

Clinical: Youth and Gender-Affirming Health
Proactive Release: 26 September 2019

12 September 2019

9(2)(a)

Dear 9(2)(a)

Official Information Act (1982) Request

I write in response to your Official Information Act request, dated 20 August 2019, related to regional gender-affirming health services.

For context, Counties Manukau District Health Board is committed to improving the health outcomes for all people in our community. We regard gender as a self-identified attribute, and only relevant if it affects clinical treatment. We acknowledge that our gender-diverse communities have both general health needs (e.g., chronic conditions, mental health and primary care needs), and have specific health needs that relate to gender identity and transition (e.g., hormonal, surgical).

Specialist gender-affirming health services available for the Counties Manukau community are provided via the Northern Region Transgender Health Services, which is a collective name for a number of services that work together to provide gender-affirming healthcare for transgender and gender-diverse people in the Auckland and Northland region. The CM Health Centre for Youth Health provides regional services across metro-Auckland. We have provided information on our services for all three metro Auckland DHBs, noting that the regional services commenced in 2017.

You requested the following information, and our responses are below each question. Where we do not hold information, we have noted the limitations of current coding and repository systems.

1. **How many under 18 year olds is the Counties Manukau Centre for Youth Health currently seeing with a diagnosis of gender dysphoria?**
 - **How many of these youth are female?**
 - **How many of these youth are male?**

We have used available collated data from a 6-monthly report prepared by the Centre for Youth Health (CfYH) that provides some of this information (**Table 1**). This reflects standardised regional information, extracted from coded data. The CfYH sees individuals up to 25 years old. We trust this meets your requirements.

Domicile	Counties Manukau	Auckland	Waitemata	Total
Total active cases at CfYH all ages	90	79	75	244

Domicile	Counties Manukau	Auckland	Waitemata	Total
• Male	36	50	50	136
• Female	52	21	20	93
• Gender exploring/ non-binary	2	8	5	15
Total aged under 18 years (at 30 June 2019)	45	57	62	164
Total aged over 18 years (at 30 June 2019)	45	22	13	80

Table 1

- 2. Of these under 18 year olds, how many are currently prescribed "puberty blockers" (leuprorelin or goserelin)?**
- **Of those prescribed puberty blockers, what is the average length of time they are prescribed leuprorelin or goserelin for?**
 - **Of those prescribed puberty blockers, how many are female and how many are male?**

Data on all individual treatment plans for those cases under the care of CfYH (including identifying a subset prescribed puberty 'blockers') is not systematically coded. Providing this would require a clinician to manually review individual medical files for all active cases. As CfYH sees more people for gender-affirming care, this is becoming a more substantial collation process. Providing this level of information will take more time that it did to respond to the same request from you in 2018.

As we advised you in a similar response in 2018, we do not believe that it is feasible for us to provide this manual collation of data, without adversely impacting clinical service provision. We are therefore declining this element of your request, under Section 18(f) of the Act – requiring substantial collation or research.

The CfYH is continuing to work with our Clinical Analytics service to improve automation of the coding of outpatient data for the region to include additional treatment and intervention details.

- 3. How many people (of all ages) in Counties Manukau currently have a diagnosis of gender dysphoria/ gender identity disorder that you are aware of?**
- **How many of these people are male?**
 - **How many are female?**

The DHB does not hold data on the total number of individuals currently living with any particular diagnosis (such as gender identity, or eating disorders) in our district.

Clinical coding is only on cases discharged from hospital (and uses standard ICD coding), and therefore can only identify the individuals who required hospitalisation. More commonly, these specific conditions will primarily be identified, and be clinically managed in the community, rather than via a hospital admission.

We have worked with our clinical coding team to extract available data for discharges from Counties Manukau Health facilities between July 18 and June 2019 against ICD codes *F64 - Gender Identity Disorder*. We note that the current clinical coding manual does not include Gender Dysphoria. This data will not include any individuals who are not seeking hospital health care for gender identity, or those who are accessing community-based gender-affirming health care services. This data has identified the following discharge numbers in the last year.

All inpatient Discharges between 01.07.2018 to 30.06.2019 all ages and genders.

- **Gender identity disorders**

There were 32 inpatient episodes with Gender Identity disorder included as a diagnosis. These 32 episodes were for 25 patients - all aged over 18 years, and 84% were male.

4. **How many aged under 18 year olds in Counties Manukau DHB currently have a diagnosis of anorexia nervosa?**
 - How many of these youth are female?
 - How many of these youth are male?
5. **How many people (of all ages) in Counties Manukau currently have a diagnosis of anorexia nervosa that you are aware of?**
 - How many of these people are male?
 - How many are female?

As noted above, we do not hold information on the total number of people currently living with any specific diagnosis/ condition in our community. More commonly, these specific conditions will primarily be identified, and be clinically managed in the community, rather than via a hospital admission. In addition, some children and young people under 18 years of age may have accessed services from, or have been admitted to Auckland DHB specialist facilities.

Our clinical coding team has extracted available data for discharges from Counties Manukau Health facilities between July 18 and June 2019 against ICD codes *F50 Eating Disorders* (both *Bulimia and Anorexia Nervosa*). This data has identified the following discharge numbers in the last year.

All inpatient Discharges between 01.07.2018 to 30.06.2019 all ages and genders.

- **Eating disorders**

There were 25 inpatient episodes with an Eating Disorder included as a diagnosis. These 25 episodes were for 16 patients; 25% (4) were aged less than 18 years of age, and 81% (13) were female. Of this total, for Anorexia Nervosa as the diagnosis, there were six patients, with 9 inpatient episodes, all were female, and 89% were aged over 18 years.

6. **How many female people presented to Emergency Department(s) within your DHB because of domestic violence, or disclosing domestic violence, from 1 January 2018 to the end of December 2018?**

We cannot retrospectively identify Emergency Care Presentation reasons at the level of detail you are seeking; particularly those that do not require an admission.

Clinical coding will usually code the nature of injury/ illness or presenting problem, but not the reasons for that, except detail noted in the individual patient files. (For example, a fractured bone

may be caused by a variety of situations, but will be coded as a fracture. In addition, we are not always informed of the cause of injuries seen in the Emergency Department).

We do screen all women presenting in Emergency Care, Women's Health and Kidz First, as a part of the Family Violence Intervention Programme. Following disclosures of Intimate Partner Violence (IPV), a Preliminary Risk Assessment form is completed, and safety planning initiated. That process incorporates a more detailed assessment, and then referral pathways are used for agencies. The DHB have a current MOU's with Women's Refuge and Victim Support, who respond to immediate safety planning for women/ children.

We have on average 450-500 positive disclosures annually. This is in the context of over 118,000 Emergency Department presentations each year.

There is an ongoing focus on supporting our Emergency Department staff in managing any disclosure of family harm or violence, and responding to Child Protection statutory requirements including improving routine enquiry rates, inter-agency collaboration and ensuring comprehensive completion of documentation and referral pathways.

I trust this information satisfactorily answers your query. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act.

Please note that this response or an edited version of this may be published on the Counties Manukau DHB website.

Yours sincerely,



Fepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health