

# Session 9 - Gender Identity

## Resources

When Harry Became Sally: Responding to the Transgender Moment - Ryan T. Anderson

<https://www.barnesandnoble.com/w/when-harry-became-sally-ryan-anderson/1125792437>

Trans Life Survivors - Walt Heyer  
(Amazon)

AG Position Paper "Transgenderism, Transsexuality, And Gender Identity"  
<https://ag.org/Beliefs/Position-Papers/Transgenderism-Transsexuality-and-Gender-Identity>

<https://inhisimage.movie/>

## Terminology

**Transgender:** An umbrella term for people whose gender identity does not match the sex they were assigned at birth. Transgender people may identify as straight, gay, bisexual or some other sexual orientation.

**Assigned sex at birth:** The sex (male or female) assigned to a child at birth, most often based on the child's external anatomy. Also referred to as birth sex, natal sex, biological sex or sex.

**FTM:** Female-to-male transgender person. Sometimes identifies as a transgender man. Someone assigned the female gender at birth who identifies on the male spectrum.

**MTF:** Male-to-female transgender person. Sometimes known as a transgender woman. Someone assigned the male gender at birth who identifies on the female spectrum.

**Genderqueer and/or nonbinary:** People whose gender identity and/or gender expression falls outside the binary categories of man and woman. They may define their gender as falling somewhere in between man and woman, or they may define it as wholly different from these terms.

**Gender affirming:** Adjective used to refer to behaviors or interventions that affirm a transgender person's gender identity (e.g., a physician using cross-sex hormones for a transgender patient may be called gender affirming, as can the use of a correctly gendered pronoun.)

**Transition:** An individualized process in which transgender people move from living aligned with the sex they were assigned at birth to living aligned with their gender identity. There are three general aspects to transitioning: social (e.g., presentation, relationships, employment, names/pronouns); medical (e.g., hormones, surgery, mental health) and legal (e.g., changing gender marker and name on legal documents and identification). Each person's transition path is unique.

# Cultural Reality

## **Gender Identity now *determines* sex, rather than biological sex characteristics**

The phrase “sex assigned at birth,” i.e., imposed from outside, is now favored because it makes room for “gender identity” as the real basis of a person’s sex. In an expert declaration to a federal district court in North Carolina concerning House Bill 2, Dr. Deanna Adkins stated, “From a medical perspective, the appropriate determinant of sex is gender identity.” Dr. Adkins is a professor at Duke University School of Medicine and the director of the Duke Center for Child and Adolescent Gender Care (which opened in 2015). When there is not a “complete alignment among sex-related characteristics,” she says—and she includes “gender identity” among these characteristics—then “a more careful consideration of sex assignment is needed.” And in these cases, “medicine and science require” that the carefully considered basis of sex assignment be “gender identity rather than other sex characteristics.” This is a remarkable claim, not least because the argument recently was that gender is only a social construct, while sex is a biological reality. Now, activists claim that gender identity is destiny, while biological sex is the social construct.

Adkins argues that gender identity is not only the preferred basis for determining sex, but “the only medically supported determinant of sex.” Every other method is bad science, she claims: “It is counter to medical science to use chromosomes, hormones, internal reproductive organs, external genitalia, or secondary sex characteristics to override gender identity for purposes of classifying someone as male or female.”

Declaration of Deanna Adkins, M.D., U.S. District Court, Middle District of North Carolina, Case 1:16-cv-00236-TDS-JEP, p. 5.

## **The consequences for nonconformity are becoming more widespread and severe.**

In New York City, you can now be fined up to a quarter million dollars for intentionally “misgendering” someone by using pronouns other than those the person prefers.

Eugene Volokh, “You can be fined for not calling people ‘ze’ or ‘hir,’ if that’s the pronoun they demand that you use,” Washington Post, May 17, 2016.

And in October 2017, the governor of California signed a new law that could send health-care workers to jail for failing to use a person’s chosen pronouns.

The text of California’s Senate Bill 219 is here:

[https://leginfo.ca.gov/faces/billNavClient.xhtml?bill\\_id=201720180SB219](https://leginfo.ca.gov/faces/billNavClient.xhtml?bill_id=201720180SB219); see also Amy Swearer, “California Lawmakers Want to Force Doctors, Nursing Home Staffs to Deny Their Consciences,” Daily Signal, August 30, 2017.

In several states, a doctor who would look into the psychological history of a transgendered boy or girl in search of a resolvable conflict could lose his or her license to practice medicine

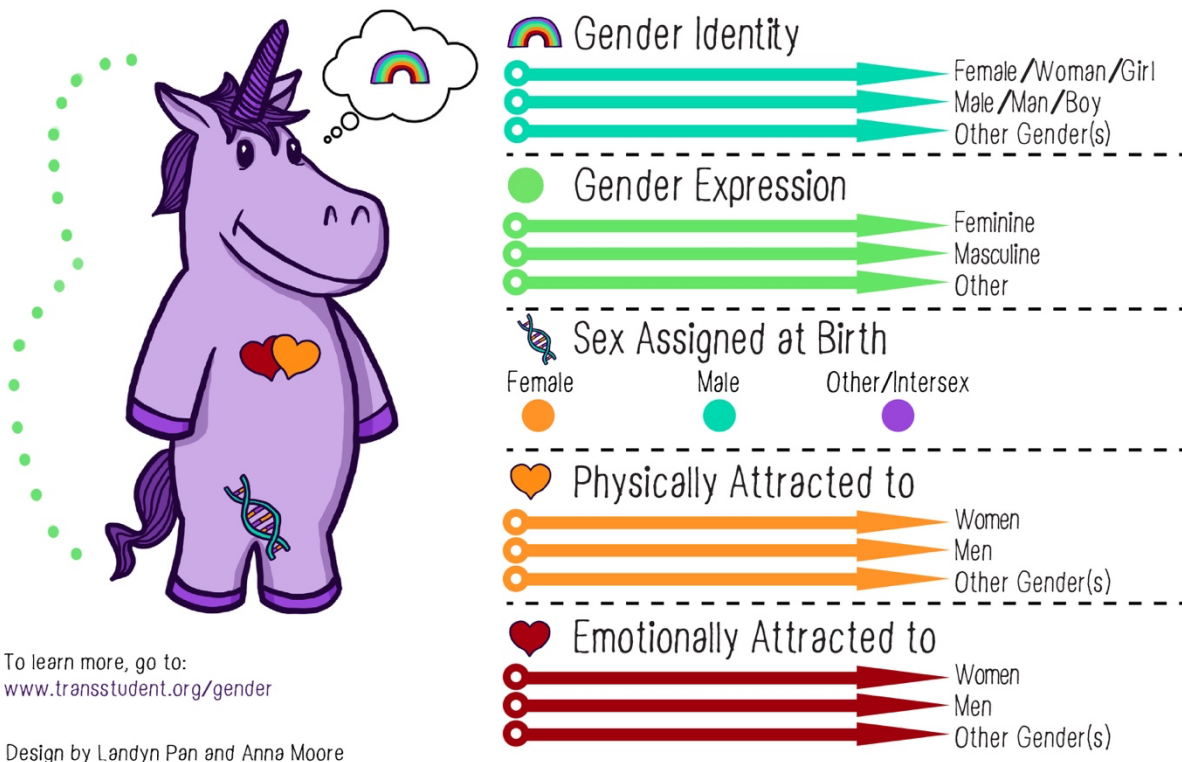
Paul McHugh, “Transgenderism: A Pathogenic Meme,” Public Discourse, June 10, 2015.

## The Transgender agenda is growing in public schools

Activists are particularly intent on promoting their policy agenda in schools, with serious consequences not only for students' privacy and safety, but also for their development: for what is taught about biological sex and gender identity, and for whether children with gender dysphoria will be helped or harmed. We can see what this agenda looks like in a document titled *Schools in Transition: A Guide for Supporting Transgender Students in K–12 Schools*, which was jointly produced by the ACLU, the Human Rights Campaign, Gender Spectrum, the National Center for Lesbian Rights, and the National Education Association. That's right: the nation's largest teachers' union partnered with LGBT organizations to formulate the guidelines for schools.

# The Gender Unicorn

Graphic by:  
**TSER**  
Trans Student Educational Resources



Other students may not be told that they will be sharing a bathroom or locker room or shower, or a dorm room or hotel room during field trips, with a student who identifies as transgender. Concerning overnight field trips, a “school has an obligation to maintain the [transgender] student’s privacy and cannot disclose or require disclosure of the student’s transgender status to the other students or their parents.” This means

that girls will have no advance notice that a boy who identifies as a girl but has all of the standard male body parts will be undressing in their locker room or shower, or spending the night in their hotel room.

Human Rights Campaign, *Schools In Transition*

If a female student feels that her privacy is violated upon discovering a biological male in a women's facility, the guidelines suggest first trying to indoctrinate her in transgender ontology. She should be taught to discard "the false idea that a transgender boy is not a 'real' boy, a transgender girl is not a 'real girl.'" If this effort fails and a student still feels that her privacy is not being respected, the guidelines suggest an accommodation, but one that gives priority to the feelings of the transgender student: "Any student who feels uncomfortable sharing facilities with a transgender student should be allowed to use another more private facility like the bathroom in the nurse's office, but a transgender student should never be forced to use alternative facilities to make other students comfortable.

Concerns regarding competitive advantage are unfounded and often grounded in sex stereotypes about the differences and abilities of males versus females." After all, a transgender girl was simply "assigned male at birth," and the guidelines assure us that "she [sic] still falls within the wide range of athletic abilities of her [sic] female peers." There is no guidance on athletic policies for students who are gender-fluid or who in other ways reject the gender binary.

The guidelines give advice on how to use a student's preferred name and pronouns in class, but the legal name and normal sex-specific pronouns in communications with parents, to hide their child's social transition. So parents whose ten-year-old son is identifying as a girl in school and being treated as a girl by his classmates and teachers could be intentionally kept clueless. If parents do find out and are "unsupportive," schools are instructed to "support the student's family in accepting their child's gender identity and seek opportunities to foster a better relationship between the student and their family." Rather than respect parental authority in the education and health of their children,

Puberty blockers and cross-sex hormones may be in "that child's best interests," according to the activists. These medications, they claim, "act as a pause button and give the youth an opportunity to explore their gender identity without the distress of developing the permanent, unwanted physical characteristics of their assigned sex at birth." Then a treatment plan can be worked out, which may include "cross-sex hormones to induce a puberty that is consistent with their gender identity."

What if the family doesn't want to go along with puberty blockers and cross-sex hormones? Activists suggest that Child Protective Services might then intervene, on the grounds that the home is a "toxic environment" for the child.

DHS workers will go and say you're creating an unsafe environment for your child. And we need to have that stop ... unfortunately staying in that home environment is going to result in a child's suicide.

Suicidality Symposium, USPATH 2017 (excerpt), quoted in "Reportable trauma'? US gender docs 'train' judges & call CPS on balking parents," 4thWaveNow, February 25, 2017.

## **Gender Identity is fixed**

While activists claim that the possibilities for gender identity are rather expansive—man, woman, both, neither—they also insist that gender identity is innate, or established at a very young age, and thereafter immutable. Dr. George Brown, a professor of psychiatry and a three-time board member of the World Professional Association for Transgender Health (WPATH), stated in his declaration to the federal court in North Carolina that gender identity "is usually established early in life, by the age of two to three years old." Addressing the same court, Dr. Adkins asserted that "evidence strongly suggests that gender identity is innate or fixed at a young age and that gender identity has a strong biological basis." Declaration of Deanna Adkins

### **A few valid questions regarding gender identity**

How can one's identity be unchangeable (be immutable) with respect to an ever-changing social construct? And if gender identity is innate, how can it be "fluid"?

Why do our feelings determine reality on the question of sex, but on little else? Our feelings don't determine our age or our height. And few people buy into Rachel Dolezal's claim to identify as a black woman, since she is clearly not. If those who identify as transgender are the sex with which they identify, why doesn't that apply to other attributes or categories of being? What about people who identify as animals, or able-bodied people who identify as disabled? Do all of these self-professed identities determine reality? If not, why not? And should these people receive medical treatment to transform their bodies to accord with their minds? Why accept transgender "reality," but not trans-racial, transspecies, and trans-abled reality? The challenge for activists is to explain why a person's "real" sex is determined by an inner "gender identity," but age and height and race and species are not determined by an inner sense of identity

## Science and Research

### **There is no evidence that surgery improves someone's psychological health.**

McHugh encouraged Jon Meyer, a psychiatrist and psychoanalyst at Hopkins, to follow up with adults who had undergone sex change operations at the hospital and determine whether the surgery was beneficial in the long term. Meyer found that only a few of the patients he tracked down some years after their surgery actually regretted it, yet most did not appear to have benefitted psychologically. "They had much the same problems with relationships, work, and emotions as before. The hope that they would emerge

now from their emotional difficulties to flourish psychologically had not been fulfilled.” While the surgery may have provided some subjective satisfaction, it brought little real improvement in well-being. After studying the evidence, McHugh decided that sex change surgery was bad medicine and was “fundamentally cooperating with a mental illness.” Psychiatrists, he thought, could better help patients with gender dysphoria by “trying to fix their minds and not their genitalia.”

Paul R. McHugh, “Surgical Sex,” First Things, November 2004.

“Transitioning” treatment has not been shown to reduce the extraordinarily high rate of suicide attempts among people who identify as transgender (41 percent, compared with 4.6 percent of the general population).

Anne P. Haas, Philip L. Rodgers, and Jody Herman, “Suicide Attempts Among Transgender and Gender Non-Conforming Adults: Findings of the National Transgender Discrimination Survey,” Williams Institute, UCLA School of Law (January 2014)

People who have had transition surgery are nineteen times more likely than average to die by suicide.

Cecilia Dhejne et al., “Long-term follow-up of transsexual persons undergoing sex reassignment surgery: cohort study in Sweden,” PLOS ONE 6 (February 2011): e16885

Cari Stella conducted a survey on her blog in 2016 of previously dysphoric women who have either stopped their transition or taken steps to reverse it. Within the short span of two weeks, 203 women responded. The results are available at:

<http://guideonragingstars.tumblr.com/post/149877706175/female-detransition-and-reidentification-survey>

How has stopping transition impacted your dysphoria?

11% Completely gone

64.5% Better than transition

17% Same as transition

7.5% Worse than transition

Do you believe you were given adequate counseling and accurate information about transition?

6% Yes

26.1% Somewhat

67.8% No

## **Most children grow out of it.**

The best studies of gender dysphoria show that between 80 and 95 percent of children who express a discordant gender identity will come to identify with their bodily sex if natural development is allowed to proceed.

See Paul R. McHugh, Paul Hruz, and Lawrence S. Mayer, Brief of Amici Curiae in Support of Petitioner, Gloucester County School Board v. G.G., Supreme Court of the United States, No. 16-273 (January 10, 2017), 12; and Jesse Singal, “What’s Missing From the Conversation About Transgender Kids,” Science of Us, New York, July 25, 2016

## **Gender is biologically determined and affected.**

Langman's Medical Embryology concisely explains how the sex of a new organism is determined at fertilization: "An X-carrying sperm produces a female (XX) embryo, and a Y-carrying sperm produces a male (XY) embryo. Hence, the chromosomal sex of the embryo is determined at fertilization." A new human organism of a particular sex is created at that moment.

T. W. Sadler, *Langman's Medical Embryology* (Philadelphia: Lippincott Williams & Wilkins, 2004), 40.

Male and female organisms have different parts that are functionally integrated for the sake of their whole, and for the sake of a larger whole—their sexual union and reproduction. Sex, in terms of male or female, is identified by the organization of the organism for sexually reproductive acts. Sex as a status—male or female—is a recognition of the organization of a body that has the ability to engage in sex as an act. More than simply being identified on the basis of such organization, sex is a coherent concept only on the basis of that organization. The fundamental conceptual distinction between a male and a female is the organism's organization for sexual reproduction.

Maureen L. Condic and Samuel B. Condic, "Defining Organisms by Organization," *National Catholic Bioethics Quarterly* 5, no. 2 (Summer 2005): 336

For the first six weeks of human embryological development, males and females develop in more or less the same way. One textbook explains that "the early genital systems in the two sexes are similar; therefore the initial period of genital development is referred to as the indifferent state of sexual development."

As the gonads start to develop, they are referred to as "indifferent gonads" because under some circumstances they can develop as either male or female, independent of the genetic sex. The presence of a Y chromosome with the SRY testis determining factor initiates the formation of testicular differentiation in week 7. The absence of SRY allows the indifferent gonads to continue development into the ovaries. The formation of the gonads—testicles and ovaries—then directs subsequent sexual differentiation. As *The Developing Human* explains it, "the type of sex chromosome complex established at fertilization determines the type of gonad that differentiates from the indifferent gonad. The type of gonads present then determines the type of sexual differentiation that occurs in the genital ducts and external genitalia."

Once the ovaries and testes are formed, we read in the *Journal of Cellular Physiology*, they become "the primary regulators of mammalian sexual differentiation by secreting sex-specific hormones that regulate downstream developmental processes. Thus, these reproductive tissues impose body-wide and long-lasting phenotypic effects."

Genotype, you may recall, refers to our genetic composition, while phenotype refers to its physical manifestation, so an ordinary male has an XY genotype, which expresses itself in a male phenotype through the development of testes. The Y chromosome

carrying the SRY gene initiates the formation of the testes, which in turn produce testosterone, which then masculinizes the body and contributes to the development of a male. Otherwise, without a Y carrying SRY, the human will normally form ovaries and develop as a female.

The primary development of our sexed bodies takes place in the womb with the formation of the gonads, either ovaries or testes. The secondary development of our sexed bodies takes place in two stages. It begins in the womb, with the development of our reproductive organs, external genitalia, and sex hormones. Then, it continues at puberty, when our bodies reach sexual maturity.

Apart from reproductive organs, boys and girls have remarkably similar bodies at birth, though newborn boys have longer bodies with more lean mass. During puberty, however, bodily differences become more pronounced, as “the two sexes take increasingly divergent pathways, with girls passing through puberty earlier and ceasing to grow at a younger age.” Here is how one scholar put it in *Best Practice and Research: Clinical Endocrinology and Metabolism*:

Females enter puberty earlier and undergo a more rapid pubertal transition, whereas boys have a substantially longer growth period. After adjusting for dimorphism in size (height), adult males have greater total lean mass and mineral mass, and a lower fat mass than females. These whole-body differences are complemented by major differences in tissue distribution. Adult males have greater arm muscle mass, larger and stronger bones, and reduced limb fat, but a similar degree of central abdominal fat. Females have a more peripheral distribution of fat in early adulthood; however, greater parity and the menopause both induce a more android fat distribution with increasing age. Sex differences in body composition are primarily attributable to the action of sex steroid hormones, which drive the dimorphisms during pubertal development. Estrogen is important not only in body fat distribution but also in the female pattern of bone development that predisposes to a greater female risk of osteoporosis in old age.

*The result is that male and female bodies differ not only in their sex chromosomes (XX and XY) and in their organization for reproduction, but also, on average, in size, shape, bone length and density, fat distribution, musculature, and various organs including the brain. These secondary sex differences are not what define us as male or female; organization for reproduction does that.* But this organization leads to other bodily differences. There are organizational differences and organism-wide differences in organs and tissues, as well as differences at the cellular and molecular levels. These differences affect not just our physiology, but also our minds.

Indeed, after the reproductive organs, the brain is possibly the most “sexed” organ in a human being. This is not to say that there are male brains and female brains, but that on average there are differences in the brains of males and females that tend to make a

difference in how men and women experience emotion and pain, how they see and hear, and how they remember and navigate.

- Moore and Persaud, *The Developing Human*, 304.

- Nichole Rigby and Rob J. Kulathinal, "Genetic architecture of sexual dimorphism in humans," *Journal of Cellular Physiology* 230, no. 10 (2015): 2305.

- Jonathan C. K. Wells, "Sexual dimorphism of body composition," *Best Practice & Research: Clinical Endocrinology & Metabolism* 21 (2007): 415.

## What do we as Christians believe?

**Transgenderism doesn't always involve homosexual orientation or practice.**

We'll deal with transgenderism itself, apart from homosexual practice.

**Gender Identity is much different than religious faith.**

"A strong belief in who am sounds a lot like religious faith."

- My faith doesn't determine reality.
- My faith operates apart from my emotions.
- My faith is rooted in God's Word, which doesn't change.

**God created mankind male and female.**

### **Genesis 2:18-25**

The Lord God said, "It is not good for the man to be alone. I will make a helper suitable for him." 19 Now the Lord God had formed out of the ground all the wild animals and all the birds in the sky. He brought them to the man to see what he would name them; and whatever the man called each living creature, that was its name. 20 So the man gave names to all the livestock, the birds in the sky and all the wild animals. But for Adam no suitable helper was found. 21 So the Lord God caused the man to fall into a deep sleep; and while he was sleeping, he took one of the man's ribs and then closed up the place with flesh. 22 Then the Lord God made a woman from the rib he had taken out of the man, and he brought her to the man. 23 The man said, "This is now bone of my bones and flesh of my flesh; she shall be called 'woman,' for she was taken out of man." 24 That is why a man leaves his father and mother and is united to his wife, and they become one flesh. 25 Adam and his wife were both naked, and they felt no shame.

### ***Suitable - kenegdo***

compound word made up of **ke**, which means "as" or "like" and **neged**, which means "opposite" or "against"

God made Adam a helper suitable for him, and she was like him and opposite him.

Sameness and difference. Adam delights in that the woman is not another animal AND not another man.

“This is now bone of my bones and flesh of my flesh; she shall be called ‘woman,’ for she was taken out of man.”

Adam calls her **ishshâh** because she was taken out of **îysh**  
She is bone of my bone, the same as me, AND she is different than I am.

### **Genesis 1:27**

So God created mankind in his own image, in the image of God he created them; male and female he created them.

There is clear distinction between male and female.

To call into question, or to blur the lines between the distinctions of male and female is working against God’s creation, intention, and purpose.

**God created two distinct genders for a specific purpose.**

### **Genesis 1:28**

God blessed them and said to them, “Be fruitful and increase in number; fill the earth and subdue it. Rule over the fish in the sea and the birds in the sky and over every living creature that moves on the ground.”

Be fruitful and multiply.

God male and female so that they would reproduce and fill the earth.

We are working against God’s purpose when we bring damage to our reproductive organs.

Marriage reflects the relationship of Christ and the church.

### **Ephesians 5:22–27**

Wives, submit yourselves to your own husbands as you do to the Lord. 23 For the husband is the head of the wife as Christ is the head of the church, his body, of which he is the Savior. 24 Now as the church submits to Christ, so also wives should submit to their husbands in everything. 25 Husbands, love your wives, just as Christ loved the church and gave himself up for her 26 to make her holy, cleansing her by the washing with water through the word, 27 and to present her to himself as a radiant church, without stain or wrinkle or any other blemish, but holy and blameless.

**Gender distinction is emphasized in the OT law.**

**Deuteronomy 22:5** - A woman must not wear men’s clothing, nor a man wear women’s clothing, for the Lord your God detests anyone who does this.

detests (*toebah*), or an "abomination" to God.

The Hebrew *toebah* is used throughout the Old Testament for ritual and ethical activities that God detests including idolatry (Deuteronomy 7:25) and sexual immorality

(Leviticus 18:29), but also for other violations of proper order including unethical business practices (Deuteronomy 25:13–16) and troublemaking (Proverbs 6:16–19).

These kinds of acts aren't considered to be irrelevant now that we're under the new covenant. These are practices that continue to go against God's intention and will for how His people should conduct themselves.

This is consistent with the Genesis account, that Jesus quotes, in that male and female are unique and should be honored as distinctly different.

### **The body is sacred.**

#### **1 Corinthians 6:13–20**

The body, however, is not meant for sexual immorality but for the Lord, and the Lord for the body. 14 By his power God raised the Lord from the dead, and he will raise us also. 15 Do you not know that your bodies are members of Christ himself? Shall I then take the members of Christ and unite them with a prostitute? Never! 16 Do you not know that he who unites himself with a prostitute is one with her in body? For it is said, "The two will become one flesh." 17 But whoever is united with the Lord is one with him in spirit.

18 Flee from sexual immorality. All other sins a person commits are outside the body, but whoever sins sexually, sins against their own body. 19 Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; 20 you were bought at a price. Therefore honor God with your bodies.

### **Paul emphasizes gender distinction in corporate worship.**

#### **1 Cor. 11:4-6**

Every man who prays or prophesies with his head covered dishonors his head. **5** But every woman who prays or prophesies with her head uncovered dishonors her head—it is the same as having her head shaved. **6** For if a woman does not cover her head, she might as well have her hair cut off; but if it is a disgrace for a woman to have her hair cut off or her head shaved, then she should cover her head.

#### **14-15**

Does not the very nature of things teach you that if a man has long hair, it is a disgrace to him, **15** but that if a woman has long hair, it is her glory? For long hair is given to her as a covering.

Paul isn't giving us a command for today in the sense that men can't have long hair, or that women should wear a covering, or can't have short hair. He's emphasizing that there should be a clear distinction between male and female.

**Jesus rejects, and tells us to reject, personal emotions (what we want or what we feel is right) when they aren't in line with God's will.**

Jesus' in the desert - **Matthew 4:1–10**

Jesus' in the pulpit (so to speak) - **Matthew 4:17, Matthew 16:24-27**

Jesus' in the garden - **Matthew 26:36–46**

**Gender Dysphoria often reveals deep spiritual, emotional, and psychological needs**

We must understand that transgenderism is not the root issue and that many who identify as transgender are victims of abuse.

## How do we as Christians respond?

### **1. Don't fear the claim that we are contributing to suicide.**

Excerpt from *Can You Be Gay and Christian?*, by Michael Brown.

“Of course, RightWingWatch.org, along with scores of other gay and gay-affirming websites, lays much of the blame for that alleged “stigma and discrimination” at the foot of the church - at least the conservative, Bible believing church. It's not surprising, then, that commentators responding to some of my online articles have made the claim that I have the blood of many young gay people on my hands because I teach that God does not endorse or bless homosexual practice. In keeping with the mentality, when a large Christiana ministry claimed that it helped gays become straight, it was accused of being responsible for many suicides among gays who tried to change.”

“You see, I am convinced that the message of Jesus brings life, not death; hope, not despair; liberation, not bondage. The message of Jesus believers people from suicide rather than driving them to commit suicide. ... I have rejoiced over the stories of those who were once suicidal *because* they were living gay lifestyles - including “gay Christian” lifestyles - but who were delivered from suicide when they acknowledged their sin and turned to the Lord for forgiveness.”

“So it's important that Bible-believing Christians draw a line in the sand and make this determination: *I will not let threats of suicide stop me from doing what is right, with compassion and with courage.* And if someone wants to hang this over my head, telling me that a book like this will lead to gay suicides, I could just as well say in reply, “If you encourage gays and lesbians *not* to read it, you could be contributing to their suicides.”

### **2. Help people identify with their birth sex.**

### **3. Deal with other sins, habits, and spiritual disciplines.**

### **4. Offer hospitality and community.**

### **5. Have patience.**