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Susan Manchester, Chair
Ohio House Families, Aging and Human Services Committee
Ohio House of Representatives
77 South High Street
Columbus, Ohio 43215

Dear Chairwoman Manchester, Vice Chair Cutrona and Ranking Member Denson,

My name is Allison Blackburn and I am a licensed psychologist. I have specifically dedicated my career to evaluating and treating children and their families. I have over 12 years' experience in caring for patients and am currently licensed to practice in Ohio.

The Ohio General Assembly should leave the practice of medicine to licensed healthcare providers. I am gravely concerned that HB454 sets a dangerous precedent by interfering with medical decision making and parent/caregiver autonomy to discuss care options in consultation with their child's medical provider.

In my practice, I perform a thorough evaluation on each patient and make treatment recommendations based on the best available evidence for that individual's situation. In my experience, parents/caregivers do the best they can, often in difficult circumstances, to make decisions they believe are in their child's best interest. As an example of this, I have recommended acute inpatient treatment for severely suicidal youth so that they can stay safe and quickly get the mental health treatment they need.

HB454 would place medical and mental health professionals in an ethical dilemma: we would have to refrain from providing evidence-based care to patients struggling with a diagnosis of gender dysphoria or lose our license. The Trevor Project's 2022 National Survey on LGBTQ Youth Mental Health found that 45% of LGBTQ youth seriously considered attempting suicide in the past year, including more than half of transgender and nonbinary youth. Being able to provide the appropriate, evidence-based and gender-affirming care is quite literally life-saving. **I cannot imagine another diagnosis where a state law would prohibit us from delivering evidence-based care.**

In a time when the demand for child and adolescent mental health care is at its highest, HB454 makes the demand even higher. I address patients' mental health every day. I have worked in the emergency department evaluating children that are at risk of harming themselves or others. I have also worked in residential settings where children need long term trauma-informed treatment. I was trained to treat the whole child; ignoring a child's mental health or a diagnosis like gender dysphoria is simply not responsible care.

I implore you to vote no on HB454. This bill sets a dangerous precedent.

Sincerely,

Allison Blackburn, PhD

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