

Fact Sheet: Trans, Gender Diverse & Non-Binary Young People & Gender Affirming Healthcare

In Australia and across the world, it is estimated that 2–3% of young people identify as transgender, gender diverse or non-binary (trans).^{1,2} The Australian Institute of Health and Welfare reported that in 2022, there were 3.2 million young Australians aged between 15-24.³ This means that between at least 64,000 and 96,000 young Australians aged between 15-24 may identify as trans.

The number of trans young people and their families seeking access to gender affirming medical services rises each year. This is attributed to a 'growing acceptance from parents, doctors and peers'⁴ about gender diversity. Increasing levels of media visibility, social policy improvements, and some level of protection in anti-discrimination legislation has created a supportive environment for young people to disclose their feelings and seek support.^{5,6}

Trans young people have always existed. Society and health care services simply have an increased level of understanding on how to support and treat people. Young people are feeling safer to express themselves, it is important they continue to feel this way without shame or stigma and receive the support they need.

Young trans people can express their feelings about their gender from a young age. Research suggests that some people have spent a considerable amount of time hiding their feelings, sometimes up to eight years.⁷ Not all trans people will seek or require medical affirmation. For some trans people, it can be critical and life saving to have access to medical affirmation. The Trans Pathways study found that only 4.7% of respondents were currently using or had previously used puberty blockers as children or adolescents.⁸

If a young person is seeking to access medical affirmation, family support is critical and a young person under the age of eighteen is not able to access treatment

without parental consent. In most Australian jurisdictions, dual parental or legal guardian consent is required to access gender affirming medical treatment, apart from South Australia and Queensland. If one parent or legal guardian does not consent, an application to the family court is required.

Access to medical affirmation is driven by the needs of the young person and can stem from an experience of gender dysphoria, which is defined as significant distress or functional impairment associated with incongruence between the internal sense of gender and the sex assigned to someone at birth.⁹⁻¹² The decision to undergo medical affirmation is carefully considered and involves detailed multi-disciplinary assessments to confirm a diagnosis of gender dysphoria. Parents and families are actively involved in this process and benefit from their own education and psychological support.

National gender affirming healthcare guidelines describe options including:

Under 18 years: Stage 1: puberty suppression with puberty blockers; and Stage 2: gender affirming hormone therapy with estrogen or testosterone.

18 years and over: Stage 3: gender affirming surgical procedures (in some cases a 16 or 17 year old trans masculine person may benefit from a chest reconstructive procedure, however, genital surgery is not recommended under age 18).¹⁰

There is broad national and international consensus that the trans experience is not a mental illness or disorder and that the human rights and health care rights of all trans people, including minors, should be supported and protected. Official statements supporting gender-affirming care have been made by many reputable organisations.

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Internationally these include the World Health Organisation, World Medical Association, American Psychiatric Association, Endocrine Society and American Academy of Pediatrics. In Australia, these include the Royal Australian and New Zealand College of General Practitioners, Australian Psychological Society and the Australian Medical Association.

Gender-affirming medical treatment can improve mental health and psychosocial quality of life for many people.¹³ Withholding gender-affirming care should not be considered a “neutral” option and may exacerbate experiences of mental and social distress.¹⁰ Substantial evidence points to what helps trans young people fare better with their mental health and wellbeing. It includes school, family and peer support, and timely access to gender affirming treatment for those who wish for it.¹⁴

The largest study ever conducted on trans adults who reported seeking gender affirming treatment during adolescence suggests that when younger trans people are able to access gender affirming health care, their later life mental health experiences are improved significantly. The study of nearly 28,000 participants showed that access to early treatment was associated with better mental health outcomes and significantly reduced levels of suicidal ideation.¹⁵

‘Patients with gender dysphoria require access to expert care and treatment. Withholding or limiting access to care and treatment would be unethical and would have serious impacts on the health and wellbeing of young people.’¹⁶

– Associate Professor Mark Lane, former RACP President.

References

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