

Embracing Uncertainty:
Evaluating the Traditional Christian Approach to Transgenderism

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A Senior Thesis submitted in partial fulfillment
of the requirements for graduation
in the Honors Program
Liberty University
Spring 2017

Acceptance of Senior Honors Thesis

This Senior Honors Thesis is accepted in partial fulfillment of the requirements for graduation from the Honors Program of Liberty University.

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Abstract

The transgender movement has posed an ethical problem for societies around the world, and has forced Christian communities to reconsider traditional conceptions of gender, sex, and what makes someone a man or woman. The conventional approach that most evangelical Christian communities have adopted towards individuals who experience incongruence between their gender identity and physical sex characteristics has been to condemn cross-gender living. To equip Christians to consider the morality of transgenderism most effectively, this study begins by defining key terms, and provides a brief survey of some of the scientific and medical background issues surrounding this discussion. We then examine the biblical arguments underlying this traditional judgment of transgender behavior as immoral and provides a critique of the use of the two primary biblical texts utilized in this discussion to prohibit trans lifestyles. In conclusion, it examines the advantages of abandoning a poorly reasoned argument against the compatibility of trans lifestyles with the Christian worldview. The goal of this piece is to pave the way for the development of ethical judgments based on biblical and scientific truth, whether they permit or prohibit trans living.

Keywords: transgenderism, Christian ethics, theology and gender

Author's Note

I have been answer-obsessed since I was a child. In every area of my life I have labored to resolve uncertainty and to discover truth, and I brought this disposition with me as I began this project. When I originally decided to focus on transgenderism, my intention was to offer a moral judgment on it to help Christians navigate the difficulties of this challenge to traditional views on gender. I would seamlessly blend the latest in scientific research with an exegetical, historically accurate hermeneutic to come up with “the answer.” As I have examined the predominant response to this phenomenon by conservative Christian groups, however, the goal of my thesis has evolved significantly. I was surprised to discover that there was no shortage of “answers” to this moral question, but that the majority of these were seriously deficient, exhibiting exegetical hermeneutical practices and a lack of understanding of transgenderism. Especially as I grew to understand how complex of an issue transgenderism truly is and witnessed the silence of the biblical authors on the topic, I began to realize that what this conversation needs most is not another answer, but to acknowledge the complexity of making such a moral judgment. There is no Bible verse about transgenderism, much as we can wish there was. In the face of biblical silence, oversimplifying this issue or reading it into unrelated texts – tempting as they are – will not result in a satisfactory answer, and too many Christian approaches to transgenderism fall into exactly these traps. The purpose of this thesis, then, is not to offer a new answer to this moral quandary, but to evaluate the arguments underlying the prevalent conservative Christian answer.

It is not my intention to disagree with the conclusion that cross-gender living is sinful, nor do I aim to agree with it. Rather, I believe that evaluating the relevancy of the key arguments used to condemn this lifestyle will logically result in the development of stronger moral conclusions and will give Christians the freedom to consider this question less encumbered by presumptions. It is my hope that this piece will encourage Christians to acknowledge the true complexity of this issue and to take a second look at why they believe what they believe in areas of moral uncertainty such as transgenderism. I especially hope that it will be a reminder of the preeminence of Christ in the midst of ethical greyness, and that it will encourage Christians to admit uncertainty and embrace, rather than fear, not having all the answers. May we be captivated by Jesus, instead of by answers.

Thank you for reading this piece, and I hope that you are blessed by it.

Prelude

Chandler Wilson sits in front of a webcam wearing blue jeans and a black t-shirt with a rainbow on it. Underneath the rainbow in large, round letters are three words: “It’s all good.” They¹ are in their living room; two blue suede couches, a bookcase, and a vacuum cleaner form the background of the shot. For Chandler, this is an important and terrifying day: they are about to come out to their mom as transgender. “I’m really nervous,” Chandler breathes, “that’s why I’m talking so fast.” The video cuts to Chandler and their mom sitting on the couches, the family dog on the floor, looking back and forth between the two, as Chandler explains their journey to discovering their identity as transgender. When Chandler finishes, their mom responds, saying, “You know what I say? You have to be yourself, ‘cus that’s the only way you’re gonna be happy.” The two stand up and hug, and, as the hug breaks, Chandler’s mom speaks again: “It’s hard for me, but I think the thing that helps me is that, as a Christian, I know God made us and he loves us all equally, and I think how much I love you and your sibling, and I know he loves us way more than I can ever imagine.” Chandler hugs their mom once again as she finishes her thought: “My whole thing with all of this is, if he has an issue with it, then he’ll deal with you on it.”² At the time of writing, this video has been viewed almost two million times.

¹ Chandler identifies as agender, and prefers they/their/them as their personal pronouns. Agender individuals identify as having no gender identity.

² “Coming Out as Transgender Agender,” YouTube video, 9:28, posted by “ChandlerNWilson,” Apr. 5, 2015, https://www.youtube.com/watch?v=9a_QWqME_TY&list=PLpR4wCAXEXpuQ1Tgpzo1XtJxJkUdUGTmC&index=1.

Embracing Uncertainty:

Evaluating the Traditional Christian Approach to Transgenderism

While sexual orientation debates have been raging between conservative and liberal communities for the past few decades, a smaller minority group has been fighting for acceptance in Western culture. These individuals, while physically male or female, internally experience themselves as not being members of the gender they were born into. This phenomenon, though sometimes overshadowed by discussions regarding the morality of homosexual behavior, has come to the forefront especially in recent years, with the publicity surrounding Caitlyn Jenner's transition from male to female in 2015, and North Carolina's controversial 2016 law requiring individuals to use restroom facilities consistent with the sex recorded on their birth certificates. What may have seemed a passing phase relevant to only a tiny group of individuals has turned into a battleground of ideologies and moral systems, with no easy answers to be found.

While media and secular culture have been outspoken regarding their takes on morality of these actions, many Christian communities have only recently begun to respond to the evolution of Western gender norms. A 2013 study showed that most churchgoers who experienced tension between their gender identity and biological sex reported that gender identity issues were never discussed directly in church, though sexual orientation and abortion were common topics.³ Transgender individuals generally

³ Denise L. Levy and Jessica R. Lo, "Transgender, Transsexual, and Gender Queer Individuals with a Christian Upbringing: The Process of Resolving Conflict Between Gender Identity and Faith," *Journal of Religion & Spirituality in Social Work: Social Thought* 32, no. 1 (2013): 70.

recount being ostracized and unwelcome in mainstream churches, and have departed traditional church communities in exchange for individualized spiritualities at a much higher rate than their non-transgender peers.⁴ Rather than being a mere imagining or a negative reaction to having their lifestyles disapproved of, the prejudice trans individuals report experiencing from Christian communities is verified by research; a 2012 study by Norton and Herek showed that the more important a role religion plays in a person's life, the more likely that person is to express dislike toward transgender individuals.⁵ Clearly, the current Christian approach to transgenderism has been ineffective, and in some cases very harmful, both in the transgender and Christian communities. However, most evangelical Christians will not be content with rationalizing away the clear separation between male and female of the Bible as merely historical social understandings irrelevant to the modern understanding of gender, as do many liberal theologians.⁶ For Christians who see the Bible as inerrant and relevant today, there is a great need for an approach to transgenderism that both honors biblical teachings on gender, and also informs compassionate ministry to individuals who experience tension between their physical sex characteristics and their internal identity.

This discussion will examine the validity of the traditional Christian critical response to transgenderism by evaluating the primary underlying arguments used by its

⁴ Melissa M. Wilcox, "When Sheila's A Lesbian: Religious Individualism among Lesbian, Gay, Bisexual, and Transgender Christians," *Sociology of Religion* 63, no. 4 (2002): 510-512.

⁵ Aaron T. Norton and Gregory M. Herek, "Heterosexuals' Attitudes Toward Transgender People: Findings from a National Probability Sample of U.S. Adults," *Sex Roles* 68 (2013): 746.

⁶ Mohd. Shuhaimi Bin Haji Ishak and Sayed Sikander Shah Haneef, "Sex Reassignment Technology: The Dilemma of Transsexuals in Islam and Christianity," *Journal of Religion and Health* 53, no. 2 (2012): 532.

proponents. To begin, we will examine transgender issues generally, approaching this from a scientific and medical standpoint in order to gain an accurate understanding of transgenderism; as with any ethical discussion, the fuller understanding of the issue we have, the better equipped we will be to evaluate it. From there, we will be equipped to consider the traditional Christian approach to transgenderism and trans people. We will conclude by examining the implications of our conclusions regarding the traditional approach, and note some areas in which further consideration is necessary.

Part One: Building Understanding

Before beginning a discussion on the ethics of transgenderism and related issues from a Christian perspective, it is vital to develop a familiarity with the wide array of complexities involved with this conversation. A typical denunciation of the traditional Christian response to trans people is that it relies on blanket moral judgments without adequately understanding of the uniqueness of this phenomenon. This approach to transgenderism, writes Jonathan Merritt, Christian author and contributor to *The Atlantic*, will ensure that “conservative Christians will be the authors of their own demise” if continued.⁷ While it may prove necessary to judge transgender behavior as inconsistent with the Christian worldview, this decision must be based on a thorough consideration of the issues rather than dogmatic adherence to the familiarity of gender binarism. Thus, this section will serve as an introduction to the current scientific and clinical issues surrounding transgenderism. We will begin by briefly providing working definitions of

⁷ Jonathan Merritt, “3 Reasons Conservative Christians Will Lose the Transgender Debate,” *Religion News Service*, May 14, 2016, accessed January 27, 2017, <http://religionnews.com/2016/05/14/3-reasons-conservative-christians-will-lose-the-transgender-debate/>.

some key terms involved in this discussion. As will be seen, this is incredibly important to engaging with trans individuals in an effective and compassionate way.

A Vocabulary of Transgenderism

Fraser Watts, lecturer at the University of Cambridge, begins his discussion of transsexualism this way: “Transsexualism is a minefield. . . . Even how you frame the issues and begin to ask questions about it can already show what perspective you are coming from.”⁸ Understandably, trans individuals, who have experienced a great deal of judgmentalism from Christians, tend to be very sensitive to the verbiage used by religious individuals in discussions regarding gender identity. A single wrong word can effectively end such a dialogue and convey, correctly or incorrectly, a great deal of prejudice and disapproval to a trans person. Additionally, the terminology related to transgenderism has changed significantly over recent years, and there is overlap between some terms. To effectively minister to trans individuals and take an ethical stance one way or another, Christians must be well-versed in the appropriate language to do so, as must any visitor from one culture to another. Already we have introduced several terms: transgender(ism), trans, transsexual(ism), gender, and sex; others still will be referred to in this discussion. The following is a brief discussion of the meaning of some of the most important terms, with emphasis on the distinctions between them.

Holistic gender. The word “gender” is a word with a complicated history that has been discussed for decades by many endeavoring to define it. It has historically been used roughly interchangeably with the term “sex” to refer to one’s physical characteristics, but

⁸ Fraser Watts, “Transsexualism and the Church,” *Theology and Sexuality* 9, no. 1 (2002): 63.

research on transgenderism and intersex disorders have shown that that the relationship between sex and gender is more complex than treating these terms as synonyms recognizes.⁹ Problematic though it is, gender is an important concept in Western society, if a difficult one to pinpoint. While respondents to a 2000 study about the meaning of the word “gender” noted the complexity of trying to define it, over 95% of respondents stated that gender was an important social concept.¹⁰ Clearly, gender is an aspect of society that cannot be abandoned, but also one that must be further defined. Using Watts’ breakdown of this concept, we will delineate four primary aspects of gender: biological sex, gender identity, gender behavior, and sexual orientation. While most people experience concord among these four parts of gender, some experience great conflict between two or more of them.¹¹ For clarity, we will use the term “holistic gender” to refer to the aspect of a person’s identity made up of these four facets. We will also use the terms “true gender” and “designed gender” to refer to the holistic gender that God views a person as a member of when there is conflict between the four aspects of gender described below.

Biological sex. Perhaps the simplest term in this list, biological sex refers to the physical characteristics that are associated with maleness and femaleness. These include genitalia, secondary sex characteristics, and chromosomal makeup. One’s biological sex is related to what is known as a person’s assigned gender, which refers to the gender one is identified as a member of based on his or her physical characteristics at birth.

⁹ Jayde Pryzgod and Joan C. Chrisler, “Definitions of Gender and Sex: The Subtleties of Meaning,” *Sex Roles* 43, nos. 7/8 (2000): 554.

¹⁰ *Ibid.*, 561.

¹¹ Watts, “Transsexualism,” 64.

Gender identity. A person's gender identity describes how one perceives oneself as a male or female. It is the experience of being a male or female, and, while usually in agreement with one's biological sex, can differ in some cases.

Gender behavior. This term represents the way an individual's lifestyle reflects societal norms of maleness or femaleness. Examples of gender behavior can include style of dress, method of speech, vocational aspirations, and many others, depending on a given society's gender roles.

Sexual orientation. An individual's sexual orientation refers to his or her sexual desire for others based on their holistic gender. Heterosexual individuals are sexually attracted to members of the "opposite" sex (i.e., males are sexually attracted to females, and vice versa). Homosexual individuals are sexually attracted to members of their own biological sex, while bisexual individuals experience sexual desire for both males and females. There are other sexual orientations in addition to these two, but these are not necessary to enter into the discussion at hand.

Transgenderism. Transgenderism is an umbrella term that refers to individuals who experience a disconnect between their gender identity and biological sex. It can be abbreviated as "trans," and is also known as gender dysphoria (GD) or gender identity disorder, though the latter has fallen out of favor as of late.¹² Individuals who do not experience incongruence between their gender identity and biological sex are known as cisgender. Transgenderism includes several subgroups of people, including those who

¹² American Psychological Association, "Gender Dysphoria," in *DSM-V: Diagnostic and Statistical Manual of Mental Disorders; Fifth Edition* (Washington, D.C.: American Psychological Association, 2013), 451.

identify as neither of the two binary genders (male or female), as possessing aspects of both, as having no gender, or as having more than one gender identity. This discussion, however, will focus on transgender individuals who identify with the gender opposite that of their biological sex.

It is important not to confuse transgenderism with other activities or lifestyles. A frequent misunderstanding is to see transgenderism as a sexual orientation, perhaps as a more extreme manifestation of homosexuality.¹³ This, however, is an incorrect understanding of transgenderism, as there are both heterosexual and homosexual transgender individuals. Additionally, transgenderism should be distinguished from both transsexualism and transvestitism, which will be discussed below.

Transsexualism. Transsexualism falls under the broader category of transgenderism, and refers specifically to transgender individuals whose desire is “to live ... permanently in the social role of the opposite gender,” and who desire to obtain surgery to become as physically similar to the opposite sex as possible.¹⁴ Because it is a subtype of transgender, discussions regarding transgender individuals often apply to transsexual individuals, but transsexual individuals face a unique set of concerns that are often not applicable to non-transsexual transgender individuals. Furthermore, not all transgender individuals will develop a desire to permanently transition into the other

¹³ Ishak and Haneef, “Sex Reassignment Technology,” 530.

¹⁴ P.T. Cohen-Kettenis and L.J.G. Gooren, “Transsexualism: A Review of Etiology, Diagnosis and Treatment,” *Journal of Psychosomatic Research* 46, no. 4 (1999): 316.

gender; in fact, research indicates that transgenderism usually does not persist throughout an individual's entire life.¹⁵

Transvestitism. Also known as cross-dressing, transvestitism refers to the action of dressing in the attire of the opposite gender. Individuals who engage in this behavior do not necessarily experience a disconnect between their gender identity and biological sex, and as such, a person who cross-dresses is not necessarily transgendered. While transvestitism can be an indication of or precursor to GD, many engage in these behaviors fetishistically, that is, for sexual arousal.¹⁶ Thus, while often related to transgenderism, transvestitism by itself is not evidence of this type of identity discord.

Sex reassignment surgery (SRS). Sex reassignment surgeries are medical procedures intended to alter an individual's physical body to cause it to conform more closely to that of a member of the opposite sex. The two most complete sex reassignment procedures commonly performed are vaginoplasty, the creation of a vagina on a biologically male person, and phalloplasty, in which a penis is constructed on the body of a biological female. There are other procedures as well, but in this discussion the term SRS will be used to discuss surgical sex reassignment in general rather than a specific surgical procedure. This surgery is available to varying extents throughout the world. It is generally legal to obtain SRS in most Western countries, and is governmentally subsidized in some countries, such as the Netherlands¹⁷ and Iran.¹⁸

¹⁵ American Psychological Association, "Gender Dysphoria," 455.

¹⁶ *Ibid.*, 458.

¹⁷ Ishak and Haneef, "Sex Reassignment Technology," 531.

Intersex disorders.¹⁹ An intersex disorder is a birth disorder in which a person's physical sex characteristics are not clearly male or female. Intersex disorders may be diagnosed at birth, or may become apparent during puberty. It is important to note that the birth genitalia of intersex individuals "does not predict the future gender identity" of these individuals with consistency.²⁰ Individuals with intersex disorders have historically been referred to as hermaphrodites, and the condition itself as hermaphroditism.²¹

There are several causes of intersex disorders. While most people are born with two sex chromosomes, women with two X chromosomes (XX) and men with one X and one Y chromosome (XY), at least one in 400 individuals is born with what is known as a sex chromosome abnormality (SCA).²² Individuals with SCAs sex chromosomes make-ups other than XX and XY. The most common SCAs are trisomy X (XXX), Klinefelter syndrome (XXY), XXY syndrome, and Turner syndrome (X0).²³ Other SCAs exist,

¹⁸ Elizabeth M. Bucar, "Bodies at the Margins: The Case of Transsexuality in Catholic and Shia Ethics," *Journal of Religious Ethics* 38, no. 4 (2010): 602. The case of Shia Islam's approach to transgenderism and SRS will be discussed later.

¹⁹ The ethical issues surrounding intersex individuals are not the focus on this discussion, and will not be covered at length. However, the existence of intersex individuals provides an important conceptual consideration for discussing transgenderism, so some examination of this disorder is necessary.

²⁰ Margaret H. MacGillivray and Tom Mazur, "Intersex," *Advances in Pediatrics* 52 (2005): 295.

²¹ Stephen Kerry, "Intersex Individuals' Religiosity and Their Journey to Wellbeing," *Journal of Gender Studies* 18, no. 3 (Sept. 2009): 277.

²² Mary G. Linden, Bruce G. Bender, and Arthur Robinson, "Sex Chromosome Tetrasomy and Pentasomy," *Pediatrics* 96, no. 4 (Oct. 1995): 672.

²³ Orlando J. Miller and Eeva Therman, *Human Chromosomes*, 4th ed. (New York: Springer, 2001): 284. The Xs and Ys in parentheses refer to the chromosomal make-up that characterizes each SCA. Note that X0 (Turner syndrome) denotes a single X chromosome, the 0 marking the absence of the second sex chromosome. While there is genetic information on the Y chromosome, the X chromosome is vital to human life, carrying much more genetic information than the Y, and as such all SCAs include at least one X chromosome, because a fetus cannot develop without at least one X chromosome. This is why, for example, there is no SCA characterized by the genotype Y0.

though the addition of more than one extra chromosome is rare.²⁴ Intersex disorders can also result from insensitivity to the hormone androgen, or its over or underproduction *en utero*, as well as several other developmental problems.²⁵ It is difficult to estimate the prevalence of intersex disorders, partially because this involves defining what constitutes intersex and what does not. While an exact number is hard to come by, DeFranza's comparison of intersex disorders with other common disorders is helpful to understand the frequency of this phenomenon, and also begs an important question regarding Western society's lack of awareness of intersex individuals:

Intersex is rare, but it may not be as rare as we thought. at least as common as Down syndrome. ... Intersex may be as common as schizophrenia, which occurs in 1 percent of births. It is at least as common as Down syndrome (0.125 percent), and more common than albinism (1 in 20,000). These other conditions are typically accepted as rare but regularly occurring phenomena, while intersex is not. Why are people more likely to be familiar with albinism, Down syndrome, and schizophrenia than with intersex?²⁶

Intersex individuals' gender identity has historically been assigned to them in infancy, with ambiguous genitalia being surgically conformed to one of the two binary genders, usually with the child's parents making the final decision.²⁷ There is currently significant discussion among medical professionals and activist groups regarding the best

²⁴ Linden et al., "Sex Chromosome Tetrasomy," 672.

²⁵ For a helpful background to the common causes of intersex disorders, see Megan K. DeFranza, *Sex Differences in Christian Theology: Male, Female, and Intersex in the Image of God* (Grand Rapids: William B. Eerdmans, 2015), 25-44.

²⁶ DeFranza, *Sex Differences*, 46. The answers to her questions, though important, are beyond the scope of this discussion; see her historical and cultural analysis of the representation of intersex individuals (46-56).

²⁷ MacGillivray and Mazur, "Intersex," 300.

way to encourage gender identity formation in intersex individuals, and whether ambiguous genitalia should be surgically altered in childhood or when the intersex individual is mature enough to choose one's biological sex oneself. As medical technology and the understanding of the mechanisms of gender identity formation continue to develop, the usual approach to intersex disorders will likely continue to evolve.²⁸

A Brief Background to Gender Dysphoria

Having covered the basics of the language relevant to this conversation, we can now begin to discuss the scientific and clinical underpinnings of GD. There are several considerations here, including understanding the causes of transgenderism, examining the treatment options available to trans individuals, evaluating the efficacy of SRS, and examining some of the general ethical approaches to this phenomenon. We will begin with a survey of current research into the causes of GD, also known as its etiology.

The causes and prevalence of transgenderism. Especially in an ethical discussion of transgender behavior, it is crucial to ascertain as accurately as possible the origins of the incongruence between sex and gender identity trans individuals experience. It is exactly this ethical debate that is currently fueling extensive research into the etiology of GD. There are two primary types of factors under investigation: genetic factors, and factors relating to upbringing, lifestyle, and societal pressures. Essentially the question is this: is transgenderism a result of nature or nurture?

²⁸ MacGillivray and Mazur, "Intersex," 302.

Unfortunately, the answer to this question does not seem to be a simple one, as both nature and nurture appear to influence the development of GD. Reporting on several studies into the causes of transsexuality, Cohen-Kettenis and Gooren note links between certain familial factors and GD in children, most notably parental psychological problems, parental emotional coldness, and overprotectiveness of the parent of the same sex as the child.²⁹ Other research, however, has shown that MtF transsexual individuals report relationships with their fathers that are as healthy as those reported by cisgender homosexual males.³⁰ Studies of the comparative rates of abuse in transgender and cisgender individuals has shown that transgender individuals are likelier to have experienced abuse, but whether this abuse was part of the formation of GD or a result of gender variant behavior is unclear.³¹ Ultimately, Cohen-Kettenis and Gooren conclude the following regarding the role of upbringing in the development of GD: “For the development of certain, perhaps mild, forms of gender disturbance, [environmental factors] represent sufficient conditions. For the development of other conditions, environmental factors may be necessary, but not sufficient.”³²

Many biological factors have been investigated regarding their relation to GD. The best-demonstrated biological mechanism for the development of transgenderism is

²⁹ Cohen-Kettenis and Gooren, “Transsexualism,” 317-318.

³⁰ Jaimie F. Veale, David E. Clarke, and Terri C. Lomax, “Biological and Psychosocial Correlates of Adult Gender-Variant Identities: A Review,” *Personality and Individual Differences* 48, no. 4 (March 2010): 363.

³¹ *Ibid.*

³² Cohen-Kettenis and Gooren, “Transsexualism,” 318.

exposure to amounts of the hormone androgen *en utero* that are inconsistent with one's biological sex. Androgen is a hormone that stimulates the development of male traits both prenatally and postnatally, and studies have provided significant evidence that inappropriate uterine androgen levels contribute to the development of GD.³³ Additionally, there is evidence that certain brain structures in both pre and postoperative transsexual individuals resemble those of members of the opposite sex more closely than those of members of their birth sex.³⁴ However, further research into the biological factors related to transgenderism is necessary to demonstrate a conclusive causative relationship, as current research is inadequate to show that this identity incongruence is fundamentally biological.³⁵ Cultural factors seem to play the smallest role in the formation of a gender identity discordant with one's biological sex, with GD or roughly equivalent phenomena being reported across national and cultural lines, including in societies with different gender categories and roles than Western nations.³⁶

Ultimately, current research shows stronger – though not conclusive – evidence of causal links between biological factors and GD than between upbringing factors and this condition. While multiple biological differences between trans and cisgender individuals have been documented, differences between upbringings of members of these groups are less consistent, and an individual with no upbringing abnormalities may still develop

³³ Veale, Clarke, and Lomax, "Biological and Psychosocial Correlates," 364.

³⁴ Victoria S. Kolakowski, "Toward a Christian Ethical Response to Transsexual Persons," *Theology and Sexuality* 6 (1997): 16.

³⁵ American Psychological Association, "Gender Dysphoria," 457.

³⁶ *Ibid.*

GD.³⁷ Upbringing abnormalities associated with GD may also reflect responses to an individual's gender-variant behaviors rather than causes of these behaviors. At the same time, this does not mean that upbringing factors have no role in the formation of GD, especially given recent evidence that gender identity is fluid, especially in trans individuals.³⁸ Based on the available evidence, however, the best conclusion is to understand biological factors as more influential than environmental factors in the majority of cases of GD; at the very least, it is clearly improper to say that GD is a choice, or solely rooted in upbringing in all cases.

Accurately measuring the prevalence of GD is a challenging task, as attempts to measure this often only include those who have sought clinical or medical treatment, or transsexual people rather than all transgender individuals. Furthermore, transgender individuals living as members of the opposite gender tend to identify with their gender identity rather than as transgender.³⁹ The American Psychological Association (APA) estimated in 2013 that 0.005 to 0.014 percent of biological males and 0.002 to 0.003 percent of biological females are gender dysphoric⁴⁰; this number, however, is likely much lower than the number of individuals who experience tension between their gender identity and biological sex, as it only includes those who meet the organization's classifications for GD. A 2016 survey of several studies on the prevalence of GD

³⁷ Veale, Clarke, and Lomax, "Biological and Psychosocial Correlates," 362-363.

³⁸ Kenneth J. Zucker, Anne A. Lawrence, and Baudewijntje P.C. Kreukels, "Gender Dysphoria in Adults," *The Annual Review of Clinical Psychology* 12 (2016): 235.

³⁹ Kolakowski, "Towards a Christian Ethical Response," 13.

⁴⁰ American Psychological Association, "Gender Dysphoria," 454.

provides a range of about 0.5% to 1.2% prevalence, with men more likely than women to experience this type of incongruence.⁴¹ While this may seem a relatively insubstantial portion of the population, the authors of this survey put it this way:

If one of the lower estimates ... the 0.5% reported as an overall mean for birth-assigned males and females, is extrapolated to a global population of 5.1 billion people aged 15 years or older ... we arrive at a figure of around 25 million transgender people worldwide. This gives some idea of the potential worldwide (and currently largely unmet) need for transgender health care.⁴²

Treating transgenderism. The psychiatric and medical treatments available for those who deal with the type of identity crises GD causes are currently in a major state of flux. While trans individuals have historically received therapeutic treatment aimed at eliminating feelings of GD, it is now widely acknowledged that psychiatric treatment of this type is ineffective.⁴³ Most psychiatric approaches to GD now focus on providing trans individuals with a safe and supportive environment in which GD can “unfold of its own accord.”⁴⁴ This is becoming the predominant approach to dealing with GD due to growing awareness that this experienced identity incongruence usually does not persist throughout one’s entire life. Again, there is no agreed upon proportion of trans individuals who will experience the desistence of their identity discord; studies have

⁴¹ Sam Winter et al., “Transgender People: Health at the Margins of Society,” *The Lancet* 388, no. 10042 (July 2016): 392.

⁴² Winter et al., “Transgender People,” 392.

⁴³ Watts, “Transsexualism,” 68.

⁴⁴ Jack Drescher and Jack Pula, “Ethical Issues Raised by the Treatment of Gender-Variant Prepubescent Children,” *The Hastings Center Report* 44, no. 5 (2014): S18.

shown that from 63%⁴⁵ to 90%⁴⁶ of children presenting with GD will not identify as trans in adulthood. While factors associated with the persistence and desistence of GD are being studied, there is currently no evidence that psychotherapy can result in “complete and long-term reversal of cross-gender identity.”⁴⁷

Currently, the treatment regimen for trans individuals begins with psychotherapy, the goal of which is not to eliminate GD, but to determine if an individual’s cross-gender urges result from a source other than true GD. This can be challenging, as the symptoms of GD can be indistinguishable from cross-gender behaviors resulting from sexual trauma, psychotic disorders, and other sources.⁴⁸ If one’s cross-gender urges seem to be rooted in a genuinely discordant gender identity, the next phase of treatment involves hormone treatments and cross-gender living in order to determine if one is satisfied living as a member of the opposite sex. Ideally, this phase of treatment will give both the patient and his or her care providers clarity into whether SRS will be a beneficial treatment for his or her GD symptoms. If lifestyle alteration and hormone treatments effectively reduce symptoms and the individual has the desire to permanently live as a member of the opposite sex, surgical options will be considered.⁴⁹ Surgical options are always a type of

⁴⁵ Thomas D. Steensma et al., “Factors Associated with Desistence and Persistence of Childhood Gender Dysphoria: A Quantitative Follow-Up Study,” *Journal of the American Academy of Child & Adolescent Psychiatry* 52, no. 6 (June 2013): 583.

⁴⁶ Kristina R. Olson, “Prepubescent Transgender Children: What We Do and Do Not Know,” *Journal of the American Academy of Child & Adolescent Psychiatry* 55, no. 3 (March 2016): 155.

⁴⁷ Cohen-Kettenis and Gooren, “Transsexualism,” 321.

⁴⁸ Drescher and Pula, “Ethical Issues,” S18.

⁴⁹ Cohen-Kettenis and Gooren, “Transsexualism,” 326.

last resort treatment for GD, as the surgeries are complicated, sometimes accompanied by serious postoperative problems, and are, of course, more permanent than other treatments.

Treating trans individuals is a complicated endeavor because of the complexity of cross-gender urges in general. Additionally, trans individuals are extremely likely to experience suicidal ideation, and are between two and four times more likely to attempt suicide than non-trans individuals.⁵⁰ They are also more likely to be autistic, struggle with anxiety,⁵¹ and be HIV positive than cisgender individuals.⁵² All of these comorbidities urge those treating trans individuals to exercise greater caution in treating these people, and especially in recommending SRS.

Sex reassignment surgery. Sex reassignment surgeries, also known as sex change operations, are medical procedures with the goal of modifying one's physical sex characteristics to imitate those of the opposite sex. There are two aspects of SRS relevant to our discussion here: the medical effectiveness of these procedures (i.e., whether they lead to health complications), and their success in alleviating GD.

Data on the effectiveness of SRS can be difficult to collect because this demographic typically has a low response rate to questionnaires.⁵³ What evidence is

⁵⁰ Ilan H. Meyer and Mary E. Northridge, eds., *The Health of Sexual Minorities: Public Health Perspectives On Lesbian, Gay, Bisexual, and Transgender Populations* (New York: Springer, 2007), 492.

⁵¹ American Psychological Association, "Gender Dysphoria," 459.

⁵² Meyer and Northridge, *The Health of Sexual Minorities*, 492.

⁵³ Griet De Cuypere et al., "Sexual and Physical Health After Sex Reassignment Surgery," *Archives of Sexual Behavior* 34, no. 6 (Dec. 2005): 689.

available, however, seems to indicate that sex change operations are largely successful in most measures. Meyer and Northridge report that only 6% of postoperative MtF transsexuals expressed any regret following surgery, and no respondents expressed total regret.⁵⁴ Cohen-Kettenis and Gooren also found high satisfaction rates among postoperative transsexuals, but noted that regretful individuals often experienced severe psychological problems⁵⁵; according to Ishak and Haneef, about 7% “requested for a reversal [sic], require psychiatric hospitalization or commit suicide.”⁵⁶ Reversal surgery is available, but extremely uncommon, and most regretful postoperative transsexuals seek non-surgical treatment.⁵⁷ Overall, self-reporting by transsexual individuals indicates that SRS is psychologically beneficial in the vast majority of cases.

Medical complications are common for recipients of SRS, with some procedures, namely female-to-male (FtM) sex change operations, resulting in problems more frequently than others. Generally, about 25% of male-to-female (MtF) transsexuals experience postoperative medical problems, while about 40% of FtM transsexuals experienced them.⁵⁸ The majority of complications are minor and readily treatable, though some are chronic or require more serious medical intervention.⁵⁹ Sexual problems

⁵⁴ Meyer and Northridge, *The Health of Sexual Minorities*, 483-484.

⁵⁵ Cohen-Kettenis and Gooren, “Transsexualism,” 327.

⁵⁶ Ishak and Haneef, “Sex Reassignment Technology,” 535.

⁵⁷ Miroslav L. Djordjevic et al., “Reversal Surgery in Regretful Male-to-Female Transsexuals after Sex Reassignment Surgery,” *Journal of Sexual Medicine* 13, no. 6 (2016), 1000.

⁵⁸ Gennaro Selvaggi and James Bellringer, “Gender Reassignment Surgery: An Overview,” *Nature Reviews Urology* 8, no. 5 (May 2011): 279.

⁵⁹ Anne A. Lawrence, “Patient-Reported Complications and Functional Outcomes of Male-to-Female Sex Reassignment Surgery,” *Archives of Sexual Behavior* 35, no. 6 (Dec. 2006): 724.

are the most common problem following SRS; however, the vast majority of individuals report that their sex lives improve as a result of SRS.⁶⁰ Health problems are becoming less common as medical technology improves, with recipients of sex change operations in later years reporting complications less frequently than recipients of these procedures when the technology was less developed.⁶¹

While SRS is certainly not without its dangers, and is frequently accompanied by physical, sexual, or social difficulties, most transsexuals report that they are glad to have received them, even when complications arise.⁶² Nicholas Mason, a FtM transsexual who received SRS in the 1970s, sums up the general experience of operative transsexuals eloquently: "... all these problems, real and imagined, have been worth tolerating in order to live a life freed from the conflict which was making existence so unhappy. No longer do I feel that I am acting a part but am free to be myself."⁶³

Part Two: Evaluating the Traditional Approach

Having briefly covered the ins and outs of transgenderism, we are now equipped to begin to evaluate the ethical judgment on transgenderism that has dominated mainstream evangelical Christendom, specifically the arguments that underlie this judgment. To start, we will summarize this approach. From here, we will critique this traditional approach, and then discuss the importance of having a more solidly rooted

⁶⁰ De Cuypere et al., "Sexual and Physical Health," 684.

⁶¹ Lawrence, "Patient-Reported Complications," 722-723.

⁶² *Ibid.*, 724.

⁶³ Nicholas Mason, "The Transsexual Dilemma: Being a Transsexual," *Journal of Medical Ethics* 6 (1980): 87.

Christian moral judgment on transgenderism. We will also examine some more convincing arguments against cross-gender living, and note some areas in which further consideration would be helpful.

The Traditional Christian Approach to Transgenderism

Summarizing the so-called “traditional Christian” approach to trans individuals is difficult, as Protestant churches tend to hold varied views on social issues, and many denominations have not released official statements regarding this issue. Therefore, rather than addressing every published doctrinal statement, we will explore this approach by examining the theological bases of the typical Christian approach to transgenderism.

The creation account. In general, the Christian response to transgenderism has been to label living as the opposite gender as morally wrong. The main basis for this stance is in the created order, specifically Gen. 1:27: “So God created man in his own image, in the image of God he created him; male and female he created them.”⁶⁴ In the same way that God intentionally created Adam as a male, and Eve as a female, the traditional Christian approach to trans issues holds that this account is “paradigmatic for God’s intention” for all people.⁶⁵ “Male and female” in Gen. 1:27 is understood as being manifested most clearly through one’s biological sex; thus, John Piper writes, “Genitalia is a revelation of God’s design.”⁶⁶ Because physical sex is understood to be the visible

⁶⁴ Unless otherwise noted, biblical references refer to the English Standard Version (ESV).

⁶⁵ Kolakowski, “Toward a Christian Ethical Response,” 16-17.

⁶⁶ John Piper, “‘Genitalia Are Not Destiny’ – But Are They Design?,” *Desiring God*, last modified June 2, 2014, accessed Feb. 1, 2017, <http://www.desiringgod.org/articles/genitalia-are-not-destiny-but-are-they-design/>.

sign of God's design of an individual as male or female, transgender feelings are understood as a psychological problem. This is often accompanied by the belief that GD is not rooted in an individual's biology, but in one's upbringing and personal choice, with the attached understanding that gender dysphoric feelings can be lessened, if not totally removed, by spiritual or psychological counseling. Other Christian approaches to these people accept that GD may have significant biological roots, but still disapprove of transgender behavior, being careful not to overestimate genetic underpinnings as an indication of moral goodness.⁶⁷ Additionally, Christian approaches that accept biological factors as a cause of transgenderism also note that, while biology can predispose someone to a certain type of behavior, biological proclivity is wholly different from biological determinism.⁶⁸ While acting on transgender urges is usually seen as sinful, being tempted to live as the opposite sex is not, as temptation by itself is not sinful (Heb. 4:15). Ultimately, whether GD is biologically or experientially rooted, it is seen as a symptom of the brokenness of creation; specifically, it is trans person's gender identity that is viewed as a consequence of the Fall, while one's biological sex is accepted as God's design.

Christians have traditionally insisted on strong gender binarism. Thus, most conservative Christians strongly reject arguments that biological sex is unimportant as inappropriate minimizations of the intentionality of the created order.⁶⁹ Therefore, while

⁶⁷ Joe Dallas, "The Transsexual Dilemma: A Dialogue about the Ethics of Sex Change," *Christian Research Journal* 31, no. 1 (2008): 3.

⁶⁸ Watts, "Transsexualism," 67.

⁶⁹ Dallas, "The Transsexual Dilemma," 5.

some liberal Christians would see gender as “experienced and expressed along a wide spectrum,” Christians largely endorse gender binarism, even in communities that see GD as an inborn trait.⁷⁰

Other biblical arguments. Unlike most Christian moral judgments, the transgenderism discussion does not rely on a Scripture passage allowing or prohibiting this behavior. The closest the Bible comes to clearly addressing cross-gender behavior is Deut. 22:5, which the ESV renders, “A woman shall not wear a man’s garment, nor shall a man put on a woman’s cloak, for whoever does these things is an abomination to the Lord your God.” However, there is significant disagreement regarding the meaning of this verse. Ancient Near East historian Harold Vedeler argues that this verse does not address crossdressing at all, but the protection of the exalted social status of warrior-men in the Israelite community.⁷¹ Tobi Liebman, after studying the interpretive history of this verse, notes its use to prohibit a huge range of culturally gendered activities, including women studying the Torah and men “looking in mirrors, dying white hair black, or plucking out white hairs from black ones.”⁷² She concludes thus: “This study of the history of Jewish exegesis on the verse has demonstrated that Deut. 22:5 and the practice

⁷⁰ James D. Whitehead and Evelyn Eaton Whitehead, “Transgender Lives: From Bewilderment to God’s Extravagance,” *Pastoral Psychology* 63, no. 2 (2014): 173.

⁷¹ Harold Torger Vedeler, “Reconstructing Meaning in Deuteronomy 22:5: Gender, Society, and Transvestitism in Israel and the Ancient Near East,” *Journal of Biblical Literature* 127, no. 3 (2008): 471. Vedeler argues that this verse uses *geber* instead of the more common *ish* to refer to the male because the author had in mind not men in general, but the “superior man.” He proposes that the *simlat isha* are “the garments of a woman,” and that the *keli gebed* refers to a type of tool, specifically a weapon, that symbolized the status of the accomplished man in that society. He offers this translation of Deut. 22:5 “A woman shall not be associated with the instrument of a superior man, and a superior man shall not wear the garment of a woman, for whoever does these things is a cultic abomination to Yahweh your God” (476).

⁷² Tobi Liebman, “The Jewish Exegetical History of Deuteronomy 22:5: Required Gender Separation or Prohibited Cross-dressing?” (M.A. thesis, McGill University, 2002), 107.

it proscribes are unclear, and its practical application is not at all straightforward.”⁷³

Because of the ambiguity of the behavior this verse condemns, and its reason for condemning it, most conservative statements on transgenderism avoid relying on this verse.⁷⁴

Other biblical texts that have been used historically to address transgender behavior include texts referring to eunuchs, who were usually men who were castrated as a punishment for a crime. The primary eunuch text used in this discussion is Deut. 23:1, which reads, “No one whose testicles are crushed or whose male organ is cut off shall enter the assembly of the Lord.” Some argue that this text clearly condemns SRS.⁷⁵ However, the position of this verse in a set of commands regarding protecting the assembly of God (see vv.1-7) strongly suggests that this is a cultic instruction, not an absolute moral law. This is clearer considering the role of handicapped individuals in the religious ceremonies of Israel’s pagan neighbors; Eugene Merrill summarizes this instruction in its cultural context well: “Their exclusion from the worship assembly, as discriminatory as such a policy might seem, was to underscore the principle of separation from paganism, where such deformities were not only acceptable but frequently central to the practice of the cult.”⁷⁶ Thus, while some argue that this verse provides a clear biblical

⁷³ Ibid.

⁷⁴ James M. Childs, “Transsexualism: Some Theological and Ethical Perspectives,” *Dialog: A Journal of Theology* 48, no. 1 (Spring 2009): 35.

⁷⁵ Childs, “Transsexualism,” 36.

⁷⁶ Eugene H. Merrill, *Deuteronomy*, The New American Commentary 4 (Nashville: Broadman & Holman Publishers, 1994), 307.

condemnation of SRS, most commentators view this is a poor interpretive option. More generally, texts relating to eunuchs, such as Isa. 56:4-5, Matt. 19:12, and others, have limited usefulness in this conversation. Firstly, biblical eunuchs, with one clear exception, did not become eunuchs by choice, but were eunuchs from birth or because of the actions of others. The exception to this, Jesus' "eunuchs who have made themselves eunuchs for the kingdom of heaven" (Matt. 19:12), refers to becoming voluntarily celibate (see v. 10), not living in a role other than one's assigned gender. This is the largest problem with applying a biblical eunuch text to the transgender discussion: none of these passages refer to the desire to live as a member of the opposite gender; this simply was not a concern of the biblical authors.⁷⁷ Transgenderism is not analogous to biblical eunuch-hood, and any moral judgment on it based on such passages should be met with skepticism.⁷⁸

A more frequent defense of the traditional Christian approach to transgenderism is to cite passages such as Psa. 139:13-16, in which David writes, "For you formed my inward parts; you knitted me together in my mother's womb. I praise you, for I am fearfully and wonderfully made" (vv.13-14a). Similar texts include Jer. 1:5, where God tells Jeremiah, "Before I formed you in the womb I knew you," and the announcement of Jesus' birth, as in Luke 1:31: "And behold, you will conceive in your womb and bear a son" (cf. Matt. 1:21). The Annunciation texts are especially useful to some in this

⁷⁷ Merrill, *Deuteronomy*, 307.

⁷⁸ Megan K. DeFranza's appropriation of these texts to intersex issues is much more welcome here, as the situation of an intersex individual is significantly more similar to that of a biblical eunuch than that of a trans person. See her *Sex Differences*, ch. 2.

discussion, as they include the gender of the unborn baby, evidencing that God is aware of gender separate from cultural norms and an individual's gender identity (also Gen. 18:10; Judg. 13:3).⁷⁹ If God has intentionally designed an individual, how could he give an individual the "incorrect" physical body? So the traditional Christian argument goes. It naturally follows, then, that the discordant aspect of a dysphoric individual's identity is not his or her physical body, but his or her mind.

Summary of ethic and practical applications. In general, the Christian approach to transgenderism has been critical, and has prohibited gender dysphoric people from living in a role other than that of their assigned gender. This is based on the understanding that an individual's biological sex is the physical manifestation of an individual's true gender, that is, the gender God views one as a member of. We can group the arguments used by proponents of the traditional approach into two categories, both of which involve the nature of God's creation of individual. The first and more foundational argument is that from the original creation account, that is, God's creation of mankind as "male and female" (Gen. 1:27). The second category is arguments from biblical texts related to God's intentional creation of each individual from passages such as Psa. 139:13-16 and birth annunciation texts.

Practically, then, godly behavior for an individual with transgender urges is that which aligns with his or her assigned gender, as this is how a person lines up with God's desires for him or her. While some liberal Protestant denominations, such as the Anglican and Episcopalian churches, have allowed the ordination of trans clergy and blessed

⁷⁹ Dallas, "The Transsexual Dilemma," 5.

marriages of trans men with birth or trans women, and vice versa, the majority of denominations and evangelical churches do not.⁸⁰

For trans individuals currently living in the role of the opposite gender, repentance is returning to the role of one's assigned gender. In his account of counseling a transsexual, Joe Dallas tells the story of James, who had previously received a sex change operation to become physically a woman, and identified himself as Mandy when he encountered Christ and became a part of a church. As Mandy, James told his pastor about his past life and surgery, and while the pastor explained to him that God's will for him was to live in the role of his birth sex, he and the congregation supported and cared for James as he sought to understand himself. As he naturally grew in spiritual maturity he grew into the masculine role he was born into, and eventually "Mandy" asked to be reintroduced to the church as James. Just over a year later, James, still a postoperative MtF transsexual, was engaged to a woman in the congregation.⁸¹ In general, James' story represents the ideal process of repentance that Christians have traditionally prescribed trans individuals. It is unclear whether postoperative transsexuals would be encouraged to receive reversal surgeries; these surgeries would likely be allowed if an individual had the desire and means to receive them, but not required as part of the process of repentance. Russell Moore, president of the Southern Baptist Convention's Ethics and

⁸⁰ "Denominations," Transgender Christians, accessed Feb. 2, 2017, <http://www.transchristians.org/denominations/anglican/>.

⁸¹ Dallas, "The Transsexual Dilemma," 8.

Religious Liberty Commission, unites the following regarding surgically reversing a sex change operation:

On the question of whether “Joan” should go reverse her “gender reassignment” surgery, I’m inclined to say no in this case. After all, no surgery can reassign gender. The surgery mangled John and sought to create an illusion of a biological reality. There’s no way this surgery can be “reversed,” only another cosmetic illusion created on top of the old one.⁸²

Moore’s comment reveals another important aspect of the view many Christians hold regarding SRS: rather than seeing SRS as an attempt to do what is medically possible to align one’s physical characteristics with his or her gender identity, it is seen as a repulsive charade, a sinful acquiescence to one’s mental delusions.

Of course, the ideal of a transgender individual ceasing to experience their cross-gender urges does not always unfold; in cases where GD does not dissipate, trans individuals are generally instructed to embrace celibacy à la Jesus’ voluntary eunuch in Matt. 19:12, and desist any activities that are heightening their cross-gender behaviors, including transvestitism, taking cross-sex hormones, etc.⁸³

Evaluating the Traditional Approach

In our summary of the traditional Christian approach to transgenderism, we grouped the arguments for prohibiting cross-gender living into two categories: those from the created order generally, and those from God’s purposeful creation of every person individually. Here we will evaluate these two foundations of the traditional approach, and

⁸² Russell Moore, “Joan or John?,” The Gospel Coalition, last modified Oct. 8, 2014, accessed Feb. 2, 2017, <https://www.thegospelcoalition.org/article/joan-or-john/>.

⁸³ Ibid.

consider the efficacy of basing a Christian ethical judgment on transgenderism on these arguments.

Gender, sex, and the Fall. The Genesis creation account, in particular Gen. 1:27, is the foundation for two understandings that are pillars of the traditional Christian approach: gender binarism, and the creation of each individual as unalterably male or female. The basis for gender binarism in the passage is clear, and represents a proper interpretation of the text. A natural reading of Gen. 1:27 makes this clear: gender is not a continuum or “simply a matter of the individual’s decision.”⁸⁴ Part of the design of humanity, per Genesis 1-2, is the maleness or femaleness of individuals, a delineation God viewed as “very good” (v.31). Gender binarism is not merely a result of social norms or a certain upbringing; it is an intrinsic characteristic of humanity. This is evidenced most clearly and consistently in physical and anatomical ways, but is also confirmed in the social, emotional, and other behavioral differences between men and women, though of course these are prone to cultural variance.

The second major conclusion the traditional approach draws from Gen. 1-2, that each individual is inherently male or female, is also a valid application of this text; however, viewing biological sex as the most reliable indicator of maleness or femaleness is much more tenuous. Earlier, we referred to “holistic gender” as a sort of catch-all term, inclusive of gender identity, biological sex, gender behavior, and sexual orientation. It is clear upon reading the creation account that when Gen. 1:27 recounts that “male and female he created them,” what the author is referring to is not merely anatomical

⁸⁴ Ishak and Haneef, “Sex Reassignment Technology,” 535.

maleness and femaleness, but holistic maleness and femaleness. While our four aspects of gender are not explicitly referenced in Gen. 1-2, all four can be seen functioning in concord in Adam. Adam's heterosexual orientation is, while not questioned, assumed in God's command to him and Eve in 1:28: "Be fruitful and multiply" (also see 2:24). His male gender behavior is shown in his naming of the animals (2:19), which is contrasted with Eve's role as a "helper fit for him" (2:20). Adam's male gender identity is seen in his clear understanding of Eve's uniqueness in his song about her: "This at last is bone of my bones and flesh of my flesh; she shall be called Woman, because she was taken out of Man" (2:23). Notice how he does not refer to her physical characteristics as the reason for giving her the name "Woman," but rather understands the difference between male and female based on Eve's origin and purpose. Biological sex is actually the least prominent aspect of gender in this passage, only implied in the phrase, "the man and his were both naked and were not ashamed" (2:25). Clearly, the focus of this passage is the creation of male and female as holistic creatures, different and complementary in each of the four aspects of gender identity, not simply as creatures with different genitalia.

It is strange, then, that the primary use of this text in relation to transgenderism is to argue that biological sex is a certain indicator of holistic gender, when biological sex is the least prominent aspect of gender in the creation account. In reality, the purpose of this text is not to explain why men have one anatomy and women have another, but to explain the origin of the two genders. Acknowledging the effects of the Fall on maleness and femaleness, proponents of this approach see this account as an affirmation of the claim

that, while one's gender identity may be discordant, one's biological sex cannot be.⁸⁵ However, the Fall caused a complete shattering of creation's design, including its physical aspects. Consider the curse God pronounced on Eve in Gen. 3:16: "I will surely multiply your pain in childbearing; in pain you shall bring forth children. Your desire shall be contrary to your husband, but he shall rule over you." Here God promises that, as a result of her sin, she will experience both physical ("pain in childbearing") and psychological ("Your desire shall be contrary to your husband") incongruence from God's initial design for her. Why should this not also be our understanding of the Fall's effects on gender? There is no reason for the Genesis creation and Fall accounts to lead us to believe that one's gender identity can be discordant with God's design for a person, but one's biological sex infallibly concurs with God's design for him or her.

The existence of individuals with intersex disorders should strongly discourage a biological sex-centric identification of holistic gender as well. As previously noted, intersex disorders result in physical sex characteristics that are either ambiguous, or that do not align with one's chromosomal maleness (XY) or femaleness (XX). These disorders alone are evidence that biological sex characteristics are prone to distortion because of the Fall and, from this, that it is not the infallible indicator of gender that some take it to be. The church historically has not taken seriously the implications intersex disorders on the complexity of gender, for centuries assigning people with these conditions genders and, if these people behaved in a way that did not fit their assigned

⁸⁵ Dallas, "The Transsexual Dilemma," 80.

roles, putting many to death for sodomy.⁸⁶ The traditional approach also does not adequately account for intersex individuals; for example, Russell Moore stated that intersex disorders are not relevant to transgender issues because “only a miniscule number of cases involve persons of indeterminate gender.”⁸⁷ While intersex individuals do represent a small portion of the population (though not as small as Moore implies, as we have discussed), the existence of these individuals unavoidably calls into question the traditional dogmatic identification of gender with physical sex characteristics.

As we have seen, there is no contradiction between acknowledging the possibility that a trans individual’s biological sex is the aspect of his or her person that is “out of place” and the Genesis creation account. In fact, this seems perfectly plausible when considering the fullness of the brokenness resulting from the Fall. This is also no threat to gender binarism or complementarianism, as it still affirms both these doctrines. In summary, a proper understanding of transgenderism and the Genesis creation account leaves sufficient room for the validity of the experienced incongruence of trans individuals, and Christians should not reflexively dismiss the idea that it is a trans person’s physical body, and not his or her mind, that is the cause of his or her identity incongruence.

Design and disability: individual creation and the Fall. While the previous section examined the implications of the Genesis creation account on transgenderism, we

⁸⁶ Kerry, “Intersex Individuals’ Religiosity,” 278.

⁸⁷ Quoted in Jonathan Merritt, “3 Reasons Conservative Christians Will Lose the Transgender Debate,” *Religion News Service*, May 14, 2016, accessed January 27, 2017, <http://religionnews.com/2016/05/14/3-reasons-conservative-christians-will-lose-the-transgender-debate/>.

turn our attention now to the use of individual creation texts in this discussion. These include Psa. 139:13-16 and Jer. 1:5, which specifically speak of God's knowledge of an individual before birth, and, less so, texts in which God announced the gender of a baby that would be born, such as Gen. 18:10, Judg. 13:3, Matt. 1:21, and Luke 1:31.

We will briefly address the texts in which God made known to someone the gender of a baby before it was born, as they are less impactful for this discussion. In each of the passages mentioned, God reveals that the baby to be born will be a male, and in none of these cases is the gender of the baby the focus of its identification as a male. Rather, each of these children is denoted as male because of the significance of being a male in the given context, whether the context is providing the barren Sarah with a son so that Abraham's line could continue (Gen. 18:10), foretelling the birth of a male judge for Israel (Judg. 13:3), or announcing the birth of the Messiah, whose maleness is theologically important (Matt. 1:21; Luke 1:31).⁸⁸ Furthermore, while these texts show that the Lord is aware of a person's gender, none of these make statements regarding what the determinant of gender is, as this was not a phenomenon that we have reason to believe the authors of Scripture were aware of.⁸⁹ While these texts are useful in confirming that the Lord knows a person's true gender, to extrapolate from these texts that the physical sex characteristics a person is born with are infallible indicators of that person's designed gender is to read eisegetically, rather than exegetically.

⁸⁸ For prophecies pertaining to the maleness of the Messiah, see Gen. 3:15, Psa. 2:6-7. Jesus' maleness was crucial for Him to fulfill the roles of Prophet, Priest, and King, to be the Son of God, to reflect God the Father's self-revealed maleness, and for other reasons as well.

⁸⁹ Childs, "Transsexualism," 36.

Psa. 139:13-16, on the other hand, contributes an important aspect to our understanding of GD: as much as it is rooted in biology, it is something that God intends for an individual who struggles with it. In the psalm, David praises the Lord for forming him, for knitting him together *en utero*, for creating him, specifically his physical body, intentionally. Though there is no evidence that David struggled with a physical or mental disability, there is no reason to read this text as exclusively applicable to David, or those without disabilities to speak of. John Knight offers a touching reading of this passage for those with birth defects and other challenges:

For you formed my inward parts *with Down syndrome*;
 you knitted me together in my mother's womb *without eyes*.
 I praise you, for I am fearfully and wonderfully made *with cognitive challenges*.
 Wonderful are your works *in creating me without limbs*;
 my soul knows it very well *though my ears will never hear a sound*.
 My frame was not hidden from you *as you made me with Apert syndrome*,
 when I was being made in secret *with autism*,
 intricately woven in the depths of the earth *without Hexosaminidase A*.
 Your eyes saw my unformed substance *with spina bifida*;
 in your book were written, every one of them,
 the days that were formed for me *with cerebral palsy*,
 when as yet there was none of them.⁹⁰

Gender dysphoria, therefore, should be understood as a part of God's design of an individual who experiences it. Though referring to transgenderism as a disorder may be controversial, this is an appropriate label as much as it is a disruption of healthy and congruent function of the human body, and causes individuals who experience it a great deal of pain and distress. God takes credit for creating individuals with disabilities from birth in texts such as Exo. 4:11 and John 9:1-3; Knight does well to conclude thus from

⁹⁰ John Knight, "Is God Sovereign Over Human Disability?," *Desiring God*, last modified May 6, 2010, accessed Feb. 3, 2017, <http://www.desiringgod.org/articles/is-god-sovereign-over-human-disability/>. Italics are original, and represent his additions to the ESV text.

these passages: “To be clear, God’s sovereignty doesn’t mean he merely *permits* disability. These verses show us that he sovereignly *intends* it, both for his glory and for our good.”⁹¹ This includes, of course, both mental and physical disorders. God’s intentional creation of each individual, then, is not a guarantee that every aspect of an individual will be perfect, but rather that the Lord purposefully designs all parts of a person, including any disorders one may suffer from.

This brings us to two questions: whether transgenderism is biologically rooted, and whether it is a mental disorder or a physical disorder, that is, if one’s gender identity or biological sex is the cause of the identity incongruence. We addressed the first directly, concluding that current research indicates that one’s biology certainly plays a part in development of transgenderism, and likely a more important role than upbringing. The second question is more difficult to answer, but the best conclusion seems to be that both are possible. The low persistence rate of GD in children indicates that in many cases it is a mental problem that is resolved as one’s identity develops, while the ineffectiveness of psychiatric treatment and very high efficacy of SRS in eliminating or significantly reducing GD suggests that one’s physical characteristics can be the source as well. Further research into the causes of GD will likely provide a firmer answer to this question, but current evidence suggests that the cause of transgenderism is not the same in all cases.

Understanding the cause of transgenderism is crucial for developing an approach to trans individuals, as it will determine what treatment should be recommended. If it is a

⁹¹ Knight, “Is God Sovereign Over Human Disability?”

mental disorder, we should treat it through psychiatric help as with other psychotic problems, but if it is a physical disorder, then the most effective treatment is a physical treatment.

Some object to the possibility that one's functional sex characteristics could be a defect. Consider, for example, Joe Dallas' counsel to Kim, the FtM transsexual we mentioned earlier, who proposed that his female physical characteristics might be defective rather than his gender identity. Dallas' response represents a common mindset among proponents of the traditional approach, and warrants comment: "If something is inherently wrong, it's a flaw. But being male or female isn't a handicap or a sinful tendency. We can only call something a flaw if it's defective in and of itself. Otherwise, if something inherently natural about our body is at odds with our desires, then our desires are the problem, not vice versa."⁹² This definition of a defect exposes the primary presupposition inherent in the traditional approach. Proponents of this approach, Dallas included, take pains to avoid prioritizing the mental aspects of a person over the physical, acknowledging that this distinction between material and immaterial is Platonic, not biblical. Dallas goes so far as to identify transgenderism as a Gnostic concept, despising the physical and favoring the mental.⁹³ The traditional approach, however, overcompensates and prioritizes the physical over the mental in a way the Bible does not. This is called physicalism, which Watts defines as "a curiously dualistic theology of creation in which the physical is seen as embodying God's goodness more than the

⁹² Dallas, "The Transsexual Dilemma," 6.

⁹³ *Ibid.*, 5.

psychological.”⁹⁴ While it is certainly true that some trans individuals do embrace a dualistically anti-physical worldview, the correct response to this is not to prefer the other side of this duality, but to understand that God designed humans as whole beings with different aspects of their humanity working in harmony. Because of the Fall, however, there is now incongruence between the aspects of a person’s identity, and none of these are immune to the effects of this shattering, including the physical. Dallas’ response to Kim betrays exactly this unbiblical physicalism, which should not be allowed to drive the Christian moral judgment on transgenderism.

Thus, Psa. 139:13-16 does not provide reason to conclude that transgenderism is exclusively a mental problem, or a disorder based solely on upbringing. However, it does add to our understanding of transgenderism by confirming that those who do struggle with GD because of their biology have been intentionally designed with this condition by God. He does not afflict individuals with biological or other challenges to punish or hurt, but to test them in order to ultimately allow them to grow in their relationship with him through their trials. This by no means should cause us to reject the idea of treating transgenderism using available effective psychiatric or medical means, but should give judgmental Christians pause, and encourage believers in Christ who struggle with GD that they have been given this struggle by God on purpose, and ultimately for their eternal good.

To summarize our critique of the arguments used by proponents of the traditional approach, we have seen that the biblical texts cited as evidence that biological sex is the

⁹⁴ Watts, “Transsexualism,” 80.

most reliable indicator of holistic gender do not in fact make this claim. The Genesis creation account suggests that holistic gender was never supposed to be broken into multiple parts, but has been because of sin, and that each of these aspects can be effected by the Fall, including biological sex. Additionally, while the individual creation texts reveal that individuals have the physical bodies and minds that God has designed them to have, these texts do not rule out that God intentionally designs individuals with mental and physical disabilities; in fact, the coexistence of these texts and individuals with mental and physical defects requires this to be the case. Finally, we must be careful not to counter a dualistic view of the body that favors the immaterial with a dualistic view that favors the material, but hold a view of the Fall that affirms the potential of both the body and mind to be defective because of sin.

Moving Towards a Better Approach

The purpose of our deconstruction of the primary arguments underlying the traditional Christian ethical handling of transgenderism is not to argue that cross-gender living is compatible with a godly lifestyle. Rather, we hope to set the stage for a discussion of transgenderism in which the Christian approach is rooted more solidly than it is currently. The ideal approach should succeed in three ways: firstly, responsibly handling biblical teachings on gender; secondly, compassionately recognizing the experiences of trans individuals, rather than minimizing or dismissing them; and thirdly, being compatible with current scientific and medical understandings.⁹⁵ The arguments

⁹⁵ This is not to say that scientific arguments should be accepted uncritically, as Christians should take care to examine the validity of these claims. However, scientific studies, despite being performed by biased and fallen men and women, can be extremely valuable in developing an understanding of a complex topic such as transgenderism, and Christians would do well to become acquainted with this issue through

traditionally used to forbid cross-gender living fulfill none of these, however, being rooted in a physicalist interpretation of the creation account, viewing all transgender experiences as evidence of mental disordering, and discounting research showing a biological basis for GD.

Advantages of basing the Christian approach more effectively. The advantages that accompany basing the Christian approach to transgenderism more effectively correspond to the three standards of a strongly-rooted response. Firstly, these arguments will be based on better interpretations of biblical texts. They will also avoid the condescending view that all gender dysphoric individuals are mentally handicapped, and acknowledge the experiences of these people in the way that scientific research is confirming the reality of their identity incongruence. As Susannah Cornwall, professor at the University of Exeter and expert on the intersection of theology and sexuality and gender, writes regarding the failures of the current Christian approach, “holding as pre-existent ‘known fact’ that all transgender people are mentally ill or delusional profoundly undermines their legitimacy.”⁹⁶ Especially as scientific findings are increasingly recognizing the legitimacy of GD as more than a solely mental disorder, the Christian approach should recognize the validity of the struggle these individuals face. This will naturally lead to greater empathy and care towards these individuals, which is surely preferable to prejudice and unwelcomeness. Additionally, approaching this issue in a way

these types of sources. When approached with a critical rather than skeptical eye, scientific understanding can be a valuable aid in forming an appropriate and well-informed moral judgment on transgenderism.

⁹⁶ Susannah Cornwall, “‘State of Mind’ versus ‘Concrete Set of Facts’: The Contrasting of Transgender and Intersex in Church Documents on Sexuality,” *Theology and Sexuality* 15, no. 1 (2009): 16.

that accounts for the growing body of scientific information regarding GD will allow the Christian approach to be taken more seriously in non-Christian circles. While this should not be the primary goal of a Christian ethical judgment, it is certainly advantageous for Christians to exhibit logical reasoning and scientific literacy in a culture that values these attributes so highly; this recalls Paul in 1 Cor. 9:22: “I have become all things to all people, that by all means I might save some.”

Alternative arguments against cross-gender living. We have intentionally avoided concluding that cross-gender living is ethical or sinful up to this point, because the purpose of this discussion has been to examine some problems with the foundations of the traditional Christian approach, rather than to propose a revised moral judgment on transgenderism. However, it is important to note that there remain reasons to argue against cross-gender living and SRS, even without misappropriating the creation account and personal creation texts. Two examples of more appropriate arguments against cross-gender living are the discord this transition could cause in church communities, and the ethical questions regarding pursuing cosmetic surgery to alleviate mental suffering, even if the mental suffering is based on the person having mismatched physical characteristics. We will now briefly examine these considerations.

Though modern Western society values individual good over corporate good, this individualism is foreign to the ethics of the New Testament. Consider, for example, Paul’s instructions regarding eating meat sacrificed to idols in 1 Cor. 8:9-13:

But take care that this right of yours does not somehow become a stumbling block to the weak. For if anyone sees you who have knowledge eating in an idol's temple, will he not be encouraged, if his conscience is weak, to eat food offered to idols? And so by your knowledge this weak person is destroyed, the brother for

whom Christ died. Thus, sinning against your brothers and wounding their conscience when it is weak, you sin against Christ. Therefore, if food makes my brother stumble, I will never eat meat, lest I make my brother stumble.

Of course, Paul did not have gender transitioning in mind when he wrote this passage, but the underlying principle of a church-first individual mentality should be instructive for Christians today. To my knowledge, no data exists regarding the effects of a churchgoer transitioning into the role of the opposite gender on the health of church congregations. However, it is easy to imagine the difficulty many in a congregation would face trying to process this type of change. While there are certainly times where a church may be embracing a sinful attitude that should be resisted, such as those that historically rationalized racism and slavery, this does not seem to be an analogous situation to resistance to transsexual behavior. Therefore, a Christian experiencing gender dysphoria should be greatly cautioned against receiving SRS for the sake of his or her individual psychological well-being if this transition will cause distress to his or her church community.

While the previous objection to transsexual living is circumstantial based on the composition of one's church community, a more serious ethical concern is that of receiving a cosmetic surgery on healthy tissue to correct identity incongruence. This question is further complicated when we consider that individuals with biologically-rooted GD have been designed by God as wholes, including both their physical bodies and gender identities. Earlier, we compared inborn GD to other genetic difficulties individuals face, some of which are manageable through medication, others of which cause difficulty throughout one's life. Very few Christians would argue that most

psychological or health problems should not be treated if an effective treatment is available. Thus, two questions need to be answered to effectively answer this ethical objection. Firstly, is GD a psychological or physical problem, i.e., is one's gender identity the deviation from his or her true gender, or is one's biological sex? We have addressed this question previously, and concluded that current research indicates that there are some cases where GD is based on an incongruent gender identity, and other cases where it is caused by a mismatched biological sex. Ultimately, further research is needed to show more conclusively the root cause(s) of GD, and will be very helpful for Christians looking to recommend an effective treatment to trans individuals. The second question is, specifically if the cause of GD can be shown to be one's physical sex, is surgical treatment that will destroy the functionality of healthy genitalia ethical if it will allow one to overcome GD? This is a complex question, and deserves significant further consideration. It should be noted that determining that GD has physical roots is not necessarily to determine that SRS is morally justified. While the Shia community in Iran subsidizes SRS because of its view that gender identity is of a greater ontological priority than biological sex, it is important to note that Christianity does not share the same anthropological binarism that Islam does, instead holding that people are whole beings shattered by sin.⁹⁷ Because Christianity values the physical more highly than Islam, there is a difficult set of ethical concerns that must be addressed to determine whether sex change procedures are an ethical treatment for physically-rooted GD.

⁹⁷ Bucar, "Bodies at the Margins," 610.

Ultimately, more medical and ethical consideration is necessary before a moral judgment can be made regarding whether a cross-gender lifestyle can be compatible with the Christian worldview. DeFranza's conclusion regarding the place of intersex individuals in Christian theology is welcome as a concluding note in the ethical uncertainties accompanying this discussion: "Certainly, the complexity of human sexuality, coupled with the challenge of biblical interpretation and application, should lead to humility on the part of all who wrestle with these issues."⁹⁸

Conclusion

The existence of transgender individuals challenges one of the most basic assumptions about Western society: the certainty of an individual's gender based on his or her physical characteristics. Thus, it is no surprise that a 2013 study showed that transgender people were the victims of the most discrimination of any minority sexuality or gender group, significantly below even homosexual individuals.⁹⁹ The church, however, should take the lead in welcoming and supporting these individuals, showing them the same care and hospitality that Jesus showed the social pariahs of first-century Israel. Sadly, as previously noted, the opposite is currently true, with devout Christians tending to show greater prejudice towards trans people than non-religious individuals.¹⁰⁰ This should be a wake-up call to Christians, who are not called to judge nonbelievers for their sin (1 Cor. 5:12), but to reach out to them in their sin in the same way that Christ

⁹⁸ DeFranza, *Sex Differences*, 268.

⁹⁹ Norton and Herek, "Heterosexuals' Attitudes," 746.

¹⁰⁰ *Ibid.*

reached out to them (Mark 2:16-17). This does not preclude labeling sinful activities as such, especially when an individual claims to be a Christian; however, Christians should not be afraid to admit their own ethical uncertainties, and should be willing to enter into dialogue with varying views to reach the best possible moral judgment. The goal of this discussion has been to expose the serious flaws in the traditional Christian arguments against transgenderism, and hopefully clear the way for stronger reasons to either approve or disapprove of cross-gender living. Whether this discussion leads to the prohibition or authorization of this lifestyle, love must remain the chief virtue of the church, and should characterize all its dealing with trans people, regardless of whether transsexual individuals are living sinfully or righteously.

As in all challenging areas of faith, Christians should look to Jesus as an encouragement, example, and promise in regards to gender identity issues. Those who struggle with their gender identity can see in Christ the ultimate example of tension between one's identity and physical body. Paul writes regarding this divine incongruence to the church in Philippi: "Have this mind among yourselves, which is yours in Christ Jesus, who, though he was in the form of God, did not count equality with God a thing to be grasped, but emptied himself, taking the form of a servant, being born in the likeness of men" (Phil. 2:5-7). God himself put on flesh and walked on the earth he created; though not strictly a problem of gender, no more extreme disconnect can be imagined than that of the Son of God, the second Person of the Trinity, being born as a baby in a feeding trough and being put to death on a Roman cross. Christ is the great Empathizer with all who struggle with feeling trapped in their bodies. This similarity between Jesus

and transgender individuals may go even further, as many commentators believe that Jesus' statement on the voluntary eunuch in Matt. 19:12 was his response to the crowd mocking him for being unmarried, and thus falling short of the cultural model of masculinity.¹⁰¹ Jesus also deviated from traditional gender norms, yet used his God-ordained differences to glorify the Father on earth. This should serve as a great encouragement to Christians struggling with transgender urges, and also a challenge to not let these difficulties define them, but to instead see them as opportunities to glorify God in ways that others may not be able to: "there are eunuchs who have made themselves eunuchs for the sake of the kingdom of heaven."

Furthermore, Jesus, in his revolutionary willingness to serve and be in the company of sinners and social pariahs, instructs Christians who wish to minister to transgender individuals most effectively. Jesus reached out to individuals who were outcasts both because of their sin, from tax-collectors to adulterous women, and because of circumstances beyond their control, including the blind, leprosy, and paralyzed. Regardless of the moral judgment regarding transgender living, Christians have an obligation to show intentionality and love to those who society most abandons, regardless of gender, sexual orientation, or any other factor.

Finally, Jesus is the great promise for all believers, those who struggle with transgenderism personally, and those who struggle with knowing how best to interact with others who do. In Christ's resurrection, there is a promise to all whose bodies make their lives painful and confusing, whose minds war against them: their turmoil will not

¹⁰¹ DeFranza, *Sex Difference*, 246.

last forever. In Rev. 21:1-4, John foretells of the day when all that is broken by the Fall will be made whole:

Then I saw a new heaven and a new earth, for the first heaven and the first earth had passed away, and the sea was no more. And I saw the holy city, new Jerusalem, coming down out of heaven from God, prepared as a bride adorned for her husband. And I heard a loud voice from the throne saying, "Behold, the dwelling place of God is with man. He will dwell with them, and they will be his people, and God himself will be with them as their God. He will wipe away every tear from their eyes, and death shall be no more, neither shall there be mourning, nor crying, nor pain anymore, for the former things have passed away."

And then the Lord, sitting on the throne, switches from the future tense to the present tense, assuring his people, "Behold, I am making all things new" (v.5). Identity struggles, moral confusion, and church discord will all be eliminated and replaced with joy, belonging, and of the presence of God. While transgenderism will not endure eternally, Christ's people will be with him forever. This is the ultimate promise for all who believe in Christ, including Christians who struggle with their gender identity. Christians should bear this in mind when seeking to respond appropriately to a difficult moral issue like transgenderism. For now, Christians should fix their eyes on Christ, trusting Him to ultimately answer all questions at his return. As with all things, the primary response of Christians to transgenderism, beyond the moral judgments of today, should be to echo the church throughout history, and call out for the only One who can truly end the pain of identity disorders once and for all: "Come, Lord Jesus!" (Rev. 22:5). He alone is sufficient for all our moral unknowns, and Christians must trust in him and his grace to be enough for them as they discern his will in the complexity of responding to transgenderism.

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