

U.S. Preventive Services Task Force Publishes Article Addressing Sex and Gender in Primary Care Prevention

Task Force outlines commitment to promote health equity for people of all genders

WASHINGTON, D.C. – October 25, 2021 – The U.S. Preventive Services Task Force (Task Force) today published an article titled, “USPSTF Approach to Addressing Sex and Gender When Making Recommendations for Clinical Preventive Services,” in the *Journal of the American Medical Association (JAMA)*. This publication reflects the latest step in the Task Force’s long-standing commitment to supporting the health of diverse populations.

“Clinicians nationwide are caring for people across the spectrum of gender diversity, and we want to help ensure that they have the best possible information to keep people healthy,” says Task Force member Aaron Caughey, M.D., M.P.P., M.P.H., Ph.D. “Unfortunately, research studies of clinical preventive services often do not fully consider biological sex and gender identity, leaving the Task Force without the data necessary to offer more nuanced recommendations. We are calling for all clinical research to adopt a more inclusive approach to considering and reporting the sex and gender of study participants.”

Fundamentally, the Task Force issues recommendations based on what the available evidence shows, so more detailed data is required for the Task Force to address sex and gender in a more nuanced and comprehensive way.

“While better data is essential, we are also committed to updating our own processes now so that we can better support the health of people of all genders,” says Task Force member Michael Barry, M.D. “This includes using gender-neutral language when appropriate, and clearly stating whether each given recommendation should be applied based on someone’s sex at birth, current anatomy, or gender identity.”

The *JAMA* article provides an overview of the Task Force’s pilot-tested approach to strengthening the way it communicates about sex and gender in recommendation statements, helping ensure the specificity and inclusivity of Task Force recommendations at every step of our process. For example, Task Force research plans will now consider whether the preventive service is expected to be applied according to biological or physiological sex characteristics, gender identity, or potentially both. In addition, when assessing the evidence, the Task Force will consider how applicable it is to transgender, gender nonbinary, gender diverse, and intersex people.

As part of its ongoing work, the Task Force will also continue to engage stakeholders with specific expertise in representing these populations so that it can gain insightful perspective to apply to its methods and processes. Collectively, these changes are meant to help promote health equity for all people, regardless of their sex or gender.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Caughey is a professor in and chair of the Department of Obstetrics and Gynecology and the associate dean for Women’s Health Research and Policy at Oregon Health & Science University. He is the founder and chair of the Oregon Perinatal Collaborative, funded by the Centers for Disease Control and Prevention, which aims to improve

outcomes for pregnant people and infants through guidelines and policies, working with all the health systems in the state.

Dr. Barry is director of the Informed Medical Decisions Program in the Health Decision Sciences Center at Massachusetts General Hospital. He is also a professor of medicine at Harvard Medical School and a clinician at Massachusetts General Hospital.

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