

Written Opponent Testimony, HB 454

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House Families, Aging, and Human Services Committee

Chair Manchester, Vice-Chair Cutrona, Ranking Member Denson, and members of the House Families, Aging, and Human Services Committee, thank you for the opportunity to provide testimony. My name is Stephanie Ash, and I am a Master of Social Work graduate student and member of the Social Work Criminalization Taskforce with the National Association of Social Workers, Ohio Chapter (NASW-OH). I am here today representing NASW Ohio Chapter to express our vehement opposition to HB 454 which would not only have a devastating impact on transgender and gender diverse youth (TGD), but also on the ability of social workers to practice ethically under the NASW Social Work Code of Ethics and the Ohio Revised Code (Rule 4757-5).

Gender-affirming care is safe, effective, and lifesaving. This evidence-based standard of practice is supported by our professional association and by the American Academy of Pediatricians, the Endocrine Society, the American Academy of Child and Adolescent Psychiatry, the American Psychiatric Association, and the American Medical Association. Given the overwhelming supporting evidence for gender-affirming care, it is difficult to know where to begin our testimony. However, as a representative of social work, I will prioritize outlining the harms HB 454 will cause to social work clients and to our profession.

The vast majority of gender-affirming care for minors is provided by mental health professionals (MHP), including social workers, who provide non-judgmental, non-coercive support as clients explore their gender identity. This exploration, often called social transition, occurs most often through changes to their appearance like hairstyle and clothing, using new pronouns, and trying a name that matches their gender identity. When youth who are approaching or experiencing puberty do seek medical interventions for affirming care, such interventions are guided by a multidisciplinary team of experts, the clients, and their family. While many TGD youth do not seek medical intervention, for those who do, access to medical treatment is associated with significantly lower rates of depression and suicidality [1].

Transgender adults who had access to gender-affirming hormones during adolescence (ages 14–17) have lower rates of suicidal ideation as adults [2]. HB 454 would have a devastating impact on the mental health and long-term wellbeing of TGD youth in Ohio by restricting access to life-saving treatment and further stigmatizing their identities.

While our client's wellbeing is our central concern, HB 454 would also put social workers in an impossible situation by pitting our ethical and legal responsibilities to clients against legal statute. The NASW Code of Ethics requires social workers to follow evidence-based practice, empower individual self-determination, refrain from discrimination based on sex, gender identity, and gender expression, and protect the confidentiality of our clients. HB 454 poses a direct contradiction to each of these standards.



Gender-affirming care embodies the social work ethical standard of self-determination which compels us to “respect and promote the right of clients to self-determination and assist clients in their efforts to identify and clarify their goals” (NASW Code of Ethics, Standard 1.02). Gender-affirming care, unlike conversion therapy, does not seek to persuade or change a client’s gender identity or expression. Instead, it provides a safe, supportive environment for clients to explore their identities and navigate its impact on how they move through the world.

In addition to banning medicalized gender-affirming care, HB 454 would also require that a school social worker, or related MHP in the school setting, disclose their client's gender identity to their parents even when not clinically necessary. Such disclosure would disrupt therapeutic rapport and possibly jeopardize clients’ safety. Studies find that LGBTQ youth are 120% more likely to experience homelessness [3], with the leading cause of homelessness among LGBTQ youth being family rejection based on their sexual orientation, gender identity, and gender expression [4]. Transgender youth experience family rejection at even higher rates [4].

Such breaches in confidentiality will also interrupt successful clinical processes which rely heavily on trust and rapport and will dissuade youth from seeking essential mental health services. HB 454 would shackle a social worker’s ability to support youth and their families during critical moments. Social workers and other MHPs are trained in establishing informed consent with minor clients and parents and it should be our clinical expertise that guides such policies and practices. At its core, HB 454 is a denial of the legitimacy and experiences of TGD individuals and a flagrant overstep by politicians seeking to regulate private healthcare decisions. The very existence of this bill, and others like it, whether passed or not, further stigmatize and isolate TGD individuals who already experience high rates of discrimination, bullying, social isolation, and violence. What we need to truly keep TGD youth safe are greater protections against discrimination, a statewide ban of conversion therapy, policies that ensure safe and supportive educational environments, and greater funding for affirming mental health services.

1. Turbam, J.L. (2022, January 24). The Evidence for Trans Youth Gender-Affirming Medical Care. Psychology Today. <https://www.psychologytoday.com/us/blog/political-minds/202201/the-evidencetrans-youth-gender-affirming-medical-care>
2. Turban J.L., King D., Kobe J., Reisner S.L., Keuroghlian A.S. (2022) Access to gender-affirming hormones during adolescence and mental health outcomes among transgender adults. PLoS ONE.
3. Morton, M. H., Samuels, G. M., Dworsky, A., & Patel, S. (2018). Missed opportunities: LGBTQ youth homelessness in America. Chicago, IL: Chapin Hall at the University of Chicago.
4. Choi, S.K., Wilson, B.D.M., Shelton, J., & Gates, G.J. (2015). Serving Our Youth 2015: The Needs and Experiences of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth Experiencing Homelessness. The Williams Institute with True Colors Fund. <https://truecolorsfund.org/wp-content/uploads/2015/05/Serving-Our-Youth-June-2015.pdf>

