

A

A marked incongruence between one's experienced/expressed gender and assigned gender, of at least 6 months' duration, as manifested by at least two of the following:

A couple semesters ago, my mother started taking classes to work towards a masters degree in social work. On the dining room table is a copy of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. She's placed these cute little colorful tabs along the outer edge so she can quickly flip to a given section. I'll admit, they make the ugly dark-blue-and-white cover a bit easier on the eyes.

I come home from school to an empty house and let my backpack fall onto the floor. I shoot a sharp glance at the book on the counter.

We're on a walk through this preserve on the outskirts of my neighborhood. "You know I don't really like categorizing people, because it's a colonialist mindset, but I'm starting to see how this could be useful," she says.

I pick the book up and start flipping through the tabs. "Neurodevelopmental disorders." "Schizophrenia spectrum." "Depressive disorders."

"Also, I've got this final assignment coming up. We have to give a presentation to the class about some specific topic in social work. That, or an essay. I'm not sure which I prefer."

"Trauma- and stressor-related disorders."
"Dissociative disorders." "Feeding and eating disorders." "Sleep-wake disorders."

"What topic are you gonna pick?" I ask.

"Gender dysphoria."

1

A marked incongruence between one's experienced/expressed gender and primary and/or secondary sex characteristics.

One glance at those words doesn't tell you much. It's as if the words of that sentence are trying to shy away from the page they're printed on. Is gender experienced, or is it expressed? Or is it both? What exactly constitutes an "incongruence"? What makes such an incongruence "marked"?

No, really?

This book is heralded as the objective measure of mental disorders, the sharp boundary between functioning and disorder. This is the precise measuring stick that psychiatrists use to allow or deny care to hundreds of millions of patients. And yet it seems just as confused about my identity as I am.

I remember in middle school, forgetting about an assigned presentation and trying to bullshit my way through it anyway. I was pretty good at seeming authoritative. At least until my classmates started to ask questions.

And I always felt bad about doing that. I cheated my classmates by wasting their time with fluff when I could be presenting something interesting. I cheated my teachers by making them spend effort grading something I hadn't invested any effort into producing. And I cheated myself, by taking away my own opportunity to learn and grow.

The DSM-5 isn't a PowerPoint about the water cycle. It's not a class project about sedimentary, igneous, and metamorphic rocks. It's not a middle school science lab report. It's a tool used by professionals who make life-altering medical decisions for their patients.

And it's trying to bullshit its way through this **one**.

2

A strong desire to be rid of one's primary and/or secondary sex characteristics because of a marked incongruence with one's experienced/expressed gender.

Two weeks. That's how much time it took me to come out to my parents, even after I'd spent months deliberating before deciding to do so. Two weeks of looking for the perfect opportunity, agonizing over what the response might be, and knowing just how high-stakes the whole situation was.

A couple days after I came out to my mom, she asked me, "When are you going to come out to Dad? It's been tough to go this long having to keep this a secret."

I told her to try holding it in for over a year.

When I finally talked to them, I tried to explain in detail how I felt, but I'm sure they made some assumptions to fill in the gaps. And when society thinks of trans people as men who cut their dick off, some of those assumptions could turn out... problematic.

Do I have a "strong desire" to be rid of my "sex characteristics"? Do I want to chop my dick off?

Perhaps?

Lemma 1. $\forall p \in P, \text{woman}(p) \Rightarrow \neg \text{penis}(p).$

For all people, if a person is a woman, then she does not have a dick. That's what we're taught by society, ever since middle school sex ed. Therefore, if I "want to be a woman," then I should cut off my penis, Q.E.D.

Lemma 2. $\exists p \in P : \text{woman}(p) \wedge \text{penis}(p).$

But there exists a person, who is confident in her identity as a woman, but has a penis. She is me. Disproof by counterexample, Q.E.D.

Lemma 3. $\neg(C(m) \wedge C(s) \wedge C(c)) \wedge C(m) \Rightarrow \neg C(s) \vee \neg C(c).$

Mathematicians state that the rules of logic are *consistent*, in that a contradiction cannot exist. I don't doubt the rules of mathematics. Therefore, the inconsistency must lie between reality and culture, Q.E.D. And if I was one to bet, I'd guess the latter of the **two**.

3

A strong desire for the primary and/or secondary sex characteristics of the other gender.

Three questions to answer. Three very difficult questions that caused quite the battle inside my brain.

One of the first people I came out to was a girl who was assigned female at birth. In less euphemistic terms, she has a vagina.

On one side of the ring, my frontal lobe. My decision-maker that powers me through the mathematics I love immersing myself in. On the other side, my amygdala. The part of my brain that feels emotions, that makes me a person and not a robot.

“Why did you tell me?”

My frontal lobe told me that she was one of my friends who was the most likely to be supportive. My amygdala still tried to talk me out of it. The frontal lobe won.

“Why haven’t you told your family yet?”

My frontal lobe told me I’d have to tell them at some point, and that I might as well rip the band-aid off soon. My amygdala didn’t want to feel hurt. The amygdala won.

“If you had been born female, but got to choose, would you want a period?”

My frontal lobe has listened to my friends who bleed describe how it's not exactly a fun experience, to say the least. My frontal lobe knows that having a period isn't what defines femininity. My frontal lobe knows that I should probably just enjoy not having to deal with it.

My amygdala wants to feel like a woman. My amygdala knows that this is something that separates me from our cultural definition of womanhood, and it's an experience I'll never get to have.

My orbitofrontal cortex has broken away to join the fight on its own. It's telling me that I should just respond with "no," in order to not upset my friend who frequently complains about her period.

I offered a noncommittal half-answer to my friend, since I knew I'd probably die waiting for a resolution to the conflict between those **three**.

4

A strong desire to be of the other gender (or some alternative gender different from one's assigned gender).

Four subreddits. TRAA, TGCJ, GSSP, and EGG_IRL. For a trans person deep in denial, these letters and the communities behind them brought forth an incredibly broad range of emotions.

Turns out, when people feel disconnected from the world around them and uncomfortable in their real-life bodies, they tend to turn to the Internet. TRAA, for instance, has 280,000 members. And, like any close-knit group, they've developed plenty of inside jokes.

egg (noun, slang).

/eg/

- 1) A trans person who has not yet realized that they are trans, yet displays signs which reveal a disconnect between their gender identity and the gender they currently live as.

"Why do you always play as a girl character in video games? Egg."

- 2) A trans person who is in denial about their ability to successfully transition and live a happy life, and who attempts to repress their identity instead.

"You spent two hours last night looking up 'androgynous names' online? Just crack your egg already."

Years ago, I knew I was trans. And I desperately wanted not to be. I wanted to be able to be comfortable in my life as a boy, to be content with my life as it was, and to have this dissonance in my head just magically fade away. I wanted that more than anything in the world.

Before transition, I started to realize that I was attracted to people of all genders. I realized that I might not understand myself as well as I thought I did, I spent some time deep in thought, and I came out of it with a better understanding of my own identity. The process of questioning my sexuality took less than one month.

Coming to terms with my gender took **four**.

5

A strong desire to be treated as the other gender (or some alternative gender different from one's assigned gender).

Five weeks after my initial conversation with my father, my mom and I decided to have a discussion with him about my gender. It... wasn't particularly productive. Just like all of my subsequent attempts at explanation, my experiences fell on deaf ears, and he was seemingly only ever moved further away from acceptance.

The most difficult part of our conversations was his tactic of debate. I approached each interaction ready to open myself up and speak freely about my experience. He made his rebuttals point-by-point, never focusing on the core issue, always targeting tangential issues to pick away at my sense of self-determination.

"You should cut your hair, or you'll have a hard time working in the cleanroom this summer."

Plenty of the people in the semiconductor factory had long hair. Hairnets exist.

"You shouldn't be taking hormones. I've heard that they can make you infertile."

Either I transition, or I try to live as a man and kill myself. You're not getting biological grandkids from me either way.

"Gender is more fluid now. You can just be an effeminate man."

But... I'm not.

In a society where people already treat people of different genders largely the same, what does it mean to have a strong desire to be “treated as” the other gender? After coming out, my friends all treated me the same, and I didn’t particularly want anything different. I’m not a new person. One of my childhood friends once said to me, “That’s the Brooke I’ve known for twelve years.”

Abigail Thorn, who makes video essays about topics in philosophy, defined transphobia as a form of “metaphysical skepticism” -- being skeptical that trans people are the gender they say they are. According to her, this is the root of all trans-related issues, from bathrooms to medical care.

If you begin with the assumption that trans people are the gender they say they are, then the solutions are obvious. Of course they should use the bathrooms that match their gender. Of course they should have access to hormone replacement treatment in order to bring their bodies more in line with their gender. Of course they should have the ability to correct their legal name and gender marker.

Alternatively, if you approach these questions from a place of skepticism, things get a bit more complicated, and you open yourself up to all sorts of little gray areas.

The default mindset in our society is something along the lines of, “Sure, I’ll call people what they want to be called. It seems like the right thing to do. I don’t want to cause conflict.” And that seems adequate at first. But this sort of mindset can coexist with skepticism about the identities of trans people, which leaves the door open to transphobia.

“Well, it might be good to keep the long waiting times for trans healthcare, just to make sure they’re sure...”

“I get that trans people might want to change their gender on their drivers’ license, but these are official documents, they need to be an accurate representation...”

Accepting the gender identities of others as absolute truth is a strictly necessary prerequisite for trans acceptance. Gender might be a binary, but acceptance is not. It’s a pass/fail. You can’t get four points out of **five**.

6

A strong conviction that one has the typical feelings and reactions of the other gender (or some alternative gender different from one's assigned gender).

Six minutes before I got home, I decided to finally tell my father. We had spent the day skiing, and we had a long drive home, which I spent mostly in nervous silence. Eventually, knowing that I'd have to have the talk at some point, and knowing that this was the best chance I'd get for a while, I decided to start the conversation.

I started by talking about my depression. I talked about how I had struggled to find joy in things, and how I had developed some unhealthy coping mechanisms as a result.

“Maybe there's not really an answer to this, but... where does this kind of thing start?”

“That's... the reason I wanted to talk to you.”

“I'm transgender.”

Sixty seconds passed without either of us saying a word.

“So, you feel more... female?”

I could tell he didn't really know what he meant with that question. I didn't either.

Gender is like the skin we all wear in society. What does it feel like to have skin?

What does it feel like when you get a cut?

You feel pain, yes. You feel relief when it stops bleeding, of course. But what is the actual *feeling* of having a cut on your skin?

Think about it for a second. And then stop once you realize the train of thought doesn't actually go anywhere. At night, the sun just keeps circling around the earth; it doesn't disappear to somewhere new when the clock hits **six**.

B

The condition is associated with clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Believe it or not, the DSM wrapped up their vague and poorly-defined criteria with a vague and poorly-defined conclusion.

Distress. The Oxford dictionary defines it as “extreme anxiety, sorrow or pain.”

The Pain Scale already shows us that:

- 1) there is no objective measure of pain, and
- 2) without blocking out the cultural expectations of what pain is and placing absolute confidence in one’s own feelings, we can’t even get a good relative measure.

...but I’ve already taken a leap of faith in blocking out expectations and placing confidence in my own feelings.

...and I don’t need an absolute measure. I have an initial state, p_0 , of my pain before transitioning. I have a final state, p_c , of my pain after transitioning. Even with a measurement error of ϵ_M , we can still arrive at a precise delta.

$$(p_c + \epsilon_M) - (p_0 + \epsilon_M) = (p_c - p_0) + (\epsilon_M - \epsilon_M) = p_c - p_0 = \Delta p$$

So, with both confidence in my algebra and apologies to Eula Biss, I’ll proceed.

January 1, 2019. As much as I tried to chase after a sense of purpose, it never seemed to manifest itself. I threw myself into schoolwork and extracurriculars, trying to find something that could take away the numbness of life. Let $p_0 = 6$.

January 1, 2020. I started to feel that transition was probably my best shot at happiness, but it just seemed like such a far-away possibility. I felt powerless. Let $p_1 = 8$.

January 1, 2021. I had begun talking to my friends about my gender identity. By hanging out with them, I finally started to feel how incredible life could be if I lived as myself. But this only confirmed my belief that things weren't going to get better unless I continued to transition. Despite those brief periods of wonderful emotion, the numbness was growing. I started cutting to cope with it, and quickly found myself unable to stop. Let $p_2 = 10$.

Present day. Finally, I wear the clothes I want to wear, I use the name I want to use, and I live my life as myself. I feel incredible. Every day I wake up excited to experience my own life, instead of the life society tried to force upon me. And yet, I'm spending my first months in an unfamiliar place, without support from my parents. At least I don't have to worry about homesickness. Let $p_c = 3$.

...but that isn't the final measurement. It's p_c , not p_f . My current state of pain is not necessarily my final state of pain. And algebra can't help me find that.

Maybe calculus can, though. Every day, I'm feeling more and more confident in myself. The first time I wore a skirt, my hands were shaking for the entire day. Today, it's just another Tuesday. The pain is decreasing. Let $\frac{d}{dt}p_t < 0$.

But how will things be in the future? The derivative is less than zero, so the function cannot approach a value greater than 3.

$$0 \leq \lim_{t \rightarrow \infty} p_t \leq 3$$

I might never reach zero pain. Yet, every day, I feel more and more alive.