

TransActual Briefing for MPs on the Levy Review of Adult Gender Services

Key Lines

- The [Levy Review of adult gender services](#) commissioned by the NHS in August 2024 has been published, and what it reveals is nothing short of a **national scandal**: systemic governance failure, trust boards blocking recruitment in spite of increased funding, grossly inadequate quality and outcomes data across services, and 40,000 people abandoned to 15+ year waits.
- The review rightly acknowledges that **trans people have been failed by the NHS** and that **change is desperately needed** - but misses an opportunity to **transform healthcare provision** by moving closer to an [informed-consent model](#) predicated on the **absolute right to bodily autonomy**, in line with international best practice.
- **The review's recommendations are mixed**: in particular, while we are supportive of proposed measures to **reduce waiting lists, deliver more care through local services** and **improve quality and outcomes data**, we are concerned by recommendations to **end the option of self-referral** and **require first assessments at GDCs to be conducted by senior clinicians**.
- LGBTQ+ organisations are therefore calling for **careful implementation** and **ongoing consultation with trans stakeholders**, to ensure there are **no rollbacks or restrictions on existing provision** and to **rebuild trust with the trans community**.
- Already, **ties have been revealed between the NHS's proposed National Research Oversight Board and anti-trans groups** - leading the [Trans Safety Network](#) to recommend all trans people **opt out of their healthcare data being used for research**.

Background

- All NHS services and their specifications are reviewed periodically. Following a [letter from Dr Hilary Cass](#), NHS England brought forward a review of adult gender care.
- Clinicians, along with trans and non-binary communities, [raised concerns](#) long before this; highlighting **stagnating waiting lists, treatment of trans identity as a mental health condition**, and **limited options for gender-affirming care and surgeries**.
- The Levy Review's scope includes the **organisation of gender services**, the **prescription of gender-affirming hormones**, **referrals into gender clinics**, the **role of GPs**, and other **non-surgical aspects of transition-related care**.
- In response to the Levy Review, the [Government](#) and [NHS](#) pledged - without clear timelines or funding allocation - to move forward on **creating a national waiting list**, **expanding the role of GPs in gender care** and **establishing productivity goals for all GDCs**, but also prioritised restrictions like **ending self-referrals** and **raising the adult service threshold to 18 years** that will only exacerbate bottlenecks and delays.

Policy Recommendations for MPs

- Write to the Secretary of State for Health and Social Care, Wes Streeting, to request **concrete timelines and additional funding for improvements to gender services** that will tackle the dangerously long waiting lists and deliver more care locally.
- Support NHS proposals to **move more transition-related care such as hormone therapy to local services** on the basis of informed consent, while **ensuring that trans people's existing arrangements for hormone provision from their GP are respected**.
- Contact your local Integrated Care Board to ask what measures they will implement to **address the review's findings and support trans people to access timely, supportive healthcare without discrimination**.

What are the main issues for trans people seeking gender affirming care?

Waiting Lists

- Long waiting times are dangerous, with **87% of trans people saying it has negatively impacted their mental health** and [coroners repeatedly referencing](#) long waiting lists in prevention of future death reports following trans people's deaths.
- [More than half of trans people](#) have accessed private care as part of their medical transition - creating more financial insecurity for already [economically disadvantaged](#) trans people in a cost of living crisis.

Barriers to care

- In a survey of over 4,000 trans people conducted by TransActual ([report forthcoming](#)), **60% of respondents were refused care for being trans**, with [hundreds of trans people](#) reporting their **GPs have refused to prescribe hormones**, even where NHS gender clinics have recommended them to do so.
- More broadly, [trans people report inconsistent standards and pathways](#) between clinics, **inappropriate questioning** from clinicians, and **chaotic administrative processes**.

Lack of surgical options

- Trans feminine people currently are **not offered facial feminisation surgery, tracheal shave and hair transplants**, despite many trans people saying they would prefer these to feminising lower surgeries that are currently available on the NHS.
- The [current waiting list](#) for trans people for masculinising lower surgeries (which are typically multi-stage) is more than **5 years long**.

For more information

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