

Submitter: Diannah Dolby

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2002

Rep. Rob Nosse, you stated at the end of public testimony on Monday Mar 20, that all you wanted from this HB 2002 is to close the gaps in healthcare coverage for medically necessary procedures and that you were amazed at the amount of vehement opposition (paraphrased). Might I state that had the proposal for closing gaps in medical coverage not been cohered to such inflammatory concepts, you may have heard less opposition.

To nonchalantly refer to the transgender phenomenon of the last decade as normal and not acknowledge it as abnormal is blatant denial of facts. Whether a person is simply experiencing dysphoria, peer pressure, or a true sense of not belonging in their body/sex - the issue is NOT Normal. These numbers are estimated to be less than 1% of the US population identify as transgender, and apparently, they all live in Oregon or move here due to our accepting social climate.

Furthermore:

SECTION 9. ORS 109.650 is amended to read: 109.650.

(1) Except as provided in ORS 192.567, a physician, physician assistant, nurse practitioner, pharmacist or naturopathic physician providing reproductive health care information and services to a minor as described in ORS 109.640 (1) may not disclose to the minor's parent or legal guardian information regarding the information and services provided to the minor unless the minor has authorized the disclosure in writing.

(2) A hospital or a physician, physician assistant, nurse practitioner, naturopathic physician, dentist or optometrist providing care, diagnosis or treatment to a minor as described in ORS 109.640 (2) may advise [a] the minor's parent or legal guardian [of a minor] of the care, diagnosis or treatment [of] provided to the minor or the need for any treatment of the minor, without the consent of the minor, and is not liable for advising the parent or legal guardian without the consent of the minor.

Imagine for a moment, a parent coming home to find their child unconscious and bleeding (#1) of section 9 makes sure the parent has no way to learn of the reproductive health care procedure/medicine that has put their child in this unconscious state and therefore unable to give written authorization. This goes too far! This is taking the care of a scared confused child out of the hands of her parents who know her best and are solely responsible for the health and well-being of their child.

And these are just a couple of highlights, I will not belabor the many specifics we heard Monday, Mar 20. Please as you are trying to be compassionate and provide care for the less than 1% of transgender populus, remember the 40% of the population that have minor children that could also be affected by this bill. Please

vote no on this bill, not in opposition of your compassion for the transgenders and the reproductive voice of women. But vote no on this bill in favor of supporting the family unit that is loving, caring parent(s) and child(ren). Don't vote a wedge into that delicate relationship – daily life and pubescent hormones already cause enough strain – we don't need this legislation to magnify discord.

Thank you for your time and consideration,
Diannah Dolby