

Pre-Consultation Equality Impact Assessment for the Gender Recognition Act 2004

Introduction

1. This document records the initial analysis undertaken by the Government Equalities Office (GEO) to inform Ministers' consideration of the requirements of the Public Sector Equality Duty (PSED), with respect to the consultation on the Gender Recognition Act 2004 (GRA). The PSED requirements are set out in section 149 of the Equality Act 2010. The PSED requires Ministers to pay due regard to the need to:
 - eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
 - advance equality of opportunity between people who share a protected characteristic and those who do not; and
 - foster good relations between people who share a protected characteristic and those who do not.
2. In undertaking the analysis that underpins this document, Ministers have also had regard to the United Nations Convention on the Rights of the Child (UNCRC), in particular Articles 2 (protection against discrimination), 3 (best interests of the child), 6 (survival and development), 8 (preservation of identity) and 24 (health).
3. This analysis has been done on the potential impact of the consultation. It is not until the Government has received responses to this consultation, and analysed them fully that a decision will be made about how to reform the Gender Recognition Act. It is therefore not possible to conduct a full impact assessment on what the changes to the Act will be, as they have not yet been decided.

The Gender Recognition Act 2004: Overview

4. To end of March 2018, a total of 4,910 people have been granted GRCs since the Gender Recognition Act came into force on 4th April 2005¹. However, the number of people who have a GRC represents only a small proportion of the trans population in the UK overall. Using the latest data available, for 2016, the adult trans population in the UK is estimated as approximately 200,000 – 500,000².
5. The Government believes that the number of people who have successfully applied for a GRC is lower than might be expected. In the Government's recent national LGBT survey, only 12% of the 6,910 trans respondents said that they had successfully applied for a GRC. Respondents were also asked about their awareness of the GRA process; of the 81% of respondents who were aware of it, only 7% said they *would not* be interested in getting a GRC.

¹ Ministry of Justice (2018) Tribunals and gender recognitions certificates statistics quarterly: January to March 2018. Available at: <https://www.gov.uk/government/statistics/tribunals-and-gender-recognitions-certificates-statistics-quarterly-january-to-march-2018>

² In the absence of accurate and reliable data on gender identity, this is based on applying a trans prevalence range of between 0.35% - 1% (from UK and international evidence) to the latest data on the UK adult population. The lower prevalence rate is based on the Californian estimate of 0.35%. The upper prevalence rate is based on the upper estimate from GIRES. It is rounded to the nearest 100,000. (See Annex E of the GRA consultation document, published on 3 July 2018.)

6. In January 2016, the Women and Equalities Select Committee (WESC) produced the first ever Select Committee report into transgender equality.³ Witnesses to the WESC described the Gender Recognition Act application process as ‘bureaucratic’, ‘expensive’ and ‘humiliating.’
7. This evidence accords with the findings of the national LGBT survey, in which:
 - 44% of the trans men and trans women respondents who did not have a GRC but were interested in getting one said that they did not satisfy the requirements;⁴
 - 39% said that the process was too bureaucratic;
 - 34% said the process was too expensive;
 - 19% said they could not get the help they needed to put a successful application together;
 - 8% did not want to submit medical information; and
 - 8% found it too difficult to access the medical information required.⁵
8. The consultation on the GRA seeks views on how to reform the process of changing legal gender. The consultation focuses on the GRA 2004. The Government is not proposing any amendments to the Equality Act 2010. The Government wants to collect more evidence on the operation of the GRA before deciding how to meet the ambition of making it less bureaucratic and intrusive for trans people.
9. This document provides an initial assessment of the likely impact on people with protected characteristics of both the consultation and the potential for removing the medical evidence requirements and streamlining the other requirements for obtaining a GRC.

PSED evidence and analysis

Gender reassignment

10. There is not robust data on the number of trans people in the UK. Using the latest data available, for 2016, the adult trans population in the UK is estimated as approximately 200,000 – 500,000⁶.
11. Since 2005, when the GRA came in to force, around 3,600 (73%) GRCs have issued to trans people assigned male at birth, and around 1,300 (27%) to trans people assigned female at birth.⁷ In our LGBT Survey, we asked trans respondents why they had not applied for a GRC. There were some small differences between trans men and women. 41% of the trans women (these figures only cover those without a GRC) and 48% of the trans men answered ‘I want to apply but do not satisfy the

³ See <https://www.parliament.uk/business/committees/committees-a-z/commons-select/women-and-equalities-committee/inquiries/parliament-2015/transgender-equality/>

⁴ In short, the requirements for obtaining a Gender Recognition Certificate consist of: the need to provide medical reports evidencing gender dysphoria and/or treatment; the need to collect documentation that proves the trans person has been living for at least two years in their acquired gender; the need to provide a statutory declaration of the trans person’s intention to live in their acquired gender until death.

⁵ Respondents could provide multiple reasons if appropriate, which is why these figures add up to more than 100%.

⁶ In the absence of accurate and reliable data on gender identity, this is based on applying a trans prevalence range of between 0.35% - 1% (from UK and international evidence) to the latest data on the UK adult population. The lower prevalence rate is based on the Californian estimate of 0.35%. The upper prevalence rate is based on the upper estimate from GRES. It is rounded to the nearest 100,000. (See Annex E of the GRA consultation document, published on 3 July 2018.)

⁷ Ministry of Justice (2018) Tribunals and gender recognitions certificates statistics quarterly: January to March 2018. Available at: <https://www.gov.uk/government/statistics/tribunals-and-gender-recognitions-certificates-statistics-quarterly-january-to-march-2018>

requirements'. 44% of the trans women and 32% of the trans men thought the process too bureaucratic, and 30% of the trans women and 38% of trans men thought the process too expensive. For trans men, not satisfying the requirements was the most frequently reported reason for not applying. The requirements were not specified in the survey questionnaire but include, among others, the requirements for medical reports and two-years' lived experience. For trans women, that the process was too bureaucratic was the most frequently reported barrier. These reasons may contribute to the low number of GRCs awarded. It is not possible to draw any conclusions from this as to whether the legal gender recognition system is easier to access for trans women than for trans men, or vice versa.

Eliminate unlawful discrimination

12. If, following consultation, the Government decided to proceed with streamlining and de-medicalising the requirements to obtain a GRC then this would likely have a positive impact on the need to eliminate discrimination and other prohibited conduct on grounds of gender reassignment. In particular, making it easier for trans people to obtain gender recognition is intended to reduce the discrimination faced by trans people in society as a result of a mismatch between their gender identity and their official documents.

Advance equality of opportunity

13. Potentially streamlining the requirements could be expected to have a positive impact on the need to advance equality of opportunity for trans people. It is expected that making it easier to obtain a GRC would reduce the barriers experienced by trans people and help to improve mental health and wellbeing for this group.

14. In addition, potentially removing the medical evidence requirements could be expected to help reduce the stigma associated with being trans, and send a clear message that being trans is not a mental illness. Removing the medical requirements might also enable a larger group of trans people to obtain recognition than the Act currently permits.

Foster good relations

15. Proposals to consult on relaxing the requirements for obtaining a GRC have been met with concern by some people, particularly some women's groups, arguing that women's rights could be undermined. This issue is addressed in the section on the protected characteristic of sex.

16. Consulting on the requirements for obtaining a GRC is expected to have a positive impact on the need to foster good relations between trans people and people who are not trans. It is expected that due to the increased profile and discussion of trans issues, partially brought about by this consultation, will help to foster greater knowledge and understanding of the issues faced by trans people. By providing opportunities for everyone to voice their views and concerns, it is envisaged that the consultation process will help to reduce misunderstanding and misconceptions about trans people and foster good relations between trans people and others.

Sex

17. The protected characteristic of sex refers to men and women.

Eliminate unlawful discrimination

18. The consultation is not expected to have an impact on the need to eliminate discrimination and other prohibited conduct on grounds of sex.

Advance equality of opportunity

19. In the National LGBT survey, a small number of respondents (39) commented on the proposed changes to the GRA as threatening women-only spaces. There has also been considerable public debate about whether reducing the requirements for legal recognition might result in a weakening of protections for women.

20. The Equality Act 2010 provides exceptions where what might otherwise be unlawful discrimination against individuals with the protected characteristic of 'gender reassignment' is permitted, such as in gender-affected sport, single and separate-sex service provision, employment, communal accommodation, the armed forces, and employment-related insurance services. These exceptions are often intended to allow for privacy and dignity of individuals. These provisions will stay in place after any reform of the GRA; the consultation contains no proposals to amend the Equality Act. The Government is keen to gather further evidence on this point for us to identify any possible impact. The consultation asks questions about how reform of the GRA will affect the operation of the Equality Act exceptions, to enable the Government to gather further evidence of the impact of any reform on women. The consultation also asks about how reform of the GRA might impact on single sex service provision.

Foster good relations

21. The announcement of the Government's intention to consult has led to some debate on the interaction between transgender rights and women's rights. The Government is in communication with the women's groups that have concerns, alongside LGBT and trans groups who are interested in reform of the GRA. All groups will have the opportunity to share their views through the public consultation. The fact that the Government has no intention to change the Equality Act 2010 should help to reduce concerns. We will use any insight gained from the consultation exercise to help foster good relations.

Age

22. The protected characteristic of age needs careful consideration when considering reform of the gender recognition process. Whether the age limit should be reduced is a question that provokes strong feelings on both sides of the debate, and there are arguments both for and against.

23. Currently, people aged 18 and above can apply for a GRC in the UK. The age of 18 can be considered aligned with full rights and responsibilities of adult citizenship. Eighteen is also the voting age in England and Wales. Additionally, there are specific protections for people under 18 in our criminal justice and asylum systems.

24. Media reports indicate that people have transitioned at any age – from childhood⁸ to old age⁹. On the whole, trans women have started transitioning at a later age than

⁸ <http://www.bbc.co.uk/news/health-38132301>

⁹ <https://www.mirror.co.uk/news/uk-news/battle-dunkirk-hero-becomes-one-10845690>

trans men. In the LGBT survey, we found the following with regards to age of transition for trans men and women respondents:

Started transitioning age 25 and over

- 16% of trans men respondents and 66% of trans women respondents

Started transitioning before the age of 25

- 84% of the trans men respondents and 44% of trans women respondents

Started transitioning before the age of 18

- 53% of trans men respondents and 15% of trans women respondents (73% of trans men respondents and 59% of trans women respondents who had started transitioning while under 18 said they had been transitioning while at school.)

Started transitioning when aged 16-17

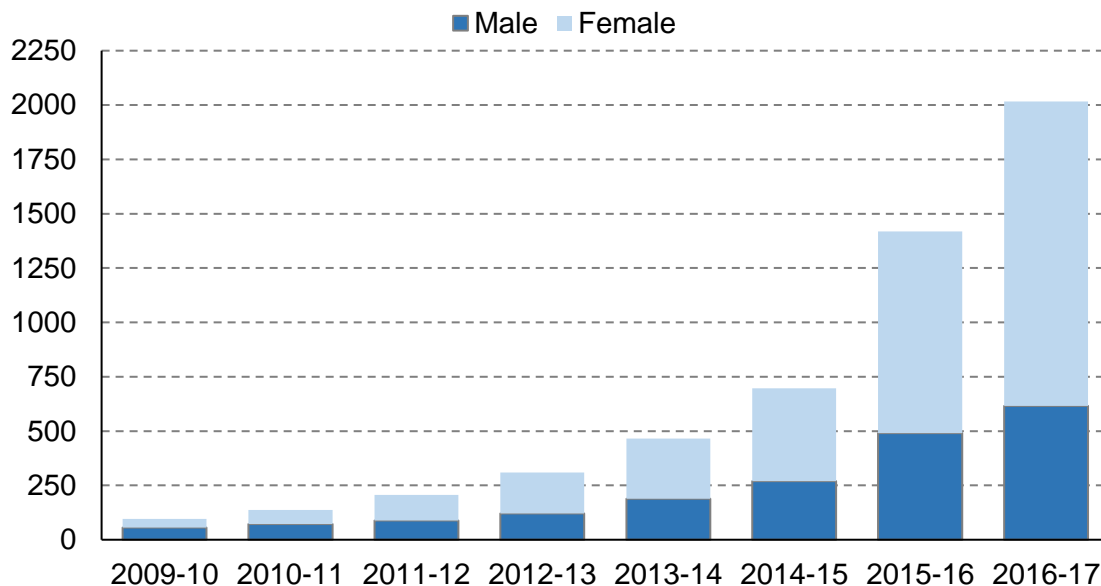
- 26% of trans men respondents and 8% of trans women respondents

Started transitioning before the age of 16

- 27% of trans men respondents and 7% of trans women respondents

25. The number of under 18s who have been referred to the Gender Identity Development Service has increased over the last few years. The Gender Identity Development Service¹⁰, which supports young people wanting to change their gender, has seen a large increase in referrals since 2009-10, with 2016 referrals in 2016-2017 from the age of three.¹¹ See Figure 1 below.

Figure 1: Number of referrals for under 18s to the Gender Identity Development Service, by gender recorded at birth



26. In recent years, there have been significant changes in gender recognition legislation in a number of European countries, applying different minimum ages for *legally*

¹⁰ <http://gids.nhs.uk/>

¹¹ Data from GIDS website. Available at <http://gids.nhs.uk/number-referrals> and <https://tavistockandportman.nhs.uk/about-us/news/stories/gids-referrals-increase-slows-201617/>

changing gender:

Malta	No minimum age; up to 16 with parental consent; 16-17 without parental consent. ¹²
Ireland	Minimum age is 18, but 16-17 year olds can seek legal recognition from a judge, for which two medical declarations and parental consent are required.
Denmark	Minimum age is 18.
Norway	Minimum age is 6 with parental consent and 16 without parental consent. Children under 6 can only amend their legal gender if they have a congenital somatic sex development, with evidence from a health professional. ¹³
Belgium	The process is available to those aged 16 and 17, provided they have parental consent and a psychiatrist's statement providing evidence that the applicant is not the subject of pressure or coercion (no diagnosis is needed). ¹⁴
Netherlands	Minimum age is 16. 16 and 17 year olds can apply without parental consent. No provision for under 16.

27. The Netherlands lowered the minimum age for gender recognition in 2014, and the numbers of 16-18 year-olds who applied for a change of legal gender change were: 92 in 2014, 79 in 2015 and 126 in 2016.¹⁵

28. Older people may not have applied for GRCs due to the lack of supporting evidence of treatment, and so may benefit from having evidential requirements reduced.

Eliminate unlawful discrimination

29. The fact that under 18s cannot obtain a GRC does not amount to unlawful discrimination or other conduct prohibited by the 2010 Act. The Equality Act 2010 does not prohibit discrimination in the provision of services or exercise of public functions on grounds of age, so far as relating to people aged under 18 (section 28(1)(a) EA 2010); and in any event because the age limit is in legislation, the statutory authority exception applies (paragraph 1 of Schedule 22).

30. Discrimination because of gender reassignment is prohibited in schools, services, public functions and employment irrespective of the age of the individual. An individual does not need to have a GRC to be protected against discrimination because of gender reassignment, because the protected characteristic of 'gender reassignment' includes trans people with or without GRCs.

31. There is some evidence that obtaining a GRC might reduce discrimination faced by young trans people in society. The evaluation of the Dutch legislative reform mentions public transportation and school diplomas as areas of importance.¹⁶

¹² <http://tgeu.org/wp-content/uploads/2017/02/Toolkit16LR.pdf>, p. 70

¹³ <http://tgeu.org/wp-content/uploads/2017/02/Toolkit16LR.pdf>, p. 98

¹⁴ <http://www.ejustice.just.fgov.be/eli/wet/2017/06/25/2017012964/staatsblad>

¹⁵ https://www.wodc.nl/binaries/2897_Volledige_Tekst_tcm28-294981.pdf, p. 18. These numbers include 18 year-olds.

¹⁶ https://www.wodc.nl/binaries/2897_Summary_tcm28-294980.pdf, p. 9. It should be mentioned here that, in the Netherlands, children from the age of 14 are obliged to carry an ID card or passport (and from the age of 12 in public transport), and they can't change the gender on their official identification documents without first changing their legal gender.

32. Potentially amending the requirements for legal gender recognition is not expected to have any impact on the need to eliminate discrimination against people of any age who are not trans.

Advance equality of opportunity

33. Potentially removing the need for medical evidence and streamlining the requirements for legal gender recognition would likely remove potential barriers for applicants across all ages. Such changes would positively affect younger applicants who are, for example, not eligible due to not having two years' proof of living in the acquired gender; and, applicants of all ages may need no or less help under a reformed system. Older trans people who medically transitioned a long time ago and who are unable to retrieve the required medical evidence would benefit too from a streamlined system.
34. With regards to evidence of whether a lower minimum age for legal gender recognition would have a positive impact on young trans people's wellbeing and advance equality of opportunity for young trans people, this is currently mostly anecdotal. There is research about whether *social* gender change may be beneficial for trans children's well-being¹⁷, but this does not address *legal* gender change.
35. We need to take into account there could be a risk that young people may change their legal gender but realise with age that they do not wish to pursue their social and medical transitions. It is known that a number of children, particularly prepubertal, who are referred to gender identity services, do not 'persist' as transgender in their adulthood.^{18, 19}
36. The above issue is connected to the increasing number of referrals of natal born girls to the Gender Identity Development Service in the UK. This number has grown much faster than the referrals of children recorded male at birth. A change of ratio between female and male born children who enter gender identity services can be detected in other countries too.²⁰ It is not clear why this is so, but there may be social and cultural factors at play.
37. Another factor to consider is the capability of young people to make an informed decision on their legal gender. In medical settings, for the treatment of those under 16, the necessary informed consent is established by involving both the minor patient and the parents or carers.²¹ Young people must be properly supported in reaching such an important decision. Potentially removing the current medical evidence requirements might remove an important safeguard for young people.

Foster good relations

38. The consultation is not likely to have an impact on the need to foster good relations between people of different ages. In the consultation, we are interested in hearing the views of people across all ages, as well of parents of trans and non-trans children. Potentially, the consultation will foster more understanding between different groups of stakeholders.

Conclusion

39. Overall, the Government has decided not to consult on reducing the age limit at this time. The evidence on this issue is finely balanced, but it is the Government's view

¹⁷ <http://pediatrics.aappublications.org/content/early/2016/02/24/peds.2015-3223>

¹⁸ <https://www.england.nhs.uk/wp-content/uploads/2017/04/gender-development-service-children-adolescents.pdf>, p. 4

¹⁹ <http://gids.nhs.uk/continuing-and-not-continuing-studies>

²⁰ <https://www.tandfonline.com/doi/full/10.1080/0092623X.2018.1437580?scroll=top&needAccess=true>

²¹ https://www.nhs.uk/NHSEngland/AboutNHSservices/Documents/Consent_%20aguideforparentsDH_4117353.pdf

that the age of 18 is aligned with full rights and responsibilities of adult citizenship, one of which is the right to change legal gender. The Government is nonetheless keen to hear from respondents about the equality impact of this decision on people with protected characteristics, particularly people of different ages, and responses to questions 10 and 11 about impact on age are welcomed.

Disability

40. Currently a diagnosis of gender dysphoria is required for trans people to change their legal gender. The Government does consider being trans to be a disability, but the connection with gender dysphoria means that some may consider it to be a mental health related disability. Gender dysphoria (or gender identity disorder) is currently listed as a psychiatric condition in the *Diagnostic and Statistical Manual of Mental Disorders*.²² The World Health Organisation has recently released the 11th *International Classification of Diseases (ICD-11)* in which they have moved away from describing trans as a disease or disorder.²³
41. Additionally, there is a significant body of evidence about trans people's mental health:
- A major research review of LGBT inequality²⁴ suggested that the incidence of mental health problems was very high for transgender people.
 - One survey of transgender people found that 88% of respondents had suffered from depression, 80% from stress and 75% from anxiety at some time; and found evidence that rates of self-harm and of attempted suicide were high²⁵.
 - In a study among 889 trans people living in the UK in 2012 found half (53%) of respondents had self-harmed at some point in their life, 84% had considered ending their lives at some point, with nearly half (48%) of these respondents attempting to do so at least once.²⁶
42. The results from the LGBT survey also showed that of the 7,000 transgender respondents to the survey, 40% of trans men, 30% trans women, and 37% of non-binary people had tried to access mental health services in the last 12 months (National LGBT Survey, 2018).

Eliminate unlawful discrimination

43. Government has repeatedly reinforced the point that gender dysphoria is not a mental illness.²⁷ Potentially removing the requirement of medical evidence from the legal gender recognition process could contribute to eliminating the discrimination that trans people may experience as the result of being seen as having a mental illness.

²² <https://www.psychiatry.org/patients-families/gender-dysphoria/what-is-gender-dysphoria>

²³ In the [ICD 11](#), 'Gender Incongruence' (another name for gender dysphoria) is no longer classed under 'Mental and behavioural disorders.'

²⁴

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/539682/160719_REPORT_LGBT_evidence_review_NI_ESR_FINALPDF.pdf

²⁵ Hudson-Sharp and Metcalf (2016) Inequality among lesbian, gay bisexual and transgender groups in the UK: a review of evidence. National Institute of Economic and Social Research. Available at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/539682/160719_REPORT_LGBT_evidence_review_NI_ESR_FINALPDF.pdf

²⁶ https://www.scottishtrans.org/wp-content/uploads/2013/03/trans_mh_study.pdf

²⁷ <https://www.mirror.co.uk/news/politics/transgender-illness-theresa-may-change-11366257>

44. Consulting on reform and potentially changing the process of legal gender recognition is not considered likely to have any impact on the need to eliminate discrimination against disabled people who are not trans.

Advance equality of opportunity

45. Potentially removing the medical evidence requirements and making it easier for trans people to obtain legal gender recognition may have a positive impact on their wellbeing and mental health.

46. Though we think streamlining the gender recognition process could be beneficial, there may also be unwanted outcomes for some trans people who need the mental health assessment or psychological support provided by the gender identity clinics before making a decision to obtain legal recognition - for example, trans people with a learning disability.²⁸ There may be a risk that some people will unnecessarily change their legal gender, and might need to reverse the change.

Foster good relations

47. The Government foresees no impact on the need to foster good relations between people with and without a disability because of consulting on reform of the Gender Recognition Act.

Race, ethnicity and nationality

48. There is very limited research on the relationship between race/ethnicity and gender recognition, or on the specific experiences of BAME (Black, Asian, and Minority Ethnic) and/or immigrant trans people in the UK.

49. As noted in the consultation document, potential reform of the gender recognition process in England and Wales (and separate reform in Scotland) may result in divergence of the requirements across the UK, which could have implications for trans people of English, Welsh, Scottish and Northern Irish origins.

Eliminate unlawful discrimination

50. Consulting on reform and potentially streamlining the requirements for obtaining a GRC would not be expected to impact on the need to eliminate unlawful discrimination and other prohibited conduct on grounds of race.

51. If Scotland were to adopt different requirements for legal gender recognition than those applicable in England and Wales, questions of cross-border recognition would require careful consideration. The Government will liaise with the Scottish Government to make appropriate provision.

Advance equality of opportunity

52. Consulting on reform and potentially removing the medical evidence requirements might have a positive impact on the need to advance equality of opportunity for those BAME trans people who report particular difficulties in accessing medical treatment and support.

Foster good relations

53. The Government does not foresee an impact in this area.

²⁸ Individuals with learning difficulties will likely have greater needs and require additional support.
<http://www.rcpsych.ac.uk/workinpsychiatry/faculties/intellectualdisability/newsletters/newsletterjanuary2016/genderdysphoriaandintelle ct.aspx>

Religion and belief

54. Some trans people practice religion and belief, but can experience lack of understanding and hostility in some religious and faith communities. There has been development in understanding in some religions,²⁹ but not all faith communities are accepting.

Eliminate unlawful discrimination

55. Consulting on reform and potentially removing the medical evidence requirements and streamlining the other requirements to obtain a GRC would not be expected to have any impact on the need to eliminate discrimination and other prohibited conduct on grounds of religion or belief.

56. The Equality Act contains a number of exceptions, which enable religious organisations to act in a way that might otherwise constitute discrimination because of gender reassignment. For example, the Act permits those who authorise or solemnise marriages according to religious rites to refuse to marry a person they reasonably believe to have obtained legal recognition of their gender under the Gender Recognition Act.³⁰

57. If the current requirements for obtaining a GRC are reduced, this may result in more trans people having their gender legally recognised and these exceptions may see greater use. There is no intention to change the Equality Act 2010.

Advance equality of opportunity

58. Potentially relaxing the requirements for a GRC and in particular removing the medical evidence requirements could help destigmatise being trans. This could help to advance equality of opportunity for religious trans people within their faith communities.

59. It is not anticipated that the consultation or any potential reforms would have any impact on the need to advance equality of opportunity between people who share a religion or belief and those who do not share it.

Foster good relations

60. This consultation, and the potential for streamlining the gender recognition process may lead to more dialogue and understanding between trans and non-trans people within faith communities. The consultation is not expected to have any impact on relations between people who share a religion or belief, and those who do not share it.

Sexual orientation

61. Trans people can be heterosexual, lesbian, gay, bisexual or any other sexual orientation. It is estimated that 2.5% of adults in the UK population identified as lesbian, gay, bisexual or 'other' (almost 1.3 million people).³¹ There is no insight to how many trans people in the UK have a minority sexual orientation. In the National LGBT Survey, both heterosexual and LGB trans people were invited to respond, but considering the focus of the survey, it is likely that heterosexual trans respondents were underrepresented. However, in the LGBT survey, it was found that trans and non-binary respondents were much less likely to identify as gay or lesbian (23%) than

²⁹ See, for example: <http://www.cam.ac.uk/research/news/global-christian-attitudes-towards-transgenderism-softening-study-suggests>

³⁰ <https://www.legislation.gov.uk/ukpga/2010/15/schedule/3/part/6>

³¹ <https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2016>

non trans respondents (68%), and much more likely to identify as bisexual (32% vs 25%), pansexual (14% vs 3%), 'other' (7% vs 1%) or queer (5% vs 1%).

Eliminate unlawful discrimination

62. The consultation, and the potential of streamlining the requirements to obtain a GRC are not expected to have any impact on the need to eliminate discrimination and other prohibited conduct on grounds of sexual orientation.

Advance equality of opportunity

63. The consultation and any proposed reform of the Gender Recognition Act is not expected to have an impact on the need to advance equality of opportunity of the general LGB population. Streamlining the gender recognition procedure would benefit trans people including those with a minority sexual orientation.

64. LGB groups and organisations may offer separate-sex services, facilities and activities, and trans people are already part of this; having a GRC does not determine their access to such services. There are already exceptions in the Equality Act which permit the exclusion of trans people from single and separate sex services where, on a case by case basis, this is shown to be a proportionate means of achieving a legitimate aim, and there is no intention to amend these exceptions. The consultation seeks to gather further evidence of the impacts on single sex services and the operation of the Equality Act exceptions.

Foster good relations

65. No impact is expected on the need to foster good relations between people of different sexual orientations.

66. Some lesbian groups are opposed to any relaxation of the requirements and the proposals may impact negatively on the need to foster good relations between trans people and these groups. This impact can be mitigated by the consultation itself, which permits these concerns to be discussed and taken into account, and by maintaining the exceptions in the Equality Act.

Pregnancy and maternity

67. It is known that some trans men give birth. Streamlining the requirements for legal gender recognition may mean that there will be more trans men who have obtained GRCs and are therefore legally male who give birth.

68. This consultation focuses on the process of obtaining gender recognition, rather than the issues faced by trans men who give birth.

Eliminate unlawful discrimination

69. Consulting on potentially streamlining the gender recognition process is not expected to have any impact on the need to eliminate discrimination and other prohibited conduct because of pregnancy and maternity.

Advance equality of opportunity

70. Consulting on potentially streamlining the gender recognition process is not expected to have any impact on the need to advance equality of opportunity on the basis of pregnancy and maternity.

Foster good relations

71. Consulting on potentially streamlining the gender recognition process is not expected to have any impact on the need to foster good relations between those with the protected characteristic of pregnancy and maternity and those without.

Decision making

72. The consultation process will enable the Government to gather further evidence about the likely impact of reform on people with protected characteristics. Consultees can respond to questions 10 and 11 providing further information and evidence about equality impacts, and are invited to comment on the impacts identified in this assessment.

73. The consultation itself is not expected to have any negative impact on people with protected characteristics, and it should have a positive impact on people with the protected characteristic of gender reassignment because it encourages public discussion and increased understanding of the issues facing them.

Monitoring and evaluation

74. The Government will carefully consider and analyse the consultation responses to identify impacts on people with protected characteristics. The PSED is an ongoing duty and this assessment will be kept under review and updated in light of evidence from the consultation.