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June 22, 2009

Alan F. Schatzberg, M.D., President, American Psychiatric Association  
Carol A. Bernstein, M.D., President-elect, American Psychiatric Association  
American Psychiatric Association  
1000 Wilson Boulevard  
Suite 1825  
Arlington, VA 22209  
care/of: [apa@psych.org](mailto:apa@psych.org)

Dear Drs. Schatzberg and Bernstein:

I am a writer and consultant on gender diversity issues in medical and mental health policy, and I am asking the American Psychiatric Association to affirm human dignity and access to medical transition treatment for trans and gender variant individuals in public position statements.

To introduce myself, I am the author of *Gender Madness in American Psychiatry: Essays from the Struggle for Dignity* (2008) and the founder of GID Reform Advocates ([www.gidreform.org](http://www.gidreform.org)). I serve on advisory boards to the Matthew Shepard Foundation and TransYouth Family Allies, and I have presented papers to Annual Meetings of the American Psychiatric Association in 1998, 2003 and 2009. I am also a transsexual woman and can speak personally to the barriers to dignity, civil justice and medical care at issue in current APA policies and diagnostic nomenclature.

The APA has a long taken strong public positions in support of oppressed minority groups. For example, in 1973 the American Psychiatric Association issued a historic position statement on "Homosexuality and Civil Rights" that had a profound impact on public opinion and defamatory stereotypes. Unfortunately, the APA has never issued a similar statement in support of trans and gender variant people, even though APA policies and DSM nomenclature have contributed to analogous barriers and stereotypes that trans and gender variant people face.

I am asking for your personal support in drafting APA position statements to clarify that gender difference is not disorder, to affirm the medical necessity of transition care, and to urge legal recognition of social gender transition:

- I ask the elected leadership and Board of Trustees of the American Psychiatric Association to affirm in a position statement that gender identity and expression which differ from assigned birth sex do not, in themselves, constitute mental disorder and imply no impairment in judgment or competence.
- I also ask the APA to follow the example of the American Medical Association, the American Psychological Association, and the World Professional Association for Transgender Health

(WPATH) by issuing a statement clarifying the medical necessity of hormonal and/or surgical transition treatments for those who suffer distress caused by deprivation of physical characteristics congruent with their gender identity. I call on the APA to urge insurance and healthcare coverage for medically prescribed transition treatment as well as ongoing and ordinary medical and mental health care.

- Finally, I ask the American Psychiatric Association to follow the example of the American Psychological Association and WPATH in opposing discrimination on the basis of gender identity or expression and encouraging legal recognition of all people that is consistent with their gender identity and expression. I ask the APA to affirm in a position statement the dignity and legitimacy of individuals who have transitioned their social gender roles, regardless of their physical anatomy or assigned birth sex.

I have attached the names of well over 400 community members, leaders, clinicians, researchers, scholars and allies, who have joined me in this request through an on-line Facebook advocacy group. I have also attached copies of individual letters that I have received.

I would very much appreciate your consideration and endorsement of these position statements. Please feel free to contact me, if I can answer any questions that you have or can provide more information.

Regards,

Kelley Winters, Ph.D.  
GID Reform Advocates  
[www.gidreform.org](http://www.gidreform.org)

# Request for APA Position Statements in Support of Human Dignity and Medical Care for Trans People

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# Facebook.com Group: Urge the APA to Support Human Dignity and Medical Care for Trans People

Global

## Basic Info

Type: [Common Interest - Health & Wellness](#)

Description We Call Upon the American Psychiatric Association to Publicly Affirm Human Dignity and Access to Medical Care for Trans and Gender Variant People.

People who do not conform to their assigned birth-sex, either by inner identity or outer social expression, continue to be labeled as mentally disordered by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders (DSM). As the Fifth Edition of the DSM nears publication in 2012, the diagnostic categories of Gender Identity Disorder (GID) and Transvestic Fetishism (TF) are drawing a great deal of controversy and dissent from the trans-community and supportive medical and mental health professionals. In their current form, these diagnoses inflict unfair stigma and defamatory stereotypes upon all gender variant people, while at the same time posing barriers to medical transition care for those transsexual individuals who need them.

In addition to reform of the GID diagnosis and removal of the derogatory TF category in the DSM-V, it is important that the APA issue public position statements in support of human dignity and medical care for trans and gender variant people, as it has for other minority groups in the past. For example, in 1973 the American Psychiatric Association issued a historic position statement on “Homosexuality and Civil Rights” that had a profound impact on public opinion and defamatory stereotypes. Tragically, the APA has never issued a similar statement in support of trans and gender variant people.

We members of this group call upon the APA to clarify that gender difference is not disorder, affirm the medical necessity of transition care, and urge legal recognition of social gender transition.

1-- We ask the elected leadership and Board of Trustees of the American Psychiatric Association to affirm in a position statement that gender identity and expression which differ from assigned birth sex do not, in themselves, constitute mental disorder and imply no impairment in judgment or competence.

2-- We also ask the APA to follow the example of the American Medical Association, the American Psychological Association, and the World Professional Association for Transgender Health (WPATH) by issuing a statement clarifying the medical necessity of hormonal and/or surgical transition treatments for those who suffer distress caused by deprivation of physical characteristics congruent with their gender identity. We call on the APA to urge insurance and healthcare coverage for medically prescribed transition treatment as well as ongoing and ordinary medical and mental health care.

3-- Finally, we ask the American Psychiatric Association to follow the example of the American Psychological Association and WPATH in opposing discrimination on the basis of gender identity or expression and encouraging legal recognition of all people that is consistent with their gender identity and expression. We ask the APA to affirm in a position statement the dignity and legitimacy of individuals who have transitioned their social gender roles, regardless of their physical anatomy or assigned birth sex.

The American Psychiatric Association has an opportunity today to reclaim its compassion for human dignity and its mandate to do no harm.

Thank you for your support by adding your name to this group and your voice to this call for change. Please invite your colleagues and friends, who are advocates for the dignity and health of trans and gender variant people, to join as well.

For more information, see [www.gidreform.org/blog2009May23.html](http://www.gidreform.org/blog2009May23.html)

Kelley Winters, Ph.D.  
GID Reform Advocates  
[www.gidreform.org](http://www.gidreform.org)

## **Group Type**

This is an open group. Anyone can join and invite others to join.

## **Admins**

[Kelley Winters](#) (creator)

This Facebook Group is located at:

<http://www.facebook.com/group.php?gid=92915546212>

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			Nemo Neminem Switzerland



## APA Gender Position Statements

Dear APA Leadership,

In spite of *gender identity disorder* (GID), a diagnosis that conferred almost no healthcare coverage, most "trans-people" have tried to do the right things for themselves. Now, it's time for the APA (DDSM-V) to go beyond gender definitions that have characterized *normal variants* as diseased. Please put *gender variation* on the bell-shaped curve where it belongs.

Personally, I believe that one's self-determined gender identity is a fundamental human right. And in all likelihood, future evolution of the species (towards non-violent coexistence) will require deconstruction of binary thinking in general, and abandonment of *the gender binary* in particular.

In advance, thank you for your consideration; I await your reply.

Sincerely,

Jamie A. Koufman, M.D., F.A.C.S., President  
American Broncho-Esophagological Association  
Professor of Clinical Otolaryngology  
New York Medical College (Valhalla NY)  
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From: Nerissa Belcher RN, DPM  
Subject: APA Gender Position Statements  
To: APA

Kelly Winters, Ph.D has posted her requests of the APA on-line in regards to GID revisions in the up-coming DSM-V. These requests are below. I strongly concur with her.

I'm currently a nurse (BSN trained RN) working for the US Veteran's Administration. You'll notice I have a podiatry degree (DPM) also. I'm not working as a podiatrist since my private practice was destroyed about six years ago when I started my gender transition. I was living in the Bible belt AKA Huntsville, TX at the time. Transphobia affects real lives to include the lives of my two children. Who, by the way, I have not seen in five years due to religious inspired bigotry of a Huntsville judge.

The APA has a choice. Will it fight to minimize bigotry towards transsexuals or work towards encouraging it? Your current goal seems evident since on the Sexual and Gender Identity Disorders Task Force for DSM-V you have hand-picked known TS bigots. For example, Dr. Kenneth Zucker (of "ex-gay" reparative therapy to "treat" gender-variant children) and Dr. Ray Blanchard who has already indicated his closed-mindedness with his "inclusive" categorization of GID as including only self-deluded gay men and perverted straight men (autogynephilia).

Incidentally, what in the world are you thinking in pathologizing cross-dressing for straight men? While my focus is on GID reform for gender variant people I wish to support the right of anyone to dress as they please so long as not indecent in public. Why does the APA support the right of straight women to dress and act masculine yet feel it appropriate to diagnose straight men who dress and act feminine as mentally ill?

\*\*\*\*\*

From GID Reform Advocates:

We ask the elected leadership and Board of Trustees of the American Psychiatric Association to affirm in a position statement that gender identity and expression which differ from assigned birth sex do not, in themselves, constitute mental disorder and imply no impairment in judgment or competence.

We also ask the APA to follow the example of the American Medical Association and the American Psychological Association with a statement clarifying the medical necessity of hormonal and surgical transition treatments for those who suffer painful distress with their physical sex characteristics that are incongruent with their persistent gender identity.

Finally, we ask the American Psychiatric Association to follow the example of the American Psychological Association in encouraging legal and social recognition of all people that is consistent with their gender identity and expression. We ask the APA to affirm in a position statement the dignity and legitimacy of individuals who have transitioned their social gender roles, regardless of their physical anatomy or assigned birth sex.

Alan F. Schatzberg, President, American Psychiatric Association Carol A. Bernstein, M.D., President-elect, American Psychiatric Association American Psychiatric Association 1000 Wilson Boulevard Suite 1825 Arlington, VA 22209 [apa@psych.org](mailto:apa@psych.org)

Board of Trustees, American Psychiatric Association in care of: Thomas Graham Senior Governance Specialist - Board of Trustees [tgraham@psych.org](mailto:tgraham@psych.org)

CC

Ubaldo Leli, M.D., President, Association of Gay and Lesbian Psychiatrists [uleli@aglp.org](mailto:uleli@aglp.org)  
Kelly Winters, Ph.D , GID Reform Advocates [kelly@gidreform.org](mailto:kelly@gidreform.org)

Nerissa Belcher  
Atlanta, GA

**To: Alan F. Schatzberg, President, American Psychiatric Association**  
**Carol A. Bernstein, M.D., President-elect, American Psychiatric Association**  
American Psychiatric Association  
1000 Wilson Boulevard  
Suite 1825  
Arlington, VA 22209

**Board of Trustees, American Psychiatric Association**  
in care of: Thomas Graham  
Senior Governance Specialist – Board of Trustees

**CC:**  
**Ubaldo Leli, M.D., President, Association of Gay and Lesbian Psychiatrists**

Kelley Winters Ph.D, GID Reform Advocates

I am BJ Kamigaki, a transsexual woman and proud member of the transgender community from Longmont, Colorado. My identity is NOT a disorder nor am I a sexual deviant. I am joining with my transgender brother and sisters, our allies in the gay, lesbian and straight community, and others to request the following from the APA:

1– We ask the elected leadership and Board of Trustees of the American Psychiatric Association to affirm in a position statement that gender identity and expression which differ from assigned birth sex do not, in themselves, constitute mental disorder and imply no impairment in judgment or competence.

2– We also ask the APA to follow the example of the American Medical Association and the American Psychological Association with a statement clarifying the medical necessity of hormonal and surgical transition treatments for those who suffer painful distress with their physical sex characteristics that are incongruent with their persistent gender identity.

3– Finally, we ask the American Psychiatric Association to follow the example of the American Psychological Association in encouraging legal and social recognition of all people that is consistent with their gender identity and expression. We ask the APA to affirm in a position statement the dignity and legitimacy of individuals who have transitioned their social gender roles, regardless of their physical anatomy or assigned birth sex

In today's climate of economic and social challenges many governmental bodies, spiritual and religious organization, medical institutions, for profit companies, and individuals need no excuses to discriminate, defame, keep down, or cause harm to those in the transgender community. They do it for dogmatic reasons, because it helps the bottom line, and out of ignorance or hatred. They need no further fuel for these fires that have burned for far too long. I urge you all to consider the above request with open heart and mind.

Ms. BJ Kamigaki  
1107 Red Oak Dr.  
Longmont, CO 80501

To Whom It May Concern:

I am writing to ask the elected leadership and Board of Trustees of the American Psychiatric Association to affirm in a position statement that gender identity and expression which differ from assigned birth sex do not, in themselves, constitute mental disorder and imply no impairment in judgment or competence. I also ask the APA to follow the example of the American Medical Association and the American Psychological Association with a statement clarifying the medical necessity of hormonal and surgical transition treatments for those who suffer painful distress with their physical sex characteristics that are incongruent with their persistent gender identity. Finally, I ask the American Psychiatric Association to follow the example of the American Psychological Association in encouraging legal and social recognition of all people that is consistent with their gender identity and expression. We ask the APA to affirm in a position statement the dignity and legitimacy of individuals who have transitioned their social gender roles, regardless of their physical anatomy or assigned birth sex.

Thank you,

Emily

Emily Sturm

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June 2, 2009

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Alan F. Schatzberg  
President  
American Psychiatric Association  
1000 Wilson Boulevard, Suite 1825  
Arlington, VA 22209

Dear Dr. Schatzberg:

The upcoming fifth edition of the Diagnostic and Statistics Manual offers The American Psychiatric Association an opportunity to reclaim its compassion for human dignity and its mandate to do no harm. As a physiologist who has been following the research pertaining to the issue of sexual/gender identity, I am registering my dismay at the continued categorizing of transsexual and other gender variant people in the DSM as mentally disordered.

The scientific evidence that core sexual identity is biological and innate comes from multiple sources and is overwhelming. Moreover, transsexual persons have atypical brain structure and function that correspond to their felt identity. There is no scientific support for considering transsexuality “per se” as a psychiatric disorder. While transsexuality may not be common, transsexual people are natural and merely different. It is my ethical responsibility as a biologist to point out that diversity is the rule in nature and to insist that the psychiatric profession understand that differences are not necessarily disorders. Natural variations in sexuality are many and include the transsexuality that should be expected and celebrated in any population. The psychiatric profession needs to minimize the damage to its credibility in the eyes of the scientific community by doing its part to change the culture that persecutes transsexual people. The APA should learn from its past mistreatment of homosexual people and take the lead in educating the public about the natural variations in human sexuality rather than continuing its horrific complicity in societal discrimination against transsexual and other gender variant people.

1. I insist that the elected leadership and Board of Trustees of the American Psychiatric Association issue a position statement making clear that gender identity and expression which differ from assigned birth sex do not, in themselves, constitute mental disorder and imply no impairment in judgment or competence.
2. I urge the APA to issue a statement clarifying the medical necessity of hormonal and surgical transition treatments for those who suffer painful distress with their physical sex characteristics that are incongruent with their persistent gender identity. While it is a shame that the APA is not leading this cause, it can at least follow the American Medical Association and the American

Psychological Association in this regard.

3. I advise the American Psychiatric Association to follow the example of the American Psychological Association in encouraging legal and social recognition of all people that is consistent with their gender identity and expression. The APA should affirm in a position statement the dignity and legitimacy of individuals who have transitioned their social gender roles, regardless of their physical anatomy or assigned birth sex. Surely, psychiatrists can help the public understand the important distinctions between the biological terms such as male or female and cultural terms such as man or woman.
4. In addition to the above three requests, I ask that the APA scrutinize the reasons for giving Dr. Kenneth Zucker and Dr. Raymond Blanchard such inordinate influence in the DSM revision process. The bizarre and mean-spirited theories of Zucker and Blanchard are refuted by the scientific evidence and do real harm to people who simply don't conform. Their arrogance and unscientific attitude should not be tolerated in a profession that claims to be based on science and compassion.

It is my hope that the APA will revise the DSM in a fashion that is consistent with the evidence from all the sciences. It is time for the APA to officially take a stand that celebrates the natural sexual diversity of our species and promotes human dignity and freedom.

Sincerely,

Veronica Drantz, PhD