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Chairman Lipps, Vice Chair Stewart, Ranking Member Liston, and all members of the Public Health Policy Committee, thank you for the opportunity to testify today in opposition of House Bill 68. My name is Abbey Carter Logan, my pronouns are she/her, I am a Licensed Professional Clinical Counselor Supervisor in the state of Ohio and have worked in the field of mental health for the past 15 years. I co-own and serve as the Clinical Director of a counseling private practice called Clintonville Counseling and Wellness (CCW), which was founded to address the gap in mental health care for the LGBTQ community in central Ohio, specifically transgender and gender expansive individuals who have been marginalized, misunderstood, and excluded from many of the privileges of our society. In 2022, our practice met with over 1,000 unique individuals, the majority of whom are transgender, so I feel uniquely qualified to testify on this topic.

Mental health in general is severely impacted by exclusion, lack of belonging, and oppression. While this bill claims to be protecting children, it is threatening the existence of a vibrant, authentic, and caring community. Since the introduction of these bills in our state, I have witnessed the stress, suicidal ideation, depression, and anxiety levels of our clientele increase drastically, and overall mental health decline. My staff is concerned for the well-being of their clients, and so am I. Before working at CCW I worked at the university counseling center at The Ohio State University. While there I worked with several individuals in the LGBTQ community, but only a handful of transgender individuals. When I came to work for Emily Clark at Clintonville Counseling and Wellness, I was intimidated by the prospect of working more closely with this population. I hadn't worked with many transgender individuals and I wasn't sure that I knew enough. Emily's advice to me was to just "treat them like human beings and the rest is details." She was right. In my work with the transgender community, the most powerful healing balm comes in recognizing their humanity and helping them to find the care they need to be their most authentic self; this is identical to the work we do with cisgender individuals, people whose gender aligns with their sex assigned at birth.

The details that I have learned in my career with CCW have shown me the incredible amounts of red tape that is put before the transgender and gender expansive community, to stop them from receiving life saving mental health care. This bill not only adds additional obstacles to the health and safety of some of our most vulnerable Ohioans, it also creates barriers for mental health professionals wanting to work with this community. With the increasing mental health needs of our state, we work countless hours preparing documentation and this bill will greatly limit our abilities to provide the expert care that this community deserves. Before telehealth, many transgender and gender expansive individuals would drive 2-3 hours to come see us because we were the closest affirming therapy office to their home. Medical professionals who would prescribe hormones to them were even harder to find in Ohio and even then, many would require psychological evaluation letters from a therapist or two before agreeing to treat them. For transgender individuals seeking gender confirming surgical procedures to help them align their bodies with their gender, the process is even more challenging. Competent surgeons able and willing to do these surgeries are difficult to locate and folks often have to travel far distances within, and sometimes outside of, Ohio. Insurance companies have many hoops and challenging requirements that often extend beyond the The World Professional Association for Transgender Health (WPATH) Standards of Care, the guidelines for treatment of transgender individuals.

The WPATH, Standards of Care for the Health of Transgender and Gender Diverse People contains guidelines and standards for mental health care, endocrinology, surgeries, and other life saving treatments for transgender humans. This comprehensive document was created by a worldwide multidisciplinary team of experts and provides health care practitioners with a guide of empirically- based scientific research that guides the clear, cautious, and ethical treatment of this population. No health care provider should be providing care to transgender people without familiarizing themselves with these standards. The most recent version was released in September, 2022 and provides age limits for gender affirming treatments, with exceptions made in only the most complex of cases in consultation with health care specialists and with the expressed written consent of legal guardians. Minors are rarely treated with surgeries or hormones, because of the complexity of this concern and a need to move slowly. In our office, we provide psychological assessments that are required for gender affirming surgeries of which the age of consent is 18 years old. In the past 2 years, we have provided 210 assessments and only 1 of those was for a minor who was 17 years old and preparing to be assessed for surgery when they turned 18. As one of the premiere providers of mental health services for the transgender community in Central Ohio, drawing clients from all over the state, we have not written letters or provided assessments for children to have surgery before they are adults, because minors are not coming for that service. Regardless of this we fully support the informed decisions made between a transgender minor, their guardians, and their provider of gender affirming care.

The proposed House Bill 68, Section. 3129.03. presumes that mental health professionals are not already utilizing their training, WPATH standards, and code of ethics to guide their decision making. The fact that this bill states that “No political subdivision may prohibit the use of watchful waiting, treatment and therapies similar to those provided for the

treatment of body dysmorphia and eating disorders, or other models of care that assist minor individuals experiencing a gender-related condition in reconciling their gender identity with their biological sex,” is a gross misunderstanding of mental health treatment, our training, WPATH standards, and code of ethics that guide our practice. I would argue that the fact that we are even considering making the gender affirming care of transgender minors illegal, is in fact creating a political subdivision and promotes the dehumanization of transgender people. The documentation guidelines outlined in Sec. 3129.06. increases the already burdensome process of documentation on mental health professionals and are eerily familiar to times when people were tracked based on the color of their skin or ethnic backgrounds in order to be oppressed. We know from research and history that oppression negatively impacts mental health and will create new and greater challenges for our public health and society. Additionally Sec. 3129.07, proposes excluding gender affirming care from medicaid, which will disproportionately impact the transgender community as it is often the only option for many transgender individuals, who are otherwise oppressed by society.

Given this information, I am urging you to oppose this bill that endangers the mental health of both our youth, as well as transgender and gender expansive adults, and takes away legal guardian rights. It also unduly puts a burden on an already burdened group of mental health providers who continue to treat the mental health of our state. Most importantly, it stresses and threatens a community that is already at risk for much higher rates of suicide, depression, anxiety, and trauma. Further it endangers this community to be victims of hate crimes that will never be prosecuted because transgender individuals are not a protected class of people in this state. This bill is not about protecting children, it is about discriminating against a group of people who already lack protection; please do not politicize their lives and restrict their access to lifesaving healthcare.