Scott Lipps (R) Chair Brian Stewart (R) Vice Chair Beth Liston (D) Ranking Member. And their esteemed colleagues

My name is Jennifer Simkins-Bullock. I'm from Toledo and I urge you, even beg you to vote "no" on the dangerous, healthcare denying HB 68

There are 5 democrats on this committee and 8 republicans. Among the democrats are 2 physicians, a nurse, and two people who specifically reference making healthcare more accessible/affordable for all in their bios. I am assuming that the democrats do not need convincing to vote "no" on this dangerous bill because of their backgrounds and, for at least some, likely membership in professional organizations that have policy statements in support of gender affirming healthcare (such as the AMA and ANA)

It is the 8 republicans that may need convincing of the harm that would be done by HB 68 to trans youth and their families. Of the 8 republicans, there are 5 business people, 1 attorney, 1 teacher/ superintendent and 1 former mayor who has no picture or bio on your website but apparently has a background in zoning and planning. Three of these republicans specifically mention healthcare or advocacy of underserved populations in their bios. In his bio, Rep Adam Holmes states that he has "has focused on … **increasing healthcare access and affordability**, … and strengthening Ohio families." I hope this includes trans families. Rep Andrea White has worked to reduce barriers for people with developmental disabilities. Rep Angela King, who has a child who is deaf, has worked diligently as an advocate for the deaf and hearing impaired at the state and federal levels. So, some of you understand the need for accessible healthcare and advocacy for underserved and even discriminated against groups.

Rep King, I ask you if your daughter had been trans rather than deaf, would you have been a tireless advocate for her? Or would you have supported legislation that would keep from her treatments that would improve her quality of life that were recommended by her pediatricians, nurses, psychologists, endocrinologists, and social workers? I would hope you would advocate for legislation that would make her life better — that would reduce depression, reduce her chance of suicidal thoughts and actions, and make her more comfortable in her own skin.

Trans youth and their families want the opportunity to make healthcare decisions that are best for them. With all due respect, when making decisions with my teen about healthcare, I certainly would value the opinions of experts in

medicine, pediatrics, and children's mental health rather than CEOs, attorneys and zoning and planning experts.

For the representatives with a business background, HB 68 could lead to brain drain from Ohio. Doctors and specialty clinics that currently provide gender-affirming healthcare will relocate to different states taking their tax money with them. Businesses and conventions may avoid coming to Ohio due to its anti-LGBTQ policies. I have two bright kids with masters' degrees who would not consider returning to Ohio, in part, because of its anti-reproductive freedom stances and anti-LGBTQ legislation. In the references attached, you will see there are at least 200 companies that take pro-LGBTQ stance including pro-gender affirming healthcare. This proposed law would alienate and turn these companies away from Ohio.

We all want to keep our kids happy, healthy, and safe. This so called Save Our Adolescents From Experimentation bill implies that trans youth and their parents are getting dangerous and experimental and irreversible treatments. First, puberty blockers are not permanent. They are reversible. Surgeries are uncommon before age 18. No one goes into gender-affirming treatment willy nilly. Puberty blockers can give youth a couple of years to explore their feelings about their gender and healthcare decisions. Some may decide that they are comfortable with the sex assigned at birth. Others may decide that would be happier and more comfortable with a different gender expression. Furthermore, while puberty blockers are reversible, some of the effects brought on by puberty are not. Once sex hormones kick in, there are biological changes that cannot be completely undone * or would be much more difficult to undue. If breasts don't develop, then top surgery may never be wanted or needed, for example.

What trans youth and their families need is more time and choices not prohibitions applied in a one-size-fits-all manner.

I have enclosed a list of references and summaries of medical association position statements in my written testimony.

Resources, Policy Statements, and References

The World Health Organization (WHO)

https://onlinelibrary.wiley.com/doi/10.1002/jia2.26004

"WHO is committed to developing evidence-based guidance to work towards UHC for trans and gender diverse (TGD) people.

WHO's role, to promote health for all, means it is committed to inclusive healthcare and equitable access for trans, gender diverse and all other people. In December 2020, Dr Ghebreyesus, Director-General of WHO tweeted "Ultimately, our fight is not against a single disease. Our fight is against a world in which people get sick and die simply because they are poor, or female, or young, gay, transgender, …" Our fight is for #HealthForAll" demonstrating WHO's highest level commitment to support countries to attend to the health needs of TGD people."

American Medical Association

https://www.ama-assn.org/health-care-advocacy/advocacy-update/march-26-2021state-advocacy-update

"Proponents of these disturbing bills often falsely assert that transgender care for minors is extreme or experimental. In fact, clinical guidelines established by professional medical organizations for the care of minors promote supportive interventions based on the current evidence and that enable young people to explore and live as the gender that they choose. <u>Every major medical association in the United States</u>, including the AMA, recognizes the medical necessity of transition-related care for improving the physical and mental health of transgender people."

American Psychiatric Association

https://www.psychiatry.org/newsroom/news-releases/frontline-physicians-oppose-legislation-that-interferes-in-or-criminalizes-patient-care

"Our organizations are strongly opposed to any legislation or regulation that would interfere with the provision of evidence-based patient care for any patient, affirming our commitment to patient safety. We recognize health as a basic human right for every person, regardless of gender identity or sexual orientation. For gender-diverse individuals, including children and adolescents, this means access to gender-affirming care that is part of comprehensive primary care."

American Psychological Association

https://www.apa.org/topics/lgbtq/gender-affirmative-care

"Supportive evidence-based interventions—including but not limited to mental health counseling, social transition support, and hormone therapies—greatly improve mental health outcomes for transgender youth (APA 2015).

Foregoing gender-affirming care can have tragic consequences. Transgender youth experience disproportionate levels of violence and bullying. Transgender youth are also more likely to feel less safe at school than cisgender youth...

Access to gender-affirming care has a positive relationship with the mental health of transgender youth and lowers their risk of depression and suicide (Bauer et al., 2015; Green et al., in press).

Additionally, the distress experienced by youth who are provided treatments, but then decide to discontinue them and grow up to be cisgender, is significantly less than that which is experienced by transgender youth when such treatments are delayed (Ashley, 2021)."

https://www.apa.org/topics/lgbtq/division-54-statement-gender-affirmative-care.pdf

Position Statement: "Support Access to Gender-Affirming Care for Transgender and Gender Diverse Youth. We represent the American Psychological Association (APA)'s Division 54 Society for Pediatric Psychology Special Interest Group for Gender Health. We are comprised of pediatric psychologists and pediatric psychology trainees who specialize in gender-affirming clinical care and research with TGD youth. Gender-affirming healthcare is highly interdisciplinary; as pediatric psychologists, we collaborate with medical providers to promote optimal medical and psychosocial outcomes for TGD youth."

American Academy of Pediatrics

https://www.aap.org/en/news-room/aap-voices/why-we-stand-up-for-transgenderchildren-and-teens/

"There is strong consensus among the most prominent medical organizations worldwide that evidence-based, gender-affirming care for transgender children and adolescents is medically necessary and appropriate. It can even be lifesaving. The decision of whether and when to start gender-affirming treatment, which does not necessarily lead to hormone therapy or surgery, is personal and involves careful consideration by each patient and their family...

Critics of our gender-affirming care policy mischaracterize it as pushing medical or surgical treatments on youth; in fact, the policy calls for the opposite: a holistic, collaborative, compassionate approach to care with no end goal or agenda... Yet outside of our organization, there is a dangerous movement taking place, led by extremists, targeting youth who are receiving gender-affirming care, and vilifying the pediatricians providing their care. The result has been rampant disinformation about what this care is and real threats of violence against some of our members."

Pediatric Endocrine Society

https://www.endocrine.org/-

/media/endocrine/files/advocacy/documents/transgender_health_minors_fact_sheet.
pdf

"SIX RECOMMENDATIONS TO IMPROVE PEDIATRIC TRANSGENDER HEALTH CARE 1 Support for gender diverse youth in their gender identity can improve mental health outcomes and should be included in policy determinations. 2 Treatment for prepubertal transgender and gender diverse children never includes medical or surgical interventions however it is helpful for them to be supported in living in their desired gender role. 3 When puberty begins, gender affirming medical treatment with puberty blockade followed in late adolescence by hormone therapy, is standard of care. Per Endocrine Society guidelines, such treatment is undertaken in a conservative and family-centered process with appropriate medical and mental health supervision. 4 Medical and mental health professionals should feel comfortable providing gender affirming care to their transgender and gender diverse patients as should be the case for any medical or mental health condition. 5 The medical treatment of gender dysphoria/gender incongruence is safe and effective, is medically necessary, and should be covered by health insurance. 6 Conversion or reparative therapy is a dangerous, discredited practice that falsely claims to change a person's gender identity. It is harmful and unethical.

https://www.endocrine.org//-/media/endocrine/files/advocacy/positionstatement/position_statement_transgender_health_pes.pdf

"POSITIONS • There is a durable biological underpinning to gender identity that should be considered in policy determinations. • Medical intervention for transgender youth and adults (including puberty suppression, hormone therapy and medically indicated surgery) is effective, relatively safe (when appropriately monitored), and has been established as the standard of care.6 Federal and private insurers should cover such interventions as prescribed by a physician as well as the appropriate medical screenings that are recommended for all body tissues that a person may have. • Increased funding for national pediatric and adult transgender health research programs is needed to close the gaps in knowledge regarding transgender medical care and should be made a priority."

https://www.endocrine.org/news-and-advocacy/news-room/2020/discriminatorypolicies-threaten-care-for-transgender-gender-diverse-individuals

"The Endocrine Society and the Pediatric Endocrine Society oppose legislative efforts to block transgender and gender diverse individuals from accessing gender-affirming medical and surgical care.

Only reversible treatments are recommended for adolescents until they demonstrate the ability to provide informed consent and experience sustained feelings of gender dysphoria. Even then, gender-affirming hormone therapy to help individuals experience puberty in a way that matches their gender identity is partially reversible."

https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2789423

"Conclusions and Relevance: This study found that gender-affirming medical interventions were associated with lower odds of depression and suicidality over 12 months. These data add to existing evidence suggesting that gender-affirming care may be associated with improved well-being among TNB youths over a short period, which is important given mental health disparities experienced by this population, particularly the high levels of self-harm and suicide."

<u>https://transhealthproject.org/resources/medical-organization-statements/</u> Medical Organization Statements and links in support of gender affirming healthcare for adolescents.

American Academy of Child and Adolescent Psychiatry

- <u>American Academy of Dermatology</u>
- American Academy of Family Physicians
- American Academy of Nursing
- American Academy of Pediatrics
- <u>American Academy of Physician Assistants</u>
- <u>American College Health Association</u>
- American College of Nurse-Midwives
- American College of Obstetricians and Gynecologists
- American College of Physicians
- <u>American Counseling Association</u>
- <u>American Heart Association</u>
- American Medical Association
- <u>American Medical Student Association</u>
- American Nurses Association
- American Osteopathic Association
- <u>American Psychiatric Association</u>
- American Psychological Association
- American Public Health Association
- American Society of Plastic Surgeons
- Endocrine Society
- Federation of Pediatric Organizations
- GLMA: Health Professionals Advancing LGBTQ Equality
- National Association of Nurse Practitioners in Women's Health
- <u>National Association of Social Workers</u>
- National Commission on Correctional Health Care
- Pediatric Endocrine Society
- Society for Adolescent Health and Medicine
- World Medical Association
- World Professional Association for Transgender Health

Fact Sheet regarding Gender Affirming Care

https://www.hrc.org/resources/get-the-facts-on-gender-affirming-care

For the attorney in the group

https://williamsinstitute.law.ucla.edu/publications/bans-trans-youth-health-care

For the representatives with business backgrounds, below are 200 Businesses and Companies that are against discrimination of LGBTQ persons including bans on gender affirming care

https://www.hrc.org/press-releases/200-major-u-s-companies-oppose-anti-lgbtq-state-legislation

23andMe 2U, Inc. Accenture Acxiom LLC The Adecco Group

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Adobe Inc. Advance Auto Parts AEO Inc. Affirm Airbnb AllianceBernstein Ally Altria Group Inc. Amalgamated Bank Amazon **American Airlines** American Express American Honda Motor Company Amgen, Inc. Anaplan Apple Applied Materials, Inc. Arcadis U.S. Inc. Asana, Inc. AT&T Atlassian Autodesk Avanade, Inc. Baker Tilly US **BASF** Corporation Bayer US LLC BCW (Burson Cohn & Wolfe) Ben & Jerry's Homemade, Inc. Berkshire Bank Biogen Block, Inc. (Formerly Square, Inc.) Bloomberg LP **Blueprint Medicines** Boehringer Ingelheim USA Boston Consulting Group **Boston Scientific** Bounteous Box, Inc. Bright Health Group **Bright Horizons Family Solutions Brown-Forman Corporation** Capital One Cardinal Health Cargill

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Hewlett Packard Enterprise HP Inc. Hilton HSBC Bank USA Hyatt Hyve Solutions IBM **ICM** Partners IHG Hotels & Resorts HIS Markit IKEA Included Health Instacart Intel International Flavors & Fragrances Inc. Interpublic Group Intuit Invitae Corporation Jacobs Johnson & Johnson Kellogg Company The Knot Worldwide The Kraft Heinz Company LegalZoom Levi Strauss & Co. Lexmark International, Inc. LinkedIn Lululemon Lush Fresh Handmade Cosmetics Lyft, Inc. Macy's, Inc Mailchimp Marriott International, Inc. Mars, North America Marsh McLennan MassMutual Mattel, Inc. Medtronic Meta MetLife, Inc. Micron Microsoft Mobilize Momentive

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