From: Affirmation Generation affirmationgenfilm2022@yahoo.com

To: Tveit, Bill btveit@ndlegis.gov Date: Sat, Mar 18, 2023, 10:30 PM

Hello,

I am writing to ask that you please vote YES on bill HB 1254.

I am a 26 year old de-transitioned woman. Due to medical trauma, de-transitioners like me do not inform our doctors or therapists about our de-transitioning when we feel are responsible for harming us medically, physically, and mentally. I was suicidal as a trans kid at age 18, but affirmation did not treat my trauma or other mental health conditions, nor did it help my gender dysphoria.

I began taking wrong-sex hormones at age 19 and had a double mastectomy at age 20. I de-transitioned at age 22, and I am still living with CPTSD,

depression, anxiety, autism spectrum disorder, PCOS, PMDD, and grief associated with having a medically-sanctioned identity crisis and losing my breasts and normal female body. Instead of wrong hormones, I should have received proper differential diagnosis and holistic treatment.

Please consider my medical experiences as you make a decision on this Bill.

For reference on updated standards of care for gender dysphoria, please know that several progressive European countries (UK, Sweden, Norway, Finland, France) have recently abolished medical transition (wrong-sex hormones and surgeries) for minors as ineffective, experimental and harmful. American children and teenagers deserve

better mental health and medical care.

Please review the Cass Interim Report: https://genderreport.ca/the-swedish-u-turn-on-gender-transitioning/

Norway: Norwegian Medical Watchdog Encourages Country to Ditch 'Gender-Affirming' Care Guidelines | National Review



Norwegian Medical Watchdog Encourages Country to Ditch 'Gender-Affirming...

The knowledge base, especially research-based knowledge for

gender-affirming treatment (hormonal and surgical),...

Thank you for your understanding,

Sincerely,

Laura B,

Wisconsin Resident

HB1254 Important Message/Information

From: David Arthur K. ibelongamen@gmail.com

To: David Arthur K. ibelongamen@gmail.com

Date: Sat, Mar 18, 2023, 4:38 AM

My name is David A. Kendall and I live in Hancock, Maine. I support HB1254

and here is why;

I am a detransitioner. We are not uncommon, nor are we a "small population" of those who have transitioned as you may have been told. Detransitioners do not report back to the clinics, doctors or therapists that we feel are responsible for the irreversible damage to us medically, physically, emotionally and mentally.

I was the confused "transkid" often mentioned in these debates & discussions. I was suicidal as a transkid but I was also suicidal as a transadult because affirmation or acceptance did not change any of my underlying comorbidities or issues.

I began taking wrong sex hormones at age 14 and was on them for over 20 years. I had **Osteoporosis**, diabetes and I was **sterile** all before the age of 30. **PLEASE** consider my own life knowledge & experience in making any decisions on this Bill or any similar Bills.

There is **no consensus among all medical providers** on how to treat gender identity disorders in youth. Without differential diagnoses or treatment of their mental co-morbidities, vulnerable children are being ushered mindlessly by their doctors & therapists towards puberty blockers, synthetic hormones, procedures and surgeries that will cause **irreversible damage**. The evidence proves that these methods **sterilize** youth and **destroy** their **sexual function**, not to mention their mental health.

Progressive European countries that pioneered these trans-affirming medical treatments recently conducted a Systematic Evidence Review and discovered that these treatments are ineffective and harmful because they lead to severe medical & mental health issues as well as social. Consequently, since 2021 a number of European countries began abolishing pediatric transgender medicalization.

UK: https://cass.independent-review.uk

Sweden: https://segm.org/Sweden_ends_use_of_Dutch_protocol

France: https://segm.org/France-cautions-regarding-puberty-blockers-and-cross-sex-hormones-for-youth

Please watch this new award-winning documentary on the medical ethics of pediatric trans medicine, "AFFIRMATION GENERATION." It cites 45 academic medical studies, platforms 12 experts (pediatrician, physicians, mental health professionals, an Oxford sociology professor and others) and features the stories of six detransitioners. Please pass it on to colleagues.

www.vimeo.com/800032857

Than	k you	

In HIS Grip, David Arthur K.

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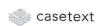
N.D. Cent. Code § 12.1-36-01

Section 12.1-36-01 - Surgical alteration of the genitals of female minor - Penalty - Exception

- 1. Except as provided in subsection 2, any person who knowingly separates or surgically alters normal, healthy, functioning genital tissue of a female minor is guilty of a class C felony.
- 2. A surgical operation is not a violation of this section if a licensed medical practitioner performs the operation to correct an anatomical abnormality or to remove diseased tissue that is an immediate threat to the health of the female minor. In applying this subsection, any belief that the operation is required as a matter of custom, ritual, or standard of practice may not be taken into consideration.
- **3.** Any parent, adult family or household member, guardian, or other custodian of any child who willfully allows a child to be surgically altered under this section is guilty of child abuse under subsection 1 of section 14-09-22.
- **4.** A custom, ritual, religious practice, or the consent of the parent or guardian of a minor is not a defense against a violation under this section.
- **5.** Notwithstanding the limitations of section 29-04-02, prosecution for a violation of subsection 3 must be commenced within three years of the date of the offense or within three years after the offense is reported to law enforcement, whichever is later.

N.D.C.C. § 12.1-36-01

Amended by S.L. 2019, ch. 122 (SB 2222),§ 1, eff. 8/1/2019.



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