

TESTIMONY OF PHILLIP COSBY- PROPONANT **SB 233**
State Director, American Family Action of Kansas and Missouri
KANSAS SENATE PUBLIC HEALTH AND WELFARE COMMITTEE FEB 2023

Madam Chair, and honorable committee members , my name is Phillip Cosby. I am a native of Kansas, and State Director of the American Family Association / Action of KS & MO. I am honored to speak to you in support of SB 233, “The Kansas Child Mutilation Prevention Act”

Free Press Feb 2023 “There is some gruesome news out of Missouri about a so-called "transgender" clinic that has allegedly harmed as many as 600 children who had the misfortune of living in an era when too many doctors are quacks and too many grown-ups are not willing to protect children from harm.’ The Mo AG has opened up an investigation.

“Jamie Reed, a former employee at the Washington University Transgender Center at St. Louis Children's Hospital, alleged the hospital administered a litany of irreparable treatments to minors, often times without parental consent. Reed said: 'It was like I was in a cult, and I had to de-program my way out of it.'”

“Reed said doctors bullied parents into giving their kids irreversible hormone drugs, and even performed gender-transitioning surgeries on them... doctors would use questions like 'do you want a dead daughter or an alive son?' to 'bully' parents of children into going ahead with gender transitions - so that their kids wouldn't be suicidal.”

Reed said “a patient asked for their breasts to be removed and was given the surgery at St. Louis Children's Hospital - but just weeks later, the woman asked for them to be 'put back on.'”

Before 2015, Reed said most children experiencing gender dysphoria were boys, but by the time she left the clinic 70 percent of new patients were girls, and many of those girls had comorbidities including depression, anxiety, ADHD, eating disorders, and obesity. Many were also diagnosed with autism or had autism-like symptoms.

Reed also said there were signs many patients’ desire to identify as transgender was driven by social contagion, not gender dysphoria. Social contagion is the spread of ideas, attitudes, or behavior patterns in a group through imitation and conformity.

Reed draws the conclusion that proper assessment was not taken, and the patient was not properly informed that the changes were irreversible, according to the document.

- Minors cannot purchase Cigarettes, Alcohol, Tattoos and must wait to drive. Why? Because we all agree that a child’s decision-making skills are not fully matured until their early twenties.
- Is this a social contagion and not a genuine medical condition?
- Cultural shift in all things sexual, a dis-order.
- Attached news article

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Ray Carter | February 10, 2023

MISSOURI SCANDAL ADDS URGENCY TO OKLAHOMA CHILD-PROTECTION EFFORT

News that a Missouri children’s transgender clinic has been accused of unethical activity and is under investigation by law enforcement officials has added urgency to Oklahoma efforts to keep children from being subjected to sex-reassignment surgeries, puberty blockers, and cross-sex hormones, lawmakers say.

“After reading the awful things being done to children and not for children in this Missouri clinic, I am even more determined to protect Oklahoma children under the age of 18 from these ‘treatments,’” said state Sen. Julie Daniels, R-Bartlesville.

“It should not be a surprise that a person willing to lie to a child that they can transition them to the opposite sex, charge them exorbitant money, and then cut them up knowing they will be 20 times more likely to commit suicide, would also be willing to abuse them in other ways,” said state Sen. David Bullard, R-Durant. “If we are shocked by this, we need to take off the blindfold and open our eyes.”

[Writing](#) in The Free Press, an online outlet, Jamie Reed, a self-described “queer woman” who is “now married to a transman,” described her experiences as a case manager at

The Washington University Transgender Center at St. Louis Children’s Hospital in Missouri.

Reed worked at the center from 2018 until November 2022. During that time she said roughly 1,000 youth were patients at the clinic, and the “majority of them received hormone prescriptions that can have life-altering consequences—including sterility.”

“I left the clinic in November of last year because I could no longer participate in what was happening there,” Reed wrote. “By the time I departed, I was certain that the way the American medical system is treating these patients is the opposite of the promise we make to ‘do no harm.’ Instead, we are permanently harming the vulnerable patients in our care.”

Before 2015, Reed said most children experiencing gender dysphoria were boys, but by the time she left the clinic 70 percent of new patients were girls, and many of those girls had comorbidities including depression, anxiety, ADHD, eating disorders, and obesity. Many were also diagnosed with autism or had autism-like symptoms.

Reed also said there were signs many patients’ desire to identify as transgender was driven by social contagion, not gender dysphoria. Social contagion is the spread of ideas, attitudes, or behavior patterns in a group through imitation and conformity.

Reed said few formal protocols existed at the clinic, and many youths and their families did not comprehend the full impact of cross-sex hormones and puberty blockers.

She wrote that one 17-year-old biological female patient who was on testosterone was unaware the hormone thins the vaginal tissues. When the girl had intercourse, Reed said the youth’s vaginal canal was “ripped open” and in less than an hour she had “soaked through an extra heavy pad, her jeans, and a towel she had wrapped around her waist.” The girl ultimately required surgery.

Reed said that was not the only such case.

Reed also posted an email from a parent who revoked consent for continuation of hormone blockers for a child. The parent stated that the child was “a shell of his former self and riddled with anxiety.”

Reed said a growing number of patients expressed regret after undergoing sex-reassignment procedures and cross-sex hormone treatment, and reported that clinic staff sought to undermine parents who objected to their child receiving sex-reassignment surgeries or cross-sex hormones. She said some staff even sought to provide such treatments to youth without parental notification.

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“We are permanently harming the vulnerable patients in our care.” —Jamie Reed, former case manager at The Washington University Transgender Center at St. Louis Children’s Hospital

“Given the secrecy and lack of rigorous standards that characterize youth gender transition across the country, I believe that to ensure the safety of American children, we need a moratorium on the hormonal and surgical treatment of young people with gender dysphoria,” Reed wrote.

Missouri Attorney General Andrew Bailey [confirmed](#) that Reed had reported the alleged abuses to his office, which is now investigating the transgender clinic.

“As Attorney General, I want Missouri to be the safest state in the nation for children,” Bailey said. “We have received disturbing allegations that individuals at the Transgender Center at St. Louis Children’s Hospital have been harming hundreds of children each year, including by using experimental drugs on them. We take this evidence seriously and are thoroughly investigating to make sure children are not harmed by individuals who may be more concerned with a radical social agenda than the health of children.”

Reed’s [affidavit](#), which Bailey posted publicly after her column was published, included several specific allegations, among them that doctors at the Missouri clinic had continued prescribing medical transition “even when a parent stated that they were revoking consent.”

She also alleged that the center “does not require children to continue with mental health care after they prescribe cross-sex hormones or puberty blockers” even though puberty blockers “worsen the mental health outcomes” of some patients and some youth became suicidal after receiving blockers.

Her affidavit stated that doctors at the center “believe that every child who meets four basic criteria—age or puberty stage, therapist letter, parental consent, and a one-hour visit with a doctor—is a good candidate for irreversible medical intervention.”

She reported that one doctor was prescribing Bicalutamide, typically used for treating pancreatic cancer, even though there are “no clinical studies for using this drug for gender transitions, and there are no established standards of care for using this drug.” She reported at least one patient receiving Bicalutamide experienced liver damage as a result.

From 2020 to 2022, she reported that the center initiated medical transition for more than 600 children. About 74 percent were female at birth.

Earlier this week, before news of the Missouri scandal broke, members of an Oklahoma Senate committee [advanced two bills](#) making it illegal to perform sex-reassignment surgeries on Oklahoma children or provide those youth with cross-sex hormones or puberty blockers, and voted to make it illegal to use state funds to pay for those services.