

"Gender-focused mental health services in Singapore: A brief history and future direction": Correspondence

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Dear Editor,

The authors read with interest the recent Letter to the Editor by Puthran et al.¹ on gender-focused mental health services in Singapore published in the *Annals*.

We wish to provide context regarding the absorption of the Gender Care Clinic into general psychiatric services at the Institute of Mental Health, and to reflect on the broader service transformation considerations in mental healthcare in Singapore.

The decision was not a withdrawal of care, but a recalibration of service delivery within a small resource-constrained healthcare system. In Singapore, where subspecialty manpower remains limited, proliferation of highly siloed clinics risks fragmentation, duplication of effort and inequitable access.² Super-specialisation may inadvertently concentrate expertise while reducing overall system responsiveness, particularly when demand rises across multiple domains of mental health.

A transdiagnostic, integrated model better reflects contemporary psychiatric practice.³ Many individuals presenting with gender-related concerns also experience co-occurring mood, anxiety, trauma-related or neurodevelopmental conditions. Managing these within a general clinic framework allows holistic assessment, continuity of care and alignment with stepped care principles.⁴ Complex cases can still be supported through multidisciplinary consultation, without segregating care pathways in ways that may increase stigma or delay.

Care transformation in small countries requires balancing depth with scalability. Rather than multiplying subspecialty silos, building system-wide competence through training, shared protocols and

collaborative networks may yield more sustainable gains. This approach strengthens the overall psychiatric ecosystem while ensuring that gender-diverse individuals receive competent, respectful and coordinated care within mainstream services.

The future of gender-focused care in Singapore should therefore focus on capability building, integration and national alignment, rather than structural compartmentalisation. Such a strategy promotes equity, resilience and long-term sustainability in the evolving mental health landscape.

Ethics statement

Not applicable, as no study participants were recruited.

Declaration

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