

29 February 2024

Representative Brenda Landwehr, Committee Chair  
House Committee on Health and Human Services  
Committee Members

Re: House and Human Services Committee  
Kansas House of Representatives  
**HOUSE BILL 2791 - IN SUPPORT**

Chair and Committee Members:

My name is Denise Roberts. I am a resident of Johnson County, wife of a surgeon, and mother of three children, all of whom attended Shawnee Mission school district until 2021. I gave my first public testimony here in 2021 in support of a parents bill of rights. Since that time, I have continued to investigate the public school system with special attention to the way in which a Critical Social Justice approach to pedagogy is influencing children. Before social media, before Tumblr, before anime.. the school is where this begins.

Middle school children in our district are provided access to Trevor Spaces on their required district-issued Chromebook. When children log into the district's VPN, any parental security measures on the home network are bypassed. Kids are informed that their browsing history will be erased (*why?*) and provided instruction for "quick exit." Project Trevor provides a forum for children to discuss with local peers as well as adults issues such as gender, anime, sexuality, and kink (<https://www.trevorspace.org/>). This is being done in the name of suicide prevention.

I have exhausted my efforts in Topeka regarding the problems in the public *and* private schools. Should anyone on the panel like to discuss or see evidence of what I have found in three years of investigating one school district and its employees and practices, I remain available and will come to Topeka on request.

Culturally competent pedagogy, welcoming spaces, inclusivity, belonging - all of these concepts serve to introduce the idea of Critical Gender Theory to children as young as Kindergarten. Demonstration of affirmation and even celebration is required. These children have no foundation formed to question these ideas, and teachers, social workers, and administrators are trusted authority figures; unfortunately, now even friends. Social emotional learning lessons encourage children that in order to not be perceived as oppressors of a category of marginalized individuals, they must become allies and demonstrate such. Correct "perceived" pronouns must be used to avoid being labeled a perpetrator of sexual harassment.

The idea that children are born in the wrong body, indicating that their soul has a gender, and that the body should be modified at a young age to accommodate this belief system is pervasive in the public school system. Should **SB 233** come up, I would also be fully in support of that bill.

In the name of representation, welcoming schools, inclusion, and belonging, these ideas are being celebrated in the classroom and promoted at all levels. Parents are usually kept in the dark to this fact until it is too late. For our family, we were able to rescue our child from these harmful influences before it was too late. My fear is that language is being modified and structures are being put in place to undermine parental rights and deem non-affirming homes “unsafe” for supposed transgender children.

You are the last line of defense for parents and children in Kansas. Unfortunately, because of the efforts of the good people of Ohio, our state has quickly become a hub for this type of “medicine” in the Midwest / Plains.

Attached you will find my previous testimony. Additionally, I will attach recent studies that you may also find beneficial.

Please know that physicians cannot speak to this for fear of losing their positions. This entire movement is being driven by a handful of activists, many of whom have appeared in this building and provided testimony or rallied around the perimeter. The evidence becomes more clear every day. Children are being harmed. Surrounding states have banned these practices. What is wrong in Kansas? Kansas City has become the hub for transgender medicine in the midwest. There is so much profit to be made in the business of castrating children with puberty blocking “therapies.”

In a recent Substack article, author Jeffrey Carter examines the concepts of Customer Acquisition Cost (CAC) vs. Long-Term Value (LTV) of customer. Carter makes the following assertion.

“Transgenderism... is not a one-and-done business model. There is an entire stream of payments that come with a one-time customer acquisition. There is psychological diagnosis, then counseling. There is a regiment of drug treatments to stop pubescent growth, or to change hormones post puberty. Finally, there is the radical surgery necessary to turn one sex into another sex followed by more hormone therapy and quite possibly more psychological counseling.”

- Average cost of top surgery: \$8000.
- Average cost of bottom surgery: \$25,000.
- Hormone drugs for maintenance: \$40-400 per month.
- Average cost of hormones per year: \$2880.
- Cost of puberty blocking implants: \$4500-18,000 per year.

Transition therapy has become an industry with a profit potential in the tens of billions of dollars. Every child that begins hormone suppression represents long-term value.

Please vote yes on HB2791 and give these children a chance to fully develop, both in body and mind, by stopping this practice in Kansas.

These children are being placed in a diseased state and will be dependent on pharmaceuticals for life. Will anyone question the motivation?

The case will be made that this “gender-affirming care” is saving lives. Suicide statistics will be quoted, and you will be accused of having blood on your hands. Please know that good research shows that this is not the case. Please see attached studies.

What we have always known is that no child is born in the wrong body. Every child born in Kansas is a gift and should be treasured, not sterilized, not mutilated, not emotionally manipulated for profit.

Thank you for taking the time to read the testimony of a grateful parent. We can and should do better. I urge you to vote YES on HB 2791.

Joyfully,

Denise D. Roberts  
Attachments (prior testimony, articles of interest)

## PERTINENT ARTICLES / STUDIES

All-cause and suicide mortalities among adolescents and young adults who contacted specialist gender identity services in Finland in 21996-2019: A register study.  
(<https://mentalhealth.bmj.com/content/27/1/e300940.full>)

Why The Emphasis on Transgender? Follow the Money.  
(<https://jeffreycarter.substack.com/p/why-the-emphasis-on-transgender>)

How Much Does it Cost to Medically Transition?  
(<https://msmagazine.com/2023/08/04/trans-gender-affirming-care-surgery-cost/>)

Hormone Blocker Shocker: Drug Costs Eight Times More When Used For Kids.  
(<https://kffhealthnews.org/news/hormone-blocker-shocker-drug-costs-8-times-more-when-used-for-kids/>).

Many Labs 2: Investigating Variation in Replicability Across Sample and Setting:  
(<https://osf.io/8cd4r/>)

The Myth of “Reliable Research” in Pediatric Gender Medicine: A critical evaluation of the Dutch Studies - and research that has followed.  
(<https://pubmed.ncbi.nlm.nih.gov/36593754/>)

Reconsidering Informed Consent for Trans-Identified Children, Adolescents, and Young Adults.  
(<https://pubmed.ncbi.nlm.nih.gov/25201798/>)

The Distortions in Jack Turban’s Psychology Today Article on “Gender Affirming Care.”  
Turban’s public statements on pediatric gender medicine have been less than honest.  
(<https://www.realityslaststand.com/p/the-distortions-in-jack-turbans-psychology>)

“Science Vs” Cited Seven Studies To Argue There’s No Controversy About Giving Puberty Blockers And Hormones To Trans Youth. Let’s Read Them: The show is strikingly selective in its skepticism.  
(<https://jessesingal.substack.com/p/science-vs-cited-seven-studies-to>)

At what point does incompetence become fraud?"

(<https://genspect.org/at-what-point-does-incompetence-become-fraud/>)

Opinion: When it comes to trans youth, we're in danger of losing our way.

([https://www.sfexaminer.com/archives/opinion-when-it-comes-to-trans-youth-we-re-in-danger-of-losing-our-way/article\\_833f674f-3d88-5edf-900c-7142ef691f1a.html](https://www.sfexaminer.com/archives/opinion-when-it-comes-to-trans-youth-we-re-in-danger-of-losing-our-way/article_833f674f-3d88-5edf-900c-7142ef691f1a.html))

Early Social Gender Transition in Children is Associated with High Rates of Transgender Identity in Early Adolescence: A new study lends credibility to concerns that early social gender transition can lead to persistence of pediatric gender dysphoria.

([https://segm.org/early-social-gender-transition-persistence#:~:text=May 6, 2022-,Early Social Gender Transition in Children is Associated with High,Transgender Identity in Early Adolescence&text=A recent study published in social gender transition \(SGT\).](https://segm.org/early-social-gender-transition-persistence#:~:text=May 6, 2022-,Early Social Gender Transition in Children is Associated with High,Transgender Identity in Early Adolescence&text=A recent study published in social gender transition (SGT).))

Correction to Branstrom and Pachankis.

(<https://ajp.psychiatryonline.org/doi/10.1176/appi.ajp.2020.1778correction>)

Correction: Transgender Surgery Provides No Mental Health Benefit.

(<https://www.thepublicdiscourse.com/2020/09/71296/>)

Rapid Onset Gender Dysphoria as a Distinct Clinical Phenomenon.

([https://www.jpeds.com/article/S0022-3476\(22\)00185-8/fulltext#:~:text=ROGD is characterized by pubertal,ROGD as a distinct group](https://www.jpeds.com/article/S0022-3476(22)00185-8/fulltext#:~:text=ROGD is characterized by pubertal,ROGD as a distinct group))

Letter to the Editor: Regret after Gender-affirmation Surgery: A Systematic Review and Meta-analysis of Prevalence.

(<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8751779/>)

Commentary: The Signal and the Noise - questioning the benefits of puberty blockers for youth with gender dysphoria - a commentary on New et al. 2021.

(<https://pubmed.ncbi.nlm.nih.gov/34936180/>)