Topic: Ethical Issues in Transgender-Related Medical Care

Doctors can now provide an array of medical services to help transgender people have their bodies better match their desired gender presentation. These services include hormone blockers, hormone replacement therapy, gonadectomy, genital and breast reconstruction, Adam’s apple reduction, voice therapy, liposuction, and facial plastic surgery. Although professional guidelines on transgender-related medical care have been published, ethical disagreements remain.

Minors: Currently accepted standard-of-care guidelines issued by the World Professional Association for Transgender Health (WPATH) recommend that, because feminizing and masculinizing hormone therapies may lead to irreversible physical changes, they should only be provided to people legally able to give informed consent. But parents are ethically allowed to consent on behalf of their minor children for other medical services that result in irreversible physical changes (e.g., plastic surgery to correct congenital deformities, circumcision, and cosmetic surgery) when they reasonably think those services will best promote the children’s interests. Similarly, it can be ethical for a surrogate decision-maker to authorize, on behalf of an incompetent patient, medical treatment that is in the interest of the patient even if it leads to irreversible physical changes.

Youth with Legal Decision-Making Authority: Minnesota law allows minors to give legally effective consent to medical services if they live apart from their parents and support themselves financially. Controversy arose when NBC and other news outlets reported in November, 2016, that a Minnesota health care clinic provided, without parental consent or notification, hormone replacement therapy to such a minor, a 17 year-old transgender girl. Had the girl not been seeking transgender-related medical care, it seems unlikely that the situation would have made the papers.

Mental Health Screening and Waiting Periods for Adults: WPATH guidelines also recommend restrictions on providing some transgender-related medical services to adults. They recommend that feminizing and masculinizing hormone therapies and body-modification surgery be provided only after the patient has received a mental health screening by a mental health professional. And they state that genital surgery should be available only after the patient has lived continuously for at least 12 months in the gender role congruent with their gender identity. Other medical interventions that modify the body, though, do not require a prior mental health screening or a year-long waiting period.

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1 World Professional Association for Transgender Health, Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People: p. 35.
4 WPATH, Standards of Care: p. 21. See also Wylie Hembree et al. “Endocrine Treatment of Transsexual Persons.”
Are there, or are there not, ethically relevant differences between some or all transgender-related services and other similar medical services? If so, what are those differences, why are those differences ethically relevant, and what are their ethical implications for the provision of transgender-related medical care? If not, what ethical implications does that have for the kinds of policies and attitudes at issue in the circumstances described above?

Criteria
Restricting yourself to one or more of the ethical questions raised above, explain a major ethical issue concerning the provision of transgender-related medical care and defend a relevant ethical conclusion regarding that issue. Essays should be limited to 750 words (not including references) and will be judged on clarity, rigor of ethical arguments, consideration of alternate views, use of resources, and organization. Essays will be accepted now through April 4, 2017. The winners will be announced by April 11, 2017. Please submit essays in PDF format to medstu.ethics@gmail.com. (Questions about contest/essay logistics can be directed to the same email address.)

Award
The top three essays will be honored at the annual SMPH Bioethics Symposium on April 18, 2017. The author of the winning essay will be awarded $250, presented with a certificate, and have their essay published in WMAA’s Quarterly magazine. Space permitting, all entrants will be invited to a pre-Symposium lunch with guest speakers and faculty.