

REFERENCE TITLE: parental consent; gender reassignment drugs

State of Arizona
Senate
Fifty-sixth Legislature
Second Regular Session
2024

SB 1451

Introduced by
Senator Shope

AN ACT

AMENDING TITLE 36, CHAPTER 22, ARTICLE 1, ARIZONA REVISED STATUTES, BY
ADDING SECTION 36-2273; RELATING TO THE PROTECTION OF MINORS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Title 36, chapter 22, article 1, Arizona Revised
3 Statutes, is amended by adding section 36-2273, to read:

4 36-2273. Parental consent; gender reassignment drugs; minors;
5 exceptions; violation; classification; definition

6 A. EXCEPT AS OTHERWISE PROVIDED BY LAW AND SUBSECTION D OF THIS
7 SECTION, A PERSON, THIS STATE OR ANY POLITICAL SUBDIVISION OF THIS STATE
8 MAY NOT KNOWINGLY ENGAGE IN OR CAUSE ANY OF THE FOLLOWING PRACTICES TO BE
9 PERFORMED ON A MINOR IF THE PRACTICE IS PERFORMED FOR THE PURPOSE OF
10 CHANGING A MINOR'S APPEARANCE OR BODY TO NO LONGER CORRESPOND TO THE
11 MINOR'S BIOLOGICAL SEX WITHOUT FIRST OBTAINING WRITTEN INFORMED CONSENT OF
12 A PARENT OR LEGAL GUARDIAN OF THE MINOR:

13 1. PRESCRIBING OR ADMINISTERING GONADOTROPIN RELEASING HORMONE
14 ANALOGUES OR OTHER SYNTHETIC DRUGS USED TO STOP LUTEINIZING HORMONE AND
15 FOLLICLE STIMULATING HORMONE SECRETION, SYNTHETIC ANTIANDROGEN DRUGS USED
16 TO BLOCK THE ANDROGEN RECEPTOR OR ANY DRUG TO SUPPRESS OR DELAY NORMAL
17 PUBERTY.

18 2. PRESCRIBING OR ADMINISTERING TESTOSTERONE, ESTROGEN OR
19 PROGESTERONE TO A MINOR IN AN AMOUNT GREATER THAN WOULD NORMALLY BE
20 PRODUCED ENDOGENOUSLY IN A HEALTHY INDIVIDUAL OF THAT MINOR'S AGE AND
21 BIOLOGICAL SEX.

22 B. A HEALTH PROFESSIONAL AS DEFINED IN SECTION 32-3201 MAY NOT
23 KNOWINGLY ENGAGE IN CONDUCT THAT AIDS THE PRACTICES DESCRIBED IN
24 SUBSECTION A OF THIS SECTION BEING PERFORMED ON A MINOR WITHOUT WRITTEN
25 INFORMED CONSENT OF A PARENT OR LEGAL GUARDIAN OF THE MINOR. THIS SECTION
26 MAY NOT BE CONSTRUED TO IMPOSE LIABILITY ON ANY SPEECH PROTECTED BY
27 FEDERAL OR STATE LAW.

28 C. A HEALTH CARE INSTITUTION AS DEFINED IN SECTION 36-401 MAY NOT
29 ALLOW THE PRACTICES DESCRIBED IN SUBSECTION A OF THIS SECTION TO BE
30 PERFORMED ON A MINOR IN ITS FACILITIES WITHOUT FIRST HAVING RECEIVED
31 WRITTEN INFORMED CONSENT FROM A PARENT OR LEGAL GUARDIAN OF THE MINOR.

32 D. THIS SECTION DOES NOT APPLY TO:

33 1. SERVICES PROVIDED TO A PERSON BORN WITH A MEDICALLY VERIFIABLE
34 DISORDER OF SEX DEVELOPMENT, INCLUDING A PERSON WITH EXTERNAL BIOLOGICAL
35 SEX CHARACTERISTICS THAT ARE IRRESOLVABLY AMBIGUOUS, SUCH AS AN INDIVIDUAL
36 BORN WITH FORTY-SIX XX CHROMOSOMES WITH VIRILIZATION, FORTY-SIX XY
37 CHROMOSOMES WITH UNDERVIRILIZATION OR HAVING BOTH OVARIAN AND TESTICULAR
38 TISSUE.

39 2. SERVICES PROVIDED TO A PERSON WHEN A PHYSICIAN HAS OTHERWISE
40 DIAGNOSED A DISORDER OF SEXUAL DEVELOPMENT, IN WHICH THE PHYSICIAN HAS
41 DETERMINED THROUGH GENETIC OR BIOCHEMICAL TESTING THAT THE PERSON DOES NOT
42 HAVE NORMAL SEX CHROMOSOME STRUCTURE, SEX STEROID HORMONE PRODUCTION OR
43 SEX STEROID HORMONE ACTION FOR A MALE OR FEMALE.

44 3. THE TREATMENT OF ANY INFECTION, INJURY, DISEASE OR DISORDER THAT
45 HAS BEEN CAUSED OR EXACERBATED BY THE PERFORMANCE OF A PROCEDURE DESCRIBED

1 IN SUBSECTION A OF THIS SECTION, WHETHER OR NOT THE PROCEDURE WAS
2 PERFORMED IN ACCORDANCE WITH STATE AND FEDERAL LAW.

3 4. ANY PROCEDURE UNDERTAKEN BECAUSE A PERSON SUFFERS FROM A
4 PHYSICAL DISORDER, PHYSICAL INJURY OR PHYSICAL ILLNESS THAT IS CERTIFIED
5 BY A PHYSICIAN AND THAT WOULD PLACE THE PERSON IN IMMINENT DANGER OF DEATH
6 OR IMPAIRMENT OF A MAJOR BODILY FUNCTION UNLESS SURGERY IS PERFORMED.

7 E. A PERSON WHO VIOLATES THIS SECTION IS GUILTY OF A CLASS 1
8 MISDEMEANOR.

9 F. ON AN ADVERSE DECISION BY THE APPROPRIATE HEALTH PROFESSION
10 REGULATORY BOARD AS DEFINED IN SECTION 32-3201, THE PROVISION OF SERVICES
11 DESCRIBED IN SUBSECTIONS A AND B OF THIS SECTION TO A MINOR IS CONSIDERED
12 UNPROFESSIONAL CONDUCT AND IS SUBJECT TO DISCIPLINE BY THE HEALTH
13 PROFESSION REGULATORY BOARD WITH JURISDICTION OVER THE HEALTH
14 PROFESSIONAL.

15 G. A PERSON MAY ASSERT AN ACTUAL OR THREATENED VIOLATION OF THIS
16 SECTION AS A CLAIM OR DEFENSE IN A JUDICIAL OR ADMINISTRATIVE PROCEEDING
17 AND OBTAIN COMPENSATORY DAMAGES, INJUNCTIVE RELIEF, DECLARATORY RELIEF OR
18 ANY OTHER APPROPRIATE RELIEF.

19 H. A PERSON SHALL BRING A CLAIM FOR A VIOLATION OF THIS SECTION NOT
20 LATER THAN TWO YEARS AFTER THE DAY THE CAUSE OF ACTION ACCRUES. A MINOR
21 MAY BRING AN ACTION BEFORE REACHING EIGHTEEN YEARS OF AGE THROUGH A PARENT
22 OR GUARDIAN AND MAY BRING AN ACTION IN THE MINOR'S OWN NAME ON REACHING
23 EIGHTEEN YEARS OF AGE AT ANY TIME FROM THAT POINT UNTIL TWENTY YEARS
24 AFTER.

25 I. AN ACTION UNDER THIS SECTION MAY BE COMMENCED AND RELIEF MAY BE
26 GRANTED IN A JUDICIAL PROCEEDING WITHOUT REGARD TO WHETHER THE PERSON
27 COMMENCING THE ACTION HAS SOUGHT OR EXHAUSTED AVAILABLE ADMINISTRATIVE
28 REMEDIES.

29 J. IN ANY ACTION OR PROCEEDING TO ENFORCE THIS SECTION, A
30 PREVAILING PARTY WHO ESTABLISHES A VIOLATION OF THIS SECTION IS ENTITLED
31 TO RECOVER REASONABLE ATTORNEY FEES.

32 K. THE ATTORNEY GENERAL OR THE COUNTY ATTORNEY FOR THE COUNTY IN
33 WHICH AN ALLEGED VIOLATION OF THIS SECTION OCCURRED MAY BRING AN ACTION TO
34 ENFORCE COMPLIANCE WITH THIS SECTION. THIS SECTION DOES NOT DENY, IMPAIR
35 OR OTHERWISE AFFECT ANY RIGHT OR AUTHORITY OF THE ATTORNEY GENERAL, THIS
36 STATE OR COUNTIES IN THIS STATE OR ANY AGENCY, OFFICER OR EMPLOYEE OF THIS
37 STATE OR COUNTIES IN THIS STATE TO INSTITUTE OR INTERVENE IN ANY
38 PROCEEDING.

39 L. FOR THE PURPOSES OF THIS SECTION, "BIOLOGICAL SEX" HAS THE SAME
40 MEANING PRESCRIBED IN SECTION 32-3230.

41 Sec. 2. Legislative right of intervention

42 The legislature, by joint resolution, may appoint one or more of its
43 members who sponsored or cosponsored this act in the member's official
44 capacity to intervene or defend the statute as a matter of right in any
45 case in which the constitutionality or enforceability of this act or any

1 portion of this act or any rule adopted pursuant to this act is
2 challenged.

3 Sec. 3. Legislative findings

4 The legislature finds that:

5 1. This state has a compelling government interest in protecting
6 the health and safety of its citizens, especially vulnerable children, and
7 the best way to protect the health and safety of children is to protect
8 the right and responsibility of parents or legal guardians to make all
9 health care decisions for their minor child.

10 2. Section 1-602, Arizona Revised Statutes, and the common law
11 recognize that parents or legal guardians have the exclusive right to make
12 all health care decisions for their minor child, including decisions
13 regarding the appropriate treatment for children who experience distress
14 at identifying with their sex.

15 3. To safeguard this right, families must have a meaningful legal
16 remedy to hold medical professionals accountable when they administer
17 medical drugs and procedures to a minor child without obtaining the
18 written informed consent of the minor's parent or legal guardian.

19 4. To further safeguard this right, the state must have the
20 authority to take appropriate remedial action against medical
21 professionals who refuse to obtain written informed consent from a minor's
22 parent or legal guardian before administering medical drugs and
23 procedures.

24 5. Only a tiny percentage of the American population experiences
25 distress at identifying with their sex. According to the American
26 psychiatric association, prevalence ranges from 0.005 to 0.014 percent for
27 natal adult males and from 0.002 to 0.003 percent for natal females.

28 6. Studies consistently demonstrate that the vast majority of
29 children who are gender nonconforming or experience distress at
30 identifying with their sex come to identify with their sex in adolescence
31 or adulthood, thereby rendering most medical health care interventions
32 unnecessary.

33 7. Scientific studies show that individuals struggling with
34 distress at identifying with their sex often have already experienced
35 psychopathology, which indicates these individuals should be encouraged to
36 seek mental health care services before undertaking any hormonal
37 intervention.

38 8. Suicide rates, psychiatric morbidities and mortality rates
39 remain markedly elevated above the background population after inpatient
40 gender reassignment procedures have been performed.

41 9. Some health care providers are prescribing puberty-blocking
42 drugs in order to delay the onset or progression of normally timed puberty
43 in children who experience distress at identifying with their sex. This
44 is being done despite the lack of any long-term longitudinal studies

1 evaluating the risks and benefits of using these drugs for the treatment
2 of such distress or gender transition.

3 10. Health care providers are also prescribing cross-sex hormones
4 for children who experience distress at identifying with their sex,
5 despite the fact that no randomized clinical trials have been conducted on
6 the efficacy or safety of the use of cross-sex hormones in adults or
7 children for the purpose of treating such distress or gender transition.

8 11. The use of cross-sex hormones comes with the following serious
9 known risks:

10 (a) For females, erythrocytosis, severe liver dysfunction, coronary
11 artery disease, cerebrovascular disease, hypertension, increased risk of
12 breast and uterine cancers and irreversible infertility.

13 (b) For males, thromboembolic disease, cholelithiasis, coronary
14 artery disease, macroprolactinoma, cerebrovascular disease,
15 hypertriglyceridemia, breast cancer and irreversible infertility.

16 12. The risks of gender transition procedures far outweigh any
17 benefit at this stage of clinical study on these procedures.