

PRESIDENT'S GUIDANCE NO. 1

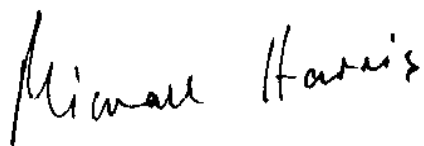
Evidential requirements for applications under section 1(1)(a) of the Gender Recognition Act 2004

1. Section 2 of the Gender Recognition Act 2004 (the Act) says that the Panel must grant an application if it is satisfied that the applicant
 - a. has or has had gender dysphoria,
 - b. has lived in the acquired gender throughout the period of two years ending with the date on which the application is made,
 - c. intends to live in that gender until death, and
 - d. has complied with the evidential requirements set out in section 3 of the Act.
2. The evidential requirements in section 3 relate to the medical evidence which must be provided. For standard applications there must be two reports from registered medical practitioners, one of whom works in the field of gender dysphoria. Alternatively, the application may include one report from a registered medical practitioner and a second report from a chartered psychologist working in the field of gender dysphoria. The reports must give details of the diagnosis of gender dysphoria and details of any treatment carried out or planned with a view to modifying sexual characteristics.
3. It is the responsibility of the Panel to decide whether the applicant has satisfied all of the section 2 requirements by considering the evidence provided in support of each of the four requirements. In the case of section 2(a), the Panel must therefore examine the medical evidence provided in order to determine whether it is satisfied that the applicant has or has had the diagnosis of gender dysphoria. In order to do so the Panel requires more than a simple statement that such a diagnosis was made. The medical practitioner practising in the field who supplies the report should include details of the process followed and evidence considered over a period of time to make the diagnosis in the applicant's case. Nor is it sufficient to use the broad phrase, 'gender reassignment surgery' without indicating what surgery has been carried out. Nor should relevant treatments be omitted, such as hormone therapy. These requirements are particularly pertinent in assisting the Panel to be satisfied not only that the applicant has or has had gender dysphoria but also has lived in the acquired gender for at least 2 years and intends to live in that gender until death.
4. On the other hand, doctors need not set out every detail which has led them to make the diagnosis. What the Panel needs is sufficient detail to satisfy itself that the diagnosis is soundly based and that the treatment received or planned is consistent with and supports that diagnosis.

5. It would be impossible to set out precisely what should be provided in all cases. Each will have its own individual facts and the detail which might be sufficient in one case may be inadequate in another. The Panels perform a judicial function. In the ultimate analysis it is for each Panel to determine precisely what is required. At the same time, doctors and applicants need to know in broad terms what is expected of them and what detail is likely to satisfy a Panel. The burden upon them of providing the evidence should not be such as to deter applicants from applying in the first place or to deter doctors from supporting them.
6. The detail required should normally be no greater than can be set out in the space provided in the medical report pro forma.

Under paragraph 11 the Panel should see:

- a. the diagnosis,
 - b. details of when and by whom the diagnosis was made,
 - c. the principal evidence relied on in making the diagnosis
 - d. details of the non-surgical (eg hormonal) treatment to date (giving details of medications prescribed, with dates) and an indication of treatment planned, and
 - e. date of referral for surgery, or, if no referral, the reasons for non-referral.
7. If the report is prepared by a registered medical practitioner or by a chartered psychologist who did not make the initial diagnosis of gender dysphoria it will be necessary for the person writing the report to confirm the diagnosis and indicate the basis upon which that confirmation is made.
 8. Under paragraph 12 the Panel should see the details of the surgical procedures which have been carried out and their dates, together with any surgery planned. Please note that the mere assertion that gender reassignment surgery has been carried out will not be sufficient to satisfy the requirements. Reference should be made to each individual procedure.
 9. It is not the role of the Panel to impose unnecessary or excessive evidential burdens on applicants. However the Act does place on Panels the responsibility of ensuring that the requirements of sections 2 and 3 are complied with before an application is granted. The Panel takes these responsibilities seriously. The purpose of this note is to provide guidance to those seeking a gender recognition certificate, and those advising them, on the minimum requirements which Panels will expect to be met. It is hoped this will assist applicants in making their applications and acquiring their certificates.



HIS HONOUR JUDGE MICHAEL HARRIS
PRESIDENT OF THE GENDER RECOGNITION PANEL
December 2005