

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 011  
(A-15)

Introduced by: Gay and Lesbian Medical Association  
American Psychiatric Association  
American Academy of Child and Adolescent Psychiatry  
American Academy of Psychiatry and the Law  
American Academy of Neurology  
Massachusetts

Subject: Military Medical Policies Affecting Transgender Individuals

Referred to: Reference Committee on Amendments to Constitution and Bylaws  
(Nancy L. Mueller, MD, Chair)

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1 Whereas, An estimated 15,500 transgender personnel serve currently in the Active, Guard and  
2 Reserve components of the US military;<sup>1</sup> and  
3  
4 Whereas, Military medical regulations bar transgender individuals from enlisting in the military;<sup>2</sup>  
5 require them to be discharged if discovered during military service;<sup>3</sup> and prohibit doctors from  
6 providing medically necessary treatment for gender dysphoria;<sup>4</sup> and  
7  
8 Whereas, A Commission including a former US Surgeon General and retired General and Flag  
9 Officers determined that there is no sound medical rationale for excluding transgender  
10 individuals from military service,<sup>5</sup> and a Commission co-chaired by a former acting US Army  
11 Surgeon General determined that providing transgender personnel with medically necessary  
12 health care would not be excessively burdensome;<sup>6</sup> and  
13  
14 Whereas, Military medical regulations governing non-transgender-related conditions are  
15 updated regularly based on current scientific consensus and best practices,<sup>7</sup> but the same  
16 regulations are out of date with respect to medical consensus about gender identity;<sup>8</sup> and  
17  
18 Whereas, Military medical regulations governing non-transgender-related conditions strike a  
19 balance in retaining service members whose medical conditions do not significantly impair  
20 fitness for duty,<sup>9</sup> but medical rules that apply to transgender personnel require their exclusion  
21 regardless of fitness for duty or need for medical care; and  
22  
23 Whereas, Military medical regulations governing non-transgender-related conditions are  
24 designed to maintain and restore health,<sup>10</sup> but rules that apply to transgender personnel prohibit  
25 military doctors from mitigating distress, despite the availability of treatments for gender  
26 dysphoria that are safe, effective, and medically necessary;<sup>11</sup> therefore be it  
27  
28 RESOLVED, That our American Medical Association affirm that there is no medically valid  
29 reason to exclude transgender individuals from service in the US military (New HOD Policy);  
30 and be it further

- 1 RESOLVED, That our AMA affirm transgender service members be provided care as
- 2 determined by patient and physician according to the same medical standards that apply to
- 3 non-transgender personnel. (New HOD Policy)

Fiscal Note: Minimal - less than \$1,000.

Received: 04/29/15

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<sup>1</sup> Gary Gates and Jody Herman, *Transgender Military Service in the United States* (Los Angeles, CA: Williams Institute, 2014), <http://williamsinstitute.law.ucla.edu/wp-content/uploads/Transgender-Military-Service-May-2014.pdf>.

<sup>2</sup> Department of Defense Instruction (DODI) 6130.03, *Medical Standards for Appointment, Enlistment, or Induction in the Military Services*, April 28, 2010, Incorporating Change 1, September 13, 2011, Enclosure 4, §§ 14(f), 15(r), 29(r).

<sup>3</sup> Army Regulation 40-501, *Standards of Medical Fitness*, December 14, 2007, Revised August 4, 2011, § 3-35(a), (b); SECNAV Instruction 1850.4E, Department of the Navy Disability Evaluation Manual, April 30, 2002, Enclosure 8, Attachment (b), § 3(i)(7); NAVMED P-117, *U.S. Navy Manual of the Medical Department*, January 10, 2005, Chapter 18, § 18-5(3); Air Force Medical Standards Directory, October 6, 2014, § Q35.

<sup>4</sup> TRICARE Policy Manual 6010.57-M (2008), Chapter 1, § 1.2, ¶ 1.1.29.

<sup>5</sup> Joycelyn Elders, George R. Brown, Eli Coleman, Thomas A. Kolditz, and Alan M. Steinman (2014). Medical Aspects of Transgender Military Service, *Armed Forces & Society*, 1-22. Advance online publication. doi: 10.1177/0095327X14545625.

<sup>6</sup> Gail S. Pollock, Shannon Minter, Clara Adams-Ender, Kylar W. Broadus, Thomas A. Kolditz, Lory Manning, Diane H. Mazur, Paula M. Neira, and Tammy S. Schultz (2014), *Report of the Planning Commission on Transgender Military Service*, San Francisco, CA, Palm Center.

<sup>7</sup> See, for example, Department of Defense Instruction 1332.14, *Enlisted Administrative Separations*, January 27, 2014, Incorporating Change 1, December 4, 2014, Enclosure 1, ¶ (j) and Enclosure 3, ¶ 3(a)(8)(c)(1) (listing the "current edition" of the *Diagnostic and Statistical Manual of Mental Disorders* as controlling authority).

<sup>8</sup> Diane H. Mazur, (2014), *Arbitrary and Capricious: Six Inconsistencies Distinguishing Military Medical Policies for Transgender and Non-Transgender Personnel*, San Francisco, CA, Palm Center.

<sup>9</sup> Department of Defense Instruction 1332.18, *Disability Evaluation System (DES)*, August 5, 2014, Appendix 2 to Enclosure 3.

<sup>10</sup> See, for example, Army Regulation 40-1, *Composition, Mission, and Functions of the Army Medical Department*, July 1, 1983, § 1-5 (b), (c) ("The mission of the AMEDD [Army Medical Department] is to maintain the health of members of the Army.") ("Accomplishment of this mission requires . . . application of effective means of preventative and curative health services.")

<sup>11</sup> Coleman, Eli, et al. "Standards of care for the health of transsexual, transgender, and gender-nonconforming people, version 7." *International Journal of Transgenderism* 13.4 (2012): 170-171.

## RELEVANT AMA POLICY

### H-185.950 Removing Financial Barriers to Care for Transgender Patients

Our AMA supports public and private health insurance coverage for treatment of gender identity disorder as recommended by the patient's physician. (Res. 122; A-08)

### D-510.996 Military Care in the Public and Private Sector

Our AMA will use its influence to expedite quality medical care, including mental health care, for all military personnel and their families by developing a national initiative and strategies to utilize civilian health care resources to complement the federal health care systems. (Res. 444, A-07)

### D-510.994 Health Care for Veterans and Their Families

Our AMA will : (1) work with all appropriate medical societies, the AMA National Advisory Council on Violence and Abuse, and government entities to assist with the implementation of all recommendations put forth by the President's Commission on Care for America's Wounded Warriors; and (2) advocate for improved access to medical care in the civilian sector for returning military personnel when their needs are not being met by resources locally available through the Department of Defense or the Veterans Administration. (BOT Rep. 6, A-08)

### H-65.965 Support of Human Rights and Freedom

Our AMA: (1) continues to support the dignity of the individual, human rights and the sanctity of human life, (2) reaffirms its long-standing policy that there is no basis for the denial to any human being of equal rights, privileges, and responsibilities commensurate with his or her individual capabilities and ethical character because of an individual's sex, sexual orientation, gender, gender identity, or transgender status, race, religion, disability, ethnic origin, national origin, or age; (3) opposes any discrimination based on an individual's sex, sexual orientation, gender identity, race, religion, disability, ethnic origin, national origin or age and any other such reprehensible policies; (4) recognizes that hate crimes pose a significant threat to the public health and social welfare of the citizens of the United States, urges expedient passage of appropriate hate crimes prevention legislation in accordance with our AMA's policy through letters to members of Congress; and registers support for hate crimes prevention legislation, via letter, to the President of the United States. (CCB/CLRPD Rep. 3, A-14)

### H-65.972 Repeal of "Don't Ask, Don't Tell"

Our American Medical Association will advocate for repeal of "Don't Ask, Don't Tell," the common term for the policy regarding gay and lesbian individuals serving openly in the U.S. military as mandated by federal law Pub.L. 103-160 and codified at 10 U.S.C. § 654, the title of which is "Policy concerning homosexuality in the armed forces." (Sub. Res. 917, I-09; BOT Action in response to referred for decision Res. 918, I-09: Reaffirmed in lieu of Res. 918, I-09)