

March 3, 2025

Honorable Chairman Wayne MacDonald
House Health, Human Services, and Elderly Affairs Committee
Legislative Office Building Room 201
33 N State St., Concord, NH 03301

RE: NAMI NH Opposition to HB 377

Chairman MacDonald and Committee Members:

Thank you for the opportunity to testify today. My name is Sam Hawkins, and I am here today representing NAMI New Hampshire, the National Alliance on Mental Illness. NAMI NH is a non-profit, grassroots organization whose mission is to improve the lives of all people impacted by mental illness and suicide through support, education and advocacy. On behalf of NAMI NH, I am here today to speak in opposition of HB 377, relative to health care professionals administering hormone treatments and puberty blockers.

NAMI NH believes that no one should be subject to practices or policies that can cause or worsen mental health symptoms, and, as such, opposes legislation that seeks to prohibit, limit, or criminalize access to clinically appropriate care for transgender individuals.

Too often, transgender and nonbinary individuals face stigma, discrimination, and challenges accessing necessary care. These challenges all contribute to higher rates of negative mental health outcomes, including suicidality. In 2024, 46% of transgender and nonbinary youth seriously considered attempting suicide.¹ Over 7 in 10 transgender and nonbinary young people reported anxiety, and 3 in 5 reported symptoms of depression.¹ It is important to be clear that there is nothing inherent about one's status as a transgender or nonbinary person that contributes to poor mental health outcomes – rather, it is due to experiences with stigma and discrimination and being unable to receive necessary care and supports.

Access to care can be crucial to the health and well-being of transgender people of all ages, improving any current mental health symptoms and reducing the likelihood of developing them in the future. Studies have shown that access to health care for transgender individuals can improve mental health outcomes, including hormone therapy² and when initiated in adolescence.³ Further, *all* major medical associations, including the American Medical Association, the American Academy of Pediatrics, the American Psychological Association and the American Psychiatric Association, support gender-affirming care.⁴

Find Help, Find Hope.

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It is critical that public policies and laws focus on practices that improve mental health outcomes for all transgender and nonbinary individuals, rather than impeding the medical decision-making of families and restricting access to care. Transgender and nonbinary individuals and their families, like all people, deserve access to the care they need to get well, stay well, and thrive. For these reasons, NAMI NH urges the committee to vote Inexpedient to Legislate for HB 377.

Sincerely,

A handwritten signature in cursive script that reads "Samuel C. Hawkins". The signature is written in black ink and is positioned above the printed name.

Samuel C. Hawkins

¹2024 U.S. National Survey on the Mental Health of LGBTQ+ Young People, The Trevor Project

²The Effect of Gender-Affirming Hormones on Gender Dysphoria, Quality of Life, and Psychological Functioning in Transgender Individuals: A Systematic Review, <https://pubmed.ncbi.nlm.nih.gov/36895312/>

³Access to gender-affirming hormones during adolescence and mental health outcomes among transgender adults, <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0261039>

⁴Medical Organization Statements, A4TE's Trans Health Project