



The Kelsey Coalition

Working to change the systems that failed our kids

How the Medical Director of the World's Largest Transgender Youth Clinic Uses Taxpayer Funding

[Johanna Olson-Kennedy](#) is the Medical Director of the [“largest gender clinic in the world”](#) that [currently treats over 1,400 young people between 3-25 years old](#). Olson-Kennedy regularly prescribes irreversible [cross-sex hormones to 12-year-olds](#) and refers girls [as young as 13 years old](#) to surgeons to have their healthy breasts removed.

Olson-Kennedy opposes requiring mental health assessments before kids medically transition. As she explains in a [July 2018 article in The Atlantic](#), “I don’t send someone to a therapist when I’m going to start them on insulin.”

Olson-Kennedy believes that [children’s opinions -- not psychological considerations -- are the most important factor in deciding on medical interventions](#).

“When we make a decision to move forward with medical intervention, either puberty suppressants or cross-sex hormones, the most important person we consider in that decision making is the child, the young person. There are some centers that use much more technical, psychometric testing, that looks at various and assorted factors in children’s psychiatric development. We don’t practice that model in our clinic.”

Olson-Kennedy describes how she convinced an 8-year old girl with short hair and a preference for “boy clothes” that she is actually the opposite sex [\(at 2:15\)](#).

At one point, I said, “So do you think that you’re a girl or a boy?”

And this kid was like, I could just see, like there was just confusion on the kid’s face, like, actually I never really thought about that. And so this kid said, “Well, I’m a girl ‘cause I have this body, right?”

This is how this kid had learned to talk about their gender was based on their body.

And I said... I completely made this up on the spot, by the way, but um I said, “So do you ever eat Pop Tarts?”

And the kid was like, “Um, of course.”

And I said, “Well you know how they come in that foil packet?” “Yes.”

“Well, what if there was a strawberry Pop Tart in a foil packet in a box that said cinnamon Pop Tarts? Is it a strawberry Pop Tart, or a cinnamon Pop Tart?”

The kid’s like, “Duh! It’s a strawberry Pop Tart.” And I was like, “So...”

And the kid turned to the mom and said, “I think I’m a boy and the girl’s covering me up.”

Olson-Kennedy’s cavalier attitude toward permanent and ethically questionable surgical interventions in young people is just as alarming. At the [Gender Spectrum Professional Symposium in July 6, 2018](#), she read from the social media posts of girls who are awaiting mastectomies to a room full of laughter:

“Me chilling with horrible dysphoria waiting until I can surgically remove the hell sacks from my chest.” ([2:12](#))

“I’ve got 99 problems and at least 87 of them would be solved with top surgery and testosterone.” ([2:30](#))

Olson-Kennedy relies on social media searches to support her claim that no one regrets their childhood mastectomies:

“Trans man top surgery regret...nothing. Trans masculine top surgery regret...nothing. This is about it for trans masculine top surgery regret.” ([21.21](#))

When asked to consider the possibility that young girls may grow up to regret these irreversible procedures, Olson-Kennedy dismisses the concern by responding: “.....And here’s the other thing about chest surgery. If you want breasts at a later point in your life, you can go and get them.” ([47.00](#))

Despite her careless approach to medically altering the bodies of young people, Olson-Kennedy is one of four recipients of a \$5.7 million NIH grant ([R01-HD082554-01A1](#)) for a [five-year longitudinal study](#) on the physiological and psychosocial impact of using hormone blockers and cross-sex hormones on children. Fertility and sexual functioning will certainly be impacted, as puberty was artificially stopped at a stage before sperm or egg preservation was possible. In mid-study (2017), [the minimum age for cross-sex hormone inclusion was decreased from 13 to 8 years old](#).

There is no control group in this observational study that will be completed in 2020.

The lack of a control group and short-term follow-up ensure that these serious medical interventions will soon be established as an NIH-supported evidence-based protocol. The Kelsey Coalition believes that informed consent laws were violated and [filed an urgent request with the Office for Human Research Protections](#) (OHRP) on April 5, 2019 calling for an immediate moratorium pending an investigation.

The OHRP has yet to take action.

Olson-Kennedy also used this same grant funding for [a study](#) on removing healthy breasts from young females with gender dysphoria as young as 13 years old.

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Role of the Funder/Sponsor: The funder had no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.

The [grant application](#) makes no mention of using this money for surgeries.

References

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