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Assembly Judiciary Committee

Re: Support for House Bill 1356 – Statute of Limitations

Dear Members,

I am the President of Our Duty-USA, a nonpartisan group of parents and detransitioners. We have members in New Hampshire. I was a Democrat for 30 years and changed parties because the Democratic party by and large refuses to understand the harms of transgenderism. My family was personally affected by this stain in American history.

My daughter used to believe that she was a boy and could change sex as a young teenager. Every medical provider told me that I should irreversibly harm her body, create a fictional boy, and support her belief that she was born wrong – her body was a mistake, or she would commit suicide. She was 13. Despite immense pressure to capitulate, I did not, and my daughter avoided the tragic pathway of extreme body modification. She is an adult and happy in her female body.

When children and parents are coerced into one pathway for treating distress that tends to dissipate over time if not affirmed (upwards to 98% of all children with sex-identity distress return to comfort if not socially transitioned), the number of people with regret is expected. Unfortunately, because of the nature of sex-rejecting interventions – the continuous advancing procedures – social transitions, puberty blockers, menses cessation, binder wearing, hormones, breast surgeries, ovaries/testes removal – the person is often counseled to take additional steps once the "euphoria" of the early steps wears off. The application of short medical malpractice statute of limitations is being used as a defense. Regret often sets in 5-10 years post-intervention, and for children who underwent sex-rejecting procedures when they reach adulthood as they do not understand nor can they can they, the gravity of the harm to them. It is recognized in law that children are prone to impetuosity, immaturity and an inability to understand long-term consequences. It is recognized in the medical community that the maturation of the brain does not occur until ages 23-25.

An American Academy of Pediatrics research paper states that "[a]dolescents appear to focus more on the immediate benefits (a socioemotional brain system function [that develops during puberty]) than the future costs of risky behavior (a cognitive-control brain system function [that matures in the mid to late 20s]), a finding that is exacerbated in the presence of peers."¹

Even the World Professional Association for Transgender Health ("WPATH"), the foundation of all sex-rejecting medicine recognized the inability of minors to understand what they are consenting to. Dr. Dan Metzger of WPATH stated, "it's always a good theory that you talk about fertility preservation with a 14-year-old, but I know I'm talking to a blank wall," adding that children "don't yet understand what they are sacrificing."² WPATH's clinicians were also recorded admitting that they are "just winging it" when it comes to treating gender confused kids.³

Our Duty works closely with detransitioners across the country. These are people who were promised relief for their distress over their bodies if they only altered themselves to reflect another sex or even a non-naturally occurring body, but not surprisingly the promised nirvana wasn't reached.

One such woman is member Layla Jane. Despite the doctors knowing about her severe mental health issues, they coerced her parents to consent to puberty blockers and testosterone at age 12 and removed her healthy breasts just after her 13th birthday. Her mental anguish only increased - she lost a sexual organ, lives with enlarged vocal cords that irreversibly deepened her voice and that prevents her from screaming or talking for long periods, she has male-like baldness and abnormal hair growth. Her fertility is unknown.

What is known is that her lawsuit against the medical providers who irreversibly harmed her body ended with walking away scot-free. They will now continue to carve up healthy bodies because a short statute of limitations ended her lawsuit. Sadly, sometimes it takes lawsuits to stop people from profiteering from other people's desperation or misery.

Layla's story is hardly unique. Those harmed by the sex-rejecting medical complex struggle to hold their doctors accountable - those who convinced them that they could change sex and/or that their mental health would improve if they became perpetual medical patients.

Finally, HB1356 does not alter the evidence and elements needed to prove a medical malpractice case, it just extends the time in which a person can seek justice.

Thank you in advance for your vote to permit detransitioners and other who have been harmed by sex-rejecting interventions to have their day in court.

¹ Douglas S. Diekma, *Adolescent Brain Development and Medical Decision-making*, 146 *Pediatrics*, S18, S21 (2020).

² Mia Hughes, *The WPATH Files, Pseudoscientific Surgical and Hormonal Experiments on Children, Adolescents, and Vulnerable Adults*, *Env't Progress* 12 (Mar. 4, 2024), <https://environmentalprogress.org/big-news/wpath-files>.

³ Leor Sapir, 'We're All Just Winging It': What the Gender Doctors say in Private, *THE FREE PRESS*, Dec. 3, 2025, <https://www.thefp.com/p/were-all-just-winging-it-what-the>

Respectfully,

Erin Friday

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