January 23, 2018

Honorable Frank Kotowski, Chairman House Health, Human Services and Elderly Affairs Committee Legislative Office Building – Room 205 36 North State Street Concord, NH 03301

Dear Chairman Kotowski and Members of the Committee,

Thank you for the opportunity to testify today. My name is Kenneth Norton and I serve as Executive Director of NAMI NH, the National Alliance on Mental Illness. On behalf of NAMI NH, I am here to speak in opposition to HB 1560.

Specifically, I am here to talk about the high risk for suicide for trans people. By way of background, I lead the development of NAMI NH's Connect Suicide Prevention Program which was designated as a national best practice in suicide prevention, intervention and postvention. The Connect Program has trained in over 40 states and 35 tribal nations. In my role, I have done briefings related to mental health and suicide prevention at the Pentagon, provided training for the Department of Defense and presented in four countries. I have also served on numerous national workgroups and committees, including the National Suicide Prevention Lifeline.

As the chart below indicates, suicide is the second leading cause of death for ages 10-34 in NH (as well as nationally). It is the third leading cause of death ages 35-44, and the fourth leading cause of death for

ages 45-54. Suicide deaths are the tip of the iceberg in contrast to suicide attempts. The human and economic impact of suicide deaths and attempts is significant. A small, but important, subgroup of these statistics is people who are dealing with gender identity issues. There is an emerging body of research showing that trans people are eight times more likely to attempt suicide than their peers in the general population. Young people who are gender nonconforming are at higher risk. A 2017 review of recent research on transgender suicide showed several unique risk factors contribute to the high rate of suicide in this population: including lack of

NH Top Ten Leading Causes of Death 2011-2015

	Age Groups										
Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	<u>55-64</u>	65+	All Age
1	Congenital Anomalies 44	Unintentional Injury 10	Malignant Nacplasms	Malignant Neoplasms 11	Unintentional Injury 252	Unintentional Injury 458	Unintentional Injury 381	Malignant Neoplasms 993	Malignant Neoplasms 2,572	Heart Disease 10,179	Matignant Neoplasms 13,455
2	Short Gestation 41	Congenital Anomalias 	Unintentional Injury —	Suicide 	Suicide 109	Suicide 149	Malignant Neoplasms 207	Heart Disease 570	Heart Disease 1,195	Malignant Neoplasms 9,561	Heart Disease 12,126
3	Maternal Pregnancy Comp. 29	Heart Disease	Homicide 	Unintentional Injury 	Malignant Neoplasms 20	Malignant Neoplasms 76	Suicide 166	Unintentional Injury 453	Unintentional Injury 355	Chronic Low. Respiratory Disease 2,936	Chronic Los Respiratory Disease 3,377
4	Placenta Cord Membranes 17	Homicide 	Carebro- vásoular	Senign Neoplasms	Heart Disease 14	Heart Disease 28	Heart Disease 119	Suicide 281	Chronic Low Respiratory Disease 329	Carebro- vascular 2,082	Unintention Injury 3,276
5	9(D)\$ 11	Influenza & Pneumonia 	Congenital Anomalias	Congenital Anomalies ~	Homicide 14	Congenital Anomalies 14	Liver Disease 37	Liver Disesse 185	Liver Disease 250	Alzheimer's Disease 1,924	Cerebro- vascular 2,319
б	Circulatory System Disease 10	Malignant Neoplasms	Heart Disease 	Heart Disease	Cerebro- vascular	Homicide 12	Diabetes Mellitus 23	Diabetes Mellitus 100	Disbetes Mellitus 248	Unintentional Injury 1,349	Alzheimer Disease 1,966
7	Respiratory Distress	Benign Neoplasms —	Suicide 	Homicide 	Chronic Low. Respiratory Disease	Diabetes Mellitus	Homicide 17	Chronic Low Respiratory Disease 85	Suicide 203	Disbetes Mellitus 1,083	Diabetes Mellitus 1,473
S	Necrotizing Enterpolitis 				Benign Neopleans	Chronic Low. Respiratory Disease 	Cerebro- vascular 13	Cerebro- vascular 64	Carebro- vascular 144	influenza & Pneumonia 1,022	Influenza & Pneumon 1,119
9	Neonatal Hemorrhage 				Congenital Anomalies	Liver Disease	Chronic Low. Respiratory Disease 13	Viral Hapatitis 27	Septicemia 73	Nephritis 782	Suicide 1,060
10	Unintentional Injury				Diabetes Mellitus	Complicated Pregnancy	Two Tied	Influenza & Pneumonia 24	Viral Hepatitis 69	Parkinson's Disease 582	Nephritis 889

Terms for Causes of Death

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Find Help, Find Hope

family and social supports, gender-based discrimination, transgender-based abuse and violence, gender dysphoria and body-related shame, difficulty while undergoing gender reassignment, and being a member of another or multiple minority groups.

It is also important to note that while there are widely promoted articles and reports that a longitudinal study in Sweden showed that suicide rates are higher after a person transitions, these are distortions of the study results. The author of that article Reassignment Surgery: Cohort Study in Sweden by Dr. Cecilia Dhejne has explicitly and repeatedly stated that the study does not show that medical transition results in suicide or suicidal ideation, nor does it demonstrate increased mortality and morbidity.

NAMI NH is committed to addressing suicide as a public health issue and reducing the incidence of suicide death in NH. We support the decision by the NH Department of Health and Human Services to offer Medicaid recipients the option of hormone therapy or sex reassignment surgery based on the recommendations and consultation with their health care providers. It is our opinion that denying these medical treatments will result in increased risk for suicide.

We respectfully request that you vote this bill inexpedient to legislate. I am happy to answer any questions which you have

Respectfully,

Executive Director