

Rachel A. Sugarman
Augusta, Maine
May 7th, 2025

Re: LD 380 An Act to Amend Certain Laws Regarding Gender-affirming Health Care Services

Senator Carney, Representative Kuhn, and Honorable Members of the Judiciary Committee,

My name is Rachel A. Sugarman. I live in Augusta, Maine. Thank you for the opportunity to testify. I am here today in opposition to the bills before the committee. I will share my experiences related to LD 380, An Act to Amend Certain Laws Regarding Gender-affirming Health Care Services.

I approach you as a mother, an engaged community member, a teacher, a childcare director, and a foster parent, advocating for the protection of transgender and non-binary rights, not only in Maine but also on a national level.

My passion and love for the LGBTQ+ community began in high school when I graduated in 1999. Throughout my life, I have had the extraordinary privilege of witnessing my peers' authentic selves and those of many of my students and foster children. For some reason, I have been the person to whom people feel comfortable revealing their identities in a world where they often do not feel safe. I am honored and blessed by these experiences.

Transgender and non-binary individuals in our society as a whole have suffered a longer duration of fear-induced discrimination than any other minority group. Their plight is only visible to us due to the tireless fights of many of our Stonewall siblings, who risked their lives in a hateful world to break free of the shackles our society had wrapped around them. The world our children are growing up in today is vastly different. Children grow up with mentors who provide examples that their identities are valid, that they deserve equal rights, and that they deserve medical care like everyone else.

“It is not a choice to be transgender, the choice is simply how and when you come out, and who you come out to.” - Zoey

As a close community member and friend, I've had the profound privilege of walking alongside multiple individuals during their gender-affirming journeys—witnessing transformations that revealed the extraordinary depths of human determination.

Let me be crystal clear: these paths were rarely smooth. Many of my friends endured journeys marked by genuine complexity and, at times, overwhelming pain. Some faced the additional burden of multiple surgeries to address unexpected medical complications—procedures that extended their physical recovery and tested their resolve in ways most of us will never comprehend.

Yet through this lens of intimate friendship, I observed something remarkable that contradicts common misconceptions about gender affirmation: despite physical suffering that would cause many to question their choices, not one of these individuals has expressed regret about their decision to pursue authenticity.

This absence of regret speaks volumes. It demonstrates that their gender-affirming choices weren't made lightly or impulsively, but emerged from profound self-knowledge that withstood even the harshest physical challenges. Their willingness to endure pain rather than continue living inauthentically reveals how essential these transitions were to their fundamental well-being.

When we discuss policies affecting gender-affirming care, we must confront this reality. These aren't casual lifestyle choices but deeply necessary steps toward wholeness—so necessary that even significant physical hardship doesn't diminish their value to those who need them.

My friends' experiences offer powerful testimony: the pain of medical complications, while serious, pales in comparison to the profound suffering of being forced to live as someone you fundamentally are not. Their unwavering conviction, even through physical hardship, demonstrates the life-saving importance of gender-affirming care and the remarkable resilience of those brave enough to claim their authentic selves.

As a foster mother, I witnessed the remarkable transformation of a 16-year-old trans boy in my care. His journey toward authenticity wasn't just medically sound—it was life-changing in ways I never anticipated.

From day one, we prioritized professional guidance. He continued his established counseling with psychiatric professionals, while monthly consultations with a gender-affirming care specialist provided crucial psychological support. Most importantly, our endocrinologist became a cornerstone of his care, taking exceptional time to thoroughly explain every aspect of transition, answering all questions with patience and clarity.

What made this approach truly powerful was putting my foster son in complete control of his journey. With my supportive guidance, he made fully informed decisions about his body and identity—perhaps the first time he'd been granted such agency.

The initial steps were thoughtfully non-invasive. He chose to begin with birth control to eliminate the deeply dysphoric experience of menstruation, along with wearing a binder. These seemingly simple changes triggered a profound transformation beyond physical comfort.

The results were immediate and undeniable. His confidence blossomed visibly—more smiles emerged daily, his self-assurance grew stronger, and his school community rallied around him with acceptance. This wasn't just about medical intervention; it was about watching a young person step into their authentic self with dignity and support.

This experience demonstrates what's possible when we combine professional medical guidance with respect for a young person's autonomy—creating space for them to thrive as their true selves.

The Act to Amend Certain Laws Regarding Gender-affirming Health Care Services presents a risk to the mortality of our youth. Again, equity means all youth, not just those who identify with their gender assigned at birth. In a study titled *Mental Health Outcomes in Transgender and Nonbinary Youths Receiving Gender-Affirming Care, 2022*, Drs. Kym Ahrens and David Inwards-Breland at Seattle Children's Gender Clinic found that having access to hormones and puberty blockers for youth ages 13 to 20 was associated with a 60% lower odds of moderate to severe depression and a 73% lower odds of self-harm or suicidal thoughts compared to youth who did not receive these medications over 12 months. Medical organizations, including the American Academy of Pediatrics, the American Medical Association, and the American Psychological Association, all support gender-affirming care as medically necessary.

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I sincerely hope that you consider these stories and especially these key points:

- Anti-transgender laws *increase* suicide attempts by 72%. Over 40% of transgender adults report having attempted suicide in their lifetime, compared to 4.6% of the general population.
- Gender-affirming care *lowers* the odds of moderate to severe depression by 60% and the odds of self-harm or suicidal thoughts by 73%. Medical organizations, including the American Academy of Pediatrics, the American Medical Association, and the American Psychological Association, all support gender-affirming care as medically necessary.
- Using the correct pronouns and names for transgender youth creates safe spaces and fights against discrimination. Surveys indicate that 67% of transgender youth report improved mental health when teachers and staff use their correct names and pronouns.
- School department Transgender Policies protect the safety of LGBTQ+ youth and promote inclusion. Nearly 80% of transgender students report feeling unsafe at school, directly impacting their academic performance and attendance.
- It is not a choice to be transgender.

Sincerely,

Rachel A. Sugarman