

WORLD TRIATHLON GENDER ELIGIBILITY GUIDELINES

The *World Triathlon (TRI) Gender Eligibility Guidelines* and accompanying [TRI Eligibility Regulations for Transgender Athletes](#) aim to facilitate the participation of transgender athletes at international events recognised by TRI (International Events) in the category of competition that is consistent with their gender identity. For the avoidance of doubt, the TRI Gender Eligibility Guidelines apply to individuals whose gender identity (i.e. how they identify) is different from the sex assigned to them at birth. The TRI Gender Eligibility Guidelines do not address the eligibility of athletes with differences of sex development (DSD), previously referred to as “intersex”.

The process of integrating transgender athletes into the sport is predicated on balancing inclusion, safety and fairness considerations. While all three principles are of great importance in TRI, overarching value is afforded to the principle of fairness given the physical characteristics of the sport.

TRI is inclusive and imposes only necessary and proportionate restrictions on eligibility, in order to ensure meaningful competition via a fair and proportionate distribution of advantage in triathlon competition.

- The *TRI Gender Eligibility Guidelines* and accompanying *TRI Eligibility Regulations for Transgender Athletes* have been developed following a lengthy process involving consultation with stakeholders; and consideration of current legal, medical and scientific developments, and internationally-recognised human rights standards and principles. This is set-out in our [Transgender Policy Process Document, here](#).
- The *TRI Gender Eligibility Guidelines* and the accompanying *TRI Eligibility Regulations for Transgender Athletes* represent the current approach to regulation in this area, respecting our commitment to the basic principles of procedural fairness and proportionality. These are “living documents” to be updated from time to time in order to take account of relevant medical and scientific developments in this area.
- Because there is an important physically driven performance gap between athletes Assigned Male at Birth (AMAB) and athletes Assigned Female At Birth (AFAB), sport is separated into Male and Female categories. The main justification is that AMAB athletes have physical advantages in strength, speed, and endurance over AFAB athletes and that a protected Female category, with objective entry criteria, is required.
- The inclusion of trans women within the Female category should be promoted with meaningful eligibility standards to reinforce our commitment to fairness, proportionality and meaningful competition when there is no intolerable unfairness. Trans women have the right to compete in sports, however cisgender women have the right to compete in a protected category.
- It is widely recognised that testosterone distributes bimodally among AMAB and AFAB populations, and is the primary known driver of the performance differences between AMAB athletes and AFAB athletes. The use of serum testosterone concentrations as a primary

biomarker to regulate the inclusion of athletes into Male and Female categories is imperfect but currently the most justified criteria, based on the available scientific literature.

- Trans women and trans men athletes must be fully informed by medical personnel about their individual treatment requirements and their consequences, and must undergo medically supervised intervention prior to being declared eligible for competition in Female and Male categories.
 - It is not necessary to require surgical changes as a pre-condition to participation in order to preserve fair competition and these may be inconsistent with developing legislation and notions of human rights.
1. TRI has issued the following guidelines to be taken into account when determining eligibility to compete in Male and Female competition:
 - 1.1 Those who **transition from AFAB to Male** (Transgender Male) are eligible to compete in the Male category under the following conditions:
 - (a) The athlete must provide a written and signed declaration that his gender identity is Male and he wishes to participate in the male category of competition.
 - (b) Athletes are eligible to compete in the Male category without restriction (although athletes subject to doping control must still comply with applicable anti-doping rules, including any requirement to obtain a [Therapeutic Use Exemption \(TUE\)](#) for the use of a substance on the [WADA Prohibited List](#), such as testosterone ([WADA TUE Physician Guidelines for Transgender Athletes](#))).
 - 1.2 Those who **transition from AMAB to Female** (Transgender Female) are eligible to compete in the Female category under the following conditions:
 - (a) The athlete must provide a written and signed declaration that her gender identity is Female and she wishes to participate in the female category of competition.
 - (b) The athlete must demonstrate that the concentration of testosterone in her serum has been less than 2.5 nmol/L continuously for a period of at least 24 months, considering this a sufficient length of time to minimize any advantage in women's competition. The athlete should send the relevant medical certificates as specified in the *TRI Eligibility Regulations for Transgender Athletes* to the Medical Manager(s) of World Triathlon, who will review the information and provide the authorisation to enter any competition if the requirement is fulfilled and after referring to the Medical Expert Panel for the assessment. The decision of the Medical Manager and the Medical Expert Panel would be appealable to the World Triathlon Tribunal.
 - (c) The athlete must provide a written and signed declaration that she has not competed within the last 4 years in the male category of an official competition in Triathlon or its related Multisport or one of our allied sports of swimming, cycling, athletics or cross-country skiing.

- (d) The athlete must keep her serum testosterone concentration below 2.5 nmol/L for so long as she continues to compete in the Female category of competition.
 - (e) Compliance with these conditions may be monitored by testing as set-out in paragraph 3. below. In the event of non-compliance, the athlete's eligibility for Female competition will be suspended until such time as she demonstrates that she has maintained her serum testosterone concentration below 2.5 nmol/L for a new continuous period of at least 24 months.
- 1.3 For these purposes, all measurements of serum testosterone levels must be conducted by means of liquid chromatography coupled with mass spectrometry.
 - 1.4 Once a transgender athlete has satisfied the relevant eligibility requirements and has started participating in international events in the category of competition consistent with his/her gender identity, he/she may not then switch back to participating in the other category in International Events unless and until (a) at least two years have passed since the last International Event in which he/she participated in the category of competition consistent with the athlete's gender identity and (b) he/she satisfies all of the conditions for eligibility to compete in the other category.
2. Women with Polycystic Ovary Syndrome (PCOS) are eligible to participate in Female category without any restriction.

With regard to Women with Differences in Sexual Development (DSD) the Medical Expert Panel will evaluate individuals on a case by case basis seeking a determination of gender. TRI will introduce the DSD eligibility criteria in the near future in consultation with the experts in this matter and with the other endurance IFs.

TRI have not yet developed any guidelines in relation to Non-Binary persons.

3. Guidance on Monitoring Serum Testosterone levels in Transgender Female Athletes for Eligibility Purpose
- 3.1 For eligibility purposes, under the Regulations World Triathlon may monitor an athlete's compliance with the Transgender Female Eligibility Conditions at any time, with or without notice, whether by random or targeted testing of the athlete's serum testosterone levels (and the athlete agrees to provide whereabouts information and blood samples for this purpose and also agrees that any samples or whereabouts information that she provides for antidoping purposes and/or anti-doping data relating to her may also be used for this purpose) or by any other appropriate means.
 - 3.2 Monitoring programmes will necessarily be highly individualised and specific to the circumstances of the particular case and should be established with the support of an endocrinologist/gynaecologist.
 - 3.3 The frequency of unannounced or announced serum testosterone measurement of athletes will be informed by the mode of testosterone suppression chosen by the Transgender Female:

- Using daily estrogen medications (oral, transdermal) that have short-term testosterone suppressive effects may require unannounced testing from time to time (every month or every two months at the beginning and less in the following years if the athlete has shown regular compliance),
- Using daily oral spironolactone or cyproterone acetate in the form of oral daily capsules will also need to be monitored closely (every month or every two months)
- Using depot estradiol implants require less surveillance due to their longer duration of action.
- Using depot gonadotropin-releasing hormone (GnRH) agonists administered every 1-3 months will have less frequent testing (two/three times per year at the beginning).
- A trans female who underwent bilateral orchiectomy may require only a limited amount of serum testosterone monitoring.

4. Guidance on the Method for Measuring Serum Testosterone levels for Eligibility Purpose

- 4.1 For purposes of the Regulations, all measurements of serum testosterone levels must be conducted by means of liquid chromatography coupled with mass spectrometry (e.g. LC-MS/MS or LC-HRMS), which provides much better specificity than traditional immunoassay methods.
- 4.2 Serum samples should be collected using standardised sample collection procedures (for example, those used for anti-doping purposes).
- 4.3 It is recommended that samples are collected in the morning (as testosterone concentration in serum decreases during the day).
- 4.4 Note that the level of testosterone circulating in ciswomen for the 95% confidence interval is 0.12nmol/l to 1.79 nmol/L. Considering that the 99,99% confidence interval the highest value of serum testosterone is 2.44 nmol/L, the maximum serum testosterone concentration allowable is set at 2.5 nmol/L.

The decision limit also takes into consideration that, for clinical purposes, the Endocrine Society Clinical Practice Guideline for Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons recommends that trans women should have serum testosterone levels of less than 50 ng/dL (i.e. approximately 1.7 nmol/L)

The only prohibited substance administered to trans women athletes for therapeutic purposes is the antiandrogen and diuretic spironolactone. Athletes who apply for a TUE for spironolactone, which is in class S5 of the prohibited List, Diuretics and Masking Agents, will also have to apply for TUE for any threshold substances they might take simultaneously (e.g. salbutamol, salmeterol, methylephedrine, ephedrine) following WADA TUE Physician Guidelines Transgender Athletes.

5. Confidentiality

- 5.1 All cases arising under these Regulations, and in particular all athlete information provided to World Triathlon under these Regulations, and all results of examinations and assessments conducted under these Regulations, will be dealt with in strict confidence at all times. All medical information and data relating to an athlete will be treated as sensitive personal information and the Medical Manager(s) will ensure at all times that it is processed as such in accordance with applicable data protection and privacy laws. Such information will not be used for any purpose not contemplated in

these Regulations and will not be disclosed to any third party save (a) as is strictly necessary for the effective application and enforcement of these Regulations; or (b) as is required by law.

- 5.2 Each member of the Expert Panel must sign an appropriate conflict of interest declaration and confidentiality undertaking in relation to his/her work as a member of the panel.

6. The costs of any medical assessment, examination, treatment, monitoring, reporting, and any other costs involved in complying with the Regulations will be borne by the relevant athlete. The standing costs of the Expert Panel will be borne by World Triathlon.