

Gender-Affirming Surgeries Reduce Suicides

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Bottom Line Up Front

Suicide remains a leading cause of death among Veterans, and the risks are disproportionately higher for transgender Veterans. Gender-affirming surgeries are proven to significantly reduce suicide risk. While Veterans Health Administration offers several forms of gender-affirming care, initial surgeries are explicitly excluded. This brief discusses the health impacts of gender-affirming surgery and suggests there is an urgent need to consider adding initial surgical options to the Veteran benefits package.

Introduction

Veterans Health Administration (VHA) provides most forms of gender-affirming care to transgender Veterans, including hormone therapy, pre-operative evaluation, post-operative care, some surgical care (e.g., revision surgeries, gonadectomies), and mental health care.^{1,2} However, VHA Directive 1341 indicates **initial** gender-affirming surgeries (e.g., vaginoplasty, phalloplasty, and chest reconstruction) cannot be performed or funded by VHA.^{3,4}

However, in 2021, VHA announced the initiation of the rulemaking process to modify the federal code and reverse VHA Directive 1341, allowing VHA to provide initial gender-affirming surgeries. This administrative process was estimated to take two years, including a period for public comment. Now, nearly three years later, the process is delayed and still incomplete and an updated timeline remains unclear.^{5,6,7}

This brief will walk through the health impacts and effectiveness of gender-affirming surgeries and how these findings could impact VHA policymaking.

Overrepresentation in the Military

Transgender individuals are two to three times more likely to have served in the United States (US) military than cisgender individuals, likely motivated by a desire to avoid familial rejection, escape violence, or overcompensate in an environment with traditional gender expression.⁸

Although precise, recent statistics are not yet available, there are some estimates of the total number of transgender Veterans. A 2014 report from the University of California Los Angeles calculated that there were an estimated 134,300 transgender individuals who were Veterans or retired from Guard or Reserve service at that time. Another 15,000 transgender individuals were in active duty or in the Guard or Reserve forces.⁹

Internal VHA data suggests that, between 2006 and 2013, approximately 10,000 Veterans received VHA-paid transition-related care at VHA facilities or from community providers, and the diagnosis for gender identity disorder **almost doubled**. These figures are likely underestimates because not all Veterans meet criteria for a formal diagnosis, and some choose to hide their identity from providers. These estimates are also limited to 2006-2013.^{8,10}



Transgender individuals are **2-3 times** more likely to have served in the US military than cisgender peers.

Suicide Among Transgender Veterans

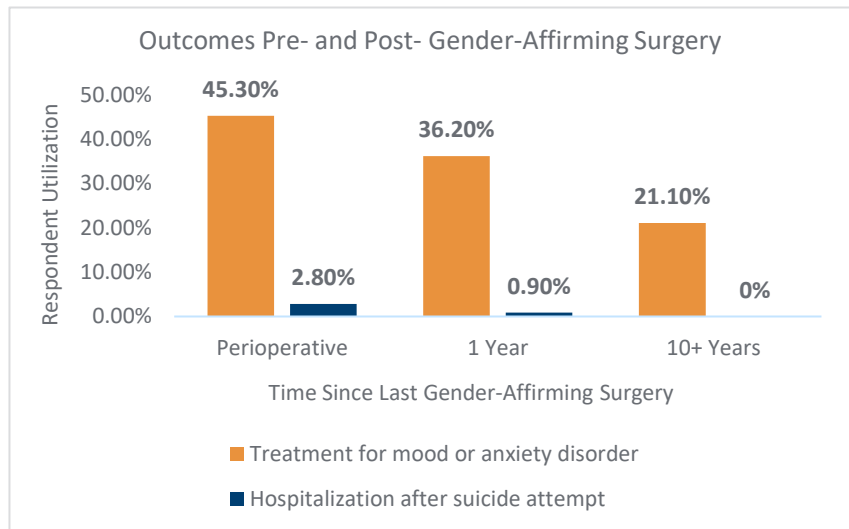
With the rate of suicide reaching a **record high** in the US, suicide prevention remains one of the highest public health priorities for both the general population and VHA.^{11,12} Suicide is a **leading cause** of death for all Veterans, but the risks are disproportionately higher for those in the LGBTQ+ community.¹³ More specifically, transgender Veterans die by suicide at twice the rate of their cisgender Veteran peers and over 5 times the rate of the general population.^{9,14,15,16}

Transgender Veterans die by suicide at over **5 times** the rate of the general population.

Gender-Affirming Surgery as Suicide Prevention

Since 1975, more than 2,000 scientific studies have examined gender-affirming care. Supported by over 30 leading medical associations, including the World Health Organization and the American Medical Association, gender-affirming care is deemed evidence-based and effective at reducing suicide rates.^{17,18} Consequently, gender-affirming surgeries in the United States nearly tripled from 2016 to 2019.¹⁹

A recent literature review of 23 studies reported that the majority found that gender-affirming treatment reduced suicidality.²⁰ Some studies from the review found that undergoing one or more types of gender-affirming surgery was associated with lower past-month psychological distress and past-year suicidal ideation, while others saw reduced mental health treatment and fewer hospitalizations after a suicide attempt over years following.^{21,22,23}

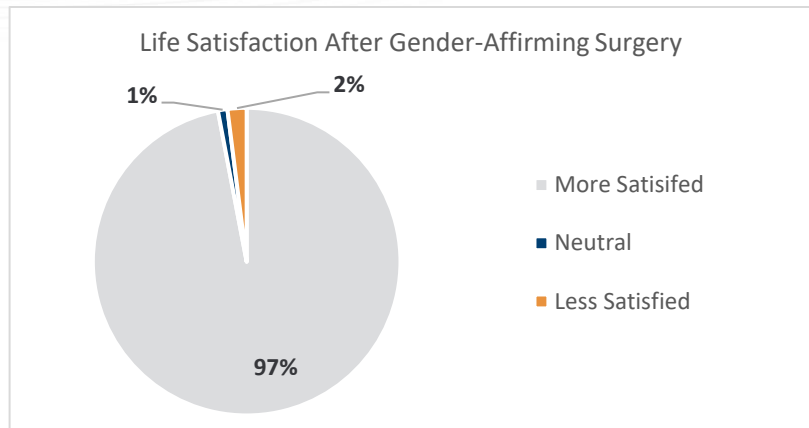


One of the studies included found that transgender and gender non-conforming people who had a gender-affirming surgery had notable reductions in psychological distress, suicide ideation, and tobacco smoking compared to those who didn't have a surgery but wanted one.²⁴

>40% reduction in psychological distress and suicide ideation

35% reduction in tobacco smoking

Most recently, the 2022 US Trans Survey: Early Insights Report (over 96,000 participants) found that **nearly all** respondents (97%) who had at least one form of surgery for their gender identity/transition reported that they were either “a lot more satisfied” (88%) or “a little more satisfied” (9%) with their life. 1% were neither satisfied nor less satisfied. The full report is expected to be released later this year.²⁵



Conclusion

Evidence from the scientific literature indicates that access to gender affirming surgery saves lives by reducing suicidality and psychological distress. Updated research on the transgender Veteran population is expected to be released from the National Center for Transgender Equality later this year and from the University of California Los Angeles in 2025.⁹ This will help better understand the current impact of VHA’s policy on transgender and gender non-conforming Veterans. Findings thus far suggest it is an effective option to include in the VHA medical package and the policy should be reviewed urgently.

References

- Administration UD of VA Veterans Health. Va. Gov | veterans affairs. https://www.patientcare.va.gov/LGBT/VA_LGBT_Policies.asp
- Resources for Providers Pride in Serving Transgender & Gender Diverse Veterans. <https://www.patientcare.va.gov/LGBT/docs/2023/Gender-Affirming-Care-at-VA-Providers-9-23.pdf>
- Department of Veterans Affairs. VHA DIRECTIVE 1341(3).; 2018. https://www.patientcare.va.gov/LGBT/docs/directives/VHA_DIRECTIVE_1341.pdf
- Overview of gender-affirming treatments and procedures. <https://transcare.ucsf.edu/guidelines/overview>
- Kime P. New va gender affirmation surgery policy sitting on secretary’s desk. Military.com. Published June 27, 2023. <https://www.military.com/daily-news/2023/06/27/new-va-gender-affirmation-surgery-policy-sitting-secretarys-desk.html>
- Kheel R. No timeline for trans vet surgeries, va says 2 years after announcing coverage. Military.com. Published June 9, 2023. <https://www.military.com/daily-news/2023/06/09/va-said-it-would-cover-trans-surgery-two-years-later-it-still-doesnt.html>
- Transgender veterans sue to have gender-affirming surgery covered by Department of Veteran Affairs. AP News. Published January 25, 2024. <https://apnews.com/article/transgender-veterans-surgery-va-c9b3d09154d748bb0c5faa72eba278d0>
- Va. Gov | veterans affairs. <https://www.mentalhealth.va.gov/healthcare-providers/index.asp>
- Transgender military service in the united states. Williams Institute. <https://williamsinstitute.law.ucla.edu/publications/trans-military-service-us/>
- Schaefer AG, Iyengar Plumb R, Kadiyala S, et al. Assessing the Implications of Allowing Transgender Personnel to Serve Openly. RAND Corporation; 2016. https://www.rand.org/pubs/research_reports/RR1530.html
- Curtin S, Garnett M, Ahmad F. Provisional Estimates of Suicide by Demographic Characteristics: United States, 2022.; 2023. <https://www.cdc.gov/nchs/data/vsrr/vsrr034.pdf>
- U.S. Department of Veterans Affairs Office of Mental Health and Suicide Prevention. National Strategy for Preventing Veteran Suicide 2018–2028.

https://www.mentalhealth.va.gov/suicide_prevention/docs/Office-of-Mental-Health-and-Suicide-Prevention-National-Strategy-for-Preventing-Veterans-Suicide.pdf

13. U.S. Department of Veterans Affairs Office of Mental Health and Suicide Prevention. 2023 National Veteran Suicide Prevention Annual Report.; 2023. <https://www.mentalhealth.va.gov/docs/data-sheets/2023/2023-National-Veteran-Suicide-Prevention-Annual-Report-FINAL-508.pdf>
14. Tucker RP. Suicide in transgender veterans: prevalence, prevention, and implications of current policy. *Perspect Psychol Sci.* 2019;14(3):452-468. doi:10.1177/1745691618812680
15. James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The Report of the 2015 U.S. Transgender Survey.* Washington, DC: National Center for Transgender Equality.
16. O’Leary KB, Marcelli M. Mental health outcomes among transgender veterans and active-duty service members in the united states: a systematic review. *Fed Pract.* 2022;39(10):418-425. doi:10.12788/fp.0321
17. AMA strengthens its policy on protecting access to gender-affirming care. <https://www.endocrine.org/news-and-advocacy/news-room/2023/ama-gender-affirming-care>
18. Medical association statements in support of health care for transgender people and youth | glad. Published June 21, 2023. <https://glad.org/medical-association-statements-supporting-trans-youth-healthcare-and-against-discriminatory/>
19. Wright JD, Chen L, Suzuki Y, Matsuo K, Hershman DL. National estimates of gender-affirming surgery in the us. *JAMA Network Open.* 2023;6(8):e2330348. doi:10.1001/jamanetworkopen.2023.30348
20. Jackson D. Suicide-related outcomes following gender-affirming treatment: a review. *Cureus.* 15(3):e36425. doi:10.7759/cureus.36425
21. Adams NJ, Vincent B. Suicidal thoughts and behaviors among transgender adults in relation to education, ethnicity, and income: a systematic review. *Transgend Health.* 2019;4(1):226-246. doi:10.1089/trgh.2019.0009
22. LGBTQ+ Identities and Suicide Risk Among Veterans. U.S. Department of Veterans Affairs; 2022. https://www.mentalhealth.va.gov/suicide_prevention/docs/FSTP-LGBT.pdf
23. Bränström R, Pachankis JE. Reduction in mental health treatment utilization among transgender individuals after gender-affirming surgeries: a total population study. *AJP.* 2020;177(8):727-734. doi:10.1176/appi.ajp.2019.19010080
24. Almazan AN, Keuroghlian AS. Association between gender-affirming surgeries and mental health outcomes. *JAMA Surgery.* 2021;156(7):611-618. doi:10.1001/jamasurg.2021.095
25. James, S.E., Herman, J.L., Durso, L.E., & Heng-Lehtinen, R. (2024). *Early Insights: A Report of the 2022 US Transgender Survey.* National Center for Transgender Equality, Washington, DC.

ABOUT PEPR_eC POLICY BRIEFS

This evidence-based policy brief is written by Partnered Evidence-based Policy Resource Center (PEPR_eC) staff to inform policymakers and Veterans Health Administration (VHA) managers about the evidence regarding important developments in the broader health system and economy. PEPR_eC is a Quality Enhancement Research Initiative-funded resource center that collaborates with operational partners to design and execute randomized evaluations of VHA initiatives, develops and refines performance metrics, and writes evidence-based policy briefs.

