was a busy year for **AbbVie**. They also [teamed up](#) with **Google** in a \$1.5 billion dollar research partnership. Google Inc.'s secretive biotech company, Calico LLC partnered with AbbVie Inc. to develop anti-aging drugs. By 2018, they were [focusing](#) on over two dozen projects with a special interest in neuroscience and targeting cellular stress systems, but have kept very hush hush about it. Each have contributed another \$500 million to continue this partnership. Calico went from a staff of 10 to a team of 150-plus, headquartered in San Francisco. Arthur Levinson, the former Chairman of Genetech, is the current Chairman of Apple Inc. and CEO of Google's Calico LLC.

In 2015, **Abbott Laboratories** [donated](#) between \$50,000 - \$100,000 to the **Clinton Foundation**.

In 2016, the **Bill & Melinda Gates Foundation** [granted](#) **Takeda Pharmaceutical Company** over \$40 million “to increase total global capacity to meet potential demand for Inactivated Poliovirus Vaccine (IPV) in 2019/2020, and ensure adequate vaccine supply at an affordable cost.”

In 2016, **AbbVie** [contributed](#) \$44,538 to **Hillary Clinton’s presidential campaign**.

In 2017, as a **CGI** partner, **AbbVie** [stepped up](#) again, along with 43 other companies, to deliver medicine and medical supplies to Puerto Rico. The following year AbbVie [donated](#) \$50 million each to Direct Relief and Habitat for Humanity International. Direct Relief is who had the “Direct Relief-chartered MD-11 cargo jet” that flew the supplies to Puerto Rico in 2017. Coincidence?

Interesting side note: On **Adam Schiff’s** 2016 financial disclosure [report](#), it indicates that he has shares in AbbVie Inc. Sure, a lot of people do. But he also holds shares in Franklin Templeton and BlackRock, and Franklin Templeton Investments was just implicated in the laundering of \$7.4 billion in external government loan bonds between 2013 and 2014, allegedly from family members of Ukrainian ex-President Yanukovych. Franklin Templeton Investments has significant [ties](#) to the democratic party, including former President Obama, as does the managing director of BlackRock who holds the largest share in Franklin Templeton Investments. All of this is related to the \$16.5 million that the former Vice President Joe Biden’s son Hunter Biden [received](#) from Burisma.

Just How Many Clinics Are There for “Gender-Expansive Children and Adolescents” Who Are Profiting From This?

This is an interactive [map](#) of over 50 clinical care programs for transgender and gender-expansive youth, which only includes comprehensive multidisciplinary programs. There are numerous smaller practices across the country as well, and pretty much most major hospitals and universities offer services as well. Mind you, this is specific to youth, and by “youth,” they treat as young as three-years-old, and in some cases state they treat “transgender patients of ALL ages.” What do they mean by “comprehensive?” That would include puberty blockers, hormone therapies, surgeons, mental health services, and endocrinologists.



According to a 2017 US survey of nearly 28,000 transgender adults released by the National Center for Transgender Equality, they claim that 11 percent of transgender women have had their testicles removed, and 12 percent underwent vaginoplasty. The American Society of Plastic Surgeons also released a report based on 3,256 surgeries in which they claimed 92 percent of the procedures were breast or chest operations, 7 percent were facial, and only 0.9 percent were on the genitals. That said, in 2016 there was a 19% increase in surgeries overall from the previous year. It is a growing industry, and hormones are one of the biggest money-makers because they can get young children on them, and make it a lifetime of medicine, doctor appointments, and blood tests.

Planned Parenthood is The 2nd Largest Provider of Gender Affirming Hormone Care in The Nation – A Big Profiteer



Nationally, Planned Parenthood is the second largest provider of Gender Affirming Hormone Care.

Just three years ago, Planned Parenthood was only offering hormone therapy in 27 of its clinics, and now they are the [2nd largest provider](#) in the nation. What does that say? Well, a few things. For one, this industry is growing fast and they are in phase 3, which is the sales marketing push as they manufacture a reality. Second, Planned Parenthood is running this under the guise of “reproductive rights” while sterilizing thousands of people, which is their MO. Third, if Planned Parenthood has taken this on nationwide, that only means one thing – they will eventually expand to include surgical transitions in their clinics because it will expand their bottom line \$\$\$. And, while they are moving toward expansion, you can bet they are getting kickbacks from referrals.

About Hormone Therapy

- PPCWNY will offer hormone therapy (HT) services for transgender male, transgender female and gender-nonconforming patients **18 and older**.
- We will offer HT to patients with existing prescriptions and also HT prescription starts.
- Patients do not need to provide a letter of consent or a prescription from another provider to receive care at PPCWNY.

Whereas most of their clinics state that they treat patients who are 18 years and older, many of their clinic websites [state](#) that they also prescribe puberty blockers to children, with permission from a parent or guardian. Here’s what [they say](#) about puberty blockers: “Your gender identity is real, and there are medical treatments you can use to help your body better reflect who you are.”

So what does an appointment entail in order to get hormone therapy prescriptions? Initially, they review a patient’s medical history, measure their weight and blood pressure, discuss their transition goals, draw their blood to watch for potential side effects of hormones (ongoing), and explain how to inject themselves with the

hormones. At that very first appointment, the patient will receive their prescription that they can take to a pharmacy. Therefore, there is no mental health professional involved. In fact, the first thing they state is, **“You don’t need to participate in therapy or provide information from a mental health provider to receive hormone therapy.”** In other words, they are declaring that

this is a “reproductive rights” choice, rather than a mental health issue that should be discussed with a professional to treat past traumas, prior to making a huge decision such as this. In fact they go out of their way to glamorize it with [photos](#) of transgenders smiling. Here is an example first appointment on their Great Northwest and Hawaiian Islands [web page](#), where they have 27 health centers.



In their Massachusetts location, they partnered with a media firm to run a special multimedia visual campaign titled, “My Care. My Way,” and produced a [1-1/2 minute video](#) whereby the Director states, “to the transgender community. We see you, we hear you, and we care about you, and we care for you.”

In Florida, they are [partnered](#) with Equality Florida, which was founded in 2014. They have produced a 50-page book filled with doctors and facilities to serve the transgender community, in addition to pushing it into the education system and through workshops and media.

In New York, there is a special fund [setup](#) for those struggling to pay for transgender care at Planned Parenthood. They created a website called Queertips, and

detail that the fund covers the cost of care, health center visits, and lab work done at Planned Parenthood. It does not cover the cost of hormones.

Yes indeed, Planned Parenthood is raking in the cash on this, and there is a very good chance they will expand these services to include surgeries and other treatments in the future.

Hospitals Are Not Only Profiting, They Are Driving This Industry



Founded in 2007, Gender Management Service (GeMS) at Boston Children's Hospital was the first major program in the U.S. to treat transgender adolescents. Their [website](#) states:

"Since that time, we have expanded our program to welcome patients from ages 3 to 25."

Yes, you read that correctly, and Boston Children's Hospital pushes this agenda hard.



In 2015, The National Institutes of Health (NIH) [awarded](#) \$5.7 million for a five-year, multicenter study that will be the **first in the U.S. to evaluate the long-term outcomes of medical treatment for transgender youth**. According to their website:

“This study will provide essential, evidence-based information on the physiological and psychosocial impact, as well as safety, of hormone blockers and cross-sex hormone use in this population.

The study will include youth from two age groups: younger children in early puberty, who will receive hormone blockers, called GnRH agonists, used to suspend the process of puberty – preventing the development of undesired secondary sex characteristics; and older adolescents, who will begin use of masculinizing or feminizing cross-sex hormones that allow them to go through the ‘right’ puberty – consistent with their gender of identification.”

Keywords to note: “first study in the U.S.” to evaluate the long-term outcomes. Again, Boston Children’s Hospital, along with countless other hospitals and clinics using puberty blockers, when it has not been approved by the FDA for this use, and more importantly, no long-term studies have been done on this. Why isn’t the FDA stepping in on this? Typical procedure is to get approval to run studies by the FDA before they approve licensing for medications to be used for specific needs. Thousands of children are being dosed with these drugs. Where is the media? Furthermore, this study is being funded by NIH, which is a corrupt organization that publishes biased documentation to further big pharma, while not having the people’s best

interest. I guess we all have to wait one more year to find out what their “study” shows. I wonder how many more children will be sterilized, suicidal, or perhaps dead, by the time that study comes out?

Photos from Boston Children’s Hospital.



2007

TRANSGENDER HEALTH

Ask its founders if starting the first US clinic for transgender children took courage and they'll say no. It was simply the right thing to do.

Endocrinologist Norman Spack had been seeing transgender patients in private practice for nearly a decade when he joined the Department of Endocrinology at Boston Children's. His patients suffered intolerably from the mismatch between their gender and genitalia. Many were certain they were in the wrong body as young as age three. By adolescence, their bodies felt like a betrayal.

*"Boston Children's has a long tradition of bold breakthroughs, of being willing to take risks and of doing the right thing for patients."*¹

—DAVID DIAMOND

Spack began inviting his patients and their families to medical rounds so his new colleagues could learn about the struggles they endured and the risks they faced. Transgender youth are two to three times more likely than their peers to experience depression or anxiety, intentionally hurt themselves or have suicidal thoughts.² Forty percent attempt suicide.³

The decision to help these children was easy.

TRANS-FORMATION

In 2007 Spack and urologist David Diamond launched the Gender Management Service (GeMS). The clinic initially served both transgender patients and those with sex-related anatomical anomalies. But as calls poured in from parents desperate to help their gender-nonconforming children, GeMS shifted focus exclusively to them.

Spack imported a model of care developed in Holland. Under the "Dutch protocol," patients receive counseling in the years before medical intervention is appropriate, followed by a stepwise approach to transition that combines psychological support and medical treatment.

Treatment begins with reversible puberty blockers. These both suppress distressing physical changes and provide a developmental pause during which young teens can reaffirm their decision or change their minds. This approach, which GeMS pioneered in the United States, is now endorsed by the American Pediatric Association and codified in international guidelines. It has been adopted by 60 institutions nationwide.

The vast majority of patients continue their transition. At around 14, they begin hormone therapy to develop the deep voice or curvy hips of their identified gender; at 18 or older they may opt for gender-affirmation surgery. They enter adulthood feeling no longer like a mismatched puzzle, but whole.

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"I AM COMPLETE"

It took 24 years and a new Boston Children's service for Zack Hogle to finally become himself. In 2018 Hogle had a phalloplasty, surgical creation of a penis, at the hospital's Center for Gender Surgery. The center was the first at a US pediatric hospital to offer the procedure, and Hogle was its first phalloplasty patient.

Gender affirmation surgery is the last step in a transgender individual's transition. While some feel whole without it, others yearn for a body that's completely in sync with their identity. The Boston Children's Center for Gender Surgery helps patients who meet strict age (18 or older for a phalloplasty) and clinical requirements fulfill their dream of wholeness.

fast-forward



A proud transgender man, Zack Hogle realized a lifelong quest to become his true self when he had gender affirmation surgery at the Boston

Children's Center for Gender Surgery. Like GeMS, the center has pioneered care for transgender individuals.



Bully-Proofed

A staggering 83 percent of transgender youth report being bullied. They and other vulnerable children may face a 24/7 cycle of abuse as bullies turn social media into a forum for cruelty. Boston Children's founded the first hospital-based clinic to help these children and their parents. Led by pediatric neurologist Peter Raffalli, the Bullying and Cyberbullying Prevention and Advocacy Collaborative (BACPAC) arms children with strategies to build resilience and to develop strong, protective peer and adult support groups. It teaches parents how to advocate for their child.



“Endocrinologist Norman Spack had been seeing transgender patients in private practice for nearly a decade when he joined the Department of Endocrinology at Boston Children’s. His patients suffered intolerably from the mismatch between their gender and genitalia. Many were certain they were in the wrong body as young as age three. By adolescence, their bodies felt like a betrayal.”

Yes, one would imagine so, being as [most](#) transgender individuals have suffered child abuse of some form, with a large amount having been sexually abused. To state that a three-year-old is “certain they were in the wrong body,” is lunacy at best. A three-year-old knows what it is told and taught and is incapable of coming to such a conclusion without an adult manipulating their circumstances and thoughts. Notice they state “forty percent attempt suicide.” According to the Williams Institute and the American Foundation for Suicide Prevention’s [survey](#) from 2014, **“respondents who said they had received transition-related health care or wanted to have it someday were more likely to report having attempted suicide than those who said they did not want it.”** This makes their statement in the book rather manipulative, as they give the impression that the cure is transitioning, which is clearly not the case. They are brazen enough to state that **“they enter adulthood feeling no longer like a mismatched puzzle, but whole,”** which couldn’t be further from the truth.

On the flip side, the American College of Pediatricians [reported](#) that “as many as 98% of gender confused boys and 88% of gender confused girls eventually accept their biological sex after naturally passing through puberty,” and added, “conditioning children into believing that a lifetime of chemical and surgical impersonation of the opposite sex is normal and healthful is child abuse.”

So to recap, less than 1% of the population identifies as transgender. The suicide rate for transgender individuals is nineteen times that of the general population. More than 40% attempt suicide. Lupron puberty blockers have horrific side effects, with over 25,000 adverse reports, including 1500 deaths, often lead to sterilization, and has not been FDA approved to be used for transgender transitioning in children. **Yet, The American Pediatric Association endorsed their methods of using puberty blockers, which is now codified in international guidelines and adopted by 60 institutions nationwide.** Big money.

They Have Moved to Phase 3

Despite all of this, clinics continue to pop up like the hottest new trend, surgeons and physicians are being schooled in transgenderism, political figures and the entire education system are pushing it as though switching gender is glamorous and fun, and they are all making a killing financially.

Transgender individuals are hurting. Some are dying. Children are being brainwashed and their sexuality exploited as young as three-years-old. This is blatant child abuse, and parents, physicians, drug companies, and the FDA should all be held accountable. Meanwhile, Planned Parenthood is tapping into the industry by targeting teenagers to come get their prescriptions because no participation in therapy is needed, it's simply a "reproductive right."

It is being glorified in the school system and causing a gender identity crisis in this country, while tabloids call it a "social phenomenon." No, it is a social construct spawned and perpetrated by those trying to destabilize the United States of America, sterilize thousands in the process, and score gold from the industry they began devising decades ago. Meanwhile, they are lumping a mental disorder in with sexual preferences by throwing the "T" into LGBTQ, when in fact 23% of transgenders identify as heterosexual. And, don't even get me started on the "pronouns," being one of their greatest manipulation tactics of all for young minds.

They achieved the social engineering long ago. They achieved the medical engineering long ago, and are currently training doctors and surgeons at rapid pace. Everyone and every institution has been in place for a while. They are now in phase 3 of manufacturing the reality to drive in sales. This is the marketing phase, and there are a whole lot of clowns going above and beyond to market this industry. The final chapter, part 4 will cover the clowns and the marketing. If people do not speak up, loudly and clearly on this issue, the future will be a dim place of [indoctrination](#), [brainwashing](#), and confusion for children. Shine a light on this – NOW.

Exploiting Transgenders Part 4: Manufacturing a Reality \$\$



From unwitting or negligent parents to the education system, billionaire funders to big pharma, the CIA to Hollywood, NGOs and legislatures, the manufactured transgender industry has been pushed for several decades, and increased fourfold from 2000 to 2014. In fact, there are already over 50 youth gender clinics in the U.S., with hundreds of locations providing services for those of all ages. The social [engineering and medical engineering origins](#) have long been established, and were covered in [part one](#) and [part two](#) of this report. The [funders and profiteers](#) of this agenda were covered in [part three](#).

Despite the fact that 40 percent of transgenders attempt suicide, more often after transition surgery, the funders and profiteers continue this manifestation under the guise of “glamor,” “feeling whole again,” and “reproductive rights.” Part four summarizes the sales and marketing phase we are currently in, showing just who is doing the brainwashing to drive sales, and increase the industry from less than 1 percent of the population to a thriving industry, which includes more legislation. Aside from this being a billion dollar industry, the results they are seeking seem to coincide with their plan for a one world governance and a socialist agenda.

Who is Behind The Brainwashing? Phase 3: Driving Sales

The social engineering phase has long been in place. They have built advocate teams across the country within colleges and universities, altered legislation to include LGBTQ teachings in schools, brainwashed parents to believe Central Precocious Puberty is an actual disorder that requires pumping hormones into their children, have institutionalized this ideology, have maintained positions on boards of universities and medical infrastructures, and have the media in their back pockets. They have changed medical guidelines and practices, trained doctors and surgeons all over the country, and opened up countless gender clinics. They have also trained counselors and psychologists to suggest “transitioning,” to their patients, rather than working through the mental traumas. What we are witnessing now is the sales push to increase less than 1% of the population who identify as transgender, to enormous heights, so as to drive sales. Who better to do that than those they’ve had in place for decades?

LGBT Community

It’s really tragic how they have exploited the transgender community, while purporting to support them. Some of those involved with the LGBTQ campaigns are a part of pushing this, some are confused by it, and some are downright angry with it. Some can see right through this agenda and are aware of their ulterior motives. Some are truly trying to help and support the transgender community through these campaigns, but unfortunately, unless they start speaking up about how transgenders are being exploited and need to be very careful with who they seek out to help them through their gender dysphoria, they are only hindering them, especially when it comes to pushing hormones and transition surgery on children.

Here is [one example](#) of a campaign by the LGBT community that was targeting Chick-fil-A to stop funding Christian organizations. Chick-fil-A has donated millions to the Salvation Army, the Paul Anderson Youth Home, and the Fellowship of Christian Athletes for years. The LGBT community declared this was wrong because those organizations oppose same-sex marriage. So what happened? Chick-fil-A folded under pressure and is no longer donating to those organizations. The San Antonio City Council banned Chick-fil-A from San Antonio’s airport for donating to those organizations as well. If anyone believes for one moment that this is a grassroots movement, they would be sadly mistaken. It is quite clear who is controlling both the narrative and the money. What this little accomplishment of theirs did was to show the public their ability to control others, seed people’s minds with Christian organizations being discriminatory, and keep people focused on LGBT as they launch their transgender sales campaigns.

Therapists, Pediatricians, Surgeons, Medical Associations & Organizations, WHO

This goes without saying, but it needed to be included here. The timeline in [part one](#) showed how various medical societies, associations, and organizations all got on board with creating “guidelines” for treating gender dysphoria, which included giving children puberty blockers. This was all masterminded. By these folks at the so-called “top” putting this out there as “fact,” it gives way to the entire health industry to follow these guidelines as though they are doing what’s best, what’s right, and what’s moral for their patients. Unfortunately, many of these medical professionals see this as a great new development, incredible new surgeries, and scientific experiments they get to be a part of, so they do not question it, research it, or fight it. Sadly, many who have tried to fight it have found themselves without jobs, blackmailed, or murdered. The powers that be would have you believe that the evolution of science and our health industry is cutting edge and life-saving. Whereas that may be true in some areas, so much of it has been compromised and [infiltrated by eugenicists](#) early on who still carry out experiments on humans today. In fact, this 4-part report by The Sharp Edge on [The Cancer in Modern Medicine](#) is an absolute must read to understand how the health industry is run.

CIA

The CIA is very much involved in pushing this agenda. Of course, they do it under the guise of “acceptance” and “nondiscrimination,” but their ulterior motives are clear. They even came up with a “[diversity and inclusion strategy](#)” under the direction of former CIA Director John Brennan. If one didn’t understand the full scope of this agenda, they might believe this was all done for the good of the LGBT community.

In 1995, former president Bill Clinton [signed](#) an executive order banning the withholding of security clearances from members of the LGBT community. This EO is what “sparked the push for diversity and inclusion inside the CIA and inspired three courageous LGBT officers to found ANGLE in 1996.” ANGLE is an interesting name considering the true motives. ANGLE stands for Agency Network for Gay, Lesbian, Bisexual, and Transgender Officers and Allies. This [documentary](#) about ANGLE includes former president Barack Obama, former CIA director John Brennan and other high ranking officials.

The CIA celebrates Pride Month and carry out several events, panels, activities, and participation in the Capital DC Pride Festival. Last year, Director Haspel introduced Major General Tammy Smith, the highest ranking and first openly gay general in U.S. history. **The CIA founded the IC Pride Summit in 2012. That same year, they [became](#) a corporate sponsor of STEM at an LGBT national conference held in Chicago. This is especially interesting, because the Clinton Global Initiative, along with AbbVie (producer of Lupron puberty blockers), Takeda Pharmaceutical Company (teamed with AbbVie in puberty blockers), Microsoft, and others got involved with STEM in Chicago that following year, in 2013.** This was documented

in [part three](#) of this report. Coincidence? That is an interesting combination of organizations, LGBT, CIA, and puberty blocker manufacturers all involved with STEM in Chicago. Curious.

Democratic & Socialist Presidential Candidates & Former Candidates

While President Trump was at a rally in Minnesota on October 10, 2019, nine presidential candidates were paying dues to their puppet masters at a [CNN](#) LGBTQ Town Hall charade in Los Angeles. It was [awful](#), with mockery, pandering, and tanked CNN's ratings. This came on the tails of another LGBTQ forum they did on September 20th. When California Sen. Kamala Harris took the stage saying, "my pronouns are she, her, and hers," and CNN's Chris Cuomo responded with "so are mine," it was the nail in the coffin. The icing on the cake was when Elizabeth Warren said taxpayers should pay for prison inmates to have transgender surgery.

Just a few weeks later, Warren tweeted out suggesting that less than 1 percent of the population are "the backbone of our democracy." What people need to understand is the mind manipulation behind this agenda. They pander to the immigrants, black community, and LGBT community in much the same way – exploiting the heck out of them to take advantage of them. It's disgusting! They drive narratives that back their legislative push to further these agendas to create a divided, socialist, one world governance, while simultaneously making a lot of money. How do they make money on this? Simple... investments in the organizations and medical infrastructures that fuel these agendas, not to mention kickbacks, campaign funds, and a myriad of other pay-to-play schemes.



The Clintons, specifically Hillary, have gone above and beyond the call of duty to push this agenda, as documented in parts [one](#) and [three](#). Abbott laboratories and AbbVie have given thousands of dollars to the Clinton Foundation and Hillary's 2016 presidential campaign. Their website is consistent with promoting every "gender" term they've ever conceived. Hillary was the first First Lady to march in a LGBT pride parade in 2000.

OUR PROGRAMS: IMPROVING LIVES WORLDWIDE

As an operating foundation, we work with strategic partners to put people first through programs that are:

CREATING ECONOMIC OPPORTUNITY



IMPROVING PUBLIC HEALTH



INSPIRING CIVIC ENGAGEMENT AND SERVICE



The Clinton Foundation has focused strongly on "gender discrimination" because that is the precursor to establishing new legislation, something Hillary is quite versed in. In a recent tweet, she included a statement by Justice Ruth Bader Ginsburg, saying "the concept of we, the people, has become ever more inclusive," while talking about her career fighting gender discrimination.



ICYMI: Justice Ruth Bader Ginsburg shares stories from her distinguished career fighting gender discrimination, what it's like to serve among her fellow "sisters in law," her pop culture ascendance, and more. Listen and subscribe to our podcast: wjcf.co/2VNePsa



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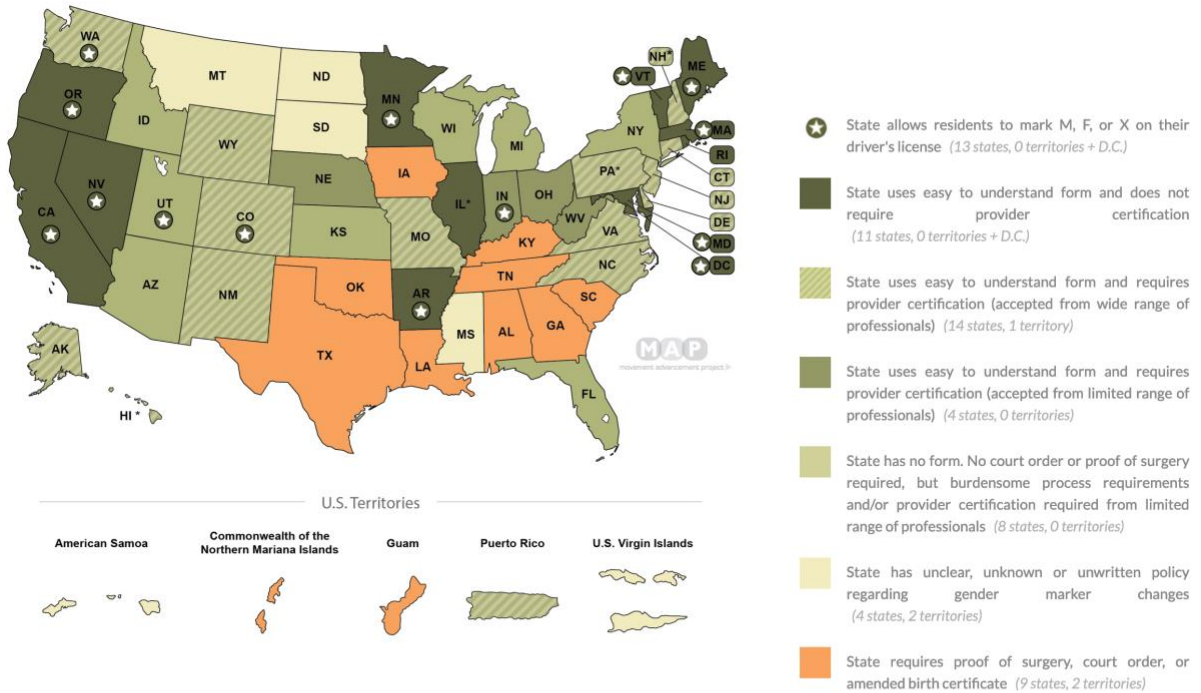
Former President Barack Obama's influence in pushing this agenda was the final thrust in moving it through legislation, propagating media, and hammering it home for sales pitches to begin circulating at rapid pace, while seeding the minds of the young to change gender. Much of this was covered in [part three](#) of this report.

These are just a few examples, but not a day goes by that these folks aren't pushing this agenda. Understand, the choices they make are solely based on personal gain and financial benefit.

Legislation to Remove Parental Rights and Hijack Your Children

States are making [changes](#) to state identification documents to include "Gender X" for non-gender binary options. Some states such as California, Colorado, New Mexico, New York, Oregon, and Washington have added "Gender X" to birth certificates. There are now [multiple states](#) that allow transgender people to change their gender on their birth certificates, with some states not requiring surgery to make that update. Multiple states have added "Gender X" to their driver's licenses and state identification cards as well. Reminder, less than 1% of the population identify as transgender, but they are passing laws across the country, and across the [world](#), to create a "Gender X" on legal documents. Why? Because, by putting that option on documents and driver's licenses, it is visually drilling it into the minds of everyone that there is suddenly a third gender. It also sets precedent for creating and/or adding to any discriminatory laws they wish to put in place, which will in turn be advantageous when trying to get Medicaid or Medicare rights for reassignment surgery. Think building blocks.

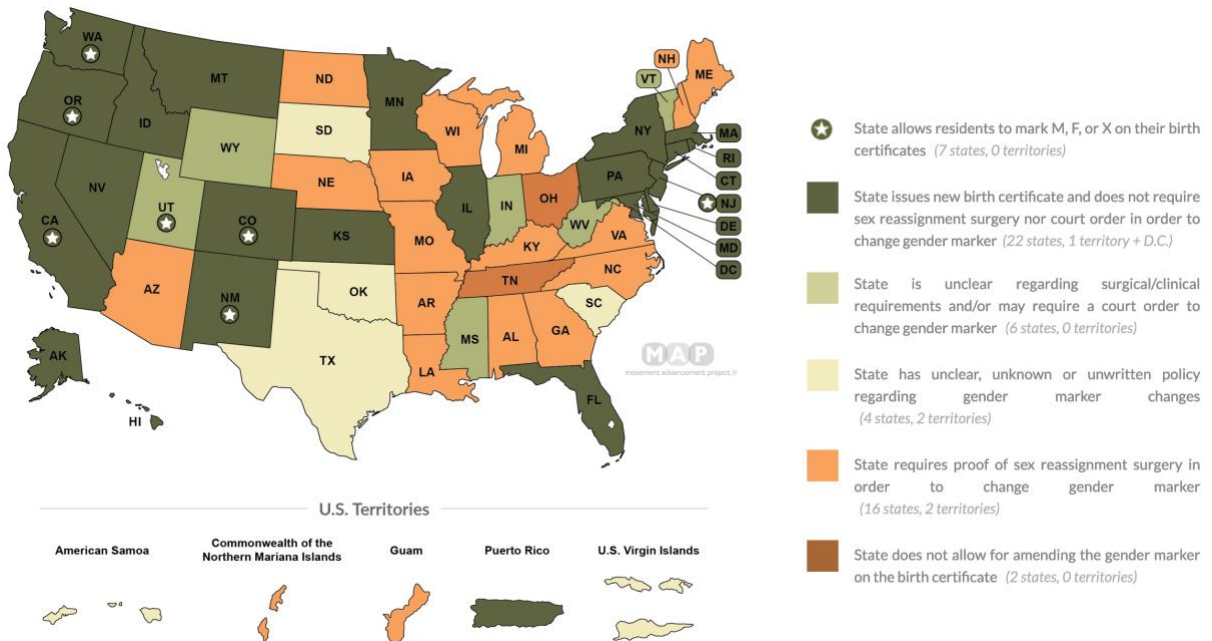
Case in point, there is a [case](#) before the Supreme court right now, who have never ruled on transgender rights, trying to pass a federal law that forbids sex discrimination against gay and transgender employees in the work place. There are already laws in place for discrimination in the work place, but they are wanting to draw special attention to the LGBT community specifically.



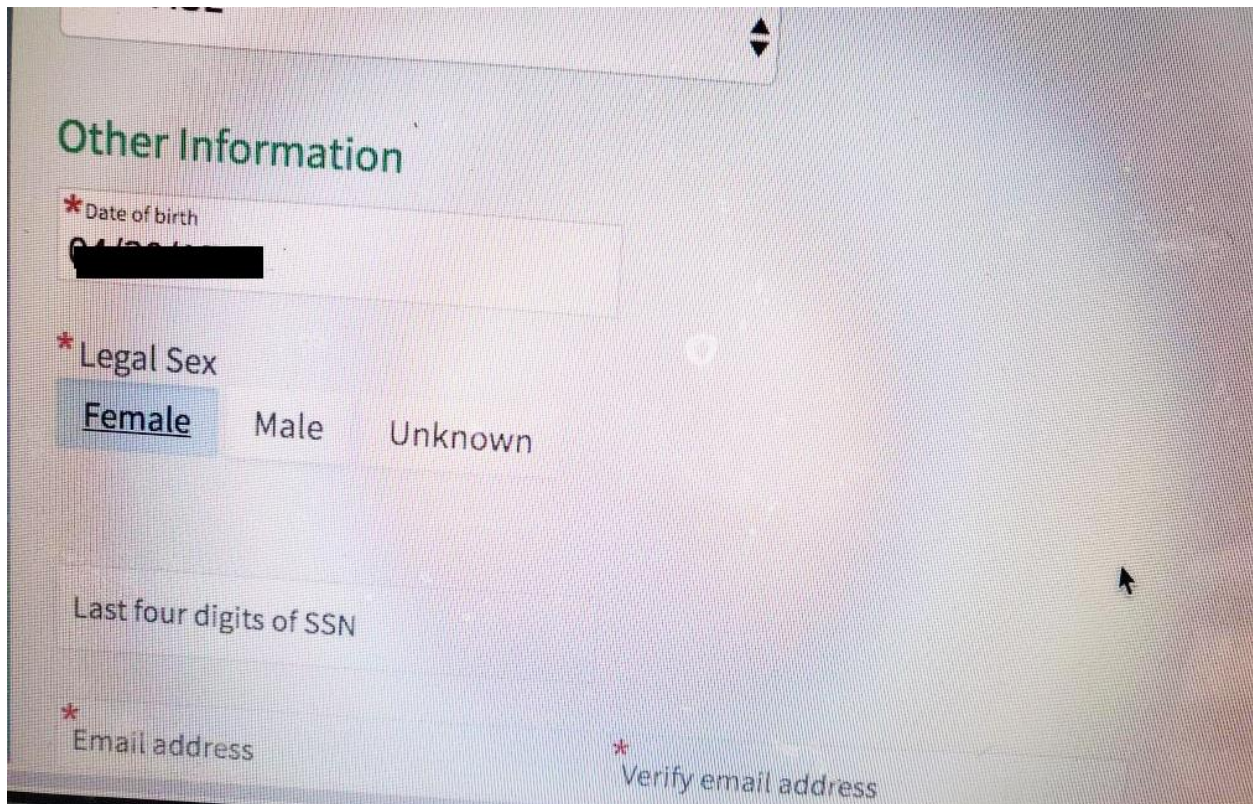
Read the State-by-State Statutes

*NOTE: Hawai'i, Illinois, New Hampshire, and Pennsylvania have all stated or passed legislation to allow gender neutral markers. Once these changes are implemented and individuals in these states are able to access gender neutral markers on their driver's licenses, this map will be updated to reflect that.

- New Hampshire's gender neutral markers will be available January 1, 2020.
- Pennsylvania's gender neutral markers are expected to be available by early 2020.
- Hawai'i's gender neutral markers will be available July 1, 2020.
- Illinois may not implement gender neutral markers until 2024.



A woman I know was recently filling out medical information online, and when she got to the gender section, her options were female, male, and unknown. This is what normalization looks like.

A screenshot of a web form titled "Other Information" in green text. The form contains several fields with red asterisks indicating required information. The "Date of birth" field has a blacked-out entry. The "Legal Sex" field is a dropdown menu with "Female" selected and highlighted in blue, and "Male" and "Unknown" as other options. Below this is a field for "Last four digits of SSN". At the bottom, there are fields for "Email address" and "Verify email address". A mouse cursor is visible near the "Verify email address" field.

Just this month, after a four-year battle over transgender students having unrestricted access to locker rooms and restrooms in Chicago's northwest suburbs school district, they [won the battle](#) in a 5-2 vote. **This gives access for males who identify as transgender females to enter female locker rooms.** This is where their well-doctored, 7-decade-long "discrimination" push played a hefty role, all the way up to The Federal Office of Civil Rights. Due to one student wishing to use the girls locker room back in 2015, the school was told they were in violation of non-discrimination law and gave them 30 days to comply or else jeopardize its Title IX funding. They then allowed the student to use a private stall in the girls' locker room, but it was not made a district-wide policy. Then, in 2017 another transgender student sued the district over locker room access. That case was lost in court, however, the Palatine-Schaumburg High School District 211 board decided to take a vote on the matter in November, 2019, and have now made it official as a district-wide rule.

Always [look](#) to New York for legislative changes, as they are by far one of the biggest proponents of initiating and gaslighting [agendas](#). There are currently 15 states and Washington D.C. that provide Medicaid for transition-related health care, and many private insurers have jumped on board as well. Though Oregon was the first state to offer puberty blockers under Medicaid, New York has passed an onslaught of insurance coverage over the

years. In March, 2015 they announced that Medicaid would cover some medically necessary services. Just four months later, a district judge ruled that Medicaid must include “cosmetic” procedures as well, such as breast augmentation and tracheal shaving. In 2016, the Cuomo administration decided that puberty blockers for those with gender dysphoria under the age of 18, should also be included in Medicaid coverage. Of course, the region’s four largest academic medical centers [geared up](#) with excitement – Mount Sinai, NYU Langone, Montefiore and Northwell. In 2016, New York Medicaid paid for 257 transgender procedures, more than double the amount of surgeries from 2015. Again, there has yet to be a large-scale study that examines the long-term effects of puberty blockers in the treatment of gender dysphoria, but they are all promoting it and selling it to be something that will change your life and allow you to feel like your true self.

Whereas Planned Parenthood is marketing hormones under the guise of “reproductive rights” that requires no mental health professionals, states are passing legislation saying that Medicaid must cover transition surgery, breast augmentation, and puberty blockers due to a “necessary” need under a mental disorder called gender dysphoria. Do you see how they work all ends of the spectrum to meet their needs and fill their bank accounts, some of which comes from taxpayer dollars? So if a woman who has incredible pain seeks to get a hysterectomy, it will not be covered under insurance, but if a male wishes to get breasts, Medicaid and several other insurance providers will cover it under a “mental health necessity.” How do you recognize when an agenda is being played out before your eyes? It’s that simple.

As alarming as this is with Planned Parenthood dishing out hormones like candy, it’s more terrifying that parents rights are being removed when it comes to children deciding they wish to transition. South Dakota [recently](#) killed a bill that would have protected the right of parents to refuse to consent to psychological or medical treatment for a child with gender dysphoria if the treatment “would induce, confirm, or promote the child’s belief that the child’s sex or gender identity is different from the child’s sex presented at birth..... and, no public authority or official of this state may take any adverse action against a parent for exercising this right.” **This means, that if a parent doesn’t go along with the brainwashing that’s been done to their child, and agree to puberty blockers, hormone treatment and transitioning, the child could be removed from the family due to medical neglect.** This is horrifying, and if this doesn’t open every parents’ eyes to the true agenda, then they have succeeded in blinding the masses.

According to Dr. Michelle Cretella, executive director of the American College of Pediatricians, “emergency room staff, therapists, and doctors are reporting parents to Child Protective Services (CPS) who reuse to affirm their child’s false gender.” Cretella’s concern is that the schools will begin triggering investigations into parents of children allegedly suffering from gender dysphoria who are afraid to come out to their parents, due to schools allowing students from K-12 to choose their gender identity.

This is a must read [article](#) by Margot Cleveland of The Federalist on what has been happening across state lines as it pertains to lawyers, advocates, judges, teachers, CASA, Child Protective

Services, and a system that is hell bent on getting children on puberty blockers, and tearing apart families if parents don't go along with it.

Hopefully this bill being introduced in Georgia will see the light of day. State Representative Ginny Ehrhart announced in a [press release](#) that she will be introducing the Vulnerable Child Protection Act during the 2020 legislative session. If passed, it would make it a felony to perform radical surgery on, or administer drugs to, a minor child for the purpose of attempting to change a minor's gender. If passed, this would set an important precedent. Knowing what is at stake for all of the funders and profiteers, she will be targeted by those individuals and organizations, especially Planned Parenthood, as will any who attempt to support her in this bill. That said, if you agree that this is in fact child abuse, you should speak up in support of this bill, make your voice heard loud and clear, and call your representatives to get a bill introduced in all states.

Rep. Ginny Ehrhart Announces Vulnerable Child Protection Act

ATLANTA – State Representative Ginny Ehrhart (R-Powder Springs) today announced that she will introduce the Vulnerable Child Protection Act during the 2020 legislative session. This legislation would make it a felony to perform radical surgery on, or administer drugs to, a minor child for the purpose of attempting to change a minor's gender.

"This form of child abuse is becoming a serious problem in Georgia and is evolving into a national crisis," said Rep. Ehrhart. "We are talking about children who have not reached the legal age of consent yet are being subjected to life-altering, irreversible surgeries and drug treatments that render them sterile and permanently disfigured. The psychological damage this does to innocent children must come to an end. This legislation makes such abusive actions criminal."

The Vulnerable Child Protection Act would make it a felony to perform certain medical procedures that attempt to change a minor's gender, including sterilization, mastectomy, vasectomy, castration and other forms of genital mutilation. The legislation would also prohibit the administration of medications to minors that may cause infertility, including puberty-blocking drugs to stop or delay normal puberty and cross-sex hormone therapy (administering testosterone to female children and estrogen to male children). The removal of otherwise healthy or non-diseased body parts from minors would also be prohibited.

"The Vulnerable Child Protection Act is not an attempt to infringe on the rights of adults to make lifestyle choices for themselves," added Rep. Ehrhart. "This is about children who are being abused by adults. The sterilization and castration of children has no place in a civilized society."

"This bill is of the utmost importance, because it will put a stop to the process of trying to convert a child's physical appearance to that of the opposite sex, resulting in irreversible, medically harmful changes," said Dr. Van Meter, an Atlanta-based pediatric endocrinologist. "There is no valid scientific long-term evidence that this is either safe or effective, while there is ample evidence that it is harmful. Children should be protected from medical experimentation based on wishful social theory. These children are suffering from a psychological condition without biologic basis. Using the bludgeon of threatened suicide as justification is first of all cruel, and secondly, not supported by valid published studies."

For more information on the Vulnerable Child Protection Act, please contact Rep. Ehrhart's Capitol office at 404-656-0152 or Ginny.Ehrhart@house.ga.gov.

Representative Ginny Ehrhart represents the citizens of District 36, which includes portions of Cobb County. She was elected to the House of Representatives in 2018 and currently serves on the Higher Education, Information and Audits and Regulated Industries committees.

Book Stores Are Pimping to Children

Orlando, Florida Mayor Buddy Dyer recently [allocated](#) \$3000 in taxpayer dollars for six drag queen story hour events, whereby children were to be taught to embrace gender diversity in themselves and others by adult strippers dressed in drag. An estimated 600 children are expected to participate in this program.

These are grown adults dressed in drag, some shaking their booties, and some exposing themselves such as what happened at a [library in Minnesota](#), while reading books to little children and teaching them about gender identity, while portraying this as some sense of normalcy that should be accepted by all. For if you do not get on board with these manipulative campaigns, you are prejudice and discriminatory. WRONG.

The drag queen story hour blasted through as a new trend over the past year and has been making its rounds across the country. Though many parents have stood up and raised concerns about these events, other parents have shockingly allowed their children to attend.

Though these are drag queens and not necessarily transgender individuals, it is all a push for the same outcome – gender identity confusion.

Naïve Parents and Bloggers

The bloggers and websites flooding the internet with lists of youth gender clinics is off the hook. People need to take a breath, do a little research, and put the brakes on, for they are essentially promoting the sterilization and potential suicide attempts of these individuals that need proper help. If there are individuals out there that are struggling with their gender identity, their past, or perhaps considering transitioning, and are looking for help, [Walt Heyer's site](#) is a good place to start. This man has been through it, and has helped hundreds of individuals.

Parents who have hopped on the glamour train, believing they are the hottest trendsetter out there, need to cool their jets. This isn't a laughing matter. It isn't a game. People are being hurt and children are being exploited. Watching an eight-year-old child [dressed in drag](#), shaking his booty to a bunch of perverts, isn't one of those "darling moments" either. People need to sharpen up and reclaim their moral compass.

The case of the drag queen boy: Following suit with the push for normalizing pedophilia, parents are nearly prostituting out their young boys as [drag queens](#) across the globe, while perverted old men throw money at them. They've pushed this hard on mainstream news, talk shows, videos, and social media, with complete disregard for the fact that they are exploiting young children. Pedophiles are finding themselves in what they deem a new, glorious generation where they can freely get off on young boys dancing and shaking their booties much like a stripper at a strip club does. Everyone from Elle to Good Morning America, and NBC news are flaunting these children.



By now, many people are probably familiar with the recent case of James Younger, a 7-year-old boy who was being manipulated by his mother, who coincidentally happens to be a pediatrician who trains other pediatricians. The mother began dressing him as a girl at age three, wants to put him on hormone therapy at age eight, and start him in transition therapy. This was a very public case with a lot of important details regarding how the

court system was handling this, and what this father went through to get [joint custody](#) and joint decision making regarding any treatment to his son. In an [interview](#) with his father, he detailed a lot of what he and his son endured.

The Olympics

What better place to spotlight this agenda than the Olympics? The 2016 summer games in Rio de Janeiro drew in 3.6 billion viewers. Talk about taking the gold! While all eyes should really be on the 290 coaches and officials tied to U.S. Olympic groups that have been [accused](#) of sexual misconduct since 1982, with pedophile Larry Nassar being one of the worst, they want you focused on the transgender women being accepted to compete against the women. Imagine being an athlete who has worked day and night their entire life to make it to the Olympics, only to find you are up against a man who is likely stronger, faster and has more muscle mass, who is ready to steal your gold. Transgender athletes were first [allowed](#) into the Olympics in 2004 with a set of guidelines.

This is how far they are taking this agenda for less than 1% of the population. There are now a panel of scientists involved in the decision making [process](#) for the Tokyo 2020 Games. The International Olympic Committee is supposed to be introducing stricter guidelines for transgender athletes, but the scientists are having a hard time agreeing. The discussions entail whether or not genitalia has been removed, what their testosterone levels are, hormone effect on muscle strength, and other factors.

The Education System

The education system was infiltrated long ago, from as young as kindergarteners up through universities. As more and more parents go to battle at their children's schools to fight against the LGBT and expanded sexual education teachings taking place across the country, states are trying to pass laws that stipulate it be taught in the school system, and four states have already succeeded. CPS is getting [involved](#), if parents don't go along with their child suddenly wanting to transition and get on puberty blockers. Counselors are being trained on gender dysphoria and are sometimes suggesting they transition early on in their counseling sessions. They are welcoming males into female bathrooms and locker rooms in some school districts. But the most manipulative tactics are when they have teachers and instructors telling children that "genitals don't determine your gender," and "some days you may feel like a girl, and other days you feel like a boy," while making it all seem perfectly normal and harmless, as though it is a choice. Imagine their confusion? Now imagine the culture they are trying to breed into this country. You don't have to imagine, just watch this clip below. If you thought depression and anxiety has become an epidemic in this country, you haven't seen anything yet, unless we put a hard stop to this. Teachings like this are happening all across the country and the world. This is the sales push to convert children.

Hollywood, The Entertainment Industry & Media

You can't turn to a single station, single television series, or a single movie without the LGBTQ crowd being shoved in your face. Most people, myself included, don't care what other people's sexual preferences are, but do care about people with mental disorders and want to see them heal. That said, they don't focus on the underlying issues with transgender dysphoria. Instead, they make it seem like a person was born into the wrong body, it's about sexual preferences, and they should be whisked off to the nearest hospital to be mutilated – because, that will make them feel normal. It's a tragedy what they are doing to these individuals, while glamorizing it and flaunting it across television screens and movie theaters. And of course, the mainstream news is in full support of pushing this because they are a branch from the same tree.

Charlize Theron is just one [example](#) spotlighting how she has turned her three-year-old boy into a girl simply because her child said to her one day, "I am not a boy!" Gosh, I bet he screamed in tantrums telling her he hated her at some point as well, as most children do when they are young and not in control of their emotions. Did she jump to the conclusion that he will never love her? It's sad really, because who knows if Charlize has been instructed to be one of the "models" for this agenda, or if she has chosen this level of child abuse all on her own? Hollywood creates the narratives they want you to eat up, buy up, and devour.

Back in 1994, The New York Times puts out a [piece](#) titled 'How to get a man pregnant,' and in 2014 the BBC [marveled](#) over the first "womb transplant" in Sweden. Where will this lead?

In 2015, Olympic gold medalist Bruce Jenner came out as a trans woman, changing his name to Caitlyn. The same year, after this announcement, Jenner starred in a reality television series called “I am Cait,” which was all about his gender transition. He underwent the reassignment surgery in 2017.

In 2015 IMDB put out an [article](#) with a photo list, titled ‘70 Celebrities Who Are Actually Transgender People.’

Angela Ponce competed in the Miss Universe contest as the first transgender to compete, and it made big [headlines](#) worldwide across every major news source. This is the epitome of “glamorizing.”

Victoria’s secret is [campaigning](#) trans models, as is [ELLE](#) magazine, and numerous other magazines. They are making it a trend to normalize it. Remember, many transgender individuals are suffering from depression from past traumas and 40% of them have attempted suicide. Yet, these magazines are glamorizing it.

Coca-Cola is [flaunting](#) a commercial in other countries with a Sprite ad featuring a mom putting makeup on her son, while grandma dresses him in a flashy short dress and sends him off with blue hair, and dad takes him and his boyfriend to an LGBT event.

George Soros’s Open Society Foundation

OPEN SOCIETY
FOUNDATIONS

Voices

LGBTI

The Open Society Foundations seek to combat discrimination by empowering lesbian, gay, bisexual, transgender, and intersex communities to promote and defend their human rights.

In a 2004 [interview](#) clip with George Soros, a mastermind behind many socialist agendas, he spoke about improving society by running subversion and disruption experiments, while concluding “it was a lot of fun.”

The Equality Institute is preaching that “people of all genders can fall pregnant.”

Instead of saying:

Pregnant women



Try using the phrase:

Pregnant people

**because people of all genders can
fall pregnant.**

Source: @zralexkapitan

The UN-GLOBE United Nations has long been a part of pushing this agenda.



UN-GLOBE | UN-GLOBE marches in the 2019 World Pride parade in celebration of lesbian, gay, bisexual, transgender, questioning/queer and intersex (LGBTQI) people everywhere.

The ACLU [suggests](#) men get pregnant and have periods.



There's no one way to be a man.

Men who get their periods are men.

Men who get pregnant and give birth are men.

Trans and non-binary men belong.

[#InternationalMensDay](#)

1:46 PM · Nov 19, 2019 · [Twitter for iPhone](#)

In fact, this tweet was so outlandish, that Tucker Carlson and Chadwick Moore discussed it on Fox News.

Planned Parenthood [suggests](#) that hormone treatment can help you overcome your distress, while also assuring you that you will be on hormone therapy for the rest of your life.

Will I always have to take hormones?



Yes, in order to maintain the effects of hormone therapy, you'll need to take them for the rest of your life.

What are the benefits of hormone therapy?



Hormone therapy can make you feel more at ease with yourself, both emotionally and physically. You may be experiencing discomfort because you are not happy with your appearance, or in your gender role. Perhaps your appearance and your gender role are in conflict with your inner sense of gender identity. If this is how you are feeling, hormone treatment may help you to overcome your distress.

How expensive is hormone therapy?



PPGWNl accepts most major insurances and can help you understand the costs of services. Our financial counselors will work with you to determine how to pay for hormone therapy, whether you have insurance or not. We provide care to everyone, regardless of your ability to pay.

American psychiatric association states that gender dysphoria is a mental disorder, originally called gender identity disorder. It is a diagnosis, yet Planned Parenthood doesn't require patients to see a mental health professional before prescribing hormones that will forever effect their life.

AMERICAN
PSYCHIATRIC
ASSOCIATION



Gender Dysphoria

In the upcoming fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5), people whose gender at birth is contrary to the one they identify with will be diagnosed with gender dysphoria. This diagnosis is a revision of DSM-IV's criteria for gender identity disorder and is intended to better characterize the experiences of affected children, adolescents, and adults.

Respecting the Patient, Ensuring Access to Care

DSM not only determines how mental disorders are defined and diagnosed, it also impacts how people see themselves and how we see each other. While diagnostic terms facilitate clinical care and access to insurance coverage that supports mental health, these terms can also have a stigmatizing effect.

DSM-5 aims to avoid stigma and ensure clinical care for individuals who see and feel themselves to be a different gender than their assigned gender. It replaces the diagnostic name "gender identity disorder" with "gender dysphoria," as well as makes other important clarifications in the criteria. It is important to note that gender nonconformity is not in itself a mental disorder. The critical element of gender dysphoria is the presence of clinically significant distress associated with the condition.

Characteristics of the Condition

For a person to be diagnosed with gender dysphoria, there must be a marked difference between the individual's expressed/experienced gender and the gender others would assign him or her, and it must continue for at least six months. In children, the desire to be of the other gender must be present and verbalized. This condition causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Gender dysphoria is manifested in a variety of ways, including strong desires to be treated as the other gender or to be rid of one's sex characteristics, or a strong conviction that one has feelings and reactions typical of the other gender.

The DSM-5 diagnosis adds a post-transition specifier for people who are living full-time as the desired gender (with or without legal sanction of the gender change). This ensures treatment access for individuals who continue to undergo hormone therapy, related surgery, or psychotherapy or counseling to support their gender transition.

Gender dysphoria will have its own chapter in DSM-5 and will be separated from Sexual Dysfunctions and Paraphilic Disorders.

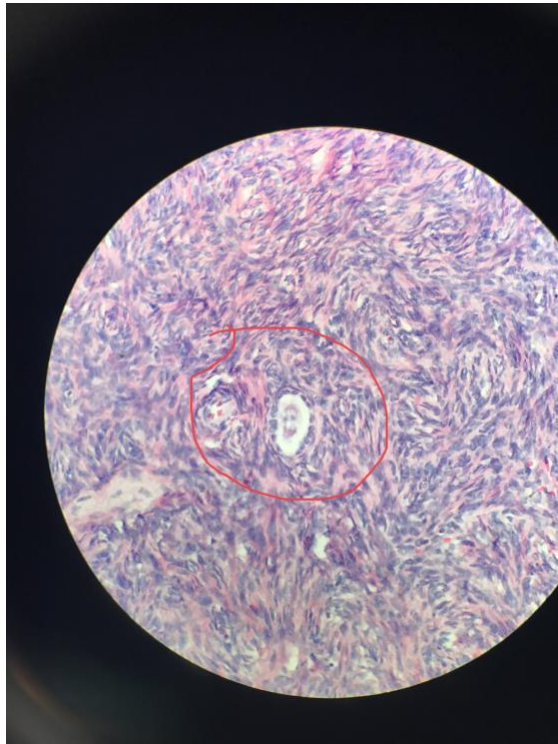
Need for Change

Persons experiencing gender dysphoria need a diagnostic term that protects their access to care and won't be used against them in social, occupational, or legal areas.

When it comes to access to care, many of the treatment options for this condition include counseling, cross-sex hormones, gender reassignment surgery, and social and legal transition to the desired

What's Their End Game?

Simple. To destabilize this country, divide and conquer, sterilize in every fashion possible, create a gender identity crisis, breed socialism, all while simultaneously relishing in their fantastical financial gain while aiming toward their one world governance they hope to achieve by 2030. It is the same end game as most of their agendas. I did a report not long ago titled '[30 BIG Hoaxes & Lies Perpetrated on Americans](#)'. The 2030 agenda is not a joke. They openly speak about this. They want a one world governance with the UN in control. People must open their eyes, especially if you are a parent, because they are gunning for your children.



This is a slide of a single slice of tissues of both ovaries from an 18-year-old girl who had her ovaries, fallopian tubes, uterus and cervix removed for a gender reassignment surgery. A primary follicle with one of the eggs appears in this slide. This is an egg that will never have the chance at being fertilized since she is completely sterile. Whether she was persuaded, manipulated, or consciously made this decision, at age 18, it is now permanent and irreversible. THIS is the agenda they are pushing.

Hundreds of transgender people [wish](#) they could go back to their birth sex, while others suffer from depression and suicidal thoughts after surgery. Former transgender woman Walt Heyer, who transitioned back as well as he could, says that hundreds of transgender people he was worked with have [regret](#) after their surgery. 40 percent of transgender people attempt suicide with a larger

amount happening after surgery. Puberty blockers can not only sterilize, they have horrific side effects including seizures and severe psychiatric issues and there has not been a large-scale study to show long-term effects. Despite all of this, the funders and profiteers, and all of those involved with this agenda continue to push the envelope, and rarely, if at all, talk about the negative impact. What does this tell you?

Remember what Dr. Paul McHugh, a distinguished professor of psychiatry and behavioral sciences at Johns Hopkins University, recently [told](#) the College Fix:

"Many people are doing what amounts to an experiment on these young people without telling them it's an experiment. You need evidence for that and this is a very serious treatment. It is comparable to doing frontal lobotomies."

I believe it will be something like how we think of eugenics now. We will come to regret it when we discover how many of the young people that were injured regret it themselves.”

This is child abuse, and it's already headed toward parental abuse by removing parents' rights, and potentially removing their child from their home. Let children be children. Most girls I know, including myself, were tomboys, and sometimes little boys like to try on their mom's or sister's clothes just for fun. They are children! This is the brainwashing the system has seeded minds with... glorifying it, making it glamorous and trendy, creating mass confusion in children by lying to them about genitals through the education system, their cell phones, across tv screens, and in movie theaters.

If Americans do not stand up, speak up, and protect the children, we have no one but ourselves to blame. They are in the midst of removing children from their homes if parents are unwilling to inject their children with hormones that will sterilize them. Sound familiar? Yes, it's very much like the vaccine industry. This is child abuse at the highest level, and they are trying to force it on parents to be the villains. My God, what has become of this country? Forced [vaccines](#), forced hormones, and [full term abortions](#), are sterilizing, mutilating, and murdering children. The writing on the wall has always been there, it's time to wake up and see it. It's time to put a stop to this. This isn't about not accepting transgender people, this is about not accepting how they are being mistreated, and how they are being exploited to manipulate children. Do not let labels of "transphobic," "bigot," or "discrimination" deter you from your mission – save the children.

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