Gender Positive Alliance

Factsheet – Gender Affirming Care

Learn more about Gender Affirming Care (GAC) here:
https://www.aamc.org/news/what-gender-affirming-care-your-questions-answered
https://opa.hhs.gov/sites/default/files/2022-03/gender-affirming-care-young-people-march-2022.pdf

What does it mean?

The World Health Organisation defines GAC as: "Gender-affirmative health care can include any single or combination of a number of social, psychological, behavioural or medical (including hormonal treatment or surgery) interventions designed to support and affirm an individual's gender identity."

This means any support given by professionals, organisations, society and the individual to help transgender people feel better able to live their lives in the gender they identify as.

This may include everything from transgender people socially transitioning, eg wearing the clothing appropriate to their gender identity, all the way to medical interventions such as hormones and surgeries. This is typically a long and expensive journey of many years.

Gender Dysphoria is a lifelong condition, and the ways in which the condition is managed change throughout people's lives, depending on their needs.

Why does it matter?

Studies consistently show that the earlier a transgender person is supported with their gender identity, the better long term outcomes for their mental and physical health, and risk of suicide. Transgender children and young people are three times more likely to die by suicide than their cisgender peers.

Social transition is not easy – it can be scary, as it means coming out to the world about being transgender, and increasing the risk of bullying and violence.

Earlier gender affirming care can also help the transgender person adapt to living a life that meets their psychological needs, reducing their gender dysphoria and improving how society treats them. Being able to transition is shown to overwhelmingly improve confidence and happiness within transgender people.

Some cisgender people fear the 'permanence' of hormone treatments and surgeries, while transgender people often see this positively as it allows them to align their bodies with who they know themselves to be inside.

However, medical treatments are VERY DIFFICULT to access, and often very expensive as they are almost impossible to access on the NHS. NHS Gender Identity Clinics are massively oversubscribed, with waiting lists lasting more than 6 years for a first appointment, but offer transgender people a way of managing their health and transition.

The GPA are a multi-generational team of people of diverse gender identities, and are trying to keep the information we present as current as possible. Language around gender identity is continually evolving as new generations of people try to find terminology that works for them. We apologise in advance for any errors on this worksheet, either now or as accepted terms change.

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Tell me more

Gender Affirming Care (GAC) often starts with reaching out to online safe spaces, such reddit and tumblr to communicate with likeminded people and try to understand what the person is feeling, and what help is out there.

Some people then socially transition, which means living in the world as the gender they identify as. For transfemmes this might mean growing their hair long and choosing more feminine clothing, and for transmascs often means shorter hair, chest binding and wearing more masculine clothing.

Transgender people often change their names to better match their gender identity, and begin to inform organisations and others around them of their gender identity, name and correct title, eg Mx, Mr or Ms.

Transgender people might also access therapies for their mental health due to their experience of being rejected and discriminated against. Being transgender is not a mental illness, but due to a hostile society and traumatic life experiences, transgender people often have anxiety, depression and PTSD, and are more likely to die by suicide than cisgender people.

Medical treatment might include using puberty blockers to prevent the onset of their body's natural puberty, or for adults this will make their body more receptive to hormone therapies.

Hormone Replacement Therapy (HRT) allows the person's body to respond to the puberty that matches their gender identity.

For example, someone assigned female at birth might take testosterone to help lower their voice, masculinise their facial features, and develop facial hair.

Someone assigned male at birth may take oestrogen for the inverse effects. HRT changes muscular and (if before natal puberty) skeletal development to become more of that of their true gender.

Top surgery can be used to increase breast size, or remove breasts, and bottom surgery is used to replace the existing genitalia with genitalia that matches the person's gender identity.

Some people may choose to have cosmetic surgeries to make facial features appear more fem/masc, or to shave their Adam's Apple. These are often very expensive and done privately, because the NHS does not fund them.

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