

Kathyanne wrote:

Holly, that is interesting, as several of my Oceania friends were there. Perhaps they can come up with the numbers.

there are a few pictures at <http://maribolheras.com/?p=963> that give you some idea, especially the one taken from the lead float. However it is hard to see that the march was two city blocks long.

It was very loud, mostly chanting and shouting such as "Aqui; esta; la resistencia trans". All peaceful apart from one very short scuffle with a transphobic sandwich shop staff on the



route.

The present demands are at <http://www.stp2012.info/en/manifesto> (in extreme precis below)

- \* retirement of transexuality from the mental disorders' manuals
- \* treatments and surgeries on intersex newborns and babies stop.
- \* change name and sex in official documents without psychological monitoring.
- the State should have no jurisdiction over our names, bodies and our identities.
- \* freely decide whether to modify our bodies. no bureaucratic, political, medical or economical impediments, nor coercion.
- \* psychiatric an unnecessary step, psychotherapeutic voluntary option.
- \* access to the labour market; end marginalization and discrimination.
- \* health and security conditions for sex workers; end police's besieging
- \* end sexual trafficking.
- \* concession of political asylum in [trans] cases
- \* remember aggressions, murders, and suicides due to transphobia. Silence is complicity.

The Catalan regional and Spanish national politicians are in favour and moving forward, the Roman Catholic church in Spain opposes.

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Holly

## MANIFESTO

### International Network for Trans Despathologization

The advocates and groups who sign this document, and are part of the International Network for Trans' Identities' Despathologization, **publicly denounce once again the psychiatrization of our identities and the serious consequences of the so called "Gender or Sex Identity Disorder" (GID). In the same way, we want to make visible the violence done to intersex people throughout the current medical procedures.**

With "psychiatrization" we name the practice of defining and treating transexuality under a mentally disordered label. We are also speaking about the mistaking of non normative bodies and identities (those out of the cultural dominant order) for pathological bodies and identities. Psychiatrization gives the medical-psychiatric institutions the control over gender identities. The official practice of these institutions, motivated through state, religious, economical and political interests, reflects and reproduces the male/female binomial on people's bodies. Making believe this exclusive position is a "true" and natural one. This binomial, supposes the solely existence of two bodies (male or female), and associates a determined behavior to each one of them (male or female). At the same time it has traditionally taken into consideration heterosexuality as the only possible relationship between them. Today, as we denounce this paradigm, which has justified the current social order with nature and biological arguments, we evidence its social effects so as to put and end to its political pretentions.

Those bodies which do not anatomically correspond to the current western medical classifications are classified under the label of intersexuality, a condition that by itself is considered pathological, **whereas the medical classification is nowadays not yet questioned about it.** Transexuality is also conceived as a problematical reality by itself. **However, the gender ideology which psychiatry develops, is still not questioned**

**The legitimization of social norms that are part of our life experience and our feelings, implies the invisibilization and pathologization of all the other existing options, setting one single path that doesn't question the political dogma around which our society is built: the solely and exclusive existence of only two ways of being and feeling.** If invisibilizing means performing violent and normalizing surgeries on intersex newborns (those with ambiguous functional genitalia) it will be done. Especially when its' goal is to eliminate the possibility of these bodies and to veto the existence of those differences.

The paradigm, in which the actual treatment procedures for transexuality and intersexuality are inspired, makes them become medical procedures of binary normalization. It is "normalization" because these procedures reduce the diversity to only two ways of living and inhabiting the world: those considered statistically and politically as "normal." With our critique to these procedures we also resist to having to adapt ourselves to the psychiatric definitions of man and woman for being able to live our identities, so that our life's value is recognized without giving up the diversity in which we constitute ourselves. **We**

**obey no kind of label or definition imposed on us by the medical institution. We demand our right to name us by ourselves.**

**Nowadays transexuality is considered a “Sexual Identity Disorder” mental pathology classified in the ICD-10** (International Classification of Diseases from the World Health Organization) **and the DSM-IV-R** (Diagnostic and Statistical Manual of Mental Disorders from the American Psychiatrist Association). These classifications are the ones that guide psychiatrists all around the world when establishing diagnosis. In them, we find a less than casual error: the mistaking of the transphobia effects for those of transexuality. Social violence against those that don't follow the gender standards is invisibilized. This way, it is actively ignored that the problem isn't gender identity but transphobia.

The **DSM-IV-R revision** is a process that started two years ago, which aims to determine the changes in the list of disorders. Few months ago the names of the psychiatrists who will determine the future of the Gender Identity Disorder (GID) were published.

In charge of the GID work-group are **Dr.Zucker** (the group's director) and **Dr.Blanchard**, within others. These psychiatrists are well known for using reparative therapies on homosexuals and transsexuals, and are linked also to clinics where operations on intersexual people are done. **What they propose, is not only not withdrawing the disorder, but expanding its treatment to children who present gender-variant behaviors, and applying them reparative therapies for them to accept their original role.** Because of this, the North-American trans movement has started to demand their expulsion from the group in charge of revising the DSM. The International Network for Trans' Identities' Despathologization supports wholeheartedly this demand.

Transexuality's pathologization under the “Gender Identity Disorder” is an extreme exercise of control and normalization. **This disorder's treatment is carried away in different centers around the world. In some cases, like the Spanish State, it is compulsory to go through a psychiatric monitoring in the Gender Identity Centers.** In some cases it is linked to a weekly control of our gender identity through group therapies, family, and all sorts of derogative procedures which infringe our rights. While referring to the Spanish State's case, it is important to highlight that anyone who wishes to change their name in their official documents, or who wishes to modify their body with hormonal treatment or with some operations, has to go through a psychiatric monitoring.

Finally, we are directly speaking to all politicians. Our demands are clear:

- We demand the **retirement of transexuality** from the mental disorders' manuals (DSM-IV-R and ICD-10). **To bring the treatments on intersex babies to an end.**
- **We demand our right to change our name and sex in the official documents without having to go through any medical or psychological monitoring.** We also think that the State should have no jurisdiction over our names, bodies and our identities.
- We take here the words from the feminist movement in their fight for the right to abortion, and the right to your own body: **we demand our right to freely decide whether if we want or not to modify our bodies. Our rights to be able to carry on with our decision, with no bureaucratic, political or economical impediments, nor any other type of medical coercion.** We want the sanitary systems to take positions regarding the Gender Identity Disorder, for them to recognise the transphobia that this classification implies, and for them to rethink their healthcare programs regarding transexuality, making the psychiatric monitoring an unnecessary step, and the psychotherapeutic monitoring a voluntary option. **We demand too that the surgeries on intersex newborns stop.**
- We denounce the extreme vulnerability and the difficulties, when accessing the labor market, of the trans community. **We demand granted access to the labor market and that specific**

**politics are engaged to end marginalization and discrimination of our community.** We also demand health and security conditions for sex workers and the end of the police's besieging to these persons, as well as sexual traffic.

- Vulnerability situations are stressed in cases of immigrant trans persons, who reach our country fleeing from extreme violence situations. **We demand the immediate concession of political asylum in these cases, and at the same time we claim that the rights of migrant people are brought to the same level. We denounce the effects of the actual politics on foreign nationals over the most vulnerable social sectors**
- While we shout that we are no victims but active beings and with the capacity of deciding over our own identities, **we want to remember too all the aggressions, murders, and suicides of trans people due to transphobia.** We signal the system guilty of this violence. **Silence is complicity.**

We finish showing the extreme rigidity with which the male/female binomial is imposed as the solely and exclusive option. Binomial that is built and therefore can be questioned. Our solely existence proves its falseness and points to a plural and diverse reality. Diversity that we dignify today.

When medicine and State define us as disordered, they are proving that our identities, our lifes, deeply disturb their system. That's why we say that the illness is not in us but within gender binarism.

We make public that the International Network for Trans' Identities' Despathologization is born to consolidate a worldwide coordination of our first goal: the retirement of transexuality from the DSM-TR the year 2012. A first step for diversity, a first knock to transphobia.

For the diversity of our bodies and identities!

Transphobia makes us ill!

**INTERNATIONAL NETWORK  
FOR  
TRANS'  
DESPATHOLOGIZATION**