



GENDER IDENTITY DISORDER

What is Gender Identity Disorder?

The term “gender identity” refers to a person’s inner sense of self as male or female. For most people, their anatomical sex at birth corresponds to their gender identity. People with GID, however, experience a persistent and recurrent discordance between their anatomical birth sex and psychological gender.

How well-known is GID among mainstream medical professionals?

GID is a well known and established mental disorder, recognized under DSM-IV Section 302.85. (The Diagnostic Statistical Manual of Mental Disorders) DSM is the generally recognized authoritative handbook on the diagnosis of mental disorders relied upon by mental health professionals, and GID (then called transsexualism) was first included in the DSM in 1980.

Besides the DSM, what other medical authorities recognize GID?

Standard texts such as the American Medical Association Encyclopedia, the Merck Manual, the World Health Organization’s International Classification of Diseases all include Gender Identity Disorder. GID is discussed in standard psychiatric texts including Psychiatry, The Treatment of Psychiatric Disorders, Kaplan & Sadock’s Comprehensive Textbook of Psychiatry, and the New Oxford Textbook of Psychiatry.

How is it diagnosed? A mental health professional makes the diagnosis, using the four diagnostic criteria identified by medical texts. First, a person must have a strong and persistent cross-gender identification; second, the disturbance causes persistent, intense discomfort with one’s sex or sense of inappropriateness in the gender role of that sex; third, the person in question was not born with a physical intersex condition; and fourth, the disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

How many people have GID? There are currently no reliable estimates for the prevalence of GID in the United States. However, its occurrence is frequent enough that it has been identified, documented, and studied, and standards of care developed for its treatment.

How is GID treated? The medical treatment of a person diagnosed with GID is based on an individualized plan involving one or more of three major components: 1) hormones of the desired gender; 2) living full-time in the new gender, known as the “real life experience”; and 3) surgery to change the genitalia and other sex characteristics. Treatment plans are based on standards of care developed by the World Professional Association of Transgender Health (formerly the Harry Benjamin International Gender Dysphoria Association).

Why is the “real life experience” of living full time in the desired gender part of the treatment? The real-life experience allows a person to confront the tremendous personal and social consequences of crossing over to the desired gender. The experience helps identify any ambivalence about proceeding with transitioning. It also helps the person address issues of external appearance and learn how to present successfully in the new gender.

When is surgery recommended for someone with GID?

A patient must meet minimum criteria before getting surgery, demonstrating both eligibility and readiness. To be considered “eligible”, a person must receive 12 months of hormone therapy; have 12 months of real life experience; demonstrate awareness of surgery’s cost, length of hospitalization, possible complications, and required rehabilitation; engage a competent surgeon; and be of age. To be considered “ready”, a person must demonstrate progress in consolidating his or her gender identity, and demonstrate progress in dealing with any work, family, or interpersonal issues.