



To: Chair Nosse, Vice-Chairs Goodwin and Nelson and Behavioral Health and Health Care Committee Members
From: Annette Marcus, MSW, Suicide Prevention Policy Manager
Re: Support for HB2002
Date: March 20, 2023

I am writing on behalf of the Oregon Alliance to Prevent Suicide (Alliance) to express our support for HB2002. Gender-affirming care is life-saving care. This legislation would close Oregon's gender-affirming care coverage gaps by codifying in statute a requirement that state-regulated health plans must cover all medically necessary GAC services. The bill additionally ensures statewide access to evidence-based reproductive care. Ensuring that individuals have access to the evidence-based healthcare is a key element to our comprehensive approach to suicide prevention. This testimony, however, will focus on the gender affirming care aspect of the bill because the connection between gender affirming care and the prevention of suicide is so clear.



The Oregon Alliance to Prevent Suicide is a statewide advisory group to the Oregon Health Authority. We are subject matter experts, state leaders, young adults, and suicide attempt and loss survivors from around the state. We work closely with local suicide prevention coalitions across the state. The role of the Alliance is to advise OHA on all matters related to youth and young adult suicide.

Along with statistics supporting this, I want to briefly share that we have transgender members of the Alliance and a number of parents of transgender on non-binary youth. Two parents told us they believe their child would have died by suicide if they had not been able to be supported and affirmed in their gender identity, and shared the many ways they and their families lives have improved since receiving this care. HB2002 would ensure access to this kind of care for all Oregonians.

Transgender adults in the United States are 18 times more likely than the general population to have attempted suicide in the past year, *but* according to UCLA's Williams Institute, this

risk decreases significantly for those who have lived full-time according to their gender identity for more than a year. A 2022 study out of the University of Washington found a 60% decrease in depression and 73% decrease in suicidality amongst patients who had received gender affirming care. "Our findings have important policy implications, suggesting that the wave of legislation reducing access to gender affirming care may have significant negative outcome for non-binary and transgender youth."¹ With HB2002 Oregon can continue to demonstrate support for transgender and non-binary people, thus promoting positive health outcomes and reducing suicidality, in contrast to other states that are limiting access to gender-affirming care.

¹ Tordoff, Diana, University of Washington, Department of Epidemiology, 2022 <https://newsroom.uw.edu/resource/study-tracks-gender-affirming-care-transgender-teens>

Oregon's suicide rate is 30% higher than the national average, according to CDC statistics, and as of 2021 suicide is the second leading cause of death for people ages 10 to 34, and 3rd leading cause of death for adults ages 35 – 44. We are also losing many older adults to suicide in communities across Oregon.

Suicide is preventable. We know with coordinated, cross-sector efforts we can help reduce obstacles, provide lifesaving education and connect people with needed resources so that they have the right help at the right time. In fact, with coordinated efforts, for the first time in more than a decade Oregon has seen a decrease in youth suicide for the past three years.

Passage of HB2002 would provide another foundational block in our suicide prevention efforts. We urge your support for this important legislation.