

I am here today to share my story of my gender dysphoric daughter. I am part of a growing community of parents who are faced with a child who claims to be transgender. As parents we want to do what's best for our child but are frustrated by the standard of care that is presented to us for our dysphoric children. We are told to gender-affirm or risk losing our child to suicide. "A living son is better than a dead daughter." We are told that the Transgender clinic will help our child be happier and healthier because transition is the only option. There is no mention of getting psychological or psychiatric help for these children, the vast majority of them suffer from some form of mental health issue. We are unwilling partners with school districts who affirm our children without consulting us and change their names and pronouns without our permission. We love our children but the current standard of care does not address the underlying mental health crisis our children face today. As a parent of a gender dysphoric child, I have found no help within the medical community and the school district. Their only answer is to affirm. Thus, I am left alone in my battle to find any real help for my daughter.

My daughter suffered from depression and suicidal ideation at an unusually young age. Starting in second grade, she was under the care of a therapist to help her deal with her dark thoughts. Over the years she saw many different therapists and tried different forms of therapy. Not once did she ever mention to her therapist that she wanted to be a boy. She was very much a girl who played with dolls and dressed up in princess clothes. She had boy toys as well, but she rarely showed any interest in them.

During her elementary school years, she was socially awkward and had difficulty making and maintaining friendships. Often she found herself on the playground alone. When she entered middle school, things started to change and she became more social and found a small group of friends. She also began dating a young man at the end of her 8th grade year but unfortunately the relationship became toxic. He gradually became emotionally abusive and ended up sexually assaulting her multiple times. She did not tell me of these incidents until a year later, after she came out as trans.

During her sophomore year, she and all her friends joined LGBT club that was sponsored by GLSEN, a national LGBT organization that helps create clubs in K-12 schools. Most of her friends identified as being either Pansexual,

Non-binary, or Trans. This club provided a safe space strictly for children as parents are not encouraged to be involved. The GLSEN website provides zero literature or resources for parents of LGBT children. In this club, my daughter was given a “personality test” centered on gender and sexuality. From this one test, my daughter determined that she hated her body and must be a boy. When she came to me and explained her dilemma, I was sympathetic -- after all, what teenage girl is 100% satisfied with her body? I tried to explain to her that while such feelings are normal, it didn't necessarily follow that she was a boy. Like most teens, she felt that I didn't understand her.

When she finally told me about the sexual assaults, I was desperate to find her help to deal with the resulting trauma, in addition to her gender dysphoria. I didn't know where to turn, so I tried the Transgender Clinic at Cincinnati Children's Hospital. A social worker interviewed me and I recounted my daughter's history of depression, suicidal ideation, and the sexual assault. The Clinic's immediate response amounted to admitting her to the clinic for social transitioning, fitting her with a chest binder, and administering medication to halt her menstrual cycle. There was no mention of any psychological evaluation and therapy for the dysphoria or assault trauma. Their sole answer to all these issues was to affirm her gender and essentially pave the way for medical transition. The following day I sent them a polite email declining their services. Their curt response consisted merely of a (debatable) statistic on the suicide rate amongst transgender teens.

Eventually I was able to get a referral to the Mayerson Center at Children's Hospital, so she could undergo trauma therapy. Part of this process involved reporting the sexual assault to the police. During the police interview, my daughter was questioned by a social worker, a doctor, and an investigator. When I met with the social worker afterwards, she told me that I really should consider taking my “son” to the Transgender Clinic. I informed her that I didn't think that was what my daughter needed right now. The doctor essentially said the same thing. Again, I stated that my daughter needed psychological help, not Wrong-sex hormones.

My daughter became more depressed and withdrawn. She changed her name at school without my knowledge. During this period, we got a call from her school counselor informing us that she confessed to having suicidal thoughts. He

recommended that we take her to Children's Hospital in Liberty Township, which we did immediately. The ER doctor agreed that she was depressed and should be on antidepressants. The social worker assigned to the case then sat us down after hearing her long history and basically told us we were bad parents for not affirming and the suicide rate for trans teens is alarming high. We told her that we've been dealing with a suicidal child most of her life and it was never about transgenderism until now. Again, instead of receiving an ounce of professional outreach we were parroted the same lines of suicidal rates amount trans teens.

Per the ER doctor's recommendation, I got my daughter an appointment with a psychiatric doctor for antidepressants. After relating her history, this particular doctor concluded the last thing my daughter needed was a transgender clinic. First and foremost, she needed treatment for her depression and trauma. The transgenderism should not be the primary focus until these issues were adequately explored and dealt with. She also stated that my daughter should not go on testosterone because it will make the depression worse and increase her anger. Her exact words were, "It would be like living with a depressed angry bull."

During this time my daughter began dating a boy who came out as a Transwoman. This person introduced her to various forms of Anime Porn and other disturbing pornographic material. They became obsessed with texting each other at all hours of the day, which included copious amounts of pornographic imagery and text. She was always on her phone or on her computer with him. It wasn't until the summer of her junior year in highschool that we were able to break the phone/computer obsession. We sent her to spend the summer with her grandparents in California for a digital detox, no phones, no computers. To our surprise, she came back feeling better and more herself, however, she still identified as transgender.

For her junior year in highschool she decided to go to Butler Tech BioMedical program. I was hopeful that a new school and a focus on a program that she loved would help her heal. Again, the school affirmed her preferred gender without our consent, but she loved the program and her focus changed from her gender identity to her schoolwork and excelling in her classes. She graduated as

an honor student and is currently enrolled in college in the BioMedical Engineering program.

We've had other ER visits not related to suicide. One episode was for chest pain caused by her chest binder that she wears 24/7. She knows better but refuses to take it off. Her breasts are now permanently deformed because of it. We have also had ER visits for female issues that my daughter acknowledges are related to her biological sex. It has been difficult for her to accept but she realizes that her body is female. My hope is she will continue down this path like some many young people before her who desist from their gender dysphoria.

We have continued with the trauma therapist at the Mayerson Center who does affirm her gender preference but she is understanding of our stance not to affirm. She is willing to help heal my daughter through her trauma and explore why she feels the way she does about her body. It is a slow healing process.

Throughout this ordeal, I've always told my daughter that I love her no matter what. I don't care how she dresses or how she cuts her hair. Children should be allowed to explore who they are without medical interventions that have devastating side effects and are permanent. Parents like myself search for help and are given only one answer and are penalized if we don't agree with medical and social transition. There is zero acknowledgement of the underlying mental health issues that most of these children are suffering from. The medical community and schools only focus on the affirmation of transgenderism. Most children desist. Most children do not need medical intervention. Children need love and understanding and support through their turbulent adolescent years, so they may grow into healthy happy productive adults.