

## **PROFESSIONAL ORGANIZATION STATEMENTS SUPPORTING TRANSGENDER PEOPLE IN HEALTH CARE<sup>1</sup>**

### **American Medical Association**

Resolution: Removing Financial Barriers to Care for Transgender Patients (2008)

An established body of medical research demonstrates the effectiveness and medical necessity of mental health care, hormone therapy and sex reassignment surgery as forms of therapeutic treatment for many people diagnosed with GID... Therefore, be it RESOLVED, that the AMA supports public and private health insurance coverage for treatment of gender identity disorder.

[http://www.tgender.net/taw/ama\\_resolutions.pdf](http://www.tgender.net/taw/ama_resolutions.pdf)

Resolution H-185.950: Removing Financial Barriers to Care for Transgender Patients (2008)

Our AMA supports public and private health insurance coverage for treatment of gender identity disorder as recommended by the patient's physician. (Res. 122; A-08)

<http://www.ama-assn.org/resources/doc/PolicyFinder/policyfiles/HnE/H-185.950.HTM>

### **American Psychiatric Association**

Position Statement on Access to Care for Transgender and Gender Variant Individuals (2012)

The American Psychiatric Association:

1. Recognizes that appropriately evaluated transgender and gender variant individuals can benefit greatly from medical and surgical gender transition treatments.
2. Advocates for removal of barriers to care and supports both public and private health insurance coverage for gender transition treatment.
3. Opposes categorical exclusions of coverage for such medically necessary treatment when prescribed by a physician.

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[www.psychiatry.org/File%20Library/Advocacy%20and%20Newsroom/Position%20Statements/ps2012\\_TransgenderCare.pdf](http://www.psychiatry.org/File%20Library/Advocacy%20and%20Newsroom/Position%20Statements/ps2012_TransgenderCare.pdf)

### Position Statement on Discrimination Against Transgender and Gender Variant Individuals (2012)

Being transgender gender or variant implies no impairment in judgment, stability, reliability, or general social or vocational capabilities; however, these individuals often experience discrimination due to a lack of civil rights protections for their gender identity or expression... Thus, this position statement is relevant to the APA because discrimination and lack of equal civil rights is damaging to the mental health of transgender and gender variant individuals.

The American Psychiatric Association:

1. Supports laws that protect the civil rights of transgender and gender variant individuals.
2. Urges the repeal of laws and policies that discriminate against transgender and gender variant individuals.
3. Opposes all public and private discrimination against transgender and gender variant individuals in such areas as health care, employment, housing, public accommodation, education, and licensing.
4. Declares that no burden of proof of such judgment, capacity, or reliability shall be placed upon these individuals greater than that imposed on any other persons.

[www.psychiatry.org/File%20Library/Advocacy%20and%20Newsroom/Position%20Statements/ps2012\\_TransgenderDiscrimination.pdf](http://www.psychiatry.org/File%20Library/Advocacy%20and%20Newsroom/Position%20Statements/ps2012_TransgenderDiscrimination.pdf)

### **American Psychological Association**

#### Policy on Transgender, Gender Identity & Gender Expression Non-Discrimination (2008)

As stated in the Policy on Transgender, Gender Identity & Gender Expression Non-Discrimination, the APA “opposes all public and private discrimination on the basis of actual or perceived gender identity and expression and urges the repeal of discriminatory laws and policies” and “calls upon psychologists in their professional roles to provide appropriate, nondiscriminatory treatment to transgender and gender variant individuals and encourages psychologists to take a leadership role in working against discrimination towards transgender and gender variant individuals[.]”

The “APA recognizes the efficacy, benefit and medical necessity of gender transition treatments for appropriately evaluated individuals and calls upon public and private insurers to cover these medically necessary treatments.”

<http://www.apa.org/about/policy/transgender.aspx>

### **American Academy of Family Physicians**

Resolution No. 1004 (2012)

In 2007, an AAFP Commission declared that the association has a policy opposing any form of patient discrimination and stated its opposition to the exclusion of transgender health care. In 2012, the organization released a new resolution: “RESOLVED, That the American Academy of Family Physicians (AAFP) support efforts to require insurers to provide coverage for comprehensive care of [transgender] individuals including medical care, screening tests based on medical need rather than gender, mental health care, and, when medically necessary, gender reassignment surgery.”

[http://www.aafp.org/dam/AAFP/documents/about\\_us/special\\_constituencies/2012RCAR\\_Advocacy.pdf](http://www.aafp.org/dam/AAFP/documents/about_us/special_constituencies/2012RCAR_Advocacy.pdf)

### **American Academy of Physician Assistants**

Non-Discrimination Statement<sup>2</sup> (Adopted 2000; amended 2004, 2006, 2007 and 2008)

“Physician assistants should not discriminate against classes or categories of patients in the delivery of needed health care. Such classes and categories include...gender identity.”

### **American College of Nurse Midwives**

Transgender/Transsexual/Gender Variant Health Care (2012)

The American College of Nurse-Midwives (ACNM) supports efforts to provide transgender, transsexual, and gender variant individuals with access to safe, comprehensive, culturally competent health care and therefore endorses the 2011 World Professional Association for Transgender Health (WPATH) Standards of Care.<sup>3</sup>

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<sup>2</sup> Please see “Ethical Conduct for the Physician Assistant Profession” (Adopted 2000, amended 2004, 2006, 2007, and 2008) and “Comprehensive Health Care Reform” (Adopted 2005 and amended 2010). Thanks to Diane Bruessow for this compilation.

<sup>3</sup> Thanks to Andre Wilson of Jamison Green & Associates for making us aware of this organization statement.

## **National Association of Social Workers**

Transgender and Gender Identity Issues Policy Statement (2008)

NASW supports the rights of all individuals to receive health insurance and other health coverage without discrimination on the basis of gender identity, and specifically without exclusion of services related to transgender or transsexual transition...in order to receive medical and mental health services through their primary care physician and the appropriate referrals to medical specialists, which may include hormone replacement therapy, surgical interventions, prosthetic devices, and other medical procedures.

<http://www.socialworkers.org/da/da2008/finalvoting/documents/Transgender%20nd%20round%20-%20Clean.pdf>

## **World Professional Association for Transgender Health**

Clarification on Medical Necessity of Treatment, Sex Reassignment, and Insurance Coverage in the U.S.A. (2008)

WPATH found that decades of experience with the Standards of Care show gender transitions and related care to be accepted, good medical practice and effective treatment. In a 2008 clarification, WPATH stated:

[S]ex reassignment, properly indicated and performed as provided by the Standards of Care, has proven to be beneficial and effective in the treatment of individuals with transsexualism, gender identity disorder, and/or gender dysphoria. Sex reassignment plays an undisputed role in contributing toward favorable outcomes, and comprises Real Life Experience, legal name and sex change on identity documents, as well as medically necessary hormone treatment, counseling, psychotherapy, and other medical procedures...

The medical procedures attendant to sex reassignment are not ‘cosmetic’ or ‘elective’ or for the mere convenience of the patient. These reconstructive procedures are not optional in any meaningful sense, but are understood to be medically necessary for the treatment of the diagnosed condition.

<http://www.wpath.org/documents/Med%20Nec%20on%202008%20Letterhead.pdf>

## **National Commission on Correctional Health Care**

Position Statement: Transgender Health Care in Correctional Settings (2009)

The health risks of overlooking the particular needs of transgender inmates are so severe that acknowledgment of the problem and policies that assure appropriate and responsible provision of health care are needed....

Because prisons, jails, and juvenile justice facilities have a responsibility to ensure the physical and mental health and well-being of transgender people in their custody, correctional health staff should manage these inmates in a manner that respects the biomedical and psychological aspects of a gender identity disorder (GID) diagnosis.

<http://www.ncchc.org/transgender-health-care-in-correctional-settings>

### **American Public Health Association**

The Need for Acknowledging Transgender[ed] Individuals within Research and Clinical Practice (1999)

The APHA issued a policy statement concluding that transgender[ed] “individuals are not receiving adequate health care, information, or inclusion within research studies because of discrimination by and/or lack of training of health care providers and researchers; therefore...”

The APHA therefore “Urges researchers and health care workers to be sensitive to the lives of transgender[ed] individuals and treat them with dignity and respect, and not to force them to fit within rigid gender norms. This includes referring to them as the gender with which they identify;

Urges researchers, health care workers, the National Institutes of Health, and the Centers for Disease Control and Prevention to be aware of the distinct health care needs of transgender[ed] individuals; and

Urges the National Institutes of Health and the Centers for Disease Control and Prevention to make available resources, including funding for research, that will enable a better understanding of the health risks of transgender[ed] individuals, especially the barriers they experience within health care settings...”

<http://www.apha.org/advocacy/policy/policysearch/default.htm?id=204>

### **American College of Obstetricians and Gynecologists**

The American College of Obstetricians and Gynecologists, *Committee Opinion No. 512: Health Care for Transgender Individuals*, 118 OBSTETRICS AND GYNECOLOGY 1454 (2011).

Transgender individuals face harassment, discrimination, and rejection within our society. Lack of awareness, knowledge, and sensitivity in health care communities eventually leads to inadequate access to, underutilization of, and disparities within the health care system for this population. Although the care for these patients is often managed by a specialty team, obstetrician-gynecologists should be prepared to assist or refer transgender individuals with routine treatment and screening as well as hormonal and surgical therapies. The American College of Obstetricians and Gynecologists opposes discrimination on the basis of gender identity and urges public and private health insurance plans to cover the treatment of gender identity disorder.

<http://www.ncfr.org/news/acog-releases-new-committee-opinion-transgender-persons>

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