

Support House Bill 156

**Education – Interscholastic and Intramural Junior Varsity and Varsity Teams – 3
Designation Based on Sex 4 (Fairness in Girls’ Sports Act)**

January 29, 2025

Oppose

Elyse Pine

Baltimore, Baltimore City

Chase Brexton Health Care

Dear Chair Atterbeary, Vice Chair Wilkins, and members of the House Ways and Means Committee,

I am a pediatrician who works at Chase Brexton Health Care. Chase Brexton Health Care provides medical and mental health services for transgender and nonbinary people.

I oppose Bill 156. It will be harmful to Maryland youth who want to participate in sports.

Legislation that prevents transgender girls from sports participation is based on several

false presumptions. It presumes that youth assigned male at birth always have an

advantage in sports in terms of strength and size. It presumes that a transgender girl will

have a higher testosterone level than a cisgender girl, or more lifetime exposure to

testosterone. It presumes that there is no difference between physical development from

testosterone in boys’ sports and that testosterone differences confers no danger for

cisgender boys, but is somehow very dangerous for cisgender girls.

Strength and athleticism rely on many different things. There is a good deal of overlap in

size, weight and muscle strength for prepubertal boys and girls. Pubertal levels of

testosterone cause more rapid muscle strength increases in boys. All girls and women have some testosterone, and there is a great deal of overlap prior to puberty- in fact until age 11, “biological females” have higher average levels than “biological males”.

Transgender girls do not necessarily have higher levels of testosterone or lifetime testosterone exposure than cisgender girls. Early use of puberty blockers means that as testosterone starts to rise in early adolescence, medication can be given to keep testosterone at levels equal to or lower than most cisgender girls’ levels. This bill prevents transgender girls from the many advantages of school sports participation without any consideration or nuance about their physical characteristics.

Student A- an early bloomer whose testosterone level is 400 ng/dL (adult level) at 11, while male peers were all pre-pubertal (average testosterone level 13 ng/dL)

Student B- a transgender girl whose testosterone level has never been above 20 ng/dL (less than average for cisgender girls age 13 and older)

No one seems to have a problem with the advantage of a boy with early puberty playing sports with boys who have average/late pubertal timing- where are the bills proposing fairness based on physical differences? Are people concerned about the danger to those boys with low testosterone? But there is a bill to prevent a transgender girl whose testosterone level is lower than all her teammates, because it is “unfair”, and she may “harm” the other girls.

There are many benefits of youth sports participation including lower anxiety and depression, improved academic performance, and improved occupational and life skills. It is unfair to make a

blanket rule that does not allow for individual situations in order to prevent a hypothetical situation, when there are many other solutions that are fair.

I respectfully urge the committee to return an unfavorable report on HB156.

[Benefits of Youth Sports](#) 2020 Developed by the PCSFN Science Board

https://odphp.health.gov/sites/default/files/2020-09/YSS_Report_OnePager_2020-08-31_web.pdf

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