



Ministry
of Defence

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[REDACTED]
[REDACTED]

8 September 2015

Dear [REDACTED]

Thank you for your email of 10 August 2015 requesting the following information:

"I would like some clarity on the medical grading of transgender applicants undergoing hormone treatment.

I would like to know in what circumstances would hormone therapy preclude worldwide deployment? The policy states that worldwide deployment may not be possible due to the storage of some medications, is this the only reason? As it is the only one given?

Can you please provide the information on applicants applying to join and also for serving personnel."

Your enquiry has been treated as a request for information under the Freedom of Information Act (FOIA) 2000 and the Ministry of Defence (MOD) can confirm that it holds information within the scope of your enquiry.

As detailed in Joint Service Publication (JSP) 950 Leaflet 6-7-4 (medical entry standards), candidates applying to join the Armed Forces with Gender Identity Disorders may present untreated, during treatment or having completed all hormonal and surgical treatment. In each case the candidate is required to meet the same physical and mental entry standards as any other candidate.

Candidates who have completed transition (and, where appropriate, have been stabilised on hormone medication and fully recovered from surgery) may be graded P2 (Fit for entry), subject to fulfilling the normal medical standards according to the individual's legal gender, including any time periods required to allow for the resolution of psychological problems encountered before or during the transition process. Any ongoing hormone therapy must be compatible with world-wide service and have been stable for at least 6 months.

Candidates in transition. Transition is an extremely stressful period and involves regular treatment (surgical or hormonal) and follow-up. It is likely that the requirements for treatment and review, as well as the psychological stresses of this period, will lead to a grading of P8 (unfit for entry).

Candidates who are undergoing surgical procedures should be graded P8 until those procedures are complete and the normal recovery times have been achieved and then assessed.

Candidates undergoing hormone treatment must be stable for at least 6 months on a medication regimen and the medication and review requirements must not preclude world-wide service before they can be considered for P2 grading. If the hormone therapy is a prelude to surgical procedures then the candidate should be graded P8 until that surgery and appropriate recovery is complete.

Whilst gender identity disorders themselves are not a reason for referral for psychiatric assessment, candidates still in transition should be carefully assessed for previous and ongoing psychiatric conditions or distress.

Where any doubt exists about the suitability of a candidate to be graded P2 the examining physician should seek the opinion of the sS occupational physician responsible for service entry. Candidates with untreated gender dysphoria are graded P8.

Serving personnel who undergo hormone treatment and/or surgery for gender dysphoria are initially graded medically non-deployable.

Following consultation with a single Service Occupation Physician, upgrading may be considered once their condition is stable, taking into account their ongoing medical support and compatibility with military environments. Deployment overseas may be precluded as some medications prescribed to transsexual people have specific storage requirements which may not be available in cold or hot environments.

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact the Headquarters of the Surgeon General in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Deputy Chief Information Officer, 2nd Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the FOIA. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.org.uk>.

Yours sincerely,

Headquarters of the Surgeon General