Prof Sir Gregor Smith Chief Medical Officer The Scottish Government

By email 10 April 2024

Dear Sir Gregor,

The Cass Review - Independent Review of Gender Identity Services for Children and Young People

We are writing to ask that you urgently consider the findings of the Cass review published today and commit to implementing its recommendations in Scotland.

We wrote jointly to your colleague Jason Leitch in August 2022 following publication of the interim report commissioned by NHS England and a copy of our letter is attached.

The findings of this watershed report are clear and have been widely publicised and discussed across mainstream media today. There is a general consensus that the report should mark a turning point in the debate about how to help children and young people who experience gender related distress with a shift towards a holistic model of care that takes into account the wider social and mental health problems driving the exponential rise in the number of such children and young people.

As the Chief Medical Officer for Scotland, we understand that you have the responsibility to provide clinical advice on professional standards as well as providing policy advice to Scottish ministers on healthcare and public health. As the National Clinical Director Jason Leitch is due to shortly demit office, so we are writing to you to call for both immediate and long-term change to the way health services are provided to gender questioning children.

As you will be aware there have been significant changes to the way services for gender questioning children are provided in England following the interim Cass report. In July 2022 NHS England announced that the Tavistock Clinic would close, and it ceased operating at the end of March. Last month NHS England confirmed that puberty blockers would no longer be prescribed to children and young people.

We are aware of the Scottish Government's strategic action framework for NHS gender identity service improvement. However, the action plan does not address the fundamental dangers posed to young people by placing them on a medicalised pathway. The final Cass report notes "For most young people, a medical pathway will not be the best way to manage their gender-related distress. For those young people for whom a medical pathway is clinically indicated, it is not enough to provide this without also addressing wider mental health and/or psychosocially challenging problems." She also concludes that the use of puberty blockers for such children is not safe.

Prof Leitch closed his reply to us by giving assurance that NHS Scotland "will be continuing use of current best practice guidelines". This is often cited as 'international best practice'. As noted in the Cass Review published today The World Professional Association of Transgender Healthcare (WPATH) has been highly influential in directing international practice, although its guidelines were found by the University of York appraisal process to lack developmental rigour. The Cass Review notes that "while a considerable amount of research has been published in this field, systematic evidence reviews demonstrated the poor quality of the published studies, meaning there is not a reliable evidence base upon which to make clinical decisions, or for children and their families to make informed choices."

Recent leaks from WPATH demonstrated a shocking lack of evidence-based practice and are gravely concerning. We note that the Sandyford clinic, which treats people referred for gender issues in Scotland, tells adult patients: "Your treatment will be monitored and run in accordance with the guidelines set out in the 'Standards of Care' as laid down by the World Professional Association for Transgender Health (WPATH) – and in the Gender Protocol for Scotland." We understand that the children's treatment guidance does not reference WPATH but does follow its Standards of Care. These guidelines are clearly no longer acceptable and must be urgently reviewed.

Children and young people in Scotland deserve individualised care. As the Cass Review notes, this should include screening for neurodevelopmental conditions, including autism spectrum disorder, and a mental health assessment. The prescription of puberty blockers places gender questioning children and young people on a medicalised pathway which has life-long implications. The NHS in Scotland has been slow to react to emerging evidence of the harm of these practices and all too often relies on international best practice as a catch all to avoid difficult conversations. The practice may have become internationalised, but it is clearly far from best. Many other European countries are currently reviewing or have reviewed their practices in this area. The publication of the Cass Review today should be an urgent wake up call that services for children and young people must be urgently re-designed and puberty blockers removed from use in Scotland.

We look forward to hearing from you.

Yours sincerely

Joanna Cherry QC MP

Robin Harper OBE

CC. Neil Gray MSP, Cabinet Secretary for Health and Social Care