Subject: Opposition to HB 2071 and Support for Transgender Healthcare

Dear Legislator',

I am writing to express my strong opposition to SB63, which seeks to restrict transgender healthcare for minors and penalize providers who offer these essential services. As a parent to a 10-year-old daughter who is transgender, I feel compelled to share my perspective on the harm this legislation would cause to children and families in Kansas.

Transgender healthcare, including access to puberty blockers and other gender-affirming care, is guided by established medical best practices. These interventions are neither harmful nor permanent but serve as a crucial pause, allowing children the time to explore their identities and make informed decisions about their futures. These services are life-saving. Research consistently shows that gender-affirming care significantly reduces rates of depression and suicide among transgender youth, improving their overall mental health and quality of life.

Mental health is already a critical issue in Kansas, and this bill would exacerbate it. Punishing providers and denying care to transgender youth sends a devastating message to an already vulnerable population. As someone who has dedicated my career to social work and holds a Master's degree from Wichita State University, I have seen firsthand how essential it is to provide support and acceptance for those navigating mental health challenges.

My daughter has been socially transitioned since February of last year, and her experience demonstrates the positive impact of acceptance. Her friends at school love her, and she thrives because she is affirmed for who she is. Legislation like SB63 threatens to disrupt this support system and put unnecessary barriers in place for families like mine.

I also want to emphasize that lawmakers are not medical professionals. Decisions about medical care for children should be left to parents, families, and doctors who know these children personally and understand their unique needs. It is inappropriate for the government to dictate medical decisions that directly impact the well-being of children.

Finally, I recognize that some proponents of this bill cite religious beliefs as justification. As a person of faith myself, I believe that we are called to love and support one another. This legislation runs counter to the compassion and understanding that faith communities should promote. True care for children means trusting families to make the best decisions for their kids —not stripping them of the ability to access care that could save their lives.

I urge you to reject SB63 and stand with families like mine who want nothing more than to see their children live happy, healthy, and fulfilling lives. A vote for this bill would send a harmful message that our state is willing to risk the mental health and safety of transgender youth. I hope you will choose instead to stand for compassion, understanding, and respect for parental rights.

Thank you for your time and consideration. Please accept this letter as written testimony opposing SB63.

Sincerely, Estin Talavera LMSW 513 N Pine Grove St Wichita ks 67212] estint1@me.com 6208997833 Date: 1.26.2025 Bill #SB 63

Position: Opponent

Testimony type: Written Only Bethany Taylor, Olathe, KS

Chairwoman Beverley Gossage and Members of the Committee,

I'm writing to express my deep concern about SB 63, and the devastating impact it can have on young people who are transgender, non-binary, or otherwise gender expansive. My godson is trans, I have several dear Kansan friends who are trans and nonbinary, and as a former library employee, I offered a welcoming space for LGBTQ youth, and so I have seen firsthand the fear and misery that suppressing transgender welfare can create. The safety and wellbeing of queer youth is my primary concern, but as a matter of economics and resources, I have other concerns as well.

Firstly, the use of puberty blockers and other forms of gender-affirming care are supported by the American Medical Association, the American Psychiatric Association, the Endocrine Society, the American Psychological Association, the American Academy of Pediatrics, the American Academy of Child & Adolescent Psychiatry, and the Association of American Medical Colleges. This law would directly contradict the gathered expertise of untold medical professionals who are actively working with trans youth every day, and who are best equipped to judge the medical and psychological merits of gender-affirming care. They have judged it essential.

I don't think it's in the best interest of any Kansan, no matter what their political perspectives are, to establish a precedent where lawmakers are deciding that they know better than doctors and experts. If that precedent is established, then we are building a Kansas where Topeka feels it can insert itself between a patient and a doctor and violate both their freedom and privacy.

(Sources: <a href="https://www.ama-assn.org/delivering-care/population-care/advocating-lgbtq-community">https://www.ama-assn.org/delivering-care/population-care/advocating-lgbtq-community</a>, <a href="https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Position-2018-Discrimination-Against-Transgender-and-Gender-Diverse-Individuals.pdf">https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Position-2018-Discrimination-Against-Transgender-and-Gender-Diverse-Individuals.pdf</a>, <a href="https://www.endocrine.org/clinical-practice-guidelines/gender-dysphoria-gender-incongruence">https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Position-2018-Discrimination-Against-Transgender-and-Gender-Diverse-Individuals.pdf</a>, <a href="https://www.endocrine.org/clinical-practice-guidelines/gender-dysphoria-gender-incongruence">https://www.endocrine.org/clinical-practice-guidelines/gender-dysphoria-gender-incongruence</a>,

https://www.apa.org/news/press/releases/2024/02/policy-supporting-transgender-nonbinary, https://publications.aap.org/aapnews/news/25340/AAP-reaffirms-gender-affirming-care-policy,

https://www.aacap.org/AACAP/Latest News/AACAP Statement Responding to Effort s-to ban Evidence-Based Care for Transgender and Gender Diverse.aspx,

https://www.aamc.org/advocacy-policy/washington-highlights/aamc-joins-amicus-briefs-opposing-arkansas-and-texas-bans-gender-affirming-care)

Secondly, and salient to my first concern, this law forcibly suppresses the will of Kansas parents who are seeking gender-affirming care for their children. Since there is no state compulsion to unwillingly provide gender-affirming care to a minor, the only rights suppressed are the rights of parents willingly seeking gender-affirming care for their children.

This is anti-Kansan—Topeka should not get between parents, children, and their doctors. The Kansas State Bill of Rights has been found to guarantee our right to bodily integrity and self-determination, and this must extend by proxy to parents who are helping their adolescents seek that self-determination under the care of doctors and counselors.

Thirdly, it's well documented that the mental health of trans youth correlates with their legislative environment. This bill if made into law will unequivocally and cruelly contribute to the oppression of transgender and nonbinary youth, who are at specific risk, because they do not have the resources to move or leave a geographic location the way that adults might.

This singles out a small minority of people, and says, "You don't matter, your mental health doesn't matter, the state is content for you to be uniquely targeted, and any talents you might add to Kansas economically, socially, intellectually or otherwise are meaningless. The state is comfortable with those talents being lost to depression, anxiety, self-harm, and suicidal ideation."

I think it's also important to note the mental anguish that Kansas parents will experience when they are blocked from helping their young people and can only helplessly watch as their children suffer at the hands of the state. This is not what Kansas has stood for in the past, and this is not the strong, community- and neighbor-driven spirit I've always known as a Kansan.

(Sources: <a href="https://www.apa.org/topics/lgbtq/mental-health-anti-transgender-legislation">https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2822715</a>)

Fourthly, the direct effect of this bill will diminish the wellbeing of trans and nonbinary Kansans. By denying potential seekers of medical or surgical care, Kansas would be specifically and knowingly inflicting a risk of suicidal ideation on trans and nonbinary youth. Singling out a minority group for this torment seems uniquely malicious and unfair, to the extent where it seems like the maliciousness is the point?

(Source: https://pmc.ncbi.nlm.nih.gov/articles/PMC7073269)

Fifthly, I'm concerned that bills like this, if made into law, will create a screen for an antitrans environment writ large, and that the manifest expression of that environment will be more hate crimes. We as Kansans don't want our state to be the home of a trans version of the Matthew Shepherd murder; that kind of horror doesn't do anything to make our state stronger, safer or more prosperous. But if Topeka gives tacit approval to de-legitimize the existence of trans people—to viewing their identity as so very invalid that even the support of major medical organizations isn't enough for them to have medical care—then Topeka is consenting to an environment where the humanity of all trans people is up for debate.

As a bisexual Kansan, I remember growing up when gay and lesbian hate crimes were common and waved away. Let's not have our state—our Free State—always predicated on respecting the independent spirit of our fellow Kansans, predicated at its foundation on the full humanity of every citizen while half the country was still insisting on slavery—participate in the dark and brutal act of denying humanity to trans Kansans and give any crack of the door for prejudice, diminished employment opportunities, bullying, harassment, sexual assault, physical assault, torture, and murder.

Sixthly, this bill must be an exercise in ideological signaling, because it's a waste of state resources to pull together, since the actual number of youth seeking gender-affirming care is incredibly, remarkably, low. Out of 5.1 million adolescents in the Harvard study linked below, less than 0.1% of youth sought gender affirming care, and no patients under the age of twelve have been given puberty blockers.

A 2024 study found little to no utilization of surgery for transgender minors. In fact, the majority of "gender-affirming surgery" for minors is for cisgender minors—breast reductions and mastectomies for cisgender males, mostly.

This is legislating against a bare sliver of a fraction of patients, turning a non-existent problem into a bludgeon against Kansas parents and trans youth. Instead of focusing on how to help Kansans with affordable rent, mortgages, sustainable energy, better access to healthcare in rural areas, and keeping pace in public education so our children can compete on the job market, we are drafting bills that turn something that's *not really happening* into a moral panic. This benefits no one except people who profit off moral panics either with campaign donations, speaking opportunities, podcasts, newsletters, and visibility. It irrevocably harms the most statistically vulnerable in our state. It's punching down, which is something that my Kansas roots—going back to railroad engineers in Melvern and Ottawa, and pioneers in Gardner—are antithetical.

(Source: <a href="https://news.harvard.edu/gazette/story/2025/01/gender-affirming-care-is-rare-study-says/">https://news.harvard.edu/gazette/story/2025/01/gender-affirming-care-is-rare-study-says/</a>, <a href="https://news.harvard.edu/gazette/story/2025/01/gender-affirming-care-is-rare-study-says/">https://news.harvard.edu/gazette/story/2025/01/gender-affirming-care-is-rare-study-says/</a>, <a href="https://news.harvard.edu/gazette/story/2025/01/gender-affirming-care-is-rare-study-says/">https://news.harvard.edu/gazette/story/2025/01/gender-affirming-care-is-rare-study-says/</a>, <a href="https://news.pender-affirming-surgeries-rarely-performed-on-transgender-youth/">https://news.pender-affirming-surgeries-rarely-performed-on-transgender-youth/</a>)

And finally, this bill if made into law would force Kansas parents of trans youth to make a choice: to stay in a state they love, that they've built homes and lives in, or to provide safety for their young people. This is a horrible choice, between home and the life of your child—and the life of your child can be quite literal, in the case of suicidal ideation

and suicide. For Kansas to be strong, we need to be able to compete economically, and driving families out of Kansas will only take us further away from that goal. Aside from it being a simply cruel thing to do, it will ultimately weaken our amazing state.

This bill is singling out a tiny, infinitesimal minority in Kansas and telling them flatly, and plainly, that they do not matter. Their mental health, their physical safety, their freedom from bullying, harassment, and hate crimes, their Kansas-given right to bodily autonomy and self-determination do not matter and is easily thrown away.

Kansas began as a Free State and *bled* for the right to be a Free State. We have made independence of spirit and innate dignity the hallmarks of being a Kansan for one hundred and sixty-four years. Let's not betray that spirit now, either for trans youth or for their parents, who deserve freedom and privacy for their private, family decisions.

Thank you, Bethany Taylor Olathe, KS Dear Chairperson and Members of the Committee,

My name is Chris Taylor. I am a lifelong Kansan and educator. In my work as an educator, I have seen first-hand how students thrive when they are given the space to do so. I have also seen the trauma and harm that comes when they are not given the space to be their authentic selves. I am writing to encourage the committee to vote no on SB 63 / HB 2071. This bill is not supported by evidence, is discriminatory, and has broad reach raising constitutional concerns. Thank you for reading my thoughts on this bill.

Sincerely,

Chris Taylor Lawrence, KS Aline Daniella Silva Tolentino Private Citizen Alinedaniella@hotmail.com 3/14/1983

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 Aline Tolentino writing today to encourage the committee to vote no on SB63 / HB 2071.

I am and deeply concerned about the children's safety and belonging to the community. I believe everyone in their singularity deserves support, specially minorities as trans people.

Thank you all for your conscientious support and understanding to what matters to the community today. Thank you

Kansas State Capitol Building 300 SW 10th St. 418-E

Topeka, KS 66612

Senate Public Health and Welfare Committee

RE: Opposition Testimony to SB63 to the House Health and Human Services Committee on January 28, 2025 by Thomas Torma

Dear Senator Members of the Senate Public Health and Welfare Committee,

As I am unable to attend the committee hearing in person, please accept this as my written-only testimony to express my strong opposition to SB 63, which seeks to ban life-saving healthcare for transgender youth in Kansas. This legislation deeply concerns me, as it targets an already vulnerable population and undermines established medical standards.

I have witnessed firsthand the positive impact of gender-affirming care on trans youth. 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.

At a time when Kansans face pressing issues like economic challenges, healthcare access, educational needs, and environmental concerns, I urge you to focus your efforts on initiatives that directly benefit the lives of your constituents. This ongoing attack on the trans community does nothing to address the real priorities of Kansans and serves only to distract from meaningful progress.

In closing, I strongly urge you to oppose SB 63 and instead advocate for legislation that unites our communities and addresses the challenges we face together. Thank you for your attention to this critical matter.

Sincerely,

Dr. Thomas Torma

The James

Lawrence, KS

Senate District 19

Submitted via email on 1/26/25

To the Kansas Senate public health & welfare committee,

Hello, I'm a Kansas local and I'm extremely worried about this bill. Trans healthcare is lifesaving for trans kids. These kids are going to feel even more isolated if this passes which will worsen the current youth mental health crisis. LGBTQ+ youth are already more than four times as likely to attempt suicide than their peers. It's not because transness inherently makes someone depressed; It's because we are in a nation that demonizes gender dysphoria treatment and social transition. Please *support Kansan youth*, and don't support this bill because of how important public health is.

Additionally, this doesn't fit with our American values. *Freedom* should be at the core of every decision the Kansas Senate makes. I fear this overreaches our First Amendment rights.

Thank you for reading, Dayanara Trevizo

Honorable Committee Members,

My name is Bre Tucker and I live in Maize, KS. I am a concerned constituent.

I'm here to talk about SB 63.

As someone who is a Social Worker and values equitable healthcare access and personal liberty, this bill deeply concerns me. The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people. SB63 would restrict access to care for those who need services.

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. 82% of transgender individuals have considered suicide themselves and 40% have attempted suicide. Youth who receive gender-affirming care, such as puberty blockers, social transitioning, reduce suicidal ideation by 73%.

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.

Bre Tucker, LMSW

Honorable Members of the Kansas Senate Public Health Committee:

My name is Stacie Turner and I live in Wichita. As an engaged and concerned Kansas voter and constituent, it is my civic and personal responsibility to speak out when harmful bills are introduced during the legislative session. As such, I respectfully ask you to **OPPOSE SB63 (and HB 2071)**.

These bills infringe on the rights of healthcare providers and, more importantly, parents and families, to make informed decisions. Furthermore, they deny our most vulnerable children the care they need.

Without basic gender-affirming care, especially counseling, trans kids are at risk of potentially deadly consequences, including self-harm or suicide. This legislation is an overreach to eliminate parental rights and will have lasting, harmful consequences on children and their families while ignoring the recommendations of medical experts.

Not only do these bills restrict medical care for trans youth, but they attempt to prevent Kansas kids from transitioning socially -- things like changing one's pronouns, manner of dress, and gendered behaviors to reflect their gender identity. Under SB63 and HB2071, any medical provider, state employee, or state-funded facility which supported or facilitated social transition for a minor could be stripped of their license and be subject to civil liability. As a former secondary teacher, I can't imagine not being able to respect a student's choices or First Amendment right of freedom of expression. That is utterly cruel and unconstitutional.

Finally, these bills personally and negatively affect thousands of families with trans children, including mine. My smart, kind, and talented 15-year-old trans granddaughter, a high school student in Wichita, deserves a chance to live life on her own terms. Her existence doesn't hurt anyone, but it does make the world a more beautiful place. She is a child of God and has the right to thrive, to BE, in this world.

In closing, I'd like to appeal to each of you to **please search deep into your hearts and vote with compassion for the trans kids in our Kansas communities and the people who love and support them.** I hold steadfast to Jesus Christ's command to love my neighbors as I love myself, as many of you do. Jesus would not relegate these vulnerable children to the shadows; He would whole-heartedly love, support, respect, cherish, and celebrate these extraordinary young humans. Why shouldn't we?

Thank you for your time and consideration.

Stacie Turner

(a.k.a. "Nani" to the very bright young woman for whom I speak out today)

Meghan Tuttle
Private citizen
megtuttle@icloud.com
1/28/0025

For both SB 63 and HB 2071 Opponent Written only

Hello—my name is Meghan Tuttle. Thank you so much for giving me time to share my thoughts on SB 63 and HB 2071. I am a voter in Riley county and also a mental health provider. I am writing today urge the committee to vote no on these bills.

I oppose this bill from a mental health position. I know passing these will increase the mental health needs in a state that is already desperately short on providers.

Thank you again for giving me time today. And again I urge you all to vote no the the passage of SB63 and HB 2071



From: Carine Ullom <carineullom@gmail.com> Sent: Sunday, January 26, 2025 12:14 PM To: 'public.health.welfare@senate.ks.gov'

Subject: Please vote NO on SB 63

Greetings Senators,

As you will surmise from the subject line of my email, I am writing you to urge you – in the strongest possible terms - to vote in OPPOSITION of SB 63.

As members of the Republican Party (with the exception of Senator Pettey), you value the importance of personal liberties and the freedom to make our own choices about what is right for ourselves and our families. Thus, it is difficult for me to understand why this committee seeks to legislate the healthcare needs of trans individuals. Should these decisions not be left to the people and their physicians?

Societal norms shift over time. Not long ago, Black and Caucasian people were not allowed to marry. I'm guessing that now some of you have "interracial" marriages in your family. Similarly, gays and lesbians were closeted and not allowed to marry. Now, I am certain that ALL of you have openly gay or lesbian family members, friends, and colleagues. It would seem that transgenderism is the next frontier for discrimination. Why? Please, allow people to be who they are.

Why are we seeing more transgender people? Possibly, because it's becoming more normalized and accepted, just as it is to see mixed race children and gay/lesbian couples. Or, maybe it's because we have polluted our environment so much (water, air) that we are seeing real changes to human systems. Maybe this is the reason for the rise in autism and ADHD. We just don't know. But to deny people the right to be who they feel within their innermost being they are, is cruel.

I have a small handful of friends who are transgender and I am SO thankful that we now have high-quality treatments available for them. Some, I've known "before" and "after" and others only "after", but I have seen firsthand how much happier they are when they can live life as the person they feel they are. All of them are adults who wish they had had the option to make this change much earlier in life. I have an immediate family member who was born female. She is 17 now and all her life she has dressed like a boy. Looking back at family pictures, it is clear that she never felt like a "traditional" girl. I don't know if she wants to transition, but, if she does, I want to know that she can receive the care she needs without any repercussions for her, her family, her healthcare providers, or her teachers (attempting to legislate what these people can say sounds like a violation of their rights to free speech).

I urge you to vote NO on this unnecessary, harmful, and potentially unconstitutional bill. You work for the citizens of Kansas and I believe we and you have much more important business to take care of than attempting to legislate healthcare.

Thank you for considering my testimony (WRITTEN ONLY) and thank you for your service to the State of Kansas.

Carine Ullom Ottawa, Kansas Carine & Ullon

Grace Van Nieuwenhuyse PRIVATE CITIZEN peejykeen@gmail.com 1/25/2025

For both SB 63 and HB 2071 Opponent Written only

Chairman and committee members, I thank you for taking a moment to hear my thoughts on SB 63/HB 2071 today. My name is PJ Van Nieuwenhuyse and I am a voter from Johnson county. I write to you today to ask that you please vote no on SB 63/HB 2071.

I strongly oppose the passage of SB 63/HB 2071. The reason this matter so much to me, frankly, is because if a bill like this had been passed when I was in high school, I can't say I'd still be on this earth today. Taking away young people's choice of what to do with their medical treatment and body in this way is extremely harmful. Gender affirming care saves lives, and I know this because I've seen it save lives. And I've seen blocked access to gender affirming care take lives. Not even having the option to socially transition is absolutely a violation of free speech. It's unjust to limit people in this way, and will hurt many youths who are already at high risk for crisis. Not only would this bill limit the rights of transgender youths in unacceptable ways, but it would also limit the rights of the people who have trans loved ones. A parent has every right to decide with their child and a medical professional whats medically right for them, way more right than the government has to interfere. There are already so many hoops transgender people must jump through to get a transition already, even as adults. Please make it possible for the people already willing to jump through these hoops to get the medical care they need and deserve.

Once again, I thank you sincerely for hearing me. I encourage you all to please vote no on the passage of SB63 / HB2071. Thank you.

SB 63
Brenna Visocsky
Private Citizen
1/28/2025
bvisocsky@gmail.com
Written Only Opponent

Thank you Chair Gossage, Vice Chair Clifford, Ranking Minority Member Holscher, and other members of the Public Health and Welfare Committee, for receiving this oppositional testimony on SB 63. My name is Brenna Visocsky, and I hold a Masters in Social Work; as a social worker, I provided services to youth including transgender and gender non-conforming youth, and worked within the suicide and crisis space. These experiences afford me a certain level of knowledge and expertise on topics related to SB 63 that I truly hope you will take into consideration.

I urge you to vote no on SB 63, which will exacerbate harm to Kansas youth. In 2024, 46% of transgender and nonbinary young people considered suicide<sup>1</sup>. I want to be clear that this struggle is not due to their transgender or nonbinary identity, but the negative familial, communal, and societal responses to that identity. This is undeniable when you look at the reduction in suicidal ideation and risk for transgender and nonbinary youth who cite having a supportive and affirming school space, and community<sup>2</sup>. In fact, **LGBTQ+ youth attempted suicide at less than half the rate of those who reported living in very unaccepting communities**<sup>3</sup>.

It is most common for transgender and nonbinary youth to rely on social transitioning such as changing their name and pronouns. 13% of transgender and nonbinary youth report being on gender-affirming hormones, and only 2% report being on "puberty blockers"<sup>4</sup>– a medication that has been widely used for youth experiencing central precocious puberty (CPP)<sup>5</sup>– both interventions supported by a vast array of medical and psychological organizations like

<sup>1</sup> Nath, R., Matthews, D.D., DeChants, J.P., Hobaica, S., Clark, C.M., Taylor, A.B., Muñoz, G. (2024). 2024 U.S. National Survey on the Mental Health of LGBTQ+ Young People. West Hollywood, California: The Trevor Project. www.thetrevorproject.org/survey-2024

<sup>&</sup>lt;sup>2</sup> Toomey, R. B., McGuire, J. K., Olson, K. R., Baams, L., & Fish, J. N. (2022). Gender-affirming policies support transgender and gender diverse youth's health. Society for Research in Child Development SRCD.

https://www.srcd.org/research/gender-affirming-policies-support-transgender-and-gender-diverse-youthshealth

<sup>&</sup>lt;sup>3</sup> Nath, R., Matthews, D.D., DeChants, J.P., Hobaica, S., Clark, C.M., Taylor, A.B., Muñoz, G. (2024). 2024 U.S. National Survey on the Mental Health of LGBTQ+ Young People. West Hollywood, California: The Trevor Project. www.thetrevorproject.org/survey-2024

<sup>&</sup>lt;sup>4</sup> Nath, R., Matthews, D.D., DeChants, J.P., Hobaica, S., Clark, C.M., Taylor, A.B., Muñoz, G. (2024). 2024 U.S. National Survey on the Mental Health of LGBTQ+ Young People. West Hollywood, California: The Trevor Project. www.thetrevorproject.org/survey-2024

<sup>&</sup>lt;sup>5</sup> Cleveland Clinic. Precocious Puberty - Early Puberty (,2024) my.clevelandclinic.org/health/diseases/21064-precocious-early-puberty.

the American Psychiatric Association<sup>6</sup> and The Endocrine Society<sup>7</sup>. These interventions, whether social or medical, save lives; in contrast, restrictive bills like SB 63 cause active harm by limiting access to care, and also by othering transgender and nonbinary youth. This is evident in increased reported rates of bullying, as well as the 29% of transgender and nonbinary youth in the Midwest who reported being physically threatened or harmed in 2024<sup>8</sup>.

Once again, I thank you for your time and review of my testimony. I encourage you to vote no on the passage of this bill, and to listen to the youth and experts saying legislation like SB 63 are the real causes of harm to our kids.<sup>9</sup>

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<sup>&</sup>lt;sup>6</sup> Jack Drescher, M.D., Ellen Haller, M.D., APA Caucus of Lesbian, Gay and Bisexual Psychiatrists. Revised 2017 Eric Yarbrough, M.D., APA Caucus of LGBTQ Psychiatrists and the Council on Minority Mental Health and Health Disparities (2018) Position Statement on Access to Care for Transgender and Gender Diverse Individuals, American Psychiatric Association.

https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Position-2018-Access-to-Care-for-Transgender-and-Gender-Diverse-Individuals.pdf

<sup>&</sup>lt;sup>7</sup> Endocrine Society. (2021). Transgender Health.

https://www.endocrine.org/advocacy/position-statements/transgender-health

<sup>&</sup>lt;sup>8</sup> Nath, R., Matthews, D.D., DeChants, J.P., Hobaica, S., Clark, C.M., Taylor, A.B., Muñoz, G. (2024). 2024 U.S. National Survey on the Mental Health of LGBTQ+ Young People. West Hollywood, California: The Trevor Project. www.thetrevorproject.org/survey-2024

<sup>&</sup>lt;sup>9</sup> Barbee H, Deal C, Gonzales G. Anti-Transgender Legislation-A Public Health Concern for Transgender Youth. JAMA Pediatr. 2022 Feb 1;176(2):125-126. doi: 10.1001/jamapediatrics.2021.4483. PMID: 34747979; PMCID: PMC10204642.

January 24<sup>th</sup>, 2025

SB63 OPPOSITION testimony—written only.

I am writing today in opposition to HB 2071, a bill that will prevent children from receiving necessary medical care and punish doctors for providing care that is well within the scope of their practice. I am choosing to focus on the effect this bill will have on the practice of pediatric medicine because you have proven time and again that the physical and mental health of transgender children is not of importance to you. Legislating what well studied, effective proven treatments doctors are allowed to prescribe is a slippery slope that harms patients and makes health care harder to access. Doctors who provide gender affirming care have spent years studying and learning how to provide these treatments. They do so within the scope of the oath they take to do no harm. They provide this care to thousands of children, the majority of which are not transgender. There are countless conditions in pediatrics that require what you categorize as gender affirming care. When you step in and try to outlaw specific treatments you show that you do not understand the nuances of patient care. Very little of medicine is black and white. You want to ban puberty blockers and try to specify every situation in which they can or cannot be used. This means doctors will be afraid to use puberty blockers (which do have uses for children who are not being treated for any gender related issues) because they will have to wonder exactly what constitutes an approved use. Just like with laws that ban reproductive health care, doctors who fear for their licenses and livelihoods will have their hands tied wondering at what point it is safe to intervene. The threat of litigation from all sides and the threat of loss of malpractice insurance will force good doctors to leave the state. Children will suffer because the doctors they need will be unavailable. Endocrinologists treat diabetes, thyroid issues, growth related issues, adrenal gland issues and a number of other life altering and life threatening diseases in addition to all the issues that can arise with puberty. Not having endocrinologists available for children will be devastating. If the climate in Kansas is such that any endocrinologist who treats any puberty related disorder could lose their malpractice insurance many will leave. We already have long waits and a deficit of providers. You will only make this worse. I encourage you to stop spending so much time and effort trying to harm transgender children by forcing them into the lifestyles you deem appropriate and focus instead on making healthcare easier to access for all Kansans.

I would also encourage you to read the American Academy of Pediatrics Statement on Gender Affirming Care which can be found here:

https://publications.aap.org/pediatrics/article/142/4/e20182162/37381/Ensuring-Comprehensive-Care-and-Support-for

Thank you.

Amy Voelker, MD, FAAP 13643 S. MurLen Road Olathe, KS 66062 Erika Walker
PRIVATE CITIZEN
erikawalkertherapy@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 time to share my thoughts on SB 63 / HB 2071 with you today. My name is Erika Walker and I am a voter in Sedgwick County. I am writing today to encourage the committee to vote no on SB 63 / HB 2071.

I am a mental health therapist in Wichita, Kansas and have been in practice for almost 12 years. If you've never been to therapy before, something you might not know is that it takes courage for an individual to first reach out to me, and then come into my office and lay their vulnerabilities on the table for me to see. Another thing you also might not know is that there are numerous Kansans who are struggling to get the mental health help they need. This is largely due to there not being enough therapists to meet the increasing demand for mental health services. To add to this already short demand as it specifically pertains to the bills being proposed, "scholars have indicated that few counselors possess clinical training and experience to adequately conceptualize experiences of individuals who are transgender and utilize a trans-affirmative approach to therapy" (Cannon, et. al., 2017).

As a clinical social worker, practicing as a therapist, I am bound by the National Association of Social Workers Code of Ethics. The two bills that are being proposed violate several of those ethics. These include the following to name a few:

- 1.01 Social workers' primary responsibility is to promote the well-being of clients.
- 1.02 Social workers respect and promote the right of clients to self-determination and assist clients in their efforts to identify and clarify their goals.
- 1.07 (a) Social workers should respect clients' right to privacy.
- 1.12 Social workers should use accurate and respectful language in all communications to and about clients.
- 6.01 Social workers should promote the general welfare of society, from local to global levels, and the development of people, their communities, and their environments. Social workers should advocate for living conditions conducive to the fulfillment of basic human needs and should promote social, economic, political, and cultural values and institutions that are compatible with the realization of social justice.
- 6.02 Social workers should facilitate informed participation by the public in shaping social policies and institutions.
- 6.04 (a) Social workers should engage in social and political action that seeks to ensure that all people have equal access to the resources, employment, services, and opportunities they require to meet their basic human needs and to develop fully. Social workers should be aware of the impact of the political arena on practice and should advocate for changes in policy

and legislation to improve social conditions to meet basic human needs and promote social justice. (b) Social workers should act to expand choice and opportunity for all people, with special regard for vulnerable, disadvantaged, oppressed, and exploited people and groups. (c) Social workers should promote conditions that encourage respect for cultural and social diversity within the United States and globally. Social workers should promote policies and practices that demonstrate respect for difference, support the expansion of cultural knowledge and resources, advocate for programs and institutions that demonstrate cultural competence, and promote policies that safeguard the rights of and confirm equity and social justice for all people. (d) Social workers should act to prevent and eliminate domination of, exploitation of, and discrimination against any person, group, or class on the basis of race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical ability.

If this bill passes, I will not be to ethically abide by my code of ethics and will either have to choose between breaking that code, which will lose me all of the trust that my clients put in me, or lose my job and livelihood if I choose to follow the code of ethics I am bound to as a clinical social worker. It is crucial that those making the decisions on this bill understand and keep in mind that the professionals who are treating the youth this bill is targeting have to maintain competence and continuing education to treat their clients. Our governing boards see to it that we maintain this education and competence, too, and there are checks and balances if it is not adhered to.

By restricting social workers and other healthcare providers with similar code of ethics, this bill is causing harm to the youth it is targeting. According to a survey conducted by the Trevor Project in 2023, among LGBTQ+ who took part in the survey 41% of them seriously considered completing suicide in the past year and including nearly half of these of them being transgender or non-binary youth. Over their lifetime, Kaniuka, et. al. (2020) reported that approximately 41% of transgender individuals will attempt suicide at some point in their lifetime. Because transgender youth have to continually fight for their identity to be socially accepted, they are often feel ostracized by their families, communities, and their world around them, which leads them to feel a sense of burden and decreases their sense of belongingness. When a persons belongingness is put into question, there is a greater chance for suicidal ideation (Fulginiti, et. al., 2020).

I want to make clear that the transgender youth being treated in therapy do not have mental health concerns inherently because they are transgender. Research has shown and continues to show that the near constant stressors they face, including harassment, discrimination, prejudice, and stigma compound to create a psychopathogy that ends up being diagnosable by the DSM-5-TR in these youth. In fact, research has shown that when transgender youth are able to consistently experience gender euphoria ("a positive emotional response to internal experiences or social events which affirm and support one's gender identity or sexual orientation," Mann, et. al., 2023) they are able to thrive in their environments.

Once again, I implore you all to vote no of the passage of SB 63 / HB 2071. Thank you.

Honorable Committee Members,

My name is Yvonne Walz, and I live in Zurich, Kansas. I am a concerned constituent.

This written testimony is to talk about SB 63. This bill is important to me because

As the family memeber of a trans kid in rural Kansas, I have seen first hand how gender affirming care affects our children. I have watched this struggling kid blossom into an amazing young adult thanks to the gender affirming medical care he has received over the years.

I believe this bill is harmful to Kansans because...

This bill restricts the ability of parents and their healthcare providers to make individual decisions in the best interest of our 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 have personally seen how damaging it is for a trans kid to not have access to gender affirming care. I have seen how the lack of puberty blockers forces a kid through a confusing and excruciating puberty that stresses their mental health. Puberty blockers are SAFE and EFFECTIVE and allows anyone who is questioning the ability to hit pause and consult with our trusted medical and psychological professionals. I have seen how the wrong puberty forces trans people to need even more gender affirming surgeries as adults than they would have needed if they had access to blockers and hormone therapy. It is unnecessary and cruel.

I have also personally seen how damaging these transphobic laws have been to my family member's mental health, in the way that our society targets him as a political pawn, and how local citizens have treated him with fear, hatred, and disgust. I have even witnessed community members threaten his life. These continued attacks on trans and gender diverse people is extremely polarizing, hateful, and unnecessary.

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. Yvonne Walz

## Kansas Senators,

I oppose SB 63 as the outcomes overreach our constitutional First Amendment rights. Children need to be able to openly and freely discuss all topics with their teachers, counselors, and social workers. Those adults can provide guidance and support when the child's parents are unable to meet their needs. Limiting the adults to what they can share will not change the child's needs, rather it will just create a harmful environment filled with fear, shame, and bullying.

Additionally, this legislation is burdensome and filled with obstacles for the state employees and institutions who operate them. We need less red tape, not more.

Open your hearts to the diversity of humanity and do not allow this bill to pass.

Regards, Lisa Weeks Lawrence, KS Honorable Committee Members, My name is Miles, and I am a concerned constituent.

I'm here to talk about SB 63. This bill is important to me because I am a transgender man on testosterone.

I believe this bill is harmful to Kansans because I have lived the experiences necessary to know about this harm. The changes I have seen on testosterone have made my life infinitely better. You hear about studies showing that medical transition improves mental health, and I am living proof of that. I never thought I would live to a point where I could see myself in the mirror; my mental health suffered for years. This is how so many children in Kansas live, and medical transition gives them hope to live through it, the way I did. The happiness and comfort that I have experienced in my medical transition is what you are trying to take away from children. I have friends that would lose everything that gives them hope if this bill passes. Many of the processes this bill restricts are fully reversible and put children in no danger whatsoever; they simply allow these kids to experience comfort in their bodies and to learn about their bodies as they make these decisions with their families. If you advocate for parental rights, you should oppose this bill as it takes away parents' abilities to decide what is right for their own children. If you advocate for helping the children of Kansas, you should oppose this bill. If you advocate for the protection of Kansan children's lives, you should oppose this bill.

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. I ask you to vote against SB63 and instead advocate for policies that protect children.

Thank you for your time and attention. Miles

Honorable Committee Members,

My name is Elizabeth Wine, LSCSW (Licensed Specialist Clinical Social Worker), and I live in Wichita and I am a concerned constituent as well as a state licensed professional.

I attended Wichita State University for my Masters in Social Work and graduated in 2007. In 2013 I obtained my Licensed Specialist Clinical Social Worker license which means I am licensed to practice at the independent level in our state. I provide direct services to children, teenagers and adults as well as clinical supervision to those wishing to obtain their LSCSW after graduate school. I attend ongoing clinical training including those relevant to SB 63.

It is in my professional opinion that this bill would be harmful to Kansans who are already seeking to obtain mental health when there are often shortages of therapists in their area that accept their insurance. There is a limited number of openly affirming therapists who are experienced in working with the LGBTQIA+ population and I have had clients travel from surrounding areas to work with me.

Gender dysphoria in clients under the age of 18 is not something mental health professionals take lightly. One of the requirements is that symptoms have to be present for at least six months before a diagnosis can be made. When a client and/or parent first reports symptoms, I document that date and I monitor symptoms as well as assessing for other mental health conditions that may better explain their symptoms.

It is only when a youth has the diagnosis of Gender Dysphoria that I may refer them onto the local medical clinic that meets with families to discuss a wide array of options that might include puberty blockers or hormones, but also includes services such as speech therapy. This is a long, slow process and not one that any medical or mental health professional takes lightly. It is our duty to serve our clients, make sure their needs are being met as well as advocate for our clients. I ask that you put your trust in mental health and medical professionals who are trained in these areas and instead of putting restrictions on us, allow us to do our work that we are dedicated to.

I ask you to vote against SB63 and other bills that may come up this legislative season that restrict the rights of LGBTQIA+ individuals as well as the providers that serve them..

Thank you for your time and attention. Elizabeth Wine, LSCSW

Kansas Senate Committee on Public Health and Welfare <a href="Public.health.welfare@senate.ks.gov">Public.health.welfare@senate.ks.gov</a>

Honorable Committee Members,

I am writing to express concerns regarding SB 63 that is being considered in a Committee hearing on Tuesday, January 28, 2025. This bill is important to me because I value equitable healthcare access, and believe that youth who are 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 urge you to oppose to SB 63 for the following reasons:

- The bill inappropriately and unnecessarily denies liberty and personal autonomy to transgender youth and their families while failing to accomplish an identified, compelling public interest.
- This extreme bill is not only about surgical intervention, it restricts even safe, fully reversible interventions and social transition activities.
- This bill is discriminatory in that it prohibits specific medical treatments for only a portion of the youth population (transgender, but not cisgender).
- This bill violates the liberty of healthcare professionals to act in accordance with the ethics of their profession in delivering well-established, evidence-based standards of care to their patients.
- The adoption of this bill into law would erode general public welfare by unduly penalizing medical providers, mental health counselors and other people who are dedicated to caring for our youth. This will further exacerbate the shortage of healthcare providers and educators in the state, and leave our vulnerable youth adrift without a safety net.

Medical organizations representing doctors, researchers, and mental health professionals support the provision of age-appropriate, gender-affirming care for transgender and non-binary people according to standards that have existed for decades. There is a preponderance of evidence, confirmed in multiple studies, that accepting trans youth and providing age-appropriate care ensures the best health outcomes. The specific values of the individuals involved, and the professional expertise and well-regulated ethics and practices of healthcare providers, can be brought to bear without government interference. And the social institutions of which the child is a part can support those decisions in a continuum of care.

If there is empirical evidence of a public safety concern, less intrusive options exist to mediate the co-existence of transgender citizens. For example, I have heard some people may fear the presence of transgender people in single-sex restroom facilities. If there are widespread incidents of legitimate public safety concern in Kansas, then please adopt laws to allow the same protections for transgender and non-binary citizens as cisgender citizens, such as requiring an "any gender" private bathroom or shower stall in public facilities as part of the building code or accessibility standards.

Please limit the scope of governance and support the principal that every person has a fundamental right to access the health care they need without fear of discrimination, prejudice, or barriers to treatment that supports their mental, physical and emotional well-being. Please help transgender youth and their families by opposing this extreme and discriminatory bill, ensuring better health outcomes for these youth.

Thank you for your consideration,

Kelly Drake Woodward, AICP McLouth, KS 66054