

I oppose the new health education learning standards that were quietly adopted by the Washington State Office of Superintendent of Public Instruction (OSPI) on March 25 without issuance of public notice or press release. These new standards include teaching gender expression to kindergarteners. I believe that these standards are government-sanctioned and taxpayer-subsidized child abuse and should be rescinded. I also think that the way in which they were adopted, without issuance of public notice or press release, to be egregiously unethical and a flagrant example of “government in the shadows,” rather than “government in sunshine.”

"Transgender" is the latest ploy to traumatize our youth and break down their natural modesty in order to encourage sexual promiscuity, which will result in sexually transmitted diseases, unwanted pregnancies, out-of-wedlock births to single mothers, and destruction of our social fabric. Children are very impressionable, and such propaganda campaigns as this bogus "transgender" crusade will no doubt ensnare some of the most vulnerable, at-risk youth, and lead them into sexual experimentation, which will put them at risk of AIDS and other sexually transmitted diseases, and make them vulnerable to sex predators. Even the children who are not at-risk will be deceived into thinking this deranged self-destructive behavior is not only acceptable, but praiseworthy and deserving of protected status by the government.

Anyone who promotes or condones this "transgender" activity is guilty of child abuse and should no longer be allowed any contact with children or influence over their curriculum.

This issue was documented in an on-line article in the New American, written by Raven Clabough, date June 2, 2016, and entitled “Schools in Washington Adopt Controversial Learning Standards Regarding Gender for K-12 Students” (<http://www.thenewamerican.com/culture/education/item/23326-schools-in-washington-adopt-controversial-learning-standards-regarding-gender-for-k-12-students>). The article states “new K-12 health and physical education learning standards were quietly adopted by the Office of Superintendent of Public Instruction (OSPI) on March 25 without issuance of public notice or press release, according to the Daily Caller.”

The manner in which the incumbent Superintendent adopted these new “standards” was completely unethical, if not outright criminal. He, and anyone in the Superintendent’s office involved in the deceitful manner in which these new “standards” were adopted, should have their employment terminated, or at the very least, be severely reprimanded. I can guarantee you that, should I be fortunate enough to be elected Washington State Superintendent of Public Instruction, the activities of the Superintendent’s Office will be conducted in a much more open manner.

The notion that anyone is “transgender” has no scientific basis at all. Although there are an extremely small number of hermaphrodites, these individuals suffer from a physical abnormality, and schools can address the needs of these people on an individual basis. People who are confused in their sexual identity (i.e., “transgender”) are emotionally and psychologically disturbed and need counseling to overcome their confusion. They don’t need affirmation and

encouragement to engage in sexual experimentation, which can lead to sexually transmitted disease and sexual exploitation.

An article in CNSnews entitled “Johns Hopkins Psychiatrist: Transgender is ‘Mental Disorder;’ Sex Change ‘Biologically Impossible’”, by Michael W. Chapman, dated June 2, 2015, (<http://cnsnews.com/news/article/michael-w-chapman/johns-hopkins-psychiatrist-transgender-mental-disorder-sex-change>) stated the following: “Dr. Paul R. McHugh, the former psychiatrist-in-chief for Johns Hopkins Hospital and its current Distinguished Service Professor of Psychiatry, said that transgenderism is a “mental disorder” that merits treatment, that sex change is “biologically impossible,” and that people who promote sexual reassignment surgery are collaborating with and promoting a mental disorder.” Dr. McHugh is the author of six books and more than 125 peer-reviewed medical articles.

The article quotes Dr. McHugh as saying that “policy makers and the media are doing no favors either to the public or the transgendered by treating their confusions as a right in need of defending rather than as a mental disorder that deserves understanding, treatment and prevention.” ““This intensely felt sense of being transgendered constitutes a mental disorder in two respects. The first is that the idea of sex misalignment is simply mistaken – it does not correspond with physical reality. The second is that it can lead to grim psychological outcomes.””

Dr. McHugh compares the transgendered person’s disorder to that of anorexia, in which a “dangerously thin” people look into the mirror and think they are “overweight,” and he states that studies show between 70% and 80% of children who express transgender feelings “spontaneously lose those feelings” over time. He added that of those who had sexual reassignment surgery, most said they were “satisfied” with the operation “but their subsequent psycho-social adjustments were no better than those who didn’t have the surgery.”

I have reproduced the last portion of the article, since it contains some very important information:

“And so at Hopkins we stopped doing sex-reassignment surgery, since producing a ‘satisfied’ but still troubled patient seemed an inadequate reason for surgically amputating normal organs,” said Dr. McHugh.

The former Johns Hopkins chief of psychiatry also warned against enabling or encouraging certain subgroups of the transgendered, such as young people “susceptible to suggestion from ‘everything is normal’ sex education,” and the schools’ “diversity counselors” who, like “cult leaders,” may “encourage these young people to distance themselves from their families and offer advice on rebutting arguments against having transgender surgery.”

Dr. McHugh also reported that there are “misguided doctors” who, working with very young children who seem to imitate the opposite sex, will administer “puberty-delaying

hormones to render later sex-change surgeries less onerous – even though the drugs stunt the children’s growth and risk causing sterility.”

Such action comes “close to child abuse,” said Dr. McHugh, given that close to 80% of those kids will “abandon their confusion and grow naturally into adult life if untreated”

“‘Sex change’ is biologically impossible,” said McHugh. “People who undergo sex-reassignment surgery do not change from men to women or vice versa. Rather, they become feminized men or masculinized women. Claiming that this is civil-rights matter and encouraging surgical intervention is in reality to collaborate with and promote a mental disorder.”

I feel that most “sex education” is really “promiscuity promotion” to break down the natural modesty of our youth and encourage sexual experimentation, leading to venereal disease, unwanted pregnancy, abortion, and children born out of wedlock. These social pathologies will adversely affect the students’ health, lead to poverty, and undermine the social fabric of our country.

My “sexual education” curriculum in its entirety is the following: “Billy: you are a boy. You will use the boys’ bathroom and the boys’ locker room. Suzie: you are a girl. You will use the girl’s bathroom and the girl’s locker room. We will review sex education in the same manner again next year. Now that we have covered sex education for this year, we will move on to more academic subjects.”

No other “sex education” would occur except for very limited, age-appropriate education of older students in gender-segregated classes, where women teach girls and men teach boys, and cover the changes that they will experience as their hormones cause their bodies to progress through puberty. The physical and emotional hazards of sexual experimentation will be specifically mentioned, as will the use of advertising and the entertainment media to use sexual attraction to manipulate the students to change their behavior and separate them from their money.

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