

Chairs/Steering Group

Seen in Health Network

[seeninhealth@outlook.com](mailto:seeninhealth@outlook.com)

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**Right Hon Wes Streeting - Secretary of State for Health and Social Care**

Dear Secretary of State

We are writing on behalf of SEEN in Health (Sex Equality and Equity Network) to raise our concerns about the impact of imposing purportedly 'inclusive' language within radiology departments by the Society of Radiographers (SoR).

You will be aware of recent media coverage of the SoR's '[Inclusive Pregnancy Status Guidelines](#)' – for ease of reference, we have linked to a selection of these at the end of this letter. For the most part, these accurately represent the experiences of our members within this speciality.

### **Background**

Ionising radiation (medical exposure) regulations IR(ME)R is a framework of regulations that aim to ensure ionising radiation is used safely to protect patients from the risk of harm. IR(ME)R is enacted by you as Secretary of State for Health and Social Care and enforced by the CQC.

The regulations set out the responsibilities of duty holders (the employer, referrer, IR(ME)R practitioner and operator) for radiation protection, and the basic safety standards that duty holders must meet. As part of radiation protection duties, additional considerations to unborn fetuses and breastfeeding females must be considered as ionising radiation can be particularly harmful in both circumstances.

In 2017 IR(ME)R was updated. The significant change was the removal of the word 'female', which was replaced with 'individuals with breastfeeding/pregnancy potential'. The reasoning was that patients may present as male but be biologically female and therefore have pregnancy potential. Rather than include the word 'individual' in addition to 'female', however, the word 'female' was removed completely.

In response to the change of wording in IR(ME)R, in December 2021, the College of Radiographers (CoR), the educational arm of the SoR, published its '[Inclusive Pregnancy Status Guidelines](#)' and a [pregnancy checklist](#) to be used with all patients of a reproductive age as a way of amending practice to remain IR(ME)R compliant.

Within the entire 52-page guidelines document, the word ‘woman’ or ‘female’ is not used once, and none of the poorly constructed evidence base contains any women’s healthcare outcomes or perspectives. It is a pregnancy checking policy, which has not considered or even acknowledged women.

### **Our position**

All patients are deserving of representation within policy, and the inclusion or ‘representation’ of one group should not be at the expense of another group. Shamefully, this is what has ensued with the regulations removing the term ‘female’. It has been at the expense of the vast majority of women who do not identify as trans or non-binary or believe in the concept of gender identity.

We reject the position that the removal of the term ‘female’ in IR(ME)R 2017 is in any way ‘inclusive’. We acknowledge a gender diverse population might increase the risk of an unintended foetal/breastfeeding exposure; however, only sexed females have pregnancy and breastfeeding potential, therefore the at-risk group has not and cannot be changed. The ‘at-risk’ group remains the same: females.

Within our network, we have members who have extensive experience of using the SCoR pregnancy checklist within their radiology departments. They report regular occurrences of women becoming upset by the clinical and intrusive nature of the questions, as well as a range of other issues when using the form with men, patients for whom English is not their first language or who have learning needs or poor literacy, and even some patients who identify as trans.

The form is simply not fit for purpose and the guidelines from which it derives are ideological, misguided and not evidence based. In the face of critical media coverage, the [SoR has doubled down, refusing to acknowledge the genuine concerns held by staff](#).

***Please see the additional attachment of our response to the SoR statement.***

We urge you, as Secretary of State for Health, to ensure that women are once again represented in language in IR(ME)R regulations.

Policies and guidelines, that are of material significance to women and girls, such as a pregnancy enquiry policy, must always include the voices of women who are patients, and groups who truly advocate for their specific needs. Anything less fails women and is exclusionary of women’s needs and rights.

Inclusivity should mean the addition of terms if necessary, resulting in a balanced, proportionate, and accurate representation of the group(s) to be identified. The word ‘female’ is a universally understood biological and medically accurate term that unambiguously identifies the ‘at-risk’ group and should not be removed or obfuscated to satisfy the demands of ideologically driven campaign groups.

As a network we are in the process of raising these concerns with the Women's Health Ambassador. A meeting had been re-arranged after a delay due to the general election. Our members are due to discuss this with the WHA and other DoH officials in October and we have made her office aware that we are contacting you regarding this specific issue.

Our members have also contacted the Head of Medical Exposures, Una Findlay (UKHSA), with little response. Unfortunately, there appears to be an unwillingness to acknowledge the consequences of the IR(ME)R 2017 update and engage with any discussion around this topic.

This is a recurring theme with regards to anything related to gender and inclusivity in healthcare: we find ourselves required to deliver services based on policies on which we were not consulted and which we cannot question. We're sure you would agree this is not an environment where a culture of safety thrives.

We ask that we can continue to engage to work towards a truly inclusive framework, which proportionately and fairly reflects females where specific considerations are of material significance to them, in line with the Women's Health Strategy.

We would be happy to meet you or your advisers to discuss the issue raised in this letter, as well as wider issues regarding sex equality and equity within the NHS.

Yours sincerely

SEEN in health Steering Group

### **Media articles**

[NHS guidance for staff tells them to ask MEN whether they are PREGNANT ahead of X-ray procedures | Daily Mail Online](#)

[NHS staff told to ask men if they are pregnant before X-rays \(msn.com\)](#)

[NHS tells staff to ask men if they're pregnant before X-rays as part of 'inclusivity' drive \(msn.com\)](#)

[Asking men if they are pregnant before undergoing X-rays is a symptom of the madness gripping the NHS, writes PROFESSOR ANGUS DALGLEISH | Daily Mail Online](#)

