

THE KITE TRUST

FOCUS GROUP 4 – SURVEY

RESPONSES

ORGANISATION

The Kite Trust

At The Kite Trust we envisage an inclusive society where LGBTQ+ young people are healthy, successful and celebrated. We support the wellbeing and creativity of LGBTQ+ young people in Cambridgeshire, Peterborough and surrounding areas, not only supporting young people directly but also seeking to change the environments and remove the barriers that prevent them from achieving their full potential. We do this through our Youth Work, Advocacy, Training and Research programmes.

Within our Youth Work programme, we provide many opportunities for social connection - youth social groups, individual support, family activities, inclusive sporting opportunities, workshops and residential opportunities. Each of these activities builds young people's confidence, self-esteem, sense of belonging and seeks to develop their skills and knowledge to enable them to thrive. We support over 500 young people each year.

Our Schools and Training programme recognises that many of the challenges LGBTQ+ young people face originate through environments and interactions with other people. We tackle bullying in schools through our Rainbow Flag Award, taking a whole-school approach to LGBTQ+ inclusion. We also work within other sectors that impact the lives of young people – healthcare, social care and a variety of employers - to ensure that LGBTQ+ inclusive practice becomes the default.

We also undertake a wealth of advocacy work and research, seeking to effect positive change for the LGBTQ+ community. All of our work at The Kite Trust centres around improving the lives of LGBTQ+ young people, with a particular focus on supporting trans and non-binary young people, as these make up the majority of our service users.

SUMMARY OF BRIEF & APPROACH

The Kite Trust (TKT) was engaged to undertake research/consultation with TKT service users, to explore the views of young people on gender identity services for children and young people and how these could be improved. We aimed to gather the most relevant and useful data possible while ensuring the research sessions remained safe and supportive spaces for young people.

We undertook this project by conducting three focus groups and a survey with TKT service users who had accessed, tried to access, or considered accessing NHS gender services when they were aged 18 or younger. The groups and survey explored questions provided by the Cass Review team, relating to experiences of NHS gender services and how these services could be improved, as well as the wider context of support for young people and their families in this area. More details of the recruitment, methodology and how the survey was undertaken are given below.

RECRUITMENT

All current TKT service users were invited to take part in the focus groups, if they had accessed, tried to access, or considered accessing NHS gender services when they were aged 18 or younger. This included young people who were aged 18 or over at the time of the focus groups but had views to share that related to their experiences of NHS gender services when they were younger.

Information about the focus groups and survey was included in the newsletter sent out to all current TKT service users and parents/carers who have opted in to receive this. The survey was completed through Microsoft Forms, via a link that was included in the TKT newsletter.

METHODOLOGY

Methodology for the focus groups is given on reports 1-3.

Following feedback from TKT service users that the focus group format was not accessible to all, a survey was also created and circulated to TKT service users via the weekly newsletter circulated to TKT service users and family members who have opted to receive this newsletter. The survey plan and approach was discussed with, and approved by, the Cass Review team before circulation. The survey included all questions asked in all three focus groups.

The survey did not use a separate consent form to gain written consent from participants. However, information about the project and an explanation of how anonymised data would be used were included in the introduction to the survey. This introductory text also explained that by completing this survey, participants agreed for their responses to be shared with the Cass Review Team.

HOW THE SESSIONS WERE RUN

An explanation of how the focus group sessions were run is given in reports 1-3. All relevant information on the survey development, recruitment and analysis is given above.

SESSION INFORMATION (REPLICATE FOR EACH FOCUS GROUP)

GROUP TITLE & KEY QUESTIONS:

DATE COMPLETED	FOCUS GROUP TOPIC	MODERATED BY
The survey was open for approximately two weeks, at the end of July and beginning of August 2023.	All topics covered in the three focus groups.	N/A

RESPONDENTS' INFORMATION

NO OF PARTICIPANTS

15

DESCRIBE GROUP COMPOSITION (AGE, EXPRESSED GENDER IDENTITY, WHETHER THEY HAVE ACCESSED GIDS, REGION THAT THEY ARE RESIDENT)

The survey was anonymous in the responses but was circulated to children and young people aged up to 30 who access The Kite Trust's services. It was responded to by those with a wide range of expressed gender identities and experiences of accessing gender-affirming care. Respondents came from Cambridgeshire, Peterborough and surrounding areas.

OUTPUTS FROM THE SESSIONS

KEY THEMES IDENTIFIED (BY QUESTION)

QUESTION ASKED	THEME IDENTIFIED	SUPPORTING QUOTES
Why would you go to the NHS for gender-related care?	<ul style="list-style-type: none"> To access free healthcare To be able to access life-long support and services regardless of financial positions. To access gender affirming surgeries. 	<ul style="list-style-type: none"> To get medication and advice to progress my transition Private is expensive, NHS ensures (or should ensure) life-long support regardless of financial status. because i have been living as a male (i am afab) for over 2 years and i need support in being able to transition To relieve the painful dysphoria that I experienced, but also because they are the main and most used healthcare system, and should hopefully understand why trans people require this health. Because my parents can't afford private. Cheaper than going private If someone had negative feelings about certain parts of their body or features such as their voice, breast, lower parts, or facial features for example that they want changed/altered. Dysphoria I think can be for any person who feels negatively about a body part, for example, someone who is insecure about the size of their private parts wanting smaller/bigger alterations is gender dysphoria, but I don't necessarily think it's just transgender people who seek them. So I wouldn't have to use family money or divert all funds from life money to getting things that I need. i want to go on testosterone and get top surgery to reduce dysphoria Because I'm trans. If needed more medical help or support Because gender related care can be expensive in the private sector For access to gender-affirming surgery (and if I had been able to when I was younger, puberty blockers) without having to pay my entire inheritance on it

What do you think the purpose of assessment in the gender clinic is?

- Some people viewed the assessment as a supportive function to better understand patients and ensure they are receiving the correct care, however many expressed concerns around the “gatekeeping” that this leads to and the inadequate care.
- I have no idea. It always seems like needless gatekeeping.
- To gain and understanding of the patient and determine the course of treatment
- to determine if gender reassignment is actually going to support the individual or not
- To make sure that the people are considered "mentally stable" enough for it, however that's kinda pointless in my opinion as people can't be stable if they are experiencing the feeling of being in the wrong body. (Not to be considered rude, just factual)
- To find out properly if I want to transition to be a girl.
- Make plans on how to start your transition
- I think it's for doctors to have a clear picture of the person they are working with. They can't expect every patient who identifies as trans to have the same issue, whether it be wanting hormones or just wanting top surgery. Gender is a spectrum of millions of possibilities, but becoming comfortable in your own skin may only be the result of gender-affirming care for some people. But this is not for every trans person, so it is important for them to understand and gain knowledge and correctly identify the needs of trans people.
- To work out what treatment makes sense for each patient
- to make sure the person is receiving the right care
- I think the purpose as it stands now is to gatekeep care and make trans people jump through unnecessary hoops, and to kill those who can't play along with what the GIC clinicians want or survive the wait times.
- In a just world it would provide care to trans people and help them navigate their feelings, which is what they're meant to be doing but the power dynamics and ability to shut down care makes it close to impossible for trans people to actually explore their feelings without having their lives ruined, the gatekeeping forces us to stick to a script and ignore what we want to be talking about.
- My gender clinician when I was younger, at the start of the rise in trans kids, told me directly that at a big meeting of all the gender clinics, they saw the rising cases and chose to make it harder for people to get the care they need, on purpose. Since then I have no idea how many trans people that decision has killed, but I know its far too many. They saw that being trans was slowly more socially acceptable and therefore more people are accessing care and used that as a bludgeon to harm thousands of people.
- Allow the individual to safely assess if they are gender dysphoric and work out what to do next.
- To determine the correct possible treatment, if necessary/steps forward if transition is important for your journey. Sometimes, it's just to help someone collect their thoughts together and talk to someone who knows about the feelings and thoughts we are having.
- To see if a person knows what they are deciding
- To affirm and put to paper my gender identity
- To root out people who Aren't Trans Enough so they can avoid spending money on more people than they can get away with? To cater to the public opinion that a 1% dissatisfaction rate in gender-affirming care is hugely terrible and not actually an extremely low percentage in comparison to all other forms of surgery/medical aid? To stop people actually living their lives happily on their own terms by gatekeeping trans healthcare??? Honestly I don't know, you don't have to wait 23 years to see someone who will determine if you're In Pain Enough to have knee surgery or pain blockers just in case you regret having knee surgery or pain blockers so why they do it for trans healthcare I can't comprehend

		<ul style="list-style-type: none"> I mean I guess for younger kids they want to make sure they know what they're getting into but if they're just getting puberty blockers that's completely reversible and shouldn't be gatekept either??"
<p>"Is it important to you to have a diagnosis of gender dysphoria?</p> <p>What do you think having a diagnosis means in relation to:</p> <ul style="list-style-type: none"> You personally Parents, family members and carers Healthcare School 	<ul style="list-style-type: none"> There were mixed responses and opinions as to whether having a diagnosis of gender dysphoria was important or not. People should be able to be accepted without a diagnosis but it was noted that it may help acceptance. Many people who shared it was important to them said it was due to it allowing them to access gender-affirmative healthcare rather than the diagnosis itself being important. Some shared that a diagnosis of gender dysphoria could provide a psychological relief and help them understand themselves better. Having a diagnosis doesn't make you "any more trans" than someone who doesn't. The term "diagnosis" was seen as misplaced by some respondents as it is not a disability or mental condition 	<ul style="list-style-type: none"> Gender Dysphoria diagnosis are not important. Some Doctors think it is important. The public may think it is important, but ultimately just serves to medicalise trans people needlessly. I don't need a diagnosis for myself as I know I'm dysphoric. It's mainly to "prove" it to others, especially for admin/paperwork stuff. it is important because it would mean i can actually get the healthcare i need to be comfortable in myself and pass No, I don't believe it is important. The only real reason could be to protect the trans community from people who take news to shine a negative light, however for someone who actually does experience it, it doesn't affect much, it shouldn't. People should be able to socially be accepted without a diagnosis, and the diagnoses could be useful for healthcare, however they use it as a gate to restrict people who just want to be themselves No, I have only ever been upset about my male parts at the very start of life. But when I was explained what transgender and non binary was I was able to say years later I was a girl. I have always lived this way and happy being me. But I just don't have a need for my boy parts really. Yes as its an official diagnosis I think everyone can experience gender dysphoria, whether they are cis-gendered or identify as transgender. The diagnosis I think is only relevant for doctors in order to put a label on how a person may be feeling and if anyone is experiencing extreme gender dysphoria and yearning to identify as the other gender, then I personally don't think they need a diagnosis to call themselves trans. I don't believe I have a diagnosis. Is that going to stop me from calling myself transgender? No. Living without one doesn't mean I'm any less trans than someone who does have a diagnosis. Sure. maybe it means they're further along the journey than I am, But someone who has been out as transgender for a week is no less trans than someone who has been out for years. I don't think I personally need a diagnosis because I know I have dysphoria simply from experiencing it. In terms of healthcare, a diagnosis does make sense, because then it's operating on noted, factual details rather than what could essentially work as word of mouth. For every other context I really don't see why a diagnosis is important- people are trans because they're trans and people should respect that whether the person has spoken to a doctor about it or not. i don't think it's important to me personally, however it is necessary for lots of healthcare routes and therefore it may be important. In relation to my parents, family, carers, school and socially it would not effect me. However some people may find their family or friends "accept" the fact that they are transgender if they have a professional diagnosis. I don't think you need a diagnosis of gender dysphoria, the same way you don't need to be diagnosed with homosexuality. I think the concept is outdated and doesn't have a place in the modern world, and the focus on it only causes delays and leaves trans people without care for years due to GIC bottle necking. Transition care should be informed consent at the GP level, they already prescribe hormones to cis people, why not trans people. And the only reason for the worry about cis people accidentally transitioning and regretting it, is because trans bodies are seen as unwanted and hated. Trans people are forced to go through the

		<p>wrong puberty for years and we're meant to just be fine with that, for the 4 year wait to even see a doctor to talk about getting hormone blockers, and that's fine. But a cis person taking cross sex hormones for a year and deciding its not for them is seen as a tragedy because people hate trans bodies, we're seen as tragic and disgusting and that's the only reason why cis people accidently transitioning as seen as something to stop at all costs, at the cost of trans peoples lives taken via gatekeeping.</p> <ul style="list-style-type: none"> • Gender dysphoria diagnoses help individuals recognise what they are and give a psychological sense of relief • I think it can help someone understand themselves better but it is not necessary to be 'diagnosed' for someone's experience to be valid. Everyone is different. • However, it can help someone with their social side of their transition, it can help others understand that this is not 'a phase' and that they need support e.g = allow them to wear the correct uniform at school, have their pronouns respected not just at home but also within medical settings. • Sometimes we cope with things better if there's a reason given for how we feel • No, gender dysphoria only applies to some trans people. Others do not experience it and this excludes them. • Nope. I know I have dysphoria, that's enough for me. I don't need some cis person to tell me that. It's not like being autistic, where having a diagnosis helps you advocate for yourself and access support and accommodations - being trans isn't a disability. It's just a thing you are. And you don't need permission to be trans or to do things about it. • If my family weren't accepting of transness, why on earth would they be accepting of a diagnosis of gender dysphoria? A doctor's slip of ""yep they're trans i guess"" won't change bigoted views as far as I see it. • And I wouldn't walk up to my friends and show them a piece of paper and go ""look I'm diagnosed dysphoric"" - I'd just. Tell them. That I'm trans. I'dk it just feels really weird to have a diagnosis for something which isn't a disability or a mental condition. It's like giving someone a diagnosis for liking cats. You *think* you love cats, okay, well let's put you through a gruelling assessment process to determine whether you *really* like cats or not, and if we personally determine that you do, we'll give you a diagnosis for cat-liking, without which you're not allowed to adopt a cat or buy things with cats on them. • All the diagnosis is to me, is another barrier in the way of actually accessing healthcare. ""You want to transition? Okay fill out this document, talk to three separate GPs, fight to get even referred to the service, wait 27 years, go through a horrible assessment where someone decides if you're trans or not for you, wait another 5 years, and maybe, just maybe, someone will let you get actual medical care several months later.
<p>What do you expect from the clinicians in the service?</p>	<ul style="list-style-type: none"> • An understanding of LGBTQ+ identities alongside perspectives, experiences and issues. • Good communication. • To be caring and accepting. • To have a sound understanding of 	<ul style="list-style-type: none"> • To get me a hormone prescription suitable for my physiology, and to give advice in matters related to transition health care • An understanding of LGBT issues, perspectives and identities. Familiarity with LGBT people, and being used to talking to them. Even better if the clinician is LGBT themselves. • support in my transition and being taken seriously as a transgender individual • I would expect the basic respect and decency, that they have an understanding of the LGBTQ+ community and understanding and good communication with youth.

	<p>how the system works fully, to be understanding and able to answer questions surrounding gender related care.</p> <ul style="list-style-type: none"> • To provide quality gender affirmative care. • To treat people in a timely manner. 	<ul style="list-style-type: none"> • I'd expect them to have a good understanding with mental health for people, so they can best help people who are suffering in silence because they can't be free. • To help me continue becoming my real me. Help me with medicines and other things I can have expect surgery that's for when I'm an adult. • To be caring and accepting • I expect them to understand how gender dysphoria feels, and not expect the patient to change their ways but find a way to overcome feelings of worthlessness. They shouldn't expect someone's dysphoria to be obvious signs, sometimes there are little things that someone could do to overcome feelings of dysphoria such as changing their behaviour to suit themselves to how they identify. I would hate it if they compared other people's experiences to mine in a way that made mine less valid. I think instead of that they should take into consideration that not everyone who is trans has a horrible experience coming out, being bullied, etc. As a society in England, I think we have become a lot better at acceptance, so it's not unlikely some people have a really good time coming out, having an accepting community of people surrounding them. • What I need for alleviating gender dysphoria. Could be hormones, could be surgery. • to know how the system works fully and be understanding and able to answer my questions about gender related care. • They should be gender specialising therapists, whose hand can't control or stop someone from transitioning if the trans person says the wrong words. For as long as they can stop medical care at any time, trans people are unable to be honest with them and their job is just rubber stamping and gatekeeping. • Support, psychological assessment (not in a way where they are trying to find something 'wrong' where they dismiss the concerns of patient) • To understand and be their for whoever is seeking help. • Support guidance advice • To be patient and listen to us about our experiences. Even we may not know what we want, but to have someone help us along the journey is very important • At this point? I don't really expect ever to see them.
<p>How important is the location of the service?</p> <p>a. What is important in relation to the environment of the clinics?</p> <p>b. Would you prefer a hospital or community location for the service?</p>	<ul style="list-style-type: none"> • The need for remote services. • The need for more local services alongside the main hubs to improve accessibility and reduce barriers. • For GPs to be more able to provide gender healthcare services. • For clinics to be easily accessible via public transport. • Community location would be more inviting and comfortable. • Hospital settings often cause anxiety. 	<ul style="list-style-type: none"> • The location of the service is not important thanks to the Internet, although people without Internet access may struggle if it is too far. • I would prefer my local GP to host gender specialist care provided they will not needlessly block attempts to transition. • More accessible gender clinics is so important - I live in a major city and yet I have to get a 2 hour train journey just to get to the closest gender clinic in the country. At the very least patients should have their travel costs reimbursed. • Hospital vs community location doesn't bother me, whatever fits the needs of the NHS. • location is not important as long as its near enough for me to be able to get there • A. It should be a localised thing, with a ward in every hospital or a location in every city B. I'd prefer a community location for the service, or at least a setting that resembles a friendly and community location. • Somewhere my parents could get to easily as they don't drive. • Clinics should be warm and friendly and not like a hospital, I'd prefer a community location • I think they should be placed in a way that suits all surrounding cities and is easily accessible for everyone in England who experiences dysphoria. It would be terrible for the clinic to be

		<p>placed in a part of England that isn't as accepting as other places, as it would drive people away. Instead, they need to choose appropriate locations that welcome them with open arms with a non-judgemental mentality.</p> <ul style="list-style-type: none"> • It would probably be good if clinics feel... This is weird but... Not clinical. Welcoming rather than all sterile. Hospitalish environments can be quite alienating. Community locations would probably help with this, as well as being more common than hospitals. • the location of the service is not very important to me as gender care is more important and i am willing to travel far distances in order to get this care. however it would be very useful if there were more locations so that waiting times could be spread between regions and it is more easily accessible. As long as the clinic is friendly and welcoming and understands the needs of the patient then it will be a great place for people with issues related to gender to get care. Personally i have no preference whether it is a hospital or a community location for this but i believe there should be more. • I think gender care should take place at the GP level, for poorer trans people, traveling to a specialised service and location is unfeasible. • Either. There just needs to be plenty of them where the clinicians are well-informed • Needs to be accessible and don't have a preference as would travel for help • Location matters as some may not be able to reach the service in person. The environment needs to be welcoming, a lot of trans people are anxious about telling others their identity. • A community location feels more cosy and can let people relax • I feel like a hospital setting would be pretty alienating - if I'd got anywhere near actually going to see someone when I was younger especially, going to a hospital setting would have felt like I'm being Cured of something rather than supported through a change • Also in terms of location, having somewhere you can actually get to by public transport in less than 4 hours is always nice.
<p>What do you see as some of the challenges for the new services?</p> <p>What ideas do you have to address those challenges?</p>	<ul style="list-style-type: none"> • Long wait times – an informed consent model for trans adults could help alleviate these and opening additional locations to provide care for more people at any one time. • Waiting times for those who were on the young people waiting list and then transferred to the adult list – more accommodations should be made for these people so that they are seen in a more timely manner. • Having enough doctors/resources – more investment in these areas would be highly beneficial. In addition, working with local hospitals 	<ul style="list-style-type: none"> • Long wait times are a main problem. An informed consent system for trans adults would solve this and allow specialist counselling to be focused on those who ask for it, or for those under 18 • Having enough doctors/resources/etc is a problem. More investment would help, since many private gender services are run by/operated by NHS doctors and nurses, who could just be providing those services on the NHS if they were funded properly. • hormone blockers are reversible and under 18s should be able to access them so they don't have to go through the severe dysphoria of the puberty that doesn't correlate to their gender • Getting to people, it needs to be actively advertised and open, so that the people who need the healthcare can get it in a suitable amount of time. a solution would be loads of location with staff who are already working in the hospital, or hire more staffs. • Big wait times, hire more people to work, allow my doctors to help me, work with our local hospital. • Waiting times are horrendous ideally train more people and open more locations • Other than the later start-up than what they said they were aiming for that caused many transgender people to be discouraged and worry for their future, I think that the only challenge is maintaining a constant speed at which they see people. They've got to be organized and take it seriously as they would for any other diagnosis, and not have months between appointments where doctors may forget the personality of a patient. I also think there needs to be more support sent out to people who are struggling

	<p>would help significantly.</p> <ul style="list-style-type: none"> • Time between appointments – by better resourcing the system these could be reduced significantly to provide satisfactory continuity of care. • Reluctance to prescribe hormone blockers – they are reversible and provide time for young trans people. These should be prioritised for the wellbeing of young people. 	<p>with gender dysphoria. There is a lack of support and education in environments such as work and school.</p> <ul style="list-style-type: none"> • The Tories being bigots is a big problem, sooo get voting, people reading survey responses. Yes, you. • long waiting times. opening in more areas will help to decrease waiting times as it can be spread between areas and more people can be treated. also waiting times for those who have been on different waiting list e.g. moving from child to adult care, waiting time should be factored in to reduce long waiting times. • Funding, and attacks from the growing anti trans radicals. • Its hugely needed for the people going through this, not so much for the public. So there may be public resistance. Education for everyone • People being understanding and accepting • Implementing new services for trans people will always have backlash regardless of intent, this is a problem that is best overcome by humanising trans people as a lot of prejudice comes from decades of being transgender being seen as a mental illness or fetish. Making people see trans people as just people is vital • With the increasing amount of people who are looking to access trans healthcare, changes clearly have to be made to accommodate for that • I mean, for starters, you could remove the entire assessment process and gender clinic stuff for the adult trans healthcare sector so you have more resources for helping children and young people. Adults should be able to decide whether they want healthcare or not for themselves, instead of being blocked behind years of waiting lists and exclusionary and invasive assessments etc, and if you just let adults choose their own healthcare you'd be able to provide more people to talk through trans medical care with young people. • I'm not very familiar with the services for young people because I literally never saw them because I aged faster than the system could move, but I'm sure there are unnecessary parts of that system (which exist only to cater to fear-mongering beliefs that children are being transed irreparably) that could be dropped too.
<p>Are there any aspects of the current service you think should be built into the new services?</p>	<ul style="list-style-type: none"> • The provision of trans healthcare on the NHS. • Telephone calls to increase accessibility. • There were no other factors identified that should remain from the current service offering. 	<ul style="list-style-type: none"> • Providing trans health care should continue between both. • Not sure • trans healthcare • Not really. • Not sure as we only had a phone call 3 years ago and still waiting for the first appointment • None • More support for young children and confused parents with accurate information and figures. • None specifically I can think of, just use general common sense stuff. • I don't know. • I think the idea of a gender specialist isn't entirely bad or wrong. I think there is a use for them, but they shouldn't be the only way to access transition care, they should work side by side with medical transition care, not as a blockade to it. • What is the current service? Several GPs at two different centres did not want to discuss. There was no knowledge or understanding even when a private practice was willing to hand-hold the GP through the testosterone prescribing. GPs were not willing to do anything • Staff that are trans

		<ul style="list-style-type: none"> • Calling by phone regarding appointment for gender treatment should stay in place as an option as some may not be able to come in person or feel anxious
<p>Do you have a sense of the type of support or treatment you would personally like be offered?</p>	<ul style="list-style-type: none"> • Proper care and good communication. • More accessible. • Understanding and knowledgeable care providers. • Understanding of more than binary trans identities. • Counselling. • Recommendations for supportive services like The Kite Trust and other charities. • Advice on medication dosage. • HRT prescriptions. • Potential surgery consultations. • Vocal coaching. • t. 	<ul style="list-style-type: none"> • Voice coaching (I am being offered it currently), advice on medication dosage, a prescription for HRT, consultation on potential surgeries • Therapy/psychological support and counselling. HRT and everything that goes with that. Voice training. Hair removal/reduction treatment. • be able to access gender reassignment therapy when I'm 18 • There is a lot, primarily proper care, communication for people who are unable to seek the groups (proper recommendation for services like TKT for people who live in the appropriate areas), and just general treatment without all of the issues. • I would like to see them include services for people to adjust their lifestyle to be gender affirming. • I just want to have people who understand me to talk to, be able to take medication to stop certain puberty things happening and for it to be easy to access for me and everyone else. • Yes I'd like to start hormones • Personally, I would like hormone replacement for testosterone and top surgery to remove my breasts. Later on, I would also like to undergo bottom surgery to remove my vagina, but that would be when I become an adult as it's a hard surgery that takes a lot of time and healing. • I want hormones, I have wanted hormones for a couple of years. Eventually I would like surgery. • voice training, testosterone, top surgery, puberty blockers for young teens, counselling • A gender focused therapist that you can actually talk to about whatever feelings to have around gender and your body, without the implication that if you aren't the text book binary trans person they prevent you from getting hormones. • Assessment, help. Offering what can be done next. Endocrinology assessment and hormone therapy with linked services that can offer safe surgery, where needed. • Counselling and support to gender questioning younger children • I personally would like to be placed in a group of people that are going through similar treatments to feel less alone • Support in working out what sort of care I'd like best, talking through available options with an unbiased, nonjudgmental professional
<p>Do you have any suggestions about what the services should be called?</p>	<ul style="list-style-type: none"> • Avoid gendered language in the name and avoid use of dysphoria. • Use of "Gender Identity" within the name. 	<ul style="list-style-type: none"> • Nothing directly, but it would be good to avoid anything that includes dysphoria, or particularly gendered language in the name of the service. • "Gender Identity" is a good term to be used, whether that's Gender Identity Service, Gender Identity Clinics, etc. Definitely more focus on gender than sex. Also avoiding negative things/problems like "gender dysphoria" since not everyone experiences dysphoria in the first place, and also gender services should be supporting people life-long, even after they no longer experience dysphoria or any problems and are fully settled. • Not a clue, sorry :(• I like the name GendersUnite • N/A • Gender-related care, Dysphoric related care, • honestly i don't care as long as it's providing quick healthcare • Informed gender consent clinics, I don't know. • Endocrinology care

<p>Aside from specialist gender services what other services or support are/would be helpful (both within and outside the NHS)?</p>	<ul style="list-style-type: none"> • Voice coaching. • Hair removal. • LGBT support and social groups. • Improved and timely mental health support . • Parental support groups. • Educational workshops. • More accessible therapy. 	<ul style="list-style-type: none"> • Not sure • Voice coaching • LGBT support and social groups. • better mental health support • Proper groups to discuss and help with mental health, proper therapy offers to young people (an actual therapist people can see every two weeks) • Youth groups. • Laser hair removal, gender affirming care overall • Ones that provide support for parents who have transgender children would be amazing. • Mental health support is always important, particularly for our societal subgroup • counselling, support groups like TKT (the kite trust) • Universal basic income, being trans means you're going to be the target of a lot of hiring discrimination and difficulties keeping a job. • Endocrinology and surgery consultations • Workshops that have both queer and non queer people interact on an informal basis. It'll help to show that queerness is part of an identity, not their whole self • More accessible therapy (and more accessible long-term therapy) either through charity organisations or the NHS; I spent years actively crawling through hoops to get the NHS to acknowledge that I was even struggling and when they finally decided to listen to me they decided I needed high-intensity therapy, so clearly something went wrong along the process there
<p>What support should/could be given to parents / families / carers?</p>	<ul style="list-style-type: none"> • Clear and accessible information on gender identity, dysphoria, social transition. • Increased parental support. • Information for families on how to support a child's transition. • Counselling. • Support groups. • Educational resources. 	<ul style="list-style-type: none"> • I don't know. • Information on gender identity, dysphoria, etc. Advice on how to for example, train yourself to use someone's new name/pronouns. Counselling if necessary. Support and social groups for families/parents/etc of LGBT people (especially parents of LGBT youth) • how to support their child's transition and managing their personal emotions about it in a way that wont damage the child • Information which is actually helpful, groups where they can discuss. (Support groups though that sounds like we're a bad thing) • More parent groups and given more information • Counselling so someone professional can explain it • I feel like there is a lack of support for parents who are uneducated and want to learn how they can support their child, and also for ones who have to essentially go through a loss in their life. It may be hard for them to come to terms with the fact that they've lost something and gained another, so a service that could provide support and guidance for parents would be extremely useful. • Counselling and group discussion would be good, so people can talk about their experience with people who understand. • information sessions to family who are less understanding • I don't really see why they should be put into focus about somebody else's medical care. • I guess someone to convince them not to be bigots? and to walk them through the process and side effects to look out for etc. Pamphlet of ""your kid is trans, here's what to do"". • Education, support, understanding, not labelling this as something strange • The same as children and groups for parents to talk • guidance and care towards understanding their the trans person, such as weekly group talks • General support for understanding having a trans child/family member would be fantastic, and ongoing support for how to

		<p>advocate for that person, follow their lead and do the right thing for them (e.g. "if they decide they're nonbinary somewhere along the way, don't argue with them, let them explore it and make sure everyone uses their preferred pronouns")</p>
<p>What and/or where are your trusted sources of information if any?</p>	<ul style="list-style-type: none"> • The trans community. • Friends and peers. • Charities: <ul style="list-style-type: none"> ○ Gendered Intelligence ○ The Kite Trust ○ Transgender UK ○ Stonewall • Pink News. • Reddit. • Social media. 	<ul style="list-style-type: none"> • Other trans people as I have heard stories of doctors putting trans women on the bare minimum of HRT dosage and them seeing no results for years until another trans person told them their dosage was incorrect. • PinkNews, GenderedIntelligence, The Kite Trust, the /r/transgenderuk subreddit, Stonewall, @Trans_Writes • The Kite Trust, I can trust the people there know their information, or would care enough to help. • Gendered intelligence, kites trust and my parents • Other trans people • N/A, Mainly myself and personal experience. • other trans people, social media (of trans people or professionals), some online sites eg transguysupply articles • my lived experience and experience of close friends who are also trans. • A friend who had gone through this, Kite Trust, Gender care • The kite trust • Kite trust
<p>What general information would be helpful for young people thinking about their gender identity?</p> <p>How would you want this information to be provided?</p>	<ul style="list-style-type: none"> • Clear, easily accessible information. • Clear information surrounding what wider support is available. • Ability to access information anonymously. • Access to knowledgeable professionals. • Information on how to feel gender euphoria. • Education and support in schools. • Community sharing and learning from within the trans community. • Safety information. • Information on how to advocate for yourself. • A variety of formats of information provision to ensure accessibility – leaflets, videos etc. 	<ul style="list-style-type: none"> • I don't know, but it should be provided with tact and be provided concisely instead of being a wall of text on the NHS website (which it often is) • Letting them know there's support and further avenues for information out there. They should know where they can go for someone to talk to, whether it be a dedicated staff member(s) at school, or websites, or whatever. There should be anonymised ways of learning things due to risks of being out. • being able to access a professional who can offer advice, help individuals understand what they are going through and diagnosis • I would like proper information about ways to feel gender euphoria, and proper methods that help, other than the ones online along the lines of "ask a friend to call you by your chosen name" because realistically that does nothing as that's what you already tell them to do • Knowing its OK to explore gender. • Taught at school • It's a journey not a race take your time. Through leaflets, online • I think telling them that they aren't alone in this is a big one. When I came out, I thought I must have been the only one feeling like this in my entire area, let alone school at the time. But I slowly realized over time that that is not the case. There needs to be more support in schools that can educate children who don't know a lot about it and how they can become more accepting of their friends at school if they ever came out as trans or gay. • It would be good if there were lessons on the school curriculum covering what being trans is, the idea of being non-binary, general terms like cis and trans. Put them in the LfL curriculum. • signs of gender dysphoria and education of what it is (possibly made by trans people), through classes/ powerpoints. • I think talking to older trans people would be a lot of help, doctors honestly do not really know anything, and a lot of trans people end up having to teach their doctors. • But there is so so so much info that would be useful to someone starting to transition, that I had to figure out myself, because the doctors and gender clinicians didn't know or care. So some sort of trans pen pal initiative.

		<ul style="list-style-type: none"> • What to do next. How to feel heard and safe, period care, hormonal assessment or blood tests. Via GP • -Knowing that everyone is different and that their isn't a 'set way' they need to be trans or non-binary. Everyone's experience is different and they don't need to fear that they are not 'trans enough' to be valid. And also that, if they change their mind and they are no longer questioning, that it's also ok. -They also need to be aware of what these identities are. -Who they can talk to e.g = websites/phone numbers of charities/support systems they can talk to. • Schools and charities • A booklet or pamphlet can provide info but the best way is by people talking to them earnestly • I personally just binged youtube essays and scoured the internet but for kids who shouldn't/don't want to do that, I think a range of ways of providing the information would be good. A video version, a leaflet version, a website version, an audio version, etc, so that it can be accessible for as many people as possible. • As for the information itself, I think an emphasis on the fact that there are no rules and the possibilities are great is good. Not just "you can be trans binary or trans nonbinary" but "remember intersex people exist too, and also here's a few of the microlabels some people use to describe themselves, isn't it cool how much diversity there is? there's almost certainly a 'word already out there which you will connect with in some way, and if there isn't, that's okay! Make up a word yourself, if you like, or simply don't use a word at all! There's no wrong way to be trans" and also the whole "your gender expression is completely not reliant on your gender identity, you can "look female" and be a boy or be nonbinary or anything"
<p>What information would you need to know if you were thinking about medically transitioning?</p>	<ul style="list-style-type: none"> • Information on hormones – dosage, potential side effects, fertility effects, changes to expect and what effects are permanent. • Hair removal options. • Informed consent modelling. • Surgical options. • Surgery risks and recovery time. • A timeline of what treatment might look like. • Clear anecdotal evidence on medical transition alongside the academic evidence. • Clear advice on all potential risks and associated statistics. • How to change your name. • Potential expenses. 	<ul style="list-style-type: none"> • What hormones to take, potential side effects, what changes to expect, effects on fertility, how permanent any changes may be (especially for Trans men since facial hair and deep voices are harder to get rid of), the experiences of other trans people, who to contact if you experience transphobia, how to shave/wax (for both masc and fem people) • It's normal, it's safe. Other than that, general informed consent stuff to be discussed with a doctor. • side effects, risks, recovery time, expense if going private instead • All the information about what happens (biology), and tips to make sure it's a successful transition both before and after • The medication used, what it does, how long it takes, can I do it alone or do I need help. Does it really work • Wait times, legal changes maybe a timeline of when you will notice changes • Side effects, Potential consequences, Downsides, Upsides, etc. I think it's important that you rule out every single possible effect of medically transitioning. The good ones, the bad ones, the emotional ones. I think they should gather information from people who have already undergone medical transitions and see what they have to say, and ask what were some of the effects of their transition - good and bad!! • I'd need reassuring about potential risks, statistics relevant to those risks, and knowing how long I can expect to see potential results (in terms of hormones). • the effects (both negative and positive) of starting hormones and side effects of surgery's, hormones and other procedures. • Basically a trans focused version of the sex ed you get about puberty in school. I think you could write books and books about useful info to have, but that would honestly just be overwhelming and offputting.

	<ul style="list-style-type: none"> • Location of treatment. • Information surrounding post-surgery dysphoria. 	<p>And Honestly if someone is seeking out transition care, they've probably already spent a fare while researching themselves about it. I came out to my mum when I was 14, asking her to take me to a doctor about getting hormones. But I only knew that medical transition was even a thing because i'd spent two years prior looking it up on the internet.</p> <ul style="list-style-type: none"> • How to name change, how to safely use hormonal treatment, surgical options. • All of the positives and negatives. A lot of trans people who are seeking this treatment usually search this themselves online or through trans people online (YouTube). • Age and where it's available • risks, expense, location, the possibility of needing to go to another country, time off work, telling coworkers/friends/family, trustworthiness of clinician helping with medical procedures • What are the benefits, what have people who've gone through each process thought about it, what are the side-effects, what are the possible drawbacks, what is the time-scale, how reversible is it, what the process actually involves (e.g. not being able to do stuff for several months after certain surgeries), what medical professionals think about it, what everyday people who've done it think about it, what are the things nobody tells you (e.g. post-surgery dysphoria), what is the satisfaction rate (preferably with some stories of people who've done it and loved it, and some who've done it and didn't love it as much)
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SUMMARY MESSAGE/CONCLUSIONS

Brief overview of main conclusions from the focus groups. Focusing on:

1. How services could be organised going forward.

Respondents shared that the waiting lists are wholly unacceptable. Many are waiting years and years to even begin their gender healthcare journey. This has a profoundly negative effect on mental health and wellbeing. Moreover, they noted the need for additional support during the waiting time.

Time between appointments was raised as a significant issue, the community is not receiving effective continuity of care.

Communication as a huge issue raised across the board – lack of communication throughout the entire process with patients and the anxiety this creates.

Respondents shared that there needs to be a clear repository for information on what support, procedures, processes and social support is available and how to access these.

2. The care the participants would like to receive.

The overarching theme from all respondents was that they wanted to be treated with care and respect and receive timely and effective care.

Respondents shared that they want to be treated by professionals who have an understanding of the intricacies of trans identities and who can provide them with informed guidance around their treatment options both from a medical and social perspective.

KEY MESSAGES IDENTIFIED

MESSAGE IDENTIFIED	SUPPORTING QUOTES
The need for the provision of holistic care for trans people.	“In a just world it would provide care to trans people and help them navigate their feelings, which is what they're meant to be doing but the power dynamics and ability to shut down care makes it close to impossible for trans people to actually explore their feelings without having their lives ruined, the gatekeeping forces us to stick to a script and ignore what we want to be talking about.”
Trans healthcare is treated very differently to all other healthcare, with vital treatment not being effectively provided in a timely manner.	“You don't have to wait 23 years to see someone who will determine if you're In Pain Enough to have knee surgery or pain blockers just in case you regret having knee surgery or pain blockers so why they do it for trans healthcare I can't comprehend.”
More gender clinics are required which are also more accessible for everyone, including those in more rural areas.	“More accessible gender clinics is so important - I live in a major city and yet I have to get a 2 hour train journey just to get to the closest gender clinic in the country.”
Overemphasis on “diagnosis” rather than providing care.	“It just feels really weird to have a diagnosis for something which isn't a disability or a mental condition.”
The need for more community locations as opposed to overly medicalised hospital locations.	“Going to a hospital setting would have felt like I'm being Cured of something rather than supported through a change.”

COMPLETION
