



207 East Buffalo Street, Ste 325
Milwaukee, WI 53202
(414) 272-4032
aclu-wi.org

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Chair Moses, Vice-Chair Rozar, and Honorable Members of the Assembly Committee on Health, Aging, and Long-Term Care:

My name is Dr. Sheri Swokowski, and I am a Board Member of the American Civil Liberties Union of Wisconsin. The ACLU of Wisconsin is a non-partisan, non-profit organization working to protect civil liberties—including freedom of speech and the right to equal protection under the law.

I'm writing in opposition to Assembly Bill 465, which would ban access to life-saving gender-affirming care for young people, a topic that I am intimately familiar with. My Ph.D. dissertation research involved identifying the barriers to care transgender service members encounter, and for full transparency, I am a retired Army infantry Colonel with 35 years of service and the highest ranking, out, transgender veteran in the United States.

It's important to recognize that transgender people make up a tiny fraction of the population, and many know they are trans at an early age—I often compare it to someone knowing they're left-handed. Each person's journey is different; gender-affirming care for some may mean providing social and emotional support, using a young person's correct name and pronouns, and supporting them presenting in a way that is consistent with their gender identity. Some transgender youth need medical care to be able to live and thrive as their authentic selves.

Ultimately, gender-affirming care saves lives. Puberty blockers and hormone therapy have been used to treat gender dysphoria for decades, and are firmly grounded in science and the standards of care. Every major expert medical association recognizes that gender-affirming care for transgender youth may be medically appropriate and necessary to improve the physical and mental health of transgender people, including the World Professional Association for Transgender Health, the American Academy of Pediatrics, the American Medical Association, the American College of Obstetricians and Gynecologists, the Endocrine Society, the American Urological Association, the American Society for Reproductive Medicine, the American College of Physicians, the American Association of Clinical Endocrinology, the American Psychiatric Association, and the American Psychological Association.

It's also important to note that trans people seldom “change their minds.” For youth, between 96 and 98% go on to continue transitioning as adults. Studies have shown that access to puberty blockers during adolescence is associated with lower odds of transgender adults considering self-harm; this medication is also reversible – if the medication is stopped, puberty will progress.

I've testified before committees in this legislature on several occasions, including testifying in opposition to a bathroom bill sponsored by Rep. Jesse Kremer during the 2015-16 legislative session. I recall comments from committee members that made clear they did not understand even the basics about gender dysphoria and the lived experiences of transgender people. Unfortunately, introduction of bills like AB-465 proves that not much has changed in eight years.

It is wholly inappropriate for legislators, motivated by political ideology, to intervene in the health care of a child. Transgender young people, their parents, and their doctors are in the best position to decide the appropriate course of medical treatment for each minor patient.

I urge committee members to vote against this harmful legislation.