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Testimony before the Judiciary Committee



My name is Leslie Wolfgang and I am the Director of Public Policy for the Family Institute of Connecticut. I am testifying against SB214. I am providing some background on the bill, proposing an edit and also addressing gender-affirming health care for minors more generally.

In the matter of SB214, the underlying law was likely passed in response to bans in other states of certain gender-affirming care for minors. The law creates hurdles for litigants before the State may use its resources to issue summons, subpoenas and more. The State's ability to assist depends on whether there is "gender affirming" care and a "similar claim would exist under the laws of this state". It is bound to raise "suspect class" issues and deserves closer scrutiny by people familiar with U.S. Constitution jurisprudence.

At the root of every lawsuit is a hurting person. In the matter of these lawsuits from out-of-state related to gender-affirming health care services . . . there is likely a person who received gender-affirming services as a child and is now suing a medical provider.

The law creates another level of review and mechanism for a counter-suit against people who are likely already experiencing mental, physical and financial anguish in pursuit of their claims. Who makes a determination about whether there would be a similar claim under CT law? How will it be proven? Minors in particular, have no control over the laws of their state-- whether something is banned or permitted. They have no control over the state where they received treatment. This law creates uncertainties and hurdles for them as they seek to have their legal claims fairly heard and investigated. I recommend this bill be amended to exclude claims from people who received their treatment as minors.

States that have banned gender-affirming care for minors have a point. "Gender affirming" care is not new, but it is not settled science either. In my written testimony I am providing a link to a February 2, 2024, New York Times article titled "[As Kids, They Thought They Were Trans. They No Longer Do](#)" and also '[Gender-Affirming Care Is Dangerous. I Know Because I Helped Pioneer It.](#)'. In that article, the chief psychiatrist for one of the first international gender clinics, talks about the pressure by activists on doctors to ignore their training and provide only "gender-affirming" care. She also re-iterates data that up to 80% of children resolve their gender dysphoria if allowed to complete

puberty without medical intervention. She quotes a 2020 study that states “In light of available evidence, gender reassignment of minors is an experimental practice.” and warns that “young people, whose brains were still maturing, lacked the ability to properly assess the consequences of making decisions they would have to live with for the rest of their lives.”

You will hear from other people testifying today about the dangers inherent in gender-affirming care and their broad and heartfelt concerns. In my written testimony I encourage you to read a poem entitled “A Cry From the Inside: The Boy with the Pack on His Back” by a young woman who regrets her transition.

Background and analysis:

SB214 would make a technical change to existing law. It creates a separate definition of “gender-affirming health care services” from the definition of “reproductive health care services”. House bill 5414 referencing “reproductive health care services” originally passed in 2022 as Public Act 22-19 and was quickly amended by a provision in the budget, Public Act 22-118, sec. 197, to include “and all medical care relating to treatment of gender dysphoria”. According to the [LCO document](#) analyzing the original bill, the law “limits the assistance officers of Connecticut courts, public agencies, and certain health care providers may provide out-of-state judicial actions related to . . . services that are legal in this state” and also “establishes a cause of action that allows persons who were sued” to recover certain legal expenses.

Suggested language change:

“Gender-affirming health care services’ means all medical care relating to the treatment of gender dysphoria in patients over age 18, as set forth in the most recent edition of the . . .”

A CRY FROM THE INSIDE: THE BOY WITH THE PACK ON HIS BACK

Turn me back; turn me back.

Says the boy with the pack on his back.

There has been a mishap.

I feel I am in a trap.

I don't like this baseball cap.

Turn me back; turn me back

Says the boy with a pack on his back.

I once had a beautiful curl.

I once was daddy's girl.

Now I am lost in another world.

Turn me back; turn me back.

Says the boy with the pack on his back.

The men's room smells of poop and pee.

This is not the life for me.

Someone set me free.

Turn me back; turn me back.

Says the boy with the pack on his back.

I am a what, not a who. My friends who were, many are few.

I am so lonesome and blue.

Turn me back; turn me back.

Says the boy with the pack on his back.

I feel terrible inside. - Anonymous