**Fact sheet 2: Consent** (*Recommendation 3*)

As a general principle, a person must give informed consent before medical treatment can be carried out lawfully on them. This reflects a person’s rights of autonomy over their body.

Under international human rights law, a medical intervention may take place without the person’s personal consent only where this is a medical necessity (see Fact sheet 3: Medical necessity).

A range of practical problems regarding obtaining consent to medical interventions modifying the sex characteristics of people born with variations have been raised, especially in relation children and young people.

These problems may include:

* the inadequate provision of information to children, young people and their families about the nature and need for interventions
* exclusion of children from decision making, and failure to defer non-urgent interventions
* inadequate time for decision making, and pressure to consent
* absence of referrals to peer support
* lack of standardised procedures and materials.

The Commission recommends the development of new National Guidelines (see Fact sheet 4: Clinical practice) setting out what is required to obtain informed consent before performing a medical intervention for a person born with variations in sex characteristics. These National Guidelines should help ensure that:

* medical interventions are proposed only when medically necessary
* consent in all cases is fully informed, and
* children and younger people are empowered to participate in decision making in a manner consistent with their evolving capacities.