

Factsheet 16

Trans issues and later life

July 2024

About this factsheet

This factsheet provides information about later life for trans people. It is intended to provide information and advice and does not offer any opinions or views on the subject matter. The focus is on growing older for

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1 Who is trans?

Trans people are people whose gender identity differs from or does not match or sit comfortably with their biological sex. Trans is an umbrella term that embraces many different gender identities. Trans people may describe themselves using one or more of a wide variety of terms including, but not limited to transgender, transsexual, gender queer, gender non-conforming and gender variant.

A trans person may or may not become fully bodily reassigned in their acquired gender. They may or may not receive hormone therapy, have gender related surgery, or obtain legal recognition of their change of gender.

This factsheet focuses on trans people living permanently in their acquired gender and those who are seeking to do so. Acquired gender is a legal term used in the *Gender Recognition Act 2004*. It refers to the gender which a person is living in and seeking legal recognition of.

There may be some specific considerations, for example in employment, with family and friends, government bodies, and health and care providers. Gender reassignment means you are protected by law under the *Equality Act 2010* against discrimination, harassment, and victimisation.

Note

Affirmed gender describes a person whose gender identity has been affirmed. We use the term *acquired gender* to align with language used in the *Gender Recognition Act 2004*.

Gender identity- your internal sense of being male or female, both or neither.

Gender reassignment-describes the process a trans person undertakes to transition socially and/or medically to live in their acquired gender.

2 Trans and other identities

Many trans people report identifying as a member of the opposite sex from an early age. At some time in their life, many seek professional advice, perhaps after long periods of cross-dressing publicly or privately. This may be influenced by their personal and social circumstances, family support, and degree of motivation.

The medical term for discomfort or distress caused by a mismatch between gender identity and biological sex is *gender dysphoria*. Some trans people and organisations prefer the terms *gender incongruence* or *gender variance*.

Transition

If you identify as trans, you may wish to consider if and how you want to transition. Transition is not a standard or pre-determined process. People approach it in different ways depending on their individual circumstances, needs and preferences.

Do you wish to have hormone therapy, surgery, or legal recognition of your gender reassignment? None are a requirement for transition, though many people proceed to pursue some, if not all, of the above.

The term trans man is used to describe a person whose biological sex is female but who identifies and lives as a male. They may refer to themselves as a man with a trans history. Similarly, a person whose biological sex is male but who identifies as a female may refer to themselves as a trans woman or a woman with a trans history.

You may also see the abbreviations FtM (female to male) and MtF (male to female), but these can be questionable as for example, a trans woman may never have identified as male in the first place.

It is important to recognise that having taken steps to live a life that aligns with their gender identity, people may not identify as trans.

2.2 People who identify as non-binary

Non-binary describes gender identities that are not exclusively masculine
gender binary

It may mean you feel you have no gender.

You may come across other terms such as gender variance or gender fluid to

Developing a treatment plan

If the assessment suggests you have gender dysphoria, GDC staff work with you to agree

4.1.1 The trans man's transition

A trans man may undergo masculinising hormone therapy by taking the hormone testosterone. Masculinising hormone therapy can be done alone or along with masculinising surgery.

When taking masculinising hormones, physical and emotional changes you may experience include:

Health screening

Knowledge is improving as people age. There are still unanswered questions about what later life and health are like for the generation of trans people in their 60s and over who have taken hormone therapy for 40 years or more. Many are living with gender reassignment surgeries performed using different techniques of the 1960s and 70s.

7 Your rights

7.1 The Gender Recognition Act: the basics

The Gender Recognition Act 2004 (GRA), introduced in April 2005, is the framework that gives legal recognition to a trans person's acquired gender and recognises a trans person as someone who lives permanently in their acquired gender and intends to do so for the rest of their life.

Whilst most applicants must provide evidence of a diagnosis of gender dysphoria, there is no requirement to undergo hormone therapy or gender reassignment surgery.

What gender recognition means

The GRA enables trans people

8 Hate crime

Trans men

Do I still look feminine when undressed?

Do I still have breasts?

Direct payments for care at home

If eligible for financial help from a local authority, you have the option to receive it as a direct payment. This means you arrange services yourself, or with support from a third party. You can choose to recruit a personal assistant, who can respond to your individual needs and preferences and offer continuity of care at home.

In **England** see Age UK factsheet 24, *Personal budgets and direct payments in social care*. In **Wales** see Age Cymru factsheet 24w, *Direct payments for social care services in Wales*.

10.2 Sheltered housing and residential care

If you have eligible needs that can be best met by sheltered housing or in a care home, you (and your carer if you have one) should identify possible locations and visit all establishments you are considering.

NHS services

The LGBT Foundation offers a quality assurance scheme to help GP

12 Wills and intestacy

Making a will

You should write a will to ensure your property and assets go to those people you want to have them. Make sure you are fully and clearly identified in your will – this is especially important if you use two names or have only recently begun to live permanently in your acquired gender.

For information, see Age UK information guide *Wills and estate planning* and factsheet 7, *Making a Will*.

Being the beneficiary of a will

To ensure you can benefit from a will, keep evidence of your past identity, including your biological sex. Your GRC provides the link but if you do not have one, keep any legal paperwork associated with your change of name.

13 Bereavement and registration of death

Most deaths are registered by a relative of the deceased or someone present at the death if no relatives are available.

If you have a GRC, your acquired gender must be used when registering your death. If living permanently in your acquired gender but you did not have a GRC, it is permissible to register your death in your acquired gender, as long as your passport and medical card support this (a birth certificate is not a legal requirement to register a death).

Problems can arise, in the case of a trans person, when stating the sex of the deceased. Relatives sometimes register the death in their biological sex, no matter how long they lived in their acquired gender.

If an error is made registering a death, the law allows for details to be changed or added. Approach the office where the death was registered, although paperwork needs to be sent for authorisation to the Corrections and Re-registration Section at the General Register Office.

Note

If you are not the person who registered the death, you should contact the General Register Office with any uncertainties. If you were not responsible but are concerned someone else registered their gender identity incorrectly, contact the General Register Office.

Pansexual: term used to describe someone who is attracted to individuals of any sex or gender identity.

Penectomy: surgical removal of penile tissue.

Phalloplasty: surgical procedure to construct a penis.

Scrotoplasty: surgical procedure that creates a scrotum for testicular implants.

Trans or transgender: umbrella terms that embrace the many different identities of people whose gender identity differs from their biological sex.

Trans*: an asterisk is sometimes added as a way of including all trans, non-binary and gender nonconforming identities.

Transsexual: used largely in medical or legal circumstances to describe someone who proposes to undergo or has undergone gender reassignment.

Transition: the process of social and/or medical changes a person may take to live in their gender identity. This may include hormone therapy, surgery, social and legal changes.

Transvestite: a person who enjoys

Financial Conduct Authority

www.fca.org.uk

Telephone

LGBT+ Cymru Helpline

www.lgbtcymru.org.uk

Telephone 0800 917 9996

Provides information, advice and confidential support on various issues that affect LGBTQ+ people, their families and friends.

Llais

www.llaiswales.org

Telephone 029 20 235558

A body that represents the voices and opinions of people in Wales in regard to health and social care services. Can provide complaints advocacy service.

Local Government and Social Care Ombudsman

www.lgo.org.uk

Telephone helpline 0300 061 0614

Investigates complaints about local authorities and social care providers.

NHS Gender Dysphoria National Referral Support Service (GDNRSS)

Support line 01522 857799

The GDNRSS Coordinates access to gender reassignment surgery for men and women.

NHS 111 Wales

www.111.wales.nhs.uk/

Telephone helpline 111

Service offering a telephone helpline and web information on finding local health services in Wales and on a wide range of health conditions.

NHS website

www.nhs.uk

A comprehensive web information service to help you learn more about a wide range of health conditions, find NHS services in England, improve and make choices about your health and manage long term cond m (n)-3(g)-3()8(te)-5(rm)6f nhs.uk/

Our publications are available in large print and audio formats

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The evidence sources used to create this factsheet are available on request. Contact resources@ageuk.org.uk

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