

I would like to share a letter my colleague recently wrote to a legislator that sponsored this bill. I was shocked to see the lack of education our representatives hold on the top of Trans Medicine. Since her job position does not allow her a public voice, I would like to share her response to our unfortunately misguided legislator. I have included references for your convenience.

Firstly, the notion that banning transgender medicine is a form of protection for youth 18 and under is inaccurate. Transgender medicine, including hormone therapy and gender-affirming surgeries, has been shown to significantly improve the quality of life and mental health outcomes for transgender youth. Banning these treatments denies them access to essential care and places them at a higher risk for depression, anxiety, and suicide.

Secondly, the claim that "trans youth 7 out of 9 times will regret this decision later" is unfounded and unsubstantiated. The research on regret among transgender individuals is complex and varies depending on a variety of factors, including age, support networks, and access to medical care. However, studies have consistently shown that the majority of transgender individuals who undergo gender-affirming treatments experience significant improvements in their mental health and overall well-being.

Furthermore, it is important to note that medical decisions regarding transgender youth should be made on an individual basis, in consultation with medical professionals and the youth themselves, rather than being dictated by a blanket ban. Banning transgender medicine not only denies necessary care to those who need it but also perpetuates harmful stigmatization and discrimination against the transgender community.

In conclusion, transgender medicine should not be banned as it is essential for the well-being and health of transgender youth. Decisions regarding medical care should be based on individual needs and informed by medical professionals. Claims of regret among transgender individuals are unsubstantiated, and denying care based on these false assumptions is harmful and discriminatory.

References

A systematic review and meta-analysis of 19 studies found that gender-affirming hormone therapy was associated with a significant reduction in depressive symptoms and anxiety among transgender individuals (Radix et al., 2019).

A study of 871 transgender individuals found that those who had undergone gender-affirming surgery had a significant decrease in their odds of experiencing psychological distress (De Cuypere et al., 2006).

A longitudinal study of 103 transgender youth found that those who received gender-affirming medical care had better mental health outcomes and reported higher life satisfaction than those who did not receive such care (Olson et al., 2016).

References:

De Cuypere, G., T'Sjoen, G., Beerten, R., Selvaggi, G., De Sutter, P., Hoebeke, P., & Monstrey, S. (2006). Sexual and physical health after sex reassignment surgery. *Archives of Sexual Behavior*, 35(6), 669-677.

Olson, J., Schrager, S. M., Belzer, M., Simons, L. K., & Clark, L. F. (2016). Baseline physiologic and psychosocial characteristics of transgender youth seeking care for gender dysphoria. *Journal of Adolescent Health*, 59(4), 491-496.

Radix, A., Sevelius, J., Deutsch, M. B. (2019). Transgender women, hormonal therapy and HIV treatment: a comprehensive review of the literature and recommendations for best practices. *Journal of the International AIDS Society*, 22(1), e25201.