



*Transgender people make up **less than 1%**¹ of the population and **0.000035%** of Ohio's girl student athletes.²*

*While the Ohio legislature has **passed fewer than 15 total bills** into law this year, They have held **24 hearings and counting on anti-trans bills** this year alone.*

*The ratio of people submitting **testimony against these bills versus in favor** is **7 to 1**.³*

Chair Roegner, Vice Chair Antani, Ranking Member Hicks Hudson, and Members of the Senate Government Oversight Committee, thank you for the opportunity to present testimony in opposition to HB 68. As an organization dedicated to pursuing the lived and legal equality for all LGBTQ+ Ohioans, Equality Ohio is opposed to HB 68 because both the ban on gender affirming healthcare and ban on transgender student participation in school sports would be harmful to *all* Ohio youth.

The ban on healthcare would set a dangerous precedent of banning medical best practices, and the sports ban will subject transgender *and* cisgender girls to bullying and scapegoating. Lawmakers have no good reason to meddle in families' private medical decisions nor in an extracurricular school activity that is already independently regulated.

This legislation weakens Ohio and is contrary to the economic growth this body seeks. **Parents and families of trans youth are already making plans to flee the state, just as we have seen in other states with similar legislation.** Despite Ohio's best efforts to create good paying jobs, safe neighborhoods, and quality schools, parents will put the health and well-being of their children first and leave Ohio.

HB 68 and HB 6 have no business being paired together.

It must be specifically named that the language of HB 68 and HB 6 have no business being in the same bill. The healthcare portion of the bill regulates hospitals and medical providers, while the sports portion of the bill regulates school sports. **The *only* commonality between these two proposals is that they both target the same small portion of the population—transgender kids.**

Proponents pushing these two bills together give away the ball game: this is about punishing transgender kids.

¹ Estimates range from .4% - 1% of the [Population](#)

² This year, 7 trans female athletes have been approved to play out of 200,000 female student athletes.

³ Just 99 testimonies in favor of the anti-trans bills, versus 707 (and counting) testimonies in opposition



The Ban on Gender Affirming Care for Transgender and Nonbinary Youth is an Attack on Parental Rights & Healthcare Freedom

House Bill 68 violates the rights of parents, youth, and families to make choices about their bodies and futures in a way that we would never accept in any other medical situation or aspect of Health care.

Gender transition is a multifaceted process encompassing social, legal, and medical aspects. It commences with social transition, a reversible phase that does not necessarily involve immediate medical intervention. Providing gender-affirming care, including medical interventions, has demonstrated positive effects on the mental health and well-being of transgender youth and their families.

HB 68 interferes with essential medical care for transgender minors by imposing stringent prohibitions on gender-affirming medical procedures and mental health care. Additionally, it places undue burdens on mental health professionals. Such restrictions not only impede necessary healthcare but also undermine the professional judgment of healthcare providers in offering evidence-based care endorsed by respected medical associations like the American Academy of Pediatricians and the Endocrine Society.

Moreover, the legislative findings included in HB 68 present misleading information, misrepresenting the experiences and needs of transgender individuals. The findings fail to reflect the extensive research supporting gender-affirming care and downplay the mental health struggles and discrimination faced by transgender youth, leading to an inaccurate portrayal of their reality.

Trans and gender nonconforming youth and their parents are making life-affirming and life saving decisions together, one at a time, with the advice and support of a holistic medical and mental care team. The idea that youth are incapable of understanding and weighing those decisions is insulting to the Ohio families and medical providers that make those kinds of decisions every day in different contexts. It is insulting to young people to state that they are unable to weigh decisions about their own lives and hopes for their future.

When we say this care is “lifesaving”, we should specify what we mean. Medical care is a long series of ongoing personal decisions that, cumulatively, become significant enough to be considered “lifesaving care” for any person. It can be lifesaving not because it explicitly saved someone from death at that moment, but because it greatly improved their day-to-day quality of life. It’s very easy for people in good health to overlook just how much someone’s quality of life can affect a person in these situations, but the realities and processes mirror other areas of medicine.

Data tells us that 42% of LGBTQ youth seriously considered attempting suicide in the past year, including more than half of transgender and nonbinary youth. But transgender and nonbinary youth who reported having pronouns respected by all of the people they lived with attempted suicide at half the rate of those who did not have their pronouns respected by anyone with whom they lived.



In fact, the experience of receiving gender affirming care is incredibly typical in the broader scope of American pediatric medicine. For example, while “off-label use” of medication is often painted by opponents of gender affirming care as proof that treatment is experimental or rare, it is extremely common for minors to be prescribed medicine for [off-label use](#).⁴ This is because the FDA approval process is expensive, and it’s much more expensive to approve it explicitly for minors. If one categorizes the off-label use of medication in pediatrics as truly experimentation, then they would be effectively arguing that all pediatric medicine as we know it is one big science experiment.

Other criticisms raised by opponents are common systemic issues within our healthcare system for patients of all kinds, such as too short of time spent with doctors, long wait times, or lack of proper mental health resources and diagnosis. But these are also all problems that would be exacerbated—not mitigated—by banning treatment completely.

All over our state, young people, with the help of their parents, make serious medical choices about their bodies every day. The idea that families can’t make hard choices is false and insulting to Ohio families. This is normal, safe, fact-based, really-actually-very-boring-and-normal, physician recommended medical care. American healthcare is not perfect. But it's important to see that that's what this is.

Medical decision-making is never easy. But Ohioans trust families, youth, social workers, and medical professionals making these choices. Politicians should stay out of it.

[Some of the] Major Institutions & Associations Backing Gender Affirming Care

- [American Academy of Pediatricians](#)
- [Endocrine Society](#)
- [American Academy of Child and Adolescent Psychiatry \(AACAP\)](#)
- [American Psychiatric Association \(APA\)](#)
- [Columbia University Department of Psychiatry](#)
- [Cleveland Clinic](#)
- [Ohio Children’s Hospital Association](#)

Other Relevant Testimony:

- [Hospital Association Testimony from House Bill 454](#)
- [Pediatric Gender Care in Ohio: Fact List](#)
- [Bias Science: The Yale Report, Comparing Anti-Trans Legislation Around the Country and Medical Inaccuracies](#)

Helpful Data and Studies on Gender Affirming Care:

⁴ US FDA website, <https://www.fda.gov/patients/learn-about-expanded-access-and-other-treatment-options/understanding-unapproved-use-approved-drugs-label>



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- [Do Clinical Data from Transgender Adolescents Support the Phenomenon of “Rapid Onset Gender Dysphoria”? \(No\)](#)
- [Dubunked: No, 80% of Trans Youth Do Not DeTransition](#)
- [Young Adult Psychological Outcome After Puberty Suppression After Gender Reassignment](#)

The Ban on Transgender Student Athletes (HB 6 language amended into HB 68 in June) would subject *all* girl athletes to invasive exams and harassment

The bill's language regarding transgender athletes, amended into the bill at the last minute in June, is equally concerning. It mandates the segregation of athletic teams based on sex assigned at birth, disregarding the well-established policies and guidelines already in place by athletic associations such as OHSAA, NCAA, and IOC.

The attempt to dictate the participation of transgender athletes contradicts existing fair play measures and marginalizes their inclusion in sports, despite their compliance with existing guidelines.

Only **three** transgender students were approved for participation in the 2023 spring sports season **out of approximately 400,000** athletes in Ohio, meaning **transgender people make up 0.000035% of student athletes in the state.**

Transgender girls exist, and they deserve to play school sports, just as they have been able to for the past near decade without issue. Let's remember what Title IX is about—making sure that all girls, including girls who are transgender, have the opportunity to participate in sports. We can celebrate girls' sports and protect transgender youth from discrimination, making sure that all young people can access the lessons and opportunities that sports afford. LGBTQ+ youth, including transgender girls and women, are indeed federally protected under title IX, something this bill directly contradicts.

Trans kids just want the opportunity to participate like everyone else. Sports teach important skills like teamwork, healthy competition, socialization, and leadership. Being a part of a team, for a group that is so marginalized, can be invaluable to helping children establish relationships and feel a sense of belonging. We know that youth sports often play a significant role in children's lives and development. Sports help children develop critical life skills like communication, teamwork, and leadership—and give them a community of peers with whom they can connect and can develop life-long friendships.

These important life skills and connections are even more important for marginalized communities like ours. For many youth, sports are an opportunity to grow, to find friends, and to be themselves. Each game shapes our strategic thinking and character in a unique way, and both winning and losing lead to personal growth.

This legislation takes that supportive environment away from kids who need it. And for what? The Ohio High School Athletic Association (OHSAA) has a policy that works, and has worked since 2013. In the state of Ohio, transgender girls can play on a girls team if they show they have



completed at least one year of hormone replacement therapy. Hormone therapy is always a medical decision directed by a specialized doctor, and the decision of whether to utilize hormone therapy should not prevent youth from playing sports.

Overruling a thoughtful, functional policy by a private regulatory body and replacing it with a total ban is an extreme government overreach. The associations that regulate sports can be trusted to update and regulate sports without government intervention. The state legislature is not best suited to be deciding on youth sports regulations.

Sports certainly don't always feel fair. Every athlete has their list of heartbreaking losses that haunt us. Athletic advantages look different in different sports, and sports are inherently full of athletic advantages. So the presumption that cisgender women are not able to assess our own safety or inherently, physically, cannot hold our own against trans women athletes is offensive. Cisgender athletes have no reason to fear the idea of a transgender athlete occasionally winning their competition, particularly when the trade-off is our own government legislating that all women athletes' bodies be subjected to scrutiny in order to participate in an extracurricular activity at school.

This legislature actually doesn't need to come to an agreement on the science of athletic advantage, you just have to allow athletic associations to keep doing their thing. Professional regulating bodies have the expertise and experience to carefully consider relevant factors of safety in sports while prioritizing inclusion. And they are doing just that. Both the NCAA and OHSAA have comprehensive participation requirements already in place. This bill not only would not help, it would in fact create more legal liability for both athletic associations and schools simply for complying with existing law and policies.

We shouldn't deny a handful of trans girls the opportunity to play sports with their friends on the basis that, occasionally, they win. You hear the same handful of stories referenced over and over, but ultimately, the "scandal" is that *some* but not *all* trans athletes win *some* but not *all* of their competitions. That is simply not a scandal; that is a reflection of the nature of competitive sport.

By college, the reality is that most women athletes are either playing sports purely for the love of the game, or for the scholarship to get an education. This bill is presented as a way to "protect women's sports", but that's disingenuous. We aren't talking about investment in facilities, or equity in pay, or pathways for women athletes to have thriving careers in sports. We're talking about taking an extremely small group of people — mostly kids— and dropping them into a situation where they are going to be miserable or unsafe, by adopting a wholesale ban that will undoubtedly lead to cisgender athletes also getting bullied or subjected to invasive exams and questions for being "insufficiently feminine".

This bill would ban 1-2 athletes in a handful of sports each season, and subject hundreds of thousands more to extra scrutiny and ridicule. Victories of women athletes — both cisgender and transgender — will be rationalized as unfair and frankly, we will continue to spread a culture of sore losers. And it will be all women — especially women of color— whose bodies and victories



they are going to police most aggressively in these sporting competitions. It will be all women - especially women of color – whose tournament wins they are going to undermine the legitimacy of.

Definition of Sex: The Plan to Undermine Nondiscrimination Protections

The “definition of sex” language in this bill mirrors the language in several other anti-transgender bills being considered in this General Assembly. The proposed language directly conflicts with the 2020 Supreme Court decision, [*Bostock v. Clayton County*](#), which was authored by conservative Justice Gorsuch and affirms that discriminating on the basis of someone’s gender identity or sexual orientation is inherently discrimination on the basis of sex. This conflict of law is no accident, and is part of a [concerted effort](#) to legalize discrimination against LGBTQ+ people. It must be removed as it is both inaccurate and specifically seeks to harm LGBTQ+ people.

Conclusion

By supporting HB 68, Ohio risks exacerbating the stigmatization and marginalization experienced by transgender youth. The bill's restrictive measures pose significant mental health risks by denying essential medical care and limiting the participation of transgender individuals in sports consistent with their gender identity. It is crucial to prioritize the well-being and rights of all individuals, including transgender youth, by rejecting HB 68 and advocating for inclusive policies that respect their autonomy and healthcare needs.

I implore you to reconsider the implications of HB 68 and take a stand in support of the health, well-being, and rights of transgender minors and the LGBTQ+ community in Ohio, and vote NO on HB 68.

Thank you and I’d be happy to answer any questions.