

## In 2025, Attacks on LGBTQ+ People’s Civil Rights and Access to Healthcare Reshaped the US and Medical Professions

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Reports by The Trevor Project and Movement Advancement Project (MAP) show a mass migration underway in the United States by LGBTQ+ youth, their families, and LGBTQ+ adults.<sup>1,2</sup> It’s no wonder when you consider that year-over-year increases through the last decade culminated in the American Civil Liberties Union tracking over 600 bills introduced in United States (US) state legislatures in 2025 that would discriminate against LGBTQ+ people.<sup>3</sup> MAP’s equality map showed 27 states, and three US territories are no longer safe for LGBTQ+ people.<sup>4</sup>

Rhode Island is not immune from this legislative onslaught. Proposals from curriculum censorship to bathroom and healthcare bans have all been heard in the committee rooms at 82 Smith Street. The difference is that these proposals are defeated year after year, while those that do advance have positioned Rhode Island among the 15 states offering the most civil rights protections for LGBTQ+ people in the US.<sup>4</sup> Similarly, local communities continue to reject efforts to make our schools unsafe for LGBTQ+ students.<sup>5</sup> Anecdotally, medical professionals and supportive agencies can tell you that, because of Rhode Island’s civil rights’ protections, many LGBTQ+ people and their families fleeing their home states are coming to Rhode Island.

What happens when these attacks are no longer escapable by crossing state borders? We are finding out in real time as the project to restrict the civil rights of LGBTQ+ people reached new heights in 2025. Passage of the 2025 National Defense Authorization Bill containing restrictions on healthcare for the transgender dependents of military service members in December 2024 set the stage for the year to come.<sup>6</sup> A wave of anti-LGBTQ+ stand-alone bills, and countless riders washed up in the 119th session of the US Congress. Only a new round of sports restrictions for transgender people in military academies in the 2026 National Defense Authorization Act prevailed, but the 119th session is ongoing.<sup>7</sup>

More immediate and devastating actions flowed from the executive branch. Nearly as quickly as he took the oath of office, Donald Trump began issuing executive orders to end-run the legislative process, override state laws, and enforce discriminatory policies across the country. Resulting agency actions have removed LGBTQ+ health data; erased LGBTQ+ people from federal programs; twisted civil rights law to discriminate against LGBTQ+ people; restricted the ability to

obtain accurate identity documents; and defunded programs and institutions based on their acknowledgment LGBTQ+ people even exist.<sup>8,9</sup> Immediate legal challenges have successfully impeded many of these discriminatory actions.<sup>9</sup> However, the Supreme Court of the United States (SCOTUS) reached down in two pending lower court cases, allowing the bans on transgender people in the military and accurate passports for transgender people to take effect.<sup>9</sup> Additionally, 2025 SCOTUS merits’ decisions allowed state bans on best-practice medical care for transgender young people and religious intolerance for LGBTQ+ inclusive curricula in K-12 schools.<sup>10</sup> More cases impacting LGBTQ+ rights will be decided by SCOTUS in 2026.

Federal actions targeting LGBTQ+ people for unequal treatment were so numerous in 2025 that entire databases were established to monitor these actions. It is impossible to concisely summarize these events in a single article. This onslaught has put transgender people and the entire practice of medicine in dire straits. In May 2025, HHS published “Treatment for Pediatric Gender Dysphoria.” The conclusions of this attempt to rewrite the standards of care were foregone—reject medical consensus and consistent evidence for gender-affirming care and push psychotherapy as a de-facto attempt to stop young people from being transgender. Breaking all scientific norms, the authors and peer reviewers of the HHS report were not made public until almost seven months after its release. Not a single expert in healthcare for transgender young people was among them.<sup>11</sup>

Also in 2025, federal agencies subpoenaed 20 hospitals seeking to obtain the detailed medical records of transgender adolescents and their medical professionals; threatened states that provide health insurance coverage for necessary healthcare to transgender people under age 18 or 19; used multiple levers of power to threaten healthcare professionals providing necessary healthcare to transgender young people; and platformed the worst anti-LGBTQ bigotry that pales in comparison during the first Trump administration.<sup>8</sup>

The worst was yet to come by year’s end. During the summer, it became public knowledge that the Centers for Medicare and Medicaid (CMS) was preparing two proposed rules restricting access to essential medical care for transgender young people. On December 19th, the published full text revealed the intent to prevent federal Medicaid dollars from being used to cover medical transition for anyone under 18,

or under 19 for Children’s Health Insurance Program recipients, and to stop hospitals from providing medical transition care to anyone under 18, regardless of payor source, by threatening their participation in Medicare and Medicaid. A declaration from the US Secretary of Health and Human Services accompanied these rules, effectively attempting to bypass the federal rulemaking procedures to immediately begin excluding healthcare professionals and systems that provide transgender healthcare to young people from federal health programs. All these actions are based on circular references to the HHS Report, England’s discredited NIH Cass Review, and limitations on care enacted by a scant few European countries, in direct contradiction to the best medical evidence.<sup>8</sup>

To be clear, at the time of this writing, essential medical care for transgender people of any age is still legal federally and in many states. Countless lawsuits are challenging the discriminatory actions by the federal government, including nearly 50 brought by the Rhode Island Attorney General.<sup>12</sup> These cases, by and large, have been successful in putting these discriminatory actions on hold while litigation proceeds.<sup>9</sup> That has not been enough to stop the harm as agencies and healthcare systems dependent on federal funding are pressured into pre-compliance, even in Rhode Island and other protective states. Whether those withdrawals of care are permissible under the laws of supportive states will soon be tested in state courts.<sup>13</sup>

The implications for medical professions extend well beyond the direct care to LGBTQ+ people, with the potential to entirely reshape medical practice. As seen with the national reports cited above, the effects on LGBTQ+ people will be felt more strongly along class lines. Those who can leave discriminatory states, the country, or access care through private clinics not under threat will have a buffer not available to many others. LGBTQ+ people are shown to experience economic hardship due to persistent discrimination and, as a result, rely on supportive government services at higher rates than straight, cisgender people.<sup>14</sup> That is an impossible position when the government’s policies seek to exclude LGBTQ+ people, while authorizing and attempting to regulate private individuals and institutions to do the same.

Now is the time to engage with our state and local leaders to demand Rhode Island remain a place where everyone is treated with equal dignity under the law. The medical community has proved a powerful force in the Ocean State, like with the swift passage of the 2024 Health Care Provider Shield Act.<sup>15</sup> Connect with your professional associations and the many local organizations and volunteer groups supporting this work, including LGBTQIA+ Action Rhode Island, The Womxn Project, GLBTQ Legal Advocates and Defenders, Planned Parenthood Votes RI, ACLU RI, and others to ensure Rhode Island’s state motto of Hope continues to apply to everyone.

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None

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