Summer 2017


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Leader's and Participant’s Guide to

What do Christians believe about gender identity?

A Study of Understanding Gender Dysphoria: Navigating Transgender Issues in a Changing Culture

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Summer 2017
Thanks to: Prof. Tara Boer
How to Use This Material?

This study of gender dysphoria, gender identity, and homosexuality from a Christian perspective consists of 5 modules. Each module contains two sections. The first section presents a set of Reading and Reflection questions that are to be completed before each meeting and are meant to help the participant wrestle with the concepts introduced in that week’s chapters. The second section consists of two (or more) Discussion questions, which will be written by the participants and the leader as they read. Both sets of questions are meant to foster discussion, but your group should by no means limit itself to the questions contained in these sections.

This study is intended for **informal, small group** discussion, such as that of a Bible study or small group. The themes presented in each submodule may be unpacked on their own, but it is the hope of the authors that the entire study may be useful to the interested reader (leader and participant alike). The study is also aimed toward high school students, college students, and post-college adults with an interest in how science and the Christian faith interact.

As you read, it is our hope that you will come across (and come up with) questions which challenge you, both in understanding your personal faith and in understanding science. In these questions, you will have the opportunity to grow through asking and answering these questions: Why has the church historically believed in *this* answer or *that* answer? How might you be challenged to defend your answer?
Who is the author of *Understanding Gender Dysphoria*?

Mark A. Yarhouse, Psy.D., is the Hughes Endowed Chair and Professor of Psychology at Regent University in Virginia Beach, Virginia, where he is a core faculty member in the Doctoral Program in Clinical Psychology. He has spent some time with both ex-gay and celibate Christians in researching what is now called "gender dysphoria" but was once known as "gender identity disorder."

Dr. Yarhouse has spent several years promoting dialogue between people who view the topic of sexual identity differently. Fifteen years ago he chaired a groundbreaking symposium at the American Psychological Association’s annual convention that brought together gay psychologists and Christian psychologists to discuss common ground in treatment options for those who experience sexual and religious identity conflicts. He chaired similar dialogues at the APA on the many meanings of marriage (among different religions and among various groups within the gay community), services for adolescents experiencing sexual identity concerns, and an approach to services referred to as the sexual identity therapy framework.

Dr. Yarhouse is author or co-author of several books, including *Homosexuality and the Christian: A Guide for Parents, Pastors, and Friends*, *Ex-Gays? A Longitudinal Study of Religiously Mediated Change in Sexual Orientation*, and *Understanding Sexual Identity: A Resource for Youth Ministers*. His most recent book is titled *Understanding Gender Dysphoria: Navigating Transgender Issues in a Changing Culture*.

Read more about Yarhouse and his work on [http://sexualidentityinstitute.org/](http://sexualidentityinstitute.org/).
Introduction to Homosexuality and Gender Fluidity Modules

For better or worse, homosexuality is a huge, controversial, and often divisive debate in the Church (and in the world) today. There are hundreds and thousands of articles, blogs, studies, discussion threads debating the implications of "homosexuality" and "transgenderism" for Christians and Christianity. Traditionally, the church has condemned same-sex attraction, orientation, and behavior in all circumstances. Recently, however, with the vast majority of mass media outlets validating and celebrating every imaginable variation on sexuality as an extension of basic human rights to "life, love, and the pursuit of happiness," the Church and the individual Christian alike have been confronted with the concept more frequently and intensely than ever before. What, then, does it mean to be called to love your neighbor when your neighbor is a homosexual (or bisexual—or heterosexual, for that matter)? Can a Christian be homosexual? Is a gay Christian called to a life of celibacy, or can a same-sex monogamous relationship be pleasing to God (and if the answer is yes, should that relationship be called a "marriage")?

These questions and more are ones we hope to address in the following modules. Because the topic is so wide, any bibliography on the concept of homosexuality is far from comprehensive. Thus, we encourage you to digest and reflect on the information presented here, but do not let your study and wonderings over the articles end with each author's bio blurb. Rather, continue searching. Continue reading and studying and discussing these ideas with friends and family—especially those within your Church family, with whom you may not initially—or ever—agree. Consider holding your own small group discussions over books, blogs, and current events on the topic (which will, no doubt, offer an ever-increasing wealth of knowledge and opinion to both challenge and affirm you in your struggle to witness to others as a fellow sinner and fellow Christian).

As Dr. Yarhouse writes in Understanding Gender Dysphoria, “There is an opportunity here to learn much more than we know at present, and we would do well to enter into the discussion with patience and humility as we balance multiple perspectives on how best to resolve what people often report to be an impossible situation” (27). For indeed, “gender dysphoria does not separate you from God; it does not consign you to hell” (142).
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Module 1: What is gender fluidity?

Chapters covered: Understanding Gender Dysphoria, “Introduction” and Chapter 1 "Gender Identity, Gender Dysphoria and Appreciating Gender Complexity"

The Gist

In these chapters, Yarhouse introduces the concept of gender dysphoria and raises questions on the controversial nature of sexuality today. “How should parents respond when a child displays behaviors more characteristic of the opposite sex?... Should cross-gender identification be encouraged for a child who is already gender dysphoric?... What options exist for teens and adults? Should they be encouraged to enter therapy to resolve the conflict through psychological intervention? Is cross-gender identification to be avoided, or should it be facilitated? When people have tried different interventions, what has been helpful? What are the reasons people pursue hormonal treatment and sex-reassignment surgery?... What are the long-term effects of these kinds of interventions?” (14), among others.

Next, he offers some background information on gender identity, including common assumptions and misunderstandings when we discuss gender. For a few pages, he determines and defines key terms for any discussion on gender issues (see “Terms” below).

Yarhouse also notes the psychological effects of gender dysphoria, which will—no doubt—be discussed in depth later in the book. “[The person navigating gender concerns] worries about who would believe them, what people would think about them, and so forth. This is tremendously isolating and often associated with other concerns, such as depression and anxiety” (22).

Finally, after a brief discussion of the necessity for Christians to study how best to respond to these issues, the author states conclusions from a study of male-to-female transgender Christians, which the reader may find interesting for further research. “Interestingly, some transgender Christians shared that their gender dysphoria led to a strengthening of their personal faith; others reported a past struggle with their faith, and still others left the organized religion with which they grew up. For some, the challenges they faced brought them closer to God, but others reported a strained relationship with God because of their gender dysphoria” (26). These conflicting responses—from positive to negative—illustrate the need for this topic to be analyzed and discussed more by the Church and individual Christians seeking to serve sexual minorities with the love and respect befitting other human beings.

Terms

(definitions in quotations have been taken from “Key Terms” boxes in the chapter, see pg. 17, 20-21)

**gender dysphoria** any significant or distressing concerns with gender identity; the condition of being uneasy about, dissatisfied, or frustrated with one’s experience of gender identity, one’s
sense of one’s self as male or female, and how that psychological and emotional experience is not aligning with one’s birth sex (see UGD pg. 20)

**sexual minorities** people who experience their sexual identity in ways that are different than those in the majority (gay, lesbian, bisexual)

**intersex/intersexual** a person suffering from any number of variations from the biological/physical/anatomical norm that make identifying as male or female problematic; “A term to describe conditions in which a person is born with sex characteristics or anatomy that does not allow clear identification as male or female. The causes of an intersex condition can be chromosomal, gonadal or genital”

**biological sex** “As male or female (typically with reference to chromosomes, gonads, sex hormones, and internal reproductive anatomy and external genitalia)”

**primary sex characteristics** “Features that are directly part of the reproductive system, such as testes, penis and scrotum in males, and ovaries, uterus and vagina in females”

**secondary sex characteristics** “Have no direct reproductive function, for example, facial hair in males and enlarged breasts in females”

**gender** “The psychological, social and cultural aspects of being male or female”

**gender identity** “How you experience yourself (or think of yourself) as male or female, including how masculine or feminine a person feels”

**gender role** “Adoption of cultural expectations for maleness or femaleness” (academic interests, career pursuits, and so on)

**Klinefelter Syndrome** a genetic disorder of gonadal differentiation in which a person has an extra X chromosome (XXY) instead of the normal XY pairing for males or XX for females (a child usually receives just one chromosome from each parent)

**true hermaphroditism** a condition of being born with either incomplete or mixed ovarian and testicular tissues

**androgen insensitivity syndrome** a physiological condition resulting from malfunctioning gonads and other prenatal conditions, in which a person has external female genitalia and an outward appearance as female but XY male chromosomes

**androgyne** not having a clearly defined sense of self as a man/woman; a bringing together of male/female qualities or characteristics

**transgender** “An umbrella term for the many ways in which people might experience and/or present and express (or live out) their gender identities differently from people whose sense of gender identity is congruent with their biological sex”
**cisgender** “A word to contrast with transgender and to signify that one’s psychological and emotional experience of gender identity is congruent with one’s biological sex”

**gender bending** “Intentionally crossing or ‘bending’ gender roles”

**cross-dressing** “Dressing in the clothing or adopting the presentation of the other sex. Motivations for cross-dressing vary significantly”

**third sex/third gender** “A term used to describe persons who are neither man nor woman, which could reference an intermediate state or another sex and gender or having qualities of both man/woman in one’s self”

**transsexual** “A person who believes he or she was born in the ‘wrong’ body (of the other sex) and wishes to transition (or has transitioned) through hormonal treatment and sex-reassignment surgery”

**Male-to-Female** (MtF) “A person who is identified as male at birth but experiences a female gender identity and has or is in the process of adopting a female presentation”

**Female-to-Male** (FtM) “A person who is identified at birth but experiences a male gender identity and has or is in the process of adopting a male presentation”

**genderfluid** “A term used when a person wants to convey that their experience of gender is not fixed as either male/female but may either fluctuate along a continuum or encompass qualities of both gender identities”

**genderqueer** “An umbrella term for ways in which people experience their gender identity outside of or in between a male-female binary (e.g., no gender, genderfluid). Some people prefer a gender-neutral pronoun (e.g., ‘one’)”

**drag queen** “A biological male who dresses as a female (typically flamboyant dress and appearance) for the purposes of entertaining others. Such a person may not experience gender dysphoria and does not tend to identify as transgender”

**drag king** “A biological female who dresses as a male (stereotypic dress and appearance) for the purposes of entertaining others. As with drag queens, such a person may not experience gender dysphoria and does not tend to identify as transgender”

**transvestism** “Dressing or adopting the presentation of the other sex, typically for the purpose of sexual arousal (and may reflect a fetish quality). Such a person may not experience gender dysphoria and may not identify as transgender. Most transgender persons do not cross-dress for arousal and see transvestism as a different phenomenon than what they experience”
Discussion Questions

What reason does Yarhouse offer for his interest in this field of research and study (see “Introduction”)?

Why have you chosen the topic of gender dysphoria for this small group discussion? What significance does it have for you or those with whom you interact?

Yarhouse writes, “When we refer to a person’s sex, we are commonly making reference to the physical, biological and anatomic dimensions of being male or female” (16), and he then distinguishes between sex and gender (for the sake of clarity). Does this make sense to you? Have you ever felt the need to make a distinction between a person’s sex and a person’s gender before?

Do you think there’s a Christian answer to gender issues that is capable of loving those suffering but still God-honoring and true to Scripture? In other words, can we (readers who may or may not identify with “the next generation of Christians”) draw distinctions in ethics and morality even without sacrificing relationships” (24)?

Have you ever personally experienced or known someone who personally experienced a gender identity conflict? Consider inviting this person to tell you more about their experiences. However, keep in mind, too, that the person is navigating gender identity questions in a cultural context in which many people will respond to them out of a culture war mentality (23).

From the very beginning of the book, Yarhouse notes the controversy in the realms of “politics, entertainment, the media and education” (24) surrounding gender identity issues. He writes, “the cultural opinion surrounding gay marriage represents a broader cultural opinion that extends to transgender issues and gender variant persons. These cultural shifts frequently trigger a response from social conservatives of concern and, in some cases, fear for the erosion of long-held norms... As Christians provide care to people in a sociocultural context characterized by ideological and political battles, we need to think about rising above the culture war when providing ministry and meaningful pastoral care and support. We keep it in view (it is inescapable) while we provide services and compassionate care.” How has the government responded to the increased presence and prevalence of gender fluidity in the present times? (see also: https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201120120SB1172, http://www.espn.com/video/clip?id=12568947). If you do follow the link to California's Senate Bill 1172, passed in 2012, summarize each of the 15 declarations of "the people of the state of California" in a few words, or, at most, a short sentence or two.
Module 2: Is homosexuality a "fallen" condition?

Chapter covered: UGD, Chapter 2 "A Christian Perspective on Gender Dysphoria"

Other Readings:


The Gist

In this chapter, Yarhouse reminds the reader that approaching a discussion on homosexuality from the realm of Christianity presents potential for two hazards (30). These hazards are 1) to look to Scripture for answers it is not prepared to provide and 2) to fail to critically reflect on the sociocultural context in which we live and make decisions about gender identity and dysphoria. He then discusses the “moral and ethical considerations” of gender dysphoria as a diagnosable condition.

The author takes time to discuss interpretation of Bible passages commonly cited with reference to the topic of gender dysphoria. These include 1 Corinthians 6:9-10 and Deuteronomy 22:5 and 23:1 (which should be read alongside Matt. 19:12 and Acts 8:26-39). Then, he moves the discussion toward broader themes where readers can have more confidence in what God is saying to them about gender dysphoria (creation, fall, redemption, glorification). Yarhouse sets aside a few pages for each theme except the last; only briefly does Yarhouse touch on the theme of glorification, and for good reason—most of what Christians can say about glorification is speculative (we do not and cannot yet know what life—and gender—will be like in heaven or in the new creation).

Within the theme of creation, he distinguishes between three different aspects of sexuality—gender sexuality, erotic sexuality, and genital sexuality—and reflects on such questions as “Why did God create two sexes?... What are the meaningful differences between men and women... Also, how does our gender permeate our lives as we live after the fall and before glorification?” (36). He also speculates on the meaning of the covenantal relationship between God and the people of God.

Within the realm of fall, he discusses various biological mutations that suggest that “our experience of ourselves (our bodies, our minds) are not as God intended” (39). Interestingly, this consideration follows up on an earlier quote from two authors named Looy and Bouma who write that “sin has distorted both physical experiences and cultural expressions of gender” (35). We—each and every one of us, whether or not we fit within the gender binary—are, in a sense,
“disordered” (though we should use this term tentatively). After all, “Even the healthiest of us is still living in a fallen world as a fallen person” (41).

As with all aspects of redemption, “God does not abandon us in our fallen state” (43). Here, Yarhouse lists various struggles common to the human experience (e.g., anger, lust that takes the form of sexual addiction, a struggle to delight in relationships with others) which express how “our mental health and experience of well-being is not what God intends for us. They are expressions of our state. In response to this state or condition... Christians hold out hope that God is redeeming these experiences” (44).

Finally, he offers a detailed analysis of multiple frameworks for conceptualizing gender identity concerns. In other words, he presents three lenses used when dealing with issues of gender dysphoria in everyday life and interactions. They are 1) the integrity framework, 2) the disability framework, and 3) the diversity framework.

Terms
(definitions in quotations have been taken from “2.1 Three Contrasting Frameworks” boxes in the chapter, see pg. 52)

Evangelical Alliance Policy Commission (EAPC) a body within the Evangelical Alliance (the primary representative body of the UK’s two million evangelical Christians) that develops and recommends policy for evangelical Christians and denominations. The EA strives to unify for the “shared mission” of bringing people together and showing the immense love of God in the groups with whom they work, including “81 denominations, 4,000 churches, 600 organizations and thousands of individual members” (http://www.eauk.org/connect/about-us/). The report which Yarhouse references, titled the “Transsexuality report,” was published by this body in 2000 and includes both affirmations and recommendations made by the Commission

eunuch a man whose testicles have been removed

castrate to remove the testicles of (a male animal or man)

congenital adrenal hyperplasia (CAH) the result of an enzyme deficiency that occurs in both males and females and which can have many outcomes but could include a person with XX chromosomes but male external genitalia (see also: pg. 68 definition as “a genetic condition that affects [one’s] adrenal glands’ production of cortisol and hormones such as aldosterone and testosterone... lead[ing] to [one] being born with ambiguous genitalia (typically an enlarged clitoris) despite having normal (for a biological female) internal reproductive structures”)

integrity framework “Identifies the phenomenon of gender incongruence as confusing the sacredness of maleness and femaleness and specific resolutions as violations of that integrity”

disability framework “Identifies gender incongruence as a reflection of a fallen world in which the condition is a disability, a nonmoral reality to be addressed with compassion”
**diversity framework** “Strong form: Deconstruction of sex/gender; Weak form: highlights transgender issues as reflecting an identity and culture to be celebrated as an expression of diversity”

**deconstruction** a method of critical analysis, dissection, or dismantling of the assumptions of a particular belief or understanding

**Discussion Questions**

Yarhouse writes, “If you are working really hard to make sense of a passage that is relatively clear, it might be that you are looking to justify something rather than really apply the obvious meaning of the text to your present circumstances” (34). What is your opinion on this? Why might you think as you do?

Have you experienced firsthand (a blog, an article, a march, etc.) the extreme side of the culture war on gender identity (42)? If so, do you remember how that made you feel? Did you respond with the understanding that such groups represent only one extreme of transgenderism, or did this experience lead you stereotyping all transsexuals with those values (or lack of values)? Which of the two responses is the “reasoned response... [of] civility... [and] pastoral compassion” that Yarhouse recommends?

“If the church only responds in the larger context of a culture war, we are going to have real casualties—people who see the church as interested in defending their turf rather than coming alongside those who are on the margins” (43). How does reading this statement make you feel?

Are you convinced of the assertion that all are “created in the image and likeness of God and therefore of infinite worth” (45)? How might this affect your relationships and interactions with others?

What are the strengths and weaknesses of each framework (integrity, disability, diversity)? Which of the three is the most familiar to you? Do you have another framework of your own to add to Yarhouse’s analogy? What is an integrated framework?

If you have the chance, read through the article "On bilingual pastoral theology." In the final paragraph of the article, Hill speaks of the "paradoxical, hard-to-speak" language of the gospel, the language "that things outside of God’s blueprint may become the precise means by which God teaches us the love of God and neighbor we might not otherwise learn." Do you agree? If yes, how has the gospel been paradoxical or hard-to-speak for you?

At this point in the study, what have you learned that has challenged you? What has surprised you?
Module 3: What causes gender dysphoria?
Chapter covered: UGD, Chapter 3 "What Causes Gender Dysphoria?"

The Gist
The dominating feature of this chapter is Yarhouse’s assertion that we do not know what causes gender dysphoria. “There is a need not only for good research in this area, but a kind of open discussion that is not reduced to personal, ad hominem attacks” (79) (see also pg. 143 “Gender Dysphoria is such a rare condition that we have little good research from which to draw conclusions”). It is reductionistic and inaccurate to assume that every person struggling with gender identity has chosen the path of suffering associated with gender dysphoria. Instead, the author offers different ways of understanding the nature of dysphoria, identifying whether we have a broad cultural and professional consensus (Answer: “It’s not clear that we do”) (63).

He describes a number of statements tied to the brain-sex theory, the idea “that there are areas of the brain that are different between males and females [sexually dimorphic structures]” (67), as well as related hypotheses. Next, he discusses a couple of alternatives to the brain-sex theory, such as “Blanchard’s typology of clinical presentations and models based more on social learning[,] as well as contributions from biology in the form of temperamental differences” (74). Each theory has been advanced and criticized in turn, so the reader is warned to be discerning of the strengths and weaknesses (limitations) of each.

In addition to nature, this chapter addresses the question “Does nurture play a role in gender dysphoria?”

In conclusion, there are a variety of factors that may or may not influence the onset of gender dysphoria, and to different “weighted” levels: “...perhaps the biological contributions take the form of temperamental and personality differences or sensory reactivity, followed by environmental conditions and social learning, among other factors including but not limited to parental preferences, indifferences, reinforcement and modeling...” (80). But, really, who can know? At this point in time, no one can claim to understand.

Terms
etiology the cause, set of causes, or manner of causation of a disease or condition
heterogeneity the quality or state of being diverse in character or content
immutable unchanging, incapable of being changed
homophilia/homophilic an old-fashioned term for homosexuality
sexually dimorphic structures “parts of the brain that are distinct to males and females” (brain-sex theory, pg. 67)
prenatal hormonal hypothesis the idea “that perhaps gender identity differences are the result of differences in exposure to prenatal hormones at critical months in utero” (brain-sex theory, pg. 67)

neuroanatomic brain differences hypothesis an area of research that looks at brain morphology or structure, documenting differences in neuroanatomical regions of the brain between males and females

male-to-female androphilic type a biological male who is attracted to males (Blanchard’s typology, pg. 74)

male-to-female autogynephilic type a biological male who finds the idea of himself as a woman sexually arousing (Blanchard’s typology, pg. 74)

female-to-male type a biological female who experiences herself as male (Blanchard’s typology, pg. 74)

bisexual type a person with a history of sexual arousal to the same and opposite sex (Blanchard’s typology, pg. 74)

asexual/analloerotic type a person with no or little arousal pattern (Blanchard’s typology, pg. 74)

equifinality the idea that there could be multiple pathways to the same outcome

multifinality the idea that a group of people could have the same factors as part of their history but have different outcomes

Discussion Questions
Yarhouse writes, “A proper critique […] cannot be based on how people may wish to use research in the context of a larger strategy (of, say, liberation or civil rights or identity politics) but must be understood on its own terms… if Person A is concerned that Person B is citing research to advance the deconstruction of sex and gender norms, Person A could be equally guilty of not looking at the research, simply rejecting any and all research put forth by Person B on the grounds that Person A is against the agenda put forth by Person B” (66). Do you agree with the “proper-ness” of this critique?

Are you aware of “characteristics [that] are appropriately seen as masculine for society” and “characteristics [that] are appropriately seen as feminine for the same society” (70) in regards to our society? How might these characteristics differ/have differed in other times, cultures, and places? What do you think about this?

What are the three limitations of the brain-sex research that Yarhouse mentions? What limitations does he propose in the other theories?
Module 4: How common is gender dysphoria?
Chapter covered: UGD, Chapter 4 “Phenomenology and Prevalence”

The Gist

Gender dysphoria (at least, official diagnoses and visits to special clinics for the dysphoria) is relatively rare, but that’s without taking into account the amount of people who may identify as transgender but who may never visit a therapist or clinic. Notably, “[the majority of] children who meet criteria for Gender Dysphoria do not continue to meet criteria as they grow up and enter adolescence” (92).

In this chapter, the reader learns more about the concept of “assigned gender” (also known as “natal gender,” “birth sex,” or “biological sex”) contrasted with “experienced” or “expressed gender.” There is also a discussion of the move from Gender Identity Disorder to the term Gender Dysphoria in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), as well as the statistics of gender dysphoria diagnoses and transgender identification. Further, Yarhouse raises questions about the causation of the stress related to gender dysphoria. “Is the distress a person’s subjective reaction to cross-gender identification? Is it the subjective response to the incongruence? Or is it that but also the cross-gender identification in and of itself?” (93).

It is of interest that Yarhouse mentions the effect that language may have on the subject, “as it reflects our assumptions of what is normal, what is acceptable and what is of concern” (93). For more on the significance of language to the discussion, see also pg. 136-137 A MULTI-TIER DISTINCTION.

In a later chapter, the author references phenomenology again in a way that might clarify the term when he writes, "...there are important differences [between an intersex condition and a diagnosis of Gender Dysphoria] that may have more to do with psychological issues if the person was assigned a sex at birth, raised in that gender role and then comes to a different phenomenological experience of themselves later in life" (117).

Terms

phenomenology a scientific approach that concentrates on the study of consciousness and the objects of direct experience

prevalence commonness, the fact or condition of being widespread in a particular area at a particular time (prevalence estimates are an attempt to estimate the prevalence of a particular concept or condition)

gender atypicality in which a person (usually a child) might behave outside of gender norms or stereotypes (e.g., a “tomboy” or a child who prefers certain colors, etc.); in children, who might
be incapable of comprehending the difference, it can be difficult to distinguish gender atypicality from gender incongruence that warrants a diagnosis

**intersex condition** a condition in which at birth an infant was unable to be identified as male or female because of ambiguous genitalia

**Diagnostic and Statistical Manual of Mental Disorders (DSM-5)** the handbook used by health care professionals in the United States and much of the world as the authoritative guide to the diagnosis of mental disorders. DSM contains descriptions, symptoms, and other criteria for diagnosing mental disorders (see more: https://www.psychiatry.org/psychiatrists/practice/dsm/feedback-and-questions/frequently-asked-questions).

**early onset (male-to-female) transgender** a person who identifies from a very young age with the other gender (even if they don’t disclose their transition history to others or even to family members)

**late onset (male-to-female) transgender** a person who has grown up with a fairly traditional childhood and the psychological steadiness and resilience that acceptance and “fitting in” (at least from the outside) can bring, but who identifies with or as the other gender at a much later time in life than an early onset transgender

**Discussion Questions**

Find some reviews, analyses, or summaries of *As Nature Made Him* online (enough to get the gist of the story). What might you have done in the doctor’s place? What might you have done in the parents’ place? What might you have done in John/Joan’s (or Bruce/Brenda’s) place?

Do you think there is a narrower set of cultural expectations for boys to display acceptable masculine behaviors and mannerisms than girls, as Zucker suggests (93)? Why or why not?

Perhaps you recall the section from Chapter 1 in which Yarhouse writes, “the idea [with which the Christian community must wrestle, presumably] is that there are many ways in which a person who experiences gender identity concerns along a continuum might manage experiences of gender dysphoria. Just as the experiences reside along a continuum, so too do the possibilities for exploration of identity and management of what contributes to gender dysphoria” (25). Do you think that sexuality is a spectrum, or not? Explain your reasoning.

How does language about sex and gender reflect and reinforce the norm? What does this make you think about discussions on other controversial topics, like abortion (e.g., pro-life versus pro-choice)?
Module 5: Can gender dysphoria be prevented or treated?
Chapter covered: UGD, Chapter 5 "Prevention and Treatment of Gender Dysphoria"

The Gist
While prevention of gender dysphoria is an area of uncertainty—none can know the future and no one can rewrite the past—there are ways to make any situation easier for those suffering and others who may be affected. Within the realm of treatment, Yarhouse describes the options available to those suffering with gender dysphoria (in childhood, adolescence, and adulthood) and their families. For example, understanding, empathy, and patience are paramount under any circumstances.

The four options he gives and explains are: 1) resolution of gender dysphoria through intervention to decrease cross-gender identification, 2) watchful waiting, 3) facilitation of the gender identity of the preferred sex in anticipation of an adult identification, and 4) intervention to block hormones until a child (now a teen) can decide about gender identity in later adolescence. The effect of hormone blockers and stimulants for adolescents and adults, the option of sex-reassignment surgery for adults, cross-dressing for all ages suffering with gender dysphoria, and other topics are also discussed.

As previously noted, childhood gender dysphoria more often than not will desist before adulthood (causes for which are uncertain), although there are plenty of documented cases of adolescent and adult gender incongruence and gender dysphoria.

In addition, the author presents studies of the increased risks for transsexual persons of “suicide attempts, death from suicide, and psychiatric inpatient care that are ‘considerably higher risks’ than the general population” (119). These findings, he states, “raise the question of whether these more invasive procedures [sex-reassignment surgeries and hormonal therapy] are the answer for transsexuality.” He then concurs with the authors of the study in suggesting the need for “greater emphasis… on aftercare and longer-term support following surgery.”

Under “CONCERNS ABOUT SEX-REASSIGNMENT SURGERY,” Yarhouse introduces the reader to differing philosophical views on the procedures. Lastly, he returns to the idea of the “three frameworks” in the conclusion of the chapter, discussing the significance in each perspective as it shapes how parents handle the gender incongruence of a child. As a word of reproof for the shortcomings of the Christian community on gender identity issues, he notes that “When we fail to provide a sense of meaning and purpose and pathways to identity and community... we cannot act surprised or offended when people opt for the benefits they find in the diversity framework” (123).

In an earlier chapter, Yarhouse wrote, “The creation story points to an experience of alignment between sex and gender that [Ella] does not experience—and may not experience this side of heaven” (58). As such, prevention and treatment are sensitive topics. In undertaking these discussions with family and friends (and your small group), care must be taken to make sure
that no one with gender dysphoria considers himself or herself less worthy of dignity, understanding, and the love of a redeeming God.

Terms

**suppressed feelings** feelings or emotions that are actively suppressed by an individual

**repressed feelings** feelings or emotions that are suppressed in one’s self so that they remain unconscious (outside the realm of conscious thought)

**reversible (management of gender dysphoria)** steps taken to combat gender dysphoria that can be easily "reversed," such as "adopting cross-gender hairstyles, clothing and interests, as well as perhaps use of a preferred name" (110)

**partially reversible (management of gender dysphoria)** steps taken to combat gender dysphoria that can’t so easily be changed, but which don’t constitute something that can’t be undone or altered; *partially reversible* steps include "cross-gender hormone therapy (testosterone or estrogen depending on the direction of preferred gender identity)" (110)

**irreversible (management of gender dysphoria)** the range of surgical steps that can be undertaken to relieve gender dysphoria, which are usually not available (in the United States) until an adolescent turns eighteen (110); these include vaginoplasty or the creation of a neovagina, penectomy, orchiectomy, removal of male hair, corrective surgery performed on the larynx, breast augmentation, removal of breasts and/or uterus and/or ovaries, phalloplasty or the creation of a neophallus, or metadioplasty (117)

**vaginoplasty** any surgical procedure that results in the construction or reconstruction of the vagina

**penectomy** a surgical procedure that results in removal of the penis

**orchiectomy** surgical removal of one or both testicles

**phalloplasty** the construction or reconstruction of a penis, or the artificial modification of the penis by surgery (female-to-male sex-reassignment surgery)

**metadioplasty/metoidioplasty** the "cutting loose" of an enlarged clitoris in such a way that it can be experienced more like a penis (female-to-male sex-reassignment surgery)

**androphilia/androphilic** characterized by sexual attraction to men or masculinity

**gynephilia/gynephilic** characterized by sexual attraction to women or femininity

**paraphilia/paraphilic** characterized by recurrent, intense, sexually arousing fantasies, urges, or behaviors that are distressing or disabling and that involve inanimate objects, children, or
nonconsenting adults, or suffering or humiliation of oneself or the partner with the potential to cause harm

**body dysmorphic (disorder)** a mental disorder characterized by an obsessive preoccupation that some aspect of one's own appearance is severely flawed and warrants exceptional measures to hide or fix it

**Discussion Questions**

"Ideally," the author writes, "these clinical issues [gender dysphoria] will be answered through well-designed research studies of the likelihood of various interventions producing favorable results" (102). What would you consider "favorable results"? Why do you think so?

Yarhouse offers examples of several challenging scenarios throughout the chapter. Consider what your response would be as either the parent or the child in each scenario.

What do you think about McHugh's statement that “the fact that we can do such surgeries does not mean we ought to do such surgeries”; and “psychiatry has essentially catered to individual preference and cultural pressure,” likening sex-reassignment surgery to liposuction for anorexics (120)?

Do you agree or disagree with Kevin D. Williamson’s statement that “Sex is a biological reality, and it is not subordinate to subjective impressions, no matter how intense those impressions are, how sincerely they are held, or how painful they make facing the biological facts of life” (121)? Why do you think so?

What do you know about "reparative therapy" or "orientation change"? Yarhouse doesn't go into much detail on the method, which used to be widely accepted and encouraged (especially by Christian or conservative parents, or by those who were repulsed by their child's suffering with gender identity disorder) because the method has since been condemned. Yarhouse writes,

"When we consider the possibility of gender dysphoria desisting, the debates center on whether the resolution occurs 'naturally,' if you will, or if therapy can be provided to facilitate a reduction in gender incongruence and dysphoria. The most vocal critics of such practices demean it (and the professionals who provide it) as a version of conversion therapy, likening it to attempts to change sexual orientation. Outspoken critics of conversion or reorientation therapy often liken it to bleaching an African American's skin in response to his or her own self-hatred and racial stigma." (102)

For more information, consider exploring the following links (and the rabbit trails down which they may lead you):
Why has this method been considered ineffective, and even harmful? What do you think about the term “ex-gay”?
Module 6: What is the response of the individual and the Church? How is the Church responding today?
Chapter(s) covered: UGD, Chapters 6 "Toward a Christian Response: At the Level of the Individual" and 7 "Toward a Christian Response: At the Level of the Institution"

Read (again): UGD pg. 22-27 TOWARD A REASONED RESPONSE and CONCLUDING THOUGHTS, pg. 55-60 Toward an integrated framework and CONCLUDING THOUGHTS

The Gist
In these two chapters, Yarhouse confronts the ways that churches and church authority have tried to approach gender dysphoria before, ineffectively and/or harmfully, and deconstructs the mindsets that are at work in many churches by the application of his “three frameworks” idea from earlier (see: pg. 46-57). He addresses the “remarkable challenge” that a Christian struggling with gender identity might present to the church community and to one’s family. He maps out some storylines of gender identity conflicts, as well as some specifics of his approach to handling gender dysphoria in his clients.

Yarhouse also discusses how the transgender community (131) differs from the larger community of “lesbian, gay, bisexual—and transgender” (LGB—T).

Finally, he considers “some concepts that may be helpful to the Christian community that wants to create redemptive space” (157). These are: clarity, relational ethic, humility, climate, sanctification, and social support.

Tying in Other References throughout UGD (with questions)
On page 56, Yarhouse writes, “The church should reject as far too reductionistic the teaching that gender incongruence is the result of willful disobedience; such an approach avoids the hard places of ministry and shepherding and keeps the person at bay by placing the blame (and heaping greater shame) on the person navigating gender identity concerns. This is not pastoral care. The church can be sensitive as questions arise about how best to manage gender dysphoria in light of the integrity of male/female differences while recognizing that we live and relate to one another in a specific cultural context in which gender roles are conveyed, in which standards arise that can vary considerably by culture…” (56). How do you feel about this statement? Have you ever observed a pastor or consistory handle the situation of a congregant or visitor with gender dysphoria before? Do you agree with the methods they used? If not, what do you wish they would have done? What will you do about it now?

“What we do not want to do is suggest that because experiences of gender dysphoria are not as God intended from creation that Ella has a forced choice between celebrating a diversity paradigm at the expense of the integrity of creation (the integrity framework) or embrace the integrity paradigm at the risk of gender diversity being rendered meaningless—as merely an unfortunate form of suffering that will ultimately be erased in eternity. A third way is to name
meaning and purpose in all of our reality (including suffering) that is in need of redemption” (59). How do you understand gender dysphoria as something that needs to be redeemed? Explain.

“It’s [...] always struck me as particularly fitting and beautiful that when Christ is resurrected his body is not returned to a state of perfection, as the body of Adam in Eden, but rather it still bears the marks of his suffering and death—and indeed that it is precisely through these marks that He is known by Thomas” (60). What did you think as you read this quote in the text? What do you think as you read this quote now?

“What most people who are gender dysphoric feel in the church is rejection and shame—the feeling that there is something fundamentally flawed in them, that the flaw is their fault (back to willful disobedience) and that if others knew about their gender incongruence, they too would reject them” (56). Have you ever thought about gender dysphoria as willful disobedience before? Do you understand Yarhouse’s argument against this mindset? How do you think of gender dysphoria now?

“Any attempt at intervention in adolescence and adulthood would benefit from reflecting a meaning-making structure that informs identity and locates the person within a broader community of support. This community would function as a kind of kinship network (family) that affirms their worth and insists on navigating this terrain together, even when decisions may be quite complex and challenging to all involved” (124). Do you see the potential for such a community in your church? If not, how might you create that potential?

Discussion Questions
Does your church fit either of the approaches that Yarhouse describes (147-148)? How do you (and/or your church) draw the line on difficult decisions that have to do with “community standards for things like Communion or the Lord’s Supper... service to others... childcare, teaching, leading smalls groups and leadership...” (148)? Do you know of any church that serves as a good example of “model[ing] and liv[ing] out a balance of welcoming and ministry with clear biblical testimony” (156)?

Yarhouse writes, “Some friends, family members or religious leaders may feel that if they are in any way supportive of people with gender dysphoria they are somehow denying the gospel or the truth. That is, ‘if you don’t correct the sinner, you’re complicit in the sin” (139). Rather than blaming the “friends, family members or religious leaders” who ascribe to this idea, how would you attempt a discussion on gender dysphoria with them?

“...it should not be assumed that greater Christlikeness is the same as having experiences of gender dysphoria abate. Rather, many people who know and love Christ have besetting conditions that have simply not resolved as a result of their belief in Christ as their Savior. Indeed, it may very well be that it is in the context of these enduring conditions that God brings
about greater Christlikeness” (148). What do you think about the idea that sin and sinful tendencies can, in a complex and careful way, be seen as working for the good of those who suffer from them?

“Each [person navigating gender incongruence in adulthood] will need social support, assistance with and from family members, help in exploring their personal faith, aid in finding a corporate faith community, assistance in learning and applying helpful coping activities, and so much more” (154). Which, if any, of these are you prepared to offer those around you? What else might be included in “and so much more”?

“When teens in a youth group can drive a young person away from a church that is intentional about reaching out to those on the margins, it has to at least raise the question of whether youth are able to understand the nuanced messages of inclusivity and tolerance while also holding biblical perspectives on complex matters” (155). What do you think? Why or why not?

Do you feel that this book, this study, and your small group have helped you grow in knowledge and understanding of gender dysphoria, sufferers of gender dysphoria, and the transgender movement currently taking place in some cultures? What would you do now if you or a loved one began to experience gender dysphoria? What would/will you do if you happen to recognize that a church visitor, member of your church, or fellow student was/is struggling with gender identity issues? How can you alleviate the isolation and shame these individuals might feel, especially if they did/do profess Christianity?
Digging Deeper: What are the choices for a Christian homosexual?


The Gist/Discussion Questions

A Christian who faces the inevitability of their struggle with gender dysphoria is often presented with two options. The first option is in finding some way to reconcile the Christian faith with a new definition of “marriage”—that is, “the legally or formally recognized union of two people as partners in a personal relationship,” as opposed to the union of one man and one woman as marriage is defined in Scripture—and attempt to live in a God-honoring way within that same-sex partnership. The second option is to see one’s struggle with gender dysphoria as a call to celibacy. While the Bible is clear about the folly of same-sex partnership (within a historical context, it might be argued), there is a reason that monasteries and nunneries in medieval Europe pursued the path of Francis of Assisi in vowing to chastity, poverty, and obedience. Celibacy is not highly regarded in modern times, devoted as we are to a culture of promiscuity, the casual hook-up, and the throwaway nature of many marriages that end in divorce. However, the Bible offers multiple examples of celibacy that shouldn’t be discounted, including Paul and Jesus himself (although it might be argued that Jesus served as the bridegroom of the church, which would make him somewhat different than a bachelor). For example, in the article "Coming Out Christian," a gender dysphoric Christian named Eve Tushnet (who interpreted her calling to be the path of celibacy) writes:

> We’re often ashamed to admit that we suffer. It’s humiliating and it makes us feel like we’re not good enough Christians. This is bizarre since there are very few aspects of Jesus’ own internal life that we know as much about as His suffering. Jesus—unmarried, marginalized, misunderstood, a son and a friend but not a father or spouse—is the preeminent model for gay Christians. In this, as in so many things, we are just like everybody else.

In facing this choice (or interacting with Christians who have made one of these two choices), families and church communities must do their utmost in striving for understanding and empathy. Even a choice that seems casual or unpremeditated to us may have involved much agony and many tears for the decision-maker. In this vein, consider undertaking an analysis of either of the two sides on the “Great Debate” (same-sex marriage, or celibacy) webpages of the website gaychristian.net. Choose one of the two articles to read from "The Great Debate" (maybe choose the article with which you expect to disagree). What do you agree with the
author about? On what do you disagree? Do you find his arguments convincing? Even if not persuasive, do you find his arguments worthwhile? You need not approach the subject looking to be persuaded, but you should approach both sides with the willingness to hear and attempt to understand why some people think the way they do, and how they would defend their rationale. If performing this activity in a small group, encourage participants to choose different sides in order to facilitate a more personal—and a, likely, more animated—discussion.

For another tangent, read the article "Disagreeing about homosexuality: a thought experiment" on spiritualfriendship.org. To which of the two arguments in the beginning do you tend? Why (you cannot use the arguments of the author to explain your understanding – you must explain it in your own words, with your own Bible references (passages, not single verses) or other sources)? The author asks: "Do you think this is a useful way to understand this particular disagreement?" What do you think? Why or why not?

Reflect on your thoughts about the following quote: "As Mark Y. commented the other day, when Paul stopped praying for the thorn in his flesh to be removed, he wasn’t giving up on the possibility of being transformed. We don’t get to dictate in advance to God *how* he shall transform us, and a person whose sexual desires continue to be directed towards people of their own sex but who directs his or her energies into building communities of spiritual friendship has surely been transformed in deeper ways than the person whose biological desires are merely redirected."

1The “true or false” nature of the statistic that divorce rates have risen or fallen in modernity as compared to times past is much debated. Unfortunately for anyone desiring to make a point about divorce, as noted by divorcesource.com on the topic of divorces in the United States, “Divorce statistics, like all statistics, are quantified abstractions that are difficult to interpret correctly unless they can be put into context from which they are abstracted... it should be remembered the sheer size of the much studied Baby Boom - 75 million Americans born between 1946 and 1964 - is enough to influence the aggregate marriage and divorce statistics.” Still, the cultural redefining of family life and marriage is a big topic and should not be dismissed lightly. (http://www.divorcesource.com/ds/main/u-s-divorce-rates-and-statistics-1037.shtml)
Digging Deeper: What is the calling of the Church in response to loneliness and singleness?


https://spiritualfriendship.org/

“If a person grows up in a religious community in which they received the message that a gender presentation that is not 100 percent male or 100 percent female is a sin, an abomination, this makes it all the more likely the person will keep what they are facing private and will continue to travel the road alone” (138).

In light of this quote from Understanding Gender Dysphoria, it is of significance for the church to be open about the topics of loneliness and singleness. More often than not, churches and communities lack a role model for single life. “Evangelicals are so enamored with marriage, it’s been hard for them to value singleness and celibacy,” says Yarhouse in an online article about the changing face of the homosexuality debate (https://sojo.net/articles/gay-christian-and-celibate-changing-face-homosexuality-debate#.U-ELnkBYuoU.email). One commentator under the article “Coming Out Christian” on theamericanconservative.com noted,

"So what is a religious community to do when they disallow gay marriage and romantic relationships...The obvious answer is to create communities, vocations, and paths to have a useful life other than marriage... The same conservative [Christians] who preach against same-sex marriage need to drop their opposition to gays as people and welcome them into their homes and their communities. There is no reason why a specific group of people are singled out [for] a special burden of loneliness."
(http://www.theamericanconservative.com/articles/coming-out-christian/)

In fact, the article itself is full of the experiences and advice of Eve Tushnet, a gender dysphoric Christian who resolves her struggle and her faith by choosing to live in celibacy. For example, Tushnet writes,

The sentimental, Disney view of marriage was always wrong. Marriage changes our loneliness but rarely cures it...But for a long time American Christianity has sought to fix loneliness and suffering rather than accepting them as part of the core of Christian experience. We’re a prosperity-gospel, “Go out and get that blessing!” people, enthusiastic and hardworking and unwilling to believe that some things can’t be fixed. Because marriage, the standard American solution to the problem of the human heart, is typically unavailable to gay Christians, we’ve had to confront loneliness earlier and more publicly than many of our peers.

You may or may not struggle with gender dysphoria, but if you resemble the majority of people struggling with or touched by loneliness, you have probably wondered if you’re alone in these times of your life. Perhaps by this point, you've come to realize that you’re not alone. How did the process of coming out of that isolation feel? Would you have appreciated someone being there for you? Are you willing to be that person for someone else, now?
Discussion Questions

Is there someone in your church, or have you ever known a middle-aged person, who "talk[s] openly about embracing a life of celibacy"? If not, have you known someone who served as an example of a contented or even happy single? If yes, how has this person had an impact on you and the church community? If no, might such a lack have a negative effect on the church body?

Read the article "A Necessary Pairing: The Theology of Marriage and of Compassion." How does the move from recovery to vocation model strike you?

What do you think of the mission statement Hill encourages his listeners to offer their students: “This is what a hopeful future looks like for you. If you’re same-sex attracted, and you’ve tried everything, and you haven’t experienced one iota of change in your same-sex attraction, and you’re wanting to give your life to God in celibacy, that does not have to equal loneliness. That does not have to equal isolation. ... There's a life for you. There's a future for you that doesn't simply look like alienation from your fellow believers in the church who seem to be so fixated on the nuclear family”?

What thoughts and feelings does the story of "Janet's Repentance" invoke in you? Have you experienced or observed such a situation before?

How have you dealt with loneliness in the past? How do you deal with it now? Do you have any advice or experiences that might help someone struggling with isolation as a result of discomfort with their gender dysphoria (or for any other reason)?

Can you think of any instance in which it proved healthier for individuals to keep private struggles to themselves? What does the Bible say about struggling alone (see examples such as Ecclesiastes 4:9-12, Hebrews 10:24-25, Romans 12:16, Galatians 6:2-3, 1 Corinthians 12:26, Ephesians 4:2-4, 1 Thessalonians 5:14)? Still, what does the Bible say about taking time to be alone (with the Lord) and to pray (see Psalm 37:7, Matthew 14:23, Luke 5:15-16)?

Consider the following excerpt from "Coming Out Christian" and write down some of your thoughts: "My grandparents’ generation for the most part married young & stayed together for a lifetime. They had large families, many cousins, belonged to church & community societies, personally knew & interacted with their neighbors & local merchants on a daily basis. Communication was face to face. I don’t think folks back then expected a spouse to fulfill all their wishes & needs. That puts a huge burden on a relationship & can isolate you from others...to most Americans it seemed distasteful, but perhaps there’s some wisdom in keeping the family fabric untearable in those situations."
Bibliography


