

January 25, 2025

Kansas State Legislature
Public.Health.Welfare@Senate.KS.Gov

Dear Honorable Committee Members,

I am writing to you today to express my deep concerns regarding Senate Bill 63 (SB 63), which I believe will have harmful effects on the residents of Kansas, particularly trans youth. As a concerned citizen and licensed mental health clinician, I feel it is my ethical and moral duty to inform you that I am in direct opposition to this bill. I am very concerned about the mental, physical, and emotional well-being of trans youth, as well as the degradation of personal freedom that this bill presents.

This bill is important to me because as a mental health clinician I am acutely aware of the harm that this bill presents to trans youth. According to the National Institutes of Health (<https://pubmed.ncbi.nlm.nih.gov/32345113/>) in 2022, "Data indicate that 82% of transgender individuals have considered killing themselves and 40% have attempted suicide, with suicidality highest among transgender youth." In addition, a study published in *Nature Human Behavior* as recently as September 26, 2024 (<https://doi.org/10.1038/s41562-024-01979-5>) reports that "State-level anti-transgender laws increase past-year suicide attempts among transgender and non-binary people in the USA."

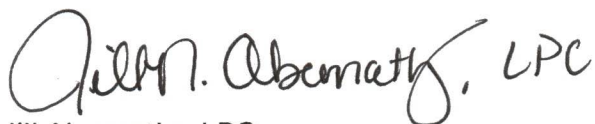
Senate Bill 63 (SB 63) restricts the use of evidence-based medical treatments, which jeopardizes the mental, emotional, and physical health and well-being of vulnerable children. SB 63 infringes on the rights of families and healthcare providers to make informed decisions and denies children the care they need. This legislation will have lasting, harmful consequences on trans youth while ignoring the recommendations of medical experts.

I respectfully request that you reject SB 63 and work towards a solution that prioritizes the well-being of trans youth in Kansas. We simply cannot ignore the devastation that a bill such as SB 63 would cause in the lives of so many Kansans.

Thank you for your time and attention to this important matter.

I will not be present in person but would like my written testimony to be included.

Sincerely,

A handwritten signature in black ink that reads "Jill M. Abernathy, LPC". The signature is fluid and cursive, with the initials "Jill M." and the name "Abernathy" clearly visible, followed by "LPC".

Jill Abernathy, LPC
101 Chicago Avenue
Woodbine, KS 67492
(785) 571-7439
jill.abernathy81@gmail.com

cc: Donola.Fairbanks@Senate.KS.Gov

Legislative Testimony

In Opposition of SB 63

Senate Public Health & Welfare Committee

January 28, 2025

Committee Chair and Members of the Committee:

I appreciate the opportunity to present testimony here today on behalf of the American Civil Liberties Union of Kansas. I'm D.C. Hiebert, a lawyer, and the Civil Liberties legal fellow with the ACLU of Kansas. We are a nonpartisan, non-profit organization that works to preserve and strengthen the civil rights and liberties of every person in our state.

The ACLU of Kansas stands strongly opposed to SB 63 and urges you to not vote this bill out of committee. Not only does SB 63 likely violate the state and federal constitutional rights of Kansas children, parents, therapists, doctors, teachers, and other state employees—it poses an unprecedented threat to Kansas families. By effectively banning the *only* evidence-based healthcare options available for Kansas youth experiencing gender dysphoria, SB 63 far exceeds the appropriate government regulation of medicine and removes Kansas parents' ability to access the healthcare they decide is right for their child.

SB 63 essentially bans all gender-affirming healthcare for transgender Kansans under 18 years old by threatening providers with strict liability lawsuits and licensure implications. But the bill doesn't stop there—it also bans providers from giving trans patients referrals to receive medically necessary healthcare, setting a precedent of extreme overreach into the medical practice in Kansas.

And the reach of SB 63 does not stop at providers giving medical care—it also implicates state-funded facilities and state employees tasked with “the care of children” in its limiting provisions. Specifically, the bill bans such facilities and state employees from aiding the medical *or* social transition of trans youth. SB 63 defines “social transitioning” to include “changing of an individual’s preferring pronouns or manner of dress.” This is extremely concerning, as these provisions could mean state employees like social workers are forced to misgender trans youth in their care or forced to violate trans youths’ right to self-expression through their dress.

This bill places politicians’ feelings and unsubstantiated fears above the advice of medical professionals, and strips families of their ability to make informed healthcare decisions. That is why every major medical association—including the American Medical Association¹, the American Academy of Pediatrics², and the

¹ See, e.g., *AMA reinforces opposition to restrictions on transgender medical care*, THE AMERICAN MEDICAL ASSOCIATION (June 15, 2021), <https://www.ama-assn.org/press-center/press-releases/ama-reinforces-opposition-restrictionstransgender-medical-care>.

² *Ensuring Comprehensive Care and Support for Transgender and Gender Diverse Children and Adolescents*, THE AMERICAN ACADEMY OF PEDIATRICS (Oct. 1, 2018) (reaffirmed Aug. 2023), <https://publications.aap.org/pediatrics/article/142/4/e20182162/37381/Ensuring-Comprehensive-Care-and-Support-for?autologincheck=redirected>

Legislative Testimony

In Opposition of SB 63

Senate Public Health & Welfare Committee

January 28, 2025

American Academy of Child and Adolescent Psychiatry³—opposes bills like SB 63 and instead support access to the healthcare this bill seeks to ban. In fact, the American Medical Association said legislation such as SB 63 “**represents a dangerous governmental intrusion into the practice of medicine**” and that such bills “**will be detrimental to the health of transgender children across the country.**”⁴

In addition to opposition from leaders in the medical community stating these bills are harmful and an invasion into ethical medical practice, there is also a strong risk that these bills illegally discriminate against trans people and violate federal Constitutional rights.

Importantly, the United States Supreme Court heard argument in *United States v. Skrmetti*⁵ in December 2024 directly on point to this issue—Tennessee passed a categorical ban on gender-affirming medical care similar to SB 63, and that law was challenged as unconstitutional. The Supreme Court is poised to rule in *Skrmetti*—and thus, on the constitutionality of similar bans like SB 63—in the coming months. Passing new measures restricting gender-affirming care in Kansas now would waste critical government resources and Kansas taxpayer dollars—as a Supreme Court ruling on the matter is imminent and will provide guidance on the legality of such laws. The ruling in *Skrmetti* will be controlling precedent for Kansas and all other states, meaning if the Supreme Court rules that these laws are unconstitutional, SB 63 will be unenforceable in our state. It logically follows that the Kansas Legislature should wait until a ruling comes down in *Skrmetti* before passing legislation that will be directly impacted by the outcome of that lawsuit.

SB 63 also raises legal concerns under the Kansas Constitution. This bill sets a terrifying precedent by taking away parents’ rights to make decisions about their children’s medical care. It was not long ago that Kansans made it very clear that they do not want politicians infringing on their right to determine what healthcare is best for them. This bill flies in the face of the will of the people and violates Kansans’ constitutional right to personal autonomy—a right the Kansas Supreme Court has said “**includes the ability to control one’s own body, to assert bodily integrity, and to exercise self-determination.**”⁶

In addition to these likely constitutional violations, we also urge you to think about what SB 63 would mean for the Kansas medical profession. This bill would threaten Kansas medical providers with civil liability and license revocation for simply providing their patients with nationally recommended, best practice healthcare—care that many of these providers have been safely administering for years in our state without

³ AACAP Statement Responding to Efforts to Ban Evidence-Based Care for Transgender and Gender Diverse Youth, AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY (Nov. 8, 2019),

https://www.aacap.org/AACAP/Latest_News/AACAP_Statement_Responding_to_Efforts-to_ban_Evidence-Based_Care_for_Transgender_and_Gender_Diverse.aspx

⁴ AMA reinforces opposition to restrictions on transgender medical care, THE AMERICAN MEDICAL ASSOCIATION (June 15, 2021), <https://www.ama-assn.org/press-center/press-releases/ama-reinforces-opposition-restrictionstransgender-medical-care>

⁵ See *United States v. Skrmetti*, 144 S. Ct. 2679, 219 L. Ed. 2d 1297 (June 24, 2024).

⁶ See, *Hodes & Nauser, MDs, P.A. v. Schmidt*, 309 Kan. 610, 646 (2019).

Legislative Testimony

In Opposition of SB 63

Senate Public Health & Welfare Committee

January 28, 2025

issue. We should be supporting the medical professionals practicing in our state, not antagonizing them with laws that impede their ability to effectively do their jobs.

You may not understand what it means to be transgender. You may think that it's best to try and stop young people from growing into transgender adults. But even if that instinct is coming from a genuine place of care, passing a bill like SB 63 does nothing to address those alleged concerns. It will not prevent transgender kids from being who they are. The only thing a bill like SB 63 will do is unequivocally harm transgender youth and violate Kansans' constitutional rights.

I do not mean this in an abstract sense. If SB 63 becomes law, people will die. Families will suffer. The practice of medicine will be compromised—not just for trans young people, but for everyone in Kansas. **SB 63 would set a precedent that medical providers should not give you the best medical care available, but instead give you the medical care politicians decide you should have access to.** It would mean Kansas medical providers cannot do their jobs and would cause the public to lose faith in the quality of medical care they are being given.

While I am sharing this testimony as a constitutional lawyer with the ACLU of Kansas, I am also sharing this testimony as a lifelong Kansan and a transgender person. The very care that SB 63 seeks to ban is the reason I am alive, living a joyful and fulfilling life. It is the reason I graduated from a Kansas college and am now a licensed attorney with a law degree from the University of Kansas. Gender-affirming healthcare has allowed me to become the person I am today and gave me the confidence to advocate for my fellow Kansans' rights.

I love Kansas and am proud to call it my home. I know countless other trans people in the state that feel the same way. But bills like SB 63 tell us that our state doesn't love us back. People will not stop being transgender because Kansas bans this care or punishes its medical providers. Trans people will still exist in Kansas and in every state in our country, just as they always have. Please don't make it harder for these young Kansans to live their dreams and contribute to our state, their families, and their communities. We urge you to oppose SB 63.

Thank you.

D.C. Hiegert (he/they)
Civil Liberties Legal Fellow

SB63 is very clearly an anti-american bill designed to attack minority groups in an effort to infringe on our right to freedom of expression and speech. These are things enshrined in our constitutions, both state and country. These bans would likely make way for further bills that could remove even trans adults from public life. As well, encouraging gender expression in a safe environment like schools has been shown to have a SIGNIFICANT positive impact on them later in life. Research shows the rate of regret for transition is around 1%, an EXTREMELY low number compared to even a majority of non-life threatening surgeries. If this bill were to pass, it would likely threaten the lives of many youths, and undoubtedly would harm 99% more than it would help. For these reasons, I ask that you do not let this bill pass.

Thank you for your time.

Honorable Committee Members,

My name is Sabrina Alley and I live in Park City, KS and I am a concerned constituent.

I'm here to talk about SB 63. This bill is important to me because I am someone who values equitable healthcare for all people regardless of race, sex, income, or gender identity. However, this bill is even more important to me because I have a trans child. I believe that anybody who knew my child before and after his transition would be able to testify as to the weight of anxiety that was lifted off of his shoulders when he was able to verbalize how he felt and finally start presenting as his true self. I have not seen my child happier than he is now. I have been so thankful to all of the medical professionals who have helped us through this process and talked us through each step. They've made sure that we know our options.

I believe this bill is harmful to Kansans because it is egregious overreach by the government into conversations that should be between families and their healthcare providers. Doctors and parents know what is best for their own children and should be given the opportunity to treat their children with that knowledge. This bill restricts safe and fully reversible interventions including puberty blockers and social transition. The statistics of suicide attempts among trans youth is staggering and being able to safely transition is vital in helping to prevent those numbers from rising. Trans youth deserve to make their medical decisions with their parents, medical professionals, and therapists, just like every other Kansan.

I ask you to vote against SB63 and advocate for policies that protect the rights of all Kansans to retain the rights to make their own healthcare and lifestyle decisions.

Thank you for your time and attention.

Sabrina Alley

To: Members of the Kansas Senate Committee on Public Health and Welfare
From: Cathy Anderson, U.S. citizen living in Newton, Kansas
Date: January 23, 2025
Re: **Written-Only Testimony In Opposition to SB 63 (2025)**

Esteemed Members of the Committee,

I have read the text of the proposed bill. I am concerned that it will infringe on individual rights and liberties and that it will encourage miscreants to harm innocent Kansans. Here are some of the questions that arise in my mind:

- Will a child undergoing treatment for a medically verifiable disorder of sex development be required to have their medical condition made public, so that everyone knows that the adults supporting them are not violating the law?
- What happens to a child receiving medications that are terminated by law on December 31, 2025? What is the remedy if such termination results in physical, psychological, emotional or physiological harms to the child?
- What is the justification for defining gender-affirming medical treatment as professional negligence, when there are well-established standard protocols for it?
- And, my basic question, if family members (parents and child) are in agreement that gender-affirming care is appropriate for the child, why is the state interfering in what should be a private medical decision?

My understanding is that people with gender dysphoria who receive gender affirming surgery are less likely to have suicidal ideation (a 2022 study published in The Journal of Psychosexual Health is here: <https://doi.org/10.1177/26318318231189836>). Prohibiting or postponing treatment increases the likelihood that more young people will choose to kill themselves.

Also, I do know some transgender people—*naturally, none in Kansas*—and have seen some of the bullying they endured for not presenting as masculine or feminine as others thought they should be. There are a lot of bullies out there ready to hurt others; I believe this bill will encourage them to prey even more on innocent people.

Therefore, I urge you to consider again about what “help, not harm” means for all Kansans. I understand the bill protects children against adults who want to coerce them to become a different sex. But, in my view, **the bill does not protect Kansas families** who, with careful thought, love, and sound medical advice, are considering treatment for gender dysphoria in order to help their child.

Testimony WRITTEN-ONLY

Rev Amands Baker
1400 Presby Dr
Emporia, KS 66801

Dear Lawmakers,

My name is Amanda Baker, I am a Kansan, a pastor, and the parent of a trans youth who depends on gender-affirming health care for her well-being. I am urging you to oppose the bill seeking to limit medical care to transgender youth in Kansas, HB2071 and SB63.

I write to you first as a mom who has walked alongside my child whom I love dearly as she struggled to understand her gender fully and to be at home in her own body, name, and life. Being invited to walk that with her is one of the greatest honors of my life. While it has been hard to see the bullying she has endured at the hands of both peers and lawmakers twice her age, it has been a joy to see her come alive as she transitions, first socially and then with the help of medications.

I watched as her anxiety reduced and her confidence soared. Despite the bullying she often endured among peers, she found solace and support among teachers and guidance counselors and those adults were what got us through a school year that was, frankly, hell on earth. I shudder to think what school would have been like for my child if this bill had been in place, making it so that those same adults did not feel free to be a safe and accepting place for her to be her authentic self.

I know that you won't legislate my child out of being trans. She is who she is. However, I also know that this bill will cause great hardship for our family. In a best case scenario, we will have to drive several states away for doctors, pay out of pocket for prescriptions, and homeschool our child. In a worse scenario, we will have to send her across the country to live in a state where she can have affirming healthcare and a school that will honor who she is. Neither of those, however, is the worst case scenario. The worst case scenario is almost unspeakable. My greatest fear is that I or another parent like me will lose a child to suicide.

This is a fear I live with every single day as a parent. That despite my immense, powerful, endless love for my child exactly as she is, the incessant messages from those in power will convince her that the world would be happier without her. That she does not belong, or have a place in this world, despite my knowing it is an infinitely better world with her in it.

And this fear is not an exaggeration, or a figment of my imagination. From 2018-2024, the Trevor Project tracked suicidal ideation among 13-24 year olds, and how it was impacted by anti-trans laws like the one before you, passed in state legislative sessions exactly like this. This independently reviewed research found that in transgender and nonbinary youth ages 13-18, laws like this increased the incidence of suicidal ideation by 72 percent. (www.trevorproject.org)

I know that the stacks and stacks of opposition letters you receive in opposition of this legislation represent people people like me who will do everything in our power to counteract the increase. I want every trans and nonbinary young person to know that I cannot be legislated out of my love and support. That I will fight for them. I will acknowledge who they are and I will affirm, over and over again, that they are made in the image of God. That the world is better with them in it, and that no vote in this committee, or in the state legislature can undo their holy, beloved, existence.

But the time is now for you to be brave enough to do the right thing. To listen to the testimonies before you today. To affirm the basic human dignities of these kids. To affirm a parent's right to join with well trained, evidence based medical practitioners to care for their children. I urge you to resist the politicization of the lives of young Kansans. Vote now on the bill before you.

May God's righteous wisdom guide your decision making,

Rev. Amanda L. Baker

Emily Bartlett
Private citizen
emrbartlett@gmail.com
1/28/2025

For both SB 63 and HB 2071
Opponent
Written only

chairman and members of the committee, thank you for giving me time to share my thoughts on SB/63/HB2071. My name is EMily Bartlett and I am a voter in Johnson county. I am writing today to encourage the committee to vote no on sb63/hb2071.

I have family and friends that you members of the transgender community, and this bill will decrease their quality of life significantly. They are joy-filled, normal human beings who can't hurt a fly, and deserve full life and rights like anyone else.

Thank you again for reading my testimony, and I sincerely encourage yo unto vote no on the passage of SB 63/HB 2071. Thank you.

Honorable Committee Members,

My name is Holly Bartlett and I live in Topeka. I am a concerned constituent, and I am here to talk about SB63. As a nurse, a bill like this deeply concerns me because of its overreach and potential harm to families. It will affect Kansans in every corner of the state. I have seen firsthand how much healthier and happier transgender teens are when they are supported at home and in the community, most notably through gender affirming care.

This extreme bill does not just ban surgery, but also fully reversible interventions such as puberty blockers and social transitions. The type of care needed looks different for each family, and that is why it should be a conversation between the patient, the parents, and their healthcare team. As a nurse, I made a commitment to do what is best for my patients each and every time, and you will be tying my hands in that regard if you pass this bill. Many healthcare organizations, including the American Academy of Pediatrics, are in support of gender affirming care for children. I am at a loss to find any evidence based studies that indicate that legislators are better equipped to decide what is best for patients in regards to their healthcare.

I ask that you vote against SB63 and advocate for the rights of Kansas families to make their own healthcare decisions. Transgender patients aren't looking for extra rights, they are just looking for equitable rights, and you have the ability to protect those rights by voting against this harmful bill.

Thank you for your time and attention,
Holly Bartlett

January 27th 2025

Thank you for your time Madame Chair and Committee Members,

After taking notice of the bills being addressed at this hearing and other legislative bodies around the country, I am inclined to bring this to your attention. The actions outlined in HB 2071 and SB 63 violate our First Amendment rights and are harmful to Kansans, the people you all serve as public officials. Legislators have placed a focus on culture wars and allowing a Medicare expansion to die without even a hearing.

Placing restrictions on providers of not only healthcare but also childcare directly restricting freedom of expression and speech is absurd considering the struggles those fields are already facing. Restricting physicians' abilities to advise the best treatments for their patients, and violating their oath as providers, is not in the best interest of Kansans. Effective treatment and medicine is brought about between patients and providers, legislative bodies and anyone for the matter should be able to deny or restrict access to care deemed medically necessary. These policies have no place within the healthcare system for anyone, especially those using their 1st amendment rights. It is discriminatory and goes against the values of this country while denying Kansans safe, productive, and accessible treatment. The bills mentioned (HB 2071 and SB 63) put harmful restrictions on providers as well as place children at higher risks for abuse and mistreatment as the adults in their lives will be placed in a precarious position and not be able to have important conversations in fear of prosecution due to this legislation.

I hope these concerns have not fallen on deaf ears. Please consider Kansas as a whole and not unnecessary, division politics that impact 0.49% of our population while placing others at risk as well. Everyone in Kansas deserves good, accessible, healthcare.

Brenna Batchelder

January 22, 2025

Dear Legislators,

I am writing to ask you to oppose SB 63 and HB2071.

I am the proud daughter of Republican Senator Arden Booth (1971-1976). There were two things my Dad loved. His Hereford cattle and his country, especially his Republican Party. Because the Republican Party stood for small-g-government. All my life I heard, 'we don't need the government in our business'. Goldwater said it best, and his book, The Conscious of a Conservative, was mandatory reading in my home by the time I was ten. Nixon said it. Bob Dole said it. Reagan, my father's favorite after Goldwater, said it loud and clear. The Bushes said it.

Republicans stand for small-g-government. Keep the government out of our businesses and out of our lives.

Now MAGAS want Capital-G-Big-Government. They want to us insert the Government into the most intimate personal decisions in peoples' lives. They want to insert Big Government in decisions between a mother, father, child and physician. Please read that again - a family and their physician. Barry Goldwater is literally rolling over in his grave.

Now is the time is to decide - to make a public statement. Are you a small-g-government Republican or are you a Big-G-Government Maga?

Vote No on Big Government intrusion into our private lives. Continue the legacy of these great Republican patriots. Continue the legacy of Republican small-g-government. Keep government out of our businesses and our lives.

Sincerely

Bette Booth

January 28, 2025

Testimony to the Senate Committee on Public Health and Welfare

Ian Brannan

Private Citizen

idbrannan@yahoo.com

HB 2071, Enacting the help not harm act, restricting use of state funds to promote gender transitioning, prohibiting healthcare providers from providing gender transition care to children whose gender identity is inconsistent with the child's sex, authorizing a civil cause of action against healthcare providers for providing such treatments, requiring professional discipline against a healthcare provider who performs such treatment, prohibiting professional liability insurance from covering damages for healthcare providers that provide gender transition treatment to children and adding violation of the act to the definition of unprofessional conduct for physicians.

Proponent

Written only testimony

Chair Gossage and members of the committee,

I am writing to voice my support for SB 63. As a concerned member of the LGBT community in Kansas, it is well understood that the transitioning of youths in our state is not only happening, but also dangerous.

When this issue first arose, studies suggested that this type of intervention for young people was a positive thing. However, as time has continued, those studies have been debunked, lacking credible evidence and failing to reach the gold standard in scientific research. Supporters of transitioning minors may continue to reference studies for their talking points, but please remember these studies are of low quality and go against what newer, higher quality studies suggest.

Since 2022, the American Academy of Pediatrics (AAP) has taken a more nuanced approach to this issue, even removing from their website an abstract for a study presented at the 2021 American Academy of Pediatrics National Conference and Exhibition that found “no effect on generalized anxiety over the 12-month study period”.

Another 2021 study examining 44 12- to 15-year-olds that were put on puberty blockers suggested there were “no changes in psychological function.” This study was re-analyzed in 2023 as the original data was “deemed ‘low quality’ by the UK National Institute of Health and Care Excellence.” The re-analyses showed that the mental health of 34 percent of the children had reliably deteriorated while another 37 percent saw no change in their mental health when taking puberty blockers.

There are many other examples I could provide, and if someone is a health professional with such focus as gender transitions, they should be aware of such issues. As it stands currently, Kansas has legal medical malpractice under the guise of “LGBT inclusivity” and as an LGBT Kansan, I urge you to understand that that is wrong.

I respectfully ask that you please vote 'yes' on SB 63.

Ian Brannan
Topeka, KS



January 28, 2025

Laurel Burchfield
Advocacy Director
contact@mainstream.vote

Senate Committee on Public Health and Welfare
Chair, Sen. Beverly Gossage

Re: Opposition Testimony, Written-only
SB63—"Enacting the help not harm act..."

Chair Gossage and Members of the Committee,

Mainstream was founded over 30 years ago by faith leaders who warned about the intrusion of narrow, extremist religious views into our government and public institutions. In the following decades, Mainstream members have fought to protect our religious freedoms and maintain strong church-state separation because Kansans value their freedom to live as they see fit without the overreach of government or religion into their personal lives.

In SB63 we see a national agenda to define gender and control transgender bodies based on a narrow biblical perspective come to Kansas. This effort failed in 2024 because Kansans did not want the government telling them what to do with their bodies or dictating how we raise our children. It needs to fail again.

Mainstream opposes SB63. This bill discriminates against transgender Kansans and inserts the government into private healthcare decisions that should be left to the family and their medical team. SB63 dangerously seeks to undermine science and established healthcare standards and instead aims to govern Kansans on the basis of prejudice and intolerance.

While this bill may appear to only target access to medically necessary care for transgender people under 18, the language is so broad that it could have significant additional harmful consequences for those who encounter transgender youth in their personal and professional lives. SB63 does not define what it means to "promote," "provide," or "advocate" for social transition or gender affirming medical care. Not only will mental and medical health professionals be impacted by this bill, but it could also disrupt the lives of others who interact with trans youth, including but not limited to school counselors and teachers.

Everyone has a right to access healthcare without discrimination and government overreach. Private, medically necessary health care decisions should be kept solely between the impacted individuals, their health professionals and, if appropriate, their faith leader.

Transgender Kansans and their loved ones have testified that limiting their access to care is harmful, and potentially life-threatening. We should be listening to our neighbors and friends when they tell us they will suffer if SB63 becomes law, not hand-picked outside consultants with no personal connections to Kansas or transgender individuals.

Mainstream urges you to reject SB63. Please do not turn personal, private healthcare decisions into partisan political tactics.



January 26, 2025

Dear Members of the Senate Committee on Public Health and Welfare and the House Committee on Health and Human Services,

The Kansas Affiliate of the American College of Nurse-Midwives strongly oppose House Bill 2071 and Senate Bill 63. As health care providers that care for individuals across the gender continuum, we are concerned that the legislature is ignoring evidence-based information regarding the benefits of access to gender-affirming care for all individuals, including youth. We also wish to express our grave concern about the potential harm of removing critical support structures provided by credentialed professionals in counseling, education, and healthcare. Ensuring the health and safety of everyone, including those who are gender non-conforming or transgender, is a moral, professional, and ethical imperative based on standards of practice and our professional code as Certified Nurse-Midwives (CNMs)¹.

Certified Nurse-Midwives and our Professional Mandate

As Registered Nurses (RNs) and Advanced Practice Midwives (APRNs), we affirm the following are necessary and appropriate in the evidence-based care of transgender and gender non-binary (TGNB) individuals¹:

- We respect transgender and gender non-binary (TGNB) people. This includes becoming familiar with terminology related to gender identities and expression and endeavoring to use correct names, pronouns, and preferred anatomical language.
- We understand TGNB identity as a normal human variation rather than pathology.
- We are knowledgeable about the health care needs of TGNB people, including the individual and systematic barriers to care, as well as the options and benefits of gender-affirming treatment within a framework of shared decision-making and harm reduction.
- We provide or identify appropriate referral for reproductive and sexual health and primary care, including gender-affirming hormone therapy. We believe health care providers should match treatment approaches to the specific needs of TGNB people, particularly their goals for gender affirmation and expression.
- We provide resources and referrals to support and advocate for patients within their families and communities (e.g., schools, workplaces, and other settings).
- We advocate for, and work to create welcoming and inclusive health care settings for TGNB people (e.g., gender-neutral bathrooms and gender inclusive forms, signage, education materials, and electronic health records).

Importance of Gender-Affirming Care

Transgender and gender non-binary (TGNB) people experience disproportionate health disparities that negatively impact their overall well-being². There is a well-documented link between experiences of discrimination and marginalization and poor physical and mental health outcomes. Rates of depression and drug and alcohol use, particularly in youth, are higher than those rates in cisgender people. Most concerning is the fact that suicide attempts among TGNB people are 9 times higher than the general U.S. population².

Gender affirmation focuses on affirming an individual's gender identity and expression. The process of gender affirmation varies greatly between individuals and can include a variety of



processes, such as counseling, change of legal name and gender marker, hormone therapy, and/or surgical procedures³⁻⁵.

Available data support the safety of gender-affirming hormone therapy⁶. Shared decision-making includes discussion of risks, benefits, and individual choice and provides a framework for the provision of gender-affirming therapy in midwifery practice⁷. The theoretical and known risks of gender-affirming hormone therapy must be balanced with the known mental health and safety risks of withholding this care.

Conclusion

Policies that restrict access to gender-affirming care or remove support structures for transgender and gender non-conforming youth place them at significant risk of harm. Evidence from reputable organizations and studies underscores the positive impact of affirming care and environments on mental health and overall well-being. We urge you to consider this evidence and prioritize the health and safety of all youth in Kansas. Therefore, **we respectfully request that you vote “No” to HB 2071 and SB 63.**

Sincerely,

The Board of Directors, Kansas Affiliate of the American College of Nurse-Midwives;
kansasacnm@gmail.com

Christy Evers, DNP, APRN, CNM, CNE; President

Cara A. Busenhardt, PhD, APRN, CNM, FACNM, FAAN; Secretary

Chantee Redding, MSN, APRN, CNM; Treasurer

Amber Clark, DNP, APRN, CNM; Board Member

Mary Sarmiento Leite, BSN, RN, SNM; Student Board Member

References

1. The American College of Nurse-Midwives (ACNM). *Health Care for Transgender and Gender Non-Binary People: Position Statement*.
https://www.midwife.org/acnm/files/acnmldata/uploadfilename/000000000326/ACNM--PS--Care%20for%20TGNB%20People-%20Final_1.pdf
2. James SE, Herman JL, Rankin S, Keisling M, Mottet L, Anafi M. (2016). *The report of the 2015 U.S. Transgender Survey*.
<https://www.transequality.org/sites/default/files/docs/usts/USTS%20Full%20Report%20%20FINAL%201.6.17.pdf>.
3. Ellis SA. (2020). Gynecologic health care for lesbian, bisexual, and queer women and transgender and nonbinary individuals. In: Schuiling KD, Likis FE, eds. *Gynecologic Health Care*. 4th ed. Burlington, MA: Jones & Bartlett Learning; pp. 173-210.
4. Deutsch MB. ed. (2016). *Guidelines for the primary and gender-affirming care of transgender and gender nonbinary people*. Center of Excellence for Transgender Health website.
<http://transhealth.ucsf.edu/protocols>.
5. Transgender healthcare toolkit. Cedar River Clinics website.
<http://www.cedarriverclinics.org/transtoolkit/>.
6. Wierckx K, Van Caenegem E, Schreiner T, et al. (2014). Cross-sex hormone therapy in trans persons is safe and effective at short-time follow-up: results from the European network for the investigation of gender incongruence. *Journal of Sexual Medicine*;11(8): pp.1999-2011. doi: 10.1111/jsm.12571.
7. American College of Nurse-Midwives. (2016). *Shared Decision Making in Midwifery Care*. Silver Spring, MD. American College of Nurse-Midwives.



January 27, 2025

Dear Members of the House Health and Human Services Committee,

as a person of faith who is committed to the welfare of my fellow neighbors, I am writing in opposition to HB 2017. I have been an ordained minister in the Lutheran church for over 41 years and currently serve as the bishop of the Central States Synod of the Evangelical Lutheran Church, overseeing 150 congregations throughout Kansas and Missouri.

While I recognize that there are differing views on gender identity, we should all agree that everyone should have access to health care which includes providing care for minors as they, along with their parents and health care providers, navigate their journey to adulthood. SB 63 does the opposite, banning all gender affirming health care for trans minors and threatening health care providers. Decisions regarding one's care, including gender-affirming care, should not be in the hands of politicians but in the hands of patients, families and their doctors. Gender-affirming care is not only safe but also life-saving for those who experience gender dysphoria. It is about protecting our children.

My faith tradition sees every person as a beloved of God and proclaims that all are made in the image of God. Transgendered individuals who in spite of attacks on their personhood preserve to be claim their true identities reflect this image of God. Please do not let fear and rhetoric overwhelm the truth of each person's value and freedom to receive both respect and care. We would ask nothing less for ourselves.

Thank you for your consideration of my words.

Respectfully,

The Rev. Susan Candea, Bishop

God's work. Our hands.

420 W 14th St., Suite 101 • Kansas City, MO 64105 • 913.948.9701 • www.css-elca.org

Samantha Church
Lawrence, KS 66044

January 26, 2025

The Honorable Beverly Gossage
Kansas State Senate
9325 Evening Star Terr.
Eudora, KS 66025

Subject: Opposition to SB 63

Dear Senator Gossage,

I am writing to express my strong opposition to SB 63. This legislation poses a grave threat to the well-being of transgender youth in Kansas and infringes upon the fundamental rights of both transgender individuals and the state employees tasked with serving them.

First Amendment Concerns:

SB 63 appears to broadly prohibit state employees from "promoting" social or medical transition for transgender youth. This vague language raises serious concerns about the First Amendment rights of state employees.

- Academic Freedom: Educators may be restricted from discussing gender identity and affirming language in the classroom, hindering their ability to provide a safe and inclusive learning environment for all students.
- Counseling and Guidance: School counselors and other mental health professionals may be prevented from providing vital support and resources to transgender youth, including referrals for gender-affirming care.
- General Workplace Discourse: The chilling effect of this legislation could stifle open and honest conversations about gender identity within state agencies, creating a hostile and discriminatory work environment.

Increased Obstacles and Hardships:

This bill will create significant obstacles for state employees and the institutions they serve:

- Legal Uncertainty: The vague and overbroad language of SB 63 will create immense legal uncertainty for state employees, leaving them vulnerable to disciplinary action for actions that may be perfectly lawful.
- Increased Burden on State Resources: The bill will likely lead to costly legal challenges and increased administrative burdens as state agencies attempt to navigate its ambiguous provisions.

- **Erosion of Public Trust:** This legislation will undermine public trust in state institutions and discourage qualified individuals from seeking employment within the state government.

Harm to Transgender Youth:

Suppression of social transition does not help transgender youth. In fact, it can have devastating consequences:

- **Increased Risk of Suicide:** Studies consistently show that transgender youth who are affirmed in their gender identity have significantly lower rates of suicide and mental health issues.
- **Social Isolation and Rejection:** Denying transgender youth the opportunity to socially transition can lead to social isolation, family rejection, and increased bullying.
- **Delayed Access to Care:** This legislation could delay access to necessary medical care for transgender youth, causing significant physical and mental health harm.

I urge you to vote against SB 63. This harmful legislation will not only infringe upon the rights of transgender individuals and state employees but also cause significant harm to the well-being of transgender youth in Kansas.

In case this letter isn't convincing enough on its own, I've also provided references below to peer-reviewed literature supporting this information.

References

Harm to Transgender Youth:

- **Suicide Risk:**
 - Mustanski, B., et al. (2010). "Mental health of adolescents and adults who are transgender." *American Journal of Psychiatry*, 167(4), 427-433.
 - Rafferty, A. P., et al. (2015). "Mental health of transgender adolescents: Findings from the National Transgender Health Survey." *Journal of Adolescent Health*, 56(2), S23-S32.
- **Impact of Social Transition:**
 - Coleman, E., et al. (2016). "Social transition in young adolescents who are transgender." *Pediatrics*, 138(4).
- **First Amendment Concerns:**
 - **Academic Freedom:**
 - Educators for Quality, Inclusive, and Diverse Education (EQUID). (2023). "Academic Freedom and LGBTQ+ Students." [Website]
 - (Relevant legal cases and scholarly articles on academic freedom and freedom of speech in the context of education).
- **Counseling and Guidance:**
 - American Counseling Association. (2018). "Ethical Standards for Counselors." [Website]

- (Relevant ethical guidelines and legal precedents regarding counselor-client confidentiality and the right to provide appropriate care).
- **Obstacles and Hardships for State Employees:**
 - (Relevant legal scholarship on workplace discrimination, First Amendment rights of public employees, and the impact of vague and overbroad legislation on employee morale and productivity).

Sincerely,

Samantha Church

Dear Committee Members:

Please accept these comments on SB 63. I would like to voice my opposition to this bill which is an attempt to bully a marginalized segment of society. This bill takes away patient-doctor confidentiality. Healthcare decisions should be left to those who know best: the patient and the physician.

I listened once to testimony by trans people at a city council meeting. I was amazed that they just seemed like ordinary Kansans! I was impressed with their testimony and I came away with a totally changed mindset. Trans are just people!

I would like to point out that the age of consent in Kansas is still 16 years of age. This means the State still believes 16-year-olds have the ability to make rational decisions regarding their sexuality. So, if that is the case, the age in SB 63 should be lowered to 16 if you decide to act on it.

Please vote your conscience. Thank you for paying attention to my comments.

Sincerely yours,

Clark H. Coan

Clark H. Coan

OLIVIA COLE
PRIVATE CITIZEN
mommastreefrog@gmail.com
1/28/2025

For both SB 63 and HB 2071
Opponent
Written only

To the Senators and Representatives of Kansas; to the voices that are to speak for me and the 2.941 million other Kansans who have no other voice but yours.

My name is Olivia Cole and I am in opposition to SB63 and HB2071.

I was born and raised in Kansas. I grew up learning about the great USA, helping free Americans and many other oppressed peoples from tyranny.

We are a place where Caucasian people, African people, Hispanic people, Indigenous people, Asian people, males and females, males to females, females to males, tomboys, femboys, Christians, Muslims, Buddhists, Satanists, the young, the elderly, any person with a heartbeat is safe in America to exercise their constitutional rights, and most importantly, freedom. We were a place of this.

Today many Americans, including myself, fear we are headed into tyranny; especially the most recently attacked community, the people with a heartbeat who are gender nonconforming. My boyfriend has been a trans female to male for five years, long enough to be considered trans by a professional therapist. He has attempted suicide four times. The first time he tried was at eleven years old. This was largely because his parents were very unsupportive when he came out. They refused to use his correct pronouns. They refused to let him modify his name. They refused to immediately get him a therapist. They refused to see him for who he is. He lacked the major support he needed. He felt like an outcast, a non-normal individual, at eleven years old. It drove him to his first attempt of suicide.

At eleven years old.

He has told me on many occasions, as he has told his therapist, I am the main reason he is alive today. That's not because I ever found him during an attempt and was able to stop him by impeccable timing. It's because he knew I cared. He knew I would hurt. He knew I love him. It was not impeccable timing that saved his life. It was support that saved his life.

In the standard population between 2013 and 2017, 40 people out of 100,000 people committed suicide. 43 trans women out of 100,000 people committed suicide. 34 trans men out of 100,000 people committed suicide. The trans community lost almost twice as many people compared to

the standard population. "Trends in Suicide Death Risk in Transgender People: Results from the Amsterdam Cohort of Gender Dysphoria Study (1972-2017)"

Imagine an eleven year old child who is not allowed to get a haircut to feel comfortable in their own skin.

Imagine an eleven year old child who cannot be educated about the trans community, feeling outcast and alone because they have no words for their feelings.

Imagine an eleven year old child who commits suicide because not only did they lack support in their own home, but in therapy and school as well.

Imagine what the trans suicide statistic would rise to in a world like that.

A world of tyranny.

I am doing my part by speaking out against SB63 and HB2071. I am begging you to do your part by saying no to the same bills we've already refused in the past.

Thank you,

A hopeful Kansan.

TO: Sen. Beverly Gossage, Chair
Senate Committee on Public Health and Welfare
RE: SB 63 – Written Only Testimony - Opponent
FR: Connie Brown Collins
Voter Rights Network of Wyandotte County
DT: Jan. 28, 2025

Chairman Gossage and Members of the Committee:

I'd like to thank the committee for providing this opportunity to share my thoughts on SB 63. My name is Connie Brown Collins, Founder/Executive Director of Voter Rights Network of Wyandotte County. I live in Wyandotte County, Kansas City, Kansas. Our organization hosts regular informational and educational meetings and events on voting and human rights and other pertinent issues in collaboration with numerous participating organizations and committed individuals, both from Wyandotte and Johnson Counties.

I strongly oppose SB 63 that would ban Kansans under 18 years old from access to medically necessary health care for gender transitioning by:

- Restricting the use of state funds, including Medicaid, to promote gender transitioning, medically necessary healthcare and prescriptions,
- Prohibiting healthcare providers from providing gender transition for those whose gender identity is inconsistent with the child's sex,
- Authorizing a civil cause of action against healthcare providers for providing such treatments,
- Requiring professional discipline against a healthcare provider who performs such treatment,
- Prohibiting professional liability insurance from covering damages for healthcare providers that provide gender transition treatment to children, and
- Adding any violation of the act to the definition of unprofessional conduct for physicians.

Privacy Concerns

This country was built on freedoms – of speech, assembly, religion, and petition. These same freedoms to make their own private medical decisions should be extended to patients seeking care and their parents and families, in collaboration with their doctors – and not include politicians. Would politicians be involved in decisions about male hormone therapy or surgery for erectile dysfunction? Physicians and other health professionals are trusted messengers that patients rely upon to provide the best information and direction regarding health care outcomes and choices. This bill seeks to destroy and remove the people most likely to provide accurate information. Gender-affirming care has always been individualized to meet the needs of each patient, managed through a careful and evidence-based model of assessment and informed consent — which is already required by law.

Previous Attempts

Last year, this bill failed because of its extremely broad scope beyond the healthcare arena. The bill does not define what it means to “promote,” “provide,” or “advocate” for social transition or gender affirming medical care. These terms, which are open to interpretation, could therefore eliminate services provided by school counselors, teachers, daycare providers, and raise constitutional concerns about these individuals’ First Amendment, free speech rights. The language of the bill clearly discriminates against transgender Kansans and could prevent trans kids from receiving holistic care and needed support – assistance every Kansas kid should be able to freely access.

Medical Necessity for All

Gender-affirming care saves lives. Medical care for gender dysphoria is evidence-based, medically necessary, and safe—which is why every major medical association advocates against bills like this. The medical treatments prohibited under this bill treat various conditions in non-transgender young people, but this bill **only** bans them for trans youth. It undermines the drug formulary process for medication access and seeks to criminalize the caretaker, health professionals and the families of patients.

In conclusion, I urge you to vote against SB 63 in order to ensure that young trans Kansans receive the medically necessary gender affirming care they need and deserve. Thank you again for providing this opportunity.

Respectfully submitted,

Connie Brown Collins

Connie Brown Collins
Voter Rights Network of Wyandotte County

Testimony of Andrew Cox in opposition to Kansas Senate Bill 63

I want to begin my testimony by stating that I, Andrew Cox, am opposed to Kansas Senate Bill 63 on scientific, constitutional, and moral grounds. I believe that if enacted, this bill will result in the increased suffering and reduction of civil rights for thousands of people within the State of Kansas. I also believe that the vague language in several sections could compromise the jobs of thousands of educators within the State of Kansas. As such I aim to do the following within my testimony.

1. Establish that Gender-Affirming Care whether for adults or minors is supported by relevant medical institutions.
2. Establish that Gender-Affirming Care whether for adults or minors is both beneficial and potentially lifesaving care.
3. Establish that SB 63 violates key precedent laid out by the Supreme Court regarding both patient decision-making and parental authority.
4. Establish that SB 63 will interfere with the ability of employees of the State of Kansas to carry out their jobs.

Point 1

To firmly establish my arguments, I will provide some quotes from some of the most renowned medical institutions in the country.

“THEREFORE BE IT FURTHER RESOLVED that APA recognizes the efficacy, benefit and medical necessity of gender transition treatments for appropriately evaluated individuals and calls upon public and private insurers to cover these medically necessary treatments;” (American Psychological Association, *APA RESOLUTION on Transgender, Gender Identity, and Gender Expression Non-Discrimination*,)

“Whereas, The denial of these otherwise covered benefits for patients suffering from GID represents discrimination based solely on a patient’s gender identity; and
Whereas, Delaying treatment for GID can cause and/or aggravate additional serious and expensive health problems, such as stress-related physical illnesses, depression, and substance abuse problems, which further endanger patients’ health and strain the health care system; therefore be it

RESOLVED, That the AMA support public and private health insurance coverage for 15 treatment of gender identity disorder” (American Medical Association House of Delegates, *Resolution: 122 (A-08)*)

“The American College of Physicians recommends that public and private health benefit plans include comprehensive transgender health care services and provide all covered services to transgender persons as they would all other beneficiaries.” (American College of Physicians, *Lesbian, Gay, Bisexual, and Transgender Health Disparities: Executive Summary of a Policy Position Paper from the American College of Physicians*)

“Experts who work with transgender children, adolescents and adults generally agree on some important points. First, transgender adolescents and adults rarely regret gender transition, and the process (including social and/or medical changes) substantially improves their well-being. Second, some children express a strong transgender identity from a young age and grow into transgender adults who can live happily and healthily in their authentic gender. Third, discouraging or shaming a child’s gender identity or expression harms the child’s social-emotional health and well-being, and may have lifelong consequences.” (American Academy of Pediatrics, *Supporting & Caring for Transgender Children*)

I would highly recommend that the members of the committee read each of the papers and resolutions that I have quoted here. In particular, I recommend that the committee read *Supporting & Caring for Transgender Children*. It is a mere 20 pages and contains invaluable information on transgender youth, which I am sure that all committee members would like to examine before pushing forth a bill that would affect the lives of thousands of such persons.

Many other institutions support Gender-Affirming care, but I do not wish to belabor this point. I do believe that the words of four of the most respected medical institutions in the entire country, including one that specializes in pediatrics, should be enough to demonstrate that the medical community supports Gender-Affirming care for minors and adults.

Point 2

Next, I would like to present the findings of a series of studies that display that Gender-Affirming care is beneficial to those who receive it, including decreasing the risk of suicide among adolescents.

“There is a significant inverse association between treatment with pubertal suppression during adolescence and lifetime suicidal ideation among transgender adults who ever wanted this treatment. These results align with past literature, suggesting that pubertal suppression for transgender adolescents who want this treatment is associated with favorable mental health outcomes.” (Turban JL, King D, Carswell JM, Keuroghlian AS. Pubertal Suppression for Transgender Youth and Risk of Suicidal Ideation. *Pediatrics*.)

“In this prospective cohort of 104 TNB youths aged 13 to 20 years, receipt of gender-affirming care, including puberty blockers and gender-affirming hormones, was associated with 60% lower odds of moderate or severe depression and 73% lower odds of suicidality over a 12-month follow-up.” (Tordoff DM, Wanta JW, Collin A, Stepney C, Inwards-Breland DJ, Ahrens K. Mental Health Outcomes in Transgender and Nonbinary Youths Receiving Gender-Affirming Care. *JAMA Netw Open*. 2022;5(2):e220978. doi:10.1001/jamanetworkopen.2022.0978)

“We conducted a secondary analysis of the 2015 U.S. Transgender Survey, a cross-sectional non-probability sample of 27,715 transgender adults in the U.S. Using multivariable logistic regression adjusting for potential confounders, we examined associations between access to GAH during early adolescence (age 14–15), late adolescence (age 16–17), or adulthood (age ≥18) and adult mental health outcomes, with participants who desired but never accessed GAH as the reference group...This study found that transgender people who accessed GAH during early or late adolescence had a lower odds of past-month suicidal ideation and past-month severe psychological distress in adulthood, when compared to those who desired but did not access GAH, after adjusting for a range of potential confounding variables.” (Turban JL, King D, Kobe J, Reisner SL, Keuroghlian AS (2022) Access to gender-affirming hormones during adolescence and mental health outcomes among transgender adults. *PLoS ONE* 17(1): e0261039. <https://doi.org/10.1371/journal.pone.0261039>)

“For each time period of GAH initiation examined (early adolescence, late adolescence, and adulthood), access to GAH was associated with lower odds of past-year suicidal ideation and past-month severe psychological distress. When we compared participants who accessed GAH during adolescence (ages 14–17) with those who accessed GAH during adulthood (18+), participants who accessed GAH earlier had better mental health

outcomes, including lower odds of past-year suicidal ideation, past-month severe psychological distress, past-month binge drinking, and lifetime illicit drug use. These results argue against waiting until adulthood to offer GAH to transgender adolescents and suggest that doing so may put patients at greater mental health risk.”(Turban JL, King D, Kobe J, Reisner SL, Keuroghlian AS (2023) Correction: Access to gender-affirming hormones during adolescence and mental health outcomes among transgender adults. PLOS ONE 18(6): e0287283.)

“A total of 27 studies, pooling 7928 transgender patients who underwent any type of GAS, were included. The pooled prevalence of regret after GAS was 1% (95% CI <1%–2%). Overall, 33% underwent transmasculine procedures and 67% transfeminine procedures. The prevalence of regret among patients undergoing transmasculine and transfeminine surgeries was <1% (IC <1%–<1%) and 1% (CI <1%–2%), respectively. A total of 77 patients regretted having had GAS. Twenty-eight had minor and 34 had major regret based on Pfäfflin’s regret classification. The majority had *clear regret* based on Kuiper and Cohen-Kettenis classification.” (Bustos VP, Bustos SS, Mascaro A, Del Corral G, Forte AJ, Ciudad P, Kim EA, Langstein HN, Manrique OJ. Regret after Gender-affirmation Surgery: A Systematic Review and Meta-analysis of Prevalence.)

The findings of these studies are clear. Gender-affirming care decreases the risk of depression and suicide in both adults and adolescents. It also is correlated with more positive effects if done during late adolescence as opposed to adulthood. Many people have a genuine concern that those who undergo Gender-Affirming Care might regret the decision. However, the cited study of over 7900 individuals found that less than 1% felt any regret after receiving hormone therapy. This is a minuscule amount for any kind of procedure, let alone one with all the benefits provided by Gender-Affirming Care.

Point 3

Senate Bill 63 is blatantly unconstitutional, forgoing the rights of the patient to make medical decisions with their doctor, as well as the rights of the parents to make medical decisions for their child. Now some might bring up *Jacobson v. Massachusetts* (1905), in which the Supreme Court ruled that the state of Massachusetts could require people to be vaccinated for smallpox. However, using this to argue that the state has a right to restrict Gender-Affirming Care for minors ignores a key part of that ruling.

"In every well ordered society charged with the duty of conserving the safety of its members the rights of the individual in respect of his liberty may at times, under the pressure of great dangers, be subjected to such restraint, to be enforced by reasonable regulations, as the safety of the general public may demand"

Note that the court only rules that liberty may be overruled in the interest of the general public, specifically their safety. The threat of a man spreading smallpox by refusing a vaccination is clear. Now I must ask, who is being harmed by Gender-Affirming Care? Given that Gender-Affirming Care is endorsed by nearly every major medical institution in the United States, it is quite clearly not those receiving it. Nor is anything relating to Gender Dysphoria or Gender affirming care communicable. The only logical conclusion that one could come to is that transgender people themselves are a threat to public safety, which I'm sure was unintentional on the part of those who composed this bill.

SB 63 also violates the equal protection clause of the 14th Amendment in that it attacks the rights of minors with gender dysphoria, forcing the law to apply differently to them. The bill doesn't ban any of the treatments for minors wholesale, it only bars them for minors suffering from gender dysphoria. The Supreme Court made this clear in 1996 with *Romer v. Evans* when they sustained the overturning of a bill denying protections to bisexuals and homosexuals.

"It identifies persons by a single trait and then denies them protection across the board." The same can be said SB 63 does a similar thing. It identifies children with gender dysphoria and then denies them the right to receive certain types of beneficial medical care. However, that is not the end of the rights that SB 63 violates. This bill also violates the rights of parents to make medical decisions for their children. This violates state law as Kansas Statute 38-122 clearly states that

"Consent by parent for surgery and other procedures on child. Any parent, including a parent who is a minor, whether married or unmarried, may consent to the performance upon his or her child of a medical, surgical or post mortem procedure by a physician licensed to practice medicine or surgery."

Parental authority to make medical decisions for their children even goes so far as allowing them to deny lifesaving procedures for their child. If parental rights extend as far as denying critical treatment to their child, then I see no reason why they should not extend to allowing beneficial treatments such as Gender-Affirming Care. The Supreme Court also

established the supremacy of parental rights to medical decisions in 1979 with *Parham v. J.R.*

I find it also necessary to highlight the widespread support for bodily autonomy within the State of Kansas. In the 2022 Abortion Referendum, voters overwhelmingly voted against an amendment acknowledging women had no right to an abortion. This shows that the People of Kansas do not think that the right to make medical decisions belongs to the government.

Section 4

The vague language posed in parts of the bill puts thousands of state employees, mostly teachers and counselors, at risk. Section 2. (f) reads.

“A state employee whose official duties include the care of children shall not, while engaged in those official duties, promote the use of social transitioning or provide or promote medication or surgery as provided in section 3, and amendments thereto, as a treatment for a child whose perceived gender or perceived sex is inconsistent with such child's sex.”

This wording is so vague as to constitute anything other than a clear condemnation of social or medical transitioning as a violation of this bill. What constitutes promotion? Does using a child's preferred pronouns constitute a promotion of social transitioning? Would calling a cisgender male named Alexander 'Alex' constitute a promotion of social transitioning as Alex is gender neutral? The wording is vague enough that it could even allow showing a transgender person as a functioning member of society to be a promotion of transitioning. This bill has the potential to forbid any references to transgender people at all or to even exclude transgender people from teaching, as their very existence could constitute the promotion of social or medical transitioning.

Teachers are not the only ones threatened by this, consider counselors. If a student struggling with their gender identity comes to the counselor, then they would have no way to discuss options with the student or their parents. This is particularly concerning as minors struggling with their gender identity are at a significantly higher risk for suicide. A counselor could also be put in a situation where reporting something like the bullying or abuse of a trans-student could constitute a risk to their job, as support for the student could be seen as promoting social or medical transitioning.

This same risk applies to even more jobs such as social workers or other state employees who deal with children in crises, constantly being impeded out of fear of losing their jobs.

Conclusion

I have spent most of my testimony arguing this bill scientifically, constitutionally, and even logistically. However, I would like to end by arguing from my own personal and moral perspective. Members of the committee think about what this bill will do to people, to kids. You are creating an environment where kids struggling against their identity have even fewer places to turn. I am a high school student with several transgender friends. I know how hard things can be for them, and I know what they think of this act and ones like it. I know what most of my cisgender students think about it. When we look at a bill like this, we don't see people trying to help us. We see people determined to take our rights away. People who seem to willfully ignore scientific data and constitutional law. So, when you consider whether or not to vote for this bill, ask yourself these questions.

Should I vote for or against the consensus of the medical community?

Should I vote for or against something that will raise the rate of suicide among adolescents?

Should I vote for or against constitutional rights?

Should I vote for or against something that targets a minority?

Should I vote for or against something that makes life harder for teachers?

Should I vote for or against choice?

Mandy Cundy
3933 N Watercress Ct; Maize, KS 67101
Phone (316) 316-204-2683
cundy.mandy@gmail.com

January 26, 2025

RE: Written Testimony for Public Hearing on SB63

Honorable Committee Members,

My name is Mandy Cundy and I am a concerned constituent, who lives in Maize. I am writing as a parent of a transgender daughter and as a concerned Kansan to urge you to oppose SB 63 / HB 2071. This bill would effectively ban all gender-affirming healthcare for transgender minors, threaten healthcare providers, and disrupt essential support systems for trans youth in our state. The consequences of this legislation would be devastating—not only to transgender youth and their families but to the foundational principles of privacy, freedom, and equality that our state should uphold.

As a parent, I know firsthand that the journey of supporting a transgender child is not one undertaken lightly. It is a process that requires careful consideration, consultation with medical professionals, and an unwavering commitment to the health and well-being of our children. Gender-affirming care is evidence-based, medically necessary, and safe. It is provided through a model of assessment and informed consent that ensures minors, their parents, and their doctors are making decisions together, with all safeguards in place. These are private medical decisions that should not be influenced or controlled by politicians.

The proposed bill goes far beyond restricting medical care:

- **It bans state agencies and employees from affirming transgender youth**, restricting teachers, counselors, and even daycare providers from supporting trans children through social transitions.
- **It imposes punitive measures on healthcare providers**, opening them to lawsuits, licensure implications, and an inability to obtain liability insurance. This is a direct attack on the medical professionals who are committed to the health and safety of their patients.
- **It uses vague language**, failing to define terms like “promote,” “provide,” or “advocate,” which creates significant ambiguity and the potential for broad harm to anyone interacting with transgender youth.

This bill is discriminatory, unconstitutional, and will have dire consequences for Kansas families. Transgender youth already face tremendous challenges. According to The Trevor Project’s 2024 US National Survey on the Mental Health of LGBTQ+ Young People data, 39% of LGBTQ+ young people seriously considered attempting suicide in the past year—including 46% of transgender and nonbinary young people.

It is important to note that every major medical association—including the American Academy of Pediatrics, the American Medical Association, and the American Psychological Association—advocates for gender-affirming care. They recognize it as life-saving care. For many transgender youth, access to affirming care, whether medical or social, significantly reduces depression, anxiety, and suicidal ideation.

As the parent of a transgender child, I have witnessed both the challenges and the transformative power of support. My daughter's journey has been long, intentional, and guided by her medical team and family. Decisions about her care have been made thoughtfully and responsibly—with her health and future at the forefront. Laws like SB 63 / HB 2071 would rob families like mine of the ability to make those decisions, forcing us to navigate unnecessary barriers and even consider leaving the state we call home.

I urge you to consider the harm this bill will cause to vulnerable youth and their families. Please oppose SB 63 / HB 2071 and stand for the right of patients, families, and their doctors to make private medical decisions without interference. Let Kansas lead with compassion, evidence-based policies, and respect for all its citizens.

Sincerely,

Mandy Cundy

Honorable Committee Members,

My name is Stephanie Dechant, and I live in Wichita, KS and I am a mother, and a concerned constituent.

I'm here to talk about SB 63. This bill is important to me because....

I am raising two boys that I am empowering to be who they truly and fully are. They are wonderful, smart, and loving. Should they, as they age, decide that being a boy is not representative of who they fully are, I want them to be supported, loved, and I don't want the government involved or interfering what we decide as a family, and with trusted doctors and therapists feel is best. If you truly stand for smaller government, please allow us to make our own decisions guided by trained professionals that we know and trust. Please do not handcuff or silence these skilled professionals who are trained and have extensive knowledge, skill, and understanding. We, as your constituents have entrusted public officials to safeguard rights, not to interfere with them.

I believe this bill is harmful to Kansans because this bill restricts the ability of families and their healthcare providers to make individual decisions in the best interest of their children. This bill is extreme and overreaching. It is not just about surgical intervention, it restricts even safe, fully reversible interventions such as puberty blockers and social transition. Children and teens who are transgender or experiencing gender dysphoria should have the freedom to make medical and personal decisions with their parents, doctors, therapists, and faith leaders, just like all other Kansans. Not at the risk of disdain by elected officials who have not worked in the realm of the full far-reaching extent of this bill.

I ask you to vote against SB63 and advocate for policies that ensure all Kansas families, regardless of political party affiliation, retain the right to make their own healthcare and lifestyle choices.

Thank you for your time and attention.

Stephanie Dechant

DONNAVAN DILLON
Private Citizen
donnavandillon1011@gmail.com
1/28/2025

For both SB 63 and HB 2071
Opponent
Written only

Chair Carpenter and members of the Committee,

My name is Donnavan Dillon. I was born and raised in Lawrence, Kansas. I am a Senior at the University of Kansas pursuing a double major in political science and sociology. I graduated from Lawrence High in 2021. I am gay and a proud member of the LGBTQ+ community, and I am here today to urge you to oppose HB 2071/sb 63.

HB 2071 uses state legislative power to single out and attack transgender minors' access to medically necessary care and would require the state-sanctioned dehumanization of children.

My first concern is this bill legislates an issue that does not exist and creates a harmful narrative around beneficial care all Kansans receive. As stated year after year by medical professionals in Kansas who are versed in Gender Affirming Care - Transgender minors in Kansas are not receiving procedures such as gender reassignment surgeries. This bill creates a false issue by banning something that is not occurring; this is a waste of the legislature's time when there are so many actual issues that deserve the time and consideration of the committee. Secondly, this bill paints this care as harmful and not medically necessary ONLY if a transgender minor is receiving it; however, it does not implicate the same care for cisgender people. If this gender-affirming care were a significant threat to minors, it would be banned for all minors and not just a select population. What this bill would accomplish is create a two-class system by law where gender-affirming care and medications are only acceptable for cisgender people to receive, which is a gross misuse of legislative power.

My next concern is that this bill is far-reaching in scope and fails to define key terms. This lack of clarity is essential to good policy and has real-life implications for Kansas medical professionals, families, and state employees. The vague and overly broad restrictions on "social transitioning" outlined in this bill raise serious concerns, especially since key terms like "promote" and "advocate" lack precise definitions, and the range of individuals affected remains uncertain. By including unclear language that could extend to mental health providers, educators, social workers, librarians, foster care staff, and others who serve children, this legislation would almost certainly suppress the free expression of state employees. This would also result in children being subjected to cruel treatment by adults whose jobs are meant to protect their safety and well-being. The state legislature should not require state employees to be some of our children's earliest bullies. Whether the lack of defining terms in this bill is intentional or unintentional by its authors, the result is still the same- HB 2071/SB 63, as a result, has far-reaching implications

that have real-life effects on the lives of trans kids and state employees implicated in its language.

My last primary concern is that this bill creates a path where transgender Kansans are not afforded the same autonomy that all Kansans possess because of their gender and allow for a state-sanctioned path to dehumanize our state's transgender children. The right to bodily autonomy is a fundamental freedom protected by the Kansas Constitution, yet HB 2071/SB 63 threatens to undermine it through government overreach into private medical decisions. This bill not only restricts access to life-saving healthcare for transgender youth but also dictates how adults respond to children's self-expression. The government infringes upon both children's and adults' freedoms by imposing vague regulations on caregivers. Such interference violates Kansans' Right to Self-Determination and undermines one of our nation's foundational principles. Simply put, the government has no place in mandating personal decisions or restricting individual expression.

As students who study policy and government in our first-year courses, we are taught that good policy is narrow in scope, clearly defined, and intentional in solving a systemic issue or increasing public good. A college freshman could easily see this bill meets zero of these criteria. When legislators pass unclear, far-reaching bills that attack specific communities, they go to court and cost the state time and money, something the legislature has seen happen repeatedly in recent years. Save yourself this hassle and the harm it would cause our state's vulnerable youth and vote in opposition to HB 2071/SB 63.

Save yourself this hassle and the harm it would cause our state's vulnerable youth and vote in opposition to HB 2071/SB 63. Thank your

Maxwell Driskill
Private Citizen
maxderpinphd@gmail.com
1/28/0025

For both SB 63 and HB 2071
Opponent
Written only

Chairman and members of the committee, thank you pretending to care about what your voters want. My name is Maxwell Driskill and I'm writing to shame you all for your inevitable votes on SB63.

The fact that this is even being considered is an embarrassment and there are an unbelievable number of arguments against it. None of that matters though, I could point out that not only are these treatments consistently shown to cause a steep decline in suicide rates among youth with gender dysphoria, but even if the child decides against following through on the treatment puberty blockers are completely reversible. I could lay out argument after argument like this, but you don't actually care about that. Your position is, fundamentally, that transgender people are degenerate and ought be suppressed in order to promote "social hygiene." A phrase coined in Germany about 90 years ago in order to justify eerily similar policies under the same pretense of "protect our children from these foul degenerates." Later, it would be used in the Soviet Union, in order to justify purging all the homosexuals as "agents of western, capitalist corruption and degeneracy." They did this because they were weaklings and cowards. They lived in constant, unceasing fear of people that they had never met but were absolutely certain were bad. I, for one, would like to reject this cowardice. I want to reject the pathetic mewling of weaklings who are brought to tears by a group of children. I'm not asking you all to be the strongest. I'm asking you to pass the simplest test you possibly could: Not picking fights with literal children. After all, what kind of loser needs to target kids just to feel tough?

A vote for this bill is a vote for weakness. I implore you to use your vote to demonstrate Kansas' strength. Vote no.

January 27, 2025

Dear Senate Committee on Public Health & Welfare;

My name is Heidi Whiteaker Duderstadt. I am a Licensed Clinical Professional Counselor and Licensed Addiction Counselor here in Kansas specializing in Adolescent Mental Health. I am writing to share very serious and urgent concerns regarding SB 63 as it relates to trans-affirming healthcare for minors and the support of social or medical transition for transgender persons.

As a mental health professional that specializes in adolescent mental health, I can attest that transgender affirming healthcare and positive support for social and medical transition is essential to maintaining the mental health of those in need of it. If those services and support are withheld or prohibited, it is well documented in evidenced based research and clinical experience that it is a significant factor for an increased risk of anxiety, depression, and suicidal ideation and attempts. I respectfully ask that you do not support SB 63 any further.

Sincerely,

A handwritten signature in blue ink that reads "Heidi Whiteaker Duderstadt, LCPC, LAC". The signature is written in a cursive, flowing style.

Heidi Whiteaker Duderstadt, LCPC, LAC

Johnny Dunlap
Private Citizen, Teacher at Dodge City High School
Written Opponent Testimony of SB 63
For the Senate Public Health and Welfare Committee

January 28, 2025

Chair Gossage and members of the Committee,

I write today to oppose the so-called “Help Not Harm” Act, designated SB 63. The name of the legislation tries to hide the hateful and awful ideas it contains.

I oppose SB 63 because I am an educator. I am a teacher and a coach. Children who enter my classroom feel safe and free to express themselves. To do otherwise would violate the sacred trust I’ve gained by earning my Bachelor’s degree, my Masters degree, and my Professional Teaching License. My students know that I will protect them from hatred like the hatred encased in this bigoted legislation. They know they can ask for my help with any problems they might have, school-related or not, and that I will do my best to help them or at least connect them with someone who can help them.

I oppose SB 63 because I am an educator who cares about the children I teach. I do not check my 1st amendment rights at the school building doors and will not take part in spreading hatred to children. I rebuke the legislators who would have me ignore my students' wishes in simple tasks such as using chosen names and pronouns that fit them. Not only is this in violation of basic decency, but it is, at best, a childish thing for the legislature to demand of me; it is, at worst, asking me to break trust. Further, it puts me in a position where I must choose between my teaching license, my very livelihood, and treating children with basic decency, dignity, and respect. This bill is shameful and bigoted.

Three days into my first year of teaching, a student who had no classes with me came into my classroom right after school and asked me if I would sponsor a Gay-Straight Alliance (GSA). I indicated I would sponsor the club but had to ask, “What made you approach me about this? I don’t have you in class, and I haven’t told anyone about my political views or anything.” The student said, “Well, you told everyone in your classes that we’re on a tiny rock, hurtling through space, and we should treat others with kindness and respect, so I figured you’d be a good sponsor.” It occurred to me that if all it took for this kid to choose me as their sponsor, kindness, and respect must be in short supply. I learned that day just how important it is to treat the children in our care with basic decency, compassion, and respect. I knew that fostering such in how students treat their peers is essential. Through sponsoring that club, I learned that LGBTQ kids

are no different than their peers. They have all the same challenges and anxieties as any other high school kid, with the bonus of adults in power who will mistreat them. Adults like those who introduced this legislation. Adults in power who will encourage, or at least not intervene when these kids are mistreated and bullied by other kids. Their bullies parrot what they hear from the adults in their lives.

It's hateful legislation like this that pushes good people out of teaching. Kansas is facing a teacher shortage. In the fall of 2024, public school teaching vacancies in Kansas were 1,954, up from 1,810 in the spring of 2024 and 1,628 in the fall of 2022. The district where I teach has about 20% of its teaching positions, more than 70 positions filled by long-term substitute teachers. Forcing teachers to violate the trust of their students will only exacerbate this problem. Violating the 1st Amendment rights of teachers so the hate-filled legislature can show everyone how hateful they are is pathetic.

Oppose this bill. Exercise basic human decency and intelligence to kill this bill in this committee. To do otherwise will only result in trans and non-binary children being targeted by the very people from whom they are supposed to learn because their teacher followed the law. To be ignored and abused by teachers they are supposed to be able to trust because some bigots in Topeka dictated they had to do so. It will teach other children it's ok to treat people terribly because they are "different" or "don't fit in".."

We must protect our children. Stop another attempt at government overreach into the medical decisions of Kansans and legislators intruding into the private lives of children and parents.—shame on those that support singling out marginalized kids for mistreatment.

Lastly, my classroom will always be a safe and caring learning environment despite discriminatory legislation. I will always be a barrier between hateful people who write legislation like this, and children. I, for one, will not sit idly by while those we've entrusted with leadership choose to abuse our children.

DATE: January 26, 2025

TO: Senate Public Health and Welfare Committee

FROM: Social Justice Team of Unitarian Universalist Congregation of Lawrence
1263 N 1100 Rd, Lawrence, KS 66047.
Carol Estes, Chair
allegria88ce@gmail.com
206-476-9128

RE: In OPPOSITION to SB63, written testimony only

We are writing today to express our strong opposition to SB23. We hold that Kansas patients and their doctors have the right to make difficult medical decisions without the interference of the legislature. The people of Kansas recently demonstrated their strong commitment to this principle in the voting booth, as well as commitment to the general principle of avoiding the intrusion of government into people's private lives.

Threatening medical providers with punishment for providing care that is evidence-based, medically necessary, and safe harms and endangers youth rather than protecting them. It is also dangerously irresponsible to go forward with this policy when every major medical association advocates against such bills.

We know that your goals are to represent and protect the people of Kansas, and we very much appreciate your efforts to do that. This bill, however, is a step in the wrong direction.

Thank you for considering our testimony.

Bonnie Hunt

Gabriel Beard

Rachel Reagan

KT Engle

Rob Brown

Tori Brun

Kathy L. Hagan

Valerie Raper

Kentilly

Rev. Dr. Nori Q. Post

Jane E. Orel

Anthony

Bodde

Abel

Barbara Solomon

Carol Henderson

Brian Vancil

Kenny Hunt

Keyon Christie

James DeLeon

Robbie Bone

Carol Estes

Carol Enos

Joel Enos

Louise Hansen

Allan Hanson

Lynne Bodle

Marjorie Hansen

Janice Peterson

Jeanne Cottrell

Susan Gulick

Susan / Super

Julie Kaper

Peter Graham

Martha H. Burkhardt
John Graham Kreicher

Abigail Reagan

Allie Chavez

Nancy Schneider



KANSAS NATIONAL EDUCATION ASSOCIATION / 715 SW 10TH AVENUE / TOPEKA, KANSAS 66612-1686

David Fernkopf
Executive Director
Written Testimony – Opponent
The Senate Committee on Public Health and Welfare
Senate Bill 63
January 28, 2025

Chairperson Gossage, members of the Committee:

Thank you for the opportunity to testify in opposition to SB 63.

A 2024 survey conducted by the Trevor Project organization indicated that more than 39% of LGBTQ+ young people seriously considered attempting suicide within the same year. The survey further indicated that 46% of transgender and non-binary youth across the U.S. reported seriously considering suicide in 2024. Previous surveys have suggested that states where lawmakers have aggressively pursued anti-trans legislation exhibit extraordinarily high levels of suicide risk among LGBTQ+ youth.

To put it simply, Kansas NEA believes that Senate Bill 63 is dangerous to Kansas youth.

When transgender youth feel supported by their families and medical providers, they have better health outcomes; when they feel affirmed, they experience less suicidal thoughts and attempts, increased self-esteem, and more feelings of safety in their community; all of which impacts their ability to learn better in the classroom.

Kansas NEA believes in allowing Kansas youth the freedom to be themselves. We want all students to be treated with dignity and respect, regardless of their races, backgrounds, genders, or religions. We stand with Kansas children and their families, and we believe everyone should have the right to access the healthcare they need to survive and thrive.

We ask the committee to reject SB 63.

Honorable Committee Members,

My name is David Frahm, and I live in Wichita, KS in the 16th Senate District. I am a concerned constituent of Senator Masterson's.

I'm here to talk about SB 63. This bill is important to me because, as a parent, I believe that the people who should have the right to determine the healthcare outcomes for my children are myself, and my children's medical care team. I believe in the US Declaration of Independence when it says that life, liberty, and the pursuit of happiness are unalienable rights, and I believe that this bill is a direct affront to these unalienable rights. I also believe that, based on the majority of peer reviewed medical literature, that blocking access to trans health care, such as puberty blockers and gender affirming hormones, the risk of not having access to these methods of care far outweighs any benefits.

I believe this bill is harmful to Kansans because this bill restricts the ability of families and their healthcare providers to make individual decisions in the best interest of their children. If this bill only spoke to surgical interventions, then it might be reasonable. However, in its current state this bill is extreme and overreaching. It restricts even long standing, safe, and fully reversible interventions that have been in use in children since the 1950s, and in use specifically to treat transgender for the past 30 years. Kansas children and teens who are transgender or experiencing gender dysphoria should have the freedom to make medical and personal decisions with their parents, doctors, therapists, and faith leaders, just like all other Kansans.

I ask you to vote against SB63 and stand up for the rights of your fellow Kansans. Voting for this, or for bills as overreaching as this, are an affront to the American way of life, and deprive our youth and their families of life, liberty, and the pursuit of happiness. America needs to re-embrace its role as the great melting pot, and have all of its peoples have the dignity and tolerance that they deserve, and I believe that we can and should start that right here, in Kansas, and can do so by voting against this bill.

Thank you for your time and attention.
David Frahm

Dear Members of the Kansas Senate Committee on Public Health and Welfare,

Please don't cruelly target a vulnerable population of youth. Trans kids are not harming anyone, but they are targets of harm that can be deadly. I'm not the first or last person to bring up these statistics, but they are important: the suicide rate among trans people is shockingly, heartbreakingly high. Peer-reviewed research has found that "anti-transgender laws significantly increased incidents of past-year suicide attempts among transgender and nonbinary youth by as much as 72%" (Lee et al.). Trans people are also murdered at alarming rates. Between 2017 and 2021, the number of trans people murdered in the U.S. nearly doubled, increasing by 93% (Mandler). According to the Pew Research Center, about 5% of American youths identify as trans or nonbinary. Regardless of whether this number disgusts you, warms your heart, or leaves you shrugging neutrally, it means that even in a small community, multiple young people face threats to their lives. We need to *protect* trans kids.

I am a public high school teacher. I have had multiple trans students over the past eleven years of teaching. As I do with all of my students, I have always tried to help them feel safe and accepted in my classroom. Even though some heartless people now spit out the term "safe space" like a curse, I take it seriously because I know making vulnerable students feel safe is literally a matter of life or death. One of my trans students was hospitalized for a suicide attempt. When this child returned to school, they thanked me for caring and for making them feel wanted. Another trans student became so terrified for her life that she was unable to leave her house and had to finish the semester remotely. I don't want any of my students of *any* identity to suffer this way. I don't want these children to die. Helping youth is why I became a teacher. It's one of the most important causes I can imagine.

The American Academy of Pediatrics has research to back up their position that gender-affirming care is important. As an educator who teaches teenagers how to conduct quality research, I know the value of professional expertise and peer-reviewed data. I teach my students to evaluate each source for credibility, check multiple sources, include thorough citations, and never use AI to do their writing for them. I would hope that members of the Senate would put in the effort required for an A-quality project. The recent, disturbing lack of empathy makes me worry that we might as well be having AI write legislation. But even cold, calculating robots would heed statistics.

Kansas is developing a reputation for lethal coldheartedness. Journalist and researcher Erin Reed ranked Kansas among "The Worst States" for its treatment of trans people. These are places where trans people are at particularly high risk of dying. When Kentucky senator Karen Berg spoke about her own child, her trans son who had committed suicide, she said, "either you believe that trans children do not exist, or you believe that trans children do not deserve to exist." In an act of unimaginable heartlessness and a slap in her grieving face, her colleagues still passed anti-trans legislation: the exact legislation that increases suicide attempts. We can't be this uncaring. It's monstrous.

There is a quote by young adult author Lauren Morrill that has been getting shared more and more frequently on social media: "I don't know how to explain to you why you should care about other people." I wondered if I could use this quote to teach about hyperbole or satire, or the concept of the misattributed quotation (since I had to do a bit of research to track down the original writer). But now it doesn't feel like hyperbole or satire anymore. All I want to do is use this quote to beg you to care. Please care about these kids. They are terrified. They are dying. They need us to care.

Sincerely,

Amanda Frederick, USD497

Works Cited

- Brown, Anna. "About 5% of Young Adults in the U.S. Say Their Gender Is Different from Their Sex Assigned at Birth." *Pew Research Center*, 7 June 2022, <https://www.pewresearch.org/short-reads/2022/06/07/about-5-of-young-adults-in-the-u-s-say-their-gender-is-different-from-their-sex-assigned-at-birth/>.
- Mandler, C. "Murders of Trans People Nearly Doubled over Past 4 Years, and Black Trans Women Are Most at Risk, Report Finds." *CBS News*, 14 Oct. 2022, <https://www.cbsnews.com/news/transgender-community-murder-rates-everytown-for-gun-safety-report/>.
- Reed, Erin. "Post-Election 2024 Anti-Trans Risk Assessment Map." *Erin In The Morning*, <https://www.erininthemorning.com/p/post-election-2024-anti-trans-risk>. Accessed 26 Jan. 2025.
- Simmons-Duffin, Selena. "More Trans Teens Attempted Suicide after States Passed Anti-Trans Laws, a Study Shows." *NPR*, 26 Sept. 2024, <https://www.npr.org/sections/shots-health-news/2024/09/25/nx-s1-5127347/more-trans-teens-attempted-suicide-after-states-passed-anti-trans-laws-a-study-shows>.
- Spencer, Ashley. "A YA Author's Tweet Went Viral—But Somehow, Dr. Fauci Got the Credit." *Oprah Daily*, 26 Aug. 2020, <https://www.oprahdaily.com/life/a33547008/viral-dr-fauci-quote-caring-for-others/>.
- "State-Level Anti-Transgender Laws Increase Past-Year Suicide Attempts among Transgender and Non-Binary Young People in the USA." *Nature Human Behaviour*, 26 Sept. 2024, <https://www.nature.com/articles/s41562-024-01979-5>.

SB63

Katie Gannaway

Private Citizen

1/26/25

kegannaway@gmail.com

OPPONENT

Members of the committee, thank you for taking the time to consider my testimony. My name is Katie Gannaway and I am an employee of the state of Kansas. I am writing today in strong opposition to SB63.

Gender affirming care is lifesaving care for trans and gender nonconforming individuals. Preventing medical professionals from providing trans youth and their families with the best evidence-based treatment plans is dangerous. It has been proven time and again that access to gender affirming care improves the well-being of trans people, and this bill infringes upon its citizens' ability to access medical knowledge necessary to make safe and informed decisions. Trans youth and their families have the right to self-determination and medical professionals have a responsibility to offer their patients the most current evidence-based treatment options. The state does not have the right nor the medical expertise to pass a bill directly inhibiting these things.

Additionally, preventing state employees from acknowledging and accepting changes in gender expression as a part of social transition is harmful to Kansas youth and actively attempts to suppress the freedom of expression granted by the first amendment. Experimenting with gender expression through the alteration of your appearance is a normal part of a child's development. Among cisgendered youth, a wide variation of gender expression can be seen every day and changes to that expression in the form of changes to hair, makeup, clothing, etc. are largely unexamined and often met with positive reactions. Attempting to prevent trans youth from altering their outward expressions using these same methods is singling them out for unequal and unjust treatment.

Thank you for taking the time to consider my perspective. I strongly encourage you to vote no on the passage of SB63.

Hello, my name is Nico Garner, and I am submitting this written testimony in opposition to SB 63. By the bare minimum, this bill would be impeding Kansan's First Amendment rights by restricting freedom of speech and individual expression for transgender youth, state employees, parents of trans youth, and more. This would create obstacles to necessary education, as well as obstruct medical practices for both doctors and their patients. America is already dealing with a mental health crisis, and in 2024 LGBTQ+ youth who reported living in very accepting communities attempted suicide at less than half the rate of those who reported living in very unaccepting communities. The first nationally representative survey of LGBTQ+ youth has found that 3.3% of U.S. highschoolers identify as transgender and 2.2% as questioning. In 2023, "72% of transgender students and 69% of those questioning report persistent feelings of sadness or hopelessness and 1 in 4 attempted suicide." (www.the74million.org). Ten percent of trans youth received medical treatment after trying to take their own life. In September of 2023, the Trevor Project found the rate of suicide attempts rose by up to 72% in places that rolled back protections of trans youth between 2018 and 2022.

By banning trans healthcare for minors, you are not protecting your most vulnerable constituents. Instead of our youth being able to talk to professionals about what they are feeling, and being taken seriously for who they are, they will be a part of a hostile culture that convinces kids that they aren't worth being advocated for, even in medical and youth-based settings. Please do not revert Kansas back to outdated ideals and a dangerous environment for an entire demographic of people who are constantly attacked by the entire U.S. already. Let's keep Kansas as a safe and considerate place, and let that be our legacy. Thank you.

Danielle George
Private Citizen
dvoorhees24@gmail.com
1/25/2025

For both SB 63 and HB 2071
Opponent
Written only

Chairman and Member of the committee, thank you for the opportunity to share my position on SB63/HB 2071. My name is Danielle George and I am a voter in Johnson County. I am writing today to implore you to vote no on SB 63/ HB 2071.

I believe that gender affirming care affects everyone and in passing this bill you will negatively affect all Kansans. Citizens should have the right to determine their own medical decisions based on medical expertise and science, not based on what politicians have decided. Passing this bill will only make the mental health crisis facing children and teens today worse. Please think of everyone affected when considering this bill.

Thank you for your time and again as a constituent I urge you to vote no on SB 63/ HB 2071.

SB 63 Opposition Testimony

Senate Public Health and Welfare Committee

January 28, 2025

Joan T. Gilson, PhD Writerslife2012@gmail.com

Retired Teacher, Grandparent and Parent, Olathe and Shawnee Mission School Districts, Private Citizen

Arthur G. Gilson, aggilson@comcast.net Retired, Vice President Merrill Lynch, Olathe and Shawnee Mission School Districts, Private Citizen

As Lenexa, Kansas residents, grandparents and parents of public school students, and strong supporters of our children, we are writing to ask that you strongly oppose SB 63 and any move to institute state-wide laws that harm and restrict the rights of lesbian, gay, and transgendered students, children and their parents. Bans on gender affirming care do not protect children; on the contrary, they further exacerbate the emotional pain and profound harm students are already experiencing as a result of the wide-spread discrimination and bullying they face every day.

To offer further proof of harm, we must just call your attention to the disproportionate rate of actual suicide and thoughts of suicide that has been thoroughly documented in several studies, two of which are cited below (Toomey et al., 2018; Austin et al. 2022).

The numbers are shocking: 82% of transgender individuals have considered killing themselves, and 40% have attempted suicide, with suicidality (thoughts about ending their lives) highest among transgender youth. Researchers have determined through extensive analysis that this damage is most assuredly not a result of the gender identity, but rather a consequence of the relentlessly cruel bullying inflicted on these children and youth by an unforgiving, brutal culture.

As a state, Kansas holds the mission of protecting, encouraging, and promoting the whole, happy, successful lives of all residents, especially our children. So-called fairness in girls' sports rules deliberately undercut that mission and your responsibility to protect the rights and safety of all children.

Our own granddaughter is married to a trans woman; both young women hold responsible, highly paid positions in the telecommunications and space industries, respectively. They have been supported and encouraged by their community, their church, their families and their teachers; the result is that they are warm, generous young adults who make a substantial contribution to the economy and to the human community. This is in no small part thanks to their families and to the support they received in their community.

These are benefits which you are tasked with continuing to protect. Please allow this community to be a safe place that protects some of the most vital, creative members of society, people who make a substantial economic contribution. And please protect the welcoming status of our community, a status that attracts strong industry, manufacturing and other engines of a thriving, vital economy. Thank you for serving on this committee, and thank you for taking time to read this testimony and taking our points into account when you cast your vote.

Sincerely,

Joan Gilson, PhD

Arthur Gilson

Austin, Ashley, Shelley L Craig , Sandra D'Souza , Lauren B McInroy. (2022). "Suicidality Among Transgender Youth: Elucidating the Role of Interpersonal Risk

Factors ." NIH. National Library of Medicine. PubMed. <https://pubmed.ncbi.nlm.nih.gov/32345113/>
Accessed 2 Feb. 2023

Toomey, Russell B., Amy K. Syvertsen; Maura Shramko. (2018) "Transgender Adolescent Suicide Behavior." *Pediatrics: Official Journal of the American Academy of Pediatrics*.
<https://doi.org/10.1542/peds.2017-4218>

Kansas State Senate
Room 333E Capitol Building
300 SW 10th Avenue
Topeka, KS 66612-1504

Re: SB 63: "Enacting the Help not Harm Act" by the Committee on Public Health and Welfare

To the Public Health and Welfare Committee,

I am writing to you in firm opposition to SB 63. In a time where constituents are frustrated over rising costs and concerned about their personal healthcare needs, I find it remarkable that the bills moving swiftest through the Legislative branches are those that would criminalize healthcare for a select population and continue to stoke the flames of an unwarranted moral panic. Simply having access to information about healthcare procedures and making that information available to whomever chooses to engage with it is not promoting a lifestyle, and it's a dangerous step towards continued government overreach. Denying healthcare access to one subset of people is discriminatory and harmful, particularly when similar procedures are not even a passing thought for others who elect to undergo them. Broadly speaking, Kansans really aren't concerned whether someone is trans or gender non-conforming, and the wave of outcry has been essentially manufactured; it is a concentrated effort to vilify differences. All this bill will do is destroy lives - cisgender as well as transgender - for a symbolic gesture. I ask for a NO vote on SB 63.

With Regards,
Jess Gilson

SB 63 – WRITTEN ONLY

To whom it may concern:

I am writing in opposition to SB 63.

As a Christian pastor, and the parent of a trans daughter, I speak from direct personal and professional experience when I say this type of legislation will do nothing to materially protect the lives of non-trans youth and families, but will undoubtedly create a context for continued, ongoing harm to the mental, emotional, and physical health of the trans youth and families this bill targets, as well as creating undo strain on the lives and work of state and public employees who will be forced to operate in the environment this bill would create.

In addition, as a professor of World Religions – and other biblically-rooted college courses – I also wish to express my deep concern over the constitutional overreach of this type of legislation, the way it violates our protections under the First Amendment, and the ongoing harm it will do to the overall civic discourse in our pluralistic society.

Respectfully submitted,

Deacon Godsey
Lead Pastor, Vintage Church – Lawrence, KS

Dear Members of the Committee,

My name is Erin Goodnight, and I am writing today in strong opposition to SB63. This bill poses a grave threat to transgender youth, including my niece, who is transgender. She is an intelligent, caring, and strong young woman with a beautiful soul. All she wants is to live her life authentically and without fear. All we want is for her to have the chance to do so safely.

Unfortunately, my niece already faces prejudice and discrimination every day simply for being herself. If SB63 were to pass, it would make life even harder for her and countless other transgender youth. By denying access to gender-affirming care, this bill strips away the ability for these young people to live authentically and thrive. Gender-affirming care isn't just a medical issue—it's a matter of survival.

The statistics are clear and heartbreaking. A significant percentage of transgender youth attempt or commit suicide because of the discrimination, stigma, and lack of support they face. Without access to the affirming care they need, the likelihood of these tragic outcomes only increases. We do not want my niece to become one of these statistics. Her life matters, and she deserves the opportunity to grow into the intelligent, compassionate adult she is meant to be.

Passing this bill would not protect children—it would harm them. It would worsen the already staggering mental health crisis among transgender youth. It would send a message that their lives and experiences are not valued, that they are not worthy of the same care and dignity as everyone else.

I urge you to consider the profound harm SB63 would cause to young people like my niece. I urge you to reject this bill and instead focus on policies that foster inclusion, understanding, and support for all youth. Let us ensure that all children, including transgender children, have the opportunity to live, thrive, and contribute to our communities.

Thank you for your time and consideration.

Sincerely,
Erin Goodnight

January 26, 2025

Senate Public Health & Welfare Committee

SB 63: Written Only Opponent Testimony

Emera Greenwood, LMSW

I am writing to share my strong opposition to SB 63, which seeks to ban life-saving healthcare, including acceptance of social transition for transgender youth in Kansas.

We often talk about how gender-affirming healthcare and mental health support creates positive impacts for transgender people, and the dire consequences of depriving people of the care and support that they need. For myself, being deprived of support and care as a child led to long-term mental health challenges that only subsided when I was able to access support as an adult. My childhood and young adult years were spent suffering poor mental health, which resolved when I was able to live authentically and found the care that I needed.

Research consistently demonstrates that such care is medically appropriate, safe, and supported by every major medical association in the United States. These treatments provide critical support to young people, improving their mental health and overall well-being. Denying access to this care would cause needless harm and perpetuate the challenges faced by the transgender community, including bullying, ostracism, and mental health struggles.

I hope you will consider opposing SB 63 and keep the power to make healthcare decisions for trans youth where it belong, in the hands of their families and their healthcare providers.

Signed,

Emera Greenwood, LMSW

Shawnee, KS

Senate District 10

Submitted via email on 1/26/25

Date: January 25, 2025

To: Senate Committee on Public Health and Welfare

From: Laura Gunderson, LMSW

RE: WRITTEN-ONLY Testimony in Opposition of SB 63

Committee Members,

I want to thank you for this opportunity to write to you at the start of the Kansas 2025 legislative session. I am writing to you as a private citizen of Manhattan, Kansas, and as an outpatient therapist based in Junction City, Kansas. I am concerned for the wellbeing of my transgender and gender diverse, adolescent clients, and therefore, urge you to vote no on the passage of SB 63, a proposed bill that would limit patients, their families, and their healthcare providers from making private, and medically-necessary decisions about an adolescent's medical care.

Like similar bills proposed last year, SB 63 puts transgender and gender diverse youth, their families, and their healthcare providers at risk. As a social worker, I have witnessed firsthand how access to gender affirming care positively impacts transgender and gender diverse youth. Research shows us that when this population has access to gender affirming care, their overall mental health outcomes and psychological well being improve, including lessened symptoms of depression and anxiety. To make such care illegal would have detrimental impacts on Kansan transgender youth and their families.

SB 63 also harms healthcare providers for following the ethics of their professions. In the social work profession, our Code of Ethics guides us to support transgender and gender diverse adolescents in making their own informed medical decisions in congruence with their guardians and medical professionals. Other fields recognize gender affirming care to be ethical, evidence-based, safe, and medically necessary too— every major medical association recognizes these standards. Healthcare professionals should not be forced to choose between following professional standards, ethics, and morals, or the opposing standards of the state.

Like last year's bills, SB 63 is concerningly broad in wording and intent, raising further concerns regarding potential overstep of legislative authority.

Healthcare for transgender youth is evidence-based, safe, medically necessary, and is managed through lawful assessment and informed consent of guardians. Each person should have the right to self determination, and the freedom to make their own private, informed, medical decisions without interference from the government. For minors, this process involves the informed consent and expertise of their guardians and healthcare providers.

Thank you all for taking the time to read my testimony. I urge you to vote no on the passage of SB 63.

Sincerely,

Laura Gunderson, LMSW, Constituent of KS Senate District #22

January 26, 2025

Dear Members of the Committee on Public Health and Welfare,

I am writing to ask you to vote NO on Bill SB63. I am a mother of a transgender child, a retired physical therapist and President and one of the founding members of the Lawrence Chapter of PFLAG, a non-profit providing support and education for the LGBTQ+ community and those that love them.

I can not begin to understand why elected politicians disregard the overwhelming medical consensus that gender affirming care saves lives. Every person, whether transgender or not deserves the freedom to access healthcare when they need it. You with this bill are taking away deeply personal and private decisions that properly lie with parents, their children, their doctors and their mental health providers and putting children at risk of harm. I find it ironic that you name the bill Enacting the Help not Harm Act. There is nothing helpful about this bill.

In transgender and gender-diverse youth, delaying puberty can improve a child's mental well being, ease depression and anxiety, improve social interactions and lower the need for further surgeries. This is done using puberty blockers. Puberty blockers were approved by the FDA in 1993 for the treatment of precocious puberty in cisgender youth. The medications have been used for 30 years with minimal side effects. Once a child stops taking them puberty resumes. They do not cause permanent physical changes . This pause in puberty allows a child to explore their gender identity.

Let's talk about gender affirming surgeries. Transgender and Non-Binary people rarely have gender affirming surgeries before age 18. In some rare cases, a minor may receive a gender affirming surgery to help with some severe dysphoria, but not before getting the approval of their parents, a letter from a mental health professional and show that they have been struggling with gender dysphoria for years as laid out by WPATH. In one study that conducted a retrospective chart review of a U.S. national pediatric surgical database, they were only able to identify 108 trans minors who had received any form of gender affirming surgery between 2018 and 2021. Ninety-five percent of these surgeries were chest surgeries and these were only done after approval of parents, doctors and mental health professionals.

When a child comes to you and tells you that they think they are transgender or non-binary, it is incredibly stressful as a parent. I felt like I had been punched in the stomach. Everything I thought I knew about my child was being turned upside down. What I did know is I loved and believed my child and we got her help and I began educating ourselves. We started with mental health professionals and our primary care physician. Without their medical guidance and support, I am not sure my daughter would be alive today. You are about to disrupt this very essential aspect of helping transgender kids thrive and live the life they deserve.

This next paragraph is a summary of research I found on HRC's website:

A [recent study](#) from the Trevor Project shows that transgender youth with access to hormone replacement therapy medications have lower rates of depression and are at a lower risk for suicide. A [study by Stanford University School of Medicine](#) found that positive mental health outcomes were higher for transgender people who accessed hormone replacement therapy medications [as teenagers](#), versus those who accessed it as adults. A third study, published in the [New England Journal of Medicine](#), found that two years after initiating hormone replacement therapy medications, transgender youth reported higher levels of life satisfaction and positive affect, and lower levels of gender dysphoria, depression, and anxiety.

I don't know if you know any transgender individuals, but they are just like you and me. They are not the enemy. They are living and breathing individuals who want to live a happy fulfilling life. Don't take away medically necessary, age appropriate and safe healthcare backed by decades of research and supported by over 1.3 million Doctors in America and every major medical association.

Republicans like to cite The Cass Review as a basis for eliminating gender affirming care. The Cass report was commissioned by the UK NHS in 2020 to provide recommendations for transgender healthcare of adolescents. The largest doctors' union in the United Kingdom, representing 151,000 doctors, called the Cass Review's recommendations unsubstantiated. A research group out of Yale concluded that the Cass Review "repeatedly misuses data and violates its own evidentiary standards by resting many conclusions on speculation". New French guidelines reject the Cass Reviews conclusions.

Again, I ask you to vote No on this very dangerous bill,

Thank you for your time,

Janis Jex Guyot (She/Her)

Monroe Hanson
Private citizen
monroe.hanson13@gmail.com
1/28/2025

For both SB 63 and HB 2071
Opponent
Written only

Chair & committee members, thank you for your time. I am a voter in Douglas County and have been a Kansas resident for 12 years. I am writing today to urge the committee to vote no on SB 63 / HB 2071.

I opposed this bill last year, and I've opposed all of the similar bills from the last several years. Medical decisions should be between an individual and their doctor, or in this case between an individual, their parent/guardian, and their doctor. The state has no business interfering in private medical decisions.

This bill failed last year because of its extremely broad reach beyond the healthcare space, such as restricting the freedom of speech of public employees. This bill seeks to force an ideology and compel speech from healthcare providers, social workers, school counselors, therapists, teachers, and more. This would be a major first amendment rights violation that would face instantaneous court challenges for its unconstitutionality.

The Kansas legislature has better things to be doing than ruining the lives of trans kids and restricting free speech and expression of public employees. Kansans don't want this. Kansans have never wanted this. This will continue to be an unpopular culture war topic meant to divide us. I urge the committee to focus on the actual needs of Kansans - including trans Kansans and their families.

Thank you again for your time. I encourage each member of the committee to vote no on SB 63 / HB 2071.

1/26/2025

SB 63

Hearing Date: 1/28/2025

Written Only

Opponent

Marcel Harmon

marcelharmon@gmail.com

Private Citizen

Chair Gossage and Members of the Senate Public Health Committee, thank you for allowing me to share my thoughts on SB 63. My name is Marcel Harmon, and I am a voter in Douglas County. I am writing today to encourage the committee to vote no on SB 63.

My opposition stems from personal impacts (my youngest is trans) as well as broader social impacts. As I understand it, this bill does the following:

- **Effectively Bans All Gender Affirming Healthcare for Trans Minors:** including medical care (puberty blockers, HRT, etc.), bans state funds, including Medicaid, from being used for gender-affirming medication or surgery to trans people under 18.
- **Bans State Agencies from Affirming Trans Kids:** bans state facilities or individuals/entities receiving state funds from “promoting or advocating” social transition or gender affirming care to trans people under 18, bans state employees who “care [for] children” from providing or promoting social transition or gender-affirming care to trans people under 18.
- **Threatens Healthcare Providers:** Providers (from therapists to nurses to physicians) would be subject to strict liability lawsuits and licensure implications for violating this law and bans providers from obtaining liability insurance to protect from this.

I have previously shared in detail through past emails and articles the impacts that bills like this, and the rhetoric surrounding them, have on my family. And I refer you to the following for a detailed description of these impacts:

- [KS Legislators - Sustain an SB 233 Veto: Support the Trans Community and Trans Youth](https://marcelharmon67.substack.com/p/ks-legislators-sustain-an-sb-233) (<https://marcelharmon67.substack.com/p/ks-legislators-sustain-an-sb-233>).

Here are a few particularly relevant quotes:

- “He [our youngest who is trans] hates knowing that legislators craft legislation impacting LGBTQ individuals and vote on it without knowing what it's like to be LGBTQ, without ever having meaningful conversations with someone who's LGBTQ, or conversations with those who provide gender affirming care. He hates hearing about other trans and LGBTQ youth and people who've been harassed and attacked, or worse.”
- “He hates having that nagging fear about his safety in the back of his head when he's in public, just taking the bus, at a pride parade, etc. He hates being misgendered at work or elsewhere in public and having to weigh whether or not it's worth pointing out relative to the potential reaction that might occur. He hates having to weigh the pros and cons, that vary by location, every time he needs to decide which restroom to use when he's in public. *He hates having to worry about losing access to gender affirming care, even as an adult, because providers may decide it's just not worth it in such a hostile climate.*”
- “Some of you said this legislation isn't attacking trans people. OF COURSE it's attacking them. You are limiting the treatments available to trans youth that could make them feel whole, that could help them feel like they belong in their bodies, focusing on surgical procedures rarely used for those under 18. It completely ignores how gender affirming care is actually conducted, focusing on outliers and anecdotes. The rhetoric used in support of this (mutilation, equating gender affirming care to lobotomies [as Senator Steffon did last session], calling parents wayward) vilifies providers, trans youth, and their families. It is DESIGNED to attack the trans community.”
- The stress that parents and other family members of trans individuals feel also takes a toll. Reference the Scientific American article linked to in this piece: [Families Find Ways to Protect Their LGBTQ Kids](https://www.scientificamerican.com/article/families-find-ways-to-protect-their-lgbtq-kids-from-serious-harm-physical/) - <https://www.scientificamerican.com/article/families-find-ways-to-protect-their-lgbtq-kids-from-serious-harm-physical/>. “Diamond, the University of Utah psychologist, says this hypervigilant state can be devastating to parents. She has studied minority stress in members of the LGBTQ community and in their caregivers, and she believes the absence of safety erodes their mental health. The same response designed to protect humans from the proverbial saber-toothed tiger is now perpetually activated by

headlines signaling that LGBTQ kids are threatened.’” For us, it’s a stress that’s always there. Fortunately for us, we have the resources and insurance available to take advantage of mental healthcare. But not every Kansan does.

Broader social impacts within our state include the following:

- **Patients, families, and their doctors should have the freedom to make their own private medical decisions—not politicians.** Gender-affirming care is individualized to meet the needs of each patient, managed through a careful and evidence-based model of assessment and informed consent—which is already required by law. No credible studies that I’m aware of show this to be untrue. Bills like this, based on anecdotes and unjustified fear as opposed to scientific evidence, override personal freedoms and the expertise of medical health providers.
- **This bill already failed last year because of its extremely broad reach beyond the healthcare space, such as enabling attacks on public employees.** The bill does not define what it means to “promote,” “provide,” or “advocate” for social transition or gender affirming medical care—meaning not only will mental and medical health professionals be impacted by this bill, but it could also disrupt school counselors, teachers, daycare providers, etc., who interact with trans youth. *As a former school board member and president, I can confidently state that such a bill will be disruptive to classroom, school, and district operations.* The language of the bill clearly discriminates against transgender Kansans and raises constitutional concerns about state employee's free speech rights. And the costs to the state of subsequent lawsuits that will arise out of such a bill will be paid in part by the taxpayer.
- **Gender-affirming care is life-saving care.** Medical care for gender dysphoria is evidence-based, medically necessary, and safe—which is why every major medical association advocates against bills like this. You will be denying Kansans such life-saving care. And for those still referencing the UK’s Cass Review, know that much of that review has been debunked. Here are a few references:
 - [The U.K.’s Cass Review Badly Fails Trans Children:](https://www.scientificamerican.com/article/the-u-k-s-cass-review-badly-fails-trans-children/)
<https://www.scientificamerican.com/article/the-u-k-s-cass-review-badly-fails-trans-children/>.

- [The Cass Review: Cis-supremacy in the UK's approach to healthcare for trans children: https://www.tandfonline.com/doi/full/10.1080/26895269.2024.2328249.](https://www.tandfonline.com/doi/full/10.1080/26895269.2024.2328249)
- [What's wrong with the Cass Review? A round-up of commentary and evidence: https://ruthpearce.net/2024/04/16/whats-wrong-with-the-cass-review-a-round-up-of-commentary-and-evidence/.](https://ruthpearce.net/2024/04/16/whats-wrong-with-the-cass-review-a-round-up-of-commentary-and-evidence/)
- [Critically Appraising the Cass Review: Methodological Flaws and Unsupported Claims: https://osf.io/preprints/osf/uhndk.](https://osf.io/preprints/osf/uhndk)
- [Biological and psychosocial evidence in the Cass Review: a critical commentary: https://www.tandfonline.com/doi/full/10.1080/26895269.2024.2362304.](https://www.tandfonline.com/doi/full/10.1080/26895269.2024.2362304)
- [What the Science on Gender-Affirming Care for Transgender Kids Really Shows: https://www.scientificamerican.com/article/what-the-science-on-gender-affirming-care-for-transgender-kids-really-shows/.](https://www.scientificamerican.com/article/what-the-science-on-gender-affirming-care-for-transgender-kids-really-shows/)
- [Over 130 Irish academics sign open letter criticising Cass Review on transgender healthcare: https://uk.news.yahoo.com/over-130-irish-academics-sign-160853418.html.](https://uk.news.yahoo.com/over-130-irish-academics-sign-160853418.html)
- [Serious Inquiries Only Podcast: Actual Experts Debunk the Cass Review: https://www.whitman-walker.org/serious-inquiries-only-podcast-actual-experts-debunk-the-cass-review/.](https://www.whitman-walker.org/serious-inquiries-only-podcast-actual-experts-debunk-the-cass-review/)
- [Endocrine Society And American Academy Of Pediatrics Respond To Cass, Reject Bans: https://www.erininthemorning.com/p/endocrine-society-and-american-academy.](https://www.erininthemorning.com/p/endocrine-society-and-american-academy)
- [British Medical Association Calls Cass Review "Unsubstantiated," Passes Resolution Against Implementation: https://www.erininthemorning.com/p/british-medical-association-calls.](https://www.erininthemorning.com/p/british-medical-association-calls)

SCIENCE, the natural, medical, and social sciences, they **ALL** tell us that biological sex and gender are not the same thing, and that neither are binary (a few references are below). And because of that, the physical and mental health care we make available to our young people need to reflect this reality. Please step back and look at this with some curiosity – expand what you think you know about biological sex and gender.

- Biological sex is chemically and genetically more complex than XX and XY – it isn't actually binary (and this applies to other species as well). From some of the sources out there,

those born with atypical genitalia (other terms used include intersex and ambiguous genitalia) range from 0.1% to 2%. With 8.2 billion people currently on the planet, then anywhere from 8.2 million to 164 million people currently alive today may have been born with some type of atypical genitalia. Biology, genetics, medicine, etc. do not support the statement that biological sex is binary. Here are some sources if you're interested.

- [Atypical Genitalia \(Formerly Known as Ambiguous Genitalia\):
https://my.clevelandclinic.org/health/diseases/22470-atypical-genitalia-formerly-known-as-ambiguous-genitalia.](https://my.clevelandclinic.org/health/diseases/22470-atypical-genitalia-formerly-known-as-ambiguous-genitalia)
- [What's intersex? https://www.plannedparenthood.org/learn/gender-identity/sex-gender-identity/whats-intersex.](https://www.plannedparenthood.org/learn/gender-identity/sex-gender-identity/whats-intersex)
- [Sex Redefined: The Idea of 2 Sexes Is Overly Simplistic:
https://www.scientificamerican.com/article/sex-redefined-the-idea-of-2-sexes-is-overly-simplistic1.](https://www.scientificamerican.com/article/sex-redefined-the-idea-of-2-sexes-is-overly-simplistic1)
- [Brain Sex Differences Related to Gender Identity Development: Genes or Hormones? - https://pmc.ncbi.nlm.nih.gov/articles/PMC7139786/.](https://pmc.ncbi.nlm.nih.gov/articles/PMC7139786/)
- While some of the literature will label these occurrences as disorders, it's important to recognize that such a label, outside of the medical context (which admittedly can impact one's health depending on the specific condition), has large cultural implications – it's a value judgement. *Decisions made by parents (and adults later in life) relative to courses taken are heavily influenced by pressure to “fit” within a society that doesn't understand or even accept the reality of their conditions.* But they were born that way.
- Gender, while influenced by biological sex, is heavily determined by cultural factors and societal norms. It is the inner sense of self as female, male, fluid, or some other alternative gender (though the specific details of how this manifests individually and collectively is still a subject of debate among experts and varies somewhat by discipline). But the social sciences overall do not support the idea that gender and biological sex are the same thing or that gender is binary. Here are some sources if you're interested.
 - [Gender is conceptualized in different ways across cultures:
https://www.cambridge.org/core/journals/language-and-cognition/article/gender-is-conceptualized-in-different-ways-across-cultures/88A19740AE09E6299B9836158053B57F.](https://www.cambridge.org/core/journals/language-and-cognition/article/gender-is-conceptualized-in-different-ways-across-cultures/88A19740AE09E6299B9836158053B57F)
 - [Sociology of Gender: https://othersociologist.com/sociology-of-gender/.](https://othersociologist.com/sociology-of-gender/)

- [Brain Sex Differences Related to Gender Identity Development: Genes or Hormones? https://pmc.ncbi.nlm.nih.gov/articles/PMC7139786/.](https://pmc.ncbi.nlm.nih.gov/articles/PMC7139786/)
- [Adding Some Curiosity to Common Sense: https://marcelharmon67.substack.com/p/adding-some-curiosity-to-common-sense.](https://marcelharmon67.substack.com/p/adding-some-curiosity-to-common-sense)

I would encourage you to have some heartfelt discussions with constituents who are trans, who are allies, and who are providers of gender affirming care. Read up on this. Delve through the information provided by the large number of opponents of this bill (from this session and past sessions), some of which explicitly debunks proponent testimony. Don't just rely on the limited information provided by the bill's small number of proponents (most out of state and many paid to provide their testimony, at least in past sessions). And recognize that the medical professionals among the legislature promoting this bill have no experience in gender affirming care.

Once again, I thank you all for reviewing my thoughts on this bill, and I encourage you all to vote no on the passage of SB 63 out of committee.

Jean Herrold
PRIVATE CITIZEN
j_herrold@sbcglobal.net
1/28/0025

For both SB 63 and HB 2071
Opponent
Written only

Chairman and Members of the Committee, Thank you for this opportunity to share my thoughts on SB 63/ HB 2071 with you today. My name is Jean Herrold, and I am a voter in Shawnee County. I am writing to encourage the committee to vote "NO" on SB 63 / HB 2071.

This matters to me because I care about equal rights for all and believe passage of this kind of discriminatory legislation will do more harm than good, impinge upon human civil rights, and have repercussions far beyond the small group of individuals its sponsors wish to discriminate against

Thank you again for considering my thoughts on this, and I urge you all to please vote "NO" to the passage of SB 63/HB 2071. Thank you.

Emerson Hoffzales

Public School Educator

Written and Oral Testimony – Opponent

Senate Public Health & Welfare Committee

Senate Bill 63

January 28, 2025

Chairperson Gossage, members of the Committee:

Hello, I am Emerson Hoffzales, my pronouns are they/them/theirs. I am an 8th year secondary English educator in Lawrence, Kansas.

It brings me joy to be in the town that I live in, seeing my students when I run errands and see them working. Recently, I did a double take at a restaurant when I saw a student from my first year in the classroom. She was cleaning up tables and restocking items, when we spent a solid 10 minutes talking about how she was doing and what her plans were in between each task. What hurt the most was hearing that she dropped out of school later in the year that I had her because she was not affirmed in her identity. Her access to a public school education was cut short due to the simple act of not respecting her choices to socially transition. I wish I could say that this is the first time I have heard of this.

We all know that it is imperative for educators to support students in their educational journey, but we cannot do this without meeting the student's needs first. A student's ability to learn is limited to how well their needs are provided outside of the classroom. If a student is hungry or unsure how they are getting home, they will not be able to focus on the material. It is all too common you will see me handing out snacks while engaging students in a literary analysis of a Shakespeare play. You will see me talking to each student one-on-one during our essay revising workshops and will see me giving a student resources from the school's social worker so they are able to get home safely. The social issues within my classroom are so intertwined with educational access that one cannot happen without the other.

The same access that my student missed out on was because an educator would not refer to her by her name or her pronouns. Two simple asks made by the student were ignored which caused this student to not feel welcomed in class. To create an environment in my classroom so each student feels safe enough to stay to learn, I have to meet their needs. When I refer to a student by the name they have asked me to use or their preferred pronouns, I am supporting my students. I am making their education more accessible by making them feel as safe as I can and welcoming them into the classroom by respecting their freedom of expression.

On behalf of fellow educators and supporters of our transgender students, I ask you to oppose this bill.

Laurie Horn
Private Citizen
lhorn123@gmail.com
1/26/2025

For both SB 63 and HB 2071
Opponent
Written only

Chairman and Members of the Committee, thank you so much for giving me time to share my thoughts on SB 63 / HB 2071 with you today. My name is Laurie Horn and I am a voter in Johnson County. I am writing today to encourage the committee to vote no on SB 63 / HB 2071

I have friends who raised a son all the way through college. The father was a football coach & was a very "traditional" father figure. The son never felt comfortable being a male & finally underwent transgender surgery last summer. She finally feels like the person she always was inside. It was very difficult for the parents to accept this, but they wanted their child to be happy & feel complete. Isn't that what all of us want for our family members? Please consider this situation as an example of so many others who are trapped in this situation.

I appreciate you reading my insights and I encourage you all to vote NO of the passage of SB63/HB 2071. Thank you so much for your consideration.

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

BILL NUMBER: SB 63

Support _____ Oppose ___X___ Neutral _____

Testimony Will Be: In Person Oral _____ Webex Oral _____ Written Only ___X___

For Meeting on: Tuesday, January 28th

Testimony By: Hannah Howard

On Behalf Of: Individual

Email Address: hannahhoward916@gmail.com

Telephone: 913-952-5224

January 28, 2025

Testimony to the Senate Public Health and Welfare Committee

Hannah Howard

hannahhoward916@gmail.com

SB 63

Opponent

Written Only

Dear Chair & members of the committee,

I am writing to voice my opposition to bill SB 63.

As a Kansas resident, I'm deeply concerned about the overreach outlined in this bill. It would interfere with personal decisions that should remain private between a family, a patient, and a medical provider. Every family has the right to make decisions about healthcare without government interference.

This bill has already been proposed before and failed last year due to its overly broad scope, extending beyond healthcare into areas like public employees. It fails to define key terms like "promote," "provide," or "advocate" for gender-affirming care, which means it could affect not just healthcare professionals, but also school counselors, teachers, daycare providers, and others who interact with transgender youth.

I'm particularly worried that this would burden staff who play a crucial role in supporting all young people's well-being. It would put them in a position of fear, facing interrogation or accusations for simply doing their jobs. This overreach would impact all youth, pulling resources away from essential services like counseling, education, and childcare.

Moreover, bills like this do more harm than good. State-level anti-transgender laws, just like these, increased past year-suicide attempts up to 72% among transgender and nonbinary youth ([Nature Human Behavior](#)). Additionally, in 2023, the CDC reported that one in four transgender youth attempted suicide ([CDC](#)). These young people already face significant disparities in health and education, including higher rates of violence and discrimination at school, when compared to their peers.

In closing, patients, families, and their doctors should have the freedom to make their own private medical decisions—not politicians. This bill is an attempt to involve the government in personal health decisions. I thank you all for hearing my thoughts on this bill, and I encourage you all to vote no on the passage of SB 63. Thank you.

Sincerely,

Hannah Howard



Merriam, KS



Written Testimony in Opposition to SB63

January 28, 2025

Chairperson Gossage and Senate Public Health and Welfare Committee Members,

The Kansas Chapter of the American Academy of Pediatrics (KAAP) represents over 400 pediatricians across Kansas. We stand in opposition to SB63. We are concerned about the profound harm that SB63 poses to our ability to provide the best medical care to all children, the intrusion into the sacred patient-physician relationship, and the civil, liability, and licensure penalties that threaten physicians who are simply doing their duty to care for children. Additionally, this legislation undermines family involvement in a child's care and significantly harms vulnerable children and youth who are already dealing with significant stigma.

Gender-affirming care is Essential and Evidence-Based

HB 2071 seeks to ban medically necessary care for transgender and gender-diverse (TGD) youth. This life-saving care is recognized and supported by decades of evidence-based standards. It involves careful evaluation of each patient, and physicians then make individualized, developmentally appropriate medical decisions with their patients and families. Major US health organizations endorse such care, including the American Academy of Pediatrics, American Medical Association, Endocrine Society, and Pediatric Endocrine Society. They affirm its critical role in addressing the needs of transgender youth.

Impact of the Legislation

The proposed bills undermine the ability of medical professionals to provide patient-centered care. Medical decision-making is inherently complex and cannot adhere to a one-size-fits-all approach. This legislation restricts physicians from practicing based on their expertise, training, and understanding of their patients' needs. By prohibiting evidence-based practices, it inserts politics into the exam room, jeopardizing the physician-patient relationship and reducing the quality of care for vulnerable populations.

Consequences for TGD Youth

Transgender youth disproportionately face stigma, discrimination, and higher risks of mental health challenges, including depression, anxiety, and suicide. Access to comprehensive gender-affirming care significantly improves mental health outcomes and helps these young people focus



on critical developmental tasks such as education and building relationships. Denying this care exacerbates feelings of rejection and isolation, increasing risks of adverse outcomes such as homelessness, self-harm, substance use, and suicide.

Mental Health and Family Support

The American Academy of Pediatrics and other leading organizations emphasize the necessity of a supportive, inclusive clinical environment that includes family-based therapy. Supporting families in understanding and affirming their child's identity is paramount to fostering resilience and reducing emotional distress among TGD youth.

Why This Legislation is Harmful

Legislative mandates that limit medical care infringe on the expertise of healthcare providers and harm patients. These laws fail to account for the unique circumstances of individual patients and would lead to unnecessary suffering. The proposed legislation not only discriminates against TGD youth but also sets a dangerous precedent by allowing non-medical professionals to dictate medical care.

Conclusion

We owe it to all children to ensure they have access to safe, evidence-based medical care and the opportunity to thrive. Discriminatory policies like SB63 will harm the well-being of transgender youth and erode the fundamental trust between patients and their doctors. We urge this committee to reject this harmful legislation and stand for the health and dignity of all children.

Thank you for your time and consideration. We are happy to address any questions and provide further resources on this critical issue.

Respectfully submitted,

Public Policy Committee
Kansas Chapter American Academy of Pediatrics

January 24, 2025

Honorable Committee Members,

My name is Kelly Hughes, and I live in Clay Center, KS. I am a concerned constituent.

I'm here to talk about SB63. This bill is important to me because as someone who values equitable healthcare access and personal liberty, this bill deeply concerns me.

I believe this bill is harmful to Kansans because this bill restricts the ability of families and their healthcare providers to make individual decisions in the best interest of their children. This bill is extreme and overreaching. It is not just about surgical intervention, it restricts even safe, fully reversible interventions such as puberty blockers and social transition. Children and teens who are transgender or experiencing gender dysphoria should have the freedom to make medical and personal decisions with their parents, doctors, therapists and faith leaders, just like all other Kansans.

I ask you to vote against SB63 and advocate for policies that ensure all Kansas families retain the right to make their own healthcare and lifestyle choices.

Thank you for your time and attention.

Kelly Hughes



*End discrimination based on
sexual orientation and
gender identity*

Taryn Jones
Policy Director, Equality Kansas
In Opposition to SB 63
Senate Committee on Health and Public Welfare
January 28th, 2025

Good afternoon, Madame Chairman and members of the committee.

My name is Taryn Jones, and I am the lobbyist for Equality Kansas. I am writing to you to oppose SB 631. I believe this bill to be extremely harmful not only to the trans community, but also to the medical community.

Laws like these are incredibly harmful to doctors. The civil penalty for a doctor with this bill can be 30 years after the child turns 18. This means that someone who received gender affirming care could sue up until they are 48 years old. There is a good chance that this doctor may not be practicing or even alive after 30 years. SB 63 would also force doctors to get informed consent on any gender transition care. All medications and treatments come with side effects, and we don't make patients sign informed consent for other treatment, why this? Why are doctors being forced to read off a list of all possible side effects? Legislators who are not doctors are not licensed or trained to perform medicine. They should not be telling doctors how to practice or what is best for their patients.

SB 63 also prevents people who receive state funds from advocating for any gender affirming care and prevents state employees from advocating and providing gender affirming care. While nurses, doctors

and teachers all fall into this. There's another category that also falls into these guidelines. social workers and therapists. While I am the lobbyist for Equality Kansas, I am also a social worker. I can promise you that social workers and therapists will not continue to work if they are put under these limitations. Social workers own code of ethics will not allow this, and they could risk losing their license. Social workers have thankless jobs and often don't get paid well. We do it because we love the work. Can we really afford to lose any more of them? What happens when we don't have case workers at DCF or case managers in our mental health centers? There are already long lists to get into therapy what will happen when there are even less therapists? We can't afford to lose any more providers in our state.

For these reasons and more I am asking you to vote no on SB 63. The harms to both medical providers, mental health professionals, and trans children would be astronomical if these laws were to go into effect. Please vote no on SB 63.

To: Senate Committee on Public Health and Welfare
(Public.Health.Welfare@senate.ks.gov)

Public comment from: Lora Jost, Lawrence, KS

Dear Committee member,

I am a Kansan living in Lawrence, and I urge you to reject SB 63. I am an older mom and a couple of my friends have children who are trans, and a relative of mine, now in their thirties, is also trans. I adore these trans individuals and shudder to think what their lives would have been like if they hadn't had access to good gender-affirming medical care when they needed it or hadn't had supportive family members and caring teachers who affirmed them for who they are. The gender affirming healthcare that this bill bans is safe and saves lives. Every major medical association advocates *against* bills like this one.

Gender affirming healthcare should be available to all who need it when they need it. This bill will hurt young people who need care, will stress families who want care for their children, and will stress providers whose job it is to provide the best evidence-based healthcare possible. I don't want this bill, Kansans don't want this bill, and I urge you to reject it.

Sincerely
Lora Jost
Lawrence, KS

Honorable Committee Members:

My name is Kristi Khan, and I live in Colby. I am a concerned constituent here to talk about SB63. The reason this bill is so important to me, that I am making the trip from Colby here today, is that my one and only child was transgender. I say was, because he completed suicide in his dorm room because of bills like this being passed in this country. He was made to feel like his life did not matter, that he did not deserve to live, by bullies who were not only in his school but also from adults and politicians, who have decided they know better than him or others like him, than us parents, and the doctors/specialists who actually have the knowledge, education, expertise, and experience. Those who attack transgender people, young and old, have no idea what is involved or what our families go through. I did everything I could to help my child, including taking my child all over our state seeking help from therapists, psychiatrists, physicians, specialists, whom I originally had hoped would tell me this was just a phase, but I realized it wasn't. People like to say we or the schools or social media are pushing our children to be transgender which is not true. I was so in love and proud of the little girl I thought I had and that I had always wanted, and I would never want to see my child suffer and in pain. As for schools, my child was relentlessly bullied by other kids, who have been raised by parents to hate and hurt others who are different. So, tell me if this is a "choice" like everyone thinks it is, who would choose to live with emotional pain and feeling unsafe every day of their lives?

To those who say irreparable harm is done to our children and it is just "mental illness," I can tell you from experience that this is never a decision that is made lightly, with a lot of research made and a lot of appointments with therapists, psychiatrists, and doctors, that the first step is social transitioning which includes clothing, hair, name change. There is a long process of steps to ensure the child is ready for each step, nothing impulsive being done, which includes hormones and maybe eventually surgery one day, though my son never made it that far as it did require him to be 18 before he could even make an appointment with a surgeon and also letters from his doctor, therapist, and psychiatrist that he was ready for that step, and my son lost his will to live and any hope that he would be safe to live his life, to become a nurse one day helping others, or safe to even just leave his home due to the hate and fear mongering that has been spread. I ask you, since this bill dares to proclaim politicians know more than the doctors and the families involved, and many of you have gone so far as to seek out people from other states who are paid to provide misleading testimony of hormones being irreversible, what is your solution for gender dysphoria as you want to make it a "mental illness" and take away all help for the children and families, other than watching our children suffer and die? If my child had started his menstrual cycle one year earlier, he would have been treated with puberty blockers to prolong puberty, which if not treated can lead to cancer, increased heart disease risk, and metabolic disorders. Puberty blockers have been used for precocious puberty for over 40 years and are reversible. To those who say I was feeding into my son's delusions and he was depressed and suicidal because of treatment he received, transgender youth are not suicidal because of medical treatment but instead because of the treatment they receive from others who make their existence a political agenda and the stigma they are made to live with because of the misinformation and fear mongering.

In my son's last written words to me, 2 weeks after he texted me to find a lawyer as he was worried about the bills being brought and passed, he stated he was not made for our society and not strong enough to go on, that it was probably okay, because he wasn't going to discover the cure for cancer, and that our love and support for him is what kept him alive as long as he was. I ask that you listen to us in opposition of

this bill and do the research, get rid of any biases you already have so that you can truly help our children and not harm them like these types of bills targeting them do.

Thank you for your time,

Kristi Khan

Committee on Public Health and Welfare
January 23, 2025
Senate Bill 63

Lucy Evelyn Kline
Testimony in Opposition
Written-Only

Chairwoman Gossage and members of the Committee:

My name is Lucy Kline and I am a transgender woman residing in Wichita. I appreciate being given the opportunity to offer testimony in opposition of SB 63, which would interfere in a medical provider's ability to provide life-saving gender-affirming care to transgender youth.

Gender-affirming care (such as GnRH agonists, hormone replacement therapy, and necessary surgeries) is a critical medical resource to both transgender adults and youth alike, and have well-established standards of care as recommended by professional organizations like the World Professional Association for Transgender Health (WPATH). It is not the responsibility of the State of Kansas to instruct medical professionals on how to care for transgender patients, especially when in contradiction with widely accepted medical guidelines.

To speak personally on the matter, I believe that nobody should be forced to undergo a puberty that is misaligned with their understanding of their gender. It is a humiliating, dehumanizing, and traumatic experience that takes immense effort and financial resources to reverse in adulthood. It is an unfortunate fact that many transgender people who lack access to gender-affirming care during their adolescence do not survive to be adults. As a survivor, I urge you not to subject transgender youth to this torture and leave our medical freedoms alone.

In conclusion, I vehemently oppose SB 63 and ask that the committee vote against it. Thank you for your time.

- Lucy Evelyn Kline

Michelle Knoll
Private citizen
Butterflybaisers87@gmail.com
1/28/2025

For both SB 63 and HB 2071
Opponent
Written only

Chairman and members of the committee,

Thank you for allowing me to share my thoughts on SB 63/ HB 2071 with you today. My name is Michelle Knoll and I am a voter in Wyandotte county and a physician. I am writing today to encourage the committee to vote no on SB 63/HB 2071.

While discussing the contents of this bill, I encourage all congresspeople to remember that the children and adolescents that could be impacted by this bill are listening. They are individuals and do not deserve to be treated as less than anyone else.

Regarding the content of the bill itself: this bill is a massive overreach beyond even the stated goals of "help not harm" of children.

Firstly, it prevents state employees from promoting the use of social transition in children. Exploration of identity and expression is one of the most important developmental aspects of children and adolescents. It causes no harm and is completely reversible. Furthermore, this is encouraged in non transgender children. We use nicknames all the time in children and adolescents—Robert becomes Bobby, Elizabeth becomes Lizzy. There is no harm in someone choosing a different name to go by. Hair also grows out and clothing styles change. These all should be encouraged and explored regardless of one's gender identity.

Secondly, the extremely punitive measures against physicians will limit care to all children. Kansas will have a greater difficulty recruiting physicians who provide other health care and will encourage physicians to move to states where there are no restrictions on our ability to care for patients. Moreover, professionals who have gender diverse children, potentially including physicians, nurses, teachers, mental health providers, etc, will either leave or not want to come to Kansas, impacting Kansas' overall economy. Given the general shortage of physicians everywhere and the already present challenge of recruiting to the Midwest, this will only exacerbate the problem and will impact care outside of gender affirming care (including mental health access, diabetes care, and primary care).

Finally, I encourage the members of the committee to actually understand what it means to provide gender affirming care. It does not mean immediately putting kids on hormones as soon as they declare a variant gender identity. It does not mean doing surgery on minors. It does not mean giving testosterone to prepubertal girls or estrogen to prepubertal boys. It does mean

encouraging family support of the child and support of a mental health team to address concerns about depression, anxiety, and other mental health symptoms. It does mean talking extensively with the adolescent about what bothers them about their body and what realistically can be changed. It does mean encouraging the adolescent to explore what it means to be a man or a woman and try out different hairstyles, names, and styles of clothing. It does mean discussing at length long term repercussions of altering hormones. Often it doesn't mean medical or surgical interventions at all, but rather simply providing the care we would provide non transgender peers. And sometimes it does mean hormone therapy, after all the discussions with the therapist, adolescent, and parents. And those who do get there overwhelmingly have improvement in their confidence and mental health and most often become thriving members of society.

Once again, thank you for your time and consideration. I strongly encourage you to vote no on SB63 / HB 2071 for the health and well being of all Kansans.

January 24, 2025

Testimony to the Senate Committee on Public Health and Welfare

NAME: Rev. Jeanne Koontz

TITLE: Private Citizen

EMAIL ADDRESS: koontz.jeanne@gmail.com

BILL NUMBER: SB 63

PROPONENT, OPPONENT, or NEUTRAL: Opponent

ORAL or WRITTEN ONLY TESTIMONY: Written Only

Chair Gossage & members of the committee,

My name is Jeanne Koontz, and I live in Hutchinson. I am writing to voice my opposition to Senate Bill 63.

This bill infringes on the rights of families and healthcare providers to make informed decisions and denies children the care they need. This legislation will have lasting, harmful consequences on children and their families while ignoring the recommendations of medical experts.

Trans youth are at a significantly higher risk of depression, suicidality, and victimization compared to their cisgendered peers. This risk is significantly *lowered* when transgender youth are surrounded by supportive adults and have access to gender-affirming care.

Taking away Kansas youth's access to appropriate medical care, supportive mental health counseling, and full social transition is actively putting our most vulnerable children at even greater risk.

I strongly urge you to reject SB63 and champion measures that protect healthcare access and the rights of Kansas children to receive the care they deserve.

Thank you for your consideration.

Sincerely,

Rev. Jeanne Koontz
Hutchinson

January 27th, 2025

RE: Senate Bill No. 63

Dear Honorable Committee Members,

Thank you for taking the time today to read my letter. My name is Katie Korte and I am a concerned community member residing in Lenexa, Kansas. I am writing to you today regarding the introduction of SB 63.

As someone who values equitable healthcare access, inclusivity, the protection of human rights, and - most importantly - as a relative of a transgender young adult, this bill concerns me deeply. I feel compelled to voice my opposition.

My transgender relative always felt different, even as a child. When she came out to her family as trans, she was met with support and love by some relatives, but sadly, members of her immediate family were not supportive. In fact, they made her continue presenting as male, and worse; they became abusive toward her. Over the years that followed, she struggled with self-harm due to being forced to live as a boy.

Transgender children, like all children, deserve to live their lives in safety - free from discrimination, prejudice, and abuse. They deserve to live as their authentic selves, as the gender they truly are. As my relative explained, "I am not 'trying to be' a girl, I don't 'feel like' a girl, I don't 'want to be' a girl - I *AM* a girl."

This bill is extreme and overreaching - it restricts safe and fully reversible interventions like hormone blockers and social transition that are pivotal to the wellbeing of trans children. Research and data consistently show that transgender children and teens face higher rates of mental health issues and suicide. Instead of exacerbating these challenges, we should be working towards a society that accepts and supports children and teens who are transgender. They should have the freedom to make personal and medical decisions with their parents, doctors, and therapists, just like all other Kansans.

I urge you to consider the impact this bill would have on the lives of transgender individuals and to take a stand against it. By doing so, you would be affirming the values of equality and justice that are foundational of our nation.

Thank you for considering my family's perspective and experience, and we ask that you vote AGAINST SB 63.

Sincerely,

A handwritten signature in cursive script that reads "Katie Korte".

Katie Korte

Written Testimony for Hearing on SB63

January 26, 2025

Dear Senate Public Health and Welfare Committee,

I am writing to voice my opposition to SB63. I am a lifelong Kansan, and I have a transgender child who benefits greatly from receiving supportive care from all of their healthcare providers, including their therapist, primary care physician, and more.

Our child identifies as non-binary and are not receiving hormone treatments, but they do receive care that helps them make sense of their experience of life so they can be mentally healthy. Their identification as non-binary harms no one, yet this bill would harm them and others because it would prohibit their healthcare providers from addressing their health fully and accurately.

I support health care freedom and privacy and believe doctors and patients should have the freedom to privately discuss and manage patients' health in all matters. I request that you vote no on SB63.

Sincerely,

A handwritten signature in cursive script that reads "Holly Krebs". The ink is dark and the signature is fluid.

Holly Krebs

Testimony WRITTEN-ONLY
Rev Amy Lippoldt
210 S Ridgewood Dr
Wichita, KS 67218

Dear Lawmakers,

My name is Amy Lippoldt, I am a Kansan, a pastor, and a friend to several trans youth who depend on gender-affirming health care for their well-being. I am urging you to oppose the bill seeking to limit medical care to transgender youth in Kansas, HB2071 and SB63.

I urge you to oppose this bill on the basis of human dignity and the worth of these children. They have discerned, with the help of their families, medical professionals, and therapists that their identity and bodies do not match. Medical treatment to address this reality is essential.

Certainly, this kind of medical care is serious and has lifelong impacts. Which is why families do not start it lightly. They go through a long discernment process and seek professional help. Parents who ask for such treatment for their children believe it is a life-saving measure. To deny such health care is to endanger our children, ignore the medical expertise of their doctors, and take decision-making power away from parents. Parents should have the freedom to parent their children, including making decisions about their schooling, their activities, and their medical care.

Please do not bow to political pressure surrounding this bill from a loud minority of voices. Kansans want freedom to choose their healthcare and Kansas parents want the ability to care for their children. Vote no on these bills.

Thank you.

Amy Lippoldt