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Dear Chairman Lipps & Ohio Representatives:

I am writing to you today as a native Ohioan, an Air Force veteran who served seven years of active duty at Wright-Patterson Medical Center, and an M.D. For what it's worth, I consider myself a political moderate; as an undergrad I was the Editor-in-Chief of the conservative student newspaper at the University of Chicago.

As a doctor, HB68 does not "save adolescents," but rather it endangers their lives. The bill's reasoning is based not on medical science—all mainstream physicians, including the AMA, AAP, and Endocrine Society, support the standard, safe, effective stepwise-approach to gender-affirming care for transgender and non-binary youth. Rather, this bill reflects a false understanding of transgender people, propagated not by science but by a misguided subset of Christian fundamentalists.

HB68 shows a fundamental misunderstanding of what it means to be transgender. Being trans is not a delusion, nor is it a psychological malady. Florian Kurth and colleagues demonstrated recently in their paper "Brain Sex in Transgender Women is Shifted towards Gender Identity" (Journal of Clinical Medicine, 2022 Mar; 11(6): 1582) that, even before any treatment with gender-affirming hormones, the entire anatomy of trans women's brains is *statistically significantly different* than the brains of cisgender men. Trans and non-binary people are just made different. Whether you believe in all-powerful Christian God, or that human life comes to be via a series of awe-inspiring natural serendipity, in either case the divine light of creation shines no less brightly in trans and non-binary people than in any of the rest of us. They are valid; they are loved, and they exist for the same reason any other person does.

Some of my right-wing friends have the crazy idea, fed by a lot of misinformation out there, that if a boy wants to play with dolls, or a girl wants to climb trees, liberal parents haul them off to some gender clinic where the kids are put on a conveyor belt to having body parts inevitably "chopped off." That's just not how any of this works. Doctors and other providers understand that there's a difference between girls who are tomboys or may be going through a phase, versus kids who, in a stable way for years, know that they are miserable in a female body, and want to live as a male. Only the latter end up on puberty blockers, and that only happens if they've had severe dysphoria from their body starting to develop feminine secondary sex characteristics.

I've also heard right-wing people talk about an idea of "social contagion," that somehow trans kids only "become trans" because their friends are doing it, and that's

why the number of trans kids “is increasing so much.” But there are good studies on this, and “social contagion” isn’t a real thing. It turns out that trans kids tend to find other trans and gender-non-conforming kids and become friends with them, because it’s actually kind of nice to have love and support in this world.

As for the notion that there are “too many” kids on puberty blockers? The number of U.S. kids initiating puberty blockers in a year has risen from 633 in 2017 to 1,390 in 2021. That’s out of 3.7 million kids born each year in the United States. Does 0.04% of adolescents starting puberty blockers mean that they are being over-prescribed? Heck no. According to a 2015 survey by the RAND Group, 0.5% of men and 1.2% of women serving in the U.S. military identify as transgender. If only 0.04% of adolescents are on puberty blockers, it reinforces the notion that these are an incredibly well-selected group of patients. (Transgender-affirming surgery on 16, 17, and 18-year-olds is, of course, even rarer still, which again reflects the fact that the only adolescents getting the surgery are the ones who really need it. This is the case for all transgender surgery, even in adults, which is why the “rate of regret” after transgender surgery is well-documented to be only 1 to 2% of all trans surgery procedures, massively lower than just about any other surgical procedure.) It’s the same reason why so many of the transgender people opposing this bill are actually Ohioans, whereas to find a “de-transitioner” or two in favor of legislation like this, generally radical fundamentalist groups have to fly them in from out of state.

We once thought the incidence of left-handedness in our country was 1 or 2 percent. Then it turned out, once we stopped punishing and shaming kids for being left-handed, once we stopped believing they were possessed by the devil, that the incidence of left-handedness was actually 12 percent. It’s unfortunate and frankly embarrassing, as an Ohioan, that in the year 2023 there are people seriously proposing bills this unscientific and damaging in our legislature, and proponents of this bill literally talking about demonic possession. Please, do the right thing, and leave lifesaving health care up to patients, families, and medical professionals, not politicians and folks who believe in demons.

Sincerely,

Christopher M. Brown, M.D.