

Recent Developments related to the DSM and ICD Revision Processes

STP, International Campaign Stop Trans Pathologization

Over the recent weeks, as coordination team of the International Campaign Stop Trans Pathologization, we received several questions about the DSM and ICD revision processes. In this Communiqué, we would like to clarify some doubts and express our demands. We have also added, at the end of the text, some comments on present and future perspectives on trans depathologization activism and on the International Campaign Stop Trans Pathologization.

1. DSM Revision Process

On December 1, 2012, the American Psychiatric Association Board of Trustees approved the final draft of the DSM-5¹. The press² mentioned some of the changes that DSM-5 will introduce. Currently, the final DSM-5 Draft is not accessible online, and the previous draft versions of the diagnostic categories have been removed from the DSM-5 website, in order to, as indicated on the website, “avoid confusion”³. Based on the information published on the DSM-5 website⁴, the DSM-5 is expected to be published in May 2013, at the annual encounter of the *American Psychiatric Association* in San Francisco.

As coordination team of the Campaign Stop Trans Pathologization, we would like to express our preoccupation and to clarify some misunderstandings with regards to the modifications.

¹ APA, American Psychiatric Association. American Psychiatric Association Board of Trustees Approves DSM-5. December 1, 2012.

<http://www.psych.org/File%20Library/Advocacy%20and%20Newsroom/Press%20Releases/2012%20Releases/12-43-DSM-5-BOT-Vote-News-Release--FINAL--3-.pdf> (retrieved: January 2013).

² See, among others: El País, Los transexuales ya no son enfermos mentales, December 5, 2012. http://sociedad.elpais.com/sociedad/2012/12/04/actualidad/1354628518_847308.html (retrieved: January 2013). The Guardian. Asperger’s syndrome dropped from psychiatrists’ manual the DSM, 2 December 2012. <http://www.guardian.co.uk/society/2012/dec/02/aspergers-syndrome-dropped-psychiatric-dsm> (retrieved: January 2013).

³ “Because the draft diagnostic criteria posted most recently on www.dsm5.org are undergoing revisions and are no longer current, the specific criteria text has been removed from the website to avoid confusion or use of outdated categories and definitions.” (APA, American Psychiatric Association. DSM-5 Development. <http://www.dsm5.org/Pages/Default.aspx>, retrieved: January 2013).

⁴ American Psychiatric Association. DSM-5 Development. Timeline. <http://www.dsm5.org/about/Pages/Timeline.aspx> (retrieved: January 2013).

Based on the information accessible in the press², the changes do not comprehend a complete removal of the trans-related categories, but a substitution of the category 'Gender Identity Disorders' by 'Gender Dysphoria'. This terminology change was already announced in the last draft version of the category, published in May 2011 (in the February 2010 version of the category, the term 'Gender Incongruence' was chosen). We do not know if any changes have been introduced between the last available draft version of the categories 'Gender Dysphoria' or 'Transvestic Disorder' and the final DSM-5 draft approved on December 1, 2012.

In 2010 and 2011, the STP coordination team sent two letters to the American Psychiatric Association^{5, 6} in which we detailed our evaluation of the draft versions of the categories 'Gender Incongruence'/'Gender Dysphoria' and 'Transvestic Disorder'. In these documents, we valued these changes as insufficient, repeating our demand of a complete removal of all trans-related categories from the DSM. Furthermore, we expressed our concern with the expanding pathologization of gender expressions through the category of 'Transvestic Disorder', by including the concepts of 'autoandrophilia' / 'autogynephilia'.

Given the recent news, our demands are:

- A complete removal of the categories 'Gender Dysphoria' and 'Transvestic Disorders' from the DSM-5. We consider that gender expressions, trajectories and identities should not be present in the *DSM, Diagnostic and Statistic Manual of Mental Disorders*.
- Online access to the final DSM-5 Draft, as soon as possible, in order to facilitate an in-depth evaluation of the modifications.

2. ICD Revision Process

In case of the *ICD, International Classification of Diseases and Other Health Problems* of the World Health Organization, the approval and publication of the next edition, ICD-11, is expected for May 2015, at the World Health Assembly⁷. The web application of the ICD-11-beta draft version is already accessible online⁸ - this is where the draft versions of the revised categories are being made available to the public. With regards to the categories related to gender transition processes, the assigned Working Group has not yet published a proposal.

⁵ STP-2012. Propuesta de petición a la *American Psychiatric Association*, April 10, 2010. http://www.stp2012.info/old/es/noticias#propuesta_10_abril (retrieved: January 2013).

⁶ STP-2012. STP 2012 Proposal to the American Psychiatric Association, July 15, 2011. http://www.stp2012.info/old/en/news#proposal_ap (retrieved: January 2013).

⁷ World Health Organisation. ICD-11 Revision Timelines. <http://www.who.int/classifications/icd/revision/timeline/en/index.html> (retrieved: December 2012).

⁸ World Health Organisation. ICD-11 Beta Draft. <http://apps.who.int/classifications/icd11/browse/f/en> (retrieved: January 2013).

In November 2011, STP participated in a meeting in The Hague, coordinated by *GATE, Global Action for Trans* Equality*, with other trans activists and experts from different world regions, as well as WHO representatives.

In the meeting there was an ample consensus with regards to the relevance of removing the blocks/categories F64, F65.1 and F66 from the Chapter V of the ICD⁹. At the same time, various options for the introduction of a new reference for trans-specific health care in the ICD-11 were discussed, with the goal of facilitating public coverage. A report of the discussion process, published by GATE, is accessible online¹⁰.

In different communiqués^{11, 12, 13}, the International Campaign Stop Trans Pathologization has demanded the removal of trans-related categories from the ICD Chapter V, and has proposed the introduction of a non-pathologizing reference of trans health care in the ICD-11, as a health process not based on illness or disorder.

In July 2012, we published a reflection text¹³ in which we detailed our proposal of a non-pathologizing reference of trans health care, including a revision of various proposals that are part of this discussion currently. Furthermore, we developed an argumentation framework based on a human rights perspective, with the objective of offering tools for facilitating state-funded coverage of trans health care from a depathologization perspective. The Argentinean Gender Identity Law, approved in June 2012, is mentioned as an important reference in this process.

The demand of removing trans-related categories from the ICD Chapter V and the proposal of introducing a non-pathologizing category have also been pronounced by other activist networks^{14, 15, 16}, as well as by the European Parliament¹⁷.

⁹ In the ICD-10, the specified blocks / categories refer to the following diagnostic categories, situated in the Chapter V: 'Mental and Behavioural Disorders': F64 'Gender Identity Disorders', F65.1. 'Fetishistic Transvestism', F 66 'Psychological and Behavioural Disorders associated with Sexual Development and Orientation'. See: <http://apps.who.int/classifications/icd10/browse/2010/en> (retrieved: January 2013).

¹⁰ GATE, Global Action for Trans* Equality. It's Time for Reform. Trans Health Issues in the International Classification of Diseases. A report on the GATE Expert Meeting, 2012. <http://globaltransaction.files.wordpress.com/2012/05/its-time-for-reform.pdf> (retrieved: January 2013).

¹¹ STP-2012. Press Release Action Day, October 17, 2009. http://www.stp2012.info/old/en/news#october_17_2009 (retrieved: January 2013).

¹² STP-2012. Reflections on Trans Depathologization and Health Rights, 2011. http://www.stp2012.info/STP2012_Communique_July2011.pdf (retrieved: January 2013).

¹³ STP-2012. Reflections on the ICD Revision Process from a Depathologization and Human Rights Perspective, 2012. http://www.stp2012.info/STP2012_Reflections_ICD.pdf (retrieved: January 2013).

¹⁴ TGEU/ILGA-Europe. Malta Declaration. 2009. <http://www.tgeu.org/MaltaDeclaration> (retrieved: January 2013).

¹⁵ TGEU, Transgender Europe. Campaign: Removal of GID from the Diagnostic Manuals. TGEU Call for Action / Support. <http://www.tgeu.org/node/73> (retrieved: January 2013).

¹⁶ ILGA-Europe. ILGA-Europe's statement on the occasion of the International Day for Depathologisation of Trans Identities (23 October), 2010. http://www.ilga-europe.org/home/news/latest_news/ilga_europe_s_statement_on_the_occasion_of_the_international_day_for_depathologisation_of_trans_identities_23_october (retrieved: January 2013).

We are currently awaiting the publication of the WHO Working Group's proposal, in order to discuss and develop an evaluation of the proposal.

In December 2012, Jack Drescher, Peggy Cohen-Kettenis and Sam Winter, members of the *Working Group on the Classification of Sexual Disorders and Sexual Health (WGSDSH)*, in charge of revising trans-related categories in the ICD, published an article in the *International Review of Psychiatry*¹⁸. In this article the authors contribute information regarding the revision process of trans-related categories, and they highlight the willingness of the Working Group to abandon the psychopathological model.

The ICD-11 Working Group on the Classification of Sexual Disorders and Sexual Health believes it is now appropriate to abandon the psychopathological model of transgender people based on 1940s conceptualizations of sexual deviance and to move towards a model that is (1) more reflective of current scientific evidence and best practices; (2) more responsive to the needs, experience, and human rights of this vulnerable population; and (3) more supportive of the provision of accessible and high-quality healthcare services.

(Drescher, Cohen-Kettenis, Winter 2012: 575)

Furthermore, they mention the Working Group's proposal of the term 'gender incongruence' for the new category, and they describe different options for the placement of it within the ICD-11 structure, yet outside of Chapter V. The article does not specify what the Working Group's final decision is regarding placement, contents or wording of the proposed category.

As STP coordination team, we hope that the declaration of intention regarding a model change will translate to a proposal based on depathologization and human rights. At the same time, we consider the term 'Gender Incongruence' inadequate for pathologizing both the moment previous to transition and the process of gender transition itself¹⁹.

We deem it necessary that the complete proposal of the Working Group be published as soon as possible, in order to be able to make an in-depth evaluation of the proposal regarding terminology, contents and placement.

As of the current moment, our demands directed to the WHO are:

- The complete removal of the blocks / categories F64, F65.1 and F66 from the ICD Chapter V.

¹⁷ European Parliament. Report on the situation of fundamental rights in the European Union (2010-2011), 2012. <http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//NONSGML+REPORT+A7-2012-0383+0+DOC+PDF+V0//EN> (retrieved: January 2013).

¹⁸ Drescher J, Cohen-Kettenis P, Winter S. Minding the body: Situating gender identity diagnoses in the ICD-11. *International Review of Psychiatry*, December 2012;24(6):568-577.

¹⁹ In the first draft version of the trans-related categories for DSM-5, the title 'Gender Incongruence' was also used (later changed to 'Gender Dysphoria'). In the letter directed to the APA which we published in 2010, we included a critique of the concept 'Gender Incongruence' (see: STP-2012. Propuesta de petición a la *American Psychiatric Association*, April 10, 2010.

http://www.stp2012.info/old/es/noticias#propuesta_10_abril, retrieved: January 2013).

- The inclusion of a non-pathologizing reference of trans health care, as a health process not based on illness or disorder.
- The publication of the proposal drafted by the *Working Group on the Classification of Sexual Disorders and Sexual Health (WGSDSH)* as soon as possible, in order to allow for a discussion process in the trans movement.
- The continued participation of the trans movement in the revision process, as well as transparency and accurate information regarding the different steps in the revision process.

3. Future Perspectives

To end, we would like to add some words regarding the current moment and future perspectives of trans depathologization activism, and of the International Campaign Stop Trans Pathologization.

In first place, we would like to express our acknowledgments to, and profound respect for, all the activists who have, from different world regions, contributed to this international mobilization for trans depathologization. Without your engagement, your confidence and your ideas, this Campaign never would have been possible.

When the first International Action Day for Trans Depathologization was launched, we chose the name STP 2012, International Campaign Stop Trans Pathologization, in reference to the expected DSM-5 publication year. Yet, afterwards, the American Psychiatric Association changed the publication date for the new DSM edition to 2013²⁰.

In recent months, we have been engaged in an internal reflection process about the future of the Campaign. While deeply appreciative of the increasing support towards depathologization perspectives, we observed the continuation of pathologization and stigmatization of trans persons in different world regions. In this sense, we see many future tasks for trans depathologization activism, in the health, legal and social arenas, and therefore considered the convenience of continuing the International Campaign Stop Trans Pathologization beyond the symbolic year of 2012.

In the present moment, with the ICD revision process still in process, we have decided to give continuity to international mobilization through the Call for Action of the International Campaign Stop Trans Pathologization. We encourage activist groups worldwide to continue participating in the work for trans depathologization, contributing context-specific reflections and proposals.

²⁰ APA, American Psychiatric Association. *DSM-5* Publication Date moved to May 13. Press Release December 10, 2009. <http://www.dsm5.org/Newsroom/Documents/09-65%20DSM%20Timeline.pdf> (retrieved: January 2013).



It is for this reason that we would like to announce our name change from STP 2012 to *STP, International Campaign Stop Trans Pathologization*, as well as an accompanying updated logo. We will maintain the same webpage (www.stp2012.info) and e-mail address (contact@stp2012.info).

Finally, we would like to inform you that the date for the next International Day of Action for Trans Depathologization will be on Saturday, October 19, 2013. As in previous years, we invite activist groups from different world regions to participate in the Call for Action.

**Coordination Team of STP, International Campaign Stop Trans Pathologization,
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