Rollbacks in Trans-specific Healthcare for Youth

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TGEU is concerned about moves to restrict access to trans specific healthcare for trans children and young people. In the last three years, the conversation around essential healthcare for young trans people has turned extremely tense. This has been accompanied by major changes to the provision of healthcare and in some countries, even rollbacks. In this post, we take note of a few concerning developments pertaining to healthcare for trans children and young people.

United Kingdom

In Bell v. Tavistock (2020), the High Court held that children below the age of 16 years cannot be considered as capable of consenting to puberty blockers. Soon after, in 2021, the Court of Appeal overturned this decision and held instead that children below 16 years are in principle capable of consenting to care and a decision on capacity to consent lies solely with the medical professional. However, following the original decision of the High Court, the conversation around healthcare for young trans people had already taken a turn for the worse in the UK and in Europe more broadly. Many countries in Europe now look to the toxic anti-trans debates in the UK to make their decisions on law and policy on trans people. In the UK, the process of providing care for young people is currently being overhauled with the closure of the Tavistock clinic.

Finland

In 2020, the Council for Choices in Healthcare in Finland released a new guidance on Medical Treatment Methods for Dysphoria Related to Gender Variance in Minors. This guidance states that if a young person who is experiencing gender-related anxiety has other psychiatric symptoms requiring medical care, trans-specific healthcare can be provided only after other psychiatric symptoms have ceased. This guidance regrettably does not recognise that for many trans people, poor mental health conditions and outcomes are often a symptom of their gender-related anxiety and it would be more beneficial to have psychosocial support that is able to treat other psychiatric conditions holistically with gender-related anxiety.

Sweden

In 2022, the Socialstyrelsen released a guidance on Care of Children and Adolescents with Gender Dysphoria. This concluded that puberty blockers and hormones can be provided to young people only in a research context, and until a research study is in place, may be provided only in exceptional cases. This is a severe restriction on the provision of care for trans and nonbinary young people, who already undergo severe stress, and poor mental health during puberty due to their gender-related anxiety.

Norway

The Norwegian Healthcare Investigation Board (Ukom) released a report in 2023 on Patient Safety for Children and Young People with Gender Incongruence. This recommended that puberty blockers and hormone replacement for children be considered as experimental treatment. This is a surprising conclusion considering that puberty blockers have been prescribed for over 30 years to young trans people, as well as for children who undergo precocious puberty. Unfortunately, regional care providers are already adopting this non-binding recommendation to deem

trans-specific healthcare as experimental.

Croatia

The conversation around trans specific healthcare has soured significantly in Croatia. Individual doctors are attacking the provision of care for young people and adults in popular and mainstream media. There are ongoing efforts to restrict the provision of care by revising the list of medical professionals who are authorised to provide healthcare for trans people and rework the rulebook on legal gender recognition to limit access to only those above 21 years.

Healthcare for trans youth

Wholesale restrictions on care severely affect those who need it. TGEU opposes efforts to target young trans people, who today have the least agency in decision-making on their health and constitute a vulnerable group within the trans community. Instead, we call for more individualised and holistic healthcare for young trans people. We also need a shift to reliance on concrete and sensitive guidelines published by organisations like the World Health Organisation and the World Professional Association for Transgender Health.