

February 10, 2026

Dear Chairwoman DeSimone and Members of the House Children and Family Law Committee,

My name is Frances Lim-Liberty and I am submitting this testimony in my capacity as a private citizen and resident of this state. I am a pediatric endocrinologist, and am testifying today as a private citizen, drawing on my clinical experience caring for children and adolescents in our state. I am writing to oppose HB 1376, relative to a parent's ability to raise their child in a manner consistent with the child's biological sex.

HB 1376 would fundamentally change New Hampshire's definitions of child abuse and neglect by legally shielding parents who raise children strictly according to their sex assigned at birth from scrutiny — even when that approach may be causing harm. The bill would prohibit courts, child protective services, and child-placing agencies from considering a parent's refusal to affirm a child's gender identity in custody decisions, abuse investigations, or best-interest determinations.

In clinical practice, this matters because **parental rejection is one of the most powerful drivers of mental health distress** among gender-diverse youth. When the law removes the ability of child-serving systems to even consider this factor, it risks protecting behaviors that can undermine a child's emotional and psychological safety.

In my practice, I care for many young people who are deeply hurting because a parent actively rejects their gender identity. This is, by far, one of the most common and severe contributors to depression, self-harm, and suicidality among my adolescent and young adult patients. For younger children, parental rejection can show up differently, but no less seriously. I see children who struggle in school, act out behaviorally, or experience significant generalized anxiety. In families where parents are separated, some children refuse to return to the home of a rejecting parent altogether. These are not abstract concerns — they are daily clinical realities that affect a child's development, safety, and long-term well-being.

Research consistently shows that family support is protective for transgender and gender-diverse youth:

- A 2024 study published in JAMA Pediatrics found that transgender youth raised in supportive family environments had significantly lower rates of suicide attempts and running away from home compared with those in neutral or adverse family settings. The study highlights family support — including parental support — as a key protective factor for mental health and safety.
Source: JAMA Pediatrics (2024)
- Parental support is linked to better mental health in transgender adolescents: Research on transgender youth found that higher levels of parental support were significantly associated with greater life satisfaction, fewer depressive symptoms, and lower perceived burden of being transgender — meaning supportive parents help protect against depression and improve well-being.
Source: Journal of Adolescent Health (2013)

This evidence aligns with the guidance of major medical and mental health organizations, including the American Academy of Pediatrics, the American Medical Association, and the American Psychiatric Association, all of which recognize that affirmation and supportive care can be critical to the well-being of gender-diverse youth and should be guided by clinicians, families, and patients — not restricted by statute.

By declaring that refusal to affirm a child’s gender identity cannot be considered abuse or neglect, HB 1376 risks creating a legal loophole that excuses emotional harm. If courts and child welfare systems are barred from considering parental rejection as a factor, they may lose essential tools to protect vulnerable children who are experiencing significant psychological distress.

We can all agree that children deserve love, safety, and care. Rather than limiting the ability of professionals to respond to harm, New Hampshire should strengthen access to mental health services, support families who are struggling, and allow child-serving systems to consider the full context of a child’s well-being.

For these reasons, I respectfully urge the committee to recommend Inexpedient to Legislate on NH HB 1376. Please enter this written testimony into the public record. Thank you for your time and consideration of my testimony.

Sincerely,

Frances Lim-Liberty, MD

-Campbell T, Mann S, Rodgers YVM, Tran NM. [Mental health of transgender youth following gender identity milestones by level of family support](#). JAMA Pediatr. 2024;7(7):e2422115. doi:10.1001/jamapediatrics.2024.2035

-Simons L, Schrage SM, Clark LF, Belzer M, Olson J. Parental support and mental health among transgender adolescents. J Adolesc Health. 2013 Dec;53(6):791-3. doi: 10.1016/j.jadohealth.2013.07.019. Epub 2013 Sep 4. PMID: 24012067; PMCID: PMC3838484.