

TEXAS HOUSE *of* REPRESENTATIVES**RQ-0426-KP****FILE# ML-48993-21****I.D.# 48993****COMMITTEE ON GENERAL INVESTIGATING***Chair Matt Krause • Vice Chair Victoria Neave*

August 23, 2021

Office of the Attorney General  
Attention Opinion Committee  
P.O. Box 12548  
Austin, Texas 78711-2548  
opinion.committee@oag.texas.gov

Re: Whether sex change procedures performed on children without medical necessity constitute child abuse

Dear General Paxton:

On August 6, 2021, Governor Abbott requested the Commissioner of the Texas Department of Family and Protective Services (“DFPS”) to issue a determination of “whether genital mutilation of a child for purposes of gender transitioning through reassignment surgery constitutes child abuse.” On August 11, 2021, the Commissioner of DFPS replied that “genital mutilation of a child through reassignment surgery is child abuse.” Genital mutilation is not defined in either letter. The Governor’s letter states, “This broad definition of ‘abuse’ should cover a surgical procedure that will sterilize the child, such as orchiectomy or hysterectomy, or remove otherwise healthy body parts, such as penectomy or mastectomy.” However, the Commissioner’s letter does not reciprocate by defining “genital mutilation” or specifying what procedures constitute “abuse.” The Commissioner’s letter may unintentionally create ambiguity on an issue that needs clarity.

According to legislative testimony and other sources, medical practitioners perform various sex-change procedures on children. These procedures include (1) sterilization through castration, vasectomy, hysterectomy, oophorectomy<sup>1</sup>, metoidioplasty<sup>2</sup>, orchiectomy<sup>3</sup>, penectomy<sup>4</sup>, phalloplasty<sup>5</sup>, and vaginoplasty<sup>6</sup>; (2) mastectomies; and (3) removing from children otherwise healthy or non-diseased body part or tissue. Do these procedures constitute “genital mutilation” as referenced in the Commissioner’s letter and thus constitute “abuse” under Texas Family Code Chapter 261?

Additionally, medical practitioners are providing, administering, prescribing, or dispensing drugs to children that induce transient or permanent infertility, including: (A) puberty-suppression or puberty-

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<sup>1</sup> Surgical removal of one or both ovaries.

<sup>2</sup> Surgical “creation” of a penis using existing genital tissue after the clitoris has been enlarged through the use of testosterone therapy.

<sup>3</sup> Surgical removal of one or both testicles.

<sup>4</sup> Surgical amputation of the penis.

<sup>5</sup> Surgical “creation” of a penis.

<sup>6</sup> Surgical “creation” of a vagina involving removal of the penis, as well as the testicles and scrotum, if an orchiectomy was not previously performed.

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blocking drugs, (B) supraphysiologic<sup>7</sup> doses of testosterone to females; and (C) supraphysiologic doses of estrogen to males. Do these chemical procedures constitute “abuse” under Texas Family Code Chapter 261?

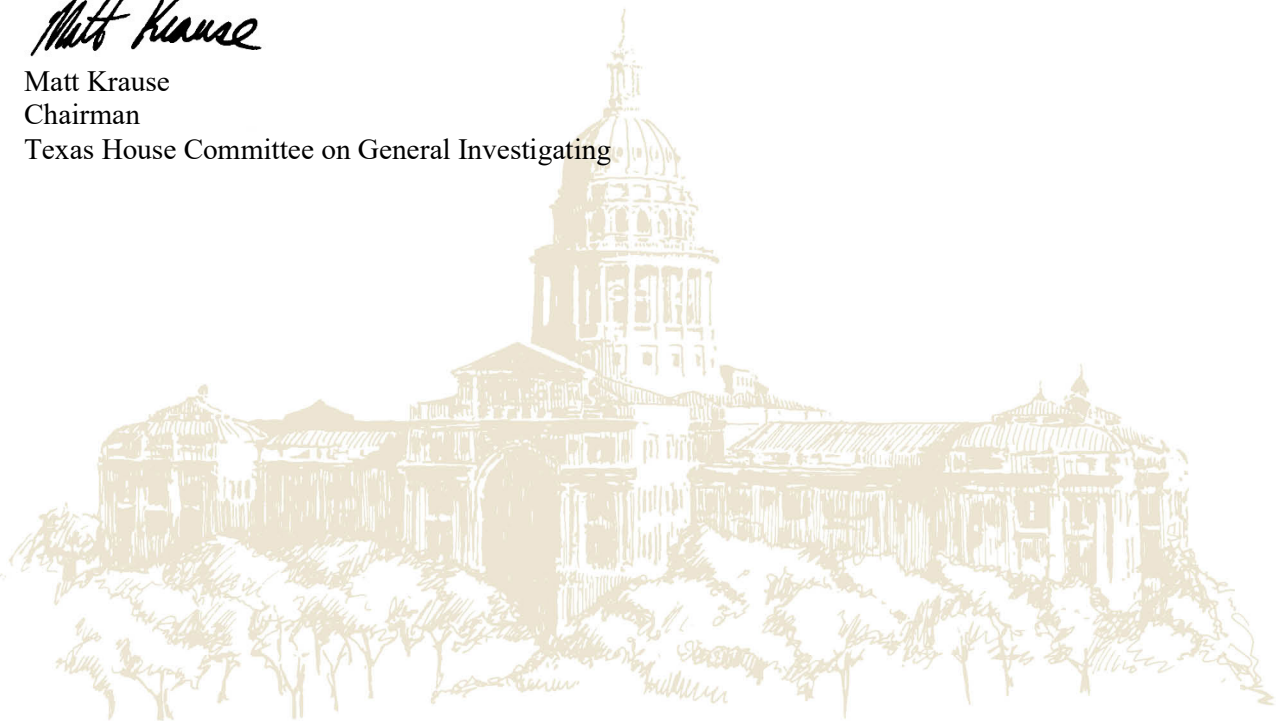
Some children have a medically verifiable genetic disorder of sex development or do not have the normal sex chromosome structure for male or female as determined by a physician through genetic testing that require procedures similar to those described in this request. Any clarification should consider whether an exception exists for instances of medical necessity.

Thank you for considering this request.

Sincerely,



Matt Krause  
Chairman  
Texas House Committee on General Investigating



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<sup>7</sup> Supraphysiologic means exceeding what is normally found in healthy individuals. The term is usually used to refer to a hormone or medication given in a stronger dose than the amount the body can produce on its own.