December 4, 2023

Chairwoman Roegner, Vice Chair Antani, and Ranking Member Hicks-Hudson and members of the committee: Thank you for allowing me to provide testimony in opposition to HB 68.

My name is Brandi Allen. I live in Columbus, and I am the Director of Workplace Health at the nonprofit Mental Health America of Ohio. I am a licensed mental health counselor, a wife, and the mother of three. The oldest of my children is a trans male named Joe.

Because I know how much different life would be for my child and family if we had NOT had access to quality health care for my trans child, I am detailing my son's health care journey in the desperate hope that no one else will be denied access to life saving health care. In short, I write in opposition to HB 68 and ask you to protect all children by opposing this bill.

Eight years ago, my then ten year old approached me with a request I never would have anticipated. The request was to use the name Joe and to refer to [her] as a boy. Even as an educated mental health professional, I was nearly blindsided. I didn't know anyone who was transgender. I realized I had a story in my head about how trans kids revealed themselves to their parents, and this was not the way the story went. It didn't include a 5th grader who happily wore dresses and jewelry nervously admitting one day that [she] felt more like a boy than a girl. After many discussions in which we parents gently tried to redirect this new gender expression by declaring our fervent commitment to letting [her] live in a way that broke all stereotypes about girls, we realized Joe's request was persistent. The more we suggested alternatives, the more he withdrew from us. It was confusing and overwhelming for all of us.

Fortunately, after several starts and stops with therapists who were not sufficiently trained to support trans youth, we heard about the Thrive Program at Nationwide Children's Hospital. Thrive provides multi-disciplinary, evidence-based care that is tailored to the needs of each child and their family. We were lucky to have entered the program in its earlier stages of development when the waitlist was short. We were connected to a therapist immediately and since then have been fortunate to develop profound health care relationships with an entire team of professionals including a medical social worker, psychiatrist, and pediatrician.

Throughout the course of Joe's treatment, but especially at the beginning, Thrive's team has carefully discerned the difference between gender dysphoria, depression, anxiety, and the normal ups and downs of adolescence for Joe. He has experienced all of those things but especially the unique distress that comes from living in a world where people don't see you the way you see yourself. The team's ability to make those expert differential diagnoses has been absolutely invaluable and is the foundation to all good trans youth healthcare. They have known how to treat the mental health challenges, they have known how to treat the gender dysphoria, and they have known when to do nothing.

Unfortunately, not all trans youth have access to this expert care, which is nothing short of life saving. That is not hyperbole. There was a time when Joe was having suicidal ideation – by far one of the most vulnerable, scariest times in my life. By this point I was keenly aware of the higher rates of suicide for trans teens compared to their non-trans peers. Through the support of his health care providers, Joe was able to find the energy and perspective he needed to keep moving forward in his life. We did not have to go through it alone, and we did not have to cobble together services from people who did not understand the range of burdens trans youth live with.

At every point along the way, we as parents have been thoroughly informed of Joe's treatment options and have been able to be the leaders in the decision making. When signs of puberty appeared, we were informed of the option for Joe to take "puberty blockers," medication that would essentially pause those processes. These are

meant to allow the patient more time to become familiar with their gender identity before the body completes permanent changes that could potentially conflict with the patient's identity later. We decided we were not comfortable with halting those processes, and not one person pressured us to make a different choice.

Joe and I have discussed what has been most helpful about the care he has received at Thrive. The treatment pace and the space and respect he has been given to make decisions that made sense to him were the most critical things he identified. Today, Joe is attending The Ohio State University on a four-year tuition scholarship, double majoring in zoology and Spanish, enjoying new friends, and looking forward to studying abroad someday.

Because Joe had access to appropriate, high quality care from experts trained in transgender health, he was able to experience less distress during some of the most developmentally critical times of his life. He was able to explore his strengths and challenges, obtain the treatments that matched his needs, and feel more at home in his body and his life. Isn't that what we all want for our children?

If Ohio lawmakers eliminate safe access to the established, internationally recognized health care protocols for transgender people, the results will be dire. Children and families will suffer and, yes, kids will die. Please understand: the personal experience of being transgender will NOT disappear. Some professionals will attempt to continue to honor their commitment to care for all of their patients, including their trans patients, but they won't be able to do it well. They will misdiagnose and inadvertently under- or over-treat, and the onus will be on the lawmakers who made it impossible for them to confidently provide the established treatments available for trans youth. Ultimately, the children and families you have committed to advocate for will not be protected.

Thank you for your time and for allowing me to share our story.

Best regards, Brandi Allen