Subreddit Policy Reminder on this week’s Transgender AMAs

nate and r/Science AMAs

1Affiliation not available

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Abstract

This week we will be hosting a series of AMAs addressing the scientific and medical details of being transgender. Honest questions that are an attempt to learn more on the subject are invited, and we hope you can learn more about this fascinating aspect of the human condition. However, we feel it is appropriate to remind the readers that /r/science has a long-standing zero-tolerance policy towards hate-speech, which extends to people who are transgender. Our official stance is that derogatory comments about transgender people will be treated on par with sexism and racism, typically resulting in a ban without notice. To clarify, we are not banning the discussion of any individual topic nor are we saying that the science in any area is settled. What we are saying is that we stand with the rest of the scientific community and every relevant psych organisation that the overwhelming bulk of evidence is that being trans is not a mental illness and that the discussion of trans people as somehow “sick” or “broken” is offensive and bigoted1. We won’t stand for it. We’ve long held that we won’t host discussion of anti-science topics without the use of peer-reviewed evidence. Opposing the classification of being transgender as ‘not a mental illness’2 is treated the same way as if you wanted to make anti-vax, anti-global warming or anti-gravity comments. To be clear, this post is to make it abundantly clear that we treat transphobic comments the same way we treat racist, sexist and homophobic comments. They have no place on our board. Scientific discussion is the use of empirical evidence and theory to guide knowledge based on debate in academic journals. Yelling at each other in a comments section of a forum is in no way “scientific discussion”. If you wish to say that any well accepted scientific position is wrong, I encourage you to do the work and publish something on the topic. Until then, your opinions are just that - opinions. 1 Some have wrongly interpreted this statement as “stigmatizing” mental illness. I can assure you that is the last thing we are trying to do here. What we are trying to stop is the label of “mental illness” being used as a way to derogate a group. It’s being used maliciously to say that there is something wrong with trans people and that’s offensive both to mental illness sufferers and those in the trans community. 2 There is a difference between being trans and having gender dysphoria. Lastly, here is the excerpt from the APA: A psychological state is considered a mental disorder only if it causes significant distress or disability. Many transgender people do not experience their gender as distressing or disabling, which implies that identifying as transgender does not constitute a mental disorder. For these individuals, the significant problem is finding affordable resources, such as counseling, hormone therapy, medical procedures and the social support necessary to freely express their gender identity and minimize discrimination. Many other obstacles may lead to distress, including a lack of acceptance within society, direct or indirect experiences with discrimination, or assault. These experiences may lead many transgender people to suffer with anxiety, depression or related disorders at higher rates than nontransgender persons. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), people who experience intense, persistent gender incongruence can be given the diagnosis of “gender dysphoria.” Some contend that the diagnosis inappropriately pathologizes gender noncongruence and should be eliminated. Others argue that it is essential to retain the diagnosis to ensure access to care. The International Classification of Diseases (ICD) is under revision and there may be changes to its current classification of intense persistent gender incongruence as “gender identity disorder.”
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