Senate Health Committee

Testimony of Geraldine Donna-Evangeline Hartman on Ohio HB 96,

2025/05/13

[Opening]

I thank Chairman Huffman, Vice Chair Johnson, Ranking Member Liston, and members of the Senate Health Committee for the opportunity to provide public testimony today.

My name is Geraldine Donna-Evangeline Hartman, I'm a forty-five-year-old, transgender woman from Dayton, Ohio, born and raised. I have worked and paid taxes most of my life, since I was 16 years old, only having qualified as disabled as of January this year. I am presently going through a divorce after 25 years with my wife, who had billed herself as a trans-ally for most of the 19 years we have been married. We have two wonderful children together, ages 14 and 17, and you could be forgiven for thinking that my recent pursuit of coming to terms with my gender identity has had greater bearing on the current trajectory of my relationship with my wife than it actually has. You see, my wife has known of my gender diversity since two months after we first started dating, and was in fact struggling with gender dysphoria herself when we first met, while also married to another man for whom gender identity was not a binary. No, far many more complex issues have congealed to create the circumstances of my failing marriage, not the least of which were some very standard factors such as financial and emotional difficulties, dishonesty, and yes, even some severe transphobia on the part of my spouse.

However, I am not here to discuss my personal life. I only bring these factors to light in order to illustrate that I am a real person with many troubles and flaws, just as your many other constituents, not some perfect, paid actor. Yes, I also am a transgender person, one for whom the journey of gender identity was first documented in 2003 when I was still a college student at The University of Dayton. I was in counseling there then, and my wife (Then girlfriend) was present when my counselor first broached the subject of Gender Affirming Care; a topic of which I knew nothing at the time.

However, my journey with gender identity started long before even my college years, first appearing for me when I was about 4-5 years of age, in 1984-1985, long before there was an internet or social media. I feel this is vital to point out since there are many among you who seek to cite these influences as a primary driving factor of what many legislators here would label as "gender ideology" as they seek to quench the flames of "the gender revolution" by way of subversive, transphobic legislation such as was inserted in the last 24 hours prior to voting into HB96 that was presented to the House.

I am here to testify, first, that transgender people such as myself are not an ideology, myth, or some cryptid like a yeti. We are real people, with real lives. We represent roughly 1% of your constituency, though many more when you consider the 1.7% of your constituents who are transgender by way of being born intersex. I am here to tell you that transgender people are not some pseudoscience, we are not some recent internet trend or fad, and we have existed for most of recorded human history. We do exist and we deserve the same rights to exist as all of your other constituents. That we have U.S. presidents and state legislator's alike trying to pass surreptitious laws to deny my existence. Yet, here I am, a human being who does not neatly fit into the flawed gender binary of humanity as defined by Donald Trump, a man who is no more a scientist or statistician than he is a good businessman; which is to say, not a reliable source of facts at all. That I have had to appear before you at all to prove the existence of transgender people is itself absurd, yet here I am along with many others like me.

I am here today to speak to the senate finance committee in opposition to two provisions added to HB96—Section 9.05 and Section 333.13, both last-hour provisions surreptitiously added to the state budget that was being voted on by the house at the beginning of April, though neither has much of anything to do with the state budget itself.

I am choosing to speak against the inclusion of these provision on the state budget because they represent clearly antitransgender rhetoric and discrimination that has thrust itself into the spotlight across our nation in states capitals and even on the lips of the highest elected official in the United States, the president, which is a damning and shameful revelation. Transgender discrimination has historically been only a stepping stone on the path towards discrimination of other groups, including racial minorities and women; whom such legislation is often purported to protect, despite overwhelming evidence to the contrary. No, the only people transphobic legislation actually serves to protect are the small-minded white men who propose it out of fear of themselves becoming a n underrepresented minority in the near future.

[Section 9.05]

Section 9.05 declares it is the policy of Ohio to recognize only two sexes, defined solely by gamete production. This definition is biologically, grossly inaccurate since, by account of the NIH's own abstract titled

"Exploring the Biological Contributions to Human Health: Does Sex Matter?" https://www.ncbi.nlm.nih.gov/books/NBK222286/

This article states "All human individuals—whether they have an XX, an XY, or an atypical sex chromosome combination—begin development from the same starting point. During early development the gonads of the fetus remain undifferentiated; that is, all fetal genitalia are the same and are phenotypically female. After approximately 6 to 7 weeks of gestation, however, the expression of a gene on the <u>Y chromosome</u> induces changes that result in the development of the testes. Thus, this gene is singularly important in inducing testis development." Therefore, I understand what Donald Trump was trying to state, that one can only be male or female at conception, that this is immutable. However, it is quite incorrect, since <u>all</u> human beings are actually defined as phenotypically female until Y chromosome expression is induced about 6-7 weeks after gestation. Defining sex as fixed "at conception" contradicts basic developmental biology.

This language mirrors recent federal executive orders—not peer-reviewed science—and it is deplorable, plain and simple.

This is further legally problematic since the same article also denotes that humans can also present with *an atypical sex chromosome combination*, which represents intersex individuals, as some 40 known atypical variations of chromosomal expression beyond typical XX and XY presentations. Intersex individuals are people born with variations in chromosomes, external or internal anatomy that don't fit traditional definitions of a male or female binary. Some may produce There are actually five biological variables (your chromosomes, prenatal hormone exposure, external genitalia, internal reproductive organs, and pubescent hormone development that define sex, not just two. There are also three psychosocial variables which include the sex you were medically assigned at birth (on your birth certificate), the sex you were raised as in your family (does not always match birth sex), and the sex you believe you are (referred to as your gender identity). This law Section 9.05, excludes intersex people entirely, which represents 2 out of every 100 of your constituents, statistically.

This provision only exists to deny the existence of trans and intersex individuals, and to open us up to be further discriminated against. It should be readily apparent that any legislation is based on "feelings" rather than sound, deductive reasoning has no place in this bill, and serves only to disenfranchise an already marginalized group of your constituents. The fact that Donald Trump, and the legislators who are attempting to propagate his flawed ideologies into state law have conflated "sex" with "gender", without consideration for genetic, physiologic, or psychologic elements, which ultimately governs a person's identity, is extremely dangerous. It is going to have both intended and unintended consequences with regards to patient's lives, discrimination, etc. It's like saying gasoline and rocket fuel are inherently the same thing, and saying that they can both go in the same engine.

[Section 333.13]

Section 333.13 would block Medicaid funding for any mental health services that "promote or affirm social gender transition." This contradicts the standards of care endorsed by every major medical association, including the American Academy of Pediatrics and the American Psychiatric Association.

Social transition is not medical intervention—it may include a name change, different pronouns, or clothing choices. Support for this, especially in youth, is proven to improve mental health outcomes and reduces suicide risk. I can speak to this personally, as a teenager and young adult I struggled intensely with both depression and suicidal ideation. These feelings did not go away until I accepted who I truly am. The same is true for my wife, who attempted to take her own life at one point prior to her transition.

In the case of medical intervention, gender affirming care is no different from any other form of healthcare, it is also not exclusively utilized by the transgender community. A cisgender man receiving hair implants or being prescribed medication for Erectile Dysfunction are both examples of it. A cisgender woman taking estrogen to combat the effects of menopause is as well. Denying people access to gender affirming care solely because they are trans is blatantly discriminatory. If you are okay with a cis person receiving this care but are not okay with a trans person doing the same, you are not just repeating bigoted rhetoric, you are actively being a bigot yourself.

Additionally, if the discriminatory nature of this provision wasn't enough, it could have broad unintended effects. If one provider or program within a major health system is deemed "affirming," the whole institution would lose Medicaid reimbursement—impacting potentially thousands of patients far beyond the transgender community. Laws targeting transgender Americans negatively impact all Americans, plain and simple. It should be readily apparent that any legislation that takes medical care out of the hands of professionals and puts it in the hands of unlicensed politicians is immoral.

Gender transition was already the most highly regulated type of medical care that A person could seek, even more so than an abortion. It always required a multidisciplinary team of experts, with several stop gaps built into the process to ensure that the patient's needs are seriously considered, and any potential mental instability is properly addressed before moving toward any kind of permanent changes. This is true for all transgender patients, but is especially true for minors who are transitioning. The vast majority of patients that have gone through gender transition experienced a drastically improved quality of life and mental health. This law seeks only to do harm by removing what is likely the last hope of help for the disproportionate number of transgender youths facing homelessness by threatening to remove their access to homeless shelters simply for being transgender.

No shelter can realistically be expected to endanger all of the residents it serves simply by honoring the pronouns of a transgender youth. But then, it is clear from this group of transphobic provisions that were added to HB96 that the cruelty against transgender people is the point.

[Closing]

These provisions are not grounded in medical science and pose real harm to an already marginalized and vulnerable part of Ohio's population. Transgender and intersex people have existed for as long as humanity has, we are not an ideological movement, we are citizens and taxpayers, the same as you. I urge the committee to consult with clinical experts, to listen to their constituents, and to revise or reject these discriminatory provisions to the budget. If this does not happen, you will be directly responsible for the deaths of Ohioans, people that you have promised to protect. Not only that, you will have aided your constituents in hurting the wrong 1% of the population by hurting transgender people when it is clear that the 1% of the US population Americans should really be focused on are the billionaires who do NOT need the tax cuts they are being granted!

Thank you for your time. I welcome any questions.