

Gender affirming care is an evidence-based approach and misinformation harms patients and clinicians

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On August 12th, 2023, two Turkish newspapers, namely 'Yeni Şafak' and 'Aydınlık', published articles about a scientific paper published in an international peer-reviewed journal. In the newspaper article, they misrepresented the research findings of this scientific paper involving results of a study undertaken by a team of Turkish academics on the provision of gender affirming care for young people. The newspaper article promoted a false narrative about academicians providing gender affirming care, accusing them with misconduct, deviation from scientific principles, and engaging in unethical practices.¹

The treatment and guidance provided by the authors was evidence based practice.² Over 25 of the most prestigious and eminent medical organizations have acknowledged the need of medical treatment for gender dysphoria, and recognize that access to gender-affirming care for gender diverse youth is best practice, most importantly life-saving. These include the World Health Organization, the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, the Endocrine Society and the Society for Adolescent Health and Medicine.³

There is a growing body of evidence indicating that the provision of gender-affirming treatment to young individuals experiencing gender

incongruence is associated with enhanced physical and mental health outcomes.⁴ Puberty suppression, a therapy approach that is both safe and fully reversible, is one of the most important advances in the history of transition treatment.² Numerous studies have demonstrated the efficacy of this intervention in mitigating the progression of permanent and psychologically stressful alterations linked to biological puberty. Moreover, it has been found to yield quantifiably improved outcomes in terms of psychosocial functioning and overall quality of life.⁵

Gender-diverse youth are more susceptible to experience depression, anxiety, familial rejection and victimization, social isolation, and are more likely to engage in nonsuicidal and suicidal self-harm and substance use, potentially as a result of external hostile influences.⁶ Compassionate care provided by clinicians who are knowledgeable about gender diversity has been shown to reduce these risks,³ but gender-affirming care providers, who are already limited in number in our country,⁷ have expressed concern regarding how the aforementioned article portrays gender-affirming care and its providers. Articles of this nature have the potential to limit the ability and number of clinicians willing to practice gender affirming care in accordance with evidence-based standards as they promote verbal, physical, and emotional abuse against physicians.

This type of targeted harassment is not unique to our country. A very recent study by Hughes et al.⁸ examined the experiences of gender-

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affirming care providers in the United States and discovered that 70% of participants had received threats related to providing gender-affirming care and described how this impacted their psychological well-being. This type of provocation only serves to further stigmatize such youth and their families, which eventually restricts their access to health care, and worsens their health outcomes. We call on policy makers, institutional leaders and health professionals to do all within their power to support gender diverse youth, their families, and the clinicians who serve them.

Author contribution

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Conflict of interest

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