

Submitter: Timothy Crosby

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2458

I am a Licensed Marriage and Family Therapist. We have a similar law in my state relating to "Conversion Therapy". Over my past 14 years (2009 to present) of practice, I have worked with adolescents and children. I worked as a contracted therapist in 8 different school districts over the course of my career. My job has been to work with teens and children who have significant mental health needs. It wasn't until 2018, that I had a client who identified as transgender, and this individual had a history of sexual abuse and suicidality. Because of the California law, I was not allowed to explore how there might be a relationship between the client's history of sexual abuse and their distress about their gender. The sexual abuse likely led to self hate and internalized misandry. The history of trauma appeared to be connected with the client's rejection of their self and body. After this time, there has been a steady increase in my clients who identify as transgender. Well over 90% of my clients whom identified as transgender are also on the Autism Spectrum. I have observed my clients who have taken puberty blockers, hormones, and/or had surgery have an initial improvement, but then regressed months after starting their medication. This regression has happened despite affirming families and schools. The young clients that I work with have challenges coping if a teacher or family member accidentally calls them by their previous name or gender pronoun. This has lead to them spiraling emotionally. This year, I spoke with a man in his mid-twenties, who was detransitioning. I listened as he shared his experience of being affirmed by the gender clinic, receiving hormones, and eventually having his penis removed. He said that when he told his therapist that he felt regret, that the therapist told him he might have internalized transphobia. Currently, he is trying to sue the facility because they did not address his issues and he felt manipulated to transition. I know that this issue is a complex one, which is why I oppose this bill. It is an oversimplification of how to provide therapy with young clients. It keeps therapists from helping people who might struggle with self hatred, reinforces the idea that someone's body needs to be changed to be accepted, and pressures therapists to avoid exploring a client's internal challenges. The research evidence that is used to promote this bill is non-experimental, potentially biased, and therefore cannot be taken as irrefutable evidence. Thank you.