

People hold up signs at an event held by Equality Texas at the Capitol last week. Several speakers opposed a slate of bills at the Texas Legislature that target transgender Texans' access to health care and school sports. Credit: Sergio Flores for The Texas Tribune

For LGBTQ mental health support, call the Trevor Project's 24/7 toll-free support line at 866-488-7386. You can also call the National Suicide Prevention Lifeline at 800-273-8255 or text 741741 from anywhere in the country to text with a trained crisis counselor. Read our mental health resource guide for more information.

Before undergoing gender confirmation surgery at age 17, Indigo Giles had to get approval from a doctor, a therapist and the hospital where the surgery would be performed to ensure there were no options left besides surgery. To even get to that point, Indigo's father Neil said it took time-consuming research and several reflections as a family before going forward with the process.

The surgery's impact was immediate, said Indigo, who identifies as nonbinary. They were able to wear the clothes they wanted to, and their confidence in school and with friends significantly increased. Most significantly, the surgery helped alleviate their severe depression caused in part by gender dysphoria — discomfort related to feeling a disconnect between one's personal gender identity and the gender assigned to them at birth.

But under a slate of legislation moving in the Texas Senate and House, Indigo wouldn't have been able to make such a decision until their 18th birthday. In fact, no transgender child in Texas would be able to pursue puberty blockers, hormone treatment or surgery for the purpose of gender confirmation.

Transgender Texas children, their parents, medical groups and businesses have vocally opposed many of the bills lawmakers are pursuing. Equality Texas CEO Ricardo Martinez said Texas has filed more anti-LGBTQ bills this session than any other state legislature.

"It's insulting," Indigo said. "These lawmakers think that we don't know what we want with our own bodies and we're not able to say what we want and mean it."

House Bill 1399 would prohibit health care providers and physicians from performing gender confirmation surgery or prescribing, administering or supplying puberty blockers or hormone treatment to anyone under the age of 18. The House Public Health Committee advanced the bill Friday.

Senate Bill 1311 by Sen. Bob Hall, R-Edgewood, would revoke the medical license of health care providers and physicians who perform such procedures or prescribe such drugs or hormones to people younger than 18. The Senate State Affairs Committee advanced that bill Monday.

The Senate last week passed Senate Bill 29, which would prevent public school students from participating in sports teams unless their sex assigned at birth aligns with the team's designation. While that bill would only affect students in K-12 schools, two similar bills in the House would include colleges and universities in that mandate.

SB 29 has been referred to the House Public Education Committee, which is slated to meet Tuesday and hear testimony on identical legislation that was introduced in the lower chamber.

It's unclear, though, whether any of this year's measures targeting transgender Texans have a chance at getting through both chambers. Last session, Dade Phelan, the Beaumont Republican who is now House Speaker, demonstrated a lack of appetite for bills restricting rights for LGBTQ Texans.

"It's completely unacceptable," he said at the time. "This is 2019."

Last week, Rep. Bryan Slaton, R-Royse City, tried to amend a bill on the House floor that would fund

prescription drugs for uninsured Texans so that it would exclude hormone and puberty suppression treatments. That amendment failed after it was noted that existing bills were addressing such treatments.

Medical associations unite in opposition to bills

In public testimony this year, transgender Texans and their parents have testified in near unanimous opposition to the bills. Several parents described their experience testifying as "terrifying," worrying their testimony would be used against them should the bills' penalties become law. Under Senate Bill 1646, currently pending in the Senate State Affairs Committee, they could be labeled child abusers for allowing their children to receive gender affirming treatment.

That bill comes after Jeff Younger attracted the attention of Gov. Greg Abbott and other top Texas Republicans in 2019 after a dispute between him and his ex-wife turned into a court battle over whether he could oppose his child's transition. Younger, among others testifying in support of these bills, emphasized young children's lack of brain development and claimed parents and social media pressure children into identifying as transgender.

But experts say social media and social pressure have nothing to do with it.

"There's literally zero evidence or research to suggest that that's true," said **Megan Mooney**, past president of the Texas Psychological Association.

According to Mooney, children as young as 2 or 3 can develop ideas about gender identity. By 6 or 7, she said, their sense of gender identity is relatively stable.

(Audio unavailable. Click here to listen on texastribune.org.)

Lisa Stanton, a Houston mother, said her daughter Maya began expressing her gender identity as soon as she could talk. Lisa said Maya would speak about a fairy who would use magic to turn her into a girl.

Maya had no access to social media, Lisa said, and neither of them even had the language to discuss gender dysphoria or being transgender. What's more, Maya has a twin brother who Lisa said has been raised exactly the same way as his sister, but has never expressed gender dysphoria.

At 10 years old, Maya hasn't received any medical treatment yet. Lisa said in the future, she may have to use puberty blockers — a medical treatment legislators want to ban, but experts say is completely safe.

Marjan Linnell, a general pediatrician, testified on behalf of six different state and national medical associations and said in committee that "organized medicine stands united to strongly oppose both SB 1646 and SB 1311."

In an interview with The Texas Tribune, Linnell explained that puberty suppression treatment has been used for decades to prevent children from going through puberty too soon. Once those children reach an appropriate age, their treatment stops and natural puberty occurs. Linnell said the same is true for transgender children, for whom puberty can often exacerbate poor mental health.

"The point is to have a reversible treatment that can give them some time," she said. "That not only helps to gain some time to make sure we're making an appropriate and best practice medical decision for these kids and families, but we also know it can be incredibly important for preserving the mental health of our kids that are going through gender affirming care."

The mental health toll of gender dysphoria and social marginalization

Hall, the Edgewood Republican, argued during a committee hearing that gender dysphoria would pass after puberty for many children. He claimed that children feeling like they're in the wrong body is akin to them being "tomboys" and "sensitive kids" who could later turn into the "best looking cheerleaders" and "toughest football players" by high school.

But both Mooney and Linnell said puberty can increase rates of anxiety, depression and suicidal ideation for

transgender children, and delaying treatment until 18 could worsen the existing disproportionate rate of transgender children who consider suicide.

Indigo described the process of testifying alone as "exhausting and upsetting" after they and other transgender children were faced with legislators and protesters who opposed giving them access to gender confirmation care. The week after Texas considered a bill restricting public bathroom access for transgender Texans in 2017, the Trevor Project reported that the amount of transgender children calling or messaging their national suicide hotline dramatically increased.

Legislators voiced particular concern over whether these treatments may cause irreversible infertility for young children. Experts that lawmakers specifically invited to testify cited disputed statistics and stirred fears that procedures such as mastectomies could be performed on prepubescent children — a claim Linnell called "disheartening," given that breast tissue does not develop until after puberty.

While hormone treatments may cause infertility in some cases, Linnell said it varies and is always discussed with patients prior to undergoing treatment. Surgery, she said, would rarely or never be used until after puberty, and requires several consultations with doctors and psychologists before being approved. According to Mooney, surgery is only recommended when a patient is experiencing so much psychological distress that the only way to resolve it is surgery.

While each bill would only delay treatment until age 18, Mooney said medical treatment is often necessary for transgender children just to make it to their 18th birthday.

In committee testimony, 17-year-old Charlie Apple said the combination of gender dysphoria and social marginalization made him feel uncomfortable with both his body and his own existence. Receiving gender confirmation surgery and hormone treatment, he said, has helped him start to change that.

"I've made friends, I've played in sports. I've had the kind of stupid fun you're supposed to have as a kid, but most importantly, I survived," Apple said. "Without these treatments, I would have most likely been with the majority of trans children not standing here before you, but under a gravestone."

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