

APA Policy Statement on Affirming Evidence-Based Inclusive Care for Transgender, Gender Diverse, and Nonbinary Individuals, Addressing Misinformation, and the Role of Psychological Practice and Science

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Consistent with the American Psychological Association's mission to promote the advancement, communication, and application of psychological science and knowledge to benefit society and improve lives, this Policy Statement affirms APA's support for unobstructed access to healthcare and evidence-based clinical care for transgender, gender-diverse, and nonbinary children, adolescents, and adults, and for increased public accessibility to timely and accurate information founded in clinical and psychological science. Evidence-based clinical care, including gender-affirming care, should be noncoercive, adaptive to and centered on the needs of the individual receiving care, and rooted in psychological and clinical science, including recognition of gender diversity as a part of normal human diversity as well as recognition of limits in the current state of scientific knowledge.

Furthermore, this policy statement addresses the spread of misleading and unfounded narratives that mischaracterize gender dysphoria and affirming care, likely resulting in further stigmatization, marginalization, and lack of access to psychological and medical supports for transgender, gender diverse, and nonbinary individuals. Misinformation further creates distress and confusion for families and loved ones of transgender, gender-diverse, and nonbinary individuals, as they make decisions about their healthcare. The primary goal is to encourage psychologists to unite in their support for access to psychological and all appropriate healthcare services and treatment for transgender, gender-diverse, and nonbinary individuals.

Policy Statement:

WHEREAS gender diversity is present throughout the lifespan and has been present throughout history (Gill-Peterson, 2018; Hunt, 2016; Stryker, 2017); and

WHEREAS gender-based bias and mistreatment (e.g., discrimination, violence, non-affirmation, or rejection in response to gender diversity) pose significant harm, including risk of suicide, to the well-being of children, adolescents, adults, and families. (Delozier et al., 2020; Kosciw et al., 2022; Puckett et al., 2023; Trevor Project, 2023); and

WHEREAS transgender, gender diverse, and nonbinary individuals experiencing systemic discrimination and mistreatment targeting their gender identity or expression, may also face racial, ethnic, socioeconomic, religious, and other forms of discrimination, translated into greater discrimination and psychological distress than their counterparts (Castro-Ramirez et al., 2021; Hendricks & Testa, 2012; Lefevor et al., 2019; Lytle et al., 2016; Turban et al., 2020; van der Miesen et al., 2020); and

WHEREAS gender-related distress is a complex and nuanced psychological experience, informed by a rapidly evolving basis in new scientific findings and advances, which often requires specialized understanding and expertise (APA, 2015; Coleman et al., 2022); and

WHEREAS psychologists often play a vital role in assisting individuals experiencing gender dysphoria and their parents, caregivers, and families, offering valuable insights into their mental health and wellbeing (APA, 2015; dickey & Puckett, 2023; Hughto et al., 2015); and

WHEREAS psychologists can play an important and essential role in facilitating the support for client-led exploration of gender identity, assisting individuals in navigating their unique experiences (APA, 2015; Coleman et al., 2022); and

WHEREAS affirming mental health services provided by psychologists can positively contribute to the holistic care of individuals participating in gender-affirming healthcare or experiencing gender dysphoria, gender incongruence, and/or distress associated with discrimination and mistreatment (Anzani et al., 2019; Expósito-Campos et al., 2023; Hembree et al., 2017; Wittlin et al., 2023; World Health Organization, 2022); and

WHEREAS legislative efforts to restrict access to care have involved the dissemination of misleading and unfounded narratives (e.g., mischaracterizing gender dysphoria as a manifestation of traumatic stress or neurodivergence, and equating affirming care for transgender, gender-diverse, and nonbinary youth with child abuse), creating a distorted perception of the psychological and

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medical support necessary for these youth and creating a hostile environment that adversely affects their mental health and wellbeing (APA, 2023; Ashley, 2023; Hughto et al., 2022; Kremen et al., 2021; McNamara et al., 2022); and

WHEREAS such misinformation is widely disseminated through formal and informal networks, yet credible scientific evidence has not been widely disseminated and is not readily accessible to the public, having the potential to further stigmatize and marginalize all transgender, gender-diverse, and nonbinary individuals, hindering their access to indicated and necessary healthcare, worsening existing geographic disparities in healthcare access, and fostering an environment that may lead to discrimination (DuBois et al., 2023; Goldenberg et al., 2020; Weixel & Wildman, 2022); and

WHEREAS state bans on gender-affirming care and the imposition of legal penalties on providers engaging in evidence-based care disregard the comprehensive body of psychological and medical research supporting the positive impact of gender-affirming treatments, which include as a standard of care noncoercive, developmentally appropriate support for gender exploration and decision-making in alleviating psychological distress and improving overall well-being for transgender, gender diverse, and nonbinary individuals across the lifespan (Achille et al., 2020; Ashley, 2023; Green et al., 2022; Ramos et al., 2021; Tordoff et al., 2022); and

WHEREAS state bans on gender-affirming care disrupt not only the role of providers in offering evidence-based care but also obstruct patient and parental rights in shared decision-making (Clark & Virani, 2021); and

WHEREAS the imposition of such bans poses a direct threat to the mental health and emotional well-being of transgender, gender-diverse, and nonbinary youth, exacerbating the already high rates of depression, anxiety, and suicide attempts among this vulnerable population (Abreu et al., 2022a; Abreu et al., 2022b; Hughes et al., 2021; Kidd et al., 2021); and

WHEREAS obstructing access to psychological and medical interventions, including gender-affirming care, heightens the risk of negative mental health outcomes among children, adolescents, and adults; (Chen et al., 2023; McGregor et al. 2023; Turban et al., 2020; Turban, et al. 2022; van der Miesen et al., 2020);

THEREFORE, BE IT RESOLVED that the American Psychological Association (APA) steadfastly supports evidence-based clinical care for all children, adolescents, and adults inclusive of gender identity and expression; and

THEREFORE, BE IT RESOLVED that the APA upholds the rights of all individuals to unbiased health insurance coverage, rejecting discrimination based on gender identity and advocating for the inclusion of gender-affirming care, including psychological care; and

THEREFORE, BE IT RESOLVED that the APA underscores the necessity for access to comprehensive, gender-affirming healthcare for transgender, gender-diverse, and nonbinary children, adolescents, and adults; and

THEREFORE, BE IT RESOLVED that the APA underscores the importance of an accurate understanding of evidence-based care—highlighting the continuous need for research and expansion of the scientific foundation to further ensure full access to competent and reliable healthcare—s as essential to promoting inclusivity; protecting the rights of transgender, gender-diverse, and nonbinary individuals; and ensuring that they receive the necessary support and full healthcare attention, inclusive of psychological and medical care, in a compassionate and affirming manner; and

THEREFORE, BE IT RESOLVED that the APA supports efforts to address and rectify the dissemination of false information to ensure the well-being and dignity of transgender, gender-diverse, and nonbinary individuals; and

THEREFORE, BE IT RESOLVED that the APA opposes state bans on gender-affirming care, which are contrary to the principles of evidence-based healthcare, human rights, and social justice, and which should be reconsidered in favor of policies that prioritize the well-being and autonomy of transgender, gender-diverse, and nonbinary individuals; and

THEREFORE, BE IT RESOLVED that insurance plans should extend coverage for healthcare services tailored to the developmental needs of children, adolescents, and adults identifying as transgender, gender-diverse, or nonbinary, encompassing both psychological and medical gender-affirming care; and

THEREFORE, BE IT RESOLVED that equitable health insurance access is necessary to facilitate essential gender-affirming care, including access to mental health supports; and

THEREFORE, BE IT RESOLVED that the APA opposes efforts to obstruct access to evidence-based interventions for children, adolescents, and adults, advocating for inclusive healthcare coverage without gender-based discrimination; and

THEREFORE, BE IT FURTHER RESOLVED that the APA emphasizes the importance of psychological and medical care from an intersectional perspective, which takes into consideration the many facets of an individual's experience and provides services that are antidiscriminatory in all areas, including opposing racial, ethnic, socioeconomic, religious, and gender-based discrimination; and

THEREFORE, BE IT FURTHER RESOLVED that the APA urges support for policies facilitating access to comprehensive, gender-affirming healthcare for children, adolescents, and adults, recognizing the positive impact on mental health outcomes; and

THEREFORE, BE IT FURTHER RESOLVED that the APA encourages insurance providers to offer coverage addressing the healthcare needs of children, adolescents, and adults who identify as transgender, gender diverse, or nonbinary; and

THEREFORE, BE IT FURTHER RESOLVED the APA affirms the essential role and legal rights of parents and caregivers in taking action to ensure the well-being of children and adolescents while honoring their expressed gender identity, including involvement in the process of healthcare decision-making, as well as the role of parents, caregivers, and providers in supporting developmentally appropriate youth self-advocacy.

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