

Chair Nosse, Vice-Chairs Goodwin and Nelson, my name is F— Smith, you may know me as Frank. I'm 27 years old, I was transitioned by the Oregon Health Plan beginning at the age of 19 and successfully detransitioned two years ago after five harrowing years of that medical treatment. I'm writing today in opposition to the gender-affirmation treatment sections of House Bill 2002.

My story begins with my parents' dysfunction which set the stage for distress in both of their children. When my parents met my mom was married, her first husband was physically abusive and my dad drove her to the DMV to file a divorce. His marriage to my mom was his fourth marriage. My dad was over the age of 50 when I was conceived and twenty years older than my mom. I am the youngest of his children from all previous marriages and my mom's only son. Long ago my dad suffered childhood trauma and was further traumatized from combat in Vietnam, as well as sustaining physical disabilities. These things depress him to this day. I experienced bullying and sexualized bullying as a young child, by the age of 9 I had discovered erotic cartoons online, eventually this led me to themes involving forced-feminization including compilations of hardcore pornography degrading the viewer's masculinity and encouraging male-to-female transition in explicit captions. Prior to encountering forced feminization in pornography, I had frequently played dress up with my sister and her friends, until I became old enough to feel embarrassed. Online pornography felt especially targeted in that way. Based on encounters I would have as an adult, with older transvestites met anonymously over the internet, I believe that a certain form of intergenerational trauma was spread wide over the internet through grooming algorithms in pornographic subcultures online. It only takes a little bit of research into some of the big porn companies and websites to see what I mean.

Exposure to pornography in combination with family dysfunction led to behavioral problems and substance abuse in college. I was diagnosed with Bipolar I but did not follow through with that treatment. Instead I dropped out with the intention of transitioning male-to-female. I was 19 years old. I was diagnosed with GD and written a prescription after a single visit to a Portland clinic called Transactive. The therapist told me that at Transactive they did not believe in “gatekeeping,” she told me that there were certain diagnostic requirements in order to prescribe HRT and asked if I could recollect anything like childhood dysphoria so I told her about playing dress up with my sister. She did not ask about pornography and I did not volunteer that information. I read contemporary books written by transgender authors to familiarize myself with their arguments, called transfeminism, and became zealous in my beliefs, creating conflict with my family. As I began hormone therapy I admitted to my therapists and endocrinologists that I was very afraid of losing my fertility. I told them that raising my own biological children was important and I couldn’t imagine a happy life without it. My friend with the most aggressive activist opinions shouted at me that I was selfish for saying this while my therapists told me to relax and that hormone therapy was reversible. As conflict came to a head in my family, particularly with my sister, I fled my parents’ home in Salem to make my own way in Portland.

In Portland I became inducted in social services, New Avenues for Youth, Outside In and others. A special wing called SMYRC (Sexual Minority Youth Recreation Center) served exclusively LGBTQ youth ages 13-24. It was here that I was provided with the clothes, donated by philanthropic straight women, to make my transition possible. Drag queens from RuPaul’s Drag Race visited us waifs and brought plastic breast forms with them. I put on a pair of breast forms and wore them for a week. A social worker saw me, this one was a female-to-male

transsexual. He asked me if I would like to be on the waitlist for breast implants. When I hesitated he persuaded me by telling me it was covered by OHP with no copay and that the waitlist was so long I would have a year to make up my mind. I consented. The social workers took more notice of me, invited me to a gay sex camp in Southern Oregon known as the Radical Faerie Sanctuary and offered me rent free housing using federally funds discriminated for exclusively LGBTQ clients through shady practices.

During my year on the waitlist for breast surgery I would visit the doctor Jens Berli at OHSU many times, fussing over the procedure. The thought of plastic inside me was disturbing, especially as he described the under the muscle procedure he would use. He was very charming as he downplayed the damage it would do to my muscles. I could not get over the squeamishness I had at the thought of it and canceled the surgery during the pre-op appointment a week before the scheduled date. Face-to-face, Dr. Berli admitted that he thought I was making a wise decision to cancel, he went on to say that many of the young trans-women who opted for breast augmentation on OHP were making a mistake and described with disgust their emaciated bodies. When I got home I received a call from his secretary, she told me what a pleasure it was to work with me and that if I changed my mind I would be at the top of their list. It was 2019. Over the summer I aged out of NAFY services and was faced with living on the streets again, potentially resorting to sex work. In desperation I called the people at OHSU. They scheduled me for breast augmentation and operated on me three weeks later. I remember the horror I felt at the powerlessness of my limbs in the moment before going under, knowing it was a mistake. Panic and revulsion met me when I awoke, looking down at the ugly plastic shelf jutting out of my chest. When I told Dr. Berli how I regretted it he laughed and told me “*You* I don’t feel sorry for!” Every moment with the breast implants was painful and humiliating. Because

of them I became ashamed, quit my job as a line-cook and hated to leave the house. I had succumbed to the will of one of my coworkers, an older male who became obsessed with me when he learned I was trans. He wanted me to move in with him, to live in his room and spend my days filming live porn on the popular websites.

OHSU was eager to perform more trans-related surgeries on me and called me often. I had been referred for an orchiectomy by a transgender naturopathic clinic. The woman at that clinic had me convinced that an orchiectomy would naturally feminize my body and mind as opposed to taking testosterone blockers and estrogen replacement. I had waffled on if I wanted this or not, professing that I missed the feelings of clarity and male sexuality when they were gone, yet panicking when my first attempts to quit cross-sex hormones succeeded in increasing male attributes under my feminine attire, including male sex drive. I also expressed the misconception that castration would mellow out the symptoms which were once described as Bipolar. Rather than referring me to real therapy, the naturopath referred me for prioritized treatment by the surgeons at OHSU. Since then I have researched her online and discovered pictures of her harassing demonstrators downtown. Meanwhile her specialty is listed as “pubertal suppression,” yet she lacks medical credentials! It angers me that the bar has been lowered for professionals like her, who take their activist opinions out on innocent people. That should anger you too.

OHSU followed up by calling me incessantly and inquiring if I would like vulvoplasty or vaginoplasty in addition to orchiectomy. I arrived to the pre-op examination with a shaved head and eyebrows, still coming down off drugs with musty clothes. The surgeon’s eyes watered as she showed me pictures of her results. They were her firstever patients performed on recipients of public health insurance and she admitted with a guilt-ridden voice that results were not always

satisfactory. I imagine many of those bodies belonged to homeless folks, just as I had been. In fact, I knew other trans-women who went through the process even more rapidly than I did. Many were from out of state or even out of the country. They had heard that our public insurance would cover the cost of transition expenses and flocked to Portland for that sole purpose. Even in those days I knew many who had desisted, although that language was not in use and, in my trans identity, I arrogantly assumed they had internalized transphobia or were never *really* trans. The first of these friends was known on the streets as “Lala” but he introduced himself to me with his real name, James. Ultimately he identified himself as two-spirit, or a gay indigenous man, whether or not the gender physicians who cheerfully set him down that path ever recorded his detransition is beyond my knowledge. Most likely not. James’s lifeless body was found on the streets of Portland in 2017, he died of a fentanyl overdose.

I got a call from the hospital days before the surgery was scheduled, OHP had denied coverage for the surgery because my letters were expired. One of them had been expired for years. It was during COVID lockdown and I was living in the aforementioned house where I was regularly sexually assaulted. The vulvoplasty had been sold to me as a way to nullify my genitals which I had developed a negative relationship with after being treated as a fetish object for so long. It was safer than the vaginoplasty and required last aftercare. The staff at OHSU told me not to worry about the letters. They had a referral specialist who could write the letter to secure insurance coverage. Mostly they were concerned that I was not scheduled for the full vulvoplasty, instead I insisted on one surgery at a time the way my friends in the trans community had done it.

Over the phone I began to confess the details of my situation along with my genuine feelings toward the surgeries awaiting me at the hospital. They made me uneasy. Nine months into co-habitation with

my boyfriend I had discovered it was a meth house, quarantined together we went on a run of meth which lasted over a month. Quietly I doubted my capacity to consent at the same time as I was fixed on the surgery, I briefly mentioned drugs but said no more. Words spilled out of my mouth as I questioned my motivations and expressed anxiety about my future potential as a mate, but she did not care to understand me. The voice on the other end of the phone cooed to me that I would make a very desirable partner and that for many trans people these surgeries created just the sense of lasting satisfaction and *completion* which I was after. Meanwhile the OHSU psychologist suggested I go to rehab about my drug problem but prioritized the surgery regardless. I was operated on eight days later. As the painkillers wore off I lapsed into alcoholism, trying to get away from the aforementioned “boyfriend” while finding that my friend in the trans community was just as eager to grope and gawk at me as the bandages came off. It was during this time that OHSU conducted their post-op questionnaire. *Was I satisfied with the results?* Still loopy from the drugs, giddy with the delusion of my strange identity, I answered *yes*.

A few weeks later I remembered my desire to parent biological children and realized the loss. I reeled in regret. I pushed away the bottle and the bong. It was the virus which caught me. When my boyfriend’s roommates heard me coughing I was kicked out of the house. He was kind enough to drive me back to my parents’ house in Salem. I was immobilized for a week and had many visions during quarantine and the fires of 2020. I began to journal obsessively until the grief came, wailing loud enough for my mom to hear on the street outside the house. Besides the regret was the hormonal imbalance as my testosterone levels plummeted from their natural state, over 600, to 6. There was real danger of suicide which I had never before understood. I reached out to OHSU in my confusion, the same therapists who had seemed so compassionate in their delivery of the

evil surgery now ignored me. I badly needed a therapist and went back to the clinic where I started my journey. She must not have been accustomed to such intense grieving, or else was afraid of being accused of conversion therapy because she hesitated before suggesting that my intact phallus was to blame for my despair, referring to the same idea of completion which had been used to mislead me. I was forced to look elsewhere for therapy, but again and again I was turned away by therapists who seemed afraid to take on a patient whose case has been made *politically unpopular*. Finally I sought a therapist who specialized in men's sexual health and delinquency with two decades of experience, one who had worked with many sexual delinquents. I presented myself with the original problem of pornography and asked him to keep his hands off my gender identity. I knew I would have to unpack my trans identity on my own.

My desistance and detransition was self-guided. I changed my legal name and sex marker first. Then in January of 2021 I began testosterone replacement therapy. It would be a few months before I had the breast implants removed. OHP refused to cover them, again and again and again. The wording exists to refuse any detransition services. I had to pay for explant surgery with Biden's COVID stimulus check, thankfully no legislation yet exists to *criminalize* such procedures. I could not afford complete anesthesia and they operated on me while I was awake with only a little numbing cream. Then I realized how the surgeon had fibbed to me. My muscles had been ripped off the bone in haste to fabricate female anatomy on a male chest, there is no reattaching them. I am permanently disfigured and weakened by his attempt at feminizing my chest, so too by the destruction of my facial hair follicles I have newfound anxiety in my natal sex. Neither will insurance cover prosthetic testicles, which costs up to \$10,000.

The response from OHP and OHSU's claim departments was a bad one. OHSU made promises to follow up with me which they never fulfilled and ghosted me until I came back with a lawyer. Then they came out with a million-dollar attorney ready to crush me, without caring if I killed myself from despair. Each of the trans clinics was the same. At one point they taunted and threatened me with counter lawsuits. Lacking the funds to withstand the corporate lawyers I was forced to forfeit, but not before helping other detransitioners on their pursuit of justice. Are ranks continue to grow as the industry chews up and spits out our youthful bodies.

Disenchanted with both political parties, I have focused on pursuing apprenticeship in the trades and work full time. Yet the medical damages and the ideological aggression continue to burden me. I no longer qualify for the too-generous benefits of OHP and am paying hormone therapy with my employer's plan. Now it is a medical necessity as it was not previously. There is no prioritization for me now as there once was under the auspice of transgender care. The generic brands are back-ordered, presumably by the statistically impossible trend of teenage girls identifying as gay men. Meanwhile young men who really need that medicine due to organ loss from cancer, accidents, war, or mistaken identity are forced to pay the exorbitant prices of name-brand pharmaceuticals. The same is undoubtedly true for biological women in need of estrogen therapy.

Any fair-minded person should be outraged by the abuse of pharmaceuticals and life-long medicalization of our youth. I was outraged when I first heard of this bill. Sexual reassignment surgery is the only surgical intervention performed for a psychological condition since the *lobotomy*. It is, in my experienced opinion, fraudulent medicine. If you, dear reader, were previously beguiled by trans ideology as I once was, I hope that reading my story will further

disenchant you. Please let this move you courageously from vanity to compassion, act in the interest of the people. If you are really that callous to personal testimony then drop your partisan bias and research the issue as it is being discussed internationally. Vote *NO* on House Bill 2002 and remember my story when you vote again in the future.

Thank you,

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