

To: Mr. Patton
Representative Thomas F. Patton
District 7
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Ohio Civil Rights Committee

From:

Mrs Carol Lawrence, Chesswood, Crowborough Hill, Crowborough, East Sussex TN6 2JA , UK
(Wealden Constituency) **Anonymity Request**

This was emailed to Maria Polaris and printed out upon her request after hearing her testimony opposing HB 367

27th November 2020

Opposition to Ohio HB 367
Call for Evidence – My testimony

The recent huge incidence in “transgenderism” has badly affected our family in reality. As a result I I subscribe to the website <https://www.transgendertrend.com> which explains all about the associated phenomena.

I have helped to establish <http://genderdysphoriasupportnetwork.com> and either associate myself or subscribe to the views expressed in <https://segm.org> <https://www.parentsofprogdkids.com> <https://www.bayswatersupport.org.uk> <https://ourduty.group> <https://www.kelseycoalition.org>

In 2019 our then 21 year old adult daughter, who has mild learning and social difficulties, living away at college, told us that she was going to socially and medically “become male” because she would feel more “comfortable” that way, and that she was on the NHS list for that treatment, along with several others of her student flatmates. She had never before expressed that desire and was generally a solitary child where we have always tried to help her with social anxieties as a result of autistic spectrum diagnosis, but went through the state school system, successfully reaching university and living away independently with minimal support.

As a result of my personal experience I believe that the proposals being discussed are damaging to confused younger adults like my daughter, who may well have diagnosed or undiagnosed mental health problems and believe that changing “gender” will help and solve these long term – bit they will almost certainly add to their problems instead. Having the affirmation of “gender identity” for a mentally challenged person, or a younger person with homosexual feelings, statistically pushes them more quickly towards a damaging medicalisation and sterility. They will almost certainly achieve improved mental health one way or another as they get older, and most of them will change their minds (see evidence in websites above).

As a born female, I also don’t welcome born men in female-only changing spaces and the choice of female-only being taken away in many clinical treatments settings, and being able to access facts and solutions as they apply to the natal sexes eg the book “Invisible Women” by Caroline Criado Perez. All facts as they apply on male female divisions would be unreliable.

After our daughter made her solemn announcement, I looked up the medical and health implications of treatments for “changing sex”, which are very poor long-term, and which have deeply damaging and irreversible effects, short and medium term too. I was horrified. This news deeply affected my own mental health with many ripple effects throughout my life.

For our family we have had one of our most traumatic periods as a result of our daughter’s announcement, where I have had to consult mental health professionals myself to bring myself back from my own feelings of suicidality, where I couldn’t prevent my daughter from the prospect of receiving mastectomy, testosterone treatment (a “feel good” hormone in women which has massive damaging and irreversible consequences) and consequent hysterectomy (necessary after taking testosterone for around 5 years), all courtesy of the NHS, which believes it is good to offer this pathway to confused people, at my expense through taxation. The NHS has no reliable research about long-term outcomes.

My marriage has suffered with the trauma where we did not know what approach to take with our daughter who we had noticed was already estranging herself from us, which accelerated when she could not handle our grief and bewilderment, but demanded immediate complicity and agreement. Our family life has suffered enormously, with our teenage son caught in the middle of trying to support his sister and his parents.

I sought out other parents badly affected by this phenomenon and have helped set up in-person and on-line support groups, backed up by mental health professionals. I have made friendships with an overlapping group of parents who try to campaign politically but this is very hard amongst a backdrop of fractured family relationships and with a very vicious political tide against speaking out, which has ostensibly a “human rights” angle. If you are on try to question the sense of medical treatments in public, and concomitantly the rights of born men to then freely enter female only changing spaces, one is often castigated. I feel as if the world has gone mad.

I personally have contact with hundreds of badly affected families in the UK, Eire, US, Canada, Germany, Netherlands, and am aware of thousands more. One mother I know suffered the suicide of her son while he was taking female hormones privately prescribed, where he had been affected with mental health problems for many years.

I discovered that there had been an exponential rise in young women referring themselves to the NHS service in the last decade, another steep rise in young men too, an unknown amount of people referring themselves for private treatment, and an unresearched, unknown but large amount of people withdrawing themselves from treatment disappointed with the outcomes. I found that there is a high correlation with diagnosed autism and other mental health co-morbidities.

Our daughter has many social anxieties which will in all likelihood ease in older adulthood as they do for many of us, with finding the right directions in life and the right mentors. There is research that suggests that full adult brain maturity does not occur until the ages of 25-30 even amongst the most capable of the human population let alone those who live with autistic traits, trauma and other more temporary mental difficulties.

I have found that the little research there is, has uncovered that declarations of “transgenderism” often occurs in clusters, has many hallmarks of social contagion and a grand medical mistake happening worldwide in advanced countries, where it is an obvious thing to suspect that mental health problems within the younger population are being given a “magic bullet” solution to their social anxieties and seized upon by prominent politicians and spokespeople to be a human rights issue like bring homosexual.

I have found that there is a vicious political argument going on about this where you can have actual violence inflicted upon you at public meetings demonstrations (there are documented examples of this, with violence being afflicted by activists upon a pensionable age woman at Speaker's Corner) and an extraordinary amount of on-line and other threatening abuse for talking about it (eg J K Rowling).

I have found that under 18s are able to be prescribed by the NHS and privately, drugs called "puberty blockers" if they think they might prefer living their life as the opposite sex, which is all so very undefinable and leads fairly quickly to sterility.

End

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