

Transgenderism

- I. The terms associated with this topic are many and are often invented outgrowths of the basic issue. This study will focus on basics.
 - A. “Transgender” is itself a relatively novel term. It does not appear in my hardcover OED (1971 edition).
 1. A newer CD-ROM version of OED defines transgender: “adj. Of, relating to, or designating a person whose identity does not conform unambiguously to conventional notions of male or female gender, but combines or moves between these; transgendered.”
 2. The New Oxford American Dictionary defines transgender: “adj. identified with a gender other than the biological one.”
 - B. An earlier term was/is transsexual: “adj. 1. Of or pertaining to transsexualism; having physical characteristics of one sex and psychological characteristics of the other...Also, one whose sex has been changed by surgery.” (OED CD-ROM version)
 1. The New Oxford American Dictionary defines transsexual: “a person born with the physical characteristics of one sex who emotionally and psychologically feels that they belong to the opposite sex.”
 2. The use of *transsexual* or *transgender* to describe essentially the same group is somewhat controversial within that group.
 3. “Distinctions between the terms *transgender* and *transsexual* are commonly based on distinctions between *gender* (psychological, social) and sex (physical).[34][35] Hence, transsexuality may be said to deal more with material aspects of one's sex, while transgender considerations deal more with one's internal gender disposition or predisposition, as well as the related social expectations that may accompany a given gender role.[36] Many transgender people prefer the designation *transgender* and reject *transsexual* [37][38][39]” (Wikipedia art. Transgender)
 - C. gender: Kind, sort, class; also, *genus* as opposed to species. (OED)
 - D. sex: Either of the two divisions of organic beings distinguished as male and female respectively; the males or females (of a species, etc., esp. of the human race) viewed collectively. (OED)
 - E. Mind that *gender* does not clearly specify a distinction between male and female.
 1. It is not unusual for cultural morality shifts to either begin with or be accompanied by alteration of terms which alter people's perceptions.
 2. Consider that “gay” used to mean “full of joy or mirth” and what used to be called *sodomy* (a value-negative term) is now called *homosexuality* (a value-neutral term).
 3. *Incest* (a value-negative term) is now called *genetic sexual attraction* (a value-neutral term) and the road is thus being paved for its normalization.
 4. The American Psychiatric Association has had to backpedal from altering in its DSM-5 (Diagnostic and Statistical Manual, ver. 5) the classification of *pedophilia* from a “disorder” to a “sexual orientation.” Mind that “sexual orientations” are *protected classes* according to current anti-discrimination laws.
 - a. The APA, under pressure of public outcry, has basically said, “Wait, that's not what we meant---we'll get that cleared up soon.” However, the APA is not the only voice that is bending values in this area. Consider the following quote.
 - b. “Pedophilia emerges before or during puberty, and is stable over time.[25] It is self-discovered, not chosen.[6] For these reasons, pedophilia has been

described as a disorder of sexual preference, phenomenologically similar to a heterosexual or homosexual sexual orientation.[25]”
(Wikipedia art. Pedophilia)

5. Relative to this study, the desire to identify oneself as the opposite sex in defiance of one's own biological make-up (even to the point of undergoing sex hormone therapy and radical body-mutilating surgery) has been de-pathologized by the APA.
 - a. For decades this was deemed a mental illness called “gender identity disorder” but is now called “gender dysphoria.”
 - b. This means that “...the condition itself is no longer considered abnormal or 'disordered' at all, but only the *anxiety* one may feel over it---anxiety that LGBT apologists blame largely on public ignorance and intolerance.”
(David Kupelian, The Snapping of the American Mind, p. 157)
6. *Holding fast the form of sound words (2TI 1:13)* is a broadly important principle. See also **ISA 5:20; MAL 3:15.**

- F. Ancillary to *transgenderism* is the behavior *transvestitism* (cross-dressing, typically men who derive pleasure from dressing in women's clothes).
1. Transvestitism may be an “entry level” form of transgenderism but not necessarily.
 2. Strongly heterosexual males have been known to cross-dress for personal pleasure.
 3. Transvestitism may also be nothing more than deliberate rebellion against established norms or an attention-getting gambit.
 4. This study focuses rather on the extreme disorder which inclines one to become physically altered (Gender Reassignment Surgery/GRS) and/or hormonally altered.

- II. Another distinction to be made is the special category of genuine biological anomalies where someone is born with exceptional anatomy which defies simple classification as male or female.
- A. Formerly termed *hermaphrodites*, this category is currently termed *intersex*.
 - B. In humans, each cell normally contains 23 pairs of chromosomes, for a total of 46. Twenty-two of these pairs, called autosomes, look the same in both males and females. The 23rd pair, the sex chromosomes, differ between males and females. Females have two copies of the X chromosome, while males have one X and one Y chromosome. Though rare, sometimes this number of chromosomes and/or the X and Y make-up deviates from the norm.
 - C. “**Intersex**, in humans and other animals, describes variations in sex characteristics including chromosomes, gonads, sex hormones, or genitals that, according to the UN Office of the High Commissioner for Human Rights, 'do not fit typical binary notions of male or female bodies'.[1] Such variations may involve genital ambiguity, and combinations of chromosomal genotype and sexual phenotype other than XY-male and XX-female.[2][3] Intersex people were previously referred to as hermaphrodites, but the term has fallen out of favor as it is considered to be misleading, stigmatizing, and scientifically specious.[4]” (Wikipedia art. Intersex)
 - D. “According to the UN Office of the High Commissioner for Human Rights: Intersex people are born with sex characteristics (including genitals, gonads and chromosome patterns) that do not fit typical binary notions of male or female bodies. Intersex is an umbrella term used to describe a wide range of natural bodily variations. In some cases, intersex traits are visible at birth while in others, they are not apparent until puberty. Some chromosomal intersex variations may not be physically apparent at all.[1]” (Ibid.)
 - E. Jesus spoke of congenital sexual anomalies. **MAT 19:12.**

- F. “A pastor friend was removed from being a pastor due to the nature of his birth (intersexed) in having both male and female parts, but condition helped with surgery, now married with children.

I am at the foundational level of intersexed in being an XXY male, was 53 before learning of my condition, but had gone through the change of life and also excessive breast tissue for a male.

I am always offended when we as intersexed people are spoken of in the same breath with homosexuals or added to their agenda when those of us who follow Jesus are as much opposed to the gay lifestyle as any other who will not compromise God’s Word to validate sin or lust. I also believe that a true Eunuch is one who is unmarried and celibate which is only for those with the gift to remain that way.

To this day I have never heard a sermon or teaching regarding hermaphrodites in the church— covered by the same grace but forced into the basement due to ignorance and an imposed shame for being 'so born from our mother’s womb,' something we had no choice about, unlike those acting on their homosexual feelings or those with a mental condition rather than a genetic defect which is temporary.

Your article about 'transgendered' was interesting but I am more concerned about attitudes we encounter for being who we are which to me is just unique. Scars today only say that healing happened and no more open wounds...Just as Jesus is proud of His scars that say healing happened.

To me there is just the Natural man, Spiritual man and the carnal Christian, only three kinds of people on the planet with a variety of physical and mental differences. But attitudes we encounter as intersexed people would lead folks to think maybe there is an additional 'type' who doesn’t fit any mold or classification or addressed in scripture. But again the only problem I see is attitudes springing from ignorance; one can not love God without loving all the people of God, yet the subject is rarely if ever addressed completely to make us at least feel as if we fully belong among other people more normal than we are and that we are not freaks. The real us is spirit!” (Response to a Probe Ministries article, [What is a Biblical View of Transgendered People and Hermaphrodites?](#))

- G. “There is a third category that appears as XY = Female. This occurs due to a hormone receptor deformity that renders the fetus insensitive to androgen hormones. The degree of sexual formation differs between females with v----- and partially formed males – though nor [sic] hermaphrodite. This category is considered Partial Androgen Insensitivity Syndrome (PAIS) and Complete Androgen Insensitivity Syndrome (CAIS). To your point, these children are fully female (perhaps extremely so) and there is no confusion regarding their design. Genetically, they test as XY, but physiologically they are female from birth. I should note that they are all sterile and many require a Y-V vanginoplasty to create a v----- opening and open the musculature for the v----- itself. They also require hormone therapy to complete the appearance of a female (breasts), but remain without follicular body hair with the exception of their head. Most often, whatever gonads they possess are removed early due to the tendency to rapidly convert to cancerous tissue.” (Ibid, redaction mine)

- H. Such conditions as these are congenital problems: one is indeed born that way. Transgenderism, by contrast, is a spiritual/emotional/psychological problem.
1. Genetic abnormalities or defects are part of the painful bondage of corruption under which mankind must labor until the resurrection. **ROM 8:21-22.**
 2. Mind that the biological exceptions to the norm are just that: exceptions.
 - a. Special treatment or surgery that may be needed for an intersex birth is not the same as, nor justification for, GRS for someone who is chromosomally male or female but struggling with emotional ambiguities.
 - b. Be wary of making exceptions to the rule into the rule, as did Satan in Eden. **GEN 2:16-17 c/w GEN 3:1.**
 3. One may even be born with a genetic *predisposition* to a particular mental or emotional weakness. But what is *inborn* is not necessarily *God-ordained* because human nature is tainted by original sin.
 4. All are born with a spiritual weakness which interferes with submission to God. **PSA 51:5.**
 5. Regardless of how one is born, all are responsible to submit to the will of God Who is Sovereign over mind and body, and Who gives grace to those who seek it. **EXO 4:10-12; HEB 11:6; 2CO 12:7-9.**
 6. Giving in to an inherent weakness in defiance of God is the way of the unregenerate reprobate. **EPH 2:3.**

III. Following are some history and facts about the transgender movement.

- A. The transgender movement began in the minds of three men with a common bond---they were all pedophilia activists: Dr. Alfred Kinsey (infamous sexologist), Dr. Harry Benjamin (endocrinologist who was early fascinated by transvestitism) and Dr. John Money (psychologist, disciple of Kinsey and member of a transsexual research team headed by Benjamin).
- B. Dr. Money exploited the distraught parents of a twin boy who had a botched circumcision, persuading them that it was best that “David” be made into “Brenda” and then concocted false glowing medical reports about the results. Years later in conflict, David and his twin brother committed suicide within months of each other.
- C. This trio's “research” was largely responsible for transgender surgery departments in university-based clinics in the U.S., starting in the 1950's and continuing through the 1970's until evaluation showed no objective evidence of benefit and certain evidence of harm. Private practitioners have since taken over the discredited practice of sex-change hormone therapy (SHT) and GRS.
- D. For a candid and provocative insight into the tragic consequences of SHT and GRS, check out Walt Heyer's personal story and info at SexChangeRegret.com and WaltHeyer.com wherein his experience at the hands of Paul Walker, PhD (a homosexual and transgender activist) may be found. Heyer's story can be found in novel form, *Kid Dakota and The Secret at Grandma's House*, and in his autobiography, *A Transgender's Faith*. His other books include *Paper Genders* and *Gender, Lies and Suicide*.
- E. The American Psychiatric Association, under pressure from gay rights activists, declassified homosexuality as a mental disorder in 1973 and the American Psychological Association followed suit two years later.
 1. “Stunningly, the former president of the American Psychological Association--- indeed, the man who actually introduced the motion to declassify homosexuality as

a mental illness in 1975---is now sounding the alarm. Dr. Nicholas Cummings says the psychologists' organization has become dominated by 'ultraliberals' under the thumb of the 'gay rights movement.' Since the mid-1990's, warns Cummings, the group's positions have become based on 'political stances' that 'seemed to override any scientific results,' adding, 'Cherry-picking results became the mode. The gay rights movement sort of captured the APA.'”

(David Kupelian, The Snapping of the American Mind, pp. 160-161)

2. The same *modus operandi* has evidently led such experts to de-pathologize *gender identity disorder* to *gender dysphoria* and reclassify pedophilia from a *disorder* to a *sexual orientation*.
 3. “Actually, this 'dysphoria' business is a strategic half-measure; the unabashed, publicly stated goal of the LGBT world is to get gender identity disorder completely de-pathologized so it is officially and legally declared to be an absolutely normal variant of human identity and behavior. It is, after all, the *T* in the LGBT coalition, which represents itself as a minority community exactly like blacks and Jews---so, no room for mental illness in the mix.” (Ibid, p. 157)
 4. The logical conclusion of “gender fluidity” is that it renders irrelevant the question commonly asked of new parents, “What did you have, a boy or a girl?” The only sensible answer would now have to be, “We don't know; we'll have to wait and see what it decides.”
- F. “We read popular reports about plans for medical and surgical interventions for many prepubescent children, some as young as six, and other therapeutic approaches undertaken for children as young as two.”
(Sexuality and Gender: Findings from the Biological, Psychological, and Social Sciences, published in The New Atlantis journal)
- G. In Massachusetts, California and New Jersey mental health professionals are banned from trying to help children in crisis regain their natural feelings of gender, even upon parental request. (<http://www.wnd.com/2015/06/untold-dark-story-of-transgenderism/>)
- H. Transgender-friendly summer camps for children are popping up around the country. Some of them are “faith-based.”
- I. The public school system is already seeing an ingress of transgender literature for even young elementary students.
- J. According to a 2011 survey, some 700,000 Americans perceive their gender identity to be at variance with their biological birth sex.
- K. Media and big-name celebrities like Bruce Jenner are part of an all-out blitz by the LGBT crowd to normalize transgenderism and change public policy accordingly.
1. Consider that under a socialized health system, tax dollars will be used for transgender therapy and surgical reassignments.
 2. Tax dollars are already being used for such in the military.

IV. Reality check.

- A. A landmark study has exposed the dark side of transgenderism: Sexuality and Gender: Findings from the Biological, Psychological, and Social Sciences. Its authors are:
1. Lawrence S. Mayer, scholar-in-residence in the Department of Psychiatry at Johns Hopkins University and a professor of statistics and biostatistics at Arizona State University.
 2. Dr. Paul McHugh, who for twenty-five years was psychiatrist-in-chief at Johns Hopkins Hospital and is a professor of psychiatry and behavioral sciences at Johns

- Hopkins University School of Medicine.
3. The 143-page report discusses over 200 peer-reviewed studies, painstakingly documenting what scientific research shows and does not show about sexuality and gender.
 4. Dr. McHugh concluded that it is biologically impossible for a person to change the sex they were born with, and those who advocate sexual reassignment surgery are thus promoting mental illness. He has stated, “I hold that interfering medically or surgically with the natural development of young people claiming to be 'transgendered' is a form of child abuse.” (Reply to Dr. Gina Loudon, 11-18-09)
- B. Among the findings are the following:
1. When children who reported transgender feelings were tracked without medical or surgical treatment at both Vanderbilt University and London's Portman Clinic, 70% - 80% of them spontaneously lost those feelings.
 2. There is a 40 % suicide attempt rate for transgenders. One study found that, compared to controls, sex-reassigned individuals were about five times more likely to attempt suicide and about nineteen times more likely to die by suicide.
 3. McHugh cites a long-term Swedish study that followed transgendered persons for up to 30 years. Beginning about 10 years after surgery, increased mental difficulties were experienced. Their suicide mortality rate rose almost twenty-fold above the comparable non-transgender population.
 4. “Also in the study were discussions regarding whether genes and hormones are associated with sexual behaviors; the concept that 'sexual orientation may be quite fluid over the life course for some people, with one study estimating that as many as 80 percent of male adolescents who report same-sex attractions no longer do so as adults'; a possible link between childhood sexual abuse and non-heterosexuality, the higher risk of depression, substance abuse and risk of suicide among those who are 'non-heterosexual'; and the fact that adults who have sex-reassignment surgery remain discontent.” (<http://www.wnd.com/2016/08/johns-hopkins-shrinks-warn-against-going-transgender-with-kids/>)
 5. The researchers found “...no compelling causal biological explanations for human sexual orientation.” (Ibid)
 6. The editor of the Journal summarized that “...some of the most frequently heard claims about sexuality and gender are not supported by scientific evidence.”
- C. “Gender dysphoria” assumes a disconnect between mind and body, between feelings and reality. It is an open door to dangerous medical practices based on the subjective feelings of the patient.
1. Dysphoria related to one's skin color may cause one to try to identify as someone of another “race.”
 - a. Consider the tormented Michael Jackson and the spurious medical practice that validated his surgeries and altered pigmentation.
 - b. Consider Rachel Dolezal, a white woman who “identified” as black and faked her way into a presidency of a NAACP chapter.
 - c. Skin color is not a matter of choice but genetics. **JER 13:23.**
 2. What one thinks does not dictate the conformation of the body. **MAT 6:27.**
 3. What one thinks does not dictate the reality or rightness of something. **ACT 26:9.**
 4. What one thinks contrary to reality is self-deception. **GAL 6:3.**
 5. Imaginations and thoughts are to be conformed to Christ. **2CO 10:5; EPH 4:17-18.**

6. Human nature is such that in order to justify its lusts or give in to its weaknesses, it will refuse to change things that can be changed and insist on changing things that can't be changed.
- V. A sign of a degenerate culture is its willingness to ignore and even accept logical absurdities in order to process life in such a way as to accommodate its lusts and weaknesses.
- A. The psychiatric and psychological communities hold obvious inconsistencies in their diagnoses and treatments of disorders.
 1. *Anorexia nervosa* and *bulimia nervosa* are dysphorias that are recognized as disorders, not immutable characteristics.
 2. *Obsessive-Compulsive Disorder* is where the mind irrationally fixates on something which causes anxiety and this generates abnormal behavior.
 3. *Body Integrity Identity Disorder/Transability* is where the mind is convinced that amputation of body parts is necessary for personal fullness. An adjunct to this is a regular part of the Body Modification Cult wherein people mutilate themselves by intensive cuttings, piercings, surgical amputations of healthy organs, etc.
 4. Yet somehow the idea of surgically mutilating one's body in a hapless attempt to change one's sex is now not considered a disorder and its participants "...are being lionized not only as normal, but as a protected and courageous minority." (David Kupelian, *The Snapping of the American Mind*, p. 166)
 5. If one were to suggest that the reason a suicidal jihadist "acts out" is because of genetics, biochemical imbalances, environmental toxins, etc., it would be laughable.
 - B. "And is it not madness to think we can transform a man into a woman by surgically fiddling with his plumbing and feeding him hormones---when every single one of his body's 37.2 trillion cells is permanently coded 'male' with Y chromosomes?" (Ibid, p. 172)
 - C. When people turn their backs on God, He gives them over to a reprobate mind and takes away their understanding and natural affection. **ROM 1:28-31.**
 - D. Bodily mutilation is a sign of lunacy and devilish affection. **MAR 5:5, 15.**
 - E. The prophets of Baal in an insane theatrical display mutilated themselves. **1KI 18:28.**
 1. Idolatry is an irrational state of mind brought on by sin. Where is the rationality in someone forming a graven image with his own hands and bowing before it in worship? **ISA 44:10-21.**
 2. Idolaters are "...mad upon their idols" (**JER 50:38**).
 3. The idol god behind the insanity of GRS is *the belly* (**PHIL 3:19**): the exaltation of self-pleasing desire as the highest good. It is the worship and service of the creature more than the Creator, per **ROM 1:25.**
- VI. There are basically three arguments that are used to validate transgenderism: innateness, irrelevance and inevitability.
- A. The *innateness argument* assumes that transgenderism is inborn and unchangeable. Some even therefore conclude that it is God-ordained.
 1. This argument assumes what cannot be proven since manifestations of gender confusion in children would have to be isolated from any external influences like abuse, parental or family dysfunction, cultural messages, peer pressures, etc.
 2. It further is contrary to the findings of genuine objective research which does not support biological causes for sexual orientation and also the facts that most gender-confused children grow out of it and some transgendered adults revert to their biological sex.

3. Also, as noted earlier, what may be inborn is not necessarily God-ordained. No rebellion against God is justifiable on the basis of a predisposed weakness.
 4. Arguments from anomalies within the brute creation are deficient in that nature is a poor guide for human behavior and nature itself is under the bondage of corruption.
 - a. Female black widow spiders are poor role models of marriage.
 - b. The ostrich and praying mantis are poor role models of parenting.
 - c. Male bovine are indiscriminately promiscuous.
- B. The *irrelevance argument* assumes that changing sexes is acceptable because one's sex is secondary, even to God, and is substantially no different than changing hair color or getting a facelift.
1. Changing one's appearance for cosmetic reasons is not the same as attempting to change one's very nature and blur God-ordained distinctions.
 2. God specifically determines one's inward parts and assigns one's sex, which hardly makes it irrelevant.
 3. God is Lord over mind, body and spirit. Redemption makes one the entire possession of Jesus Christ (**1CO 6:20**) and it is lawful for the owner to regulate the possession. **MAT 20:15**.
- C. The *inevitability argument* assumes that the only option for gender-confusion is to default to one's feelings and submit to hormonal and/or surgical change.
1. But the evidence shows that giving in to the desire for change is no guarantee of an improved quality of life or resolution of conflict.
 2. There is also the option of living in accord with one's assigned sex and recognizing that one's feelings are what need to be changed, not one's sex.