## **Nick Chmura**

Chair Manchester, Vice Chair Cutrona, Ranking Member Liston, and members of the House Families, Aging, and Human Services Committee, thank you for this opportunity to voice my opposition to House Bill 454.

My name is Nick Chmura(he/him/his) and I am a Licensed Professional Clinical Counselor and university instructor in Cleveland, Ohio. I am writing to submit my professional testimony against House Bill 454, preventing transgender youth from receiving proper medical care.

I have worked with youth for the past 15 years and trans youth in a clinical setting for the last 3 years. Hearing about this bill, I was struck by how much this goes against research, guidelines of trans care, and the amount of psychosocial damage it would inflict. I was incensed that practitioners, like myself, who have been working with LGBTQ+ clients for extended periods of time — and who are educated/trained in making assessments to support best outcomes would be removed from the equation, under the guise of this somehow being safer for trans youth. I am working with a young person who I started to see as a client when they were 14 years old. They have been aware of an incongruence between their sex assigned at birth and gender expression since they were 9. The lack of control they have felt over a body that did not feel like their own has caused recurrent bouts of disordered eating, suicidality, self harm, depression and anxiety. It has been clear from my assessment that they are challenged by many if not all of the symptoms of Gender Dysphoria as defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), which includes struggling with several of their primary sex characteristics and much of their secondary. My role as a medical professional in a mental health setting is to help my clients confront and hopefully overcome areas of suffering in their life. In this case, I am collaborating with my client and their parents to reduce their dysphoria. I am confident in this case that gender affirming treatments can help reduce the time that my client is living in a body that feels foriegn to them. That gender affirming treatments will help them live in a body more congruent to their gender identity which will save them from years of healing and therapy in the future. My role is to help minimize the amount of suffering and psychological damage my clients incur and this bill directly goes against that; as in this case, it would delay their opportunity to have treatments for years (even after confirmation from a medical professional of the necessity for them). This is just one instance of many I could share. I have countless from my clinical experience that this bill would do incredible harm to young trans people.

This bill goes against scientific research that has been gathered over decades and against trans guidelines for care that have been developed by experts, which is why again, I strongly oppose this bill.

Nick Chmura LPCC