THEMES

HEALTH

ALBANIA
The 14th Festival of Diversity opened on 17 May and events were held throughout the month, including a national forum on hate speech and hate crimes, and a flashmob. Tirana Pride was held on 20th of May under the motto, ‘Open Your Heart’. Government and Ombudsperson office representatives spoke at the opening.

ANDORRA
In August, DiversAnd met with the Ministry of Health to discuss the specific protocols for gender-affirming procedures that follow the regulatory changes of 2022. The organisation argued for the inclusion of puberty blockers, hormone therapy for 16-year-olds (and in some cases as young as 14), and gender-affirmation surgery for adults within the social security system’s coverage. Another demand was to eliminate any delays in accessing gender-affirming care. The implementation of the protocols is planned for early 2024.

ARMENIA
(See also under Freedom from Torture, Cruel, Inhuman or Degrading Treatment)
Several testimonies of LGBT people who suffered harassment, mistreatment, denial of care, and so-called ‘conversion practices at the hands of medical professionals were released in an article in June. ECOM’s report documented a 2022 case of a trans woman who was denied medical care by a plastic surgeon and was subjected to transphobic slurs.

AZERBAIJAN
ECRI highlighted that trans people have very poor access to hormonal therapy and often have to resort to buying and using them in an unsafe manner, without medical supervision.

BELARUS
Alexandra Kuchinskaya, a sexologist at the Republican Scientific and Practical Centre for Mental Health (RSPC), has been requesting that trans people who are seeking gender reassignment provide a sample of their saliva for genetic analysis, which is not provided for by the law.

According to a survey by anonymous initiatives, 62% of trans and non-binary respondents need hormone treatment and the health state of 64% of respondents is below average.

BELGIUM
UZ Gent/Transgender Infopoint’s study found that almost 70% of LGBTQ+ people have considered suicide. Transgender Infopoint celebrated its 10th anniversary.

An LGBTQIA+ health centre opened in Brussels and is run by three civil society organisations. In Wallonia, five such centres exist and two more will open soon. Funds were allocated to establish five more centres dedicated to trans health.

BOSNIA AND HERZEGOVINA
Trans activists and SOC continued to advocate for access to gender-affirming healthcare and for insurance coverage. SOC launched a policy brief on trans-specific healthcare, published a trans healthcare guide for medical professionals, and trained healthcare providers.

In January, a law that makes gender-affirming healthcare
less affordable and more difficult to access came into force. The new legislation classifies certain procedures as ineligible for funding through mandatory health insurance and implies that it is an aesthetic rather than a vital medical procedure.

The antiretroviral medication available this year belonged to an older generation of products.

In December, Bosnia and Herzegovina submitted its trans-specific healthcare system for a voluntary national review under the Council of Europe’s Thematic Review process.

**CYPRUS**

Accept LGBTI Cyprus continued advocating for inclusive healthcare, engaging with the European Commissioner of Health and urging the Ministry of Health for LGBTI-inclusive medical services. This effort resulted in a December 2023 meeting chaired by the Health Ministry’s Director General. Key outcomes included plans on updating trans-related hormones coverage, establishing a medical centre for trans healthcare, and more.

Trans people continued facing difficulties in accessing hormonal therapy. Some also shared that endocrinologists were unwilling to help adjust their dosage, and they were struggling with depression as a consequence.

**NORTHERN CYPRUS**

Trans people continued facing difficulties in their access to hormonal therapy and gender-affirming healthcare, as reported to the QCA Solidarity Line. The QCA Solidarity Line continued providing essential psychological aid and other social services to LGBTI+ people in need.

QCA research on health provider attitudes revealed that 60% reported having no prior experience in handling situations involving LGBTI patients. Only 10% reported having lots of experience with the LGBTI community.

**CROATIA**

The Rainbow Family Association’s study found that over 70% of LGBTIQ+ people have considered suicide and 15% have made a suicide attempt. 65% feared discrimination in healthcare.

Civil society launched the first psycho-social counselling and support platform for LGBTIQ people.

In February, the Parliamentary Committee for Health and Social Policy and the Committee for Family, Youth and Sports held a joint session to discuss the situation of trans minors. Several experts, who joined the event, left after Željka Markić from the In the Name of the Family group (see under Bias-motivated Speech) was also invited. The event’s invitation page alleged a stark increase in the number of trans diagnoses among children, which the Ministry of Health proved to be false at the session.

Trans healthcare access remained difficult this year; civil society continued to lobby for better access, including after the appointment of the National Health Council members.

Genital surgeries remain unavailable and those available abroad should be covered by mandatory health insurance, however, this is not happening. Trained and trans-friendly medical professionals are still few.

In 2022, mastectomies started to be covered again under mandatory health insurance. However, in 2023, the only hospital performing them postponed many interventions due to work in their building.

Hormone therapy is covered only for some people, mostly those who have changed their gender markers. KolekTIRV is preparing a class action lawsuit demanding the general coverage of hormone therapy.

The Ministry of Health held meetings with KolekTIRV over trans issues. The Ministry invited a psychiatrist who is one of the leaders of the anti-gender movement in Croatia to participate in these meetings. In June, the Ministry of Health ceased all communication with kolekTIRV, without any official announcement. It has not yet established a working group, as recommended by the Ombudsperson for gender equality.

**CZECHIA**

Two trans women shared that they were placed in the male unit during hospitalisation.

Trans*parent continued to hold courses for professionals working in psychology, psychotherapy, psychiatry, social work, and other areas, focusing on working with trans and non-binary clients.

The National Institute for Mental Health, in collaboration with trans experts, is developing healthcare services for trans patients, with a focus on e-health accessibility.
THEMES

DENMARK
A longitudinal academic study found that over the last four decades, trans people have been 7.7 times more likely to attempt suicide and 3.5 times more likely to die of suicide than the general population.

The state monopoly of trans-specific healthcare (TSH) continued, split between three clinics. Trans people continue to report rigid gatekeeping, medicalisation, pathologisation, racism, binary gender regimes, anti-migrant, anti-sex worker, anti-poverty, anti-fat and ableist structures and approaches that prevent access to trans healthcare. Access to TSH continues to be denied or delayed indefinitely for people with certain psychiatric diagnoses and/or who have survived severe trauma. Waiting times have also continued to be long, resulting in many trans people, who have the financial means, resorting to purchasing hormones abroad.

Despite a continuous dialogue with few select LGBT+ organisations, the Danish Health Authority published new guidelines for gender affirming surgeries that do not meet the needs of the target group, especially regarding the lack of access to mastectomy without hormone treatment, lack of solutions for young adults who have already received gender affirming care as teenagers, and no clarifications for the mandate of surgeons, who continue to have an outsized influence on patient care decisions. The guidelines further seminate the demand for psychiatric assessment found in the 2018 national guidelines.

Intersex adults continued to face limitations in accessing hormones and surgeries, requiring a transgender diagnosis for such treatments and receiving care from trans healthcare specialists, instead of intersex healthcare specialists.

One of Denmark’s largest insurance companies Sygeforsikringen “danmark” changed its discriminatory policy this year and will no longer deny coverage to men who take PrEP.

FINLAND
The latest School Health Survey from the Finnish Institute for Health and Welfare found that LGBT+ children and youth, and particularly those who are trans report high rates of depression, anxiety, and are seriously impacted by minority stress.

In August 2023 the Finnish Medicines Agency updated its guidelines on blood donation by men who have sex with men. Previously, a four-month restriction was applied whenever a man has had sex with another man, even within a monogamous relationship. This was considered discriminative, as sex between a man and a woman or two women amounted to the same restriction only in cases where the person had new or several sexual partners. The new guideline lifted the restriction and was implemented in December 2023.

FRANCE
The city of Montpellier hosted a conference on chemsex in November.

GERMANY
In January, the Ministry of Health announced they would end the discriminatory restrictions on gay and bi men, and trans people who want to donate blood, and replace them with an assessment of risky behaviours. The change entered into force in April. In August the new rules by the German Medical Association based on this change became public - and were criticised for continuing to ban blood donations from men who have sex with men (MSM).

A new scientific study found high levels of loneliness and social isolation among trans and gender-diverse people.

GREECE
Access to trans-specific healthcare, especially for those uninsured remained very difficult. In January, access to an essential hormone-related drug was suspended due to a technical change in prescriptions. The drug is widely administered for a number of conditions, but was only suspended in trans-specific healthcare. The Transgender Support Association (GTSA) immediately intervened and requested the state to remedy the situation, which could leave many without hormonal treatment. 27 SYRIZA MPs joined in lobbying the Ministry.

The Health Ministry’s solution is a new procedure that
requires an endocrinologist to administer the prescription online and a three-member panel to approve it, which is very complicated and lengthy. GTSA continued to call for depathologisation, access to healthcare for migrants and refugees, insurance coverage, and other key advancements.

HUNGARY
Háttér trained 124 medical professionals in working with LGBTQI people, including 35 doctors and 63 psychologists.

ICELAND
The LGBTI Action Programme (2022-2025), adopted in 2022, commits to improving trans healthcare provision. Nevertheless, access to gender-affirming surgeries remained difficult this year, with waiting times remaining extremely long.

On 28 June, the Supreme Court ruled that a trans man, who underwent a mastectomy, was entitled to sick pay. In 2022, the National Court ruled against the man.

IRELAND
Ireland recorded an increase in STI infections, with gay, bisexual and other men who have sex with men (gbMSM) being disproportionately affected. New monkeypox cases were also recorded among gbMSM in the spring. Several groups co-launched the Proud and Prepared campaign to encourage sexual health and wellbeing in the community.

BelongTo’s annual report showed a continued need to support LGBTQ+ youth in a worsening climate of fear. In 2022, youth workers carried out 2,395 support interventions.

HIV Ireland launched a pilot peer-led rapid HIV testing programme to improve trans people’s access to the service. In 2022, the number of new HIV infections doubled compared to the previous year. However, only 20% (173 people) were newly diagnosed, representing a 16% decrease compared to 2019. 62% of the new notifications in 2022 corresponded to people previously diagnosed abroad who transferred their care to Ireland.

The crisis in gender-affirming healthcare provision continued, with youth being the worst impacted. Trans groups launched the ‘Transgress the NGS’ campaign in the spring, in part to demand that the NGS discourage GPs from supporting trans patients. Several protests were held this year demanding access to trans healthcare. There remains no clinic to which young trans people can be referred - the Child and Adolescent service is closed and waiting times are indefinite.

TENI launched a new training program for general healthcare professionals.

ITALY
ArciGay’s mapping in 31 cities found huge variations in the quality of HIV/AIDS care across the country, generally poor access to PrEP, and instances of discrimination in more than half of the cities covered. A full panel of STI tests is free in only six cities.

KAZAKHSTAN
In 2022, the Kazakhstani transgender initiative ‘Alma-TQ’ conducted a study finding that transgender people face problems accessing prevention and treatment for HIV and other STIs.

KOSOVO
CEL and CSGD continued to offer psychological support to LGBTI people and their families.

In October, the head of the HIV department at the Infectious Disease Clinic of the University Clinical Center of Kosovo (QKUK) announced that 10 people were diagnosed with HIV this year.

KYRGYSTAN
The political rhetoric against LGBT people and sex workers seriously threatened critical healthcare service provision this year. In March and April, several parliamentarians attacked the distribution of Global Funds in the country (see under Bias-motivated Speech). In April, the Country Coordination Committee to Combat HIV/AIDS, Tuberculosis and Malaria (CCM) was disbanded after MP Zhyldyz Sadyrbaeva’s appeal.

The government decided to merge the Republican Centre for Control of Viral Hepatitis and HIV with the National Institute of Public Health. The Center and people living with HIV, hepatitis, and TB their loved ones sent a joint letter of concern to the government, saying the move could completely jeopardise the ongoing work and what
Kyrgyzstan has achieved to date. They argued that the system is working effectively and patients have trust in the Centre, but would avoid seeking care through the state. In May, MP Meikinbek Abdaliev asked for a list of people living with HIV in the country.

In June, the Ministry of Health adopted an order introducing the merger. In July, patients and representatives held a rally at the Ministry of Health building to demand an explanation. The head of the National Institute of Public Health, Zharkynbek Kasymbekov, later made derogatory statements about them on social media, for which the advocates demanded an apology.

A week later, the same advocates filed an administrative complaint with the Ministry of Health, demanding that the order be withdrawn. The Ministry issued a statement saying that the Center will remain independent and would not be affiliated with the National Institute of Public Health. At the same time, the order was not withdrawn. In August, activists turned to the Ombudsman, who called on the Ministry to ensure that it respects the rights of people living with HIV and hepatitis.

The Global Fund considered suspending its funds to Kyrgyzstan in September, but negotiations continued. In December 2023, the Global Fund approved the next cycle of funding until the end of 2026 through UNDP in Kyrgyzstan in spite of Kyrgyz Parliament’s objections to not include LGBTI people. Sufficient funding will be allocated for support to MSM and trans communities.

LGBT+ organisations continue providing mental and general health support to LGBT+ people. KI provided psychological assistance to 62 people and Labrys provided psychological assistance to 61 people and medical care to 34 people.

LITHUANIA

Fulfilling its promise made in 2022, the Ministry of Health made monkeypox vaccines available and free for men who have sex with men.

LUXEMBOURG

Civil society continued to lobby for a complete lifting of the blood donation restrictions on men who have sex with men (MSM) and women who have had sex with MSM. The Minister of Health supports the reform, but no policy changes were made this year, despite the blood shortage announced in January.

MALTA

The media reported in July that Malta’s sexual health clinic has a six-month waiting list for routine check-ups. In July, the Ministry of Health announced that three new GU community clinics were set to be opened. Checkpoint Malta carried out free community testing throughout the year and during EuroPride 2023.

Civil society has been campaigning for a new national sexual health policy, last updated in 2010, and carrying on awareness-raising campaigns. Malta has one of the highest HIV transmission rates in Europe. PEP is not provided for free to people involved in consensual sexual relations, nor to survivors of sexual assault or health workers injured by needles. The Minister for Health stated that free PEP and PrEP will be part of the new sexual health strategy, which they said will be out for public consultation later in 2023.

MONTENEGRO

CSOs continued responding to the growing need for mental health support in the community and called for targeted funding. A research study published by Spektra about necessary psychosocial support programmes for transgender, gender-variant and intersex survivors of violence was presented in July. A discussion on the mental health burden of LBQ women was held during Pride week in October.

PrEP became available for free through a CSO-sponsored programme by Queer Montenegro, Juventas and partner NGOs in October.

An analysis and research by LGBTIQ Social Centre, published in September, found that 77% of LGBTI persons fear that they will be rejected and/or discriminated against if others found out about their sexual orientation and/ or gender identity (SOGI). This fear is predominantly caused by perceived hatred of others towards the LGBTI community (56%). The data also shows that 69% of LGBTI persons would not seek specialised support or mental health counselling, while 37% have no trust in the public healthcare system.

NETHERLANDS

In May, the Minister of Health shared the findings of the
Mijn gender, wiens zorg? (Eng: My gender, whose care?) research project, which concludes that due to a lack of knowledge, society and general healthcare settings are currently unable to support trans people and that there is a parallel need for temporarily increased capacity in specialised trans healthcare to address the years-long waiting times. The Minister proposed a twin-track approach to improve the situation.

A second research report concluded that the increased demand for trans healthcare does not necessarily mean there are more trans people than before, but that due to more information, trans people may recognise their identity and find healthcare providers more easily than before.

In September, the right-wing Forum for Democracy (FVD) presented a bill at the House of Representatives to ban puberty blockers and hormonal therapy for minors. A few days later, the House voted down the motion with a clear majority.

The Minister of Health announced that PrEP would be more accessible from August 2024 onwards. Amsterdam is close to achieving zero new HIV transmissions per year.

Monkeypox vaccination continued this year after an increase in cases in March.

**NORWAY**

Despite the 2020 guidelines on trans healthcare, which centre user participation and an individualised approach to care, care provision remained centralised again this year. Civil society and the city of Oslo continued to demand that HKS become the national competency centre but the Health Ministry denied this request in March. Previously, only one hospital in the public healthcare system, in Vestfold, has provided services to non-binary people, such as wigs and prosthetics, but not hormones or surgeries. Other such regional centres are underway in the other regions of Norway.

Trans healthcare for minors became a particularly critical issue this year. In March, the Norwegian Healthcare Investigation Board (UKOM) published its recommendations, urging the government to revise the care provision guidelines and to redefine trans healthcare for minors as 'experimental', which would also demand mandatory participation in research for minors receiving care. Civil society and civil rights attorneys expressed deep concern about the report, which ignores international standards, relies on very limited literature, and fails to meaningfully involve trans youth and organisations. CSOs published a detailed response to the report. In June, the Ministry of Health announced it may reconsider the provision of care to minors and was quoted as saying that care for minors should only be provided by the specialist health service at Rikshospitalet. Civil society met with the Directorate the next day and was reassured that they would be involved in decisions, and they received the clarification from the Ministry that as long as it is safe, treatment can also be carried out in municipal or private institutions.

In September, the Nordland Research Institute published a damning report about service provision in Rikshospitalet. Rikshospitalet has long been criticised by service users and trans organisations for unethical research, unethical treatment, using a pathologisation as standard and rejecting more than half of those who turn to them for help.

Civil society is alarmed by all these developments, particularly as the denial of HKS as a national competency centre came a month after the adoption of the new LGBT+ action plan, which identifies trans people as a priority group.

Despite clear signals from the County governor that a GP referral is sufficient to have access to trans-specific healthcare, Rikshospitalet has not implemented this in practice.

Despite calls from civil society, the Minister of Health has still not organised targeted and proactive support for those affected by the Oslo shooting in June 2022 - an estimated 200 people.

The Minister of Health changed the blood donation regulations, which no longer impose a 12-month deferral period on men who have sex with men. The change will enter into force in 2024.

Access to the Monkeypox vaccine improved this year.

**POLAND**

The far-right Ordo Iuris announced it would seek to ban legal gender recognition for minors.
Academic research showed that living in “LGBT-free zones” harms LGBT people, confirming earlier findings by KPH and Lambda Warszawa. Since the anti-LGBT resolutions, the annual suicide attempt rate has risen by 16%.

**PORTUGAL**

In March, the parliament adopted a regulation which allows for people to be manually added to the registries for cancer screening regardless of their legal gender.

From August on, the Monkeypox vaccine became more widely available to men who have sex with men and sex workers, among others.

The University of Algarve's study found that LGBTQIA+ people report worse health conditions than the general population and fear discrimination and microaggressions in healthcare settings.

The story of Keyla Brasil, a trans migrant woman living in Portugal, sparked civil society calls for trans healthcare services to be made available to migrants. Brasil is a trans activist in Portugal, but had to seek trans-specific healthcare services in Thailand, where she had a stroke.

**ROMANIA**

Civil society organisations published an online database of LGBTI-friendly doctors.

**RUSSIA**

In June, the Duma adopted a ban on trans-specific healthcare provision by amending the Federal Law On the Fundamentals of Protecting the Health of Citizens. President Putin signed the law in July. The Ministry of Health voiced concern about the law and several protests were held. The Deputy Minister of Health however asserted that the law did not violate the Constitution.

The ban received significant attention from INGOs and human rights bodies. In September, a group of doctors and healthcare specialists started preparing clinical recommendations on trans healthcare, with input from trans communities, according to the standards of the Ministry of Health. Civil society also shared they would appeal against the law to the Constitutional Court.

Hormonal therapy and surgeries are no longer possible as ‘treatment’ for an F64.0 diagnosis, but hormones and mastectomies could theoretically be accessed in other ways.

Getting a diagnosis is still possible, but until October, no treatment protocol was in place. In October, the government released a draft order that would allow a total of five institutions to issue certificates authorising trans-related surgeries. The law set an exception for medical interventions on intersex children (see under Bodily Integrity). A commission consisting of doctors in various fields will be responsible for making each decision. LGBT organisations submitted an appeal to the UN

In response to the appeal, the mandates of the Special Rapporteur on the situation of human rights in the Russian Federation, the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity, and the Working Group on discrimination against women and girls issued recommendations to Russia, expressing their concerns and requesting clarification on how the adopted law complies with Russia's international obligations.

Due to the law, an intersex person was denied cancer-related surgery in September.

Civil society fears that the new ‘propaganda law’ will make HIV prevention much harder. Russia now accounts for over half of new infections in Europe and Central Asia.

A survey by Kilkota found that since the outbreak of the war, trans people continue to face a...
fund did not respond positively to the request for available dosage (5mg) to be covered.

SLOVAKIA
The crackdown on trans healthcare services intensified this year. In late 2022, doctors and other medical professionals published a joint statement addressed to the government, calling for a halt to all trans healthcare provision. The statement, which now has over 400 signatures, has been widely condemned by human rights organisations. ECRI’s report on Slovakia welcomed the Professional guidelines to unify medical procedures for issuing medical opinions on gender reassignment (see under Legal Gender Recognition), which was adopted but then suspended in 2022, and called for its implementation. Civil society continued demanding the same.

In January, the neo-nazi People’s Party Our Slovakia proposed a law that would criminalise doctors who provide trans healthcare services.

In this climate, trans people have no access to healthcare and many self-medicate or travel abroad. Some reported abuse by medical professionals, including verbal harassment and other forms of humiliation.

The counselling centre for LGBTI+ people in Poradna shared that in the current climate of anti-trans rhetoric and regression in legal gender recognition and trans healthcare provision, many trans people contemplate suicide or leaving the country. Another counselling centre for LGBTI+ people Prizma Košice also warned that a ban on legal gender recognition (see below) would have catastrophic mental health ramifications.

SLOVENIA
The Ombudsperson established that a lesbian woman was discriminated against by her gynaecologist, who refused to give her medically assisted reproduction care after an IVF treatment abroad. The doctor filed a conscientious objection claim with Slovenia’s Medical Association, but the Association did not support the claim.

The interdisciplinary group on trans healthcare, set up by the Ministry of Health and the University Psychiatric Clinic Ljubljana in 2020, met once this year. Communication with civil society improved this year.

In 2022, the National Institute of Public Health stated that they support the implementation of ICD-11, but no changes have taken place since.

Accessing medications became more difficult this year and this has impacted Nebido access as well – hormones need to be picked up at GP’s practices, instead of simply at pharmacies.

One of the two endocrinologists working at the University Clinic Centre in Ljubljana left, leading to longer delays for trans persons initially accessing hormones in the country.

SPAIN
Spain introduced period- and abortion-related sick leave.

Vox re-stated its stance against minors’ access to trans-specific healthcare. Madrid announced it would require an expert opinion from a psychologist before providing hormones to trans minors 16 and over.

The Balearic Islands adopted Spain’s first healthcare protocol for intersex people. The newly elected regional conservative government has not established a timeline for its implementation.

The HIV Unit of the Hospital Clínic of Barcelona spoke about the vulnerability of trans migrants and sex workers to HIV. According to the Clinic, 87% of the trans population with HIV that the Clinic serves are Latin American women and 88% are sex workers.

Reporting shared that the University of Navarra Clinic (Opus Dei) classifies ‘transsexuality’ and ‘homosexuality’ as “disorder” or “deviation.”

SWEDEN
In February, Transammans opened the first national helpline for trans youth.

Ahead of Women’s Day, RFSL Stockholm released a report about LBQ women’s access to healthcare. The majority of 812 participants reported having good contact with healthcare, but many avoid seeking care. For instance, almost a third said they do not go to a gynaecologist.

Following from the 2021 decision, the National Board for Health and Welfare (Socialstyrelsen) classified gender-affirming care as so-called “national specialised healthcare”. In March the Board announced that as of
January 1, 2024, there will be six clinics, with three main ones in Stockholm, Alingsås, and Linköping, which cooperate with satellite clinics in Uppsala, Umeå and Malmö/Lund.

In June, the Agency for the Assessment of Health Technology and Social Services (SBU) released a study to conclude that few people regret transitioning or detransition. The rate of between 0-4% is based mostly on literature from outside Sweden.

In September, the largest clinic in Sweden that provides care for trans minors issued an internal guidance telling care providers not to refer minors under the age of 11 to their clinic. The decision was made a few days after SVT’s documentary premiered (see under Bias-motivated Speech). At the time, 74 of the 368 patients were under 11, which means that a significant rate of trans minors would be left without care.

The National Board of Health and Welfare investigated whether the guidelines for adults with gender dysphoria should be updated to better fit the national specialised health care system.

In October, Sweden Democrats (SD) in the parliament proposed to raise the age limit for trans healthcare to 25.

The government said they would commission the National Board of Health and Welfare to plan individual risk assessment for men who have sex with men (MSM) from 2024, instead of a blanket rule. The current blood donation rule sets out a six-month deferral period for MSM.

SWITZERLAND

In May, the National Council unanimously decided to abolish discrimination based on sexual orientation in blood donation. The new rule focuses on individual risky behaviour and entered into force in November.

New Swiss recommendations for gender-affirming healthcare focused on physical care and psychiatric care, based on ICD-11 and the WPATH Standards of Care Version 8, have been published.

In December, the Bern Grand Council supported a motion to limit irreversible medical transition to adults (by 76 to 75 votes and one abstention) and to strengthen the support for trans youth. Members of the National Council handed in a demand that guidelines on diagnostics and treatments of youth under 25 with gender dysphoria shall be developed, and another to “protect” at least minors from gender reassignment surgery.

In November, the Federal Council published the next national programme “Stop HIV, hepatitis B and C viruses and sexually transmitted infections” including trans persons as key-population for the first time.

TURKEY

In August 2023, some doctors and mental health professionals from Istanbul University were targeted by Islamist media for providing gender-affirming medical care to underage trans people, claiming that this constituted child abuse. State authorities did not challenge this targeting. In response, all medical faculties offering gender affirming medical care suspended or restricted their services for a period of time.

Following the February 6 earthquakes, LGBTI+ people in the disaster area experienced problems in access to healthcare services, especially hormone replacement and antiretroviral therapies (see here).

TURKMENISTAN

HIV transmission remains criminalised, and there continues to be no data about people living with HIV/AIDS in the country. Activists report that medical staff have negative attitudes and little knowledge of people living with HIV. The government maintains that HIV, STIs, and COVID-19 do not exist in the country, which causes suffering among those affected.

UKRAINE

Having been stalled because of the war, the implementation of ICD-11 was reactivated by the Ministry of Health. It is still in the initial stages, and has not yet reached the point where the development of the new clinical protocols, including trans health care, can be started.

Due to the war, trans and intersex people continued experiencing serious difficulties accessing trans and intersex-specific health care. The availability of hormones fluctuated and while some friendly healthcare professionals left the country, others were identified by the community. Several LGBT and trans organisations are providing hormones as part of their general humanitarian aid.
The draft law on HIV prevention and protection of people living with HIV, developed in cooperation with the Ministry of Health and following WHO guidelines, is being prepared for consideration in parliament. The draft no longer considers unintentional HIV transmission a criminal offence and lowers penalties for knowingly transmitting HIV.

UNITED KINGDOM

In May, NHS England announced that their plans to decentralise trans healthcare, close down and replace Tavistock with regional centres, would only materialise in 2024. Previously, the plan was to put the new system in place by spring of 2023. In the meantime, only those already in the system would receive care - no first appointments will be given out.

Following the consultation in 2022, in June the NHS England published an interim guidance on trans healthcare provision for minors. The NHS maintains its stance that minors, and only a limited number of them, should only be able to access hormone blockers if they participate in long-term research. The NHS set up a national Children and Young People’s Gender Dysphoria Research Oversight Board for this purpose.

Waiting times for a first trans healthcare appointment remained extremely long. Four trans people, including two minors, sued the NHS over this, but lost in their case in July.

In October, the health secretary announced that trans women would be banned from female NHS wards in England, despite a complete lack of evidence of any issues.

The Scottish Government continued work on improving trans healthcare over 2022-2024. Work this year included developing national standards for gender identity services, and a knowledge and skills framework for health care providers working with trans people. Despite some important progress, waiting times continue to be extremely long, and there has been less progress on service redesign than hoped for.

In November, Scotland launched its updated Sexual Health and Blood Borne Viruses Action Plan, including new opt-out HIV testing pilots in A&Es.

UZBEKISTAN

Accessing medication, which was previously supplied by Ukraine or Russia, became very difficult and prices significantly increased.

Medical staff at AIDS centres continue to report patients to the authorities after finding out their sexual orientation. There are reports suggesting that staff manipulate LGBT people to disclose their SOGI, deceiving them that “HIV treatment for LGBT people is different from the one prescribed for heterosexual people.”

A testimony of a gay man serving a sentence under Art. 120 shared that patients with end-stage AIDS were not given any palliative treatment and left to die alone.

ECOM conducted a study of motivation and barriers for voluntary testing of gay men, trans persons and men who have sex with men (MSM) for HIV infection in the city of Tashkent. It was found that Article 120 is the main barrier that stops these groups voluntarily testing for HIV. The study will be posted on the ECOM website in 2024.