



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Ceannasaí Náisiúnta Oibríochtaí Meabhairshláinte
Ospidéal Naomh Lómáin Baile Phámar Baile Átha Cliath 20.

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3rd March 2021
Deputy Carol Nolan
Dail Eireann,
Dublin 2.

PQ Number: 8880/21

PQ Question: To ask the Minister for Health if the HSE gender identity development services have taken note of the Tavistock Judgement in the United Kingdom particularly with respect to the finding that children under 16 years of age considering gender reassignment are unlikely to be sufficiently mature enough to provide informed consent to be prescribed puberty-blocking drugs and medication; and if he will make a statement on the matter. -Carol Nolan

Dear Deputy Carol Nolan,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

Following the recent High Court ruling in England on the 1 December 2020 regarding the Gender Identity Development Service (GIDS) in Tavistock and Portman (NHS Foundation Trust), a decision has been made by Tavistock and Portman service to suspend new referrals for under 16's pending the outcome and determination of any appeal. This impacts on patients who have historically had access to the Tavistock and Portman service through the HSE Treatment Abroad Scheme.

Gender incongruence is not uncommon in early childhood. Where gender incongruence persists, some young people can become more distressed with the onset of puberty (known as gender dysphoria) and may seek out medical interventions to change their natal gender. The diagnosis of gender dysphoria is dependent on strict criteria as assessed by mental health professionals. Only approx. 40% of young people with gender dysphoria will be eligible for consideration for medical intervention. There is a high proportion of young people with co-existing mental health or developmental disorders (e.g. autistic spectrum disorder) which can impact on the presentation and management of gender dysphoria.

The existing pathway in Ireland for pre-pubertal children generally begins with an approach by the child and family to their General Practitioner who may then refer to the local Child and Adolescent Mental Health Service (CAMHS). At this stage, a social transition may be advised with careful management between the family, GP, CAMHS team and school services. Assessment and management of any co existing mental health or developmental disorders need to be prioritised.



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For young people under the age of 16 years, once the assessment has been made and if referral for medical intervention is being considered, this can only be done as part of a cohesive specialised team multi-disciplinary team (MDT) so that any medical intervention can be done in a safe manner, in line with best international practice and with the capacity for audit and evaluation of outcomes. The MDT team will be led by a Paediatric Psychiatrist(s) with a particular interest in Gender Identity. Currently the HSE are working on the establishment of this team service in Ireland. CHI at Crumlin have advertised for a replacement Consultant Paediatric Endocrinologist who will be part of the Team and interviews are occurring in early March 2021.

It is important that the care pathway applied to children and adolescents is compatible with the adult service to which they are likely to transition, in order to provide a comprehensive, sensitive and safe service for these young people.

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,

Thomas O'Brien
General Manager Mental Health Services