

Rikki Hallax
Freeport
LD 1432

Testimony LD 1432:

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Freeport, ME
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Senator Carney, Representative Kuhn, and Honorable Members of the Judiciary Committee: Thank you for the opportunity to address the Committee. My name is Rikki Hallax, I am a resident of Freeport, and I am writing in opposition of LD 1432: “An Act to Remove Consideration of Gender Identity from the Maine Human Rights Act”.

The removal of “gender identity” from the Maine Human Rights Act (MHRA) would be incredibly detrimental to the LGBTQIA+ communities in Maine who are working professionals, students, educators, veterans, etc. By removing the consideration of gender identity, it would allow workplaces, universities, businesses, etc. to discriminate against any individual that doesn’t identify as their gender assigned at birth.

Prior to 2020, there was already an alarming shortage of healthcare workers across the nation. As we all surely remember, 2020 was the year that COVID-19 hit the U.S. and the situation became much more dire. According to an article in the Nursing Times in early 2020, the US Bureau of Labor Statistics projected that more than 275,000 additional nurses were needed from 2020 to 2030. Then the pandemic hit and it hit hard. Taken from the article “Extraordinary Impacts on the Healthcare Workforce: COVID-19 and Aging” by researchers at the Delaware Academy of Medicine, research found that “while the outbreak of COVID-19 [had] certainly impacted the burnout rates both in the U.S. and abroad, excess healthcare worker deaths are also causing shortages across the globe. A 2021 Working Paper by The WHO claims that the 6,633 reported healthcare worker deaths due to the pandemic falls embarrassingly short of reality, which they estimate could be anywhere between 83,000 and 115,000” (McNeill, 2022). Imagine if another pandemic emerged, a COVID 2.0, and qualified nurses and other healthcare professionals that were LGBTQ+ were denied positions based on their gender identity? According to a survey by the American Association of Medical Colleges, 14% of medical students identified as LGBTQ+ in 2021. True percentages are difficult to determine as many individuals choose not to disclose their gender identity on surveys, employment paperwork, etc. for their own safety. I was working as a pharmacy manager throughout the first 2 years of the pandemic and administered over 70 covid tests per day and 20-40 covid vaccinations per day. I was one of 2 individuals in the building that could administer these services in my workplace and I am transgender.

Removing “gender identity” from all sections in the MHRA has far more impact than just education and securing employment of course. Landlords could evict tenants or refuse to sell or rent a home, real estate agents could deny a showing of a property, banking institutions could deny financial assistance for the acquisition, construction, rehabilitation, repair or maintenance of any housing accommodation, business owners could deny access to their establishments (listed in the MHRA as “public accommodations”) all on the basis that they don’t agree with or do not like a person’s gender identity. To clarify, being denied public accommodation includes establishments such as restaurants, hotels, retail stores, transportation, entertainment venues, and more. Access to food, housing, and transportation are basic human needs. The only goal I see here is to erase trans identities by blocking them from resources and segregating them from society.

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