

Opposition Testimony on HB 68

To Chair Lipps, Vice-Chair Stewart, Ranking Member Liston and members of the Public Health Policy Committee, my name is Melissa McLaren, I am a doctorally-prepared nurse in Ohio and the mother of teenage identical twins, a cisgender son and a transgender daughter. I am asking you to oppose House Bill 68 which essentially bans gender-affirming care for minors.

Our daughter, Conner, has been living a beautiful and thriving childhood after socially transitioning at the age of four. Gender-affirming care starts at home with acceptance from loved ones. She's had supportive family and friends and her school has been a wonderful partner in her care. I won't go into details of life before her transition because I am not here to debate the existence of transgender children. The fact is that transgender children exist and they have a right to evidence-based, medically necessary care.

We have been surrounded by a caring healthcare team at Nationwide Children's Thrive. As our daughter approached puberty, and her identity remained consistent, we added endocrinology to our comprehensive healthcare team. Well before puberty, we began having conversations about what medical options existed for our daughter. We discussed the current evidence, the risks and benefits of starting puberty blockers, and potential side effects. These conversations happened multiple times before medication actually started. As a nurse and nurse practitioner, these types of conversations about the risks and benefits of any medical intervention were very familiar to me because they are standard practice.

The day arrived when bloodwork confirmed that Conner had started puberty. We had yet another conversation about puberty blockers, the risks and benefits, side effects, and how the medication would be administered. The difference between this conversation and all of the other ones was the tremendous sense of relief I felt that the first dose was finally here. I hadn't allowed myself to acknowledge all the fear I had that this option would somehow be snatched from her until after I saw her get that first dose. Then, the tears hit hard as pent-up fear and relief washed over me. This has been my personal pattern with each new medical intervention for her. As we approached gender-affirming hormones, the fear built that I would have to battle the insurance company or some administrator to get her the medication she needed. When she got her prescription, the tears of fear and overwhelming relief came and I laid down my invisible sword because the battle was won. It felt like the years of battling public opinion and misinformation and worries over insurance coverage were finally done. And it was worth it because if my children are hurting, I will walk through the fires of hell to get them the care they need. All of you would do the same for your children.

There's a lot of conversation about suicidality when we talk about transgender youth. As the parents of a transgender child, my husband and I are very familiar with those statistics. We know that suicide risk has been a heated exchange between those who both support and oppose gender-affirming care. This bill talks about suicide rates in the rationale for prohibiting puberty blockers and gender-affirming hormones.

As the mother of a thriving transgender daughter who just got accepted into her dream college and who is living her best and fullest life, I am tired of us measuring the success of a transgender young person's life by whether or not they are suicidal. My daughter is just one example of so many that loving our children for who they know themselves to be and providing the evidence-based gender-affirming medical care they deserve leads to happy and thriving adults.

Politicians do not know my children. They don't know how to raise my children better than my husband and I do. With the exception of the healthcare providers on the committee, politicians do not have the education or training to know better than the 1.3 million doctors and every major medical association to override the evidence that gender-affirming care leads to happy and healthy kids. My daughter is the success story. Instead of talking about suicide she is talking about school. Instead of being filled with misery and depression, she radiates joy and self-determination. Decisions about medical care should be left to parents, patients, and medical providers. If you truly care about kids, you must vote no on House Bill 68. Thank you.