The Social Construction of Diagnosis: An Exploratory Study on Gender Dysphoria and Its Implications on Personal Narratives

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Abstract : In Europe, except for Denmark and Malta, the legal gender change and the stages of the possible process of gender transition are bound to the diagnosis of a gender identity disorder. The requirement of the evaluation of a mental disorder might have many implications on trans people's self-representations, interpersonal relations in different social contexts and the therapeutic relations with clinicians during the transition. Psychopathological language may contribute to define the individual's reality from normative presuppositions with value implications related to the dominant cultural principles. In an effort to mark the boundaries between sanity and pathology, it concurs to the definition of the management procedures of the constructed diversities and deviances, legitimizing the operational practices of particular professional figures. The aim of this research concerns the analysis of the diagnostic category of gender dysphoria contained in the last edition of the Diagnostic and Statistical Manual of Mental Disorders. In particular, this study focuses on the relationship between the implicit and explicit assumptions related to the expressions of gender non-conformity, that sustain the language and the criteria characterizing the Manual, and the possible implications on people's narratives of transition. In order to achieve this objective two main research methods were used: historical reconstruction of the diagnostic category in the different versions of the Manual and content analysis of that category in the present version. From the historical analysis, in the medical and psychiatric field gender non-conformity has been predominantly explicated by naturalistic perspectives, naming it 'transsexualism' and collocating it in the category of gender identity disorder. Currently, pathological judged experiences are represented by gender dysphoria, described in the DSM-5 as the distress that may accompany the incongruence between one's experienced or expressed gender and one's assigned gender, specifying that there must be 'evidence' of this. Implicit theories about gender binary, parallelism between gender identity, sex and sexuality and the understanding of the mental health and the subject's agency as subordinated to the expert knowledge, can be found in the process of designation of the category. A lack of awareness of the historical, social and political aspects connected to the cultural and normative dimensions at the basis of these implicit theories, can be noticed and data given by culture and data given by supposed -biological or psychological- nature, are often confused. This reductionist interpretation of gender and its presumed diversities legitimize the clinician to assume the role of searching and orienting, in a correctional perspective, the biographical elements that correspond to him specific expectations, with no space for other possibilities and identity configurations for people in transition. This research may contribute to the current critical debate about the epistemological foundation of the psychodiagnosis, emphasizing the pragmatic effects on the individuals and on the psychological practice in its wider social context. This work also permits to underline the risks due to the lack of awareness of the processes of social construction of the diagnostic system and its essential role of defence of the values that hold up the symbolic universe of reference.

Keywords : diagnosis, gender dysphoria, narratives, social constructionism

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