

To House Public Health Policy Committee  
Opponent testimony  
HB 68  
Written Only  
Erica Kittleson  
May 22, 2023

Chairperson Lipps, Vice Chair Stewart and Ranking Member Liston,

I am a licensed independent social worker from Columbus, OH. I live in Representative Liston's district. I am also a parent of two children. As both a social worker and a parent I have many concerns about this bill. As a parent, I am extremely concerned that this bill takes away the rights of parents to affirm their children's gender and help them access gender affirming care.

As a social worker, I am concerned with the harm this bill causes trans and gender diverse (TGD) youth. I have many concerns with this bill, but want to focus on the requirements of mental health professionals around treating TGD youth and the insistence on "watchful waiting" required in this bill. My concern is that watchful waiting will continue to exacerbate a youth's mental health concerns and result in longer, less effective, more expensive treatment.

According to the DSM 5 (the manual used to diagnose mental health conditions), gender dysphoria affects daily activities, including going to school and developing peer relationships. "Gender dysphoria, along with atypical gender expression, is associated with high levels of stigmatization, discrimination, and victimization, leading to negative self-concept, increased rates of mental disorder comorbidity, school dropout, and economic marginalization, including unemployment, with attendant social and mental health risks, especially in individuals from resource-poor family backgrounds."<sup>1</sup> If the gender dysphoria is not treated, many of the other mental health conditions will also not improve as traditional treatments for these disorders will not be able to address the root cause (the gender dysphoria).

As a social worker and mental health professional I am required to follow evidence based treatment and to look to the research and experts when providing care to individuals. One of the experts in this case is The World Association for Transgender Health (WPATH). They first released standards of care in 1979 and have continued to update those standards as research has evolved. Their 8th standards were released on Sept 15, 2022 and include standards for adults, adolescents, and children. Their standards include citations of numerous studies around the risks and benefits of gender affirming care.

One part that I want to highlight is in their chapter on adolescent care, addressing the ethical and human rights perspective on providing gender affirming care: "For example, allowing irreversible puberty to progress in adolescents who experience gender incongruence is not a neutral act given that it may have immediate and lifelong harmful effects for the trans-gender young person (Giordano, 2009; Giordano & Holm, 2020; Kreukels & Cohen-Kettenis, 2011)."<sup>2</sup> To

ban gender affirming care ignores the risks to youth, potentially lasting into their adulthood, when they are denied access to care.

Banning gender affirming care will cause harm to the youth who are denied access to treatment, their families who are forced to endure the consequences that come with not being able to receive appropriate treatment, mental health providers who are being asked to work against their own ethics as well as contributing to the increasing stigmatization against trans and gender diverse individuals. Mental health providers are already struggling to meet the current demands of Ohio individuals. The introduction of bills like this increases symptoms of anxiety and contributes to the burnout, compassion fatigue, and moral injury of mental health professionals, which is a major factor in professionals leaving the field. For these reasons I strongly encourage you to oppose this legislation and continue to allow families the right to access the care they need.

Thank you,  
Erica Kittleson

1: American Psychiatric Association . Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5(TM)) 5th Edition (p. 493). DEphently. Kindle Edition.

2: E. Coleman, A. E. Radix, W. P. Bouman, G. R. Brown, A. L. C. de Vries, M. B. Deutsch, R. Ettner, L. Fraser, M. Goodman, J. Green, A. B. Hancock, T. W. Johnson, D. H. Karasic, G. A. Knudson, S. F. Leibowitz, H. F. L. Meyer-Bahlburg, S. J. Monstrey, J. Motmans, L. Nahata, T. O. Nieder, S. L. Reisner, C. Richards, L. S. Schechter, V. Tangpricha, A. C. Tishelman, M. A.

A. Van Trotsenburg, S. Winter, K. Ducheny, N. J. Adams, T. M. Adrián, L. R. Allen, D. Azul, H. Bagga, K. Başar, D. S. Bathory, J. J. Belinky, D. R. Berg, J. U. Berli, R. O. Bluebond-Langner, M.- B. Bouman, M. L. Bowers, P. J. Brassard, J. Byrne, L. Capitán, C. J. Cargill, J. M. Carswell, S. C. Chang, G. Chelvakumar, T. Corneil, K. B. Dalke, G. De Cuypere, E. de Vries, M. Den Heijer, A. H. Devor, C. Dhejne, A. D'Marco, E. K. Edmiston, L. Edwards-Leeper, R. Ehrbar, D. Ehrensaft, J. Einfeld, E. Elaut, L. Erickson-Schroth, J. L. Feldman, A. D. Fisher, M. M. Garcia, L. Gijs, S. E. Green, B. P. Hall, T. L. D. Hardy, M. S. Irwig, L. A. Jacobs, A. C. Janssen, K. Johnson, D. T. Klink, B. P. C. Kreukels, L. E. Kuper, E. J. Kvach, M. A. Malouf, R. Massey, T. Mazur, C. McLachlan, S. D. Morrison, S. W. Mosser, P. M. Neira, U. Nygren, J. M. Oates, J. Obedin-Maliver, G. Pagkalos, J. Patton, N. Phanuphak, K. Rachlin, T. Reed, G. N. Rider, J. Ristori, S. Robbins-Cherry, S. A. Roberts, K. A. Rodriguez-Wallberg, S. M. Rosenthal, K. Sabir, J. D. Safer, A. I. Scheim, L. J. Seal, T. J. Sehoole, K. Spencer, C. St. Amand, T. D. Steensma, J. F. Strang, G. B. Taylor, K. Tilleman, G. G. T'Sjoen, L. N. Vala, N. M. Van Mello, J. F. Veale, J. A. Vencill, B. Vincent, L. M. Wesp, M.

A. West & J. Arcelus (2022) Standards of Care for the Health of Transgender and Gender Diverse People, Version 8, International Journal of Transgender Health, 23:sup1, S1-S259, DOI: 10.1080/26895269.2022.2100644

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