

Proud and Free, United for Trans Power

Understanding the Skremetti Decision

SCOTUS Ruling: On June 18th the US Supreme Court issued a 6-3 decision to uphold Tennessee's SB1, ruling that SB1 does not draw a sex-based (or a trans status-based) line and does not violate the Equal Protection Clause of the 14th Amendment. Therefore the Tennessee ban on gender affirming care for transgender minors will remain in effect.

- The case was originally presented as a sex-based discrimination case, which would require heightened scrutiny from the Court.
- SCOTUS refused to consider Plaintiff arguments regarding sex-based discrimination or parental rights.
- SCOTUS chose to approach the case as an issue of age and medical care, which allowed the Court to lower their scrutiny.
- The precedent this sets is dangerous.

Implications:

- Makes it harder to challenge similar bans (ex., SB14 in Texas)
- Emboldens anti-trans legislative agendas nationwide.

What It Doesn't Do:

- Does *not* impact states where GAC is still legal. It does not require any state to ban GAC for minors.
- Does *not* affect litigation challenging Executive Orders rooted in animus or unconstitutional overreach.

Federal & State Context

- **Executive Order 14187: Protecting Children From Chemical and Surgical Mutilation, tailored for social workers supporting transgender identities:**
 - Ban on gender-affirming interventions for minors- Declares it U.S. policy not to “fund, sponsor, promote, assist, or support” any “transition” of individuals under age 19, explicitly including puberty blockers, cross-sex hormones, and surgeries
 - Definitions- Defines “child” as anyone under 19 and categorizes puberty blockers, sex hormones, and surgical procedures under “chemical and surgical mutilation”
 - Enforcement across federal agencies- Directs HHS and other departments to rigorously enforce laws against pediatric gender-affirming care, rescind prior supportive guidance, and suspend federal funding to entities providing it

- Whistleblower protections introduced- Encourages reporting of “chemical and surgical mutilation” of minors, clarifies HIPAA rules and aims to shield whistleblowers from retaliation
- Triggering legal, clinical, and administrative reactions- Prompted hospitals to pause gender-affirming care for youth; faced legal challenges and state-level resistance; courts issued injunctions blocking funding withdrawals
- This ban is currently being challenged, and is not enforced. However, it has already had major implications across the country as GAC clinics have closed and some agencies have prematurely complied.
- **Executive Order 14168:** "Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government"
 - Strict binary definition of sex: Declares “sex” immutable—either biologically male or female “at conception”—and states that “gender identity” is not synonymous with sex
 - Federal terminology overhaul: Requires all federal agencies to replace references to “gender” with “sex” in statutes, guidance, communications, form templates, and communications
 - Transgender exclusion in programs & facilities: Orders that transgender identities lose federal recognition—banning gender self-ID on passports, prohibiting access to single-sex federally funded spaces (e.g., shelters, prisons) based on identity—and halting funding for “gender ideology” and gender-affirming care
 - Enforcement and legal review: Directs the Attorney General to revisit Title VII protections post-Bostock, and agencies (like HHS, State, DHS, OPM) to update ID documents and personnel records to reflect sex assigned at birth
 - Broad rollback of past policies: Mandates removal of references to gender identity from federal materials (e.g., CDC, HUD, NIH, DOJ), rescinds protections under Title IX, housing nondiscrimination, DEI efforts, and dissolves related policy bodies
 - This EO also mandates sex assigned at birth to be the sex/gender designation on all passports: This is currently being challenged, and [a judge recently blocked this policy](#). For updated information and guidance on passports view this:[Identity Document Guidance for Transgender, Nonbinary, Gender-Nonconforming, and Intersex People - Lambda Legal](#)
- **HHS Report:** The Skrametti decision came after the May 1, 2025, the Department of Health and Human Services (HHS) released [Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices](#), a report issued following the Executive Order, “[Protecting Children From Chemical and Surgical Mutilation](#),” which directed the HHS Secretary to publish an evidence review related to gender dysphoria in young people within 90 days. This report represents a significant escalation in the Trump administration's systematic efforts to undermine transgender rights. Framed as a scientific review, the report promotes "exploratory therapy", a rebranded form of conversion therapy, while dismissing the well-established benefits of gender-affirming care. Promotes “exploratory therapy” (a form of conversion therapy) under the guise of

science. **For more on this report and its implications, check out our guidance on the [HHS Report on Gender Affirming Care](#).**

- **Federal Budget Bill:** At the time of the June 30th live discussion event, the “Big Beautiful Bill”, H.R. 1, was in the Senate being reviewed by the Senate Parliamentarian. At that time, the Senate’s proposed text for their version of H.R. 1 [maintained the House bill’s provision](#) blocking coverage for gender-affirming care for Medicaid and CHIP recipients of all ages, but the Senate proposal [did not contain](#) the House’s provision allowing Affordable Care Act plans to stop covering gender-affirming care.
 - The Senate Parliamentarian is responsible for reviewing the reconciliation bill and making sure that there are no violations of the Byrd Rule, that everything in there is appropriate for a budget reconciliation bill. As of June 30th, she had slashed 12 different aspects of this bill because they weren’t budget related things. Things like trying to make Farm Bill changes within this budget reconciliation bill, trying to change environmental legislation, trying to sell off federal land. And, the legislation struck the ban on Medicaid coverage for gender-affirming care after the Senate parliamentarian found it did not comply with the Byrd Rule. **You can view more detail of what was being scrutinized in the bill under the Byrd Rule here: [US Senate Committee on Budget](#)**
 - As of July 4th, the bill has become law, and the final iteration fo the bill does not include the ban on Medicaid coverage for gender-affirming care . **For detailed information on this bill, you can use [GOVtrack.us](#), [Ballotpedia](#), or [Congress.gov](#).**
- **Texas Legislation:** The Skrmetti case itself does not have any direct impact on existing laws in Texas. However, it contributes to an already dangerous environment in the precedent it sets.
 - SB14,became law in 2023 and is the State of Texas ban on gender-affirming care for transgender minors. Like the Tennessee bill in the Skrmetti case, it still allows access to puberty blockers and hormone therapy for cisgender minors, but not transgender minors.
 - **Senate Bill 1257:** Requires insurance providers to cover any adverse consequences of gender-affirming care—such as detransition procedures or recovery treatments. **Why it’s harmful:** Although framed neutrally, insurers could respond by dropping gender-affirming coverage altogether, making it harder and more expensive for trans adults to access care.**Status:** Signed into law. Effective September 1.
 - **House Bill 1106:** Amends the family code to **exclude** a parent’s refusal to affirm a child’s gender identity or sexual orientation from the definition of child abuse. **Why it’s harmful:** This legal loophole could enable parents to use abusive “conversion” tactics under parental rights protections.**Status:** Signed into law. Effective September 1.
 - **Senate Bill 412:** Removes a legal protection for parents, teachers, and librarians who provide material deemed “harmful to minors” in an educational context. **Why it’s harmful:** Could criminalize librarians and educators who support LGBTQ+

- youth by providing affirming resources. **Status:** Signed into law. Effective September 1.
- **House Bill 229 (“Women’s Bill of Rights”):** Defines “man” and “woman” strictly in biological terms—“woman” as someone with ova and “man” as someone who can fertilize ova—and mandates all state documents (IDs, certificates) reflect that definition. **Why it’s harmful:** Nearly 120,000 Texans could have gender markers reverted against their identity, increasing daily discrimination. **Status:** Signed into law. Effective September 1.
 - **Senate Bill 12:** Bans all “DEI duties” in K-12 and charter schools, including any policies, training, or hiring practices that reference race, ethnicity, gender identity, or sexual orientation. Also prohibits school-sponsored LGBTQ+ clubs. **Why it’s harmful:** Critics call it unconstitutional censorship and erasure of LGBTQ+ student voices. **Status:** Signed into law. Effective September 1. Lawsuit planned by the ACLU and student groups.
 - **Senate Bill 11:** Bans discussion of gender identity, sexual orientation, diversity, equity, and inclusion in public and charter schools. Requires parental notification for identity-related matters, forbids staff from assisting gender transitions, and restricts student support programs like GSAs. **Why it’s harmful:** Critics argue it creates unsafe educational environments and violates free speech and equal access rights. **Status:** Signed into law. Effective September 1. ACLU and Students Engaged in Advancing Texas plan a lawsuit .
 - **Senate Bill 10:** Requires public schools to display the Ten Commandments prominently in classrooms. **Why it matters:** While not explicitly LGBTQ-focused, it reflects the broader “culture war” agenda tied to parental and religious control over schools. **Status:** Signed into law. Effective September 1.
 - **Other notable bills that failed:**
 - **House Bill 4311** – would have mandated conversion therapy training for all mental health professionals.
 - **House Bill 4710** – would have made it illegal to transport a minor across state lines to facilitate gac.
 - **Senate Bill 18** – would have banned drag storytimes in public libraries.
 - **Senate Bill 2920** – would have treated gender-affirming hormones as illegal steroids in school sports.
 - **House Bill 3817** – sought to make “gender identity fraud” (identifying with a gender different from biological sex) a felony. Died in committee.
 - **The FURRIES Act (HB 4814)** – targeted non-human role playing in schools; widely criticized as a proxy for anti-LGBTQ culture policing
 - **Summary of Impact for 2025 Texas Legislative session**
 - **Health access threatened:** SB 1257 could lead insurers to drop gender-affirming care.
 - **Legal erasure:** HB 1106 weakens child abuse protections; HB 229 aims to erase gender identity in documents.
 - **Educational censorship:** SB 12 and SB 11 severely limit LGBTQ+ expression, support, and discussion in K-12.

- **Cultural/religious shift:** SB 10 reinforces religious priorities in public education.
 - **Failed extremist measures:** Some more dramatic proposals were blocked, but they signal ongoing legislative hostility.
-

Navigating Affirming Practice

Supporting Parents Who Don't Affirm

- **Start with Shared Goals:** Prioritize the Child's Well-Being: Focus on the parent's existing desire to protect and support their child. Frame conversations around **mental health, safety, and family connection**, rather than ideology or identity labels. (Ex: *"I know you want your child to be happy and safe. Let's explore how we can support that, even if you're still working through your feelings about gender."*)
- **Introduce Education Gradually, Without Overwhelm:** Gently correct misinformation by offering **bite-sized, evidence-based resources** (e.g., APA, AAP, and NASW guidelines). Avoid shaming or debating. Instead, offer reflection. (Ex: *"Many parents start with questions. Can I share a brief article that addresses common myths?"*)
- **Name Fear and Loss Without Justifying Harm:** Many non-affirming responses are rooted in fear or grief. Validate the emotion without validating rejection, then re-center the child's autonomy and wellbeing. (Ex: *"It's okay to grieve the future you imagined, but your child needs you now, as they are, not who you hoped they'd be."*)
- **Highlight the Long-Term Impact of Rejection vs. Affirmation:** Use research to show the consequences of rejection, such as increased depression, suicidality, homelessness, and the benefits of acceptance, such as stronger family bonds, better mental health. (Ex: *"Even small signs of support, like using a chosen name, can reduce suicide risk by over 50%."*)
- **Encourage Small Steps Toward Connection:** Suggest tangible actions like using correct pronouns privately, attending a support group, or writing a note of love that doesn't focus on gender. Emphasize that **progress, not perfection, matters.** (Ex: *"You don't have to understand everything today. But what's one way you could show love this week, just as a parent?"*)
- **Explore the Concept of a Good Life:** Help the client explore what their child's vision of a good life might be, and how it might differ from the parent's. "What would it look like to 'live a good life'?" Then ask "What would your child living a good life look like" to the parent? Then a prompt could be "How might your child answer that question about their own life?". This type of prompt is an opportunity for the parent to
- The Transgender Law Center has extensive research focused on effective messaging, specifically on the toughest audience, unsupportive fathers. highlights the following points:
 - Their research Respect-focused messaging > kindness framing. Calling on respecting others for who they are, transgender or not, more effectively pushes

back on opposition messaging that seeks to position GAC as a threat to all children;

- For dad's who are approaching being persuadable, the "bully" narrative is also effective- dads strongly value ensuring everyone can stand up for themselves, which can be raised in contrast to bullies who try to control and silence.
- Connect across issues: frame attacks on trans youth in the context of the broader agenda of obstructing freedom, first targeting the most vulnerable groups, which includes our own children.
- For more on messaging, you can examine the Transgender Law Center's results PDF on [American Dads' Views Towards Transgender Freedom](#) and [Affirming Social Proof](#).

Supporting Trans Youth

- **Therapists are still legally permitted** to provide affirming mental health care.
- Ensure your space is visibly and consistently affirming.
- Validate the fear and grief clients may hold, while also highlighting agency, community, and resistance.

Supporting Trans Adults

- **Know the legal landscape**—especially shield laws and telehealth options.
- **Maintain a vetted referral list** of affirming providers.
- **Use informed consent models**, not gatekeeping.
- **Prepare care plans** for legal/safety protection and support community engagement.

Clinical & Ethical Guidance

- [NASW-TX Best Practices for SOGIE clients](#)
- **WPATH Standards of Care v8**
- **AAP & AMA Statements** on GAC
- **Transgender Law Center**: Persuasion research & legal info
- **Lambda Legal & ACLU**: Legal rights, protections, whistleblower support

Referral & Care Access

- **Telehealth Providers** in shield law states (CA, NY, CO)
- **Mutual Aid Funds** (e.g., Trans Lifeline, For The Gwols)
- **Gender-Affirming Hormone Clinics** with informed consent models
- **Trans-Affirming Therapy Collectives** (often sliding-scale)

Action Toolkit for Social Workers

Low-Risk Actions

- Document vaguely but ethically.
- Keep whisper networks for affirming referrals.
- Educate quietly (e.g., host CEUs under broader mental health topics).

Medium-Risk Actions

- Advocate internally for policy change.
- Join or form “resistance pods.”
- Show up for trans youth at school boards and legislatures.

High-Risk Actions (Proceed with Support)

- Write support letters for HRT/surgeries (within clinical standards).
- Whistleblow unethical practices (coordinate with ACLU, TLDEF).
- Assist clients navigating interstate care access (share info so they know what is available to them, not directives).

Legal Considerations for Interstate Navigation

- Sharing info = legal; coordinating care = potentially risky.
- Document ethically.
- Consult legal professionals when in doubt.

For the full detailed breakdown of low, medium, and high-risk actions, check out the final section in our guidance on the [HHS Report on Gender Affirming Care](#).

Additional resources & links

Recommendation for Trans-Focused News:

[Erin in the Morning](#)

Book Recommendation:

[Thriving Through Transition: Self-Care for Parents of Transgender Children](#)

<p>Mutual Aid:</p> <ul style="list-style-type: none"> Fort Worth Food Not Bombs The Oak Cliff Veggie Project Dallas Sandwich Sunday 	<p>LGBTQ+ Centers and Orgs:</p> <ul style="list-style-type: none"> Transgender Education Network of Texas - Parent Resources South Texas Equality Project
--	---

Food Not Bombs DTX	Amarillo Area Transgender Advocacy Group
Mutual Aid Diabetes	Panhandle Pride
Trans Youth Emergency Project	Out Youth - Austin
North Texas TRANSportation Network	Coastal Bend Pride Center - Corpus Christi
Queer Trans Project Build-A-Queer Kits	Borderland Rainbow Center - El Paso
Queer Trans Project Flight Assistance	Finn's Place - Fort Worth
Dem Bois Inc - Grants	Montrose Center - Houston
Dem Bois Inc - Care Packages	Outwest Lubbock
Nicolas Gogan Foundation - Trans Mutual Aid	Highland Lakes Equality Center
Food Not Bombs Houston	Pride Center West Texas
Food Not Bombs Austin	Pride Center San Antonio
	Tyler Area Gays
	The Normal Anomaly Initiative - Houston

Check out our [NASW- Texas SOGIE Committee Texas Local, Statewide & National SOGIE Resources](#)

Connect with Us!

We are happy to answer additional questions you might have.

Remember, you are not alone in this work!
We must move forward as a community that protects, uplifts, and celebrates our trans clients and colleagues.

Contact us at sogie.naswtx@socialworkers.org