



CONNECTICUT CATHOLIC PUBLIC AFFAIRS CONFERENCE
134 FARMINGTON AVENUE
HARTFORD, CONNECTICUT 06105 - 3784

TESTIMONY

SB 214 "An Act Consolidating Statutory Provisions Relating to Reproductive Health Care Services and Gender-Affirming Health Care Services"

Judiciary Committee, March 4, 2024

Christopher Healy

Executive Director

The Connecticut Catholic Public Affairs Conference, in order to protect children, and guarantee their legal rights and those of their parents, urges the Judiciary Committee to modify the language in SB214 to exempt providers of "gender-affirming care services," when performed on minors.

This proposed change to the current statute would not deny gender-affirming care services to minors. It would remove the barriers to any potential legal actions taken on behalf of a minor, or a person who was a minor when the services were provided, who feels they have been harmed by such services. This committee has continually recognized the differences between the mental capacity of an adult and minor. That difference should be recognized in SB 214.

The language in SB 214 relating to gender-affirming care has never been debated in any committee or chamber of the General Assembly. This language was added in the last hectic hours of the 2022 legislative session as part of a budget implementer bill (House Bill 5506). It amended a bill passed earlier in the 2022 session to protect providers of "reproductive health care services" (House Bill 5414). That topic was fully debated in the legislature. Until the topic of gender-affirming care for minors goes through the legislative process and has an open debate, minors should be exempted from the provisions referenced in SB 214. We urge the Committee to err on the side of caution.

Sadly, the Connecticut legislature shows no interest in discussing gender identity issues when it comes to minors. While more and more states review and pass laws relating to the treatment of minors with gender dysphoria, Connecticut blindly follows the proclamations of transgender advocates, which can be misleading. Many of our political leaders prefer to paint this as a partisan issue. It is a serious mental health issue and the facts concerning how we treat it should be seriously examined. The states that have examined the issue have chosen to address some serious health concerns by restricting treatment. Even progressive countries that lead the charge on transgender issues, such as the United Kingdom, Finland, and Denmark, have recently severely restricted treatments for minors.

Why have these states and progressive countries begun to restrict what were commonly accepted practices? Because they analyzed the facts and determined that many of the common beliefs were

severely short-sighted. Those states and countries have refocused their efforts on early mental health evaluations, prohibiting hormone and puberty blockers, and discouraging immediate social affirmation. They also recognized that the belief that lack of immediate affirmation would lead to higher suicide rates among minors was a claim that lacked any supporting evidence.

The lack of any serious review by the Legislature has led to policies that are harmful to minors and ignore parental rights when it comes to their children's welfare. The state Department of Education (DOE) guidelines to public schools require immediate affirmation of the students proclaimed gender identity, without any medical or parental input. It encourages that parents not be informed by the schools unless the student agrees. The guidelines also advise the schools to recognize the student's newly proclaimed gender identity, even if the parents object. This policy was developed without any public input.

Scaring parents with the highly questionable claim that their child may commit suicide if not affirmed, medical providers are free to prescribe puberty blockers and hormone treatments, even though they were never approved by the Food and Drug Administration for these situations, and may be very harmful. Teenage girls are given double mastectomies in some of our state hospitals. Do they really understand the life-altering procedure they are undergoing?

Changing the language in SB 214 to exclude minors is the first step in developing a sound policy on the gender identity issue when it comes to minors. The next step is to allow an open and honest debate.