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LD 1432

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

I appreciate the opportunity to write to the Committee. My name is Ivy Moser, and I'm a resident of Portland, Maine. I writing in opposition of the bills before the committee on May 8, 2025: I am opposing LD 233, LD 868, LD 1002, LD 1134, LD 1704, LD 1337, LD 1432, and LD 380.

I am writing on behalf of my friends who are transgender, and the children who are transgender at the school where I work in Portland, Maine.

I am terrified on their behalf. The onslaught of bills being lobbied against transgender people in this country is appalling and shameful, and now here in Maine, too? Do we not understand science? Do we not have compassion? Must we continually target others who are different from us just because they are different?

My friends who are transgender are struggling. One of my friends says he feels like he has a target on his back. Another friend has been dealing with microaggressions from neighbors. A third has had family turn against them. They no longer feel safe, even here in Maine. They are being targeted by campaigns of misinformation, fear-mongering, and active persecution. I fear especially for the transgender youth that I know--suicide rates among this group are the highest among any demographic in this country, and according to a 2024 research study by the Trevor Project, "anti-transgender laws significantly increased incidents of past-year suicide attempts among transgender and nonbinary youth by as much as 72%".

I am also just plain confused: do the people proposing these bills not have access to the scientific research about sex and gender identity? Or are they just choosing not to read it, perhaps? Their lack of caring about facts is harming people and kids. There is a dearth of information from reputable sources they can use to become educate. For example, the website of the American Medical Association. I would like to quote from a legal brief linked on their website here:

BRIEF OF AMICI CURIAE\* submitted to the US Court of Appeals for the Ninth Circuit, submitted by the AMERICAN ACADEMY OF PEDIATRICS (67,000 primary care pediatricians, pediatric medical subspecialists, and surgical specialists), AMERICAN MEDICAL ASSOCIATION (over 270,000 members, the largest professional association of physicians, residents, and medical students in the United States), AMERICAN PSYCHIATRIC ASSOCIATION (38,500 members), AND 10 ADDITIONAL HEALTH CARE ORGANIZATIONS IN SUPPORT OF APPELLEES, including the American Medical Women's Association, The National Council for Behavioral Health, and The American Nurses Association (which represents the interests of the nation's 4.2 million registered nurses)

I am quoting from the brief's "SUMMARY OF ARGUMENT" (and highly recommend reading the entire brief, found on the AMA's website):

"Many transgender individuals...experience a condition called gender dysphoria, which is characterized by clinically significant distress resulting from the incongruence between one's gender identity and the sex assigned to the individual at birth. The international consensus among health care professionals regarding treatment for gender dysphoria is to assist the patient to live in accordance with the patient's gender identity, thus alleviating the distress or impairment. Treatment may include any or all of the following: counseling, social transition (through, e.g., use of a new name and pronouns, new clothes and grooming in order to allow the person to conform to social expectations and norms associated with his or her identity), hormone therapy and/or gender confirming surgeries. The treatment for gender dysphoria is highly effective in reducing or eliminating the incongruence and associated distress between a person's gender identity and assigned sex at birth. It is also widely available."

The brief further adds, on the issue of participating in women's sports: "Barring transgender girls and women from participating in school sports consistent with their

gender identity frustrates the treatment of gender dysphoria by preventing transgender girls and women from living openly in accordance with their true gender.

Experiencing discrimination in a fundamental aspect of childhood, adolescence, and young adulthood—participation in school sports—makes it very difficult, if not impossible, for transgender female students to live in full accordance with their gender identity. The fear of facing such discrimination alone may prompt transgender girl and women students to hide their gender identity, directly thwarting accepted treatment protocols. Lack of treatment, in turn, increases the rate of negative mental-health outcomes, substance abuse, and suicide. Beyond exacerbating gender dysphoria and interfering with treatment, discrimination reinforces the stigma associated with being transgender. Such stigma, in turn, leads to psychological distress and attendant mental-health consequences.”

Why is it important to let transgender kids have treatment for their gender dysphoria, whether or not a parent will allow it? Because not all families will support kids who are transgender. And this is dangerous. Quoting from the brief a final time:

“Transgender children often experience intensified gender dysphoria and worsening mental health as the hormonal and anatomical changes associated with puberty cause the body to develop in ways that diverge from the child’s gender identity. For instance, a deepening voice for male-assigned individuals or the growth of breasts and the beginning of a menstrual cycle for female-assigned individuals can cause severe distress. For some, puberty manifests as “a sudden trauma that forces to consciousness the horror that they are living in a body that is totally at odds with the gender they know themselves to be but which has been kept securely underground.” If untreated, gender dysphoria can cause debilitating distress, depression, impairment of function, self-mutilation to alter one’s genitals or secondary sex characteristics, other self-injurious behaviors, and suicide. Like other minority groups, transgender individuals also are frequently subjected to prejudice and discrimination in multiple areas of their lives (e.g., school, employment, housing, healthcare), which exacerbates these negative health outcomes and makes access to appropriate medical care all the more important.

In closing, I would like to add that not only am I worried about my transgender friends and the transgender kids at my school, not only am I appalled at the sheer ignorance that this list of bills is resting on, but I am worried about myself.

I am a cisgender female. But my gender expression is often considered not very feminine. No purses or heels or makeup, for example. And when I was a child, I was often mistaken for a boy.

If we are targeting people who are transgender, we are also targeting people like me, who do not adhere to some magical ideal of binary sexes, of perfectly feminine and perfectly masculine according to some group of people that are making decisions based on...I don’t know what. Feelings? Certainly not science. Certainly not reality, where transgender people have always existed, and every type of sex, gender identity, gender expression, and chromosomal variation HAVE ALWAYS EXISTED.

Will I have to start being medically examined to use the bathroom for women if someone questions my sex? Will I have to prove to someone that I am, in fact, female? What if my passport photo looks too masculine for the designation of “female”? Will I be harassed at the airport? We have all heard the news stories of people being persecuted for being transgender AND also for being thought of as transgender. I want to be protected, too. I want to be able to exist without having to conform to some sort of made up contrast of “perfect” sex and gender identity. Laws like the ones you are proposing only make it easier for people to persecute people like me, too.

Thank you for the opportunity to share my perspective with the Committee. I urge you to vote “Ought not to Pass” on these bills. Thank you!

\*Nos. 20-35813, 20-35815 UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT LINDSAY HECOX; JANE DOE, WITH HER NEXT FRIENDS JEAN DOE AND JOHN DOE, Plaintiffs-Appellees, v. BRADLEY LITTLE, ET AL., Defendants-Appellants, MADISON KENYON AND MARY MARSHALL,

Intervenors-Appellants , On Appeal from the United States District Court for the  
District of Idaho Case No. 1:20-cv-00184-DCN District Judge David C. Nye