



PARTNERS FOR ETHICAL CARE

May 19, 2022

Testimony in Favor of HB 454

Good morning, honorable representatives of Ohio. My name is Jeannette Cooper, and I am here on behalf of International Partners for Ethical Care to state our support of HB 454 and our support for each of the 25 representatives who have sponsored this necessary bill to protect children from experimental treatments on their brains and bodies.

Partners for Ethical Care is a secular, non-partisan, all-volunteer, nonprofit organization funded by individuals and with an annual budget of approximately \$30,000. I have personally paid my own way to be here today. You will hear from a significant number of associations opposed to this bill, and that makes sense because they have a strong financial interest in continuing the business of pathologizing “gender.” For example, the American Academy of Pediatrics spends approximately \$800,000 on lobbying the government each year. I believe we at Partners for Ethical Care spent \$30 last year on sending handwritten postcards to legislators.

We are here because we care about the long-term health and wellbeing of children in Ohio and across the world. I myself was born and raised in Ohio. As you have seen and will see, children and families are in distress over this topic. It is difficult to witness people in emotional turmoil searching for solutions. But changing pronouns, injecting children with Schedule III steroids like testosterone, and removing the breasts of girls before they even have a chance to get to know their bodies has created many more problems than it aimed to solve. Yes, these children are in emotional distress; that is obvious. And yes, some may appear “happy” for a few months or even for a few years because they got what they demanded from adults who want to make them “happy.” But, as the saying goes, be careful what you wish for.

Because feelings are not forever.

The feelings that young people are having about their bodies are real, they are intense, but they are not uncommon and certainly not new. The thing that is new is how we are choosing to describe and address this normal discomfort with puberty as a society. Emotions, no matter how intense and no matter how distressing, should never be met with a scalpel. In no other case of mental distress would we suggest that a person, let alone a child, should have any body part permanently removed or disfigured by hormones. We all know that children grow and change; we are not the same people and certainly do not have the same feelings that we did when we were children. This is not the same as coming out as lesbian or gay; when that happens, it’s all ages of people, not a massive number of adolescents in peer groups. And there is no name change, new pronouns, pharmaceuticals, or surgeries if someone comes out as lesbian or gay. LGB is nothing like T.

Because we at Partners for Ethical Care have spent years interacting with families and professionals on the topic of “gender identity,” what we know is this:

- When kids spend less time online and more time outside, they desist from their claimed “trans identity” and become comfortable with their bodies.
- When families spend less time isolated in rooms, on screens, or with peers, and more time doing activities together in diverse and multigenerational groups, children who had been clinging to a “trans identity” desist and become comfortable talking to a variety of people, including those with whom they disagree.
- When kids spend less time ruminating on their feelings and more time taking walks and allowing their feelings to dissipate, they are likely to desist from their “trans identity” and more likely to build resilience.

We have observed thousands of children desist from their “trans identity,” but we also know hundreds who have been permanently psychologically and physically harmed by so-called “gender affirming medicine,” which is not medicine at all. When parents and professionals take time to figure out the root causes of a child’s intense interest in having a new name, new pronouns, new body, and new self, we observe that children do not need the crutch of a “trans identity,” and they desist. And when feelings persist beyond the normal period of childhood, this mental distress should be met with therapy, not surgery. We must focus on changing society rather than changing our bodies.

I wish this was the solution to all the anxiety, depression, and host of other mental health issues going on with young people today, but it’s not. Using someone’s chosen pronouns is not going to save their life, just like using someone’s birth name is not going to cause their suicide. That’s not how suicide works.

We are proud to see Ohio standing up for the protection of gender non-conforming children, much like I was as a child and much like I am now as an adult. I am glad that I was given the chance to grow up without pharmaceutical and surgical intervention for my personality, including my preference for short hair, playing with cars, getting my hands dirty, and using tools to make stuff. I’m glad that my adolescent angst and intense desire to be unique was met with parents who helped me find activities that engaged my interests and people who appreciated my quirkiness. I am glad that I was able to become a mother and breastfeed my daughter. I am glad that my parents and professionals told me the truth by saying that it gets better and you need caring and support people to spend time not money to help you learn how to get through your distress, not purchased professionals and associations to fix you.

Thank you for your time and support of this bill.