



Finn Clark

By email to: request-1217009-f00d6c7e@whatdotheyknow.com

19 March 2025

Dear Finn,

Freedom of Information Request Reference FOI-1557945

Thank you for your request dated 17 December to the Department of Health and Social Care (DHSC), a copy of which can be found in the accompanying annex.

Your request has been handled under the Freedom of Information Act 2000 (FOIA) and we apologise for the long delay in replying.

We have separated elements of your request and will respond to them in turn.

Please note that, with regard to the wording in your request asking for *all available communications that show*, we have interpreted this to mean 'all available information that shows'.

1) What the Health Secretary discussed with people with lived experience of gender incongruence.

DHSC holds information relevant to your request.

The Secretary of State for Health and Social Care convened two meetings to discuss LGBT+ issues, predominantly trans healthcare and the issue of puberty blockers for children and young people experiencing gender incongruence.

2) How many families were consulted and what those families provided as evidence for their lived experience

3) Who were the groups who represented families and service users and what meeting minutes are available between these groups and the Health Secretary?

DHSC holds information relevant to your request.

The Secretary of State for Health and Social Care met with ten children and young people, who were supported by six family members.

The following groups supported the children and young people, and their families, at those meetings:

- Gendered Intelligence
- LGBT Foundation
- The Proud Trust

- Transactual

Regarding your request for *what those families provided as evidence for their lived experience*, family members at a meeting supplied the Secretary of State with a bundle of documents. However, as some of this information is already in the public domain, we will, under section 21 of the FOIA (information accessible to the applicant by other means), refer you to the published source. These can be found at:

https://www.academia.edu/124722434/Children_of_Omelas_Effects_of_the_UK_Puberty_Blocker_Ban

<https://www.nature.com/articles/s41562-024-01979-5>

DHSC is withholding the remaining material from the above-referenced bundle of documents, and the minutes from one of the meetings, under section 36 of FOIA.

Section 36 provides that information is exempt from disclosure if to do so would, or would be likely to, prejudice the effective conduct of public affairs.

Section 36(2)(b)(i) and (ii) states that information is exempt if, in the opinion of a 'qualified person' (in this case a Minister of the Crown), its disclosure would be likely to prejudice the free and frank provision of advice or exchange of views for the purposes of deliberation. We can confirm that in this case, the qualified person was the Minister for Patient Safety, Women's Health and Mental Health, Gillian Merron.

Section 36 is a qualified exemption, and we are therefore required to consider whether the public interest in disclosing the information outweighs the public interest in applying the exemption.

DHSC recognises the general public interest in making this information available for the sake of greater transparency and openness. It is essential, however, that ministers can receive advice from third parties and ensure that third parties can be confident that they will be able to share their views frankly and without fear of repercussions. Without that safe space, which releasing these materials would be likely to undermine, a chilling effect may arise, negatively impacting ongoing policy development, as well as future policy development. Therefore, we consider that these interests outweigh the public interest in disclosure in this particular case.

Additionally, DHSC is withholding minutes relating to a different meeting under section 41 of the FOIA. Under section 41, a public authority is not obliged to disclose information that was provided to the public authority in confidence.

4) What evidence was used to determine puberty blockers were safe for some individuals, but not for others?

DHSC holds the information you have requested.

The decision to implement an indefinite order against the sale and supply of private prescriptions of GnRH analogues (puberty blockers), for the purpose of gender dysphoria

and/or incongruence for those under the age of 18, whilst permitting use for other indications (such as precocious puberty), was based on multiple strands of evidence:

- I. The 'Independent review of gender identity services for children and young people' (the Cass Review), commissioned by NHS England (<https://cass.independent-review.uk/>). Examples of evidence that informed this review include:
 - Systematic reviews by the University of York published in *Archives of Disease in Childhood*: <https://adc.bmj.com/pages/gender-identity-service-series>
 - Evidence reviews commissioned by NHS England by the National Institute for Health and Care Excellence (NICE): <https://cass.independent-review.uk/nice-evidence-reviews/>
 - Lived experience focus groups: <https://cass.independent-review.uk/contribute-to-the-review/lived-experience-focus-groups/>
- II. Independent expert advice from the Commission on Human Medicines (CHM), which be found at <https://www.gov.uk/government/publications/chms-report-on-proposed-changes-to-the-availability-of-puberty-blockers#:~:text=On%2020%20August%202024%2C%20a,years%20for%20the%20purpose%20of.>
- III. Responses to a targeted consultation to the 'Proposed changes to the availability of puberty blockers for under 18s'. Further information can be found at <https://www.gov.uk/government/consultations/proposed-changes-to-the-availability-of-puberty-blockers-for-under-18s/outcome/governments-response-to-the-targeted-consultation-on-proposed-changes-to-the-availability-of-puberty-blockers>.
- IV. As outlined above, the Secretary of State also participated in in-person discussions with children and young people, and their families, who had lived experience of gender dysphoria and/or incongruence.

5) What percentage of those consulted disagreed with the ban of puberty blockers for trans youth and who did Wes Streeting consult with about disregarding the majority of consultation responses?

DHSC holds the information you have requested.

The Secretary of State consulted CHM (<https://www.gov.uk/government/organisations/commission-on-human-medicines>) on the changes to the availability of puberty blockers.

Information held by DHSC on the percentage of those consulted who opposed the permanent order is in the public domain. We will, therefore, under section 21 of the FOIA (information reasonably accessible to the applicant by other means), refer you to the published source: <https://www.gov.uk/government/consultations/proposed-changes-to-the-availability-of-puberty-blockers-for-under-18s/outcome/governments-response-to-the-targeted-consultation-on-proposed-changes-to-the-availability-of-puberty-blockers>.

6) All communications Wes Streeting had with the trans groups or community members.

DHSC holds information relevant to your request.

Please see the attached documents.

Please note that some of this information has been redacted under section 35(1)(d) and section 40(2) of the FOIA.

Section 40(2) of the FOIA provides for the protection of personal information. Section 40 prohibits a public body from disclosing personally identifiable information, as doing so would contravene data protection principles.

Section 35(1)(d) of the FOIA provides protection for information relating to the operation of a ministerial private office.

Section 35 is a qualified exemption and requires consideration of the public interest test.

DHSC recognises that there is a public interest in understanding how an office of state operates, and that disclosure leads to greater transparency in government. However, there is also a public interest in ministers being able to rely on their support staff, and revealing the methods and processes of private office might cause a distraction and disrupt its operation. In order to be confident in the independence of the private office support staff, they must be sure that they are not allowing external considerations, such as the possible public perception of their processes, to affect their judgement in administering the private office. Taking this into account, we consider that the balance of public interest favours withholding this information.

If you are not satisfied with the handling of your request, you can request we undertake an internal review. If doing so, it would be helpful for you to be explicit which areas of the Freedom of Information response you consider dissatisfactory. Complaints to us should be sent to freedomofinformation@dhsc.gov.uk or to the address at the top of this letter and be submitted within 40 working days of the date of this letter.

Please remember to quote the reference number above in any future communication.

If you are not content with the outcome of your internal review, you may complain directly to the Information Commissioner's Office (ICO). Generally, the ICO cannot make a decision unless you have already complained to us about our original response and received our response to your complaint and, if applicable, our internal review decision. You should raise your concerns with the ICO within six weeks of your last substantive contact with us.

Guidance on contacting the ICO can be found at <https://ico.org.uk/global/contact-us> and information about making a complaint can be found at <https://ico.org.uk/make-a-complaint>.

Yours sincerely,

Freedom of Information Team
freedomofinformation@dhsc.gov.uk

Annex

From: Finn Clark <request-1217009-f00d6c7e@whatdotheyknow.com>
Sent: Tuesday, December 17, 2024 5:34 PM
To: FreedomofInformation <freedomofinformation@dhsc.gov.uk>
Subject: Freedom of Information request - Puberty blocker ban evidence

Dear Department of Health and Social Care,

The Health Secretary, Wes Streeting, banned the use of puberty blockers following a consultation which the government claims did the following:

"The consultation engaged widely, including groups that represent the LGBT+ community and those representing patients and service users and their families, clinicians, pharmacists, charities, regulators and experts.

The Health and Social Care Secretary, Wes Streeting, has also personally engaged with a range of stakeholders on this issue, including with children and young people, and their families, with lived experience of gender incongruence.

This government will continue to engage with, and listen to, the trans community."

I would like all available communications that show:

- 1) What the Health Secretary discussed with people with lived experience of gender incongruence.
- 2) How many families were consulted and what those families provided as evidence for their lived experience.
- 3) Who were the groups who represented families and service users and what meeting minutes are available between these groups and the Health Secretary?
- 4) What evidence was used to determine puberty blockers were safe for some individuals, but not for others?
- 5) What percentage of those consulted disagreed with the ban of puberty blockers for trans youth and who did Wes Streeting consult with about disregarding the majority of consultation responses?
- 6) All communications Wes Streeting had with the trans groups or community members.

Yours faithfully,

Finn Clark