



**Do No Harm**

## North Dakota Senate

Senate Committee on Human Services

HB 1254

Chloe Cole

### Opening Statement

Chairwoman Lee and Members of the Committee:

My name is Chloe Cole.

I am a detransitioned 18-year-old woman from California who went through the process of medical transition between the ages of 12-16.

The three main interventions I was given were puberty blockers and testosterone, starting at 13, and a double mastectomy at 15. I was treated negligently by my healthcare provider, but the biggest failure they made was encouraging and allowing me to medically transition as a child in the first place.

My therapists and gender specialists failed to address several underlying circumstances and comorbidities that led to the onset of my gender dysphoria. I began puberty when I was no older than 8 or 9. From a very young age I had tremendous discomfort around my developing body. I was afraid to grow from a girl into a woman and experience things like periods, childbirth, and menopause, because I would often only hear about how scary and painful being a woman was from other girls and older women.

I never really had any strong female role models and I often never felt like I fit in with other girls. I had a tomboyish streak due to the influence of my older brothers.

I had previously been diagnosed with ADHD, but I am on the spectrum though I was not diagnosed until age 17. The gender specialist who referred me to surgery was also the same physician who later recommended screening for autism. Because I am autistic, I have some more masculine behaviors and I am more object oriented than most girls. I have some social, cognitive, and sensory processing differences that made school and going through puberty a little more difficult. All things considered, these struggles were all normal but were misrepresented as problems connected to gender.

I have suffered a multitude of complications from the blockers, cross sex hormones, and surgery. My quality of life is still being impacted to this day. I had my puberty blocked when I was already about four years in. In response, I began experiencing some menopause-like symptoms, including severe hot flashes, and itching all over my body. This went away after I stopped taking them, but I still have joint pains and shooting pains in my spine.

During a consultation for testosterone, I was told by my endocrinologist that I would experience vaginal atrophy. I was not informed that this atrophy affects the rest of the organs in the pelvic region. It caused me to experience episodes of severe uterine cramps that were rare, but unpredictable and worse than any menstrual cramps I've ever endured. I was prescribed topical estrogen, but my urinary tract was still affected, and I am still susceptible to dehydration and infection.

The status of my fertility remains unknown, but I do not have the choice of breastfeeding my future children because my breasts are gone. I was told this by my surgeon, but because I, myself was a child, I did not understand the importance of breastfeeding or even being a parent. As an adult, I am now grieving, and on top of that, the areolar skin grafts they used in my surgery began to fail two years afterward. I must wear bandages on my chest every day. The doctors who helped me to transition have not provided me any of the appropriate care for these complications.

You may be wondering what role my parents played in this and whether I was forced by them to endure this path. In fact, they were quite shocked when first hearing about my feelings of discomfort around my birth sex and my desire to be seen as their son. They wanted me to be comfortable, but they were not okay with going beyond shorter hair haircuts and dressing like a boy. They wanted me to explore without intervention. They wanted me to wait until I was a legal adult. Then I should decide my relationship with a medical route. When their intentions were expressed to my doctors, their concerns were dismissed. Instead, my parents were

lied to. Medical professionals insisted that all children are confident in their gender identity from a very young age, with a regret rate of transitioning less than 1-2%.

My parents were warned that if not affirmed in my identity and decision to transition, it was likely I would commit suicide. Medical professionals did not provide my parents with any other option. My legal guardians were forced to make this decision under duress. But even if my parents had supported transitioning medically from the start, no parent, or any adult, ultimately, has a right to determine whether a child gets to be chemically sterilized or mutilated. Under most circumstances, this would constitute abuse. Instead, somehow, we have managed to market procedures eroding function from the body as “necessary, lifesaving healthcare” for children and adults alike.

Legislative intervention will protect other children and families from this medical experimentation. This legislature is being presented an opportunity to defend the greatest right of a child – the right to grow into healthy adults able to live fulfilling lives.

Thank you for choosing to stand up for the health and safety of children.

*Chloe Cole*

California