To Chair Manchester, Vice Chair Cutrona, Ranking Member Denson and Members of the House Families, Aging and Human Services Committee:

I am not a Dr. I am not an activist. I am not an expert on psychology or child development. I am a mother who has been fighting for my daughter's health. My husband and I have been disillusioned by the care we have received and feel we have been completely let down by the medical community.

My daughter had battled with mental and physical health problems for years. In middle school she was bullied, had friend issues and didn't want to live. I took her to Children's Hospital, but she wasn't "suicidal enough" to be held. A year later, she had 1 friend attempt to end their life and another succeed and there was a very public suicide of teenager on a highway. Within a week, our daughter disclosed her suicide plan to me. While in the hospital I found her journals and artwork that depicted an extreme self-loathing, loneliness, isolation, paranoia and same sex attraction.

At 14, she was admitted to inpatient care at Cincinnati Children's Hospital North College Hill for a week. The doctor never spoke with us during her stay, did not return calls and never met us in person. **We were never given a formal mental health diagnosis for our daughter**. We later learned that our daughter was severely traumatized during her hospital stay by other patients and staff.

Shortly after the hospital stay she declared she was a boy. She insisted on new pronouns and said she wanted to dress "masculine". She discarded anything that was feminine. She also had a new name for us to call her. We were blindsided. Where did this come from? She had a crush on a boy for months, now she wanted to be a boy?

Our pediatrician recommended the Cincinnati Children's Hospital Transgender Clinic. At the first visit, we met with a social worker for a short health history and then the founder of the Clinic. **There was no discussion of past or current mental health** or what we felt as parents would help our daughter.

The whole appointment lasted less than 15 min and in front of our daughter, the judgement was handed down.

- 1. We (and everyone around us) would affirm our daughter who is now our Son. This meant, we HAD to use that name and pronoun our daughter wanted even if we didn't believe it or want to use it.
- 2. We had to buy her new 'masculine' clothes and a binder to reduce the appearance of her breasts.
- 3. She needed to see a Gender therapist that they would recommend.
- 4. She was given birth control that limited her to 4 cycles a year because "women really didn't need to have a monthly cycle"
- 5. Our 15-year-old daughter was offered testosterone. (we declined)

- 6. They told us to buy a book called Gender Quest and go over it. (which was never been mentioned again)
- 7. We were provided with a letter from the Dr to give to all other providers and our daughter's school that told them how to affirm our daughter as a boy. (See attached)
- 8. We were given a handout of 'Best Practices for Suicide Prevention'

At subsequent visits we felt pressure from the gender clinic staff to pursue full social and medical transition of our daughter as the only answer. It was clear that this renowned gender clinic only wanted to push medical transition. They didn't care about the root cause of our daughter's distress. We felt trapped and **coerced** and went along out of **fear** as the clinicians continually **threatened** us with the possibility of our daughter's suicide.

We attended a clinic sponsored support group. At our first meeting the founder and head of the clinic was specifically asked about treatment of wrong sex hormones and the long-term effects of Testosterone. After dodging the question multiple times she finally claimed not to have any long term data of the cumulative effects of wrong sex hormone treatment. According to her, her "JOB" was to get "the kids" through adolescence alive. Once again we were advised that our children would commit suicide if we didn't follow these unapproved medical protocols. Furthermore, her main concern seemed to be that we as parents submit these treatments to insurance in order to compel the insurance companies to pay for them.

After 2 years of affirming her gender and following the instructions of the doctors, our daughter went back in outpatient hospital care due to another deep depression. It became clear to us that all of this affirmation was not making a difference. No Doctor or Therapist we talked to would consider any alternative than full medical transition.

Four years after her original hospitalization, our daughter shared that *she told us she was male b/c she thought that would be easiest for us to understand. She didn't feel female but she doesn't feel male.* She still had major issues with doing what a normal 17-year-old would do (no job, no driving, no planning for college) so we had some brain assessments done. We found that her Startle Reflex was still 75% intact. It should be gone by 1 yr of age. This meant that she had an overactive brain stem and was always in a fight or flight mode, like people with a trauma diagnosis. As indicated earlier in childhood, her processing of the spoken word was behind. It was that of an 11-year-old. She had the fine motor skills of an 8-year-old and the body awareness of a 9-year-old.

This means her social and emotional understanding of her body was prepubescent. Her gender therapist had absolutely no interest in these findings or our concerns and continued to only support transition. Sadly, our attempts to help our daughter were undermined by Equitas Health in Columbus shortly after her 19<sup>th</sup> birthday. Despite abnormal bloodwork, which required an MRI with no conclusions, our 19-year-old daughter began Testosterone injections. After almost 2 years on Testosterone, she is likely sterilized, her voice has been permanently altered, she has acne all over body, her hairline is receding, her face is puffy and her depression and anxiety has not improved. We also know that she suffers from sleep issues, sensitivity issues, OCD, ADD, some sort learning or processing disability and unaddressed trauma.

None of those issues can be addressed with surgery and yet her Equitas Dr. continually encourages her to have a bi-lateral mastectomy in order to address her problems. Furthermore, the Dr recommends that my daughter apply for Medicare in order to pay for this treatment that will be completely ineffective in addressing my daughter's mental concerns.

When doctors ignore underlying issues, good science, bad side effects and only push a single treatment without considering any others, we must step in and question why.

Please support families and vote yes on HB454 to protect parents and children from being coerced into harmful, life altering treatments before these children have the brain development to understand the lifelong implications of these treatments.

## Supporting Articles & Websites

<u>https://segm.org/</u> promote safe, compassionate, ethical and evidence-informed healthcare for children, adolescents, and young adults with gender dysphoria.

https://segm.org/Sweden ends use of Dutch protocol Sweden ends puberty blockers and wrong-sex hormones in minors

https://www.dailymail.co.uk/news/article-8061949/Woman-claims-rushed-takingexperimental-puberty-blocking-drugs.html

https://www.dailysignal.com/2021/06/22/new-documentary-highlights-the-harm-of-gender-affirming-health-care-model-on-children/

https://wng.org/roundups/study-effects-of-puberty-blockers-can-last-a-lifetime-1617220389

https://mercatornet.com/the-pillars-of-transgender-medicine-are-shaking/71798/

Testosterone risks for women <u>https://www.endocrineweb.com/professional/testosterone/high-testosterone-levels-</u> <u>linked-nafld-younger-women</u>

https://www.endocrineweb.com/news/other-endocrine-disorders/62835-high-levelstestosterone-affect-women-men-differently