



September 25, 2024

Via NIH FOIA Public Portal

NIH FOIA Office
1 Center Drive, MSC 0188
Bethesda, MD 20892-0188

Freedom of Information Act Request: Youth “Gender-affirming Care”

Dear FOIA Officer:

America First Legal Foundation is a national, nonprofit organization working to promote the rule of law in the United States, prevent executive overreach, and ensure due process and equal protection for all Americans, all to promote public knowledge and understanding of the law and individual rights guaranteed under the Constitution and laws of the United States. To that end, we file Freedom of Information Act (FOIA) requests on issues of pressing public concern, then disseminate the information we obtain, making documents broadly available to the public, scholars, and the media. Using our editorial skills to turn raw materials into distinct work, we distribute that work to a national audience through traditional and social media platforms. AFL’s X page has over 273,000 followers and the X page of our Founder and President has over 735,000 followers.

I. Background

The Biden-Harris White House has promoted “gender-affirming” care for children and adolescents.¹ New documents from the National Institutes of Health (NIH) obtained by Children’s Health Defense (CHD) show how reckless it is to promote irreversible, life-changing medical interventions without regard for the potential long-term consequences of giving children and adolescents puberty blockers, sex hormones, and surgical operations.

In the first grant uncovered by CHD, NIH awarded \$9.7 million to Children’s Hospital of Los Angeles (CHLA) to study the impact of early medical treatment in transgender

¹ *FACT SHEET: Biden-Harris Administration Advances Equality and Visibility for Transgender Americans*, WHITE HOUSE (Mar. 31, 2022), <https://perma.cc/JNB8-4DNB>.

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youth.² The CHLA study highlights the “scant evidence-base currently guiding the clinical care of transgender youth.”³ Existing studies had focused on the impact of “gender-affirming” care on adults, but until this study, “no known US studies have examined similar outcomes among transgender youth with gender dysphoria.”⁴ At the time of the CHLA study, no U.S. data had been collected on the longer-term physiological impact on transgender youth initiating puberty blockers during early puberty, while some studies had already reported lower bone mineral density for children taking puberty blockers.⁵ Similarly, no data beyond 24 months had been published in the United States “on longer-term *physiological effects*” on transgender adolescents taking sex hormones, “particularly under the age of 16,” while previous studies had shown a “higher incidence of cardiovascular events” in adults taking sex hormones.⁶ To collect data, this NIH-funded study set out to “enroll 138 early pubertal youth participants” in the puberty-blocker cohort, ages 8 through 16, who are either receiving “or planning to” receive “gender-affirming” care.⁷ “Youth of color with an emphasis on non-Hispanic/Latinx youth” (e.g., Black or Asian) was an additional inclusion criterion for enrolment.⁸ The research also “launched a selective recruitment strategy specifically to increase participation of youth of color” by opening another site in Oakland, California.⁹ The CHLA researchers also provided transportation assistance and increased monetary incentives over time.¹⁰

In the second grant uncovered by CHD, NIH awarded \$2.8 million to Visiting Nurse Service of New York (VNSNY) to study the long-term healthcare needs of “gender minority” individuals after surgery, their physical adjustment during this phase of their identity development, their quality of life, and long-term physical and emotional wellbeing.¹¹ Similar to the CHLA study, the VNSNY study highlighted the “dearth of evidence on the healthcare needs of [transgender individuals] after surgery” and the “significant gap in the current evidence on best practices.”¹²

² *Grant to Children’s Hospital of Los Angeles*, USASPENDING.GOV, <https://perma.cc/RM5V-7LAU>.

³ *Grant to Children’s Hospital Los Angeles* (available at *NIH 60480 documents – Part 1 of 3*, at 61, AM. FIRST LEGAL, <https://perma.cc/3LNH-ZXBG>).

⁴ *Biographical Sketch, Marco Armando Hidalgo, Assistant Professor of Clinical Pediatrics/Attending Faculty Psychologist* (available at *NIH 60480 documents – Part 1 of 3*, at 105, AM. FIRST LEGAL, <https://perma.cc/3LNH-ZXBG>).

⁵ *PHS 938 Research Plan* (available at *NIH 60480 documents – Part 1 of 3*, at 237, AM. FIRST LEGAL, <https://perma.cc/3LNH-ZXBG>).

⁶ *Id.*

⁷ *PHS Human Subjects and Clinical Trials Information* (available at *NIH 60480 documents – Part 2 of 3*, at 9, 24, AM. FIRST LEGAL, <https://perma.cc/R3BS-79PH>).

⁸ *PHS Human Subjects and Clinical Trials Information* (available at *NIH 60480 documents – Part 2 of 3*, at 24, AM. FIRST LEGAL, <https://perma.cc/R3BS-79PH>).

⁹ *PHS Human Subjects and Clinical Trials Information* (available at *NIH 60480 documents – Part 2 of 3*, at 13, AM. FIRST LEGAL, <https://perma.cc/R3BS-79PH>).

¹⁰ *Id.*

¹¹ *Award Information*, HSS TAGGS, <https://perma.cc/WWL8-9HNR>.

¹² *Protection of Human Subjects* (available at *NIH 61083 documents*, at 16, AM. FIRST LEGAL, <https://perma.cc/2HZA-2TMA>).

In the third grant uncovered by CHD, NIH awarded Cincinnati Children’s Hospital Medical Center (CCHMC) \$1.7 million to study thrombosis risk in transgender adolescents and young adults starting “gender-affirming” hormone therapy.¹³ The CCHMC researchers hypothesized their study would show that the youth receiving estrogen for “gender-affirming” care would become increasingly predisposed to blood clots the longer they were taking estrogen.¹⁴

In light of these scientific understandings, the American people need to know whether the Biden-Harris White House and NIH had any communications regarding the potential consequences of promoting irreversible and life-altering treatments on children and adolescents.

II. Records Request

Pursuant to the Freedom of Information Act, 5 U.S.C. § 552, AFL requests, from the following custodians, all communications with the White House and the Executive Office of the President¹⁵ regarding the potential harm¹⁶ to children and adolescents caused by “gender-affirming” care.¹⁷ The relevant time period for this request is from January 21, 2021, to present.

III. Custodians

- A. Monica M. Bertagnolli, Director of NIH
- B. Diana W. Bianchi, Director of the National Institute of Child Health and Human Development
- C. Shannon N. Zenk, Director of the National Institute of Nursing Research
- D. Gary H. Gibbons, Director of the National Heart, Lung, and Blood Institute
- E. All Schedule C appointees at NIH.

IV. Fee Waiver

AFL requests a waiver of all search and duplication fees associated with this request under 5 U.S.C. § 552(a)(4)(A)(iii) and 45 C.F.R. § 5.54. First, AFL is a qualified non-commercial public education and news media requester. Our officials routinely appear on national television and use social media platforms to disseminate the

¹³ *Grant to Childrens Hospital Medical Center*, USASPENDING.GOV, <https://perma.cc/7S5R-7MTF>.

¹⁴ PHS 398 Research Plan (available at *NIH 61084 documents*, at 67, AM. FIRST LEGAL, <https://perma.cc/8M9K-6JBK>).

¹⁵ Communications with the White House and the Executive Office of the President includes any email to and from a domain ending in “eop.gov.”

¹⁶ Harm includes, but is not limited to, lower bone mineral density (BMD) and thrombosis.

¹⁷ “Gender-affirming” care includes, but is not limited to, gender-affirming hormone (GAH) therapy, *i.e.*, sex hormone therapy with testosterone or estrogen; “pubertal suppression” with “gonadotropin-releasing hormone analogs (GnRH_a), *i.e.*, “puberty blockers”; and “gender-affirming” surgery or sex reassignment surgery (SRS).

information it has obtained about federal government activities. In this case, AFL will make your records and your responses publicly available for the benefit of citizens, scholars, and others, and the public's understanding of your policies and practices will be enhanced through AFL's analysis and publication of the requested records. As a nonprofit organization, AFL does not have a commercial purpose, and releasing the requested information is not in AFL's financial interest.

V. Conclusion

Processing should strictly comply with the processing guidance in the Attorney General's Memorandum on Freedom of Information Act Guidelines.¹⁸ If you have any questions about our request or believe further discussions regarding search and processing would facilitate the more efficient production of requested records, please contact me at FOIA@aflegal.org. To accelerate your release of responsive records, AFL welcomes production on an agreed-upon rolling basis. Please provide responsive records in an electronic format via email. Alternatively, please provide responsive records in native or PDF format on a USB drive to America First Legal Foundation, 611 Pennsylvania Ave SE #231, Washington, DC 20003.

Sincerely,

/s/ Michael Ding

America First Legal Foundation

¹⁸ U.S. DEP'T JUST. (Mar. 15, 2022), <https://perma.cc/698A-FABV>.