

[The care of transgender people \(rcpsych.ac.uk\)](https://www.rcpsych.ac.uk)

By **Dr Sarah Murjan** and **Dr Christina Richards**

60 minutes long (1 CPD Credit)



Transgender people are becoming more visible in society and so more common in the day-to-day work of psychiatrists. While transgender (trans) people are no more likely to have major mental health problems than non-trans people (also commonly referred to as 'cisgender' people), trans people are nonetheless still subject to the range of mental health issues cisgender people may face.

Such mental health issues may be exacerbated by discrimination and associated minority stress. Discrimination and minority stress can, of course, precipitate conditions such as depression and anxiety.

This module aims to equip psychiatrists with some basic information about trans people to aid them in practising in a sensitive manner with this sometimes marginalised group. It will also signpost when to refer on to specialist gender clinics, and detail a little of the work of psychiatrists and the multidisciplinary team within such clinics.

[Gender dysphoria \(rcpsych.ac.uk\)](https://www.rcpsych.ac.uk)

By **Professor Kevan R Wylie**

90 minutes long (1.5 CPD Credits)



This module will assist the clinician in the assessment, support and management of individuals with gender concerns, transgenderism and gender dysphoria.

A patient-centred approach to care supported by transgender affirmative clinicians will maximise a beneficial outcome for the gender dysphoric patient and his or her associates.

A number of assessment interviews, often with members of a multidisciplinary team, are necessary to confirm the diagnosis and to exclude significant comorbid conditions that may affect progress.

The role of the psychiatrist in supporting the patient with gender dysphoria is considered alongside more specific interventions such as psychotherapy and assessment for progression to hormone therapy and gender confirmation surgery.

This module is accompanied with video of patients' accounts of gender dysphoria and their experience of the real-life process and transition.

[Prevent strategy: safeguarding freedom of expression and preventing stigma \(rcpsych.ac.uk\)](https://rcpsych.ac.uk)

By **Professor Lisa Downing** and **Dr Jonathan Hurlow**

60 minutes long (1 CPD Credit)



Psychiatrists are required 'in the exercise of [their] functions' to 'have due regard to the need to prevent people from being drawn into terrorism' (Section 26(1) of the Counter-Terrorism and Security Act 2015). When carrying out their Prevent duty, psychiatrists may find themselves in situations where their ethical commitment to freedom of expression and wish to avoid perpetuating social stigma are challenged by, or appear in conflict with, this duty.

In response to the enactment of this statutory duty, the Royal College of Psychiatrists' (RCPsych's) Professional Practice and Ethics Committee offers guidance on ethical considerations arising from the Government's counter-terrorism strategy in Position Statement PS04/16S. This includes specific guidance on the risk of perpetuating stigma for people with 'mental illness', 'certain communities', and those who 'dissent against authority'.

This module should enable participants to learn and practise how to critically evaluate the risk of reducing freedom of expression and perpetuating stigma, while upholding this statutory duty.

[Combating stigma \(rcpsych.ac.uk\)](https://rcpsych.ac.uk)

By **Aliya Kassam, Francesca Lassman, Professor Graham Thornicroft** and **Claire Henderson**

60 minutes long (1 CPD Credit)



Stigma and discrimination against people with mental illness constitute a significant public health concern, leading to poorer access to healthcare, poverty, reduced access to education and work, and increased comorbidity and mortality.

This has been acknowledged by mental health policies. For instance in the UK mental health policy for 2011-15, one of the six key objectives of the Government's mental health strategy specifies the need to ensure fewer people experience stigma and discrimination due to their mental illness. Internationally, the World Health Organisations' Mental Health Action Plan 2013 - 2020 specifies that people affected by mental illness should be able to participate fully in society and at work, free from stigmatisation and discrimination.

Although there is no generally accepted specific theory of stigma, it can be defined as 'an attribute that is deeply discrediting and that reduces the bearer from a whole and usual person to a tainted, discounted one' (Goffman, 1963).

Attitudes held by health professionals, including those who work in and outside of mental health, can have positive and negative impacts upon patient quality of care.

In this module, we look at the impact of stigma and discrimination on the public and private lives of people with mental illness. We will also look at what are the active ingredients for reducing stigma.

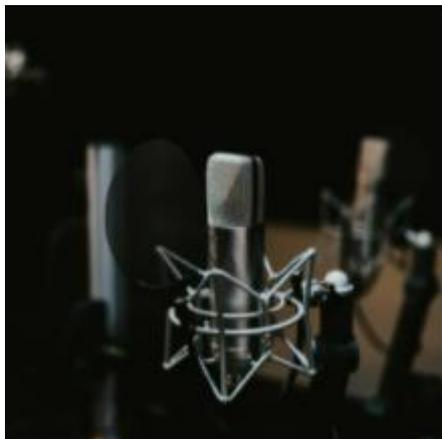
We shall ask:

- What is stigma?
- How does stigma interfere with the quality of life of people with mental illness?
- What can people including psychiatrists do to reduce stigma?

[Combating stigma \(rcpsych.ac.uk\)](http://rcpsych.ac.uk)

By **Professor Graham Thornicroft**

PODCAST **26** minutes long (0.75 CPD Credits)



Professor Graham Thornicroft discusses the issue of stigma, looking at the current research and asking what can be done at local and national levels as well as by psychiatrists themselves to combat the stigmatisation of people with mental illness.