

Senate Human Service Committee
March 15th, 2023 HB 1254
Testimony in Opposition

Dear Chair Lee and the members of the Senate Human Service Committee,

I'm writing to you as the leading suicide prevention advocate for LGBTQ+ populations within North Dakota and I urge a "Do Not Pass" on HB 1254. Please consider the three following items:

1. The Care is Medically Necessary and Life Saving

- a. The [guidelines](#) took 5 years to develop from 119 medical experts and features 1,500 citations with full transparency for every decision made.
- b. Care has not been banned in other countries, only restricted, often with the goal of training more mental health professionals and improving quality of care. ([Sweden](#), [Britain](#), [Finland](#), [France](#))
- c. All puberty is irreversible, whether through natal or hormone intervention, which is why it's essential we have treatment options to stop the irreversible harm caused to trans youth by a natal puberty that will require surgery to fix later in life.
- d. Consideration for studies and limits:
 - i. No large-scale studies tracking outcomes of medical care have been published yet
 - ii. No large-scale study has ever been conducted to show the possible harm of removing trans care entirely. (The direction these bills take us in is less researched and understood than the care we provide.)
 - iii. The majority of small-scale evidence points to benefit - [2 year clinical](#)

2. North Dakota Trans Youth in Particular are Struggling

- a. According to the Youth Risk Behavior Survey of North Dakota, trans youth are significantly more likely to experience suicidality, violence, homelessness, depression, and bullying:
 - i. Data: [2021](#) High School Trans / [2021](#) Middle School Trans
- b. The North Dakota LGBTQ+ [School Climate Report](#), that I spent a year researching and putting together, indicates these outcomes are related to minoritized stress, experiences of discrimination, and lack of support with schools or through school policy.
- c. The outcome data above includes individuals who aren't out or are questioning, meaning that many of these youth are suffering in silence. This further indicates it isn't transition that causes the outcomes, but rather isolation, stigma, and prejudice that makes youth feel scared and unwelcomed.

3. Addressing Common Fears

- a. [Social contagion](#), a 2018 study, is a large component of current fear that kids are being tricked into identifying as trans and then pursuing irreversible regrettable choices.
 - i. It only polled parents feelings of their youth
 - ii. It didn't account for clinical diagnosis
 - iii. It didn't ask youth questions on their feelings
 - iv. The phenomenon has been a refuted through [follow-up studies](#)
- b. [Large scale population studies](#) show equal levels of trans girls and boys
 - i. Alleged increase for trans boys (assigned female at birth) is a result of small-scale review of clinics and other factors that can skew understanding when operating with limited data
- c. Long journalistic and [asserted as unbiased](#) review in [Reuters](#) shows detransition as likely rare, but important to address.

I've spent the last ten years working to improve outcomes in North Dakota for LGBTQ+ populations. In my time engaging in this work, I discovered that what I really cared about was suicide prevention. As a survivor of suicide, I understand the place these kids get to. I understand how hopeless it can feel. I understand not wanting to be here and not planning to have a future. Everything I do, everything I fight for, is to make sure all kids have hope. That no youth ever goes through that pain or struggle.

Everything I do is data driven and I'm often the person doing the research, advocating for the data, and making sure we're doing the best we can for kids. If you asked me if we need this bill, I can flatly tell you no. If you asked me if trans care could be better, I would tell you absolutely. If you asked me if I care about people who detransition, my heart breaks for them. And if we were to sit at a table to talk about solutions that help everyone, the answer we come away with is better access to mental healthcare for all our youth.

Taking away trans care from the people who need it, doesn't help that little girl who thinks she has gender dysphoria but really is dealing with depression, anxiety, or body image issues. What helps her is more access to mental healthcare. If we pass this bill, we can't respond to new research or better guidelines. We would be sitting our boat to sail and hoping we have the supplies to make it to 2025 without losing any passengers.

It's for these reasons that I ask you to please give this one a "Do Not Pass".

Thank you for your time, consideration, and service to our state,
Faye Seidler