



**Testimony of GLBTQ Legal Advocates & Defenders (GLAD)
in opposition to H 7884
so-called “Rhode Island’s Children Deserve Help Not Harm Act”
April 9, 2024**

Dear Chair Donovan, First Vice Chair Giraldo, Second Vice Chair Potter, and members of the House Committee on Health and Human Services:

On behalf of GLBTQ Legal Advocates & Defenders (GLAD), I write to testify in strong opposition to **House bill 7884**.

As you know, GLAD works in New England and nationally to promote justice and equality on the basis of gender identity, gender expression, sexual orientation, and HIV status. We have had the pleasure of collaborating with Rhode Islanders over decades on progress for justice and freedom.

As you also know, Rhode Island has a decades-long history of inclusion and equality for transgender community members. Rhode Island was the second state to pass comprehensive non-discrimination protects for transgender people over twenty years ago, and our state continues to move forward with protections that enable transgender community members to have equal access to housing, employment, and health care so that they can thrive.

This bill is a draconian, cruel ban on essential health care for transgender adolescents that seeks to harm youth, parents and guardians, and health care providers. Among other things, it would:

- Ban access to effective and essential transgender health care for adolescents;
- Ban insurance coverage for transgender health care (and it even, oddly, tries to ban federal health care coverage for transgender health care);
- Categorizes evidence based, standard of care transgender health care as “unprofessional and reckless conduct;” and
- Subject providers to liability and litigation for providing standard of care medicine.

This purported ban would harm transgender youth by cutting them off from medically necessary health care, hurt and undermine parents and guardians by stripping them of the right to make medical care decisions for their children, and penalize health care providers by trying to wipe out the health care they are trained to provide to keep people in our state healthy and thriving. Everything about this bill is at odds with medical science and the needs of Rhode Islanders, as well as Rhode Island’s history, laws, regulations, and the United States Constitution.

Transgender people, including transgender youth, often experience gender dysphoria – alienation, distress or discomfort with their birth sex.¹ Gender dysphoria is a serious medical condition and, if left untreated, it can result in anxiety, depression, self-harm, and suicidality.² Thankfully, we have safe, effective, and evidence-based treatments for gender dysphoria. These treatments – known collectively as gender-affirming care or transgender health care – are endorsed by all major medical associations, including the American Medical Association, the American Academy of Pediatrics, and the Endocrine Society.³ Experts agree that transgender health care is effective at alleviating dysphoria. Transgender adolescents whose gender dysphoria is treated succeed and thrive just like their non-transgender peers.⁴ Like any other type of medical treatment for young people, doctors and parents are best suited to determine the appropriate treatment, within accepted standards of care, without interference from the state. The well-established treatments to address gender dysphoria are effective and can be life saving.

This bill should surely not move forward. GLAD, along with others, is challenging similar transgender health care bans in Florida and Alabama. Rest assured that any law passed in Rhode Island would similarly be subject to challenge as it would invade the dearly held rights of parents to make medical decisions for their children among other issues.

For those on the committee who would like to learn more about transgender health care, including the overwhelming support for access to health care from leading professional medical societies such as the American Medical Association, I attach to this testimony (1) facts on transgender health care for adolescents and (2) statements from major medical associations about transgender health care.

We urge the committee to reject this assault on transgender adolescents, their parents and guardians, and their health care providers. Please do not hesitate to contact me with any questions.

Respectfully submitted,



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¹ Jason Rafferty, Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents, 142(4) American Academy of Pediatrics (Oct. 2018), <https://publications.aap.org/pediatrics/article/142/4/e20182162/37381/Ensuring-Comprehensive-Care-and-Support-for-Committee-on-Psychosocial-Aspects-of-Child-and-Family-Health-Committee-on-Adolescence-and-Section-on-Gay-Lesbian-Bisexual-and-Transgender-Health-and-Wellness>).

² Id.

³ See Trans Health Project, Medical Organization Statements on Transgender Health Care, <https://transhealthproject.org/resources/medical-organization-statements/> (collecting statements from organizations).

⁴ Kristina Olson, et al., Mental Health of Transgender Children Who Are Supported in Their Identities, 137(3), Pediatrics (Mar. 2016).

U.S. Medical Associations Statements in Support of Established Medical Care for Transgender Adolescents

- **American Psychological Association**

2024: [APA Policy Statement on Affirming Evidence-Based Inclusive Care for Transgender, Gender Diverse, and Nonbinary Individuals, Addressing Misinformation, and the Role of Psychological Practice and Science](#)

"This policy statement affirms APA's support for unobstructed access to healthcare and evidence-based clinical care for transgender, gender-diverse, and nonbinary children, adolescents, and adults...Furthermore, this policy statement addresses the spread of misleading and unfounded narratives that mischaracterize gender dysphoria and affirming care, likely resulting in further stigmatization, marginalization, and lack of access to psychological and medical supports for transgender, gender-diverse, and nonbinary individuals."

- **American Medical Association**

2023: [Clarification of Evidence-Based Gender-Affirming Care](#)

The AMA recognizes that treatments for gender dysphoria and gender incongruence are medically necessary, and will work with stakeholders to advocate for laws and policies that protect access to care, oppose laws and policies that impede the provision of care, and support protections against liability for physicians and institutions who provide care and patients who seek it

- **American Academy of Pediatrics**

2023: [AAP reaffirms gender-affirming care policy, authorizes systematic review of evidence to guide update](#)

The AAP Board of Directors voted to reaffirm the 2018 AAP policy statement on gender-affirming care and authorized development of an expanded set of guidance for pediatricians based on a systematic review of the evidence. [P]olicy authors and AAP leadership are confident the principles presented in the original policy, [Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents](#), remain in the best interest of children.

2022: [AAP continues to support care of transgender youths as more states push restrictions](#)

"It is critically important for every child to have access to quality, comprehensive and evidence-based care — transgender and gender-diverse youth are no exception," said AAP Immediate Past President Lee Savio Beers, M.D., FAAP.

- **Joint Statement of Frontline Physicians**

- American Academy of Family Physicians
- American Academy of Pediatrics
- American College of Obstetricians and Gynecologists
- American College of Physicians
- American Osteopathic Association
- American Psychiatric Association

2021: [Frontline Physicians Oppose Legislation That Interferes in or Penalizes Patient Care for Transgender Individuals](#)

- **Pediatric Endocrine Society**

2021: [The Pediatric Endocrine Society Opposes Bills that Harm Transgender Youth](#)

- **Endocrine Society/Pediatric Endocrine Society**

2020: [Discriminatory policies threaten care for transgender, gender diverse individuals](#)

"The Endocrine Society and the Pediatric Endocrine Society oppose legislative efforts to block transgender and gender diverse individuals from accessing gender-affirming medical and surgical care, the two medical societies said in a joint policy perspective published in *The Journal of Clinical Endocrinology & Metabolism*."

2020: [Transgender Health Position Statement](#)

"There is a durable biological underpinning to gender identity that should be considered in policy determinations. Medical intervention for transgender youth and adults (including puberty suppression, hormone therapy and medically indicated surgery) is effective, relatively safe (when appropriately monitored), and has been established as the standard of care."

- **American Academy of Child and Adolescent Psychiatry**

2019: [AACAP Statement Responding to Efforts to ban Evidence-Based Care for Transgender and Gender Diverse Youth](#)

"The American Academy of Child and Adolescent Psychiatry (AACAP) supports the use of current evidence-based clinical care with minors. AACAP strongly opposes any efforts – legal, legislative, and otherwise – to block access to these recognized interventions."

Additional medical organization statements can be found at the website of [Transgender Legal Defense and Education Fund](#)

Facts About Medical Care for Transgender Adolescents

"Consistent. Insistent. Persistent. Those are the characteristics health care professionals seek when it comes to understanding if a child is transgender, meaning the child's gender identity is different from the one assigned at birth." - Expertise with Kids Questioning Their Gender Identity in [Yale Medicine](#), January, 2019

Health care professionals who provide care for transgender children and adolescents follow well-established standards of care that have been developed through decades of clinical study and shown to be safe and effective.

Health care provided to transgender children and adolescents involves in-depth screening by a multidisciplinary team including mental and medical health professionals who have been trained in the established standards-of-care.

Health care provided to transgender children and adolescents also involves informed consent of the young person's parents and informed assent by the patient.

The established standards of care for transgender children and adolescents follow age and stage-of-development appropriate guidelines and include¹:

- Counseling
 - Evaluation and counseling with a mental health provider "who has experience working with transgender or gender diverse children and adolescents."
 - Mental health professionals also assess any other mental health conditions the individual may be experiencing
- Puberty blockers
 - Puberty blocking medications may be considered "once an experienced clinician confirms the start of puberty...and diagnosis of gender dysphoria has been confirmed by a qualified mental health provider."
 - Puberty blockers pause the progression of physical changes associated with puberty. This allows more time for the adolescent to explore their gender identity, live in the experienced gender, and for the family and the adolescent to consider whether further medical care is needed or desired.
 - Puberty blockers are fully reversible.

¹ Endocrine Society. "Transgender and Gender Diverse Children and Adolescents | Endocrine Society." Endocrine.org, Endocrine Society, 17 March 2024, <https://www.endocrine.org/patient-engagement/endocrine-library/transgender-and-gender-diverse-children-and-adolescents>

- Gender affirming hormone therapies
 - Transgender teenagers may be treated with cross-gender hormones: estrogen or testosterone. Endocrine Society guideline state that teens:
 - See a qualified mental health professional who can confirm gender dysphoria, confirm emotional and cognitive maturity for informed consent/assent for treatment, and manage any psychological problems that might interfere with the safety of hormone therapy. This mental health professional also provides helpful support to the teen emotionally as they undergo physical changes related to the hormone therapy.
 - Informed consent and assent involves a discussion of all risks and benefits of the hormone therapies with the teen and their family before prescribing.
- Gender affirming surgeries: age 18 or older
 - Surgery is not part of the standard-of-care for children or adolescents

The professional standards of care for transgender adolescents have been endorsed as safe and effective and adopted by all major U.S. medical and mental health associations – representing 1.3 millions doctors - including, but not limited to:

- The American Medical Association
- The American Academy of Pediatrics
- The American Association of Child and Adolescent Psychiatrists
- The American Psychiatric Association
- The American Psychological Association
- The Endocrine Society
- The Pediatric Endocrine Society

Further Reading:

Dr. Meredith McNamara: [A huge misconception about medical care for trans kids](#), *Boston Globe*
"[T]he broader public is wrongly being led to believe the treatments are impulsive or incautious."

Expertise with Kids Questioning Their Gender Identity: [Yale Medicine Pediatric Gender Clinic](#)