

Submitter: Erin Friday

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2458

I am an attorney in California, a life-long Democrat who voted for same-sex marriage and lead of Our Duty. I am the parent of daughter who at age 13 was convinced that she was a trans boy. She did not come by this belief organically. She was indoctrinated by an older trans-identifying girl and people she met online. She was influenced by TikTok, Youtube, Instagram and Twitter. She came to her identity after spending hours online during the COVID lockdown. She was sent porn by groomers — homemade porn by her minor groomer friend, as well as Hentai – anime porn with gender bending themes, incest and sadomasochism. She was sent erotica read aloud on Youtube. She was taught how to dissociate from her body and was encouraged to sell provocative pictures to a sugar daddy online, being told that it's really not her body that she is showing because she is actually a boy. Luckily, she did not do that.

I watched as close to 50% of her girl scout troop -7/16— came out as trans or non-binary.

As soon as she announced her trans identity, her mental health plummeted. She barely got out of bed. She started failing her classes at school. She was diagnosed with severe depression and anxiety.

My daughter's first therapist offered a single option, immediately affirming her trans identity, insisting the we use her desired male name and pronouns, and treat her as a boy. The therapist warned us that our daughter had a 41% chance of committing suicide if we did not forget our little girl, and celebrate our new son. The 41% that therapist quoted was lifted from a headline. The study it came from stated that this was an extreme overestimate, but this therapist had never bothered to read the study. Recent studies show the number to be magnitudes lower, and similar to rates for the comorbidities many trans-identifying children have.

I quit my law practice and read everything that I could on this new crop of teenagers that suddenly announce a trans-identity. Lisa Littman is spot on with her description of rapid onset of gender dysphoria.

I pulled my daughter from the public school. I took away her phone and all social media. I fired the therapist. After rejecting many other mental health providers who would also only affirm and had no interest in my daughter's depression and anxiety, and influences from social media, I finally found one willing to explore the causality of her trans identity. I worked tirelessly to show her how amazing her natural body is,

how periods are a part of life and discomforts are part of the human condition. I showered her with love and compassion and took all of her daily vitriol, enduring her insults hours on end.

I am happy to say that after about 2 years of love and support, my daughter is now comfortable in her body. Had I followed the myopic and unscientific affirmation model, my little girl, would have had her breasts removed and her body pumped with testosterone.

As a lead of a parent of a Rapid On set of Gender Dysphoric Kids support group, I know that my story is not unique because I have heard now 100s like mine. When new parents onboard, I can predict their stories whether they have a son or a daughter. The patterns are clear – these ROGD kids are into anime and cosplay. They spend too much time on social media. Many have internalized homophobia. They are socially awkward, intellectually advanced but emotionally immature, on the spectrum, have eating disorders, AND all of them have comorbid mental health issues that are not alleviated by gender affirming care. Forcing the affirmation model as the only treatment for gender dysphoria or incongruence will harm millions of children and youth in our country, leading them toward a lifetime of medications and surgery — treatments with no evidence base to support their safety or efficacy. Affirmation is not life-saving; it is life destroying. The number of regretters is climbing steadily. Give children a chance to grow up intact. I oppose ORS 675.8