

Opponent Testimony HB 68 + 6 - Senate Government Oversight Committee

Chair Roegner and committee members. My name is Arienne Childrey. I am a trans woman and an advocate for the LGBTQ community. I'm here today to ask you to vote no on HB 68 and 6. I can't ask you to understand the experience of trans people, of all ages, during this very volatile time for us. However, I would ask you to try to imagine running to the state legislature on a regular basis, just to argue for your right to exist or hearing that news that, once again, those elected to serve are targeting your community. It's exhausting.

A popular talking point around this bill is the conversation surrounding surgery for minors. In the house, we heard from one medical professional after another, stating clearly that no child is receiving gender confirmation surgery in Ohio and no advocate, activist or constituents before you are advocating for that. Given the rhetoric around this issue, allow me to emphatically say, no one is asking for legal sex change surgeries for minors.

So then, that would lead to the question of why we would be so opposed to a bill that bans something that doesn't even happen. The answer is simple. This bill goes well beyond gender confirmation surgery. This bill would ban all forms of gender affirming care, including hormone replacement therapy, puberty blockers and even insert the government into mental health evaluations.

This bill would also have the effect of forcing detransitioning of those minors who have already received care. That means a 16 or 17 year old trans girl could be forced to go off her hormones, be forced into male puberty and see her body, voice and appearance change into a person she neither recognizes nor identifies, right before her eyes. Likewise, a trans boy could see breast growth and the start of menstruation. I can't begin to explain the trauma that individual would endure.

Gender affirming care is only controversial in the political world. Contrary to what you may have been told, this is not a medically ambiguous situation. The Endocrine Society has cited more than 260 studies in their "Clinical Practice Guidelines," about gender affirming care and, along with The American Academy of Pediatrics, The American College of Obstetricians and Gynecologists, The American Urological Association, The American College of Physicians and many, many others, have referred to gender affirming care as evidence-based care and stated that these "medical decisions should be made by patients, their relatives and health care providers, not politicians."

One aspect of the Hippocratic Oath is "First, do no harm." Our doctors are following that creed, by helping patients and families make informed decisions, based on the evidence. I understand that, as legislators, you take a much different oath but, make no mistake, inherent in all public service is an understood obligation to do no harm. The mere proposal of this bill violates that inherent obligation. It raises the heated rhetoric against trans people of all ages and would do much worse harm, if passed.

If I could end with a personal story about my own transition. Nearly six years ago, I decided to have a surgical procedure to make me feel more comfortable in my own body - a breast

Opponent Testimony HB 68 + 6 - Senate Government Oversight Committee

augmentation. I'd been in counseling, been on hormones and discussed my desire with both my medical doctor and my psychologist. I went to my consultation, with money in the bank, and prepared to write the check. At the end of the consultation the doctor said, following WPATH standards, come back with a letter from your psychologist and we'll get you scheduled. Cisgender women receive the same procedure on a daily basis. All based on the year, anywhere from around 200,000 to 360,000 women get that exact same procedure each year, and they aren't required a permission slip from a psychologist to do so.

I wasn't a minor at the time - far from it. In fact, I was in my mid-thirties. However, it demonstrates the guardrails that are in place, even for trans adults asking for one of the most common gender confirming surgeries. Now imagine how much higher those guardrails are set for minors, just for the purposes of hormone blockers or hormone replacement therapy.

Clinicians have studied these issues. They've poured over the studies with years of medical training ... training that helps them understand and apply the rigorous standards of care. And those years of study have led them to conclude that gender affirming care is the best option for many and life saving care. This is a medical issue, not a legislative issue. Inserting the government into this decision will not better the lives of trans children, youth or adults. All it will do is force families to make the unimaginable decision of allowing their child to suffer, violating the law or moving to another state, where their child will be free to thrive as their authentic self. If Ohio is to be a safe place to raise families, it has to be safe for all families. Not only those that look, live and believe as you.

Thank you,
Arienne Childrey