

April 14th, 2021

Texas State Senate leadership
Lieutenant Governor Dan Patrick
Senate President Pro Tempore Brian Birdwell

Texas House of Representatives leadership
Speaker of the House Dade Phelan
Speaker Pro Tempore Joe Moody
Republican Caucus Chair Stephanie Klick
Democratic Caucus Chair Chris Turner

RE: Strong opposition to the following bills:

- SB29 Relating to requiring public school students to compete in interscholastic athletic competitions based on biological sex
- SB1646 Relating to the protection of children, including the definition of child abuse and the prosecution of the criminal offense of abandoning or endangering a child
- SB1311 Relating to the provision of and professional liability insurance coverage for gender transitioning or gender reassignment medical procedures and treatments for certain children
- HB1399/SB1399 Relating to professional liability insurance coverage for and prohibitions on the provision to certain children of procedures and treatments for gender transitioning, gender reassignment, or gender dysphoria
- HB1424 Relating to a health care provider's right to object to participation in a medical procedure that violates the provider's ethical, moral, or religious beliefs

Since 1971, Fenway Health has been working to make life healthier for the people in our neighborhood, the LGBTQIA+ community, people living with HIV/AIDS and the broader population. Fenway was founded as part of the free clinic movement by students who believed that “health care should be a right, not a privilege.”

We are submitting this testimony in strong opposition to SB29, SB1646, SB1311, HB1399/SB1399, and HB1424. These bills are harmful to the physical and mental health of the people of Texas and members of the LGBTQIA+ community across the country. These bills would ban transgender young people from participating in school sports, would deem loving and understanding parents who support their transgender children as abusive, would exacerbate economic inequities in healthcare by denying insurance coverage for transgender patients, would discourage providers from giving lifesaving care to transgender people, and would allow discrimination against transgender people in healthcare.

Collectively, this legislation creates and strengthens barriers to healthcare that members of the LGBTQIA+ already face, contributing to disproportionately higher rates of HIV and cancer in LGBT people.¹ Transgender people are stigmatized and subjected to systemic discrimination that affects their health care: outright refusals of care, “hostility and lack of understanding from health care providers; and a system based on heterosexual, cisgender norms that disregards their needs.”² According to a 2020 report by the National Academies of Sciences, Engineering, and Medicine³, transgender people are more likely to attempt and commit suicide, use

¹ Centers for Disease Control and Prevention. Estimated HIV incidence and prevalence in the United States, 2014–2018. HIV Surveillance Supplemental Report 2020;25(No. 1). <http://www.cdc.gov/hiv/library/reports/hiv-surveillance.html>. Published May 2020.; Ceres M, Quinn GP, Loscalzo M, Rice D. Cancer Screening Considerations and Cancer Screening Uptake for Lesbian, Gay, Bisexual, and Transgender Persons. Semin Oncol Nurs. 2018 Feb;34(1):37-51. doi: 10.1016/j.soncn.2017.12.001. Epub 2018 Jan 8. PMID: 29325817; PMCID: PMC7864377.

² <https://fenwayhealth.org/wp-content/uploads/Next-Steps-for-Building-Better-LGBTQI-Health-2.17.21.pdf>

³ National Academies of Sciences, Engineering, and Medicine; [Division of Behavioral and Social Sciences and Education](#); [Committee on Population](#); [Committee on Understanding the Well-Being of Sexual and Gender Diverse Populations](#); Charlotte J. Patterson, Martín-José Sepúlveda, and Jordyn White, Editors. 2020. <https://www.nap.edu/catalog/25877/understanding-the-well-being-of-lgbtqi-populations>

and abuse harmful substances, and experience anxiety and depression than their non-LGBT counterparts due to the impacts structural discrimination and stigma.

Knowing this information about the stigma, discrimination, hostility, and abuse that transgender people face, passing any of this legislation is deeply troubling; passing any of it during a pandemic is grossly irresponsible and severely damaging to public health.

Granting providers the right to deny lifesaving care to transgender people is discrimination. This takes the form of blocking access to primary, preventive health care, but could also result in denial of services for a transgender patient arriving at the emergency room in need of urgent care (anything from appendicitis to injuries from a car accident). The negative health outcome based on discrimination in these examples is clear. No one should be denied healthcare because of their identity. Dangerous health outcomes could also take the form of denying patients gender affirming health care. Gender affirming care can save lives by addressing the mental health challenges created by stigma and controversy over basic human rights. The very nature of these bills and the debates that swirl around them are harmful to the mental health of transgender people. In a 2020 multistate study of transgender adults, data showed that exposure to negative messages correlated with worse rates of depression, anxiety and psychological distress.⁴ To deny a transgender young person gender affirmative care is to condemn them to the worst possible outcomes of mental health crises. Instances of abuse in transgender young people increase the likelihood of self-harming behavior by 2.5 times on average.⁵ These bills would criminalize best practice medical care that is backed by the American Academy of Pediatrics, the American Medical Association, and other leading health authorities⁶.

Gender affirming care, including hormone treatment, has also been shown to significantly improve transgender patients' long-term health outcomes—including significantly improving quality of life, general health, social functioning, and mental health.^{7,8} Many transgender people report that they are happier and more productive following their transition to express their current gender identity.⁹

Blocking access to gender affirming care for transgender youth only increases health disparities. Youth whose authentic selves are truly seen and believed do better – they engage in medical care, with school and their peers, and have mental health outcomes on par with their peers. When we as parents, care takers, medical professionals, or community leaders fail to support our youth, we leave them without hope, support, or a voice. It is imperative that as a country and as a community we listen to medical experts, science, and our own

⁴ Hughto JMW, Pletta D, Gordon L, Cahill S, Mimiaga MJ, Reisner SL. Negative Transgender-Related Media Messages Are Associated with Adverse Mental Health Outcomes in a Multistate Study of Transgender Adults. *LGBT Health*. 2021 Jan;8(1):32-41.

⁵ IMPACT. (2010). Mental health disorders, psychological distress, and suicidality in a diverse sample of lesbian, gay, bisexual, and transgender youths. *American Journal of Public Health*. 100(12), 2426-32.
<https://www.thetrevorproject.org/resources/preventing-suicide/facts-about-suicide/>

⁶ **H-185.950, Removing Financial Barriers to Care for Transgender Patients.** Our AMA supports public and private health insurance coverage for treatment of gender identity disorder as recommended by the patient's physician. (Res. 122; A-08). <http://www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/glb-advocacy-committee/ama-policy-regarding-sexual-orientation.page>

⁷ Murad MH, Elamin MB, Garcia MZ, Mullan MJ, Murad A, Erwin PJ, Montori VM. Hormonal therapy and sex reassignment: A systematic review and meta-analysis of quality of life and psychosocial outcomes. *Clinical Endocrinology*. 2010; 72(2): 214-231.

⁸ Keo-Meier CL, Herman LI, Reisner SL, Pardo ST, Sharp C, Babcock JC. Testosterone treatment and MMPI-2 improvement in transgender men: A prospective controlled study. *J Consult Clin Psychol*; 2014, Aug 11 [epub ahead of print]. PMID: 25111431

⁹ Grant J, Mottet L, Tanis J, et al. *National transgender discrimination survey report on health and health care*. Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force, 2012.
http://www.thetaskforce.org/static_html/downloads/reports/reports/ntds_full.pdf

communities and regard gender affirming care as medically necessary. Gender dysphoria is a well-researched and real medical condition that affects transgender people, including youth, and for which we fortunately have treatments. National and international medical and mental health professionals have proven time and again that transgender individuals need support from their communities to improve overall health and wellbeing¹⁰¹¹.

Criminalizing gender affirming care does not make transgender youth cisgender; it only blocks access to care, making transgender kids less resourced, less supported, and more vulnerable -- more at risk. Supporting transgender youth literally saves lives.

State politicians should focus on public health initiatives that matter, urgently — containing the pandemic, increasing vaccinations, bolstering the economy, and helping families—rather than targeting transgender youth for harm. Transgender youth, like all young people, thrive when they are treated with dignity and respect. Fenway Health strongly urges you to reject these harmful bills.

Sincerely,

Carl Sciortino
Executive Vice President of External Affairs
Fenway Health

Sean Cahill
Director of Health Policy Research
The Fenway Institute

Julie Thompson, PA-C
Medical Director of Trans Health
Fenway Health

Steph DeNormand
Trans Health Program Manager
Fenway Health

Carrie Richgels
Manager of Policy and Advocacy
Fenway Health

¹⁰ American Medical Association, Policy Statement H-160.991 on Health Care Needs of Lesbian, Gay, Bisexual and Transgender Populations (2016) <https://policysearch.ama-assn.org/policyfinder/detail/gender%20identity?uri=%2FAMADoc%2FHOD.xml-0-805.xml>

¹¹ American Academy of Pediatrics, [Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents](#)

Jason Rafferty et al., *Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents*, 142 Pediatrics e20182162 (2018)