

Chair Lipps, Vice-Chair Stewart, Ranking Member Liston and members of the Public Health Policy Committee, thank you for the opportunity to speak to you today. My name is Carey Callahan English and I'm a resident of Bainbridge, Ohio. I am here to oppose House Bill 68, misleadingly named the "Saving Adolescents from Experimentation" act. This bill departs from widespread medical consensus to lead Ohioans into a truly dangerous medical experiment, in which we chase expert clinicians out of our state and leave children discerning their identities adrift and at risk until they also have the resources to leave our state.

I am a detransitioned woman and family therapist, who has been vocal in the national media about the need for trans healthcare organizations to support detransitioners. I was featured in a 2018 article in the Atlantic about the treatment of gender dysphoria in young people. I wrote for The Economist in 2019 criticizing informed consent programme norms in trans healthcare. I have repeatedly challenged dogma and healthcare norms as a highly visible representative of the detransitioned community. I am also a lifelong Ohioan, graduate of the Ohio State University and the University of Akron, raising children in this state and hoping against hope that my children will want to raise eventual grandchildren in Ohio.

For anyone navigating the distress of gender dysphoria, whether they are moving towards a trans identity or a gender nonconforming life, accessing high quality expert healthcare is a baseline need our government should be helping us meet rather than impeding. I have taken many reputational hits to highlight an area of growth trans affirmative medicine must address- greater emphasis on and programming for those of us who explore but do not arrive at a trans identity. There is no area of medicine where patient feedback is not an important catalyst for better care. There is also no area of medicine where politicians banning medicine results in higher quality care or better patient outcomes.

This bill references a list of potential complications from trans affirming hormone therapy and surgeries. Every day in Ohio people undergo a medical procedure that has the potential complications of lifelong fecal incontinence, organ failure, paralysis, and death. These complications pose a much higher risk to the patient's quality of life than the complications associated with trans affirmative healthcare the bill describes. Fortunately for the medical procedure I'm referencing, we understand that shutting down labor and delivery wards and making pregnant people drive to other states to give birth would increase the potential for them to be seriously harmed. Rather than banning labor and delivery care because of associated complications we expect our doctors to offer parents high quality referrals for complications and continually engage with current medical research on the best ways to safely protect parents during birth.

I am someone who had to move out of Ohio to access trans affirmative healthcare while I was transitioning. I've experienced the traumatic circumstances trans people often endure- being belittled and humiliated in medical contexts, being unable to get a job that paid enough to keep me out of poverty, being targeted for street harassment, and making sense of all of that alone, because I had to choose between my community in Ohio or access to competent clinicians in California. Even now as I make my way through life a decade later a cis, economically privileged Bainbridge mom, those experiences left deep marks on me. It did not serve me to have to sacrifice so much to try to find who I was supposed to be. It will not serve our trans kids or our discerning kids to have their access to medicine be the catalyst for their families to leave loved ones, jobs, schools, and churches to access the doctors who have the years of education and training to help them.

Detransitioning can be a deeply isolating situation. When a person realizes they aren't trans the lack of institutional support is devastating. The well funded outsider extremist groups pushing these care bans in many states to drive trans people out of our communities are absolutely to blame for the dearth of detransitioner support. How are clinicians in trans medicine supposed to improve the care they offer when they have to spend their time defending the legality of their jobs? This bill asks every clinician supporting a minor discerning their gender to report the details of that case to the

Department of Health. This bill restricts Medicaid consumers from accessing trans healthcare. How are clinicians supposed to develop better care for detransitioning clients with the state government slashing the time and resources they have to offer to patients?

I am begging you to stop attacking trans healthcare and trans people. I am begging you to stop referencing detransitioners such as myself as a justification for attacking trans healthcare and trans people. You aren't protecting children from becoming a detransitioner like me. You are exiling good people from our state, traumatizing kids and families, and working hard to make Ohio a less safe place to raise kids. You are doing real harm to me personally, to my neighbors who live a cul de sac up, to the lovely trans kids I know, to the lovely discerning kids I know, to the doctors and therapists who have put in the years of education and experience to improve people's quality of life. Please drop this misguided experiment and use your elected positions to help Ohioans live good lives. Thank you.