

Overview of Medical Treatment for Transgender Youth

Medical and mental health providers follow well-established standards of care when working with transgender youth. Both medical literature and clinical experience of providers demonstrate the medical necessity of the treatment of gender dysphoria in children and the harms transgender children experience when denied that care.

All children become aware of their gender identity between two- and four-years old. Am. Psychiatric Assoc., *Diagnostic and Statistical Manual of Mental Disorders* 455 (5th ed., 2013). A recent study found no differences between the gender identities and gender development of transgender and non-transgender youth. [Similarity in transgender and cisgender children's gender development, 116 Proceedings of the Nat'l Acad. of Sciences 24480 \(2019\)](#). Both groups showed similar levels of strength in their gender identity and gender-typed preferences as well as levels of coherence across domains of gender development. The study also found the strength and cohesiveness of transgender participants' gender identity was just as developed in participants who had recently transitioned as those who had transitioned longer ago. Those findings suggest that neither parental rearing nor access to transition-related care influence a transgender child's gender identity. In short, the gender identity of transgender youth is as deeply ingrained as the gender identities of their non-transgender peers.

Once a transgender child has been diagnosed with gender dysphoria by a healthcare provider, the first step in the treatment of gender dysphoria is a social transition. This typically involves using a name and pronoun that are consistent with the child's gender identity as well as changing the child's clothing, hairstyle, and other aspects of their appearance to match the child's gender identity. Research and clinical experience have shown that social transition for a child with gender dysphoria improves that child's mental health, making them just as healthy as their non-transgender peers. [Kristina Olson, et al., Mental Health of Transgender Children who are Supported in Their Identities, 137 Pediatrics 1 \(2016\)](#); see also Stephen Russell, et al., *Chosen Name Use Is Linked to Reduced Depressive Symptoms, Suicidal Ideation, and Suicidal Behavior Among Transgender Youth*, 63 J. Adol. Health 503 (2018).

There are no pharmacologic treatments for gender dysphoria until after the onset of puberty. After verifying that a transgender young person has started puberty, a treating doctor prescribes puberty-delaying medications to safely halt pubertal development. Puberty-delaying medications have been used to treat medical conditions in children for over forty years and for over twenty years as a treatment for gender dysphoria in adolescents. These medications are the only known safe and effective treatment for the severe physical and psychological distress puberty causes transgender youth.



Photo Courtesy: The Gender Spectrum Collection

Transgender youth eventually undergo hormone-replacement therapy (HRT) to develop the secondary-sex characteristics associated with their gender identity. Based on an individualized assessment of a transgender young person's physical and mental health, a treating medical provider may also recommend surgical interventions. Like HRT, the purpose of surgical treatment is to bring their physical appearance into closer alignment with their gender identity. Except for "top surgery," a procedure to create a male-chest contour for transgender males, surgical treatment is uncommon for transgender people under eighteen-years old.

Longitudinal data demonstrates that transgender people who receive medically necessary treatments for their gender dysphoria have the same mental health outcomes as their non-transgender peers, representing a significant improvement in comparison to the mental health of transgender people prior to their transition. deVries, et al., *Young Adult Psychological Outcome After Puberty Suppression and Gender Reassignment*, 134 *Pediatrics* 696 (2014).

The treatment of gender dysphoria in childhood and adolescence is guided by widely accepted evidence-based standards. Those standards are recognized by major medical and mental health associations, including the American Medical Association, the American Academy of Pediatrics, the American Psychological Association, the American Psychiatric Association, the Endocrine Society, and the World Professional Association for Transgender Health.