

Submitter: Christina Aucaylle

On Behalf Of:

Committee: House Committee On Behavioral Health and Health Care

Measure: HB2458

I am writing as a psychotherapist with nearly 18 years in private practice seeing adults, children, families and couples over the years. I am in full support of therapy for people struggling with gender dysphoria and providing them with the care and services they need and deserve. I am NOT in support of handpicking which issues and behaviors are addressed and which are ignored and pushed to the side. For example if a biological female teen is gender dysphoric while also presenting with symptoms of OCD and cutting and a trauma history the best practice is to address the client's whole symptom presentation and diagnose accordingly and then develop a treatment plan based on all the client is reporting. The best practice is to look at all the symptoms and diagnoses and make a treatment plan based on the whole of their symptoms picture. It has never been the practice to address only one angle or piece of their reported issues and ignore the rest. To call this conversion therapy is insane and would

literally be changing the way psychotherapy has been done for decades and decades. People with gender dysphoria deserve therapy with the best practices available that everyone else receives, to change the way therapy is done just for this population would be a disservice to them and establish a prejudice against them, suggesting they are not worthy or capable of engaging in and benefitting from traditional therapy and able to collaborate with a therapist to facilitate their own healing. If they are truly a transgender then working on the co-existing issues will only support and strengthen that individual to be as successful and whole as possible when they transition. Thank you for your time.