

Adventist Health Policy Association
**Principles for Treatment of Transgender Persons
in Adventist Healthcare Institutions**

Introduction

Transgender is an umbrella term for a diverse group of people whose gender identity or expression differs from societal expectations of how they should look, act, or identify based on the sex they were assigned at birth. It is estimated that 0.5% of American adults, about 1.5 million people, identify as transgender. Transgender individuals are a health minority and frequently face multiple challenges in accessing appropriate healthcare, including the challenge of discrimination. As a result, the medical evidence indicates that transgender persons often experience poorer health outcomes.

The following principles are intended to encourage hospitals and health care professionals in the Adventist health systems affiliated with the Adventist Health Policy Association to provide compassionate, whole-person care for transgender persons, in keeping with the healing ministry of Jesus Christ and respectful of the biblical convictions of Adventist faith. *These guidelines are not intended to serve as institutional policies, but rather to encourage thoughtful care that seeks to be free of unfairness based on gender identity or gender expression.*

These guidelines are animated by our convictions about Christian responsibilities to respect human life, alleviate suffering, protect human dignity, and establish justice (Micah 6:8). Human beings are created in the image of God (Genesis 1:27), and they remain the object of God's redeeming love and mercy (John 3:16).

Christian compassion for those who are ill calls for the alleviation of suffering and the restoration of health (Matthew 25:34-36; Luke 9:1-2). Compassionate care promotes wholeness by caring for physical, mental, and spiritual well-being. This care is a recognition that Christian love is practical and responsible, and that the Christian community of faith is called to demonstrate love in tangible ways. Such care affirms that persons in vulnerable conditions should receive special protection to ensure they are treated with respect and their dignity affirmed without discrimination (Isaiah 1:16-17).

The biblical principle of justice requires that extra care and concern are extended to those at increased risk of unfair treatment, including those who have experienced discrimination because of perceptions about their sexual identity (Isaiah 56:3-5; Matthew 19:11-12; Acts 8:26-40). Adventist health care ministries contribute to the restoration of human dignity, equality, and unity through the grace of God by which human beings understand themselves to be interconnected members of God's family.

Principles

1. Persons with gender incongruence and gender dysphoria should be provided with compassionate medical care that is considerate and respectful in a setting that fosters the patient's comfort and dignity and strives to be free from biases related to gender identity or gender expression.
2. Care should be informed by an understanding of the complex development of gender identity that is multifactorial and includes biological, physiological, and psychological components. Such care should avoid stereotyping based on assumptions about transgender persons as having a mental health disorder.
3. Respectful care should recognize the difference between gender incongruence and sexual orientation and avoid unfounded assumptions about the linkage of gender identity and sexual orientation.

4. Gender dysphoria, in which a person with gender incongruence has significant anxiety related to gender identity, is a recognized medical condition that should be addressed within professionally established standards of care to guide clinical treatment.
5. Scientific knowledge regarding gender identity continues to be developed, and emerging evidence requires clinicians and health systems to evaluate, incorporate, and possibly alter the delivery of healthcare based on the best currently available evidence.
6. Considerate clinical care includes good faith efforts of healthcare institutions to accommodate the needs of transgendered people including hospital room placement and the use of facilities appropriate for their gender identity.
7. Understanding that failure to provide routine health care may significantly burden or harm transgender patients, health care professionals and institutions should be prepared to provide appropriate treatment, without undue delay, regardless of gender identity and should not transfer transgender patients' care due solely to their transition status. The needs of some transgender patients for highly specialized medical care related to their gender expression should not lead to a delay or denial of common treatments, screening, and procedures.
8. Healthcare institutions and physicians without expertise in specialized endocrine or surgical techniques should not be expected to provide all available medical therapy. However, clinicians should not stop ongoing therapy, such as hormone therapy, without appropriate consultation or an urgent medical indication. Health care professionals who are unfamiliar with this aspect of care should consult with specialists who have the necessary expertise.
9. Except for professional reasons clearly related to transgender patients' medical needs, members of the health care team should forego asking questions or making statements about transgender patients' physical characteristics or surgical status related to their gender identity.
10. Healthcare professionals are encouraged to seek transgender patients' guidance when using names, titles, and language to best reflect patients' lived experiences. While the medical record must accurately represent medical findings and legal titles, healthcare professionals are encouraged to respect their patients' preferences, and hospitals are encouraged to expand electronic health record capabilities to facilitate both relational and medical-legal needs in transgender patients' care.

These guidelines were developed collaboratively by the Adventist Bioethics Consortium and the Adventist Health Policy (AHPA). They received final approval by the AHPA Board in 2020.