

Cass Review - Gender specialists questionnaire

Overview

About this questionnaire

This survey is aimed at specialists working with children and young people needing support around their gender identity in the UK.

The survey should take around 20 - 30 minutes to complete. It's aim is to collect the valuable thoughts and insights of specialists to inform the Independent Review of gender identity services for children and young people. Some questions are deliberately simplistic or provocative, some questions are designed to test what we have heard from other stakeholders.

All data from the survey is private so you can feel confident to share your genuine opinions. The information you provide will only be accessed by the Cass Review Team. Nothing that you tell us on this form will be attributed to you or shared more widely.

About the Cass Review

The Independent Review of Gender Identity Services for Children and Young People (The Cass Review) was **commissioned by NHS England and NHS Improvement** <https://www.england.nhs.uk/commissioning/spec-services/npc-crg/gender-dysphoria-clinical-programme/gender-dysphoria/independent-review-into-gender-identity-services-for-children-and-young-people/> to make recommendations about how to develop and improve the services provided by the NHS to children and young people who are questioning their gender identity or experiencing gender incongruence.

The scope of the review is broad and will look at different aspects of gender identity services from primary care through to specialist services with a focus on how care can be improved.

Further detail can be found on the **Cass Review website** <https://cass.independent-review.uk/> .

If you are not a specialist

If you are a primary or secondary care clinician, social worker or other related professional working with gender questioning children and young people you can register your interest in participating in the Cass Review by contacting cass.review@nhs.net.

Why your views matter

The exercise is not about seeking to resolve the tensions, change minds or force a conclusion, but rather explore where shared views and values may exist and to build a picture of the current situation, creating a foundation of evidence upon which to develop solutions.

About you

The information you provide within this survey will only be seen by the Cass Review team. The information you provide will be reported anonymously. Nothing that you tell us within this survey will be publicly attributed to you.

1 What is your name?

Name *(Required)*

2 What is your email address?

If you enter your email address then you will automatically receive an acknowledgement email when you submit your response.

Email *(Required)*

3 Please select your age group.

Please select your answer from the list below *(Required)*

Please select only one item

- 18 - 29
- 30 - 39
- 40 - 49
- 51 - 59
- 60 - 69
- 70+

4 Please select the option that best describes your gender.*(Required)**Please select only one item*

- Female
- Male
- Non-binary
- Trans Female
- Trans Male
- Other gender identity

If you have selected "other gender identity" please describe

5 Please select the option that best describes your ethnicity.Please select your answer from the list below *(Required)**Please select only one item*

- White-British
- White-Irish
- White-Any other background
- Asian or Asian British-Indian
- Asian or Asian British-Pakistani
- Asian or Asian British-Bangladesh
- Asian or Asian British-Chinese
- Asian or Asian British-Any other Asian background
- Black or Black British-Caribbean
- Black or Black British-African
- Black or Black British-Any other background
- Mixed-White and Black Caribbean
- Mixed-White and Black African
- Mixed-White and Asian
- Mixed-Any other mixed background
- Other Ethnic Group – Any other ethnic group

6 Please select the option which best describes your sexual orientation.*(Required)**Please select only one item*

- Bisexual
- Gay
- Heterosexual
- Lesbian
- I do not wish to disclose
- Other sexual orientation

If you have selected "other sexual orientation" please describe

7 Please select the option that best describes your religion.

Please select your answer from the list below *(Required)*

Please select only one item

- Atheism
- Buddhism
- Christianity
- Hinduism
- Islam
- Jainism
- Judaism
- Sikhism
- I do not wish to disclose my religion / belief
- Other religion / belief

If you have selected "other religion / belief" please describe

Your professional role

8 What is your profession?

(Required)

Please select only one item

- Endocrinologist
- Family therapist
- Nurse
- Psychiatrist
- Psychologist
- Psychotherapist
- Social Worker
- Other

If you have selected "other" please describe

9 Which of the following best describes your current status?

(Required)

Please select only one item

- I currently work at GIDS
- I have previously worked at GIDS
- I currently work at another specialist gender service in the UK
- I have previously worked at another specialist gender service in the UK
- Other

If you have selected "other" please describe

10 How long have you/did you work with children and young people who need support around their gender identity?

(Required)

Please select only one item

- 0 - 1 years
- 1 - 2 years
- 2 - 3 years
- 3 - 4 years
- 5 years or more
- Not applicable

11 If you currently or previously worked for GIDS which location did you work in?

Please select only one item

- Birmingham
- Bristol
- Leeds
- London
- Other

If you have selected "other" please describe

About the patient cohort

12 What are the differences or commonalities when providing a service for a child or young person who needs support around their gender identity compared to another child or young person experiencing non-gender related distress?

(Required)

13 Please indicate the extent with which you agree or disagree with the following statements:

<i>(Required)</i>	Never	Rarely	Sometimes	Often	Always
In your professional experience, children and young people who need support around their gender identity have already obtained information about potential interventions and care pathways available to them <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In your professional experience, children and young people who need support around their gender identity are well informed about their options <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In your professional experience, children and young people who need support around their gender identity arrive with a pre-determined preferred intervention / pathway in mind <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In your professional experience, parents/carers of children and young people who need support around their gender identity arrive with a pre-determined preferred intervention / pathway in mind <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Assessment

14 Thinking about the purpose of assessment of children and young people experiencing gender dysphoria, please state the extent to which you agree or disagree with the following statements:

<i>(Required)</i>	Strongly agree	Agree	Neither agree or disagree	Disagree	Strongly disagree
Children with gender dysphoria know their mind, and the purpose of assessment is to determine whether they wish to have medical intervention and their readiness for this <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender Dysphoria in children and young people is a symptom, and it is important to make a differential diagnosis as to whether transition is the right option or whether there is another way to address their gender related distress. <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender dysphoria is always an indicator of another underlying problem and assessment should focus on understanding the causes of their distress. <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15 To what extent do you agree or disagree that it can be helpful to undertake a mental state assessment on children and young people presenting at your clinic?

Please select all that apply

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

16 What role does a mental state assessment have?

17 To what extent do you agree or disagree that it can be helpful to use psychological formulation for the children and young people presenting at your clinic?

(Required)

Please select only one item

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

18 What role does psychological formulation have?

19 Is there anything you want to tell us about the assessment of children and young people needing support around their gender identity?

20 What do you think the role of the specialist service should be?*(Required)*

21 What is your minimum expectation of what support other agencies should have offered to young people and their families before they are referred to GIDS? Tick all that apply.*(Required)**Please select all that apply*

- Safeguarding risks
- Risk of suicidality / other urgent mental health issues
- Child's understanding of gender identity
- Degree of distress / preoccupation regarding gender identity
- Whether child meets formal diagnostic criteria for gender dysphoria
- Whether child meets formal diagnostic criteria for gender incongruence
- Clarity of child's binary vs non-binary gender preference
- Clarity of CYP's sexual orientation
- History of trauma / abuse
- Child's developmental age / maturity
- Diagnosis / assessment of suspected neurodiversity
- Diagnosis of other possible mental health conditions
- Child's knowledge of available treatment options
- Child's understanding of implications of available treatment options
- Parental account of onset of child's gender distress
- Parental attitude/ beliefs about child's gender distress
- Other

If you have selected "other" please describe

22 What factors might indicate that a child or young person would not be appropriate for GIDS referral?*(Required)*

Referral for medical intervention

23 What factors do you take into consideration when deciding suitability for puberty blocking treatment?

24 What factors do you take into consideration when deciding suitability for cross-sex hormone treatment?

25 When discussing treatment options with a child/young person, how would you describe the main purpose of puberty blockers?

(Required)

Please select only one item

- To pause puberty to allow further time to explore options
- To alleviate or reduce the distress associated with pubertal changes
- To improve the ability of the young person to 'pass' in their acquired gender
- The formal start of a transition pathway
- Other
- Not applicable to my role

If you have selected "other" please describe

26 What is the most challenging aspect of supporting children and young people in relation to informed consent to puberty blockers?

About your role

27 What would make your role supporting children and young people around their gender identity easier? Please rank the options below from most helpful to least helpful.

	1	2	3	4	5	6	7	8	9	10	11	12
An increase in my own dedicated time/capacity <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
An increase of specialist workforce capacity <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
An increase of wider system workforce capacity (e.g. CAMHS) <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improved service pathway <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clear clinical guidelines <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Additional training <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Neutral therapeutic framework <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Guidance and information (e.g. on the evidence base) <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Peer support and knowledge exchange <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Changes to current legislation <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Greater role for charities, voluntary sector and support groups <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other <i>Please select only one item</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you have selected "other" please describe

28 In your professional interaction supporting children and young people around their gender identity, which of the following areas do you feel that it would be helpful to have more information to guide your thinking on appropriate care/management? (Tick all that apply)

(Required)

Please select all that apply

- Legal framework
- Consent framework
- Evidence base – use of medication
- Evidence base – other interventions
- Stages of transition
- Development of identity
- How to discuss these issues with the child/young person
- Confidentiality
- Other
- None of the above

If you have selected "other" please describe

29 Is there anything else you want to tell us about services for children and young people needing support around their gender identity?