

# Gender-Affirming Pediatric Care

## Presenting Problem

A concerned PCP contacted the Wisconsin Child Psychiatry Consultation Program (WI CPCP) regarding a 10-year-old biologically male patient. The patient's mother reported distressing incidents of bullying at school due to the patient's desire to use the girls' bathroom, coupled with a troubling suicidal statement made upon returning home. The patient's mother added that she "hoped he'd grow out of this idea that he's a girl. He's been saying that for years!" The patient's mother conveyed her readiness to monitor the situation overnight. With an appointment scheduled for the following day, the PCP sought guidance on how best to address the situation.

## Consultant's Response

WI CPCP encounters sensitive cases highlighting the intersection of mental health and gender identity. A young patient, facing bullying and suicidal thoughts due to their gender identity, is a clear example of the essential role primary care providers (PCPs) play in supporting LGBTQ+ youth.

1. **Assessment of Safety:** The primary concern will be assessing the patient's safety. Consider using the [ASQ](#) or [Columbia Suicide Severity Rating Scale \(CSSRS\)](#) to guide questions aimed at determining the level of care required.
2. **Addressing Bullying:** Address the issue of bullying. If the school is not adequately protecting the student, a formal [Individualized Education Program \(IEP\)](#) may be necessary. Various accommodations can be implemented to ensure the patient feels safe at school.
  - [How to Address Bullying Through an IEP – A Guide to IEP Bullying Prevention](#)
  - [The IEP: Addressing Bullying with a Child's IEP](#)
3. **Exploring Gender Dysphoria:** Gently explore the possibility of gender dysphoria, defined by NIH, [Gender dysphoria](#) (previously gender identity disorder), according to the Diagnostic and Statistical Manual of Mental Disorders, is defined as a "marked incongruence between their experienced or expressed gender and the one they were assigned at birth." Use open-ended questions to initiate the conversation and guide further exploration based on the patient's responses.
  - This toolkit can provide further guidance: [Gender-Affirming Pediatric Care Toolkit](#)

When navigating such cases, PCPs must prioritize safety assessments using tools like the ASQ or CSSRS. Additionally, advocating for an Individualized Education Plan (IEP) to address school bullying is vital. Gently exploring a patient's gender dysphoria can provide crucial insights into their mental health needs.

## Teaching Points:

1. **Understanding Gender Diversity:** The stigma, discrimination, and violence experienced by LGBTQ+ individuals can significantly impact their mental health. Understanding the mental health impact of stigma and discrimination on LGBTQ+ individuals is crucial. PCPs should be aware of potential risk factors associated with gender non-conformity, such as depression, anxiety, self-harm, and suicide.
  - Research indicates significantly higher rates of depression and suicidal ideation among LGBTQ+ individuals compared to the general population. Recognizing the importance of gender identity screening as part of routine care is essential, as it aids in promoting holistic well-being.
2. **Importance of Gender Identity Screening:** Some may object to gender identity screening on moral or religious grounds. However, like other health inquiries, gender identity questions are aimed at promoting the patient's well-being rather than passing judgment.
3. **Consulting Specialists:** Consulting with a childhood gender identity specialist can be beneficial for families, especially in cases where the child experiences severe and persistent distress related to their gender identity.