Ladies and Gentlemen of the Conroe ISD School Board,

Today, we discuss the presence of the book "Lily and Dunkin" in our school libraries—a topic that concerns the content available to our children. This book presents complex themes surrounding gender identity and medical procedures such as puberty blockers, which are not only sensitive but also controversial, especially for the age group it was originally made available to—5th graders.

TheT narrative involves a young character, Tim, who experiences significant gender dysphoria, expressing a desire to transition and use puberty blockers. It is crucial to note that as of February 18, 2022, our state Attorney General Ken Paxton identified such medical interventions in minors as potential child abuse. Moreover, Senate Bill 14 has made these medical transitions for minors illegal in Texas. By allowing this book in our libraries, we inadvertently discuss and endorse illegal medical practices with our children, contrary to state laws. Texas is joined by 10 other states. The NHS in the UK recently banned puberty blockers for children to ensure care is based on evidence and is in the best interests of the child. Dr. Hilary Cass who led the review said there was a lack of long-term evidence on what happens to young people prescribed blockers - adding that GIDS the nationally run gender clinic in the UK that was shut down, has not gathered routine and consistent data, meaning it was "not possible to accurately track the outcomes and pathways that children and young people take through the service."

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"One of the side effects you may experience," the doctor tells me as I sit on a table in a small exam room, "is tiredness."

I nod, eager for him to hurry up and give me the shot, but he takes his time explaining a few more things.

My whole body tingles as I pull my shorts up to expose my thigh. No more facial hair. No deep voice. No Adam's apple. No new hair growing down there. No anything else growing down there.

Additionally, this book touches deeply on parental consent and involvement issues.

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Once, when we were little, and we did this during a sleepover, Dare's mom, Ophelia, looked at me strangely for a few moments, then came into the room and joined us. And when I asked her to put makeup on my face like she was doing for Dare, she did but said, "Don't you tell your parents I did this. Okay?"

Even back then I knew it would be okay to tell Mom but not Dad. But I didn't mention it to either of them. Just in case.

I know that very often the argument for this type of writing is that teens deserve to have privacy. This is not what this passage is about. This passage is a flashback memory about Tim when he is very young at a sleepover without his parents. This passage encourages parent alienation and implies parental danger, (Tim is not safe with his father.)

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We're quiet for a while.

"Dad?"

"Yes?"

"Can you tell me what Dr. Klemme said that day? When we first went to her? It felt like you...you changed after that. Everything changed after that."

"Lily? That's what you want to be called. Right?"

My name never sounded so wonderful. I blink back tears. "Right."

She showed me a statistic. Forty-three percent of transgender kids try to kill themselves." Dad sniffs again, hard. "Then she said, 'Would you rather have a dead son or a live daughter?"

When this book gives stats like 43% of trans kids try to kill themselves, or the protagonist wants to cut his penis off, it plants these ideas in children's heads as acceptable peer responses to being transgender, which raises the risk of self-harm. For instance, suicide rates of US children and adolescents increased sharply after the release of 13 Reasons Why. (Available in book form in the McCullough library) According to the article sent to you, the study showed that suicide rates in 2 subsequent months remained elevated over forecasted rates, resulting in 195 additional deaths.

"Would you rather have a dead son or a live daughter?" is not an evidence-based statement. A small percentage of boys historically feel confused about their gender at a young age. However, according to a University of Toronto Study provided to you, 63.6% of boys with early onset gender dysphoria, who received 'watchful waiting' treatment and no pre-pubertal social transition, grew up to be gay or bisexual. Only 12% of the study participants continued to identify as transfeminine.

A gay man can have children, but if he is led down this path as a child, he will lose his fertility. This is what Tim is walking into if he continues on this journey. Bottom surgery will surely remove his fertility, but hormone therapy is able to do that on its own. (This is not discussed in the book at all.) If Tim does eventually walk into vaginoplasty, according to a study recently released by the American Urological Association (also provided to you) his risk for suicide would double.

According to the WPATH files, (WPATH is the professional organization of doctors who are performing gender surgeries on kids.) the doctors in this so-called professional organization have always known that children are not capable of informed consent. As one doctor put it, these children often haven't even taken biology yet. "The 14 -year-olds, you know just... It's like talking (about) diabetic complications with a 14-year-old. They don't care. They're not going to die. They're going to live forever, right? So I think when we're doing informed consent, that's still a big lacuna."

The journalist Michael Shellenberger, who published these files says, "I thought maybe people were exaggerating what was happening. These files put to rest any doubts anybody should have about what is happening...This is one of the greatest medical mistreatment scandals in recorded human history."

This violation is taking place because of a system. We can't blame one individual. This book is taking part, and our school district is taking part by presenting it on the selves of libraries for children.

Nobody thinks they are on the wrong side of history in the moment. Those who were on the wrong side of the other historical atrocities thought they were doing right. Often, they thought they were being kind. Doctors performing lobotomies in the 1950s believed they were being kind to their patients, as stated in the article provided to you. This was considered compassionate care. It was settled science. I wonder if the board would be comfortable placing children's books promoting lobotomies in a positive light in our school libraries because increasingly the procedures (pick up book) discussed in this book are being referred to as sexual lobotomies. If the idea of a book promoting lobotomies as advantageous procedures in children's stories concerns you, you should seriously rethink this book, Lily and Dunkin.

This is also a parental rights issue, which allows parents to choose what their kids are exposed to. The school board recently voted to make Human Sexuality Opt-In; however, this book with puberty blockers and a sex change is allowed to be read by kids at will unbeknownst to parents. There is even list of websites in the back to help the student along on this journey.

Thus, I urge the board to reconsider the availability of "Lily and Dunkin" in our school libraries. It is harmful, dangerous and walking the line of giving medical advice. The title is innocuous, so parents will not realize what their child might have picked up. Please Conroe ISD, we don't want any responsibility in effecting a child the way these witnesses have testified to today.

I trust the board will make a decision that upholds the values and legal standards of our community.

Thank you for your attention to this serious matter.