



Vermont Chapter

INCORPORATED IN VERMONT

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®



April 4, 2023

Vermont Legislature House Health Care Committee

Testimony in support of S 37, an act relating to legally protected health care activity and regulation of health care providers.

Good morning Chairperson Houghton, and members of the House Health Care Committee. I am grateful to all of you for the opportunity to be here today to show my support for S 37 an act relating to legally protected health care activity and regulation of health care providers.

My name is Dr. Erica Gibson and I am a board certified pediatrician and adolescent medicine specialist. I currently serve as the Division Head of Adolescent Medicine at the University of Vermont Children's Hospital; where we run several adolescent medicine clinics including the UVM Children's Hospital Transgender Youth Program.

Today I am speaking not only as a physician who provides direct care to youth and their families but also as an official representative of the University of Vermont Health Network, a member of the Executive Board of the Vermont Chapter of the American Academy of Pediatrics, and as a member of the Vermont Medical Society.

In April 2021 as attacks on youth gender care began to escalate in both public forums and state legislatures the VT Chapter of the American Academy of Pediatrics, UVM Children's Hospital, the Vermont Medical Society and multiple other VT health organizations released a comprehensive memo that addressed the importance of the provision of thoughtful, comprehensive, developmentally appropriate, family centered gender affirming healthcare as recommended by evidence based healthcare guidelines. That memo reiterates the fact that every major medical organization in the United State recognizes the medical necessity of gender affirming care to improve the physical and mental health of gender diverse people. We have submitted a copy of that memo again along with this testimony and we stand by the information contained within.

Unfortunately as I speak to you here today almost 2 years later, numerous other state legislatures have passed or are attempting to pass discriminatory laws that aim to prevent young people and families from accessing appropriate gender care and also seek to penalize gender health care providers for providing this care. To quote a pediatric colleague of mine who testified against one of these bills in Ohio "these bills are an extreme rejection of safe and effective medical treatment for a vulnerable group of youth" and they "enact barriers that would cause families irreversible harm, and ultimately cost lives". In addition these discriminatory laws in other states place my pediatric colleagues in the ethical dilemma of refusing evidence based gender affirming health care or face loss of medical license or criminal charges for providing this care.

We are thankful that the state of Vermont has remained steadfast in support of gender diverse youth and their families; and the care that we provide to them. I would like to acknowledge the important joint resolution that was passed by the Vermont legislature in June 2022 to "support transgender youth and their parents who seek essential medical care for the treatment of gender dysphoria." At this time in a mounting

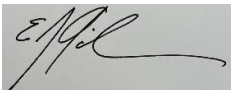
crisis of child and adolescent mental health care it is essential that care for gender diverse youth and their families is protected; and that the providers providing this evidence based care are protected also. This bill will expand the ability to safely care for young people and families that seek evidence based legally protected healthcare in our state.

I have been asked to briefly summarize the definition of gender affirming care here in my testimony today. In addition to this statement I respectfully submit a document entitled “Supporting and Caring For Transgender Children”(1) which was jointly written by members of the American Academy of Pediatrics, the Human Rights Campaign Foundation and the American College of Osteopathic Pediatricians. This document eloquently details the approach to gender affirmative care and also addresses the harm that may come from non-gender affirming care.

In a gender affirmative care model pediatric providers offer developmentally appropriate care that is oriented toward understanding and appreciating the youth’s gender experience. As stated by the American Academy of Pediatrics this means “a strong non-judgmental partnership with youth and their families that can facilitate exploration of complicated emotions and gender diverse expressions while allowing questions and concerns to be raised in a supportive environment.” (2) Gender affirmative care recommendations as with all medical interventions offered by health care providers are guided by the scientific evidence and ethical obligation to act in the best interest of patients. As stated by the American Medical Association “a physician must tailor recommendations about specific interventions and timing of those interventions to each patient’s unique circumstance” and “must be sensitive to the child’s clinical situation, short, and long-term development.” (3)

Pediatric gender care providers follow clinic practice guidelines from the Endocrine Society (4), an international organization of physicians and scientists who created these guidelines in collaboration with 6 other professional medical organizations. In the case of gender affirming care no medical interventions are mandated at any time and no medications are offered to patients and families until puberty has started. Once puberty has begun families might take the first step of initiating fully reversible medications, and then during later stages of care might take the step of initiating partially reversible medications. It is important to understand that decisions to begin any medical interventions include a thorough discussion and education between a care team, a young person and their parents or guardians. Parent or guardian consent is needed for a young person under 18 years of age to begin any medical interventions and this legislation does nothing to change that requirement.

In closing we thank you for your commitment to the health and wellbeing of anyone seeking healthcare in Vermont and on behalf of our patients and families, and the multiple professional medical organizations that I represent here today, we respectfully ask the Vermont House to pass this bill.



Erica Gibson M.D. FAAP

Associate Professor of Pediatrics, UVM Larner College of Medicine

Division Chief of Adolescent Medicine, UVM Children’s Hospital

Member: Vermont Chapter – American Academy of Pediatrics (AAP), Vermont Medical Society (VMS)

- (1) [SupportingCaringforTransChildren.pdf](#)
- (2) [American Academy of Pediatrics Policy Statement: Ensuring Comprehensive Care and Support for Transgender and Gender Diverse Children and Adolescents.](#)
- (3) [National Governors Association \(ama-assn.org\)](#)
- (4) [Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society* Clinical Practice Guideline | The Journal of Clinical Endocrinology & Metabolism | Oxford Academic \(oup.com\)](#)