

Maine Chapter

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American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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May 5, 2023

Senator Carney, Representative Moonen, and distinguished members of the Committee on Judiciary, my name is Joe Anderson. I am a resident of Portland, a pediatrician in Lewiston, and I serve on the board of the Maine Chapter of the American Academy of Pediatrics. I am writing today to express our support for *LD 535 An Act to Increase Access to Necessary Medical Care for Certain Minors*. **We ask that you vote Ought to Pass on this bill.**

As we have discussed with other proposed legislation recently, confidentiality and independent consent for potentially sensitive health care issues are important components of adolescent health care.¹ This is especially important for LGBTQ adolescents, as fewer than 40% of LGBTQ young people live in LGBTQ-affirming homes.² Research increasingly suggests that familial acceptance or rejection ultimately has little influence on the gender identity of youth, however, it may profoundly affect young person's ability to openly discuss or disclose concerns about their identity, and ultimately their mental health. A study of 433 adolescents in Ontario who identified as trans revealed suicide attempt rates of 4% among those with strongly supportive parents, and as high as 60% among those whose parents were not supportive.³

Pediatricians strive to create a safe environment for parents and families to better understand and listen to the needs of their children while receiving reassurance and education. We try to help adolescents understand their parents' concerns as well. The process of acceptance and understanding can be challenging and complex for families, and unfortunately parental acceptance isn't always attained by adolescence, if at all. For youth experiencing gender dysphoria, this can make the teenage years particularly troublesome, as they enter puberty and develop secondary sex characteristics of their sex assigned at birth.

Gender dysphoria is a well-recognized medical diagnosis with an established and effective treatment. One aspect of treatment is social affirmation, the other is gender-affirming hormone therapy. Gender affirming hormone therapy allows adolescents to develop secondary sex characteristics of the opposite biological sex. This therapy can be life saving in the case of young adults struggling with gender dysphoria.

Late adolescence is a pivotal time in the lives of all teens. For those suffering from gender dysphoria, it can be either liberating or suffocating. For those who have access to gender affirming care, they can look forward to finishing high school and moving forward to their next stage of life, be it higher education or the workforce, presenting themselves to the world in a manner that they feel matches who they are inside. For those who have been denied access to gender affirming care, taking that next step can be incredibly distressing. The thought of entering a new environment and meeting a new peer group while still physically presenting in a way that is incongruent with their internalized gender can be paralyzing.

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Allowing adolescents to make decisions about their own gender affirming care recognizes their autonomy and right to self-determination. It respects their personal experiences, feelings, and understanding of their own gender identity. It empowers young people to take ownership of their bodies and healthcare decisions, promoting a sense of agency and well-being.

In Maine, laws and medical guidelines already permit adolescents to consent to certain medical treatments without parental consent. These laws were developed based on extensive research, ethical considerations, and expert opinion, aiming to balance the best interests of the adolescent with their safety and well-being. Treatment for gender dysphoria is time-sensitive, and delaying access to gender affirming care can have negative consequences. Allowing adolescents to independently consent to gender affirming care reduces potential barriers to accessing timely interventions, ensuring that they receive the care they need when they need it, which can lead to better long-term outcomes.

We believe this amended bill is thoughtful, the level of counseling and education required of the adolescent is incredibly thorough. Ultimately, this bill is designed to prioritize what is in the best interests of the adolescent. It ensures they are fully informed on the consequences, benefits, and alternatives to gender affirming hormone therapy before allowing them to consent, and ensures they are able to access this medically necessary care. **We urge you to support the health of this underserved population and vote Ought to Pass on LD 535.**

Respectfully,

A handwritten signature in black ink that reads "Joe Anderson DO".

Joe Anderson, DO, FAAP
Co-Chair, Advocacy Committee
Maine Chapter of the American Academy of Pediatrics

¹ Sofya Maslyanskaya, Elizabeth M. Alderman, Confidentiality and Consent in the Care of the Adolescent Patient. *Pediatr Rev* October 2019, 40 (10) 508–516

² The Trevor Project. 2023 U.S. National Survey on the Mental Health of LGBTQ Young People. https://www.thetrevorproject.org/survey-2023/assets/static/05_TREVOR05_2023survey.pdf

³ Jason Rafferty, COMMITTEE ON PSYCHOSOCIAL ASPECTS OF CHILD AND FAMILY HEALTH, COMMITTEE ON ADOLESCENCE, SECTION ON LESBIAN, GAY, BISEXUAL, AND TRANSGENDER HEALTH AND WELLNESS, Michael Yogman, Rebecca Baum, Theresia B. Gambon, Arthur Lavin, Geri Mattson, Lawrence Sagin Wissow, Cora Breuner, Elizabeth M. Alderman, Laura K. Grubb, Makia E. Powers, Krishna Upadhyay, Stephenie B. Wallace, Lynn Hunt, Anne Teresa Gearhart, Christopher Harris, Kathryn Melland Lowe, Chadwick Taylor Rodgers, Ilana Michelle Sherer, Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents. *Pediatrics* October 2018, 142 (4) e20182162. 10.1542/peds.2018-2162