

**11<sup>th</sup> August 2020**

Deputy Patrick Costello T.D.,  
Dáil Éireann,  
Leinster House,  
Kildare Street,  
Dublin 2  
E: [patrick.costello@oireachtas.ie](mailto:patrick.costello@oireachtas.ie)

**Re: PQ 20035/20 – National Gender Service, St Columcille's Hospital**

**“To ask the Minister for Health the requirements for adult patients undergoing an assessment in the National Gender Service to have parents present, despite this being a concern for patient confidentiality”**

Dear Deputy Costello,

I refer to the above Parliamentary Question seeking an update on requirements in the National Gender Service, which has been referred to the Ireland East Hospital Group for direct response.

I have had this matter examined and am advised that people who are referred to the National Gender Service planning to start hormone therapy or access surgery in order to affirm their gender attend for a multidisciplinary individualised assessment prior to any gender affirming medical or surgical intervention. The primary purpose of this assessment is to ensure that the National Gender Service address any needs that an individual may have that, if unaddressed, could result in harm during their transition.

Part of the multidisciplinary assessment focuses on social health. Assessment of social health includes personal relationships, housing and income. While hormone therapy can provide important benefits in terms of an individual's wellbeing, it can also cause harm.

In terms of social health, the main risks of harm as a result of hormonal or surgical transition include but are not limited to the following:

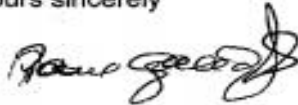
- Psychological and emotional distress due to breakdown of personal relationships: this might be breakdown of a marriage, loss of relationship with parents, or loss of relationship with children.
- Homelessness and loss of income: this is particularly a risk for people who are dependent on a parent, spouse, partner, or other family member, for fundamental needs such as housing and income.
- Deterioration in mental health due to increased social stressors: this deterioration can result in suicide.

If based on an individualised clinical evaluation the potential for harm exceeds potential for benefit, then medical or surgical intervention is not recommended. If the National Gender Service identify someone who is at high risk of harm with regard to their social health as a result of hormone therapy then an individualised care plan is formulated to reduce this risk.

This care plan may in some very specific instances include family meetings (with the relevant family members), home visits from a member of the National Gender Service team, family therapy, *or*/and individualised social work intervention (e.g. securing independent housing or income). The rationale of the care plan is explained to the individual. At all times during this process, data protection regulations are fully observed

I trust this information is of assistance to you.

Yours sincerely



Paul Gallagher  
Chief Director of Nursing and Midwifery