



19th April, 2024

Deputy Patrick Costello, TD
Dáil Éireann
Leinster House
Kildare Street
Dublin 2

RE: PQ13698/24, PQ13699/24, PQ13700/24, PQ13701/24, PQ13702/24

Detail: <https://www.newstalk.com/podcasts/highlights-from-newstalk-breakfast/nhs-have-confirmed-that-children-will-no-longer-receive-puberty-blockers>

PQ13698/24_ To ask the Minister for Health if the National Gender Service believes that trans people need to be in their mid- to late twenties before they are mature enough to decide to pursue medical transition, as per a recent radio interview

PQ13699/24 To ask the Minister for Health the reason that in a recent radio interview (details supplied), National Gender Service staff considered the process to access hormones via Tavistock to be too easy.

PQ13700/24 To ask the Minister for Health if, following a recent radio interview (details supplied), the National Gender Service staff believe asexuals are entitled to the same medical care and at the same age as all other sexualities.

PQ13701/24 To ask the Minister for Health if, when writing the Chief Clinical Officer's business case "Model of Care and Implementation Plan for Transgender care", it was intended that service users could be excluded from the Advisory Group due to their interest in their own healthcare being considered purely ideological

PQ13702/24 To ask the Minister for Health what consultation was done with the trans community before abandoning the Programme for Government's commitment to WPATH as per a recent article (details supplied); and if he will make a statement on the matter.

Dear Deputy Costello,

The Health Service Executive has been requested to reply directly to you in relation to the above parliamentary question, which you submitted to the Minister for Health for response. I have consulted with the National Clinical Advisor and Group Lead for Children and Young People (NCAGL C&YP) on your question and have been informed that the following outlines the position.

PQ13698/24

Gender healthcare is a new, emerging area of care, supporting people who experience gender incongruence and/ or gender dysphoria. Evidence for the best and safest type of healthcare in this area is limited, in Ireland and internationally.

A new national clinical programme for gender healthcare is being initiated by the HSE. Over the next two years, the programme will develop an updated clinical model of care for gender healthcare services for the Irish population.

Emerging and evolving international evidence, including evidence on the use of puberty blockers and hormones, will be reviewed as part of this work.

PQ13699/24

The HSE Clinical Pathway to the gender identity service at Tavistock, UK involved multidisciplinary teams, with strong governance of the referral process.



The Tavistock service provided psychological assessment and support and worked closely with the paediatric endocrinology team at CHI.

PQ13700/24

As outlined in a response to PQ 13702/24, the HSE will lead on the development of an updated clinical model of care for gender healthcare services for the Irish population over the next two years.

All people with gender dysphoria and/or who are gender-questioning should have access to healthcare support and services. Each person will be assessed on their individual needs and the model of care will be developed on that basis.

PQ13701/24

Over the next two years, a new model of care for gender health will be developed in a consultative way, engaging with stakeholders including advocacy groups, healthcare professionals and patients, who will be involved in the design of services, and which will inform the delivery and evaluation of services.

We are committed to building a service that is based on experience, clinical evidence, respect, inclusiveness and compassion.

PQ13702/24

A new national clinical programme for gender healthcare is being initiated by the HSE. Over the next two years, the programme will develop an updated clinical model of care for gender healthcare services for the Irish population.

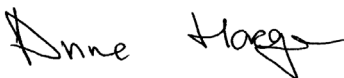
Emerging and evolving international evidence, including that from WPATH, will be reviewed as part of this work.

The model of care will be developed in a consultative way, engaging with stakeholders, healthcare professionals and patients, who will be involved in the design of services and advise on the delivery and evaluation of services.

There is no requirement for the outcome of this work to be aligned with the approach of any particular organisation and the outcome will be informed and guided by the needs of people living in Ireland.

I trust this information is of assistance to you, but should you have any further queries please do not hesitate to contact me.

Yours sincerely



Anne Horgan
General Manager