

My name is Camille Kiefel, and I am the President of the non-profit Detrans Help, a non-profit organization representing detransitioners. I've come here today as a detransitioner to bring awareness to the difficulty we face getting access to proper medical care. Just like trans individuals, detransitioners have distinct health care needs. Because of the stigma around detransition, our needs are going unaddressed.

While transitioning, we were treated with respect and sensitivity. When we detransitioned, we noticed a shift. We feel unsupported. Part of this is that we are now cisgender. Privileged. Many of us were struggling with internalized homophobia, histories of sexual violence, mental illness, and mental disabilities, and saw transition as an answer. There is nothing privileged about being a detransitioner. I am shocked by the discrimination I and other detransitioners have faced as trauma survivors. It would be unacceptable for any other minority to be treated this way. Why is it ok to treat detransitioners so poorly?

Our providers became dismissive, and receiving the necessary care we need became difficult. I know one detransitioner who got pregnant after going on birth control when she thought she was infertile. We do not know the long-term impacts of these surgeries and HRT. There is so much we don't know and isn't being explored. There is no support for us.

We have reached out to World Professional Association for Transgender Health, WPATH, and the World Health Organization, WHO, expressing our concerns. Our request for dialogue was met with silence. While trans individuals are on the boards of these organizations, there is not one detransitioner to represent our needs. In addition to this, the WHO manages the ICD-10 codes that are used for billing. There is no medical code for detransition. Because detransitioners do fit the definition of gender variance, billing detransitioners under gender affirming care puts providers at risk for medical fraud and erases detransitioners from being medically documented. The goal should always be to provide better health care, but detransitioner needs have been ignored and silenced.

Many individuals who want to detransition can't because their insurance won't cover it. In one case, a detransitioner no longer identified as a woman. He had to wait 2 years to get his implants removed. Some detransitioners are forced to live as the sex they no longer identify with because they are unable to medically detransition. Detransitioners should not be forced to live as the sex they don't identify with. It's crucial to understand that providing care for detransitioners does not detract from the care provided to transgender individuals. Detransitioners are a minority and need better access to medical care. Medical care should be within reach of everyone.