



HB 1209

OUR MISSION

To restore, protect, and advance the rights of women and girls through legal argument, policy advocacy, and public education

OUR VISION

Total liberation of women and girls from all forms of sex-based oppressions, including gender identity, male violence, commercial sexual exploitation, and reproductive coercion

OPPOSE UNLESS AMENDED

Women's Liberation Front OPPOSE UNLESS AMENDED HB 1209 which prohibits conversion therapy to change a person's sexual orientation or "gender identity."

Women's Liberation Front is a national nonpartisan 501(c)(3) nonprofit that works to restore, defend, and advance the rights of girls and women. We staunchly support the rights of same-sex attracted women to exclude men from their sexual and romantic relationships and live freely without harassment, coercion, intimidation, or violence for excluding men. Under the provisions to prohibit conversion therapy directed at women to force them to comply with social expectations and the sexual demands of men, we strongly support HB 1209.

However, we oppose validating the concept of "gender" ("sex stereotypes"). By designating and socially enforcing certain traits and preferences as though they are innate and specific to the sexes, girls and women who do not comply with sex stereotypes, including same-sex attraction, are socially penalized and made targets of harassment and abuse. We strongly oppose the advancement of "gender ideology" or catering to the concept of "gender identity" for taking the concept of "gender" further by declaring one's adherence to these sex stereotypes is what truly makes you a man or a woman. A man imposing beliefs about women onto himself does not make him a woman any more than a woman adopting the stereotypes of men make her a man. Neither a man or a woman can know what it "feels like" to be the opposite sex, so any "feelings" they have about it are not based on anything known to the person. Laws that cater to "gender ideology" and "gender identity" emphasize the "validity" of gender roles upon the public and dehumanizes girls and women by reducing half the population into a costumed "identity" instead of a material condition that deserves consideration in law.

We understand that since the inclusion of "T" in the LGB acronym, much has been conflated between sexual orientation and "gender identity," however these are two very separate things that require separate considerations. Sexual orientation involves attraction to one or both sexes without any medical or surgical interventions necessary to live a healthy, happy life. "Gender identity" is based on non-quantifiable feelings about oneself that requires public participation with one's self-image based on stereotypes about the sexes and involves further public compliance by prioritizing the comfort, advantage, and pleasure of boys and men who identify as girls and women in public spaces, sports, and prisons; and emotionally blackmailing the public regarding the "need" for medical and surgical interventions lest trans-identified people be driven to suicide, despite even Chase Strangio admitting that heightened rates of suicidality for not being able to transition is a myth.¹



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Regarding HB 1209 specifically, the 2009 140-page report on research by the American Psychological Association² cited in the preamble of this bill only addresses the harmful nature of conversion therapy as applied to sexual orientation and does not address “gender identity.” The adoption of a 7-page resolution concerning “gender identity”³ twelve years later does not merit equal weight in consideration of the supposed harms of questioning one’s “gender identity,” especially when research to support “gender affirming care” has been manipulated,⁴ systematic reviews reveal the studies used to support the alleged benefits of “gender affirming care” are of poor quality and present weak evidence,^{5,6,7,8,9} and further studies warn against the limitation of WPATH’s standards of care.¹⁰ Conflating the needs of sexual orientation with “gender identity” may be because the credibility of sexual orientation is far more substantiated and harmless than the concept of “gender identity” and the “care” thereof, and “forced teaming” of these issues has been necessary to advance a concept that has no validity.

In a therapy environment, the inability of being able to question why someone feels they are the opposite sex leads to irreversible harm. Earlier this year, a 22-year-old woman, Fox Varian, who identified as a boy as a teenager and has since detransitioned, won \$2 million over medical malpractice.¹¹ Varian’s mother had been told by her daughter’s psychologist, Kenneth Einhorn, that if she did not consent to the surgery, her daughter would commit suicide. Varian’s mother is quoted as saying:

“[Einhorn] was just so emphatic, and pushing and pushing, that I felt like there was no good decision. I think it was a scare tactic. I don’t believe it was malice, I think he believed what he was saying — but he was very, very wrong.”

Lawyers argued in this case that the practitioners should have made sure Varian didn’t have other psychological conditions like ADHD, autism, depression, or body dysmorphia before suggesting surgery, but to consider those other possibilities would constitute “conversation therapy” by many practitioners.¹² Many outlets condemn “gender exploratory therapy” as “conversion therapy” because it dissuades people from medical or surgical interventions,^{13,14} but if the only alternative is “gender affirming care” without question, then there are no safeguards to ensure that people will not regret transition.

Sexual orientation doesn’t require medical and surgical interventions. The ability to live freely without socially approved and enforced concepts of “gender” including one’s sexual attraction to the same sex should be free from harmful interventions. On this, Women’s Liberation Front wholly supports.

“Gender identity” requires the world to classify some males and females as the opposite sex, never question their assertions about their “gender identity,” and promotes medical and surgical interventions that result in lifelong health complications. With such consequential implications, erring on the side of caution ought to have been the established precedent. Since merely questioning one’s



“gender identity” constitutes as “conversion therapy” and evidence does not support the benefits of “gender affirming care” for anyone, we cannot support this provision in HB 1209.

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Women’s Liberation Front recommends Maryland’s general assembly protect sexual minorities by banning the practice of conversion therapy concerning sexual orientation since research and evidence clearly demonstrates the need and women and girls should be free to exclude men from their romantic and sexual relationships. We further urge the state’s general assembly to reassess the needs of people who may be suffering psychological distress due to their “gender identity” and acknowledge the limitations of policies that do not allow patients to at least consider what their underlying issues are before transition. If you cannot so much ask, you cannot truly know why someone may want to be the opposite sex. Malpractice suits are sure to follow along with lifelong consequences for patients.

Women’s Liberation Front OPPOSE UNLESS AMENDED HB 1209, and we sincerely urge Maryland’s general assembly to reflect on the differing needs of lesbians and bisexual women versus the needs of women and girls who want to escape their biological sex.

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Sincerely,

Women’s Liberation Front

¹ Sapir L. ACLU Attorney Confesses: Transgender-Suicide Claim is a Myth. *City Journal*. December 4, 2024. <https://www.city-journal.org/article/aclu-attorney-confesses-transgender-suicide-claim-is-a-myth>

² Glassgold JM, Beckstead L, Drescher J, et al. Appropriate Therapeutic Responses to Sexual Orientation. *American Psychological Association*. 2009. <https://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>

³ *American Psychological Association*. APA RESOLUTION on Gender Identity Change Efforts. February 2021. <https://www.apa.org/about/policy/resolution-gender-identity-change-efforts.pdf>

⁴ *The Economist*. Research into trans medicine has been manipulated. June 27, 2024. <https://www.economist.com/united-states/2024/06/27/research-into-trans-medicine-has-been-manipulated>

⁵ Cass, H. (2024). Independent review of gender identity services for children and young people: *Final report*. <https://cass.independent-review.uk/home/publications/final-report>

⁶ Zepf FD, König L, Kaiser A, Ligges C, Ligges M, Roessner V, Banaschewski T, Holtmann M. Beyond NICE: Aktualisierte systematische Übersicht zur Evidenzlage der Pubertätsblockade und Hormongabe bei Minderjährigen mit Geschlechtsdysphorie [Beyond NICE: Updated Systematic Review on the Current Evidence of Using Puberty Blocking Pharmacological Agents and Cross-Sex-Hormones in Minors with Gender Dysphoria]. *Z*



Kinder *Jugendpsychiatr Psychother.* 2024;52(3):167-187. German. doi: 10.1024/1422-4917/a000972. Epub 2024 Feb 27. PMID: 38410090.

⁷ Department of Health and Human Services. Treatment for Pediatric Gender Dysphoria Review of Evidence and Best Practices. November 19, 2025.

<https://opa.hhs.gov/sites/default/files/2025-11/gender-dysphoria-report.pdf>

⁸ Palveluvalikomia. Recommendation of the Council for Choices in Health Care in Finland (PALKO / COHERE Finland). 2020.

https://segm.org/sites/default/files/Finnish_Guidelines_2020_Minors_Unofficial%20Translation.pdf

⁹ The Swedish Agency for Social and Medical Evaluation. Hormone therapy for gender dysphoria – children and adolescents. February 22, 2022. Accessed February 21, 2026.

<https://www.sbu.se/342>

¹⁰ Zhang Y, Januś D, Kaltiala R, et al. Quality of the World Professional Association for Transgender Health Guideline Standards of Care 8: An Appraisal Using the AGREE II Instrument. *Archives of Sexual Behavior.* February 19, 2026. <https://doi.org/10.1007/s10508-025-03399-6>

¹¹ Galvin S. Detransitioner wins \$2 million against New York docs who pushed double mastectomy. *New York Post.* January 31, 2026. <https://nypost.com/2026/01/31/us-news/detransitioner-wins-2-million-against-new-york-docs-who-pushed-double-mastectomy/>

¹² Ashley F. Interrogating Gender-Exploratory Therapy. *Prospectives on Psychological Science.* Vol. 18, Iss. 2. September 6, 2022. <https://doi.org/10.1177/17456916221102325>

¹³ Santoro H. How Therapists Are Trying to Convince Children That They're Not Actually Trans. *Slate.* May 2, 2023. <https://slate.com/technology/2023/05/gender-exploratory-therapy-trans-kids-what-is-it.html>

¹⁴ Shatto R. What is 'Gender Exploratory Therapy,' the HHS's alternative to gender-affirming care? *Pride.* August 25, 2025. <https://www.pride.com/answers-advice/health/what-is-gender-exploratory-therapy>

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