

Discriminatory policies threaten care for transgender, gender diverse individuals

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The Endocrine Society and the Pediatric Endocrine Society oppose legislative efforts to block transgender and gender diverse individuals from accessing gender-affirming medical and surgical care, the two

medical societies said in a joint policy perspective published in *The Journal of Clinical Endocrinology & Metabolism*.

In the past three years, legislators in 17 states have proposed more than two dozen bills barring medical and [surgical treatments](#) for [transgender](#) and gender diverse youth and adults. Many of these bills reflect widespread misinformation about the nature of evidence-based gender-affirming medical care.

"For young children experiencing feelings that their gender does not match the one assigned at birth, known as gender dysphoria, an initial intervention is likely to be a new haircut or clothing," said the manuscript's first author and Co-Chair of the Pediatric Endocrine Society's Transgender Special Interest Group Advocacy Subcommittee, Abby Walch, M.D., of the University of California San Francisco and Benioff Children's Hospitals in San Francisco, Calif. "The first course of action is to support the child in living as their affirmed gender identity and to provide mental health support as needed."

After transgender and gender diverse minors start puberty, prescribing hormones to suppress puberty is the recommended strategy if desired and if diagnostic and treatment criteria are met. This treatment, which is completely reversible, gives adolescents more time to explore their options.

Only reversible treatments are recommended for adolescents until they demonstrate the ability to provide informed consent and experience sustained feelings of [gender dysphoria](#). Even then, gender-affirming hormone therapy to help individuals experience puberty in a way that matches their gender identity is partially reversible.

Three High Court judges in the United Kingdom ruled Dec. 1 that minors under the age of 16 likely could not give informed consent for

pubertal suppression. Though it is likely to be challenged, this decision is a problematic development that could prevent transgender and gender diverse minors from obtaining the [medical care](#) they need.

"Considering transgender and gender diverse individuals face a disproportionately high risk of suicide and other health disparities, it is crucial that they have access to essential and often life-saving, gender-affirming care from well-informed health care professionals," said senior author and Co-Chair of the Endocrine Society's Transgender Research and Medicine Special Interest Group, Sean J. Iwamoto, M.D., of the University of Colorado School of Medicine and Rocky Mountain Regional VA Medical Center, both in Aurora, Colo. "Barring gender-affirming medical and [surgical care](#) for transgender and gender diverse individuals would force many to go through distressing and even traumatic experiences in life related to misgendering. No bill should criminalize physicians who provide the standard of care for this vulnerable population."

The course of gender-affirming treatment should be determined by patients and their health care providers, not by policymakers. Experts should be consulted regarding any policies governing treatment for transgender and [gender](#) diverse individuals, the authors wrote.

More information: Abby Walch et al. Proper Care of Transgender and Gender Diverse Persons in the Setting of Proposed Discrimination: A Policy Perspective. *The Journal of Clinical Endocrinology & Metabolism*, doi.org/10.1210/clinem/dgaa816

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