

## Testimony of Emily Baker Against House Bill 68

Chairman Lipps, Vice Chair Stewart, Ranking Member Liston, and members of the House Public Health Policy Committee,

My name is Emily Baker and I appreciate being provided with the opportunity to provide testimony in opposition to House Bill 68. I am a behavioral health research director, outpatient therapist, and college lecturer. I obtained my doctorate in Counselor Education from The Ohio State University and my master's degree in Clinical Mental Health Counseling from the University of Cincinnati. In each of these roles, I have researched and witnessed the positive impact of gender affirming care on youth. Over half of my current clients/patients are transgender or non-binary, and my experience working with them has continued to inform my understanding of gender dysphoria, gender identity, and gender affirming care. The opinions expressed in this letter are solely my own.

Gender affirming care is life-changing and lifesaving. This has been consistently demonstrated in medical and behavioral health literature. The standards of care for providing gender affirming care are based in scientific evidence. Robust research continually demonstrates the effectiveness of gender affirming care in improving the well-being, health, and quality of life of gender diverse individuals. Within these standards of care are strong safety measures to help children with gender dysphoria. A child cannot walk into a doctor's office, request a breast reduction surgery, and leave with a scheduled surgery in the upcoming months or even years. That child must attend intensive therapy and evaluations for at least a year before surgery would even be permissible. This process is the same for any medical intervention, including hormone treatment. None of these things are done on a whim.

Completely banning all medical interventions for any individual under 18 with gender dysphoria will only contribute to increased suicides, substance misuse, and behavioral health concerns. It directly contradicts the internationally recognized health guidelines. The medical and surgical treatments that are specifically prohibited by House Bill 68 are not currently nor are they intended to be the treatment for all youth with gender dysphoria. For the transgender youth that require them, their ability to access treatments and receive care from a supportive community of providers is essential to their overall quality of life.

I urge you to not create additional barriers to the healthy development of youth. Youth with gender dysphoria deserve our love, care, and resources. They deserve care based in evidence. Please vote NO on House Bill 68.

Thank you for your time and consideration,  
Emily Baker, PhD, LPCC-S