ICD-11 & DEPATHOLOGIZATION: MEANING AND IMPLICATIONS

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ICD or International Classification of Diseases is the international standard diagnostic tool for epidemiology, health management and clinical purposes.

The full name is International Statistical Classification of Diseases and Related Health Problems.

It is used to define diseases and study patterns as well as managing health care monitor outcomes and allocation of resources.
ICD defines the universe of diseases, disorders, injuries and other related health conditions, listed in a comprehensive hierarchical fashion that allows:

1. Storage, retrieval and analysis of health information for evidence-based decision making;

2. Share and compare health information between hospitals, regions, settings and countries;

3. Data comparison in the same location across different time periods.
History

• Francois Bossier first attempted to classify diseases ‘Nosologia methodical’
• 1785 William Cullen published ‘Synopsis Nosologiae Methodica’
• The first international classification was done in 1983
• WHO was entrusted with the ICD in 1948 (ICD-6)
HISTORY

1900 ICD-1
1910 ICD-2
1921 ICD-3
1930 ICD-4
1939 ICD-5
1949 ICD-6
1958 ICD-7
1968 ICD-8
1979 ICD-9
1999 ICD-10
ICD-11
To depath or not to depath?
Pathologisation is "the psycho-medical, legal, and cultural practice of identifying a feature, an individual, or a population as intrinsically disordered”

Pathologisation has the consequences of:

• - over-medicalisation
• - stigmatisation and discrimination
• - attempts at change practices (so-called "conversion therapy")
• - barriers to legal, social, and personal acceptance
Full depathologization refers to the removal of all references to trans and gender diverse people from the ICD.

Given the current challenges posed by legal regulations and insurance companies in different countries, where trans and gender diverse people are mandatorily required to have an ICD code to access legal gender recognition, transitional care and its coverage, it won’t be possible to achieve ‘full depathologization.’

In other words, it isn’t possible to achieve full Depathologization and secure access to care with coverage.
Pathologization is directly linked with societal stigmas indicating that having a diverse gender identity is a consequence of mental illness. This can be used as an excuse for subjecting a trans person to conversion practices, to forced hospitalizations as a pre-requisite to legal gender recognition or Access to gender affirming health care, and to involuntary detention on the basis of mental health.
What was deleted
• All references to trans identities in the chapter of Mental and Behavioural disorders
• The diagnosis “gender identity disorder” (and thus any link to the word disorder)

What was added
• A new chapter called “conditions related to sexual health” which includes also accessing contraception as well as trans diagnoses
• A new category called ‘gender incongruence” within the new chapter
Trans issues in the revision and reform of ICD

• Creation of a new chapter in ICD-11: conditions related to sexual health

• Placement of a new code: Gender Incongruence of Adolescence and Adulthood

• Deletion of all pathologizing categories affecting trans and gender diverse people (gender identity disorder codes in the mental and behavioural disorders chapter)

• Introduction of a new, non/less pathologizing category in a non/less pathologizing chapter
What was demanded of the new category?

- Not a disorder or a disease
- Non-binary inclusive
- Able to provide access to legal gender recognition, so long as legal systems require a medical diagnosis
- Able to provide access to transitional healthcare
- Able to provide access to coverage/reimbursement for transitional health care procedures, including gender affirming surgeries and hormonal treatments
- Not applicable to children before puberty
- Use non-pathologizing terminologies and conceptualizations
- Compatible with human rights standards, including self-determination
What has been done?

- Briefings produced
- Activists actively engaged in the ICD-11 process
- Advocacy to governments to lobby for their support
What was achieved:

- Increased awareness of trans issues and human rights within the WHO, Ministries of Health, and medical professional associations around the world
- Mobilisation of governments to change their medical classification systems – some even doing so before ICD-11 was ratified
- Corresponding efforts to de-pathologise legal gender recognition processes
What now?
Role of organizations

• Share and develop critical knowledge on ICD-11 to members, partners, states etc.
• Advocate with governments for its implementation
• Monitor all advances, identify barriers and develop plans to address them
• Participate in Global Platforms
What can you do?

• Learn about ICD-11
• Ask and clear all your doubts
• Work closely with national and regional organizations
• Lobby your governments for its implementation
• Share and develop critical knowledge
• GET INVOLVED!
thank you!