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**POSITION SUMMARY FACTSHEET:
MENTAL HEALTH OF GENDER INCONGRUENT YOUTH**

February 2024

- Over 60 studies were reviewed in this analysis of the mental health of gender-incongruent youth.
- Youth whose perceived gender identity does not align with their biological sex have high rates of mental health problems regardless of any affirmation of their gender identities.
- Adverse childhood experiences, including child abuse of various types, are experienced by over half of LGBTQ+ sexual minorities, with transgender youth reporting more abuse and neglect than other sexual minorities.
- Psychiatric disorders commonly precede gender incongruence.
- Research casts doubt on claims that social affirmation (like using desired pronouns) of transgender-identified youth helps their long-term psychosocial wellbeing.
- Blocking puberty also has not produced significant benefits for gender incongruent youth according to in-depth systematic reviews.
 - A study which purported to show a "lifetime suicidal ideation" reduction in those who received puberty blockers actually found twice as many serious suicidal attempts in participants who received the blockers than in those who just wished they had received them.
- Studies from multiple countries indicate cross-sex hormonal interventions result in little mental health benefit. Furthermore, these chemical interventions were associated with greater use of psychiatric services than patients who were not treated with hormones.
- On reviewing extensive data, multiple countries have rejected so-called “gender-affirming” therapies in favor of psychological treatment of children with gender incongruence.
- There is no evidence-based proof that so-called “gender affirming” therapy is *affirming* to the health of gender incongruent youth.
- Many adolescents who have undergone “gender affirming” therapy (hormonal and/or surgical) later embraced their biological sex as their gender. These youth need support as they often deal with significant harm from their previous medically sanctioned interventions that led to disfigurement and possible sterilization.
- Gender-dysphoric youth need to have mental illness, adverse childhood events, and family dysfunction dealt with, and need the reassurance to embrace their biological sex as their gender identity and to avoid the harmful consequences of “transgender-affirming” interventions.