

## Press Release

For Immediate Release

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### BELFAST CHARITY PSYCHOLOGIST WARNS WORLD HEALTH ORGANISATION MEDICAL GENDER INTERVENTIONS THAT INCLUDE HORMONES DO NOT IMPROVE MENTAL HEALTH - AND MAY WORSEN IT!

A BELFAST Christian counselling body, which promotes qualified, experienced therapy for clients with unwanted same-sex attraction and gender identity distress has submitted a robust response to the World Health Organization (WHO) on its proposed 'Gender-Affirming Care Guideline for Adults'.

Dr Laura Haynes [1], PhD, Chair of the International Foundation for Therapeutic and Counselling Choice (IFTCC) Science and Research Council, a ministry of registered charity Core Issues Trust, claims that *"a WHO guideline for Adult Hormone treatment would be scientifically unfounded and premature."*

In a formal submission [2] to the WHO's Guideline Development Group, Dr Haynes says: *"Several population-based academic studies that included young adults or adults have unanimously concluded that **medical gender interventions that include hormones do not improve mental health and may worsen it.**"*

Citing a United States military scientific paper, Dr Haynes adds: *"A large, controlled study of 3,573 young people given a gender diagnosis, and 6,603 gender congruent siblings for a comparison group, found that among youths who were given a gender diagnosis and who, at a median age of 18, received cross-sex hormones, use of psychiatric drugs increased.*

*"While 75% of youths with a gender diagnosis were on psychiatric drugs during the study, 89% of those who were receiving gender medicines were on psychiatric drugs. The researchers said that mental healthcare visits did not decrease and medications which treat a person's mental state rose following gender-affirming drug treatment. The researchers found that 'the most pronounced increases in mental healthcare were for adjustment, anxiety, mood, personality, psychotic disorders, and suicidal ideation/attempted suicide. After hormone treatment, mental health and suicidality worsened."*

The psychologist also cited Denmark where, she explained, *"An entire national, controlled study of everyone who received a gender diagnosis over the first 21 years of this century (3,812) found that rates of severe psychiatric diagnoses remained elevated. There was a trend of a decrease in psychiatric disorders only as use of psychiatric medications increased through the duration of follow up. If gender interventions had treated psychiatric disorders, use of psychiatric medications would have decreased. The majority received hormone treatment (55%), and a minority received gender affirmative surgery (20%)."*

And she says in Sweden, a national registry study of 324 gender diagnosed adults over 30 years found psychiatric disorders continued at a rate nearly three-times higher than for matched peers from the general population, and the completed suicide rate was 19 times higher!

Dr Haynes told the WHO group: *"Gender affirmative treatment is commonly founded on a viewpoint that discordant gender identity is biologically determined or inborn, hence who a person inherently and indelibly is. This viewpoint has never been scientifically substantiated, and there is not a professional consensus in support of it.*

*"Indeed, a global consensus statement of endocrine societies says there is no consistent evidence that the brains of gender incongruent people are different from the brains of*

*gender congruent people. It says no biological marker has been found for gender discordance, meaning nothing biological has been found for discordant gender identity that another person can find by looking at a person's brain or conducting a biological test."*

The Christian psychologist concluded: *"Psychiatric conditions are appropriately treated by psychiatric treatments. Cross-sex hormones are not a recognized treatment for these psychiatric conditions. Treating psychiatric conditions that predispose to or perpetuate gender dysphoria may be expected to help gender dysphoric individuals become more comfortable in their bodies, but more research is needed on treating gender dysphoria with psychotherapy and psychiatry, rather than gender specialist treatments."*

*Dr Hayes concludes: "Developing a WHO affirmative guideline for treating adult gender dysphoria with hormones would be premature and scientifically unfounded. Gender discordant adults and detransitioners should have access to therapy that explores the context in which their gender discordance emerged".*

- For full details of Dr Haynes submission, and full information on the scientific studies cited, visit [Submission of the IFTCC to the World Health Organisation | IFTCC.ORG](#)

### **ENDS**

#### **For further information/interview:**

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#### **Editor's Notes**

[1] Dr. Laura Haynes is an Executive Board member, the USA Country Representative, and the Chair of the Science and Research Council for the International Foundation for Therapeutic and Counselling Choice. A psychologist retired after 40 years clinical experience, she has served as an expert on sexuality and gender research for professional organizations, members of parliaments, other legislators, courts, United Nations delegates, and high-level government officials.

[2] For a PDF version of the IFTCC submission, click here:

[\*Download a PDF version of the full document and references here\*](#)