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TRANSCRIPTION OF AUDIO RECORDING

FLORIDA HOUSE OF REPRESENTATIVES
HEALTH AND HUMAN SERVICES COMMITTEE MEETING
FLORIDA CHANNEL

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1 Whereupon, the following proceedings were
2 transcribed from an audio recording:

3 CHAIR FINE: The Health and Human Services
4 Committee will come to order.

5 Sabrina, please call the roll.

6 THE CLERK: Chair Fine?

7 CHAIR FINE: Here.

8 THE CLERK: Representatives Persons-Mulicka?

9 REPRESENTATIVE PERSONS-MULICKA: Here.

10 THE CLERK: Salzman?

11 REPRESENTATIVE SALZMAN: Here.

12 THE CLERK: Skidmore?

13 Amnesty?

14 Anderson?

15 REPRESENTATIVE ANDERSON: Here.

16 THE CLERK: Baker?

17 REPRESENTATIVE BAKER: Here.

18 THE CLERK: Clemons?

19 REPRESENTATIVE CLEMONS: Here.

20 THE CLERK: Cross?

21 REPRESENTATIVE CROSS: Here.

22 THE CLERK: Dunkley?

23 REPRESENTATIVE DUNKLEY: Here.

24 THE CLERK: Edmonds?

25 REPRESENTATIVE EDMONDS: Here.

1 THE CLERK: Gantt?

2 REPRESENTATIVE GANTT: Here.

3 THE CLERK: Grant?

4 REPRESENTATIVE GRANT: Here.

5 THE CLERK: Koster?

6 REPRESENTATIVE KOSTER: Here.

7 THE CLERK: Massullo?

8 REPRESENTATIVE MASSULLO: Here.

9 THE CLERK: Plankon?

10 REPRESENTATIVE PLANKON: Here.

11 THE CLERK: Rizo?

12 REPRESENTATIVE RIZO: Here.

13 THE CLERK: Snyder?

14 REPRESENTATIVE SNYDER: Here.

15 THE CLERK: Trabulsy?

16 REPRESENTATIVE TRABULSY: Here.

17 THE CLERK: Woodson?

18 REPRESENTATIVE WOODSON: Here.

19 THE CLERK: Yarkosky?

20 REPRESENTATIVE YARKOSKY: Here.

21 THE CLERK: A quorum is present.

22 CHAIR FINE: Thank you, Sabrina.

23 As we begin the meeting, I ask everyone to
24 silence your cell phones.

25 I'm going to turn the gavel over to the

1 vice chair here in a minute since I will be presenting
2 the first bill, but I wanted to let folks know we do
3 have five bills that we intend to get done today.
4 We will not be extending the time. We will be ending
5 no later than 6 o'clock.

6 And I'm very excited to say that four of the
7 five bills are sponsored by members of the minority
8 party today, so everyone should keep that in mind.

9 As it relates to our first bill, which I
10 recognize there are strongly held beliefs on both
11 sides on that bill, we will encourage everyone to
12 share their opinions and their perspectives but to do
13 so in a respectful manner. Interruptions of any kind
14 will not be tolerated. So you'll get your time. I
15 think, based on the number of cards, it will be more
16 than 30 seconds. You know, people will actually have
17 a meaningful amount of time to share their
18 perspectives. But we expect decorum and respect on
19 both sides in this debate. Again, the Sergeant's
20 Office has been preauthorized to remove people who
21 cannot follow that. There will not be warnings.

22 All right. So with that, I'm going to hand
23 the gavel over to our vice chair.

24 VICE CHAIR PERSONS-MULICKA: [Presiding.]
25 Thank you, Mr. Chair.

1 Members, first up today we will take up CS
2 for House Bill 1421, "Gender Clinical Intervention,"
3 by Representatives Fine and Massullo.

4 Chairs Fine and Massullo, when you're ready,
5 you're recognized to present the bill.

6 CHAIR FINE: Thank you. Thank you, Madam
7 Chair.

8 This bill does five things dealing with
9 surgeries and chemical treatments or medical
10 treatments or drug treatments, largely for children.
11 The bill does four things. Excuse me.

12 No. 1, it bans surgery and drugs that are
13 intended to attempt to change someone's gender for
14 children under the age of 18, and it makes any doctor
15 that participates in that moving forward a
16 third-degree felony.

17 Second, it has provisions related to custody
18 of children if there's a parent in a custody situation
19 who wishes to keep their child from getting these
20 kinds of procedures.

21 Third, as it relates to adults, the bill says
22 that no public funds can be used for these procedures.
23 It says, second, that people cannot be forced to pay
24 for others to go through these procedures through
25 their insurance.

1 Third, it requires written consent to be
2 obtained by doctors for adults so they're making an
3 informed choice.

4 Fourth, it creates a cause of action if
5 those adults are unhappy -- and this actually applies
6 to children too -- if those adults or children are
7 unhappy with the results of that.

8 And then, fourth, the bill says that your
9 birth certificate cannot be changed from your
10 biologic gender.

11 That, Members, is the bill.

12 VICE CHAIR PERSONS-MULICKA: Thank you, Chair
13 Fine.

14 Members, are there questions on the bill?

15 Questions on the bill?

16 Representative Gantt, you're recognized for a
17 question.

18 REPRESENTATIVE GANTT: Good afternoon.

19 Thank you, Madam Chair, for your recognition.

20 My first question is in regard to the custody
21 portion that you mentioned. Does the bill language
22 contemplate matters where if a primary parent was
23 awarded primary custody for that child and the other
24 parent has a history of abuse or some type of violence
25 against the child, would that parent that has the

1 history of abuse or violence against that child be
2 able to then come in and petition the Court for
3 custody over that child if gender-affirming care is
4 their basis for their challenge?

5 VICE CHAIR PERSONS-MULICKA: You're
6 recognized.

7 CHAIR FINE: Thank you, Madam Chair.

8 This bill doesn't have anything to do with
9 gender-affirming care.

10 VICE CHAIR PERSONS-MULICKA: Representative
11 Gantt, you're recognized for a follow-up.

12 REPRESENTATIVE GANTT: Thank you, Madam Chair.

13 I don't think my question was asked -- or
14 excuse me -- answered.

15 So would a parent with a history of abuse or
16 violence towards the child be able to petition based
17 on the language in your bill?

18 VICE CHAIR PERSONS-MULICKA: You're
19 recognized.

20 CHAIR FINE: Thank you, Madam Chair.

21 They would be able to petition. However, the
22 language of the bill does not require a court to do
23 it. It simply says that a court has the jurisdiction;
24 they have the ability to do it. I would presume that
25 a judge in this state would not award custody to a

1 parent with a history of child abuse as you described.

2 VICE CHAIR PERSONS-MULICKA: Representative
3 Gantt, you're recognized for follow-up.

4 REPRESENTATIVE GANTT: Thank you, Madam Chair,
5 for your recognition.

6 In regards to lines 52 to 59 particularly,
7 would this provision of this proposed language impact,
8 say, a facility -- say UF; right -- that provides
9 gender-affirming care, or the language that you use in
10 your bill? Would they be at jeopardy of losing their
11 contract to provide services under Medicare or
12 Medicaid if someone with private insurance is getting
13 care from their facility?

14 VICE CHAIR PERSONS-MULICKA: You're
15 recognized.

16 CHAIR FINE: Thank you.

17 This bill has nothing to do with
18 gender-affirming care, so I can't answer your question.

19 VICE CHAIR PERSONS-MULICKA: Representative,
20 would you like to rephrase the question?

21 REPRESENTATIVE GANTT: Thank you, Madam
22 Chair.

23 And I did specify by saying "or the language
24 in your bill." So if you say that it has nothing to
25 do with gender-affirming care, what about my question

1 in regards to the language in your bill?

2 VICE CHAIR PERSONS-MULICKA: You're
3 recognized.

4 CHAIR FINE: Thank you, Madam Chair.

5 My bill is ten pages long, so what language
6 exactly is it that you would like us to respond to?

7 VICE CHAIR PERSONS-MULICKA: Representative.

8 REPRESENTATIVE GANTT: Thank you, Madam
9 Chair, for your recognition.

10 Specifically lines 52 to 59.

11 VICE CHAIR PERSONS-MULICKA: You're
12 recognized.

13 CHAIR FINE: Could you repeat the question?
14 So as it relates to lines 52 to 59, could you repeat
15 the question?

16 VICE CHAIR PERSONS-MULICKA: Representative
17 Gantt?

18 REPRESENTATIVE GANTT: Thank you, Madam
19 Chair, for your recognition.

20 No problem. So my question was if a facility
21 that has a Medicaid or Medicare contract provides
22 services to an individual who has a private insurance
23 policy or private insurance coverage for care set out
24 in your bill, would they be in jeopardy of losing that
25 contractual agreement or that contract they have to

1 provide care for Medicaid or Medicare because they're
2 providing care under a private insurance policy to an
3 individual?

4 VICE CHAIR PERSONS-MULICKA: You're
5 recognized.

6 CHAIR FINE: Thank you, Madam Chair.

7 While not in these eight lines, in another
8 part of the bill, the bill bans the use of private
9 insurance for these type of procedures, so that
10 hypothetical wouldn't be able to.

11 VICE CHAIR PERSONS-MULICKA: Representative
12 Woodson, you're recognized for a question.

13 Representative Gantt, if you have more
14 questions, we will circle back to you.

15 REPRESENTATIVE WOODSON: Thank you, Madam
16 Chair.

17 Rep. Fine, is there any provision in the
18 bill to allow any minor who is currently getting care
19 to continue getting the care after January 1 of 2024?

20 VICE CHAIR PERSONS-MULICKA: You're
21 recognized.

22 CHAIR FINE: As this bill does not deal with
23 what I consider care, no.

24 REPRESENTATIVE WOODSON: Or treatment?

25 VICE CHAIR PERSONS-MULICKA: Representative

1 Woodson, would you like to restate your question?

2 REPRESENTATIVE WOODSON: Is there any
3 provision in the bill for a minor to continue to get
4 treatment as mentioned in the bill after January 1,
5 2024?

6 VICE CHAIR PERSONS-MULICKA: You're
7 recognized.

8 CHAIR FINE: Thank you, Madam Chair.

9 What the bill says is that those children
10 who have been given these drugs prior to January 1 of
11 this year may be able to continue to take them until
12 the end of the year. That was a change.

13 The original version of the bill said
14 there -- it was just cold turkey. And so we decided
15 in the last committee stop -- the first committee
16 stop where we did a strike-all to allow a transition
17 period, if you will, to get off of these -- to get
18 off of these sterilization drugs.

19 VICE CHAIR PERSONS-MULICKA: Representative
20 Woodson, you're recognized for a follow-up.

21 REPRESENTATIVE WOODSON: Thank you, Madam
22 Chair.

23 How about if the parents request for them to
24 continue to get the drugs?

25 VICE CHAIR PERSONS-MULICKA: You're

1 recognized.

2 CHAIR FINE: Thank you, Madam Chair.

3 As I said, the bill ends the provision of
4 these sterilization drugs to children by December 31
5 of this year.

6 REPRESENTATIVE WOODSON: Follow-up?

7 VICE CHAIR PERSONS-MULICKA: Representative
8 Woodson.

9 REPRESENTATIVE WOODSON: Thank you, Madam
10 Chair.

11 Do parents have any choice to request
12 something for the children in this bill?

13 VICE CHAIR PERSONS-MULICKA: Representative,
14 I believe the question was asked and answered as to
15 when the provisions would impact a minor.

16 REPRESENTATIVE WOODSON: I have another
17 question, Madam Chair.

18 VICE CHAIR PERSONS-MULICKA: Representative
19 Woodson, you're recognized.

20 REPRESENTATIVE WOODSON: Yes. Rep. Fine,
21 during the presentation we had recently, the chair of
22 the Board of Medicine recommended that the minors who
23 are getting drugs, they need to continue to get these
24 drugs.

25 Are we in alignment with the chair of the

1 Board of Medicine, or do we give any credence to what
2 the chair of the Board of Medicine mentioned?

3 VICE CHAIR PERSONS-MULICKA: You're
4 recognized.

5 CHAIR FINE: Thank you, Madam Chair.

6 The chairman of the Board of Medicine did
7 not talk about that issue, I don't believe, at the
8 meeting that we had here.

9 That said, the Board of Medicine rule would
10 allow those things to continue. We recognize that
11 that is their opinion, but in this bill it would end
12 at the end of the year.

13 VICE CHAIR PERSONS-MULICKA: Representative
14 Skidmore, you're recognized for a question.

15 REPRESENTATIVE SKIDMORE: Thank you, Madam
16 Chair.

17 Representative Fine, just based on a comment
18 you just made distinguishing puberty blockers as
19 sterilization, where do you get that definition
20 what -- how medically are puberty blockers
21 sterilization? How does that work?

22 VICE CHAIR PERSONS-MULICKA: You're
23 recognized.

24 REPRESENTATIVE MASSULLO: Thank you, Madam
25 Chair.

1 And thank you, Rep. Skidmore, for the
2 question.

3 What puberty blockers actually do is they
4 cause a chemical castration, particularly in men, to
5 where they would no longer be able to lay out -- or
6 able to fertilize a female. So that's how they would
7 create sterilization.

8 VICE CHAIR PERSONS-MULICKA: Representative
9 Skidmore, you're recognized for a follow-up.

10 REPRESENTATIVE SKIDMORE: Thank you, Madam
11 Chair.

12 Thank you, Rep. Massullo.

13 My understanding is that puberty blockers
14 can be started and then discontinued with no permanent
15 consequences -- let's just say we're not talking about
16 a child or a person who is transitioning or talking
17 about a small child or someone who takes puberty
18 blockers because their parents want them to grow
19 faster.

20 Isn't it true that they can stop taking those
21 puberty blockers at a certain point with no permanent
22 ill effects?

23 VICE CHAIR PERSONS-MULICKA: You're
24 recognized to answer the question at the end of the
25 statement.

1 REPRESENTATIVE MASSULLO: Thank you, Madam
2 Chair.

3 The initial thought was they were reversible.
4 However, the latest studies have shown they're not so
5 reversible. As a matter of fact, some of the effects
6 of puberty blockers, particularly in young men where
7 they basically stop at Tanner stage 2 or 3, where --
8 there's five stages of sexual development called
9 the Tanner stage. And some of the effects can be
10 stunting of the penile and testicular growth; sexual
11 dysfunction, impairment of erection, orgasm, and
12 ejaculation; prevention of spermatogenesis -- and
13 that's where you have sterility -- disruption of
14 normal brain development, and disruption of normal
15 bone development.

16 In females it can cause a menopause-like
17 state. It blocks the normal breast development,
18 decreases blood flow to the vagina and vulva, causes
19 sexual dysfunction, and it also prevents menstruation.

20 VICE CHAIR PERSONS-MULICKA: Representative
21 Skidmore, Ranking Member, you're recognized for a
22 follow-up.

23 REPRESENTATIVE SKIDMORE: Thank you, Madam
24 Chair.

25 Could you tell me what study you're

1 referencing?

2 VICE CHAIR PERSONS-MULICKA: You're
3 recognized at your convenience.

4 REPRESENTATIVE MASSULLO: Yes. Thank you.
5 I will send those to you.

6 REPRESENTATIVE SKIDMORE: Thank you.

7 CHAIR FINE: I would just add, there are
8 many. It's not just one.

9 It is correct, as Rep. Massullo has said,
10 that the latest research -- and this is why in multiple
11 western European countries that were, quote/unquote,
12 "leaders" in this, they have now moved towards our
13 position rejecting these practices.

14 But the two biggest changes are mental
15 development -- which sort of makes sense. Right?
16 Your brain is developing in these years, as well as
17 bone density. And so there are studies that find
18 that these are not -- it's not harmless: Oh, you put
19 something off and then you stop, and everything goes
20 back to normal. That is not what the latest research
21 shows.

22 VICE CHAIR PERSONS-MULICKA: Ranking Member,
23 you're recognized for follow-up.

24 REPRESENTATIVE SKIDMORE: Thank you, Madam
25 Chair.

1 So that would then suggest that there are
2 indeed studies that contradict what you're saying
3 today?

4 VICE CHAIR PERSONS-MULICKA: You're
5 recognized.

6 CHAIR FINE: No, there aren't.

7 VICE CHAIR PERSONS-MULICKA: Ranking Member,
8 you're recognized to ask an additional question.

9 REPRESENTATIVE SKIDMORE: Thank you, Madam
10 Chair.

11 So you did say the latest studies, which
12 would suggest that there are other studies that don't
13 come to the same conclusions. So are there other
14 studies that contradict what your study that
15 you're referencing, that you haven't been able to
16 tell me the name of, would suggest?

17 VICE CHAIR PERSONS-MULICKA: I believe that
18 question is asked and answered. But, Chair Massullo,
19 if you would like to add anything to it, you're more
20 than welcome to.

21 REPRESENTATIVE MASSULLO: Thank you, Madam
22 Chair.

23 There were no studies that actually showed
24 that they were reversible. There was a thought, sort
25 of a medical opinion, that they were reversible.

1 However, the studies have shown that they are not.

2 There's side effects from these puberty
3 blockers that are permanent, and they cause, as we
4 mentioned before, bone density issues that are
5 permanent. They also can cause brain issues,
6 particularly this type of tumor called a pseudotumor
7 cerebri, which is a type of tumor in the cerebellum
8 of the brain.

9 All right. And if I may, Madam Chair, one
10 of the leading experts in this area that was a
11 Canadian that's been doing this type of work since
12 1975 -- her name is Susan Bradley -- she felt that
13 they were reversible. However, in her own patients
14 she's seen that the drugs prevent the bone density
15 that normally occurred during puberty, and some of
16 these patients have lifelong bone problems.

17 She also has found there's a possible link
18 between growth hormone agonists and a condition called
19 the pseudotumor cerebri that I mentioned to you
20 earlier.

21 She also noted in her studies that 87.8
22 percent of boys that have these type of feelings of
23 dysphoria with their gender usually grow out of them
24 by the time they go through puberty.

25 CHAIR FINE: I would just add one thing.

1 I do want to read her quote from the
2 article just so you can see it in her words; again, a
3 pioneer in this. Quote: *We were wrong, she said.*
4 Quote: *They're not as irreversible as we always*
5 *thought, and they have longer term effects on kids'*
6 *growth and development, including making them sterile*
7 *and quite a number of things affecting their bone*
8 *growth, end quote.*

9 Again, this is coming from someone who
10 was an advocate of this for many years.

11 VICE CHAIR PERSONS-MULICKA: Members, any
12 additional questions?

13 Representative Gantt, you are recognized for
14 a question.

15 REPRESENTATIVE GANTT: Thank you, Madam
16 Chair, for your recognition.

17 I have a question regarding section 8 of
18 the bill, and that section basically lays out
19 liability. And so based on different provisions in
20 this bill that would stop treatment and care, this
21 portion lays out who will be liable.

22 So my question is who will be responsible
23 for the estate of a person receiving treatment or
24 care if they -- or a person no longer able to receive
25 treatment if they suffer any physical, psychological,

1 emotional, or physiological injury by ending or
2 inhibiting access to their treatment that they've
3 been on? Who will be the liable party?

4 VICE CHAIR PERSONS-MULICKA: You're
5 recognized.

6 CHAIR FINE: Thank you.

7 I think -- I think I understand your
8 question. I think that deals with something that
9 is not a part of the bill. Let me -- if I understand
10 this right, I think you're asking is someone liable
11 if people are upset that they can't get these
12 procedures or medication any longer.

13 Was that your question, or did I not
14 understand it?

15 VICE CHAIR PERSONS-MULICKA: Representative
16 Gantt, you're recognized to clarify your question.

17 REPRESENTATIVE GANTT: Thank you, Madam
18 Chair. And I'm fine to provide clarification.

19 So I'm not talking about feelings regarding
20 being upset. But I was using the specific language
21 in your bill that lays out who's liable based on
22 physical, psychological, emotional, or physiological
23 injury resulting from the gender clinical intervention.

24 So if a person is no longer able to receive
25 that care or if it is substantially inhibited with

1 access, who would be liable for that person to find
2 or seek justice in their injuries from no longer
3 being able to receive treatment?

4 VICE CHAIR PERSONS-MULICKA: You're
5 recognized.

6 CHAIR FINE: Thank you. Thank you, Madam
7 Chair.

8 As this section deals with someone who
9 provides gender clinical interventions as we've
10 defined it, the lack of provision of gender clinical
11 intervention is not a subject of this bill.

12 VICE CHAIR PERSONS-MULICKA: Representative
13 Gantt, you're recognized for an additional question.

14 REPRESENTATIVE GANTT: Thank you, Madam
15 Chair.

16 To follow-up on your previous response, so
17 the subject of this bill, it does include the ending
18 or the limiting of access to the care. So in that
19 regard, we do have Floridians who will be impacted.
20 So what guidance would all of us -- because we all
21 represent different people in each of our respective
22 districts who have different lived experiences. And
23 if any of them are impacted by no longer having access
24 or being substantially inhibited from having access
25 to treatment, what kind of guidance as a

1 representative would I be able to direct them towards
2 receiving or giving them if this bill was to pass?

3 VICE CHAIR PERSONS-MULICKA: You're
4 recognized.

5 CHAIR FINE: Thank you, Madam Chair.

6 This bill has nothing to do with care.

7 VICE CHAIR PERSONS-MULICKA: Representative
8 Gantt, you're recognized for a follow-up.

9 REPRESENTATIVE GANTT: Thank you, Madam
10 Chair.

11 So I don't want to play the game of semantics,
12 but how would I be able to inform my constituents who
13 would be impacted by this bill if they can no longer
14 receive the treatment that they've been receiving
15 based on the language in this bill?

16 VICE CHAIR PERSONS-MULICKA: Representative,
17 I believe it's been answered that this bill does not
18 impact care or treatment. If you would like to
19 rephrase your question.

20 REPRESENTATIVE GANTT: Thank you, Madam
21 Chair.

22 I believe that the bill sponsor has used
23 the word "treatment" before, so I changed it from
24 care to treatment.

25 CHAIR FINE: I don't mind answering the

1 question.

2 VICE CHAIR PERSONS-MULICKA: You're
3 recognized.

4 CHAIR FINE: Your question is how would
5 you talk to a constituent. The answer would be the
6 same way you talk to a constituent about any bill
7 that passes here: Here's the bill -- we all have
8 constituents who don't necessarily agree with every
9 bill that we pass. They call. They ask what bills
10 mean, and you would tell them. That's what you would
11 do.

12 VICE CHAIR PERSONS-MULICKA: Members, any
13 additional questions?

14 Any additional questions?

15 Seeing no additional questions, Members, we
16 have some amendments to the bill.

17 First I will address two amendments that
18 have been withdrawn at the sponsor's request, amendment
19 barcode 680935 by Representative Woodson and amendment
20 barcode 851021 by Representative Cross. At the
21 request of those respective sponsors, show those
22 amendments withdrawn without objection.

23 We have an additional amendment to the bill,
24 barcode number 466231, an amendment by Chair Fine.

25 Chair Fine, you're recognized to explain the

1 amendment.

2 CHAIR FINE: Thank you, Madam Chair.

3 This amendment does two things. First,
4 based on feedback we received in the first committee
5 to make it clear and more bipartisan, we've made it
6 clear that the procedures that people were worried --
7 I think unjustifiably -- that they were worried about
8 in the earlier committee saying you wouldn't be able
9 to get breast cancer treatment or other sorts of
10 things if this bill passed, we've added language to
11 make that explicit that that would not be an issue.

12 And then the second thing that we have done
13 is we have put in some clarifying language about
14 procedures and rules relating to changing the birth
15 certificate.

16 And that is the amendment.

17 VICE CHAIR PERSONS-MULICKA: Members, are
18 there questions on the amendment?

19 Questions on the amendment?

20 Seeing no questions, I believe we have two --
21 we have an amendment to the amendment, as well as a
22 substitute amendment to the amendment.

23 First we'll take up the amendment to the
24 amendment, barcode number 972969, by Representative
25 Cross. Again, at the sponsor's request, show this

1 amendment withdrawn without objection.

2 Next we will take up the substitute amendment
3 to the amendment, barcode 87409 by Representative
4 Gantt.

5 Representative Gantt, you're recognized to
6 explain the substitute amendment to the amendment.

7 REPRESENTATIVE GANTT: Thank you, Madam
8 Chair.

9 My amendment is very simple. It removes
10 provisions regarding care for adults, and the
11 rationale is that adults should be able to have access
12 and freedom of choice for health care where they so
13 choose to.

14 So that is my amendment.

15 VICE CHAIR PERSONS-MULICKA: Thank you,
16 Representative.

17 Members, are there questions on the
18 substitute amendment?

19 Any questions on the substitute amendment?

20 Seeing none, is there public comment on the
21 substitute amendment?

22 There are no cards submitted, but we do have
23 one member of the public who would like to comment
24 on the substitute amendment.

25 Please come to the podium and state your

1 name for the record, and if you wouldn't mind
2 handing your form afterwards to the Sergeant.

3 MR. MAURER: Absolutely. Thank you, Chair.

4 VICE CHAIR PERSONS-MULICKA: You're
5 recognized.

6 MR. MAURER: Committee members, my name is
7 Jon Harris Maurer, and I'm the public policy director
8 for Equality Florida. Equality Florida supports this
9 amendment.

10 We talk a lot about medical freedom in this
11 building, and this is exactly that issue to a tee.
12 We are talking about care for transgender adults, some
13 of whom have been in care for potentially decades.
14 They should be able to continue that care without
15 additional impediments from the State. These are
16 accessing care through issues like use of telehealth,
17 who they can see for their providers, whether those
18 are nurses and HRNs who are highly qualified and
19 skilled to deliver this care, whether they're able to
20 get insurance for this care, just like many of us are
21 for any procedure.

22 We're talking about basic access to health
23 care issues that are critically important for adults
24 who are making informed decisions about their health
25 care, and we ask you to support the amendment.

1 Thank you.

2 VICE CHAIR PERSONS-MULICKA: Thank you for
3 being here.

4 Again, for the members of the public, we are
5 on the substitute amendment filed by Representative
6 Gantt.

7 Is there any additional public comment on the
8 substitute amendment?

9 Seeing none, is there debate on the
10 substitute amendment?

11 Members, we're on the substitute amendment.
12 Is there debate?

13 Chair Fine, you are recognized.

14 CHAIR FINE: Thank you.

15 As you won't be surprised, I oppose this, as
16 does the other bill sponsor.

17 I would note a couple of issues of what we
18 heard both in the opening and the last public comment.
19 The last public comment said just like any procedure,
20 you can get it covered by health insurance. I would
21 suggest there are many, quote/unquote, "medical
22 procedures" -- frankly, most of the medical procedures
23 that are done by plastic surgeons who are doing
24 things other than some of the things in here that are
25 not covered. So it is not an accurate statement to

1 say that any procedure is covered by health insurance.

2 The amendment sponsor said this is about
3 access and choice. I want to be clear that nothing
4 whatsoever in this bill affects someone's choice if
5 they want to do this as an adult. But it also affirms
6 the choice of people who do not believe that they
7 should have to pay for this, to have to do it as it
8 relates to insurance.

9 Part of the reason that we did this is
10 insurance is not a free market. We've, hopefully, all
11 had jobs. We've all worked for employers. You don't
12 have the choice to get any insurance plan that you
13 want. You may have one choice or two choices or three
14 choices. So it's not as though you live in a market
15 where you can say, I want to be in a plan that covers
16 this or I want to be in a plan that doesn't. We're
17 simply making sure that people are not forced to pay
18 for this sort of thing.

19 But any adult over the age of 18 who wants
20 to go to a doctor who's willing to do these sorts of
21 procedures will be able to do this. The bill does
22 not restrict their ability to do it in any way. I
23 just do not think it is fair, and I think it is
24 intellectually bankrupt, to say that if I don't pay
25 for it or you do not pay for it, then they cannot

1 do it.

2 VICE CHAIR PERSONS-MULICKA: Members, any
3 additional debate?

4 Any additional debate on the substitute
5 amendment?

6 Seeing none, Representative Gantt, you are
7 recognized to close on the substitute amendment.

8 REPRESENTATIVE GANTT: Thank you, Madam Chair.

9 I would like to say thank you for your public
10 comment in support.

11 And the amendment allows individuals who
12 could be my constituents or anyone's constituents here
13 on the dais to continue to receive treatment, even via
14 telehealth. And that's important because, as we know,
15 Florida has a diverse landscape. And so some
16 Floridians who are receiving care and treatment in
17 rural areas rely on telehealth, and this should also
18 be available to them. And as adults in the free
19 state of Florida, they should have that option of
20 using telehealth to continue their treatment and
21 their care for gender-affirming care.

22 Thank you, Madam Chair.

23 VICE CHAIR PERSONS-MULICKA: Representative
24 Gantt having closed on the substitute amendment, all
25 those in favor of the substitute amendment, signify

1 by saying yea.

2 All those opposed, signify by saying nay.

3 Show the substitute amendment fails.

4 That brings us back to the amendment filed
5 by Chair Fine. And at this time we'll take any
6 public comment on the amendment.

7 We have one public comment card from Laura
8 Fellman representing the Florida PTA.

9 You are recognized.

10 MS. FELLMAN: Thank you very much.

11 The Florida PTA stands in opposition to this
12 amendment.

13 PTA's mission is to make every child's
14 potential a reality, every child. PTA supports bills
15 requiring teaching African-American history and
16 Asian-American history. We support Holocaust
17 education. We support these bills to help children
18 orient themselves in the world they live in. That
19 means helping all children.

20 Students who identify as LGBTQ deserve the
21 same rights and the same recognition as their
22 non-LGBTQ peers. Trans children and their parents
23 deserve the same rights to control their health care
24 and interventions. All people who are trans deserve
25 the right to the same access to health care and

1 interventions as all Floridians. To purposefully
2 exclude them sends us down a very dark path that
3 has, unfortunately, been taken before.

4 Let's not take that first step. Please vote
5 down on this amendment.

6 Thank you.

7 CHAIR FINE: Madam Chair, I have a question
8 for the speaker.

9 VICE CHAIR PERSONS-MULICKA: Thank you for
10 staying.

11 Chair Fine, you're recognized to ask a
12 question.

13 CHAIR FINE: Thank you.

14 So as a member of the PTA at the
15 government-run school where my oldest son goes to, I
16 want to understand -- this amendment was filed last
17 night. So I would like to understand the process that
18 you went through to make sure that the hundreds of
19 thousands, if not millions of parents who are part
20 of their PTA at their schools actually had this view
21 on this amendment over the last 24 hours.

22 VICE CHAIR PERSONS-MULICKA: You are
23 recognized.

24 MS. FELLMAN: Thank you.

25 And thank you for this opportunity.

1 As I understand, my colleague Ms. Siegel
2 has explained to you there is a process that is
3 followed in developing position statements and
4 resolutions by PTA that is followed by the counties,
5 the state, and the national level. And we have in
6 place existing policies and -- excuse me --
7 resolutions and position statements protecting LGBTQ
8 students and their families.

9 Thank you.

10 VICE CHAIR PERSONS-MULICKA: Are there any
11 additional questions for the speaker?

12 Chair Fine, you are recognized for follow-up.

13 CHAIR FINE: Yes, one of the joys of speaking
14 in public comment.

15 So this amendment does two things. First it
16 clarifies the concern that Democrats on this committee
17 had that this bill might -- if unamended would prevent
18 a woman getting breast cancer -- or getting treatment
19 for breast cancer.

20 So you mean to tell me in the last 24 hours
21 the PTA has adopted the position that they oppose
22 clarifying this bill to make sure that women who
23 were suffering from breast cancer cannot get treatment
24 for that? That is something within the last 24 hours
25 you have checked with the parents of the state of

1 Florida to see if they agree with?

2 MS. FELLMAN: Well, as I said --

3 VICE CHAIR PERSONS-MULICKA: You're
4 recognized.

5 MS. FELLMAN: Thank you.

6 As I said, we have position statements and
7 resolutions protecting, actually, health care for
8 students as well as LGBTQ rights, and those were in
9 consultation -- we consulted those when we reviewed
10 this. And just to clarify, not only do we oppose this
11 amendment, but we also oppose the bill.

12 Thank you very much.

13 CHAIR FINE: One more question.

14 The other thing --

15 VICE CHAIR PERSONS-MULICKA: Chair Fine,
16 you're recognized for follow-up.

17 CHAIR FINE: Thank you, Madam Chair.

18 The other part of this bill deals with birth
19 certificate -- the other part of this amendment deals
20 with birth certificates. It actually has nothing to
21 do -- this amendment has nothing to do with education
22 at all.

23 So, again, since you're saying "you all," I
24 guess, didn't do it in the last 24 hours, but you
25 predicted something like this might have come along.

1 Can you walk us through the procedure that you all
2 used at the PTA, speaking for hundreds of thousands,
3 if not millions of parents, including me, by the way,
4 saying that you all oppose the idea of people being
5 limited on their birth certificates to the biologic
6 gender that the kids, by the way, are taught when
7 they're in seventh grade in school?

8 VICE CHAIR PERSONS-MULICKA: You're
9 recognized.

10 MS. FELLMAN: Thank you.

11 I would be happy -- Ms. Siegel and I and
12 other people on the Florida PTA Legislative Committee
13 would be happy to meet with you in person at another
14 time, and we can explain the process of the
15 development of position statements and resolutions to
16 help you understand how that happens.

17 Thank you very much.

18 VICE CHAIR PERSONS-MULICKA: Members, again,
19 we're on amendment barcode 466231. Is there any
20 additional public comment on the amendment?

21 Seeing none, Members, we are in debate on the
22 amendment.

23 Is there debate on the amendment?

24 Seeing no debate -- oh, Representative
25 Salzman -- Whip Salzman, you're recognized in debate

1 on the amendment.

2 REPRESENTATIVE SALZMAN: Thank you, Madam
3 Chair.

4 As a former Board of Directors member of
5 the Florida PTA and county PTA president and still a
6 member of several local PTAs and partner in the
7 Escambia County School District in Florida in House
8 District 1, I would just like to clarify how we come
9 to the conclusion to file -- or to support amendments
10 or bills in this process.

11 There is a meeting once a year where everyone
12 comes together. We are getting ready for one right
13 now in Orlando in a couple of months where we all as
14 a body vote on resolutions that we will as a body
15 support. Like we do here, we vote, and then not
16 everybody votes the same way.

17 Once those resolutions are in place, the
18 Legislative Committee meets on their own and creates
19 position statements from those resolutions and brings
20 them to the Board of Directors for the State. It is
21 the county PTA president and the regional vice
22 president's jobs to ensure that the local communities
23 get the communication, albeit they normally don't.

24 But during the process of legislative
25 session, they are not consulted. They do not know --

1 I did not get any emails regarding a position on an
2 amendment. I did get a couple of emails saying, Call
3 your legislator, a couple of months ago. But we are
4 not consulted for this process on a regular basis,
5 and I can assure you that the thousands of PTA members
6 in Pensacola, Florida, support this bill.

7 Thank you.

8 VICE CHAIR PERSONS-MULICKA: Members, is
9 there additional debate?

10 Additional debate?

11 Seeing none, Chair Fine, you're recognized
12 for closing your amendment.

13 CHAIR FINE: Thank you.

14 I would just remind folks that irrespective
15 of what you think of the bill, this amendment was
16 developed based on feedback from the minority in the
17 last committee saying that they had legitimate
18 concerns that under the bill as written that things
19 having nothing to do with these kind of medical
20 procedures would be affected, specifically, for
21 example, breast cancer treatment.

22 So if you share that concern that Democrats
23 brought forward in that last committee meeting, then
24 you will vote for this amendment.

25 VICE CHAIR PERSONS-MULICKA: Chair Fine

1 having closed, all those in favor of the
2 amendment, signify by saying yea.

3 All those opposed, signify by saying no.

4 Please show the amendment adopted.

5 This brings us back to the bill as amended,
6 and we're going to go into public comment on the
7 bill as amended. We have quite a few folks from the
8 public who have sent in request cards and are here
9 today to speak to us.

10 We are going to start by giving everybody
11 three minutes to speak. Again, I thank you all for
12 the decorum that you have shown so far in this
13 meeting, and I ask that you continue to show that
14 decorum, regardless of what side of this bill, whether
15 you are a proponent or an opponent.

16 The first, we will start with Chloe Cole.

17 Miss Cole, you are recognized.

18 MISS COLE: Hello. My name is Chloe Cole,
19 and I am a detransitioned 18-year-old woman and
20 former transgender child from the state of California.

21 I previously testified here in Florida
22 several times, and I'm grateful that your state has
23 been fighting hard to prevent what happened during my
24 childhood from happening to other children and being
25 a model for other states to stop the barbaric practice

1 of childhood medical transitioning.

2 I firmly believe that no adult has any right
3 to manipulate, mutilate, or castrate a child, whether
4 they are parents or a pediatrician. To be absolutely
5 clear, I come from a loving nuclear family, and
6 neither my parents, nor my siblings, or other
7 relatives pushed me to transition.

8 Mom and Dad were all right with me dressing
9 and expressing myself differently. But when I
10 suggested that I wanted to medically transition, Mom
11 and Dad pushed back on this idea because they
12 understood that I was too young to be making lifelong
13 decisions.

14 They were becoming increasingly concerned,
15 but upon meeting and speaking with my doctors, they
16 were dismissed and told that children already know
17 what gender they identify with from a very young age,
18 that I was pushing for this because I understood what
19 I wanted, and if I was not allowed to transition, then
20 it would be life or death.

21 They failed to disclose the high rate of
22 desistance among gender-dysphoric children, and they
23 lied and emotionally manipulated my parents and gave
24 them no other option but to allow me to go down this
25 dangerous course of treatment for which there are

1 no proper studies in children.

2 My full transition spanned about four years,
3 including socially transitioning at 12, puberty
4 blockers and testosterone at 13, a double mastectomy
5 at 15, and a legal name change. This all happened in
6 between my seventh grade year of middle school and my
7 sophomore year of high school.

8 From quite a young age I had been very
9 different from my peers to the point that I constantly
10 found myself struggling to fit in and make friends.
11 I became increasingly tomboyish as I got older, and I
12 strongly desired to be one of the boys.

13 And I now understand that I'm on the
14 spectrum, and I have body image disorder, sexual
15 trauma, and other difficulties that were, frankly,
16 quite normal for a girl my age.

17 And these are largely the source of my gender
18 dysphoria, but these things were never treated or
19 taken into consideration during the diagnosis or
20 treatment of it.

21 The expectation that the doctors gave me and
22 my parents is that transitioning would help me grow
23 into a happy, healthy, young transgender man, and I
24 would feel whole and have peace with myself.

25 But the opposite happened, and I became more

1 and more distressed and dissociated from myself.
2 With every treatment and year that passed, I became
3 increasingly aware that no matter what experimental
4 treatment I underwent, I would always be a woman.

5 I came to fully realize this when in my
6 junior year of high school I took a class that taught
7 me about childhood psychology and development and put
8 into perspective the complexities of parenting. And I
9 discovered that I really wanted to become a mother
10 one day, but it's very possible that because of these
11 treatments I'm infertile. And now that my breasts
12 are gone, I will never have that choice of
13 breastfeeding my kids ever.

14 It was then that the regret of transitioning
15 sunk in and I could not bear to continue.

16 Aside from the emotional turmoil of living
17 a lie, I've suffered physical consequences from
18 transitioning medically. The blockers induced a state
19 of artificial menopause in my barely pubescent body.
20 And while I was on them, I would frequently experience
21 hot flashes, itching, and lethargy. And years after
22 stopping, I get joint pains and sporadic shooting
23 pains up my back.

24 Testosterone has permanently visually
25 masculinized certain features of my face and body,

1 including my voice. And the combination of the
2 testosterone and blockers caused my reproductive
3 system and urinary tract to atrophy. And to this
4 day I still do not know whether I will be able to
5 conceive, safely carry to term, or what sort of
6 birth defects could occur if I am to have
7 children.

8 VICE CHAIR PERSONS-MULICKA: Miss Cole, we
9 ask if you can wrap up and conclude your remarks
10 shortly.

11 MISS COLE: The aureola graft seams from my
12 mastectomy began to leak fluid two years postop, and
13 I have to wear bandages over what is left of my
14 nipples.

15 I have not received any care for these
16 complications or any assistance in detransitioning.
17 The most severe complications that I am experiencing
18 were ones that I was not informed of.

19 The long-term consequences involving my
20 physical, cognitive, and sexual development being
21 compromised are yet to be appreciated. And I do
22 not know what to expect down the line because there
23 are no clinical studies on the outcomes for
24 detransitioned patients nor those who transition
25 medically as children.

1 By allowing children to undergo transition,
2 we're infringing on their God-given right to grow
3 up into healthy, functional adults and live fulfilling
4 lives.

5 I implore you to stand up for the protection
6 of children.

7 Thank you.

8 VICE CHAIR PERSONS-MULICKA: Thank you for
9 being here.

10 Up next we have Sierra Bush Rester, followed
11 by Jennifer Solomon.

12 You are recognized.

13 MS. BUSH RESTER: I'm pretty sure by now you
14 all know exactly why your colleagues and constituents
15 disagree with this horrible bill. You've heard from
16 other meetings a lot of very important arguments.
17 You've heard the arguments that are appeals to the
18 heart about how this is inhumane and how it will take
19 lives and destroy families. You've heard the
20 arguments that are an appeal to logic, explaining the
21 consequences of the vague language of this bill and
22 how it could apply even to the procedures beyond those
23 you seek to target. You've heard appeals to
24 philosophy explaining that this is a violation of
25 parental rights.

1 And while there's a lot more I could say,
2 here's what I'm going to say. You are going to regret
3 this. You are going to regret not speaking out. You
4 are going to regret being complicit, and you are going
5 to regret being compliant. Because, I promise you,
6 the people of Florida will not forget what you do here
7 today.

8 And while it may not be today and it may not
9 be tomorrow, I promise you that your time will come
10 and eventually those whose agenda you seek to uphold
11 will come for you and those you love, just as you
12 have allowed them to come for us.

13 But before you pop open those champagne
14 bottles, I encourage you to take a moment to sit down
15 with those books you so desperately seek to ban,
16 because if you do, you might just learn why
17 fascism always loses.

18 VICE CHAIR PERSONS-MULICKA: Thank you for
19 being here.

20 Up next is Jennifer Solomon, followed by
21 Alana Stuart-Tilley.

22 You're recognized.

23 MS. SOLOMON: Hello. My name is Jennifer
24 Solomon. And I'm here today for you to see me and
25 hear me in my pleas as a parent of a gender-expansive

1 child and also as president of PFLAG Miami.

2 I represent all families who are being hurt
3 right now. Our reality is living in fear of waking
4 up one day to hear that the State has decided that my
5 love for my child will make me a child abuser. I
6 could lose custody.

7 Do you know what it's like to live like that?
8 Because I do. I don't sleep at night. And when my
9 child asks why the leaders in this state, you in
10 this room, want to hurt them, I don't know what to
11 tell him. But I can tell him that he's not safe in
12 this state as long as you are in office.

13 We have lost the ability to have doctors
14 treat our kids. Their teachers are silenced and
15 prevented from protecting them from bullying. Beloved
16 books are removed from the libraries so they don't
17 see themselves represented in the world. You are
18 telling them that they are not worthy. Why? Is this
19 for political gain?

20 One day when each of you have someone in your
21 lives or in your families that are LGBTQ, you're going
22 to have to look them in the eye and explain how you
23 voted here today, and it will happen.

24 History will remember what you are doing,
25 and you are trying to erase our families. Just so

1 you know, we're not going anywhere. If you've seen
2 a lioness protect her cub, that's what parents like
3 me are willing to do.

4 But we don't have to go there. You can stop
5 this violent attack on vulnerable transgender youth
6 today by voting no on this dangerous bill and all the
7 others. And, at the very least, let our kids who have
8 already been established on this journey, this
9 safe-affirming journey, continue.

10 Stand up for what's in your heart and what
11 you know is right.

12 Thank you.

13 VICE CHAIR PERSONS-MULICKA: Thank you for
14 being here.

15 Alana Stuart-Tilley, followed by Michael
16 Barrett.

17 You are recognized.

18 MS. ALANA STUART-TILLEY: My name is Alana
19 Stuart-Tilley. I urge you to vote against House Bill
20 1421.

21 I'm a Christian who believes that to love
22 God is to love my neighbor as myself, that is to
23 support my neighbor's well-being.

24 I'm transgender. I transitioned about six
25 years ago. I started my transition six years ago,

1 but I had always been transgender. I lived from the
2 outside of what looked like a normal life, normal
3 family life, but inside I was miserable and dying day
4 after day.

5 I sought medical help. I received medical
6 care, and I'm here today happy in myself and terrified
7 to live in the state of Florida, but I will not
8 move.

9 If my insurance wouldn't have covered this,
10 I would have never afforded it, and I would have died
11 unhappy and unfulfilled.

12 Yes, there are always risks of treatment.
13 This is like treatment of any illness, and the risks
14 of treatment versus nontreatment in every other
15 illness are assessed continually by medical science
16 and doctors and not by politicians. They certainly
17 shouldn't be allowed to be assessed by politicians
18 who can cherry pick a minority of dubious sources to
19 justify and support an agenda to eradicate transgender
20 people.

21 Nontreatment is known to put people at risk
22 of depression, despair, and suicide, and violence.
23 People will die if this bill passes and is enacted
24 because this bill will prevent people from getting
25 optimal care.

1 If you vote for this bill, you will have
2 blood on your hands, and you will have to answer for
3 it in this life or in the hereafter. And if you vote
4 against this bill, you will be thanked by people of
5 goodwill everywhere for all generations, and you will
6 know that you did as much as you could at this moment
7 to love your neighbors as yourself. Thus says
8 the Lord.

9 VICE CHAIR PERSONS-MULICKA: Thank you
10 for being here.

11 Michael Barrett, representing the
12 Florida Conference of Catholic Bishops, followed
13 by Melinda Stanwood.

14 You're recognized.

15 MR. BARRETT: Thank you, Chair and
16 Members of the Committee.

17 Michael Barrett with the Florida Conference
18 of Catholic Bishops. We encourage you to vote yes on
19 HB 1421.

20 We deeply sympathize with anyone who
21 experiences gender dysphoria and recognize that it
22 can be intensely difficult. Therefore, it is
23 important to recognize that so-called gender-affirming
24 protocols lack long-term evidence of their efficacy
25 and result in irreversible physical damage for the

1 patient.

2 Furthermore, there is significant evidence
3 that avoiding chemical or surgical interventions will
4 result in desistance in favor of biological sex for
5 most minors by the time they go through puberty.

6 Finally, no medical intervention can truly
7 realign a person's sex, which is an immutable
8 characteristic of each person.

9 Medical care should promote the flourishing
10 of the human person. Gender-affirming protocols fail
11 to do this because they fail to alleviate the problem
12 they seek to solve and because they cause damage to
13 the patient's body. Therefore, these protocols should
14 be prohibited.

15 Thank you, Representatives Fine and Massullo,
16 for bringing this good bill.

17 Please vote yes on HB 1421.

18 Thank you.

19 VICE CHAIR PERSONS-MULICKA: Thank you.

20 Melinda Stanwood, followed by Ryan Kennedy
21 with the Florida Citizens Alliance.

22 You are recognized.

23 MS. STANWOOD: Thank you for having me.

24 I've lived with three transgender people here
25 in Tallahassee. Two of them are my children and one

1 is Alana Stuart-Tilley who just spoke a few moments
2 ago.

3 I have two words: malicious incompetence.
4 It's quite clear that the primary purpose of this bill
5 is not to protect children. If that were truly the
6 case, then the scope of the bill would only involve
7 children's care and not extend to government overreach
8 for adult medical care.

9 Let's assume for a moment that my parental
10 rights and the civil rights of transgender adults
11 don't really apply to this. Let's just stick to the
12 facts.

13 First, gender reassignment surgery has never
14 been done for minors in the state of Florida period,
15 never. This is unnecessary legislation over a
16 manufactured issue.

17 Second, the language of this bill is broad
18 and dangerously vague. For example, under the bill's
19 current language would circumcisions on minors be
20 outlawed? Would insurance companies prevent payment
21 for adult mastectomies or for hormone-related
22 therapies for menopausal adults. This bill would have
23 unintended consequences, to say the least.

24 And, third, I encourage everyone to read the
25 committee's analysis of the bill, the committee

1 analysis. I did. It's 12 pages long. And at first
2 glance the analysis looks pretty damning. For
3 example, it does claim that approximately 80 percent
4 of those who were diagnosed with gender dysphoria
5 prior to puberty ended up desisting from their
6 original diagnosis by the time they reached adulthood.
7 This is arguably the main point of this analysis.

8 But then you look at the cited sources of
9 this information. Just follow the journal articles
10 which I took the liberty of reading. You'll find that
11 so many of these stats were cherry picked. Some were
12 from decades' old studies dating back to the DSM-III
13 published in 1980, which is when the clinical criteria
14 for gender dysphoria was first applied to children.

15 So many of these children who desisted in
16 these studies didn't even meet the diagnostic criteria
17 for gender dysphoria to begin with. Some studies
18 had sample sizes of as few as ten children, and on
19 and on.

20 And, finally, there's the Journal of Clinical
21 Endocrinology and Metabolism, one source cited in
22 this committee's analysis. The journal recommended
23 the use of hormone blockers for prepubescent children
24 and monitored use of hormone therapies in pubescent
25 adolescents.

1 So the committee's very own cited source
2 contradicts the recommendations that the committee
3 analysis is based on.

4 Unfortunately, I don't have an hour to
5 share all of this misleading information here found
6 in the committee analysis. But we know the political
7 motivations behind this.

8 Please, please, vote against this bill.

9 Thank you.

10 CHAIR FINE: Madam Chair, I have a couple --
11 I've got two quick questions.

12 VICE CHAIR PERSONS-MULICKA: Chair Fine,
13 you're recognized for two questions.

14 CHAIR FINE: Thank you.

15 And I wouldn't do this, but I hear
16 things that have to be said.

17 Do you consider a voluntary mastectomy on a
18 13-year-old to be gender reassignment surgery?
19 Because you said it doesn't happen in Florida. Would
20 you consider that to be gender reassignment surgery,
21 a girl having -- a person having their breasts cut
22 off because they want -- they're a girl and they want
23 to be a boy? Would that be gender reassignment
24 surgery to you?

25 MS. STANWOOD: Some could consider it that

1 way.

2 CHAIR FINE: Okay. So -- can I follow up?

3 So are you aware that there's one doctor,
4 just one, in the state of Florida -- she's very public
5 about it. Her tradename is Dr. Teetus Deletus. I
6 can't remember her real name because I -- how do you
7 get past that -- who has said publicly that in the
8 last year she has done 13 of these surgeries to
9 children and a lot more to adults, but 13 to children.

10 So would you want to amend your statement
11 that says these types of procedures don't happen in
12 Florida? She's in Miami Beach, by the way.

13 Would you want to amend that statement saying
14 these kinds of procedures don't happen in Florida
15 today?

16 VICE CHAIR PERSONS-MULICKA: You're
17 recognized.

18 MS. STANWOOD: Thank you very much,
19 Representative Fine, for that very good question.

20 Sure, I wasn't aware of that. But I do know
21 of the barriers that are really, really high for
22 people to obtain this kind of care. And I know as
23 the parent of a 14-year-old transgender child that as
24 a parent I wouldn't make that choice for my minor
25 child. But also, you know, if my child needed that

1 care to save their life, I would absolutely have that
2 to save their life.

3 CHAIR FINE: Thank you for correcting your
4 statement.

5 MS. STANWOOD: Thank you.

6 VICE CHAIR PERSONS-MULICKA: Thank you for
7 being here. And thank you for answering those
8 questions.

9 Ryan Kennedy, Florida Citizens Alliance,
10 followed by Linda Miklowitz, Florida National
11 Organization for Women.

12 You're recognized.

13 MR. KENNEDY: Thank you, Chair. Thank you,
14 Committee Members.

15 I'm Ryan Kennedy with the Florida Citizens
16 Alliance, a group of over 250,000 supporters across
17 the state of Florida. Two-thirds of them are parents.
18 And we rise and thank the two sponsors for this great
19 bill.

20 We believe that every child in the state of
21 Florida should grow up to have a safe and protected
22 childhood. For this reason, why we believe this,
23 there's been a lot of information thrown out here in
24 this committee by different presenters, and I'll just
25 kind of list out that these treatments are experimental

1 in a lot of cases. They have long-term side effects
2 that have been already listed out. But for this
3 reason, we think that this bill needs to be voted yes
4 on. Because if we really do want to protect children,
5 then we need to make sure that these treatments are
6 delayed so that when someone becomes an adult, 18 or
7 over, they can make these decisions on their own. And
8 after that time period, if they want to go through
9 with it, that's a different scenario. But until this
10 happens, these treatments are experimental and
11 there's lifelong side effects.

12 And all across Europe there are clinics
13 shutting down, including in the U.K. The largest
14 clinic that provided these treatments has shut down
15 for this very reason.

16 So, again, I would want everybody on this
17 committee to vote yes.

18 Thank you.

19 VICE CHAIR PERSONS-MULICKA: Thank you,
20 for being here.

21 Linda Miklowitz, Florida National
22 Organization for Women?

23 Linda has filled out her form, let the record
24 reflect, as an opponent to the bill.

25 Up next, January Littlejohn, followed by

1 Dayza Guthrie [phonetic].

2 January, you're recognized.

3 MS. LITTLEJOHN: Thank you.

4 I'm a mom and a licensed mental health
5 counselor here in Florida. Our daughter became
6 confused about her sex in 2020, shortly after three
7 of her friends also claimed transgender identities.
8 Her emotional pain and dysphoria were real. We did
9 not socially or medically transition her. Instead,
10 we worked with a licensed counselor to help our
11 daughter explore and resolve the root issues that led
12 to her gender dysphoria, including low self-esteem and
13 anxiety. We followed the path of watchful waiting,
14 and our daughter has desisted and no longer is
15 confused over her sex.

16 This is not a ban on health care for children
17 with gender dysphoria as is being falsely reported.
18 This bill is about protecting children from
19 experimental medical harm and ensuring we are putting
20 the best evidence-based treatment forward with the
21 least amount of risk, which is psychotherapy and
22 watchful waiting for what ultimately is a mental
23 health issue.

24 I know many parents in Florida who have
25 successfully walked their children through this

1 confusion with love and truth, and their gender
2 dysphoria was real as well.

3 To the lawmakers that oppose this bill,
4 please stop telling these vulnerable youth that their
5 only option is suicide if this bill passes. That is
6 reckless and irresponsible and goes against the best
7 practices on suicide prevention.

8 Our children are worth protecting and
9 safeguarding. I support this bill to stop the
10 mutilation of any more children.

11 Thank you.

12 VICE CHAIR PERSONS-MULICKA: Thank you for
13 being here.

14 Dayza Guthrie?

15 Let the record reflect that Dayza is an
16 opponent to the bill.

17 Jay Hart, followed by Chris Elston.

18 You are recognized.

19 MR. HART: Thank you.

20 I would like to draw your attention to the
21 definition of gender clinical interventions as defined
22 in this bill under section 5: *Sex reassignment*
23 *surgeries or any other surgical procedures that alter*
24 *primary or secondary sexual characteristics, and*
25 *puberty blocking, hormone, and hormone antagonistic*

1 *therapies.*

2 This bill bans insurance coverage for hormone
3 therapy for menopause, erectile dysfunction, ovarian
4 cysts, endometriosis, PCOS, reducing risk of
5 osteoporosis, hormone therapy for slowing the growth
6 of neuroendocrine tumors, pituitary gland tumors,
7 breast cancer, prostate cancer, testicular cancer,
8 thyroid cancer, adrenal cancer, uterine cancer,
9 ovarian cancer -- the list goes on -- use of birth
10 control as hormone therapy, or at all.

11 All of these are defined under section 456.52
12 as gender clinical interventions as they are all
13 hormone therapies that are not explicitly excluded
14 from the definition.

15 This bill also bans insurance coverage
16 for surgeries for cancer, such as hysterectomies,
17 breast implants for women who have had mastectomies,
18 medically necessary breast reductions for women with
19 large chests that cause chronic pain, and skin
20 conditions. All of these are defined as gender
21 clinical interventions as they are all surgical
22 procedures that alter primary and secondary sexual
23 characteristics that are not explicitly excluded from
24 the definition.

25 This bill has explicitly excluded hormone

1 therapy for estrogen and testosterone deficiency
2 and hypergonadism and, as we saw with the amendment,
3 breast cancer surgeries, which is utterly illogical
4 since the experts supporting this bill have already
5 established how truly dangerous hormone therapy
6 is and how truly lacking the scientific research
7 is. If it really was so, it would not be as widely
8 used as it is today, and it would not be just
9 inaccessible to trans people. But to everyone for
10 their protection.

11 Taxpayer dollars are another concern for
12 insurance coverage of these procedures. The total
13 annual U.S. federal expense is at \$6.5 trillion.
14 \$10 million is spent on hormone therapy annually in
15 the U.S. \$210 billion is spent on cancer care, and
16 for gender-affirming care an astounding \$2 billion is
17 spent, which amounts to 0.03 percent of total
18 taxpayer dollars.

19 The average American pays 20.6 grand a year
20 in taxes, so 0.03 percent of that is \$6.20, a little
21 less than a Starbucks mocha every year, truly an
22 absurdly steep subscription, I know.

23 I am in opposition of this bill as a
24 nonbinary student studying biology because it harms
25 everyone. But, please, by all means vote yes. If

1 you don't want to donate one coffee a year in taxes
2 to fund our lifesaving care, fine. But thanks to
3 this bill banning it, don't expect everyone to donate
4 a hundred coffees a year to fund yours.

5 Thank you.

6 VICE CHAIR PERSONS-MULICKA: Thank you,
7 Jay, for being here.

8 I just want to note for yourself and those
9 watching that the amendment we adopted did address
10 problems with the definition of gender clinical
11 intervention.

12 Thank you.

13 Up next we have Chris Elston, followed
14 by Wendell Beatty.

15 You're recognized.

16 MR. ELSTON: Thank you.

17 Good afternoon. It's a great honor to be
18 here today.

19 My name is Chris Elston. I'm a father of two
20 girls, and for the past two and a half years I've
21 been on a very unique journey traveling all across
22 North America, going to dozens of states and
23 provinces, having conversations like a crazy person
24 out on the street, at universities about what I
25 consider to be the greatest child abuse scandal in

1 the history of modern medicine.

2 Our children are being harmed psychologically
3 and physically because of an ideology that teaches
4 that just because they defy sexist progressive
5 stereotypes that they must have been born in the wrong
6 body. What an abusive thing to say to a child, that
7 they were born wrong. Can you imagine telling your
8 child they were born wrong? What does that even mean?

9 The body-positive message we should be
10 sending is that there is no right way to be a boy or
11 a girl. If a girl wants to climb trees and play in
12 the dirt and throw around a football, wants to be an
13 engineer when she grows up, and hates wearing dresses,
14 well, guess what? She's 100 percent a beautiful girl.

15 We all knew this five years ago. Yet this
16 ideology teaching that our children are trans has
17 captured the entire Western world, and no one can even
18 define what it means to be trans. All it means is
19 that they defy stereotypes.

20 In this day and age, it means they have other
21 mental health comorbidities which are affecting them.
22 Half of these children who are going to these gender
23 clinics are on the autism spectrum. We know from the
24 Tavistock, the biggest gender clinic in the world,
25 that out of more than 1,000 children, 35 percent had

1 moderate to severe autism. These are children who
2 have been abused in many instances. Parents are ten
3 times more likely to have been sex offenders. Kids in
4 foster care are wildly overrepresented. These are our
5 most vulnerable children who aren't fitting in, who
6 are having a tough time, and they're being treated as
7 though gender is the source of all of their troubles.

8 The drug that they are given has been given
9 to pedophiles in the past to chemically castrate them.
10 It's only been approved to treat prostate cancer in
11 men, endometriosis and uterine fibroids in women, but
12 we give it to kids off label.

13 We manipulate parents by telling them that
14 they can have a dead daughter or a live son, as though
15 these kids will kill themselves if we don't medically
16 transition them. Yet there's no evidence to support
17 this.

18 Laura Edwards-Leeper who founded the first
19 gender clinic in Boston in 2007 even wrote in an
20 op-ed in the *Washington Post* last year that's she's
21 not aware of any epidemic of suicides. The only
22 evidence we do have has been done with adults. There
23 are no studies with kids. But with adults the
24 evidence shows that ten years after sex reassignment
25 surgery suicide rates peaked and are 19.1 times

1 higher than their peers after adjusting for other
2 mental health comorbidities.

3 So what are we doing to these kids? This is
4 a pseudoreligious movement that we have to put a
5 stop to. There is no such thing as a transgender
6 child. They are called boys and girls, and they are
7 beautiful just as they are, no drugs or scalpels
8 needed.

9 Thank you.

10 VICE CHAIR PERSONS-MULICKA: Thank you for
11 being here.

12 Wendell Beatty, followed by John Labriola
13 with the Christian Family Coalition.

14 Wendell, you are recognized.

15 MR. BEATTY: Sergeant Wendell Beatty. I'm
16 retired.

17 Chair, thank you. To Representatives Dunkley,
18 Salzman, and Snyder, thank you also for your service
19 to our country.

20 What I present to you is not an opinion. I
21 don't have any statistics to throw at you, just my
22 experience. Today I can say that I am a transgender
23 woman; I have gender dysphoria that I'm working on
24 and that WPATH standards of care do work.

25 At the age of about 8 there was this sense

1 that something is off, something is not right. I
2 related with girls more than boys.

3 About 10, you know, my mom found clothes
4 that I would dress in, and they were women's clothes.
5 When I went back to make my bed and they were gone,
6 I said -- later I saw Mom and Dad talking, and I knew
7 what they were talking about. But they never said
8 anything to me. So at 10 years old I had to figure
9 out for myself what this thing is. It took me a long
10 time and a lot of self-medicating. I'm glad to tell
11 you that I'm sober today and that brought me to be
12 able to face myself and figure out just what was going
13 on, and that was gender dysphoria. It didn't -- it
14 wasn't my imagination. It was real.

15 This thing works. In what little research
16 I've done, I've seen no instances where the WPATH
17 standards of care haven't been followed. My medical
18 professionals use them. Most of what's being ascribed
19 for today would be better served by following those
20 standards for kids like me.

21 This is a picture drawn by my granddaughter.
22 She's 6 years old. I don't know what -- you know,
23 if she will have this issue. It's not genetic, to my
24 knowledge. But what I do hope is that if she comes
25 to a point or any other child in this state that has a

1 question, that they will be able to seek help without
2 prejudice, be it -- in this case we're talking about
3 the medical community.

4 I oppose this bill, and I hope you all will
5 too.

6 Thank you for your time.

7 VICE CHAIR PERSONS-MULICKA: Thank you for
8 being here.

9 John Labriola, followed by Barbara DaVane.

10 John, you're recognized.

11 MR. LABRIOLA: Good afternoon, cosponsors and
12 members of this committee.

13 I'm John Labriola. I represent the Christian
14 Family Coalition, and we rise in strong support of
15 this bill.

16 The fact that we're here even having to have
17 this debate is a sad reflection of how much we've lost
18 our way as a society. The LGBTQ movement that --
19 then known as the gay rights movement -- started 50
20 years ago with the slogan "Consenting Adults Acting in
21 Private." You never hear that anymore, do you?

22 We were told there was no slippery slope;
23 that if we just met their demands, then they would be
24 okay. But once they got their way, it was on to the
25 next frontier and the next one and the next one:

1 gay marriage, adoption, LGBTQ indoctrination in
2 the schools, drag queen story hours, and now allowing
3 monsters to manipulate children into having sexually
4 mutilating -- sexually mutilating themselves in the
5 name of gender idealogy.

6 The line must be drawn here. And we thank
7 you for the custody provision that will protect
8 parents who disagree with having their children
9 sexually mutilated. It's very necessary because of
10 people -- of cases like Jeff Younger in Texas who lost
11 custody to his son because his mother -- the child's
12 mother wants to sexually mutilate the child, and also
13 because of states like Minnesota that are passing
14 legislation now to allow one parent to essentially
15 kidnap a child from another parent so they can be
16 sexually mutilated. That's why this provision is so
17 important.

18 And make no mistake, the same people -- the
19 same LGBTQ activists who are up here today telling you
20 that this is all an attack on them and it's a
21 manufactured issue would be up here today, if they
22 were in charge, pushing this committee to pass exactly
23 that kind of disgusting legislation that's being
24 considered in Minnesota. So make no mistake about
25 that.

1 A lot has been said about love and hate.
2 Love is helping a child to accept the body that they
3 were given as a child and not encouraging them to
4 hate the body that they were born into.

5 The cure for gender dysphoria is not a
6 surgeon's knife, genital mutilation, or hating your
7 body. The answer is Jesus. But we also need laws to
8 protect children from these monsters.

9 So, again, would ask you to please support
10 this good bill. And thank you again to the sponsors.
11 If you love children, you will protect them today.

12 Thank you, and God bless you.

13 VICE CHAIR PERSONS-MULICKA: Thank you.

14 Barbara DeVane, Florida NOW.

15 Please let the record reflect that Barbara
16 DeVane has marked her form as an opponent to the
17 bill.

18 Anthony Verdugo with the Christian
19 Family Coalition, followed by Caleb Garcia.

20 You are recognized.

21 MR. VERDUGO: Good afternoon.

22 Thank you, Chair. Thank you, Vice Chair,
23 members of the committee.

24 I'm Anthony Verdugo, Christian Family
25 Coalition. We represent 500,000 voters and supporters

1 in this state, and we urge you to vote yes on HB 1421.

2 I want to thank Representative Fine once
3 again and Dr. Massullo also for his expert witness and
4 testimony.

5 You know, we learn in the medical profession
6 first do no harm, but that applies to government too.
7 And your job as legislators is to protect the most
8 vulnerable among us, the weakest, and those that are
9 being preyed upon by corrupt adults.

10 There are about 60 clinics, according to a
11 hearing that was done by the Florida Board of Medicine,
12 that actually engage in these barbaric practices.
13 The question here is what are we talking about? What
14 are we doing to our children? You know, I heard a
15 legislator in another committee, who is here on this
16 committee also, who said, I stand with the LGBTQ.
17 And that's all she said.

18 Well, that's wrong. That's very wrong. You
19 have to stand with all of your constituents, also
20 those who are non-LGBTQ, and you have to stand with
21 parents. Most of all, you have to stand with children.
22 There's no such thing as gender-affirming care when
23 it comes to this. It's non-affirming, and it's
24 certainly not caring. This is child abuse. This is
25 not health care. Let's get that straight.

1 And children who do engage in this type of
2 medical procedure or allow themselves to because of
3 their parents and doctors who threaten them, they're
4 the ones that end up killing themselves. They're the
5 ones that end up committing suicide, like David Reimer.
6 David Reimer committed suicide at 38 years old. He
7 was subjected to an involuntary sex reassignment
8 surgery by John Money. John Money was the founder of
9 this insanity -- because that's what this is. This is
10 insanity.

11 I don't care if you're a Republican or a
12 Democrat. I'm just going to ask you this question.
13 First of all, when a child goes through the entire
14 procedure and he does everything that you told him to,
15 to those who disagree with this bill, and still commits
16 suicide and takes their own life, what are you going
17 to say then? What are you going to tell that child
18 and those parents after they have followed the gender
19 ideology that you have set forth? What are you going
20 to tell them when they take their own lives? Because
21 that's what happens. What are you going to tell the
22 parents of David Reimer?

23 Support and represent all your constituents.
24 We have to show children that they can be happy in
25 the bodies that they were created with, and they can

1 live fulfilling life.

2 Please vote yes.

3 Thank you.

4 VICE CHAIR PERSONS-MULICKA: Thank you.

5 Caleb Garcia, followed by Armando Pamar.

6 You are recognized.

7 MR. GARCIA: Good afternoon, everybody.

8 So my name is Caleb Hobson Garcia, and I am a
9 transgender man. When I was 11, I climbed into my
10 parents' bed and told them I loved them and for that
11 reason I didn't want to kill myself. I came out to
12 them as a trans man. It took a lot of work for them
13 to understand, but they loved me and wanted to save
14 my life.

15 With the help of experts and doctors, I
16 socially transitioned at 11 and began medically
17 transitioning when I was 12. I'm now 21 and about
18 to graduate from Florida State University with a
19 bachelor of science.

20 Transitioning saved my life. As I stand in
21 front of you, I can speak from personal experience
22 that trans health care as a minor is not harmful. I'm
23 a living testament to the fact that trans health care
24 for minors is a valid and necessary treatment.

25 I've found happiness, support, and success in

1 my life. Those are my longest lasting side effects;
2 happiness, support, and success.

3 I know that I personally cannot sway the way
4 you vote today. You've proven time and time again
5 that after listening for hours to the heart-wrenching
6 testimony of impacted Floridians that you don't care
7 about what we have to say. You don't care about your
8 constituents. Hopefully, you'll prove me wrong.

9 When you all make this vote, I want you to
10 think about who influenced you to vote the way you do
11 and why. Was it the doctors who treat transgender
12 Floridians, the loving parents of transgender kids,
13 the caring teachers, therapists, and coaches of
14 transgender kids? Was it people like me who
15 experienced being a transgender child and now are able
16 to live and thrive as transgender adults? Or were
17 you influenced by doctors who have cherry picked their
18 data and only presented information that supports
19 their own political bias? Was Governor DeSantis on
20 his infinite quest to wage a culture war for his
21 higher political ambitions? Was it the far-right
22 Christofascist billionaires like the Betsy DeVos
23 family who are funding attacks on the trans community
24 across the country to push their religious views on
25 marginalized communities in funding your reelection

1 campaigns?

2 Let's be honest, this bill is not about
3 protecting children. It is just another piece of the
4 nationally coordinated effort to erase trans people
5 from society because we do not fit into your narrow,
6 religiously motivated world view.

7 You've heard from countless experts, and
8 you've heard the real facts. The American Academy of
9 Pediatrics, American Psychological Association, and
10 American Medical Association support gender-affirming
11 care, medically necessary care for transgender
12 children.

13 You have no excuse. You cannot claim
14 ignorance or lack adequate scientific evidence. I
15 hope you think about the lives you are irrevocably
16 harming and disrupting as you try to sleep tonight.

17 Thank you.

18 VICE CHAIR PERSONS-MULICKA: Thank you.

19 Armando Pamar, followed by Nicole Parker,
20 Equality Florida. You are recognized.

21 MR. PAMAR: Madam Chair, my point is very
22 simple. I have over 30 years in psychology at the
23 Florida State Hospital in the adolescent unit, 30
24 years, again, teaching at the school system, high
25 school and university.

1 And what I have seen during the years that
2 I have been dealing with this, the teenage years, is
3 the devastation and confusion after some of these
4 procedures. So this is an irreversible situation.
5 You don't have any solution with these kids we have
6 to deal with. And I do urge you people, please vote
7 yes on the -- not on the amendment -- on this
8 resolution.

9 Thank you.

10 VICE CHAIR PERSONS-MULICKA: Thank you.

11 Nicole Parker, Equality Florida, followed by
12 Quinn Warner Swearingen.

13 You are recognized.

14 MS. PARKER: Thank you.

15 Good afternoon, Chair and committee members.

16 My name is Nicole Parker, and I'm the
17 director of transgender equality for Equality Florida.
18 I stand in opposition to this bill and in support of
19 the rights of parents to determine what medical
20 providers and the health care that is needed for their
21 children.

22 Access to health care is a human right. And
23 as I've sat and listened to many discussions on this
24 bill, it's like the conversation isn't even about
25 human beings accessing health care. Gender-affirming

1 care is essential lifesaving health care, and it looks
2 different for every person. This care has allowed me
3 to live a life that is more fulfilled than I could
4 have ever imagined.

5 The State should not stand in between
6 medical providers, transgender youth, and their
7 parents and families who know what is best for them.
8 Every human being is different and has a unique set
9 of needs and should be able to access the care that
10 is needed for them.

11 We urge you to reject this bill.

12 Thank you.

13 VICE CHAIR PERSONS-MULICKA: Thank you.

14 Quinn Warner Swearingen, followed by Kevin
15 Parker.

16 You are recognized.

17 MR. SWEARINGEN: Thank you, Chair.

18 I'm speaking today for myself. And before
19 I start at the heart of my statement in opposition to
20 this bill, I would like to say that a previous speaker
21 who spoke in support of it was correct when she said
22 suicide is not the only option. It shouldn't be an
23 option considered at all.

24 To any gender nonconforming or transgender
25 child listening who may be affected by this bill, I

1 just need you to know you have a beautiful and loving
2 community that is ready to offer you any help or
3 support that you may need as this happens, and we
4 will try our absolutely hardest to ensure that you
5 get to live the life you deserve.

6 Suicide should never be an option at all,
7 but we know the harsh reality that some may,
8 unfortunately, take their lives as attacks on bodily
9 autonomy continue.

10 Now, to point out what should be obvious and
11 echo the points I know that many of my siblings have
12 brought up here today and on other committees, I know
13 without a doubt we could walk in here with stacks
14 upon stacks upon stacks upon stacks of studies and
15 evidence that would support our case and support the
16 efficacy of gender-affirming care for therapeutic and
17 medical benefits.

18 It's a mountain that would dwarf any sad
19 pile of legitimate research that supports the opposing
20 view. And I know that we can do this because it's
21 been done before in other bodies, with actual
22 wheelbarrows being brought in with -- or boxes of
23 documents being brought into halls just like this.

24 But I know it's not going to matter in the
25 slightest because, frankly, none of you care. The

1 semantic game that this body decided to play today
2 with this committee has made it clear that this is
3 little more than a farce. Even the mention of
4 intellectual honesty in the context of what's
5 happening here is, frankly, laughable. There's
6 absolutely no intellectual honesty in this room at
7 all. It's a room completely devoid of compassion as
8 well.

9 This is nothing more than another sadistic
10 and black-hearted attack on the rights of some of the
11 most marginalized in our society, all for the ego trip
12 and flagrant power grab of the ultra nationalists and
13 fascistic far right that have rotted the party of
14 small government and freedom to its malignant core.

15 It's a rot that feeds on the culture wars
16 that you began, the fear that you may lose the
17 culture wars, the fear that you who proclaim to sit
18 towards the center of the aisle gladly utilize to keep
19 the pitchforks at bay while you pray the people you
20 roll over do not realize how little you care about
21 their freedoms or well-being when we have things like
22 housing shortages, insurance premiums rising, lack of
23 affordable health care, lack of well-paying jobs.
24 And as people are losing their livelihoods and homes,
25 we're here focusing on yet another culture war to

1 distract.

2 It's a fear that destroys all in its path,
3 and it's a fear that only exists because you don't
4 know that the war you started has already been lost
5 and will end up losing.

6 I'd ask which side most of you are on, but I
7 fear that you've already chosen, and there's no use
8 in budging you. But until you've realized that you
9 are fighting a war that you've already lost, know
10 this: You will find out the hard way why you always
11 lose, because while you attempt to use my siblings and
12 my family as a sacrifice to grab political points with
13 your blood-stained hands, we will be here to fight
14 every single battle, every single day, at every single
15 hour, tooth and nail, to the bitter end. Because
16 surrender is not an option when the fight is over our
17 rights to exist.

18 VICE CHAIR PERSONS-MULICKA: Thank you.

19 Kevin Parker, followed by Aurelie Colon
20 Larrauri.

21 You are recognized.

22 MR. PARKER: Thank you.

23 Good afternoon, Committee.

24 I am speaking for myself, first of all.

25 I am in opposition to this bill.

1 The next thing I want to say is that this is
2 about gender-affirming care. This is what this is at
3 the heart of the bill. And on behalf of all my trans
4 brothers and sisters, gender-affirming care is
5 lifesaving care. And I'll say it again:
6 Gender-affirming care is lifesaving care.

7 The American Academy of Pediatrics, the
8 American Psychological Association, and the American
9 Medical Association all believe this. HB 1421 is
10 another attempt at transgender erasure. It is a bad
11 faith effort to put gender-affirming care out of reach
12 for consenting transgender adults, dramatically
13 altering services from health care providers to adults
14 who have received gender-affirming care, and is
15 punishing providers with revocation of their license
16 for helping parents to provide gender-affirming care,
17 aka lifesaving care, for their kids.

18 You are revoking the parental right to make
19 these decisions for their children. So here's my
20 question: You believe in parental rights of what
21 parents? Because from where I stand, it's not for
22 parents of transgender kids.

23 For the people who did not hear me the first
24 two times I said it, gender-affirming care is
25 lifesaving care.

1 Thank you.

2 VICE CHAIR PERSONS-MULICKA: Thank you.

3 Aurelie Colon Larrauri, you're recognized.

4 And for anybody in the audience, if I
5 mispronounce your name, I deeply apologize. And
6 please feel free and please do state your name for the
7 record when you come up.

8 MS. LARRAURI: My name is Aurelie Colon
9 Larrauri. I am the lobbyist for the National Latina
10 Institute for Reproductive Justice, and we are here
11 to oppose this bill.

12 LGBTQ justice is reproductive justice.
13 Sistersong defines reproductive justice as *the human*
14 *right to maintain personal bodily autonomy, have*
15 *children, not have children, and parent the children*
16 *we have in safe and sustainable communities.*

17 Trans folks, including trans youth, should
18 have the human right to maintain personal bodily
19 autonomy. However, the Florida legislature continues
20 to attack trans Floridians, especially trans youth.
21 And this isn't happening just in Florida. A review
22 from the ACLU finds that state lawmakers have
23 introduced at least 85 bills this session to restrict
24 gender-affirming care, up from 43 bills last year and
25 32 in 2021. This is a coordinated effort to take away

1 the bodily autonomy of trans folks.

2 We know that people of all genders need
3 access to comprehensive reproductive health care.
4 That includes abortion and contraception. And they
5 need policies that support parents and families.

6 Trans youth also need access to
7 gender-affirming care to make their own medical
8 decisions about their bodies in the future, including
9 their reproductive features.

10 Please oppose this bill.

11 Thank you.

12 VICE CHAIR PERSONS-MULICKA: Thank you for
13 being here.

14 Up next is Sara Gordon, followed by Jillian
15 McPherson.

16 Sara Gordon? Oh, take your time.

17 You are recognized.

18 MS. GORDON: Hi. My name is Sara Gordon.
19 I live here in Tallahassee.

20 Shame on you for thinking that you get a say
21 in the conversation between these children and their
22 parents and their medical team.

23 VICE CHAIR PERSONS-MULICKA: Thank you.

24 Jillian McPherson. And after Jillian,
25 we'll have Jay Hart.

1 MS. MCPHERSON: Good afternoon.

2 My name is Jillian McPherson, and I'm
3 speaking in opposition to this bill today for myself
4 as a student from Florida State University.

5 It is so absolutely tiring to see attack
6 after attack on basic human rights for those who
7 aren't a white cis gender male.

8 My younger sibling identifies as nonbinary,
9 and they hope to one day get affirming treatment.
10 Now, this dream of theirs is severely threatened, and
11 it hurts me to know that they live in a state which
12 doesn't support their personal identity and ambitions.

13 It is so sad to have to speak about this
14 today, and I want them to get this gender-affirming
15 care because it is not just a phase; it is not just
16 a trend; it is a genuine feeling that LGBTQ members
17 feel, including minors.

18 I can't handle this, and this bill will force
19 detransition on trans youth. Transition care saves
20 lives, and this bill is ignorant to this fact.

21 To add onto this, my friend here who is
22 sitting here in this room today identifies as
23 nonbinary, and they recently received their insurance
24 estimate for their top surgery. Before their
25 insurance coverage, the total cost was \$70,000. After

1 it is now only \$2,000. Because of this bill, their
2 reauthorization may be denied for their surgery.

3 To insinuate that this bill does not affect
4 their choice -- their choice to get gender-affirming
5 care is insanity.

6 In an article written by the American
7 Psychological Association, many authors come to the
8 conclusion that with barriers to gender-affirming
9 care youth will experience a myriad of mental health
10 presenting concerns such as depression, anxiety, and
11 gender dysphoria.

12 Gender-affirming care is affirming, and it
13 is care. Let me repeat myself: Gender-affirming care
14 is affirming, and it is care.

15 Please oppose HB 1421. I truly do not want
16 my own family and friends to be in danger of not
17 receiving their necessary health care. No matter
18 the outcome on this bill today, we will fight
19 back.

20 Thank you.

21 VICE CHAIR PERSONS-MULICKA: Thank you for
22 being here.

23 The record will reflect I called Jay Hart,
24 and Jay reminded me that he already spoke. And
25 thank you again for being here.

1 Up next is Yenisbel Vilorio, State Innovation
2 Exchange Action.

3 You are recognized.

4 MS. VILORIO: Thank you.

5 Hello. My name is Yenisbel Vilorio, and I'm
6 here on behalf of State Innovation Exchange Action to
7 ask that you vote no on HB 1421.

8 This bill is an extreme government overreach
9 across state mandates that undermines parental rights,
10 medical freedom, and limited government. Blanket bans
11 on gender-affirming care deprives families of the
12 medical freedom to choose the appropriate prescribed
13 treatment for their family's needs, medically necessary
14 care that is often lifesaving.

15 This bill and its broad bans also drastically
16 reduce health care for transgender adults, a dangerous
17 precedent for government interference and personal
18 decisionmaking. It bans the use of telehealth for
19 gender-affirming care, which is critical to access
20 given the small number of providers in the state.
21 It also bans qualified nursing professionals from
22 administering gender-affirming care to informed
23 consenting adults.

24 This is a wrong and detrimental barrier to
25 access for even adult transgender Floridians, many of

1 whom already face massive disparities in accessing
2 essential medical care.

3 Free states don't deny parents custody or
4 imprison doctors over widely accepted health care for
5 children that is lifesaving. This country already
6 has a long history of weaponizing state child welfare
7 agencies to the detriment of children and their
8 families, such as by using them to tear Native
9 children from their families to place them in
10 nonNative homes in an attempt to erase Native
11 communities and cultures. And this bill is just
12 another version of that shameful past.

13 The State of Florida is failing our children
14 right now by neglecting them and using them as pawns
15 for political points, from the affordability crisis
16 and childhood poverty, to the school [audio cut out]
17 pipeline, to the failure to address gun violence and
18 mass shootings, to kidnapping and trafficking
19 immigrant children for political stunts, to forcing
20 young people to beg a judge for abortion access and
21 being denied access based on their grades, to
22 Florida's foster system providing dangerous sex
23 traffickers with easy access to vulnerable children,
24 and now banning basic lifesaving gender-affirming
25 care for transgender children.

1 Every Floridian, regardless of race, gender,
2 and class, has a right to health care. As legislators,
3 each of you has some of the best, most affordable
4 health care in the state. Yet the leadership in this
5 legislature continues to deny health care access to
6 Floridians, from the legislature's refusal to expand
7 Medicaid, fully fund the agency for persons with
8 disabilities, Medicaid waiver wait list, to the
9 constant expansion of abortion bans and
10 gender-affirming care bans.

11 Health care is a right. Health care is
12 personal. Health care decisions should be made
13 between a person, their family, their faith, and their
14 doctor, not politicians.

15 This bill is one of many cruel state mandates
16 targeting our children that will put them at risk of
17 harm, and it is your duty as lawmakers to protect
18 Floridians, not hurt them through extreme legislation.

19 I urge you to vote no on this harmful bill.

20 Thank you.

21 VICE CHAIR PERSONS-MULICKA: Thank you for
22 being here.

23 Chernice Robertson, followed by Laura Fellman.

24 You are recognized.

25 MS. ROBERTSON: Thank you.

1 Hi. My name is Chernice Robertson, and I am
2 currently a student at Florida Agricultural and
3 Mechanical University where I currently study
4 sociology.

5 As a cis woman, I fully oppose this bill.
6 You are robbing people, both cis and trans people, of
7 their right to bodily autonomy. This is a
8 reproductive injustice.

9 I could tell you numerous stories of trans
10 youth who have killed themselves because of bills
11 like this and the stigma surrounding that type of
12 care, and not because of the care that they have
13 received. But you have failed to listen to my trans
14 siblings. My heart breaks to see trans people, and
15 especially trans youth, in pain and distress because
16 of bills like this. And the amount of suicides that
17 I have seen as of late is upsetting.

18 My friends should be able to be themselves
19 without fear and shame. So I beg you to please vote
20 no on this bill.

21 Thank you.

22 VICE CHAIR PERSONS-MULICKA: Thank you for
23 being here.

24 Laura Fellman, followed by Lori Pettingill.

25 You are recognized.

1 MS. FELLMAN: Thank you.

2 Speaking on behalf of Florida PTA.

3 Florida PTA speaks with one voice for every
4 child. We stand in opposition to this bill which
5 discriminates against trans individuals. PTA opposes
6 this discrimination based on gender identity and
7 gender expression. Numerous medical organizations
8 have determined that gender-affirming care is
9 necessary and lifesaving. Children and their parents
10 need to be the determinants of their gender identity
11 change efforts. When they are not, these children
12 suffer from anxiety, depression, and suicide.

13 Requiring children to undergo treatment to
14 reverse their gender-affirming care or treatments
15 does harm to children and undermines parents' and
16 children's rights. PTA believes that all children,
17 all trans children, all trans adults should be able
18 to access lifesaving health care and interventions.

19 VICE CHAIR PERSONS-MULICKA: Thank you.

20 Lori Pettingill, you are recognized.

21 MS. PETTINGILL: Thank you very much.

22 I am here in support of HB 1421, and I'm very
23 excited that we're entertaining this bill.

24 On June 3 of last year, Ron DeSantis, our
25 Governor, he was seeking to block transgender youth

1 from irreversible transition-related therapies. He
2 was elected with a large percentage of Floridians,
3 and I think that speaks volumes to the people in this
4 state who want to see this end with our children,
5 the genital mutilation, the mutilation.

6 I have an excellent correspondence that I
7 would like to share with you, because what it
8 addresses is the exclusion of a family member in the
9 communications. And this happened in Miami, University
10 of Miami Health Center, the Tower Hospital.

11 The correspondence goes as this: *Good*
12 *morning.*

13 *I am the mother of a transgender child. Our*
14 *psychologist recommended we reach out to the University*
15 *of Miami for more information about your service for*
16 *trans health for our 16-year-old son. We are*
17 *interested in gender-confirming surgery for his*
18 *transition, female to male, particularly top and*
19 *bottom surgery.*

20 *I just spoke with Natalie who was very*
21 *helpful and answered so many of my questions. I*
22 *understand that for gender-confirming surgery,*
23 *parental consent is required. Do we need both*
24 *parents' consent for all procedures? I am worried*
25 *my son's father will not support the decision to*

1 transition. Is my consent and the two letters from
2 the psychologist enough?

3 Thank you.

4 The reply was: Good morning. Thank you
5 for your email.

6 Please be assured that your consent is
7 adequate and, more importantly, you have contacted
8 the best organization for his medical transition.
9 Our gender-affirming team --

10 VICE CHAIR PERSONS-MULICKA: Ma'am, I'm
11 sorry to interrupt you, but please keep your testimony
12 to your own words and not reading somebody else's
13 testimony.

14 MS. PETTINGILL: Oh, I can't read that they
15 said the father is not needed, or mother? We don't
16 even know what gender these people are. I'm sorry.
17 I didn't understand that.

18 Well, anyways, what it says is that it won't
19 be necessary to have the other parent included in
20 this decision and this service. And to me, I think
21 that is how you break up families, that's how you ruin
22 families, and that's kind of a tool of the devil and
23 a human rights campaign.

24 And please, please, support this bill. It's
25 a great bill.

1 And I'm sorry. I was unaware that I could
2 not read this.

3 VICE CHAIR PERSONS-MULICKA: Thank you for
4 being here. And my apologies for not stating that in
5 the beginning of testimony.

6 So thank you.

7 I have a number of public appearance cards
8 that I will read into the record either waiving in
9 support or opposition to the bill. But that concludes
10 the public appearance cards that I received today
11 requesting to speak.

12 Is there anyone else in the audience who
13 wishes to speak today on this bill before I read the
14 appearance cards into the record?

15 Please come up. Please come up to the
16 podium.

17 I can see you now.

18 Please state your name for the record. And
19 then afterwards we'll have you fill out an appearance
20 card to take up to the Sergeant.

21 Thank you. You are recognized.

22 MS. MAJOR: My name is Ginger Major.

23 On March 5, I gave up custody of my
24 17-year-old child in order to keep them safe from the
25 tyrannical actions of the State. They asked me to

1 speak for them today and to remind every queer child,
2 teen, and adult who hears this you matter, you are
3 loved, and we stand united.

4 They have one question for you: Is America
5 still the land of the free?

6 I have questions too. Why in the state of
7 Florida am I allowed to homeschool my child, deny
8 them vaccinations based on my religious beliefs,
9 indoctrinate them from birth into ideologies that
10 practice a lack of empathy and understanding, consent
11 to a cis gender child getting breast augmentation or
12 reduction surgery at age 16, consent to my minor child
13 getting birth control, but now I am not allowed to
14 make medical decisions with my child regarding their
15 private endocrine treatment by specialized teams of
16 doctors? I'm not allowed to even educate them about
17 how they are not bound to a binary social system that
18 arbitrarily tells them who they have to be and how
19 they're supposed to look.

20 I'm not allowed to ensure that my captive
21 health insurance tied to my employment, that I have no
22 choice in, covers it. I don't want to cover Viagra or
23 penile implants. Are you going to take those
24 out, too, to make it fair for me if we're going to
25 limit genital treatment?

1 I don't want my child or anyone's child to
2 suffer the way that I did, being forced to hide who
3 they are and gaslit that they're mistaken because we
4 refuse to stay in the boxes you demand, that a
5 bunch of grumpy older White people who are angry that
6 the world isn't the way that they want it to be.

7 I assure you that at 17 years old if my
8 child is able to consent to getting married or joining
9 the Armed Forces, they can consent to a breast
10 reduction, whether because their spine is curved from
11 the weight or because they don't like them, and
12 hormones to prevent pregnancy or to align their gender.

13 Life may come with regrets, and that is
14 something we are allowed to risk in our own autonomy.
15 SSRIs and Tylenol could kill your child, and I don't
16 see any of these arguments being made to deny those in
17 standards of care. Life comes with risks.

18 I'm going to be here as much as possible.
19 I'm going to pester you within the legal limits of the
20 law. I'm going to protest you. I'm going to flood
21 you with facts and with the personal stories of every
22 trans person whose death has been caused by the hatred
23 that you and your colleagues espouse. I'm going to
24 make it my mission for you to be as uncomfortable as
25 you make me and how uncomfortable you made my child,

1 so much that they had to leave the state.

2 I may not be able to change your minds today,
3 but I will hold you accountable for the effects of
4 what you seek to do.

5 Thank you.

6 VICE CHAIR PERSONS-MULICKA: Thank you for
7 being here.

8 Is there anyone else from the public who
9 wishes to speak?

10 Please come up to the podium and state your
11 name for the record. And, again, after you speak
12 please fill out an appearance card so we have that
13 information from you.

14 MS. MILLER: Teresa Miller. And I wasn't
15 sure I would make it. I didn't fill out a card, but --

16 VICE CHAIR PERSONS-MULICKA: You're
17 recognized.

18 MS. MILLER: So several years ago -- ten
19 years ago, I got my master's in mental health
20 counseling. And one of the classes I went to was --
21 it had some transgender people, and this one man
22 transitioned as a much older person, and he talked
23 about losing his family and how it was a huge mistake
24 and he couldn't go back and change what he had done.
25 And someone asked him, Did it bring you the happiness

1 you wanted? And he goes, No, but I can't change what
2 I've done.

3 A lot of these suicides are not because
4 they're picked on or bullied. It's that it doesn't
5 bring them the happiness that they expected to
6 see, and they go into depression, and it's horrific.
7 We need to help these kids identify as who God made
8 them and help them, not provide them these tools when
9 they're confused and don't know what to do with their
10 life.

11 So I do wholly support this bill.

12 Thank you, Representative.

13 VICE CHAIR PERSONS-MULICKA: Thank you for
14 being here.

15 Please come up to the podium. And, again,
16 state your name for the record and afterwards please
17 fill out an appearance card.

18 You are recognized.

19 MR. WALKER: Thank you.

20 I hadn't planned to speak today. My name is
21 Jeff Walker, and I've listened to both sides, and
22 what I can -- what I would like to speak about today
23 is my lived experience as the father of a trans kid.
24 I would like to tell you what it was like to go
25 through that journey.

1 Several years ago my daughter came to us, and
2 she believed she was trans. And I'm just a regular
3 guy. Right? I work a lot, and I do a lot of things
4 that people like to do. I like to go on vacation.
5 I like to go out to eat.

6 I have another older child, my son, who's in
7 the National Guard. You know, I'm proud of both
8 of my kids.

9 So what did we do? We went to our trusted
10 pediatrician and said, Look, we don't know what to do
11 here. Can you help us? Because four or five years
12 ago, none of this discussion was really going on.
13 And he referred us to a gender clinic.

14 And I remember the drive. It was a two-hour
15 drive to that first appointment, and we had absolutely
16 no idea what to expect when we walked into that
17 doctor's office. My entire family was gripped in
18 fear because we wanted to support our child. And I'll
19 never forget leaving there with this incredible sense
20 of peace. Because these doctors -- and I can't speak
21 to every trans parent or every trans kid in the world,
22 but I can speak to mine. The doctors in the first
23 five minutes guaranteed us they would not talk about
24 surgery until our child was no longer a minor. And
25 they talked about what the journey looked like, and it

1 was a very methodical process. No one gave my kid a
2 prescription on the first day. In fact, it was
3 several years.

4 But what did they do in this treatment? They
5 talked with my child. They let them know, If you
6 decide to change your mind, it's okay. No one is
7 going to be mad at you.

8 And as we've gone through this journey, they
9 have every step of the way -- even through the
10 pandemic -- been there beside us. No one has
11 pressured my kid to do anything they weren't
12 comfortable with. And we have looked at every single
13 piece of care to ensure it was right for our kid and
14 to make sure that they felt comfortable with it.

15 So, again, I can't speak to everyone, but in
16 our case -- my child is now a sophomore in high school.
17 She is one of the top ten debaters in the state. She
18 is thriving with a group of friends who love and
19 accept her. And when I look at her, all I see is
20 just a happy teenager, and that's all I want for my
21 kids is to be happy in who they are.

22 So if you vote for this, you're voting for
23 people like me to no longer be able to help my kid
24 and go to people I trust as medical professionals,
25 people that, with the exception of this type of

1 medical care, are pointed to as no matter what's
2 going on, you should believe in doctors, unless it has
3 to do with trans rights, because then they're wrong.

4 I don't understand that. How are they right
5 about everything else -- about diabetes, about cancer,
6 about a broken arm, about strep throat, about the
7 flu -- but wrong about this?

8 I implore you to vote no and vote this down
9 so that kids like mine can continue to grow up happy.

10 Thank you.

11 VICE CHAIR PERSONS-MULICKA: Thank you for
12 being here.

13 And please, again, if you spoke to the
14 podium, please do fill out a card so we have your
15 information for our records.

16 Is there anybody else in the audience who
17 wishes to address the committee today?

18 Please come up to the podium and state your
19 name for the record and then fill out an appearance
20 card afterwards.

21 You are recognized.

22 MS. CHARLOTTE STUART-TILLEY: I had no idea
23 I was going to speak. I decided this like ten seconds
24 ago. But what I will say is I'll speak from my
25 personal experience of who I am as a 17-year-old.

1 VICE CHAIR PERSONS-MULICKA: And I don't
2 want to interrupt you, but please share your name
3 with us.

4 MISS CHARLOTTE STUART-TILLEY: Sorry about
5 that. My name is Charlotte Stuart-Tilley. You may
6 have heard my mom, Alana, speak earlier.

7 For a few years I believed that I was
8 nonbinary, and now I'm here to say that I'm not. And
9 I have a lot of people in my life who are transgender
10 who have transitioned and who this has been good for
11 them. This has changed their lives. They've gone
12 from really, really depressed people to happy,
13 successful people.

14 For me that was not the case. I think the
15 issues that -- oftentimes we generalize what teenagers
16 look like or what their needs look like. And for some
17 teenagers this might be coming out of insecurity. For
18 some teenagers this might be a trend. But for the
19 majority of teenagers, this is who they are, and this
20 is best for them.

21 That's about all I have to say.

22 I also feel that this bill focuses a lot on
23 children when, in reality, if you look at the bill
24 language itself, it ends up limiting adult health care
25 as well. And adults are consenting, and adults are

1 able to make their own decisions for their own bodies,
2 and I think that's a fatal flaw within this bill.

3 Thank you.

4 VICE CHAIR PERSONS-MULICKA: Thank you for
5 being here.

6 Are there any other persons who wish to
7 address the committee?

8 Seeing none, I'm going to turn to the
9 appearance records submitted either waiving in support
10 or opposition.

11 The following persons have submitted
12 appearance records waiving in opposition to the bill:

13 David Poole representing AIDS Healthcare
14 Foundation.

15 Jonathan Webber representing SPLC Action
16 Fund.

17 Kara Gross representing American Civil
18 Liberties Union of Florida.

19 Jackson Oberlink representing Florida Rising.

20 Karen Woodall representing Florida Center
21 for Fiscal and Economic Policy.

22 Jamie Harmon representing Florida PTA.

23 Lucy Bravo representing Florida PTA.

24 Sylvia Weber.

25 Annie Filkowski representing the Florida

1 Alliance of Planned Parenthood Affiliates.

2 And that concludes the appearance records
3 that we received waiving in opposition.

4 The following persons have submitted
5 appearance records waiving in support:

6 Aaron DiPietro, Florida Family Policy Council.

7 Jorge Chamizo representing Do No Harm.

8 Teresa Miller representing Embrace Life 911.

9 Is there anybody else in the audience who
10 submitted an appearance card that I missed?

11 Seeing none, that concludes our public
12 comment on the bill.

13 Members, we are now in debate on the bill.

14 Representative Dunkley, you are recognized
15 in debate.

16 REPRESENTATIVE DUNKLEY: Thank you, Chair,
17 for the recognition.

18 Representative Fine and Representative
19 Massullo, I wanted to make my comments regarding this
20 bill. I think my concern for this bill is with the
21 extension of the policy to regulate consenting adults
22 for their care which I, unfortunately, do not
23 support today.

24 And that's my debate.

25 VICE CHAIR PERSONS-MULICKA: Thank you,

1 Representative.

2 Representative Woodson, you're recognized in
3 debate.

4 REPRESENTATIVE WOODSON: Thank you, Madam
5 Chair.

6 Members, this is a very critical issue that
7 we are discussing today, and we need to realize how
8 critical this issue is for the minors and also for
9 their families.

10 It seems that we are going against
11 recommendations made by the Board of Medicine. We are
12 denying parents of their fundamental rights to make
13 such major decisions that impact their children.

14 We often talk about parental choice, but in
15 this case we are doing completely the opposite. This
16 is an issue of parents' rights and medical freedom.
17 We are forcing those minors to detransition, and it
18 is wrong. This is not a joke. This is a
19 life-and-death situation. And we will be seeing more
20 issues arising as a result of our actions today.

21 If parents have consulted with their doctors
22 and their children and determined that accessing this
23 health care is in the best interests of the child, the
24 State should not be overruling parents to take away
25 that health care. We are talking about individuals

1 who are happy with their care and accessing it with
2 the State's required written parent consent, consent
3 for treatment of a minor. That is a decision for the
4 parents and not for us to make.

5 Trans children have rights just like any
6 other children, and we have to make sure we are fair
7 to all children. They deserve to be acknowledged.
8 They deserve to be respected. Every single one of us
9 here knows someone who is either an LGBTQ+ person
10 or is a transgender. Are we saying that we can get
11 whatever care that we want and they can't? We are
12 restricting their care. We are not only making these
13 minors and their families feel uncomfortable, we are
14 infringing upon their rights.

15 Maya Angelou said: *Do the best you can until*
16 *you know better. Then when you know better, you do*
17 *better.*

18 We know better. We know. We have heard from
19 parents, from children how this will impact their
20 lives. It's not how we feel. It's how the parents
21 and the children feel. If they feel that's the best
22 decision for them -- we heard a parent came and
23 testified how this has impacted his life and his
24 daughter's life. We have heard so many other people
25 speak about that. Let's try to do better because we

1 know better.

2 Thank you.

3 VICE CHAIR PERSONS-MULICKA: Members, any
4 additional debate?

5 Representative Snyder, you're recognized in
6 debate.

7 REPRESENTATIVE SNYDER: Thank you, Madam
8 Chair.

9 And thank you, Chair Fine and Dr. Massullo,
10 for bringing this bill forward.

11 I wasn't originally going to talk about this,
12 but when I think about just -- especially here in
13 this committee -- the presentations that we've heard,
14 when we go back -- and I think we cannot disconnect
15 this conversation that we're having today from the
16 conversations we had earlier several weeks ago about
17 the harmful effects that we know that social media is
18 having on our kids.

19 Take this conversation away, there's near
20 universal agreement that what is happening on social
21 media and the hooks and the addictive nature in
22 which those platforms have been created, how that --
23 and when you come into this conversation again
24 continues to target our children. And you can't help
25 but sit on this committee and hear the conversation

1 that's happening today.

2 And to the gentleman who so eloquently spoke
3 about his daughter and their experience, I think it's
4 a -- we must be clear on what this bill talks about.
5 Nothing in this language prevents a parent whose
6 child is experiencing gender dysphoria from going and
7 seeking care from a licensed psychologist or a
8 licensed social worker to be able to talk through
9 those issues and to receive that ability to talk
10 through what that could look like.

11 But when I think about, you know, again as
12 a father of a young daughter, the notion that we know
13 that there are paid promoters and individuals that are
14 making money targeting our children -- and the numbers
15 don't lie. We can see in the last couple of years an
16 exponential jump of our children who have been
17 targeted by this agenda who -- in my deeply held
18 conviction, minors cannot consent to puberty blockers
19 or irreversible surgeries.

20 And so all we're doing in this bill is
21 saying, If you want to explore and seek out resources
22 for the dysphoria that you're experiencing as a minor,
23 feel free to do so. But we've also heard -- and I
24 think it's ironic how selectively we want to choose
25 the stories that we want to listen to. But we've

1 also heard testimonies of minors who are begging and
2 are pleading with us, Please do not allow other
3 children to be led down the same road that my parents
4 and I were.

5 And so, Members, to follow up with that quote
6 on Maya Angelou, you know, when we know better, we
7 do better. And when it comes to this issue, Members,
8 we just don't simply know. We don't know. The
9 science is not settled.

10 And so, in my opinion, there's nothing better
11 we can do than to say until we know -- and I believe
12 we're seeing what the science is truly revealing --
13 let's hold the door, wait until you're 18. At that
14 point you can do to your body whatsoever you choose
15 to do when it comes to gender dysphoria.

16 But in the state of Florida, when it comes
17 to our children, we're going to be stand up for
18 their innocence.

19 And with that, Members, I urge your favorable
20 support.

21 VICE CHAIR PERSONS-MULICKA: Representative
22 Gantt, you're recognized in debate.

23 REPRESENTATIVE GANTT: Thank you, Madam Chair,
24 for recognizing me.

25 I just want to first start off by saying

1 thank you to everyone who shared their personal
2 experience. It takes courage to come up and speak in
3 a public forum and to be vulnerable and share your
4 story. So thank you. And that goes on both sides.

5 I agree with Rep. Snyder's point that we do
6 have to listen to both sides, and when we listen to
7 both sides, we have to be confident in the parents to
8 choose the best decisions for their child.

9 And that's the crux of it all, giving parents
10 who have the most intimate relationships -- or one of
11 the most intimate relationships, a parent and child --
12 the ability to say, No, not yet. Wait until you're an
13 adult. But I will support you in this to seek out
14 providers who are specialists and who received
15 training and education to be able to consult with
16 different people all across the spectrum to inform
17 them so that they can make the best decision.

18 I think that, you know, when we talk about
19 freedom, freedom isn't just what you like or agree
20 with. When my brother did his two tours in Iraq and
21 Afghanistan, respectively, he was a different man.
22 And I said something flippant to him, and he was like,
23 You know what, I didn't do two tours so that you could
24 say all that slick stuff you are saying to me. I did
25 it so that you could have freedom.

1 And he kind of humbled me when he said that
2 because it's true. Our veterans who have fought, who
3 have served, who continue to fight and serve and who
4 have died, they did it so that we could have freedom
5 and boast about this freedom. And that doesn't just
6 encompass freedom that we agree with.

7 So when we are talking about what's in this
8 bill, I offered an amendment that would allow adults
9 to continue to receive treatment -- and I'm not going
10 to go ahead and play that game of semantics. I'm sure
11 it will be followed up -- but gender-affirming care
12 and treatment. They have the ability to make that
13 decision with the specialists who we listen to in any
14 other respects. And we have to honor that and not
15 limit that.

16 As a body we don't just serve the people that
17 we agree with or that look like us or talk like us or
18 have the same experiences as us. We serve everyone in
19 our constituency in our respective districts, and we
20 also serve Floridians in general. And Floridians
21 come in all different flavors and sizes and
22 experiences. And this bill limits the opportunity
23 for them to be their authentic selves, especially when
24 you're talking about medical freedom and access to
25 medical care as adults.

1 So, you know, it's a lot of gaslighting that
2 happens a lot with -- you know, when we talk about
3 parental choice. And this is essentially hindering
4 parental choice and the ability to have parental
5 choice. And you don't have to agree with it, and you
6 don't -- you can disagree with it. You don't have
7 to agree with it. I think I said the same thing
8 twice, but you all get my point.

9 You can not cosign it and still allow that
10 parent to be the person that makes the ultimate
11 decision for their child. And this bill does not
12 allow that. This bill is essentially tantamount to
13 the legislature bullying parents. And bullying is
14 the origin of the villain.

15 And so what are we going to look like --
16 what are we saying to our children who will go into
17 a world that's not just Florida and will have these
18 different experiences with people from all across the
19 United States? Because, conceivably, we want our
20 children to go off to not just schools in Florida,
21 but schools out of the state or take jobs all over
22 the world and boast about what we have to offer here
23 in Florida. How are they going to be able to accept
24 others and their experience if we use these personal
25 justifications for not liking something and

1 restricting the ability for someone to live their
2 authentic experience.

3 I hope -- well, I won't even say I hope. I
4 will be down on this bill today. I urge my colleagues
5 to be down on this bill, for whatever that's worth.

6 And I just want the people who are personally
7 impacted by this bill to know that you are valid.
8 You are valuable. I see you. I hear you. And thank
9 you for using your voice, even if it feels like you
10 are using it in the face of insurmountable opposition.

11 Thank you.

12 VICE CHAIR PERSONS-MULICKA: Representative
13 Amnesty, you're recognized in debate.

14 REPRESENTATIVE AMNESTY: Thank you, Madam
15 Chair.

16 Representative Fine and Representative
17 Massullo, I just want to thank you for this
18 extraordinary bill. It's a common sense policy. The
19 kids of the state of Florida are not guinea pigs to be
20 used for science experiments. So, truly, thank you
21 for standing up and for defending every child in the
22 state of Florida.

23 We must -- I urge my colleagues across the
24 aisle to also vote in favor of this extraordinary bill.

25 Thank you.

1 VICE CHAIR PERSONS-MULICKA: Ranking Member
2 Skidmore, you are recognized in debate.

3 REPRESENTATIVE SKIDMORE: Thank you, Madam
4 Chair.

5 Thank you everyone who came today and stayed
6 here, especially Rep. Casello who is just waiting for
7 his bill to be heard. But thank you for sharing
8 your personal stories, again on both sides.

9 And we just disagree. We both think that
10 we're protecting children. We both think that we're
11 protecting parents. We just disagree on how we do
12 that.

13 We have one detransitioned person here, and
14 she has a compelling story to tell. But over the
15 course of this hearing and the previous hearing, we've
16 heard from dozens of transitioned folks who are living
17 a beautiful life. They made the right decision. They
18 made the best decision for themselves, along with
19 their parents.

20 And what I don't like is taking that right
21 away from people. I don't like getting in between
22 people and their doctors. You know this about me.
23 I'm anti scope of practice. I'm anti getting in
24 between a personal decision that someone is going to
25 make about their health care, whether it's abortion,

1 Madam Chair, whether it's this nontransgender care
2 bill, because we're not calling it that. We're just
3 going to fundamentally disagree on what people's
4 rights are in terms of their health care, in terms of
5 their future, in terms of their self-determination.

6 So I will vote against this bill because
7 I will be consistent in my beliefs. I will vote for
8 every person who's here to be able to make their own
9 decision about their future.

10 And I think that there are maybe some things
11 we could do that we could agree on in terms of
12 transgender youth care. Maybe there are some things
13 that we could come together on and agree on in terms
14 of that. But taking every decision and right away is
15 not where I would have started.

16 So I appreciate everyone who came to tell
17 their story. You were heard. You were listened to.
18 You were actually listened to by both sides of this
19 policy decision, and we are just going to have
20 different opinions on which way to go.

21 I am not going to villainize someone who has
22 a different opinion than me, and I hope you won't
23 either.

24 VICE CHAIR PERSONS-MULICKA: Whip Salzman,
25 you're recognized in debate.

1 REPRESENTATIVE SALZMAN: Thank you, Madam
2 Chair. I'll just be brief.

3 I just wanted to reiterate some things that
4 were said from the podium.

5 And I do appreciate my PTA counterparts.
6 I can tell you that we are the heart and soul of
7 public education, and I am and will continue to be a
8 proud member of the PTA. And I just participated in
9 a PTA carnival last weekend, and I'll be volunteering
10 again this coming weekend at another local PTA.
11 And, like I said, I am a member.

12 But I just wanted to clarify, we meet once a
13 year. You can submit your requests for resolutions,
14 which means that we resolve that we will support
15 certain things.

16 In 2016, we resolved -- let me get to it --
17 that we should support all children, LGBT -- I think
18 we added Q at some point, but we resolved that we love
19 and support all children. Now I would say that we
20 all on this dais agree that we love and support all
21 children. Right?

22 But in 2019 -- this is very important that
23 I make this clear, because it is the only -- there's
24 only two resolutions that the Florida PTA did.
25 In 2019, *Sexual orientation reparative therapies and*

1 youth conversions therapy ban. The Florida PTA and
2 its constituent associations will hold education
3 programs to inform families and youth about the
4 harmful impact of sexual orientation therapies on our
5 LGBTQ youth. Florida PTA and its constituent
6 associations advocate for and support legislation and
7 policies that protect our youth from the harmful
8 effects of therapies directed at changing sexual
9 orientation, period.

10 I was a board member of the Florida PTA for
11 several years. I'm still a part of the PTA. And at
12 some point we switched directions. We partnered with
13 Equality Florida many years ago, who at one time was
14 really only about making sure all children mattered.
15 We love all children equally. Whatever they identify
16 as, we know that they deserve love just as much as
17 any other child, and that's what we supported.

18 But at some point we have gone off the
19 bandwagon. I don't know what's going on with Equality
20 Florida, because it's not about equality anymore.
21 It's about only the minority. And that's not how we
22 create equality.

23 But I just wanted to clarify that, Madam
24 Chair and members of the board -- or members of this
25 committee. The Florida PTA has no resolution that

1 says we support transgender sex changes for children,
2 none whatsoever. And I know my constituents back
3 home would be very happy to hear that.

4 Thank you.

5 VICE CHAIR PERSONS-MULICKA: Members, any
6 additional debate?

7 Additional debate?

8 As we conclude our debate, I also want to
9 say thank you to the members of our public who came
10 to our committee today. Thank you for being patient
11 while you waited for your time to testify, and thank
12 you for showing respect while others testified and
13 while the members of our committee debated today.

14 And with that, Chair Fine, Chair Massullo,
15 you are recognized to close on this bill.

16 REPRESENTATIVE MASSULLO: Thank you, Madam
17 Chair, Members.

18 And I also want to thank everyone from the
19 public that showed up to testify today. And I know
20 Chair Fine feels the exact same way.

21 Even though we disagree -- and I would say
22 for myself, I disagree vehemently with some of the
23 things that were said because I do not see them as
24 being true. But whenever we have a debate, we
25 oftentimes go to extremes. And I think as members of

1 a legislative body, we need to bring ourselves down
2 to what we're actually looking at in this bill.

3 We've said, and you've heard us say, this
4 bill isn't about care, because we do believe that
5 there are legitimate gender-affirming care that many
6 children need today. And when you look at the reasons
7 why they need it, you're even more convinced that it
8 is something that we need to provide.

9 There are many, many comorbidities with
10 these children. There's depression. There's autism.
11 There's anxiety. There's environmental problems.
12 There's problems in their family, all these things.
13 And as Rep. Snyder said so well, there's pressures in
14 our society.

15 Last week I heard Chair Fine talk about the
16 culture war that we are involved in, and it is a war.
17 It's a war for the hearts and minds of the people
18 that make up this country, this free country of
19 America. And we do have freedoms, but those freedoms
20 come with responsibilities. And we don't have a
21 freedom to harm children, and that is what primarily
22 this bill is about.

23 It's not about giving children that may have
24 some confusion about their gender care that might
25 help them affirm their gender. It's about care that

1 has been distorted to the point where it is abuse.
2 It's abuse medically by trying to change a child's
3 physiology, and it's abuse surgically by changing
4 their bodies with circumstances that actually are
5 irreversible.

6 And when we look at the fear of depression,
7 the fear of suicide and, Oh, you're going to be
8 killing kids, just pick up the newspaper or a
9 magazine and see how many of these adults that have
10 been through transition are killing themselves.
11 You've heard testimony that it's 19 times more than
12 those individuals that do not transition, because the
13 true problem isn't addressed.

14 And what is that? There's a void in us as
15 human beings that we so desperately want to fill, and
16 there's many ways that we fill that void. We
17 oftentimes with many of the people up here fill it
18 with our jobs. We fill it with our families. We fill
19 it with the sense that we're doing the right thing.
20 But oftentimes that isn't what we fill it with. We
21 fill it with a distorted view of ourselves. All
22 those things are idols. All those things can be
23 wrong.

24 Our job, Members, is to filter through to
25 the truth. And there is a distortion in right and

1 wrong in today's world. But you can't distort what's
2 true and false. You can't change your sex. There's
3 only two. There's male and there's female. You can
4 act like someone else. You can look like someone
5 else. Your physiology can maybe mirror someone else,
6 but you can't change your sex.

7 So the issues that you're dealing with are
8 psychiatric, psychological. And that's where we need
9 to concentrate care.

10 Do we know better? The studies show we do.
11 And this isn't Miracle on 34th Street. No one is
12 going to bring in mountains of information supporting
13 those facts. But look at what the rest of the world
14 is doing. Look at what our country is doing. This
15 is child abuse, and it needs to stop.

16 And for those adults, we're not compromising
17 the care they can get. We're just making sure that
18 they're informed of the consequences of that care
19 when they decide to have it.

20 I don't think insurance should pay for it.
21 We certainly do a lot with insurance not paying
22 for things in this body.

23 So what are we harming, except protecting the
24 children from that?

25 CHAIR FINE: Thank you.

1 Thank you, Dr. Massullo. And I couldn't
2 have a better partner to present this bill with. You
3 all should know that he was on the other side of the
4 country this weekend and took a red-eye flight back
5 just so he could be here. I don't think he thought
6 I could handle the bill myself. But, no, I couldn't
7 have a better friend and better partner to do this
8 with.

9 But I also want to thank you, Vice Chair, how
10 you've comported the meeting. It's been extraordinary.

11 And I not only want to thank the public, but
12 my colleagues. I'm actually quite proud of how we've
13 been able to have what is unquestionably a very
14 emotional subject, and I'm very proud of everyone
15 and how you've all comported yourself today.

16 So we were accused of -- Chair Massullo
17 and I -- of why we ran this bill. And I want to talk
18 about that for a couple of minutes.

19 So we were told it's some sort of religious
20 motivation; I'm some sort of Christofascist. I hate
21 to disappoint that I'm Jewish, so I don't qualify on
22 that one. But there's some sort of national
23 conspiracy, that we're sort of part of some national
24 effort to run this bill, along with billionaires
25 around the country.

1 I decided I wanted to run this bill on my
2 own. No one asked me to, no one in a national
3 organization, no other group. It was when I read an
4 article about Dr. Teetus Deletus. That was what led
5 me to do this.

6 And when I read that -- the way that she ran
7 her business, that the way that she attracted her
8 customers was by making videos on TikTok to appeal to
9 teenage girls, talking about how great this was,
10 advocating, marketing, marketing this surgery,
11 marketing it.

12 We heard it doesn't happen. She said it
13 happened 13 times in a year. And I watched these
14 videos. I actually had to borrow my son's TikTok.
15 Fortunately, he took it off afterwards. I don't use
16 it.

17 And when we in this committee asked her to
18 come to explain why this was so great, why this is so
19 good, why she is so proud of what it is that she does
20 every day, she refused to come. Why are you willing
21 to target kids but not talk to adults? That's
22 what drove me to run this bill.

23 We've learned some interesting things in this
24 presentation, actually. One of the things that we've
25 learned is this sort of charade, the sham of national

1 organizations. I'm actually very grateful for the PTA
2 discussion, because it illustrated a lot of this
3 that we use, these weaponizations: The AMA likes
4 this. The Pediatric Association likes this. The
5 PTA likes this.

6 I would posit the theory, no matter your
7 politics, my guess is that parents in this state are
8 probably fairly representative of voters in this
9 state, and you can see how voters in this state voted
10 in the last election. It wasn't with the way we were
11 told the PTA made up their mind in the last 24 hours.

12 But not only that, we've heard the AMA and
13 the pediatrics folks, and they're driven by this
14 group, a group called WPATH, which as you peel back
15 the onion, it is not a scientific group; it's an
16 advocacy group. I actually found a group of 2,000
17 medical professionals, 2,000. I didn't look to see
18 if you were on the list. Actually, no, I don't even
19 think they were general medical professionals. I
20 think they had to be, like, psychologists and things
21 like that who actually worked in this, who disagreed
22 with their, quote/unquote, "recommendations," their
23 recommendations -- they're on version 8 -- which
24 says there's no age too young to take these drugs
25 and there's no age too young to get these surgeries.

1 People say we're getting in the way of
2 parental rights, and you're damn right we are. There
3 is no parental right to do whatever you want. I can't
4 sell my kid into slavery. I can't say I don't want
5 to work; go work in the fields, don't go to school.
6 I can't abuse my kid. I can't marry him off at
7 8 years old.

8 We put guardrails. That's the role of
9 society is to say there are certain acceptable things
10 that parents can do. And in our view, in the
11 majority view, this ain't one of them.

12 It is not medical care to cut off perfectly
13 good body parts. And it is not medical care to give
14 someone drugs that will make them sterile or affect
15 their brain or affect their bone density. That
16 is not medical care.

17 I ask you this. Would our medical societies
18 approve experimental drugs that killed 1 or 2 or
19 3 or 5 percent? They would go, hey, it works for
20 97 percent, but 3 percent die. They don't. They
21 don't. And what we can see over and over and over
22 again, there are a lot of people who reject this.
23 Get it right before you want to do it to our kids.

24 We were told we were taking this care
25 away not only from adults, but from children. This

1 bill doesn't affect an adult's ability to get this.
2 It affects having other people pay for it. But if
3 they want to get these sorts of things, they can do
4 it. But it protects them, because it says they have
5 to have informed consent. The doctor has to make
6 sure they understand what they're doing. But they
7 can still get it. They're adults. They can make
8 their own decisions.

9 And, by the way, when I was asked to run this
10 bill -- we talked about every decision -- there were
11 people -- I wasn't asked. When I filed it and people
12 started talking to me, there were folks who said,
13 Why aren't you going to say a 13-year-old can't go to
14 a psychologist about this? They shouldn't be able
15 to talk about this confusion with a doctor. They
16 shouldn't be able to wear clothes different than what
17 they are.

18 I was asked by people to add that to the
19 bill. And I intentionally chose not to. Why?
20 Because you can wear clothes different than what you
21 are for a year -- and maybe you'll do it until you're
22 18 -- and then you can go do this. But if you change
23 your mind, you haven't done anything you can't undo.
24 Once you have top surgery or, as we heard the example,
25 bottom surgery -- think about that for a minute --

1 can't undo it.

2 You want to go to a psychologist -- and I
3 intentionally made the decision not to say you can't
4 do that. Why? Because you can go to that
5 psychologist, and there's nothing that you'll say
6 in that room, or meet with that doctor, that has
7 irreversible consequences for the rest of your life.
8 If you go through this and you still want to do
9 it, when you're 18, have at it. You're an adult.

10 But there's a lot of talk here about suicide,
11 a lot of talk about suicide: Oh, my gosh, if we don't
12 support this, suicide will go up. Suicide will go up.
13 And I want to expand out for a minute. At the same
14 time we are telling children that all of this is good
15 and all of this is normal and all of this is fine,
16 if you look at all of the statistics, suicide among
17 our children is going up, not transgender children,
18 not certain kinds of children, all children,
19 skyrocketing, particularly amongst our little girls.

20 How's this working out for us? It doesn't
21 seem like what we've been doing is putting us in the
22 right direction.

23 Someone said in public comment that we'll be
24 popping champagne after this bill passes. I take no
25 joy in running this bill. I take no joy that we're

1 in the situation that we're in today. I don't hate
2 the people who do this. I mourn for them. I hurt
3 for them. I hurt that children are so upset in their
4 lives that they think this is the answer.

5 I was one of those children once. Never
6 was tempted to do this, but I understand what it's
7 like to hurt like that. Nineteen visits to the
8 hospital in two years will do that to you.

9 I don't hate these people. But I will close
10 by saying this: We were told by one of our public
11 testifiers that we will come to regret this vote
12 today. On that they are right, because I regret that
13 we didn't do this five years ago.

14 And with that, I ask for your favorable
15 support.

16 VICE CHAIR PERSONS-MULICKA: Chairs Fine
17 and Massullo having closed on the bill, Sabrina,
18 please call the role on CS for House Bill 1421 and
19 announce the vote.

20 THE CLERK: Representative Amnesty?

21 REPRESENTATIVE AMNESTY: Yes.

22 THE CLERK: Anderson?

23 REPRESENTATIVE ANDERSON: Yes.

24 THE CLERK: Baker?

25 REPRESENTATIVE BAKER: Yes.

1 THE CLERK: Clemons?
2 REPRESENTATIVE CLEMONS: Yes.
3 THE CLERK: Cross?
4 REPRESENTATIVE CROSS: No.
5 THE CLERK: Dunkley?
6 REPRESENTATIVE DUNKLEY: No.
7 THE CLERK: Edmonds?
8 REPRESENTATIVE EDMONDS: No.
9 THE CLERK: Gantt?
10 REPRESENTATIVE GANTT: No.
11 THE CLERK: Grant?
12 REPRESENTATIVE GRANT: Yes.
13 THE CLERK: Koster?
14 REPRESENTATIVE KOSTER: Yes.
15 THE CLERK: Persons-Mulicka?
16 REPRESENTATIVE PERSONS-MULICKA: Yes.
17 THE CLERK: Plankon?
18 REPRESENTATIVE PLANKON: Yes.
19 THE CLERK: Rizo?
20 REPRESENTATIVE RIZO: Yes.
21 THE CLERK: Salzman?
22 REPRESENTATIVE SALZMAN: Yes.
23 THE CLERK: Skidmore?
24 REPRESENTATIVE SKIDMORE: No.
25 THE CLERK: Snyder?

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REPRESENTATIVE SNYDER: Yes.

THE CLERK: Trabulsy?

REPRESENTATIVE TRABULSY: Yes.

THE CLERK: Woodson?

REPRESENTATIVE WOODSON: No.

THE CLERK: Yarkosky?

REPRESENTATIVE YARKOSKY: Yes.

THE CLERK: Chair Fine?

CHAIR FINE: Yes.

And Massullo.

THE CLERK: Sorry. Representative Massullo?

REPRESENTATIVE MASSULLO: Yes.

THE CLERK: 15 yeas and 6 nays, Madam Chair.

VICE CHAIR PERSONS-MULICKA: Show the bill
reported favorably as amended.

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CERTIFICATE OF REPORTER

STATE OF IOWA)
COUNTY OF WARREN)

I, Terri L. Martin, Certified Shorthand Reporter, certify that I was authorized to and did stenographically transcribe the foregoing audio recording to the best of my ability and that the transcript is a complete record of my stenographic notes.

Dated this 27th of August, 2023.

/s/ Terri L. Martin
Terri L. Martin, CSR, RPR, CRR