

House Human Services Committee Members:

I am writing as a life-long retired resident of North Dakota and as a mother, grandmother and community member to express my opposition to HB 1254 which prohibits the medical treatment of gender dysphoria in minors and makes it a felony for a medical professional to provide the care a young person needs. This bill relates to medical procedures that are performed by medical professionals who have been educated and trained to “do no harm”. I am not a medical expert but I know enough to see that this bill would cause major harm if it passes. It concerns me that the sponsors of this bill, who do not appear to have any medical expertise, feel that they can dictate best medical practice better than the experts. This is one more example of a bill that is an answer to a problem that does not exist, goes against current standards and is a waste of legislators’ time and taxpayers’ money.

Laws like this one that ban gender affirming care are ignoring the wealth of research and data available that shows the benefits of this care to transgender individuals. Gender dysphoria is “the acute and chronic distress of living in a body that does not reflect one’s gender and the desire to have the bodily characteristics of that gender.” There is documented research, including one study on 30,000 people, that shows that access to gender-affirming hormone treatment reduced depression in transgender people. A 2020 study of 300 gender incongruent young people found that mental and emotional distress increased as they went through puberty as their bodies started displaying attributes associated with the gender they did not identify with. We know that suicidal attempts occur in 35-50% of transgender people in the world but a recent study showed that they are 73% less likely to be suicidal if they receive puberty blocking medications. If this bill passes the legislature, I fear for the mental health of young people who are struggling with gender dysphoria.

This bill would make a health care provider guilty of a class B felony if they willfully violated this law. You are comparing someone who is following their medical training and standards of care for their specialty to help their patient physically and mentally to someone who commits armed robbery, manslaughter or sexual imposition. That would mean that the medical provider would have to choose between being guilty of malpractice by not following “standard of care” for their profession or being guilty of a felony by providing the care needed by their patient. If this bill is passed, I would propose that the legislators who vote for this bill be held accountable for the increased depression, anxiety and suicidal thoughts of the young people who are not allowed to obtain the therapy they need. If a suicide attempt by one of those vulnerable teens is successful, those legislators should be charged with manslaughter.

I believe the sponsors of this and other bills that attack transgender youth this session are under the misguided impression that they are somehow protecting young people, but unfortunately, they are doing the opposite. Bills that were banning the use of pronouns that were different from the pronoun on the birth certificate is banning social gender transitioning, which gives young people an opportunity to express their desire to live publicly as their desired gender. HB 1254 along with HB 1301 make it illegal for medical professionals to assist young people to make that transition medically in a safe manner following the standards set by their medical profession.

Junk science is being used to push this bill and others like it across the nation. It goes against the recommendations of 29 medical organizations, including the American Academy of

Pediatrics, the American Academy of Child and Adolescent Psychiatry, the Endocrine Society, the American Medical Association, the American Psychological Association and the American Psychiatric Association. These organizations have researched gender affirming care and have published policy statements and guidelines on how to provide age-appropriate care. These guidelines take into account both physical and mental factors in determining the right course of action and the timing of it.

My son has friends who are transgender, some of whom transitioned earlier in life and others who transitioned long after puberty. Those who were able to use puberty blockers when they were young had a much easier time in their transition, both physically and mentally. When treatment starts after the body has gone through puberty the testosterone blocking drugs that need to be given can have numerous negative side effects on adults. This bill would force young people who are transgender to wait until they are through puberty to start any medical transition which could increase the risk of medical complications. As such, this bill is not following the medical practice of "Do No Harm".

Medical treatment for gender dysphoria is not done by doctors on a whim. There are therapists, medical doctors and psychiatrists that specialize in gender affirming care. They follow the protocols that take into consideration both the physical health, the level of development and the patient's mental and emotional health before any puberty blocking treatment is started. There are no known irreversible effects of puberty blockers and are used to treat precocious puberty as well as gender dysphoria. If a patient chooses to stop the treatment, puberty starts back within 6 months of ending the therapy. In contrast, if a young person is not allowed to have gender affirming care, once puberty begins, the effects are not reversible. Testosterone and estrogen are normally not given before the age of 16 and surgical procedures are rarely done on minors in our state. Bottom surgeries are very expensive, medically complicated and only performed by a handful of surgeons in our country on consenting adults. By denying young people in our state with gender dysphoria an opportunity to transition gradually and safely to the gender they identify with, this bill causes much harm.

Please vote a Do Not Pass on this bill.

Thank you for your time and consideration,
Jane Hirst
Minot, ND