

26th April 2023

To Whom It May Concern,

I was asked to comment on a Parliamentary Question directed to the Minister for Health on care pathways that are in place for under 18s as a result of a Clinical Psychologist diagnosis of gender dysphoria.

At present, there is no gender service for young people in Ireland. The National Gender Service has been advocating for the last number of years for a service to be developed, and we have submitted proposals to the HSE on how to advance this. To date, senior HSE management have declined to engage with us on these proposals.

Our view is that a service for young people should be developed in line with the recommendations of the Cass Review, the current NHS commissioned report into the development of gender services for young people in the UK. A model of care in line with the Cass Review would align us with clinical practice in specialist services for children and younger people in the rest of Europe.

The National Gender Service propose that we could deliver such a service by extending our age range downwards and by working with local CAMHS within a defined clinical network. Such a service will require a new Model of Care that would include a wide range of clinical disciplines, and not just incorporate Endocrinology, Psychiatry and Psychology. Occupational Therapy, Social Work, Speech and Language Therapy and Specialist Nursing should also be integral to any new gender service for younger people. Given the high prevalence of autism in people attending gender services, expertise in autism should be incorporated in the clinical team.

Prospective service users and their families deserve a safe and effective service that addresses all of their needs comprehensively within a robust clinical framework. This would include gender dysphoria, but would not be limited to gender dysphoria. The purpose of such a service would be to address all clinical needs and not solely to focus on gender dysphoria.

This service should be developed as a priority, and resourced sufficiently to minimise wait times to no more than a period of months (rather than the years that people currently wait to be seen).

To develop this service, we recommend the following:


- That a Working Group is established and tasked with the development of a Model of Care for younger people in line with the recommendations of the Cass Review.
- That this Working Group complete its work efficiently (within no more than six months), using the Cass Review's final report as a template, so that we can delineate the resource requirements for the proposed service without delay.
- That once the Working Group has completed its report, there should be immediate resourcing of the posts needed so that recruitment can begin without delay.



- That the service for young people be integrated into the existing adult National Gender Service so that recruitment and retention will be enhanced by offering prospective candidates:
 - The security of established Governance structures at the National Gender Service.
 - The clinical support of specialist colleagues working at the National Gender Service
 - A model of care that offers service users a seamless transition of clinical care from adolescence to adulthood.

I hope the above has been clear and useful.

Yours Sincerely,



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