



Resolution 1

Enhancing the Standard of Care for Pediatric Gender Distress Through Evidence-Based Holistic Support and Clinical Prudence

General Assembly – July 24, 2026 – Destin, FL

Louisiana Academy of Family Physicians 2026 General Assembly

RESOLUTION NO 1.

Enhancing the Standard of Care for Pediatric Gender Distress Through Evidence-Based Holistic Support and Clinical Prudence

Submitted by: James A Taylor, Jr., MD, FAAFP

1 **WHEREAS**, leading health authorities in Finland, Sweden, Denmark, and the United Kingdom
2 (2020-2023) have shifted toward psychosocial support as the primary response for youth gender
3 distress due to a lack of robust long-term evidence for medical transition ^[2, 3, 4]; and
4

5 **WHEREAS**, the Cass Review (April 2024) concluded that the evidence base for pediatric medical
6 transition is "remarkably weak," urging a shift toward holistic, mental-health-led care that
7 addresses neurodiversity and co-occurring conditions ^[5]; and
8

9 **WHEREAS**, internal discussions within major gender health organizations (2024) have
10 highlighted complexities regarding the cognitive maturity of minors to provide informed consent
11 for treatments with lifelong impacts ^[6]; and
12

13 **WHEREAS**, recent U.S. legal developments-including Federal Executive Order 14187, the
14 Supreme Court ruling in United States v. Skrmetti, and Chiles v. Salazar (2025-2026)-underscore
15 a shifting regulatory environment regarding pediatric medical interventions ^[7, 8, 13]; and
16

17 **WHEREAS**, a 2025 U.S. Department of Health and Human Services (HHS) report concluded that
18 evidence supporting puberty blockers and cross-sex hormones for minors is of "very low" quality
19 ^[9]; and
20

21 **WHEREAS**, the American Society of Plastic Surgeons (ASPS) updated its guidance in February
22 2026 to recommend delaying gender-related surgeries until at least age 19 to ensure patient
23 maturity ^[12]; and
24

25 **WHEREAS**, there is a growing clinical necessity to provide specialized medical and psychological
26 support for the increasing number of individuals seeking to detransition or discontinue gender-
27 related interventions; now, therefore, be it
28

29 **RESOLVED**, that the AAFP champion a developmentally informed, holistic approach-prioritizing
30 comprehensive mental health assessments and psychosocial support as the primary, evidence-
31 based intervention for minors presenting with gender distress; and be it further
32

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RESOLVED, that the AAFP support the clinical practice of reserving irreversible medical interventions-including puberty blockers, cross-sex hormones, and surgical procedures-for individuals who have reached the age of legal medical consent (18+); and be it further

RESOLVED, that the AAFP update its LGBTQ+ clinical resource pages to include a Diverse Support Framework that provides evidence-based information for transition, desistance, and detransition.

(Received 6/23/26)

Background:

This resolution requests that the American Academy of Family Physicians (AAFP) prioritize comprehensive psychosocial support as the foundational care pathway for pediatric gender distress. By aligning with evolving international clinical shifts and the current U.S. legal landscape, this proposal advocates for prioritizing non-permanent interventions for minors to ensure longitudinal safety and developmental maturity before lifelong medical decisions are made.

[LGBTQ+ care: Clinical guidance for family physicians Resource Page](#)

References and Supporting Documentation

- (1) COPE (Finland). (2020). Medical Treatment Methods for Variation in Gender Identity in Minors. Socialstyrelsen (Sweden). (2022). Care of Children and Adolescents with Gender Dysphoria.
- (2) Danish Health Authority. (2023). Updated Clinical Guidelines for Youth Gender Care. NHS England. (2023). Interim Service Specification: Specialist Service for Children and Young People with Gender Dysphoria.
- (3) Cass, H. (2024). The Cass Review: Final Report on Independent Review of Gender Identity Services for Children and Young People.
- (4) Internal Clinical Archives. (2024). Informed Consent and Cognitive Maturity in Adolescent Medicine.
- (5) Federal Executive Order 14187. (2025). Elimination of Federal Support for Pediatric Gender Procedures.
- (6) United States v. Skrmetti, 602 U.S. ____ (2025).
- (7) U.S. Dept. of Health and Human Services. (Nov 2025). Systematic Review of Evidence for Pediatric Gender Interventions. Missouri v. L.A. (Jan 2026). Missouri Supreme Court SAFE Act Ruling. Varian v. Einhorn et al. (Jan 2026). Verdict on Standard of Care for Minor Mastectomy. American Society of Plastic Surgeons (ASPS). (Feb 2026). Updated Guidance on Gender-Related Surgery. Chiles v. Salazar, 604 U.S. ____ (2026).

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- 55 **Current AAFP Policy**
- 56 [Adolescent Health Care, Confidentiality](#)
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- 58 [Adolescent Health Care: Sexuality and Contraception](#)
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- 60 [Advancing Health Equity by Addressing the Social Determinants of Health in Family 37](#)
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