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For additional information please contact

Mary Hasson mhasson@eppc.org
or the Person and Identity Project
personandidentity@eppc.org

The Human Person and Gender Ideology

Mary Rice Hasson, JD
Person and Identity Project
Ethics and Public Policy Center
personandidentity.com

Parish Catechetical Leaders
Archdiocese of Atlanta
October 1, 2024



The Human Person and Gender Ideology:

Concepts and Cultural Context





CNA

Catholic
News
Agency

By [Courtney Mares](#)

Rome Newsroom, Mar 11, 2023



The marginalized? The suffering?

Love them with the love of Christ

**“Accompany...
never abandon them”**





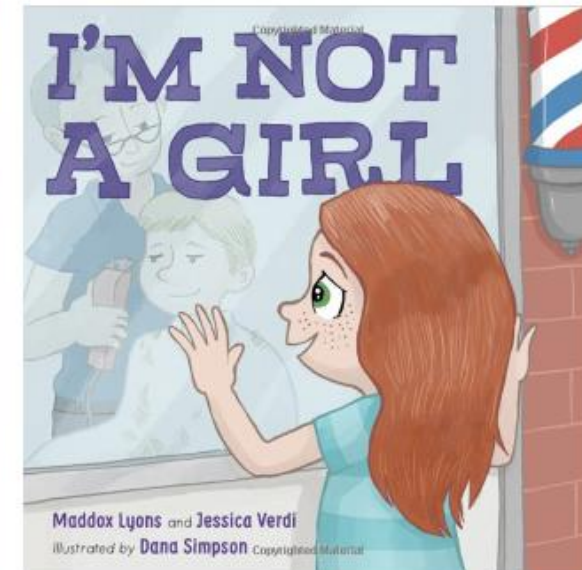
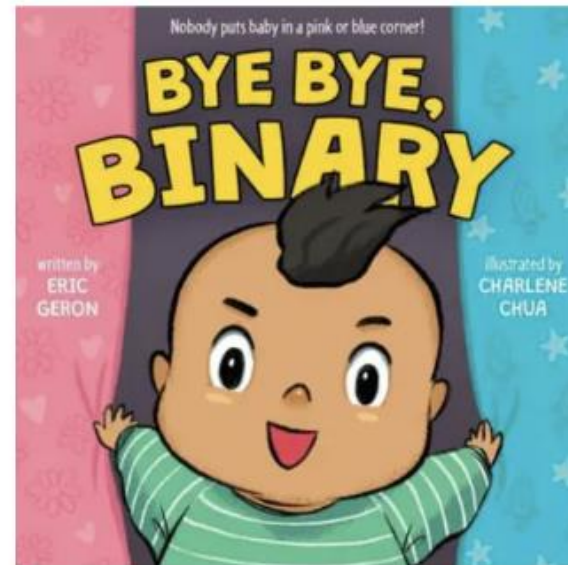
Gender ideology is a
“dangerous **ideological colonization**”
– Pope Francis (2023)

“It is one thing
to be understanding
of human weakness
...and another
to accept ideologies
that attempt to sunder...
inseparable aspects of reality.”
– Amoris Laetitia, 56

“Today children-children!-are taught in
school that everyone can choose
his or her sex.

Why are they teaching this?
Let us not play with truths...
behind all this we find gender ideology.”

- Pope Francis, Aleteia, 9.1.2017



THE PERSON, THE CONTEXT



Person:

Identity: "SOGI"

"Authenticity"

"Gender dysphoria"

"Compassion"

Ideology:

Radical Autonomy

Self-Determination

"Human Rights"

Culture (ideology) shapes personal experiences.

Oppose ideology. Accompany the person.

The Human Person

Who am I

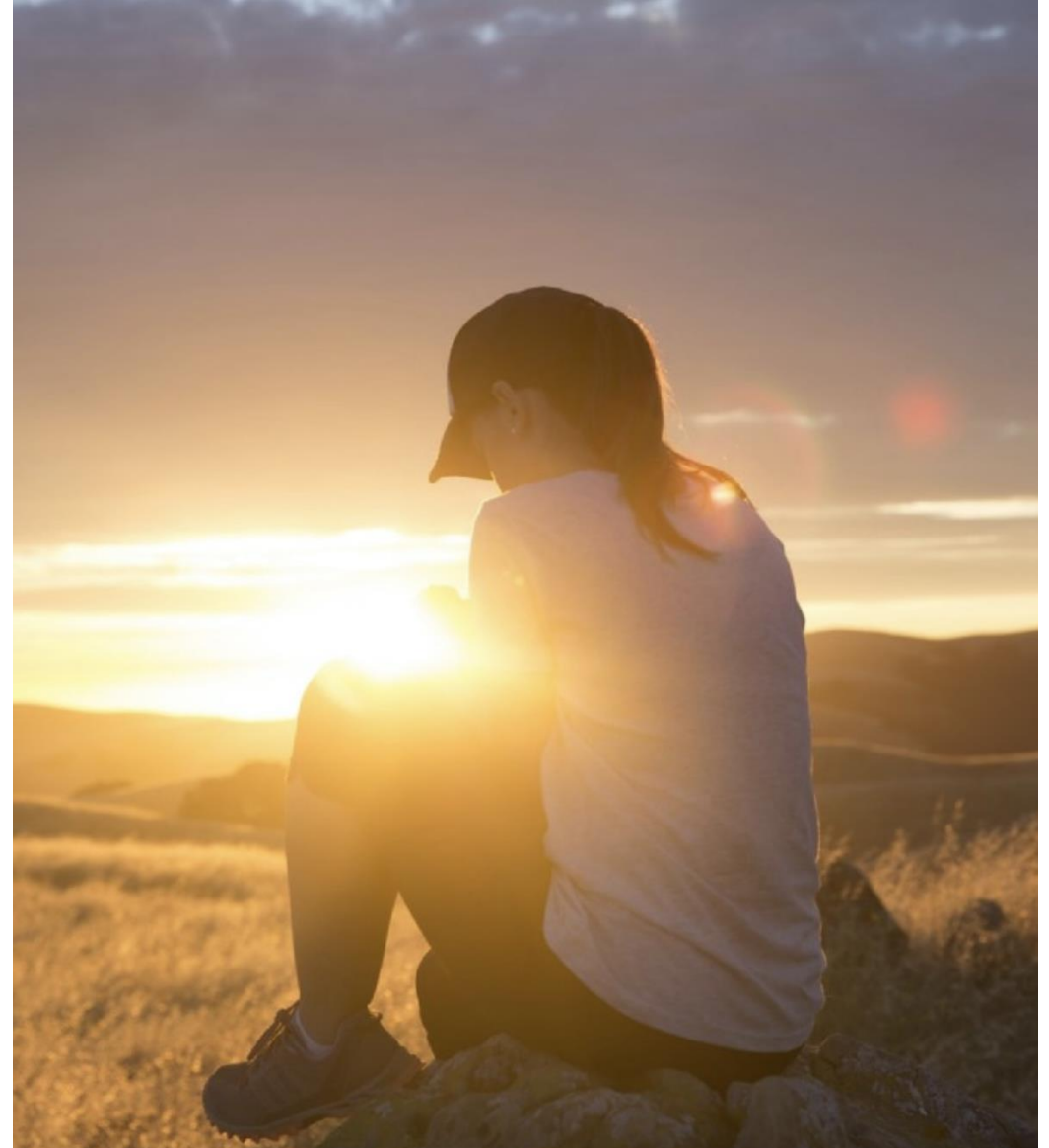
Why am I here?

What is my purpose?

What is true, good?

What comes after this life?

Fides et Ratio, 1998



“Who am I?”

Christian anthropology - natural law

- **Created:** by God out of love for love, eternal life
- **Dignity:** Intrinsic. God’s image/likeness (Gen 1:26-31)
- **Identity:** Son/daughter of Lord (gift). Sexual identity **M/F**
Gen1:27
- **Unity:** body and soul. Embodied person
- **Human nature:** **Designed** for human flourishing
- **Body:** is good, reveals meaning. M/F design, self-giving love.
- **Sex:** life-giving, love-giving (inseparable purpose). M+F
- **Marriage:** Covenant 1 male + 1 female. Permanent, faithful, fruitful
- **Family:** Mother, father, child. “anthropological basis” “Trinity”
- **Sin:** Broken, weak, sinful but **redeemed** by Christ. Grace, mercy.
- **Destiny:** **Eternal life**



Catechism of the Catholic Church

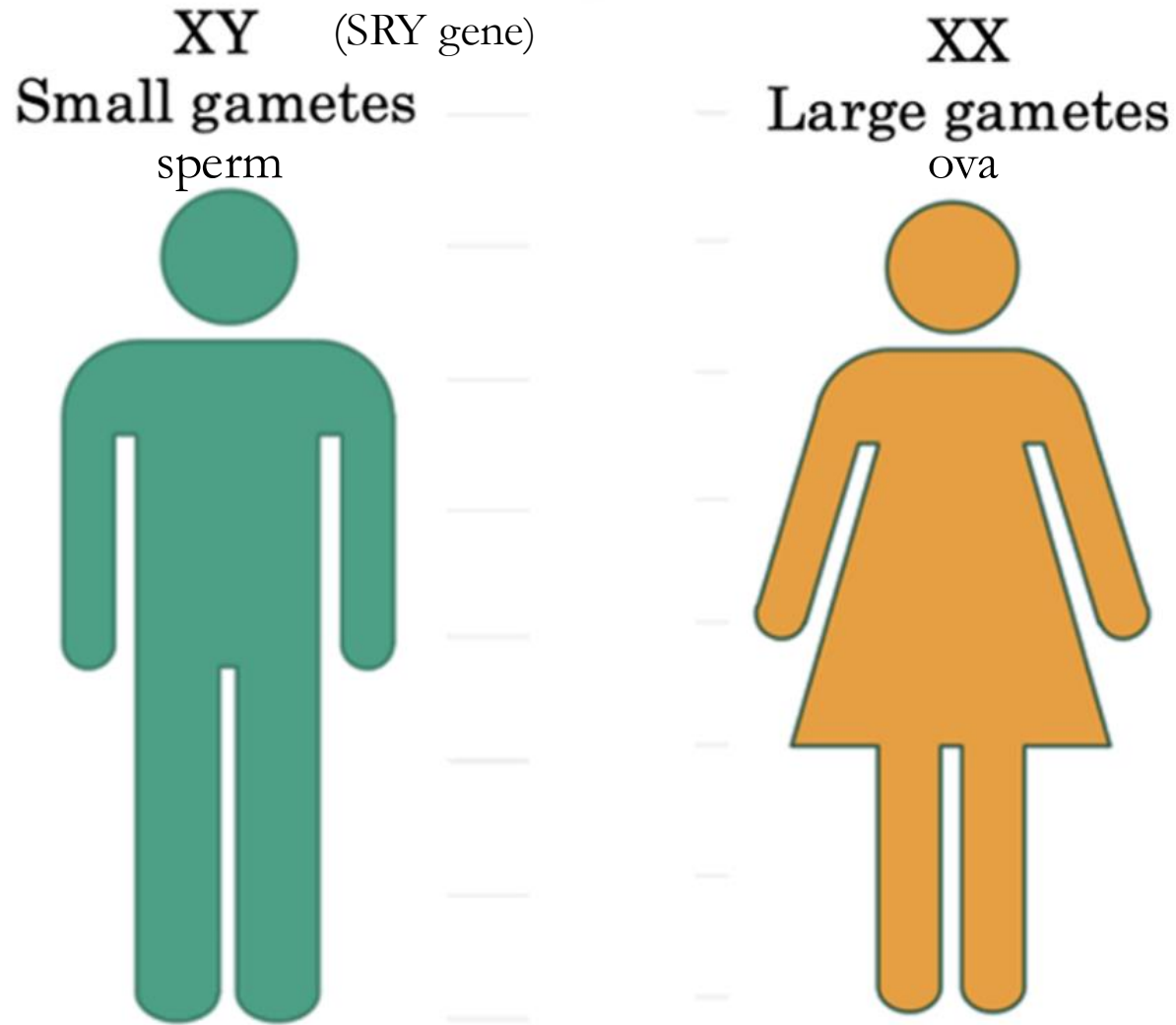
*Created male and female, equal in dignity. Accept **sexual identity** as a gift.*

2334 Created “male and female” with “equal personal dignity”

- 362 The human person [is] created in the image of God, a being at once **corporeal and spiritual**
- 371 God created man and woman together and **willed for the other.**
“bone of my bones and flesh of my flesh.”

2333 Everyone, man and woman, should acknowledge and accept his [or her] **sexual identity. Physical, moral, and spiritual **difference and complementarity are ordered to the goods of marriage and flourishing of family life.****

Faith and Reason: “Male and female he created them”



6,500 genes differ. Brain patterns differ in utero.
“Every cell has a sex.” (NIH) 30 trillion cells.

“Who am I?” (Science)

“Sex” = classification based on body’s **design for reproductive role** (produce sperm or egg)

Sex is binary (M/F) because reproduction is binary (M/F).

Sex (male or female) is

- * **Determined at conception**
- * **Observed** in utero/at birth
- * **Immutable.**

SCIENCE: Two sexes, male and female. “Sex” is not “assigned.”

Sex and gender: The medical establishment’s reluctance to speak honestly about biological reality

It is never justified to distort the facts in the service of a social or political cause, no matter how just.

By Alan Sokal and Richard Dawkins Updated April 8, 2024, 3:00 a.m.

Boston Globe 4.8.24.



“A baby’s sex is not ‘assigned’; it is determined at conception and is then *observed* at birth...**A person’s sex is an objective biological reality, just like their blood group or fingerprint pattern**, not something that is ‘assigned.’”

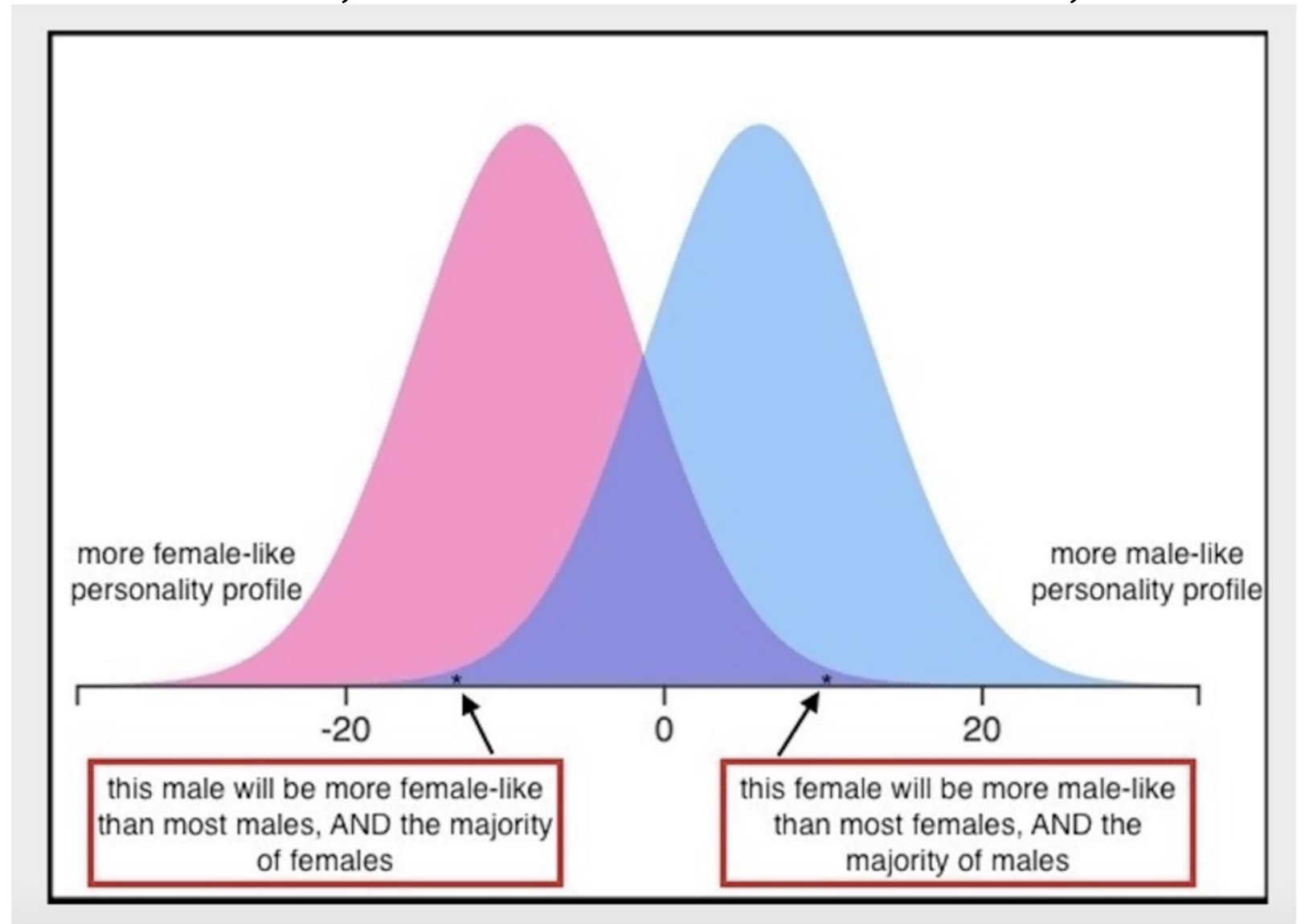
– Richard Dawkins (atheist, scientist) and Alan Sokol 4.8.24

Across cultures, males and females show different traits, interests

Personality traits vary by sex, but don't *determine* sex

**Mistake:
Confuse personality traits or interests for "identity"**

"No one is born in the wrong body"



Dr. William Malone, *Quillette* 2019

“LGBTQIA” - “Intersex” (DSD) Disorder of Sexual Development

DSD: ABNORMAL DEVELOPMENT of M or F
body

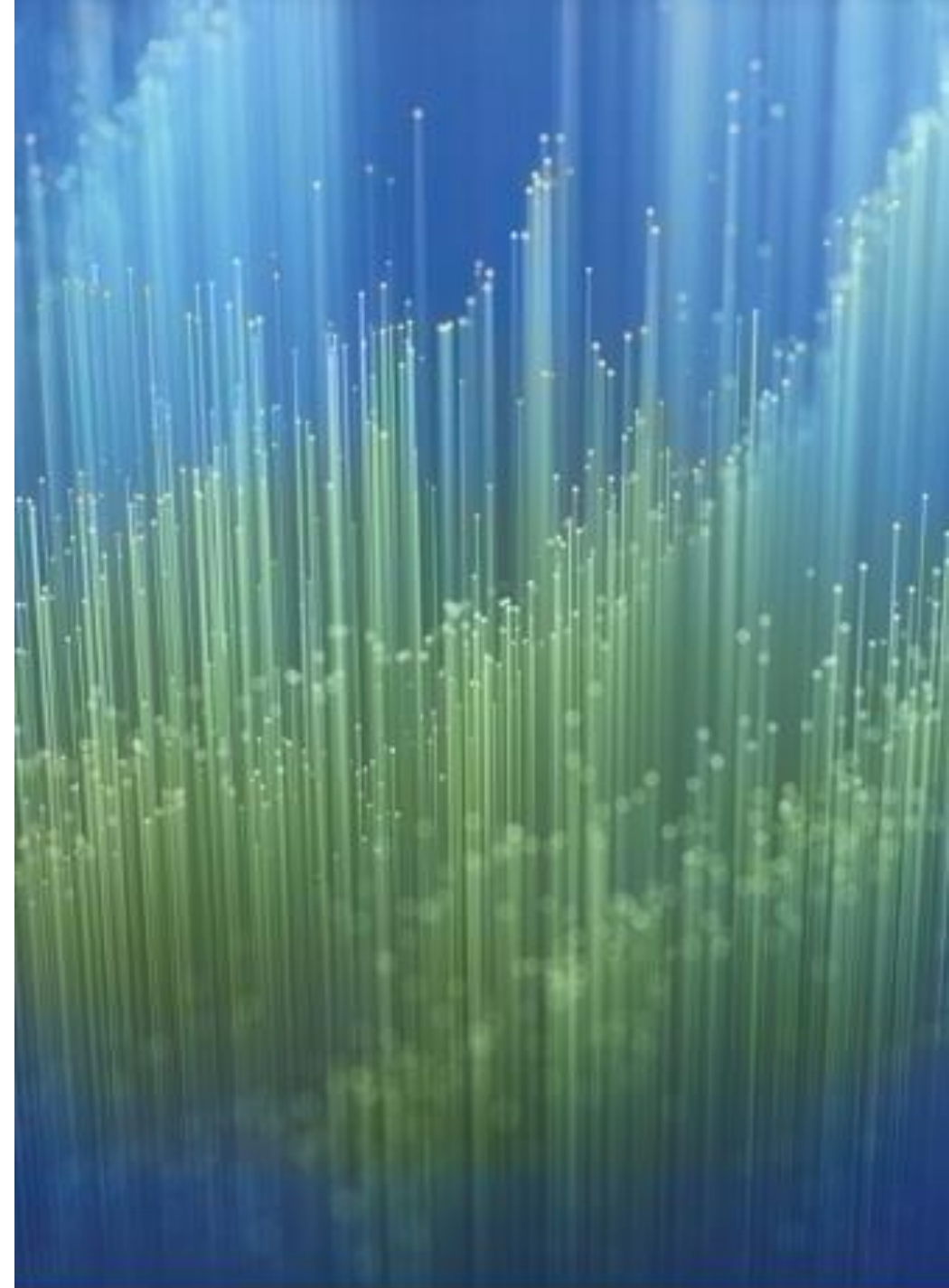
Objective diagnosis: DNA, labs, images.

- Not a third sex (no third gamete)
- **Treatment:** restore function, health

“TRANS”: HEALTHY BODY - PSYCHIC
DISTRESS

Subjective “diagnosis” – self-perceived, self-reported

- Identity- or body-related distress; body disassociation.
- **“Treatment”:** Iatrogenic. Impair function, alter body.
“embodiment goal”



A close-up, artistic photograph of a glowing lightbulb. The bulb is illuminated from within, creating a warm, golden-yellow glow that transitions into cooler blue and purple tones towards the edges. The filament is clearly visible, and the glass of the bulb shows some reflections and textures. The background is dark and out of focus, emphasizing the lightbulb as the central subject.

Gender Ideology

Gender Ideology: Philosophical Roots (errors about the person)

Gnosticism (duality mind/body)

Materialism (consumer)

Marxism/Marxist feminism (power)

Individualism (unbridled autonomy)

Moral relativism (will, pleasure)

Nihilism (pointless existence)

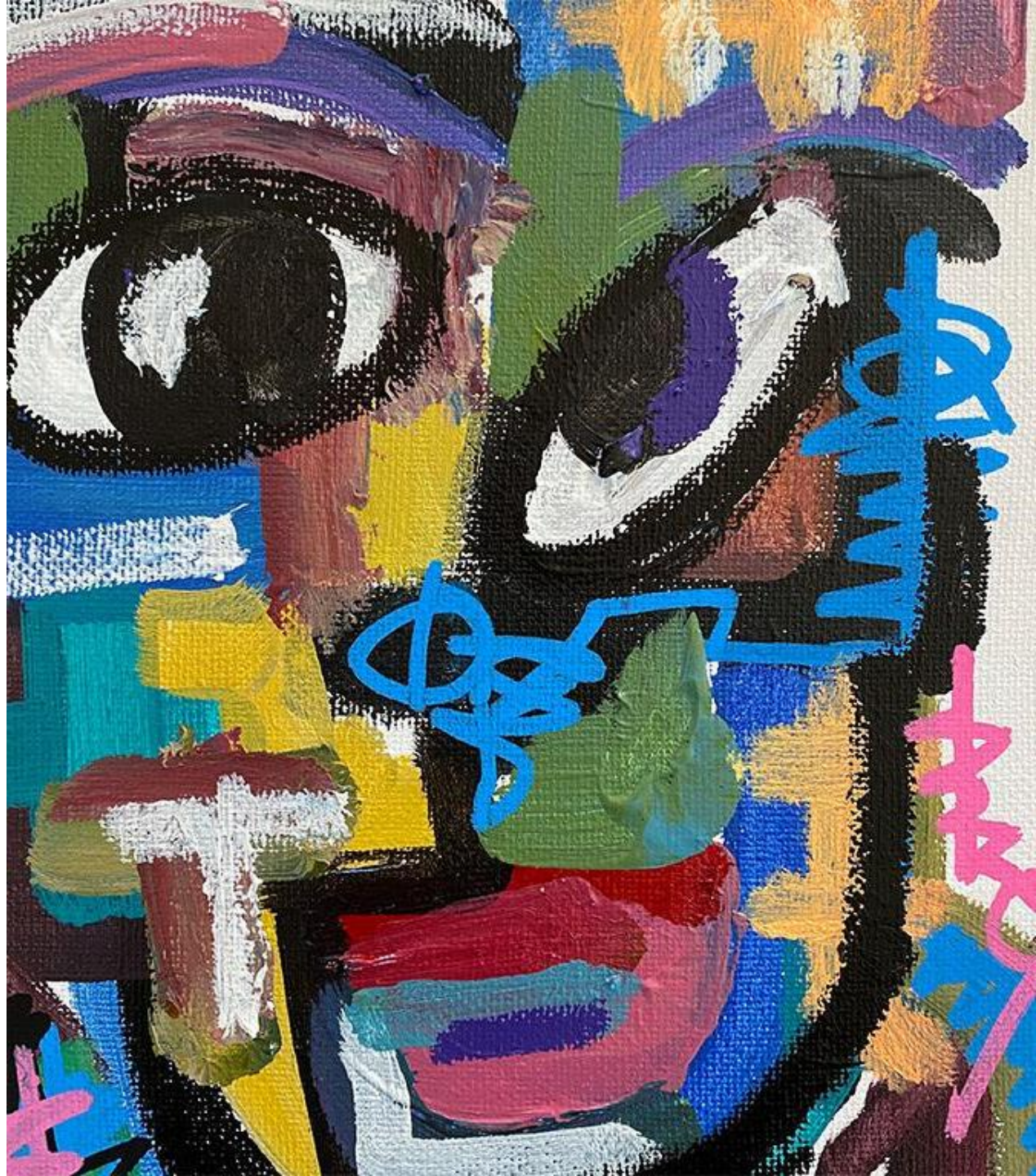
Scientism (science as authority)

Psychological lens (feelings, desires)

Post-modernism (no truth, no nature, fragmented narratives, desires)



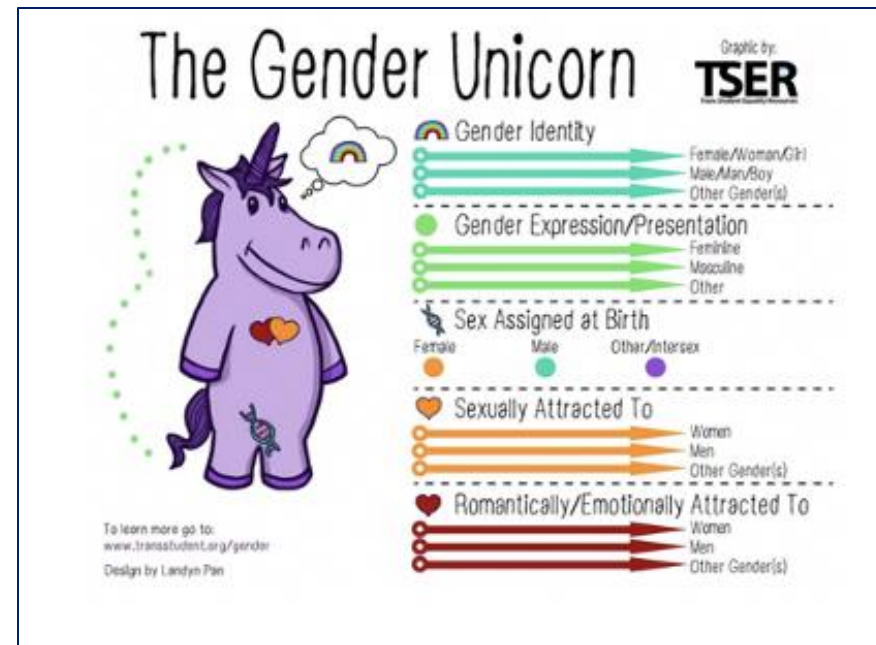
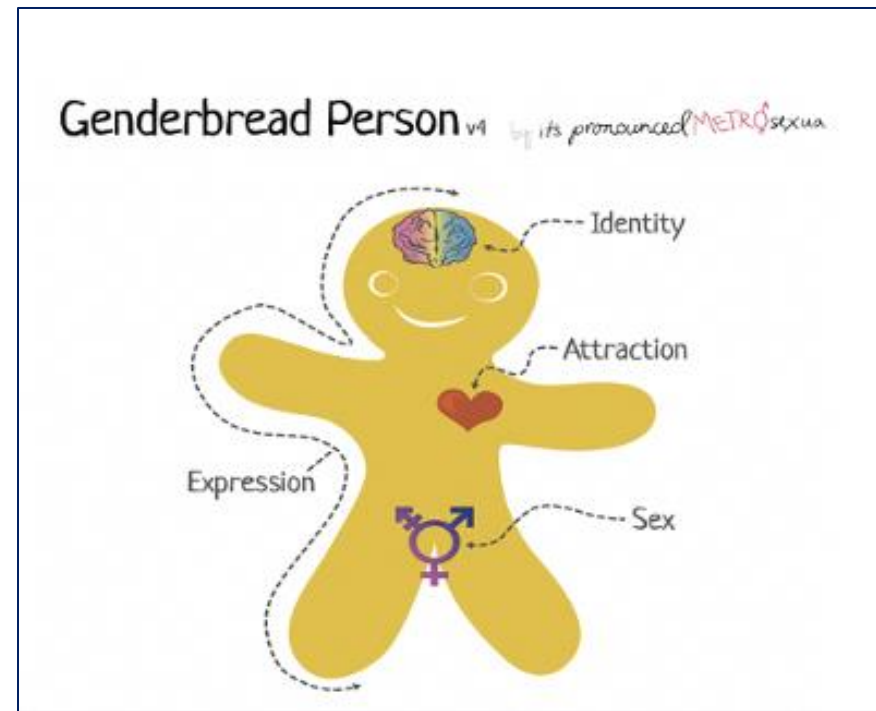
Gender ideology (self-defined identity, sexual license, autonomy)





“Who am I?”

Gender ideology - queer theory



- **Self-creating.** Autonomous self (**Atheistic**)
- **Identity:** Self-determined, “gender identity,” deny male/female
- **Dignity:** Extrinsic. Contingent. Need validation. No Imago Dei
- **Dualistic:** Person = mind/will. Body = thing to be used
- **No human nature** (no design). “Autonomy”
- **Body:** No intrinsic meaning. “tool” or “canvas”
- **Sex:** Pleasure. Solo or with others. Consent is only limit.
- **Marriage:** Contract for adult desire/benefit.
- **Family:** Chosen. Consent. Deny value of parent-child bond
- **Oppressor/oppressed:** Power struggle. Dismantle oppressive systems.
Sexual Utopia (Death)






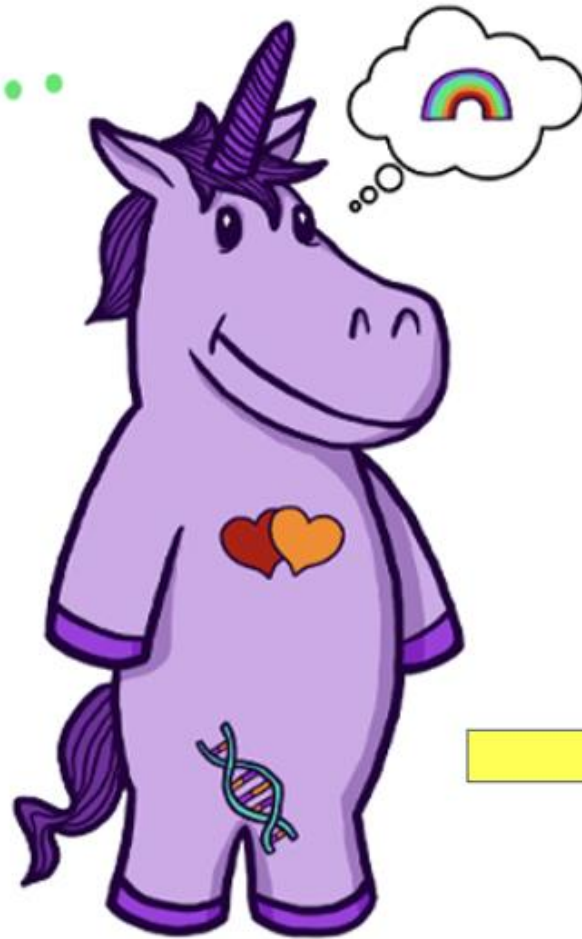
Gender Identity

-  → Woman-ness
-  → Man-ness



(“self-perception”)

-  **Romantically Attracted to...**
 -  → Women a/o Feminine a/o Female People
 -  → Men a/o Masculine a/o Male People
- (“feelings”)



-  **Sexually Attracted to...** and/or (a/o)
 -  → Women a/o Feminine a/o Female People
 -  → Men a/o Masculine a/o Male People
- (“desire”)



Gender Expression

-  → Femininity
 -  → Masculinity
- (“outside”)

Anatomical Sex

-  → Female-ness
 -  → Male-ness
- (“parts”)

Sex Assigned At Birth

- Female Intersex Male

“gender assigned at birth”
“label”

Person = bundle of disconnected dimensions, each on a spectrum

Change language. Change beliefs.
De-humanize, re-define/invent, weaponize



United Nations

Conferences | Women and gender equality

GENDER – Beijing Conference 1995

“Gender” - 200+ times. Undefined.

“gender” = “ordinary accepted usage”

Invented words/meanings

“cisgender”

“non-binary”

“gender identity”

“cis-normative”

“sex assigned at birth”

“top surgery”

“trans kids”

“trans woman”

“front hole”

“misgender”

“deadname”

THE LANCET

Volume 337 Number 10105 Page 1336-1338 September 25-October 1, 2013 www.thelancet.com

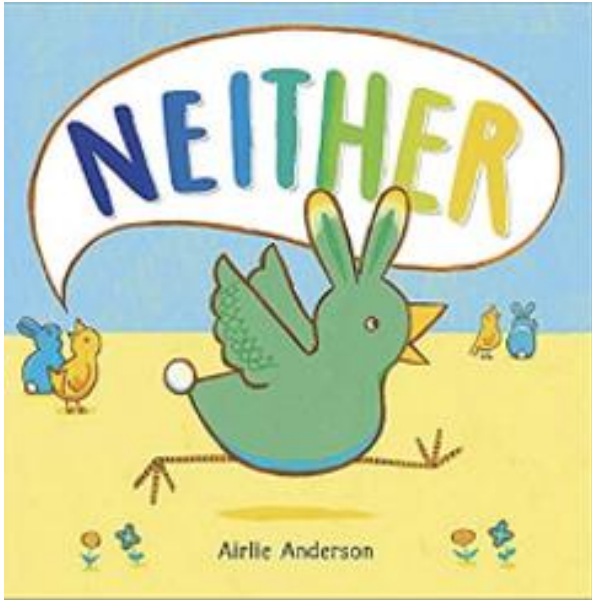
“bodies with vaginas”

Federal Court Opinion:

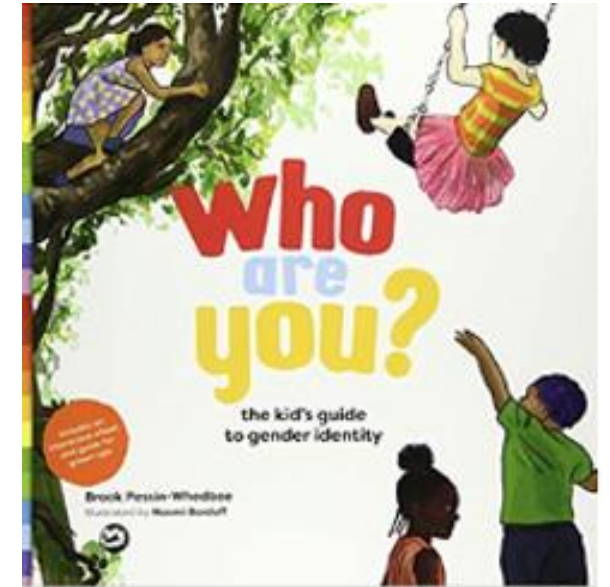
Dysphoric “trans” inmate tries to remove “her testicles.”

“When a trans woman is called a man, that is an act of violence.”

- Laverne Cox



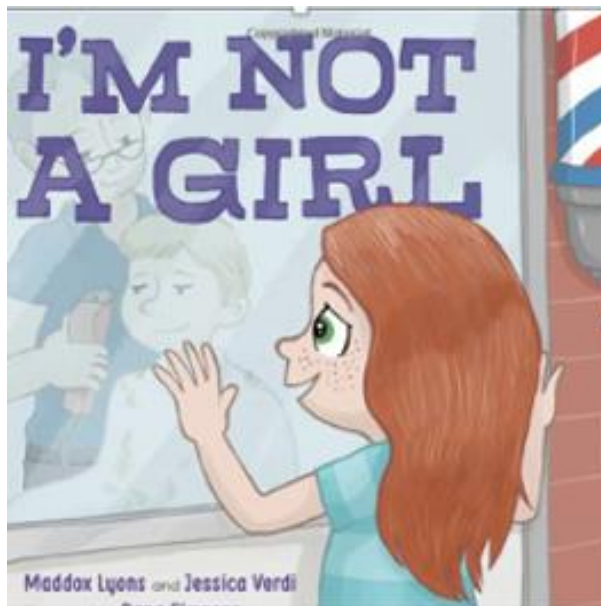
Gender Ideology
catechizes children in a
false anthropology



Infinite # identities
Transition is normal
Reject “Old beliefs”

“You decide”

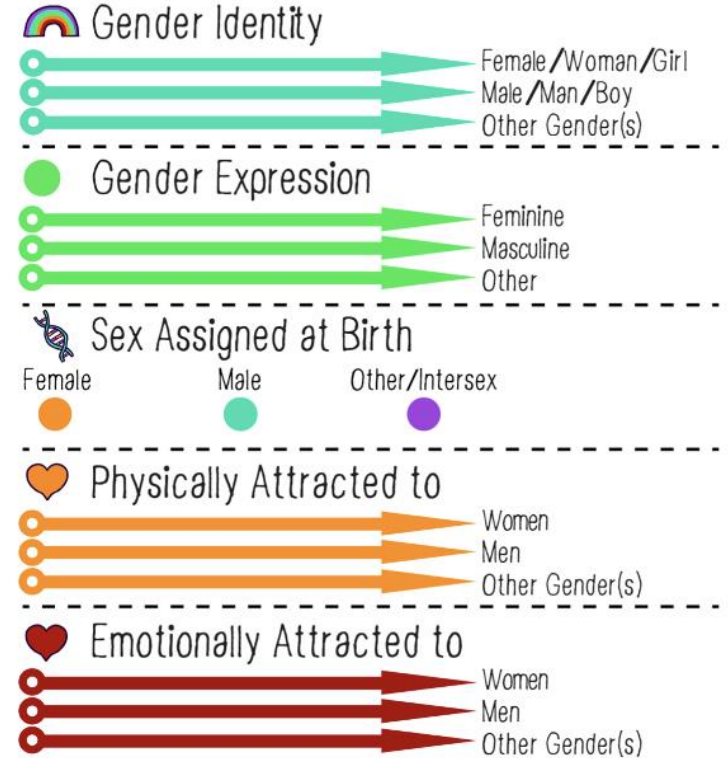
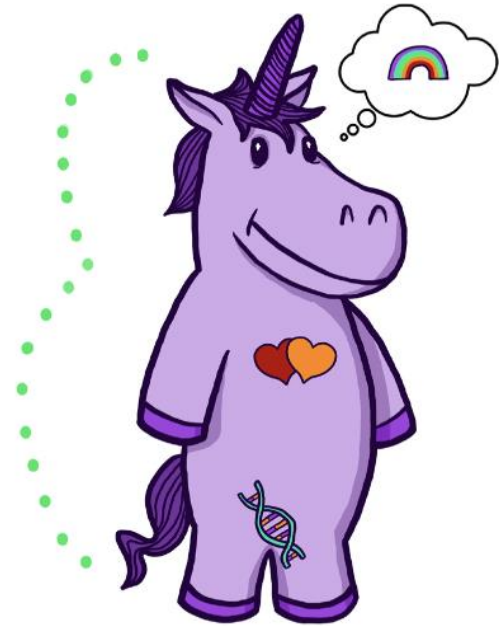
“Inside self” not my body
“Kids just know”
Dad can become “Mom”





The Gender Unicorn

Graphic by:
TSER
Trans Student Educational Resources



To learn more, go to:
www.transstudent.org/gender

Design by Landyn Pan and Anna Moore

Clash of Anthropologies: Irreconcilable views of the person

Gender Ideology: Key Influences on Youth



Pornography

US largest consumer
#1 search “lesbian porn”



Social media

Anime
Gaming



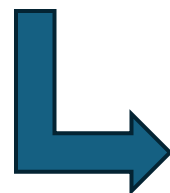
School

Peers
Teachers



Clinicians

Physicians
Therapists



Gender Clinic



GA schools: Tensions (laws, teachers, activists)

Georgia governor signs series of controversial education bills into law

NBC NEWS

The measures limit discussions about race in classrooms and allow for transgender athletes to be excluded from sports, among other things.

Classroom: No "divisive" concepts

Sports: Sex-based sports (girls)

Parents' Bill of Rights "direct the upbringing and education" of children

But: Names? Pronouns? Bathrooms?

Title IX (federal) - enjoined



PRESS RELEASE

Educators Bring Federal Sex Discrimination Lawsuit Against Cobb County School District

In the first federal lawsuit challenging classroom censorship policies in Georgia, educators are suing the Cobb County School District for discrimination after fifth-grade gifted specialist Katie Rinderle was terminated last year for reading *My Shadow is Purple*, an age-appropriate picture book about self-acceptance and navigating gender stereotypes, to her class.

"There has been no evidence presented that kids are being taught gender identity issues in school that would lead to any kind of confusion or coercion," Jeff Graham, Georgia Equality. AP 2.13.24

My Shadow is PURPLE



Written & illustrated by
SCOTT STUART

Publisher: A heartwarming and inspiring book about being true to yourself and moving beyond the gender binary...

“My Dad has a shadow that’s blue as a berry, and my Mom’s is as pink as a blossoming cherry. There’s only those choices, a 2 or a 1. But mine is quite different, it’s both and it’s none.”

Fired Teacher: “The district’s ...harmful message” - not all students are worthy of affirmation in being their unapologetic and authentic selves,”
- *Katie Rinderle, Cobb County teacher*

 **NBC NEWS**

HELENE

MIDDLE EAST

POLITICS

U.S. NEWS

WORLD

SHOPPING

BUSINESS

HEALTH

TIPLINE

WATCH LIVE

OUT NEWS

Georgia teacher fired for reading a book to students about gender identity

The decision comes amid a nationwide conservative backlash to books and teaching about LGBTQ subjects in school.

National Association of School Psychologists imposes an ethical obligation to affirm + not “out trans kids”



School Counselors Assoc. supports **hiding student “gender identity” from parents**, unless child (of any age) consents

- “School counselors recognize the responsibility for determining a student’s gender identity rests with the student....
- Use chosen **name/pronouns**
- **Access** restrooms, activities by gender identity
- **Privacy and confidentiality:** Transgender and nonbinary students have a FERPA-protected **right to privacy...**
- This right to privacy and **prohibition of disclosing students’ gender identity extends to students’ parents/guardians...**”

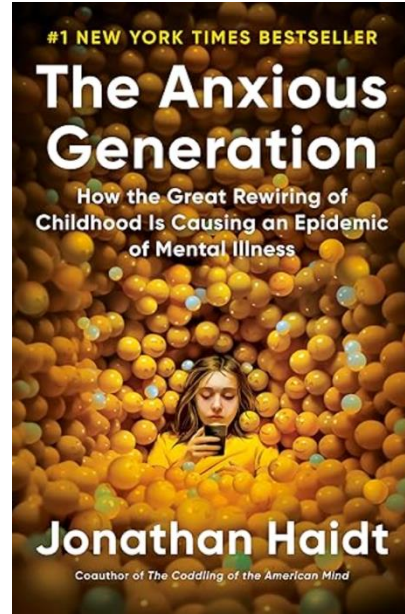
HOME » NATIONAL & WORLD NEWS » Indiana Catholic couple living every parent's nightmare after transgender custody case

NATIONAL & WORLD NEWS

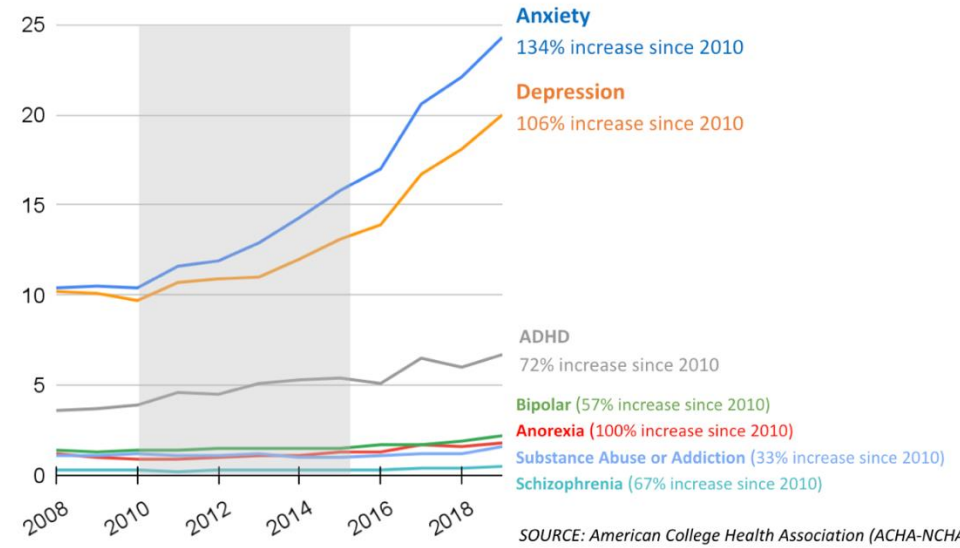
INDIANA CATHOLIC COUPLE ‘LIVING EVERY PARENT’S NIGHTMARE’ AFTER TRANSGENDER CUSTODY CASE

[The Catholic Telegraph](#) / [March 5, 2024](#) / [73](#)

Fact: The mental health crisis is linked to **social media** ...and plays a role in “trans” social contagion



Percent of U.S. Undergraduates Diagnosed with a Mental Illness



- TOPICS
- PUBLICATIONS & DATABASES
- RESEARCH & PRACTICE
- EDUCATION & CAREER
- NEWS & ADVOCACY

Home > Monitor on Psychology > 2024 > April/May >

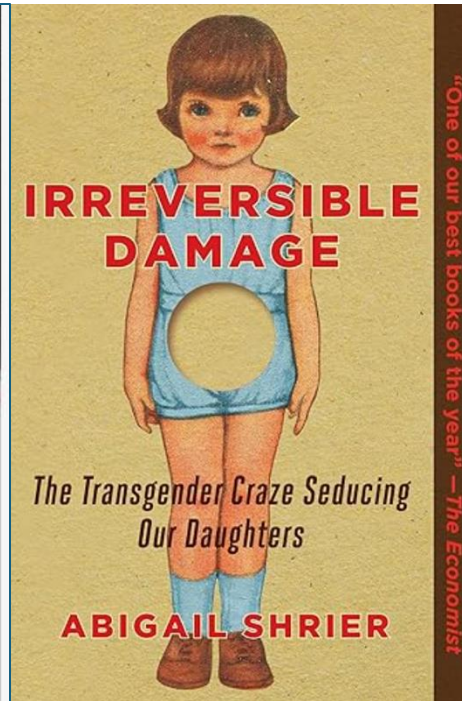
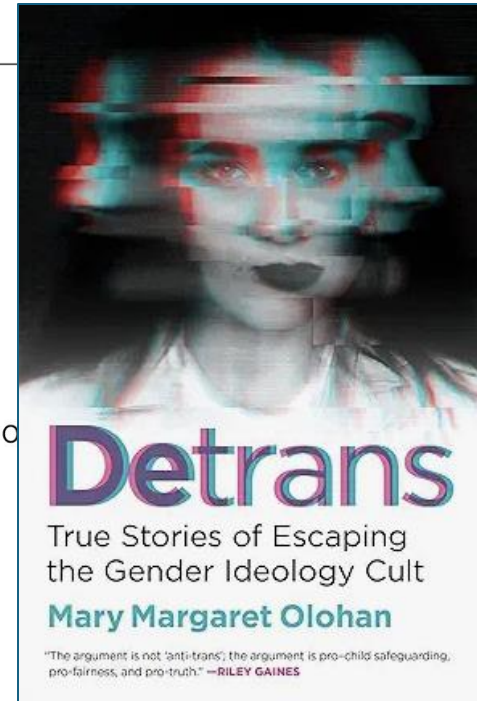
BY THE NUMBERS

Teens are spending nearly 5 hours daily on social media. Here are the mental health outcomes

Forty-one percent of teens with the highest social media use rate their overall mental health as poor or very poor

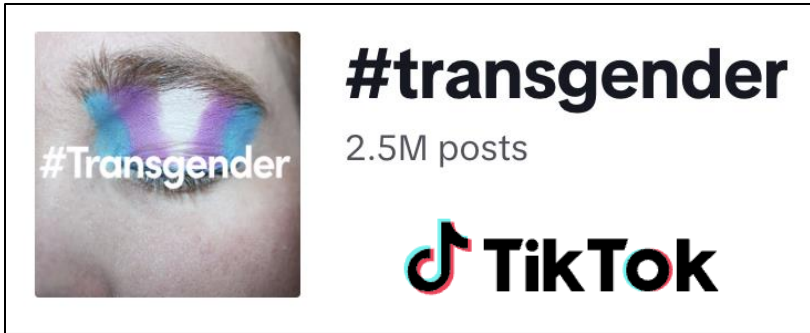
April 2024

By [Tori DeAngelis](#) Date created: April 1, 2024 1 min read
Vol. 55 No. 3
Print version: page 80



Gender ideology permeates social media
(“doing” – invested in content)

Interactive, Immediate and Personalized
Social media, video, anime, gaming. Youth content creators, participants. “Allyship.” Training



A screenshot of a TikTok post. On the left is a close-up of a person's eye with vibrant, multi-colored makeup. The text "#Transgender" is overlaid on the image. To the right, the hashtag "#transgender" is displayed in large, bold black font, with "2.5M posts" underneath. The TikTok logo is at the bottom.

The New York Times

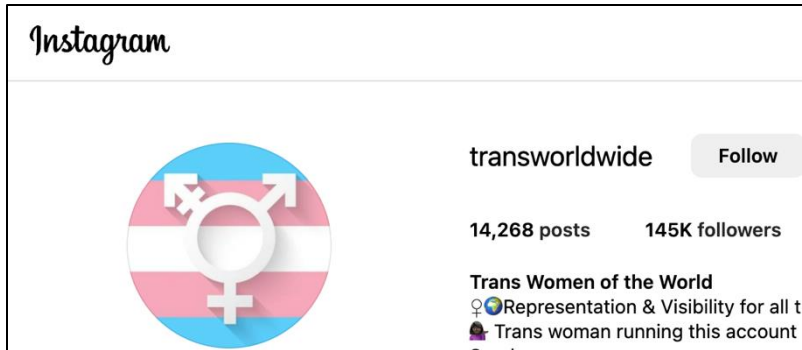
Video Games Let Them Choose a Role. Their Transgender Identities Flourished.

Transgender people have turned to games, some with robust character creators, as places where they can safely express themselves.

Share full article



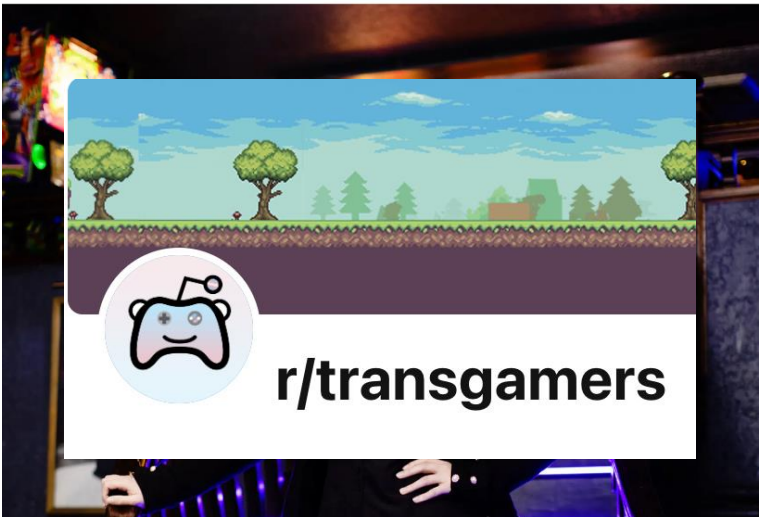
Instagram



transworldwide Follow

14,268 posts 145K followers

Trans Women of the World
Representation & Visibility for all t
Trans woman running this account



A banner for the subreddit r/transgamers. It features a pixel art landscape with trees and a house. In the foreground, there is a white circle containing a black game controller icon. Below the circle, the text "r/transgamers" is written in a bold, black font.



TransgenderChannel

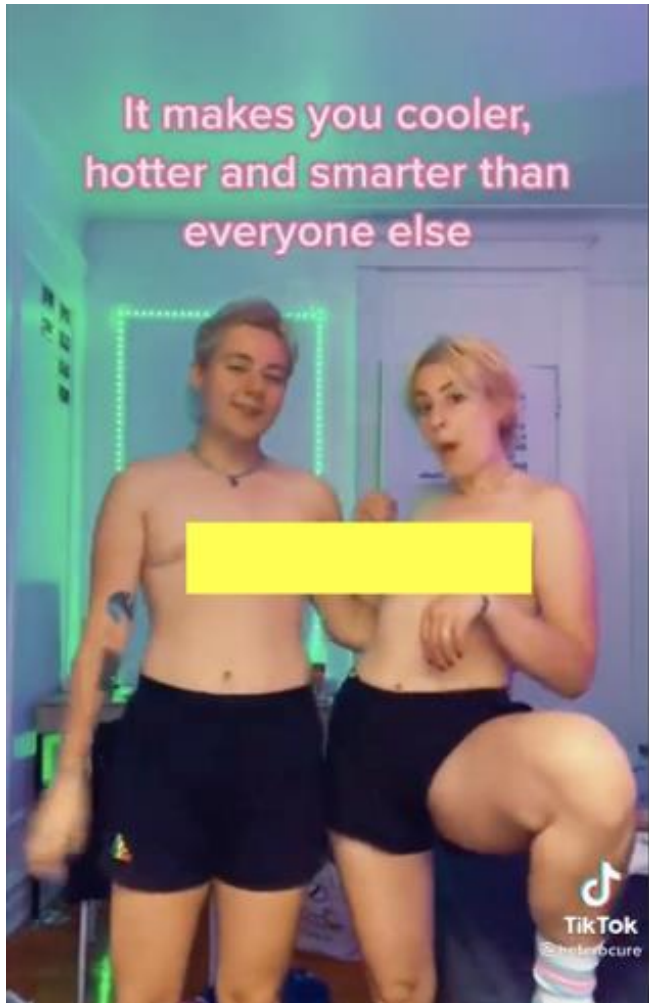
YouTube



Discord SERVERS

TRANSGENDER

Media, Influencers promote “trans” and normalize “transition”

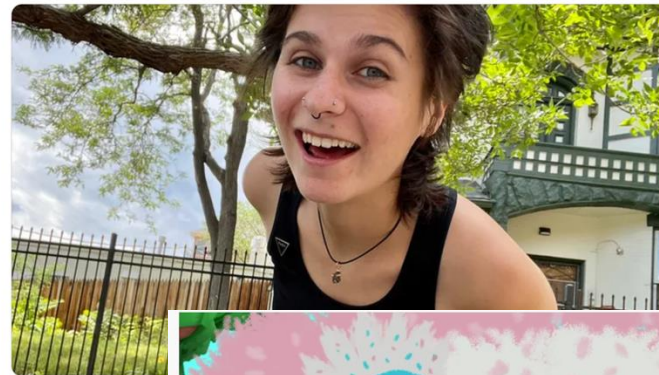


How TikTok became a haven for queer and questioning kids

Queer signaling in the age of TikTok.
By Rebecca Jennings | @rebexxxa | Aug 3, 2021, 9:05am EDT



Support Mads Wilkerson's Top Surgery Journey



\$65 raised of \$10,000 goal

3 donations

Share

Click to Help

Krista Yorlano
\$25 · 2 d

Melinda Massey
\$25 · 4 d



The Blue's Clues Pride Parade Sing-Along Ft. Nina West!



Netflix, Disney leading the kids TV pack in LGBTQ representation



Jeffrey Marsh – trans influencer
“Go no contact” (with parents)
“I love you” “Chosen family”

Healthcare: Endocrine Society and AAP promote medical and surgical “transition” in minors, amid growing opposition

Professional Organizations with Affirming Transgender Policy Statements

Ann & Robert H. Lurie
Children's Hospital of Chicago

Ann & Robert H. Lurie
Children's Hospital of Chicago

American Academy
of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®



American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®



AMERICAN PSYCHOLOGICAL ASSOCIATION

AMERICAN ACADEMY OF
CHILD & ADOLESCENT
PSYCHIATRY
WWW.AACAP.ORG



National Council of
Teachers of English

Pediatric Nurse
Practitioners

NASW
National Association of Social Workers

AMERICAN COLLEGE
of NURSE-MIDWIVES
With women, for a lifetime®



NASN
National
Association of
School Nurses

Canadian Psychiatric Association
Dedicated to quality care
Association des psychiatres du Canada
Dévoué aux soins de qualité

AGS
Geriatrics
Healthcare
Professionals
Leading Change. Improving Care for Older Adults

ACP
American College of Physicians
Leading Internal Medicine, Improving Lives

atIXa
Association of Title IX Administrators

NASP
NATIONAL ASSOCIATION OF
School Psychologists
Helping Children Thrive • In School • At Home • In Life

- **Aug. 2023:** AAP reaffirms 2018 guidelines supporting “gender-affirming” interventions in minors. Commissions evidence review to counter state bans.
- **AAP:** “Gender-affirming care” is a “human right”
-- American Academy of Pediatrics 2023



Well-Care Questionnaire for teens aged 13 to 17

TO BE COMPLETED BY TEEN: This worksheet can give your health care team information to help you take better care of yourself. You don't have to answer any questions you don't want to. **Kaiser Permanente values your privacy. Your answers will be kept confidential.**

Name: _____ Pronouns: _____

Confidential phone number: _____ Is it okay to leave a message? Yes No

What is your gender? (choose as many as you'd like)

- Female Male Transfemale Transmale
- Non-binary Other: _____ Choose not to answer

Sex you were assigned at birth:

- Female Male
- Choose not to answer

Staff:

In note, use
.genderhealth

What are your MAIN REASONS for today's visit?

- Physical exam Sports exam Camp exam Other: _____

Chief Complaint

Family, School, and Other Activities

Sexuality

Are you attracted to (check all that apply):

- Men Women Both Non binary people Not sure No one Other

Clinicians – Secrecy policy towards parents. Divisive. Destroys trust.

American Acad. of Pediatrics supports routine “sex” and “gender” screening for *all* kids

Where?

- In the office during physicals
- In the office during acute visits
- When patients are hospitalized (SOGI data becoming more frequently assessed)
- When children and adolescents are hospitalized for psychiatric concerns

1. Ask

PAUSE

(count to
10-20 sec)

Patient

- Do you feel more like a girl, boy, neither, both?
- How would you like to play, cut your hair, dress?
- What name or pronoun fits you?
- What does it mean to be girl, boy, both, neither?

Parent(s)

- Child play, peer, hair, dress preferences
- Concerns with these
- Concerns with behavior, friends, getting along at school, school failure, bullying, anger, sadness, isolation, other?

Source: Jo Olson-Kennedy, MD, AAP 2020

Source: Dr. Michelle Forcier Fenway 2021



BYE BYE BINARY

- LGBTQ 2024 (PRRI)

Gen Z 28%

Millennials 16%

Gen X 7%

Boomers 4%

- LGBTQ CDC 2023

1 in 4 teens “LGBT”

- TRANS Pediatrics 2021

9.2% H.S. “trans”

(Past: .002 “trans”)

“Everyone must be an Ally”

A confused generation

In brief

- Gender ideology is incompatible with Christianity
- Gender ideology has permeated the culture, affecting us all.
- Young people are most vulnerable to the lies of gender ideology
- Social media, porn, government schools (peers and “trusted adults”), and healthcare are channels promoting gender ideology
- Gender ideology tells young people their feelings determine reality. It promises a fantasy result (“changing” sex, new ID)
- Shocking rise over past 5-10 years in young people identifying as “transgender” or LGBTQ. Driven by culture.

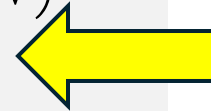
The Human Person and Gender Ideology

Identity Distress:
Medical Considerations

Paradigm Shift: “trans” is normal, healthy

Psychology

- Pre- 1965: delusion, deviance, no technology
- 1980: **disorder** (transsexualism DSM-III)
- 1994: disorder (gender identity disorder DSM-IV)
- 2013: **dysphoria** (trans is normal DSM-V)
- 2022: dysphoria (trans is normal DSM-V-TR)



- ICD 2019: **difference**, incongruence
- UN: **“Human right”** - self-determine identity regardless of sex. “Embodiment goals”



“Gender-affirming Care”

- **Affirm “gender identity”**
- **Facilitate transition: social, medical, surgical, legal**



Most children
desisted

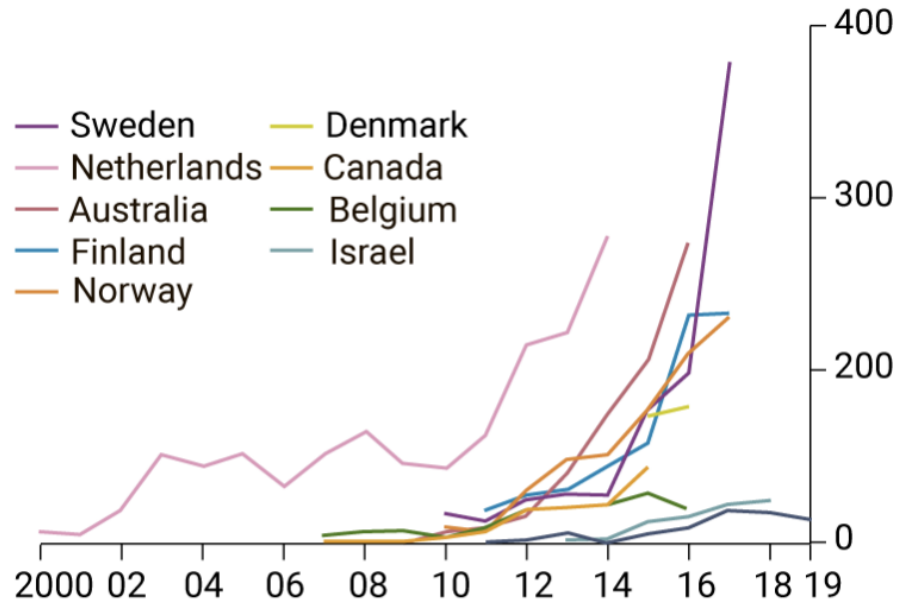
Past: .002 of the population

Past: “Typical trans” = adult males or young children

Social contagion is real. We've seen it before.

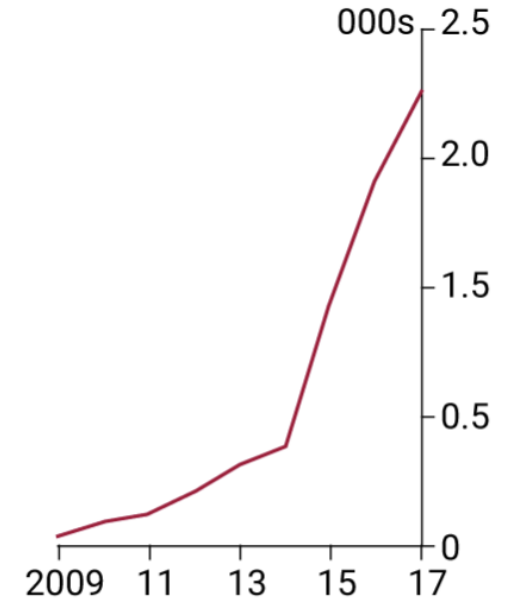
- Anorexia, Bulimia
- Suicide clusters, Cutting
- “multiple personality disorders”
- TikTok tics (Tourette’s, etc.)
- Mental illness, neurodivergent labeling
- **“Transgender”**
- **2:1 Female**, troubled psychologically

Number of referrals by country ...



Distribution of patient's age on referral and birth registered gender on referral to GIDS
Apr 1, 2018 to Dec 31, 2022

... and the rise in the UK



Child and adolescent referrals for gender dysphoria (UK, GIDS)

“Peer influence during this stage of life is very powerful.” – Hilary Cass, CASS Review 2024

(based on feelings + stereotypes)

Gender Dysphoria

DSM-V-TR Criteria (Kids)

“Incongruence between experienced gender + assigned gender” Clinical distress 6+ mos. 6/10

Strong...

- **Desire to “be other gender”**
- **Preference (boys) for cross-dressing/female attire**
- **Preference (girls) for masculine clothes, resist fem clothes**
- **Preference for cross-gender roles in fantasy play**
- **Preference for toys, games stereotypical of other gender**
- **Preference for playmates of other gender**
- **(Boys) Reject typically masc toys, etc; avoid rough play**
- **(Girls) Reject typically feminine toys, etc.**
- **Dislike of one’s sexual anatomy**
- **Desire for sex characteristics of experienced gender**



Self-diagnosis by minor. “Trans kid”

“[P]arents will [say], ‘I want to make sure my child is really trans...’ I turn to the child... ‘what gender identity do you have?’ There’s no form, there’s no scale, no psychological battery of tests that needs to be done.”



We're trans kids,
and we want to live



“Trans kids’ know who they are”



Robert Garofalo, MD Lurie Children’s Hospital, Chicago

support trans youth. Here's an excerpt from the conversation.
[See less](#)


New Studies: Identity distress is not permanent

- Rationale for adolescent transition: poor results in adults, who lament “late” transition
- Presume: fixed “trans” identity. New studies: identity-distressed kids aren’t “future trans adults”
- Dutch: adolescent “gender non-contentedness” decreases (2024)
 - “Gender non-contentedness, while being **relatively common during early adolescence**, in general **decreases with age** and appears to be **associated with a poorer self-concept and mental health** throughout development.
- US: (Sapir 2024): Insurance data – gender diagnoses do not persist in more than half of cases

Archives of Sexual Behavior (2024) 53:1813–1825
<https://doi.org/10.1007/s10508-024-02817-5>

ORIGINAL PAPER

Development of Gender Non-Contentedness During Adolescence and Early Adulthood

Pien Rawee¹ · Judith G. M. Rosmalen^{1,2} · Luuk Kalverdijs² · Sarah M. Burke² 

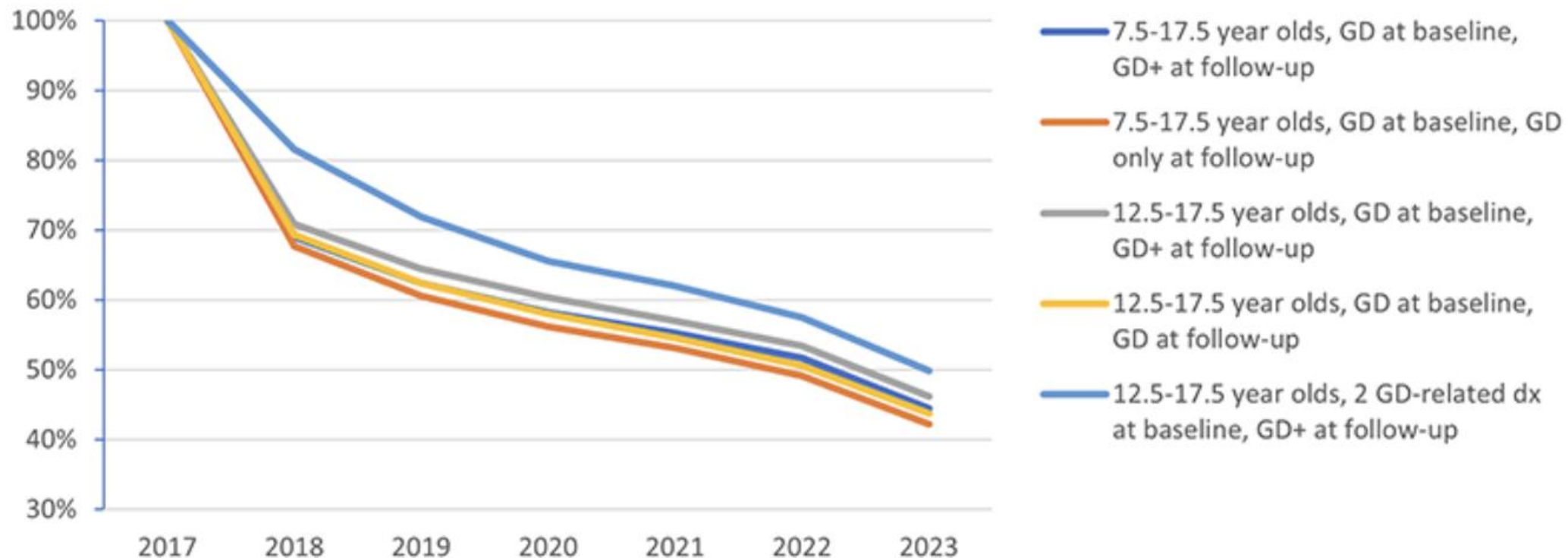
Received: 28 April 2023 / Revised: 19 January 2024 / Accepted: 20 January 2024 / Published online: 27 February 2024
© The Author(s) 2024



New Studies: Identity distress is not permanent

- US: (Sapir 2024): Insurance data – more than half of gender diagnoses disappear over 7 years

Persistence of GID* and Related Diagnoses** in Minors Over 7 years



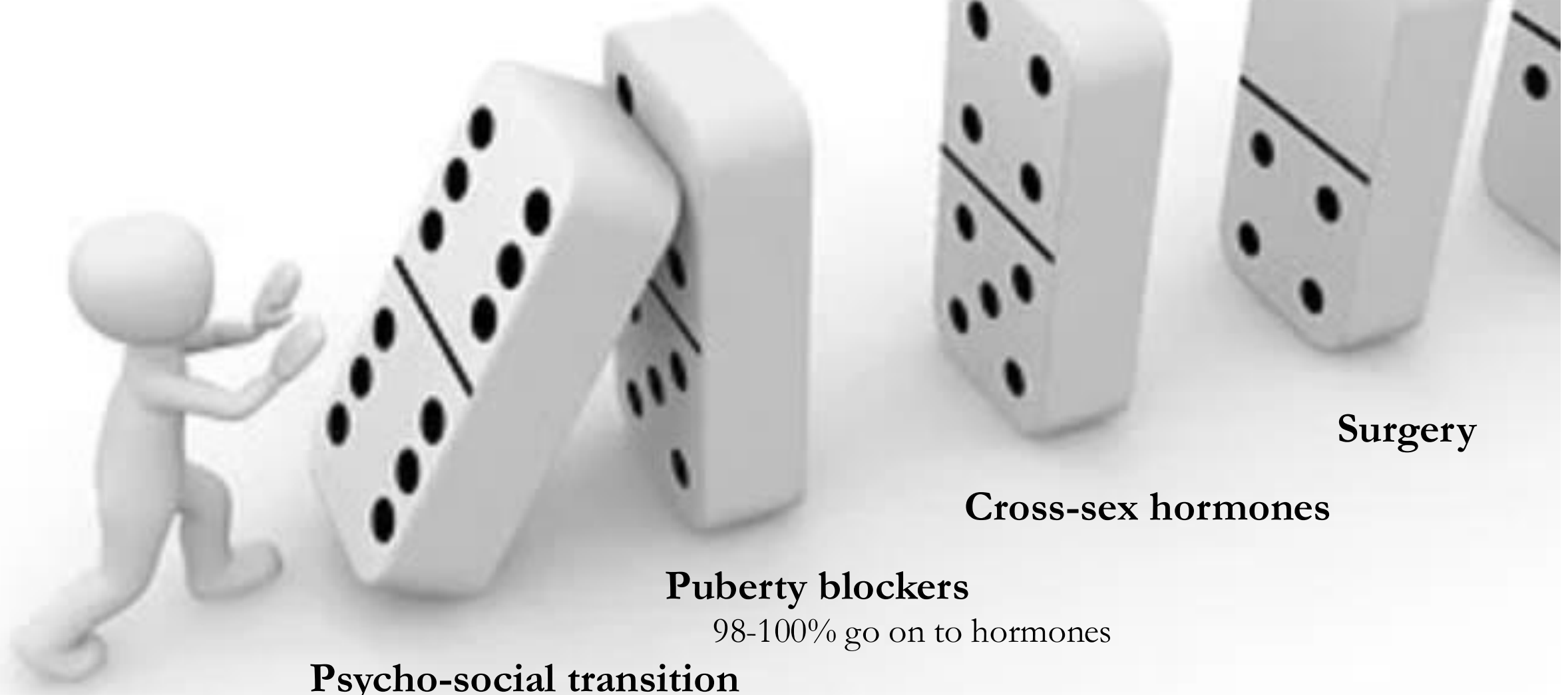
Children - vulnerable



“The rational part of a teen’s brain isn’t fully developed and won’t be until age 25 or so.”

Children cannot consent to life-altering, sterilizing interventions in healthy body.

“Gender-affirming care”



Affirmation of
“trans” ID (false belief)

Psycho-social transition

97.5% persist

Puberty blockers

98-100% go on to hormones

Cross-sex hormones

Surgery

Pathways to Harm

“Affirmation” / Psycho-Social Transition is a Powerful Intervention

- **Claim: “Trans kids.” Feelings = reality.**
- **Fact: male or female children.**
 - **No “trans kids”. Cannot change sex**
- **Change name, pronouns, hair, clothes, roles**
- **Fact: Gender dysphoria and “trans” ID**
persist with social transition (97%)

Steensma (2013); Olson, *Pediatrics* (2022)

- “92.7% of those who socially transitioned between ages 3 and 12 continued to experience gender dysphoria/incongruence at the end of the study (on average, 5.4 years after socially transitioning)

Cass (2024, citing Olson 2022)

- Claim of “improved mental health” is “not supported” by evidence. CASS (2024)



Avery’s dad: “At 4 years old, my child revealed her true self by stating very clearly... ‘I am really a girl.’”
(Avery is male.)

Puberty suppression = one-way path, not a “pause”

- **Puberty** = whole body maturation (brain, genitals, repro, emotions). “Blockers” stop healthy growth.
- **Claim:** Safe. Reversible. “Pause”
- **Fact:** **Physical, psych harm.** Not reversible.
- **Fact:** **98-100% “on-ramp”** to cross-sex hormones
- **Fact:** Bones (low density). Immaturity (emotions, body). **Abnormal testicular tissue (Mayo 2024).** Rare side effect (FDA) brain swelling, lose vision
- **Unknowns:** brain development Long-term risks?
- **Fact:** Sterility risk (Puberty blockers + CSH)
- UK (2021, 2022); **NEW** German study (2024): No evid of benefit for “dysphoria” or mental health
- **UK CASS (2024):** “weak” evidence. Serious risks

- NEWS -

FDA Officials Warn Of Brain Swelling, Vision Loss In Minors Using Puberty Blockers

By Brandon Drey · Jul 27, 2022 DailyWire.com · [f](#) [t](#) [1](#)



Puberty blockers ‘stunt bone growth of children’

Source: Times of London





“CROSS-SEX” HORMONES do NOT change a person’s sex.

“Feminize” or “masculinize.”

“Iatrogenic” (causes harm in healthy person). Impair function. Some permanent effects.

False claim: “true” self **Fact:** Alter appearance. Impair healthy function, organs.

Harm: fertility, lost sexual function. Genital atrophy/growth. Hair loss, acne, voice.

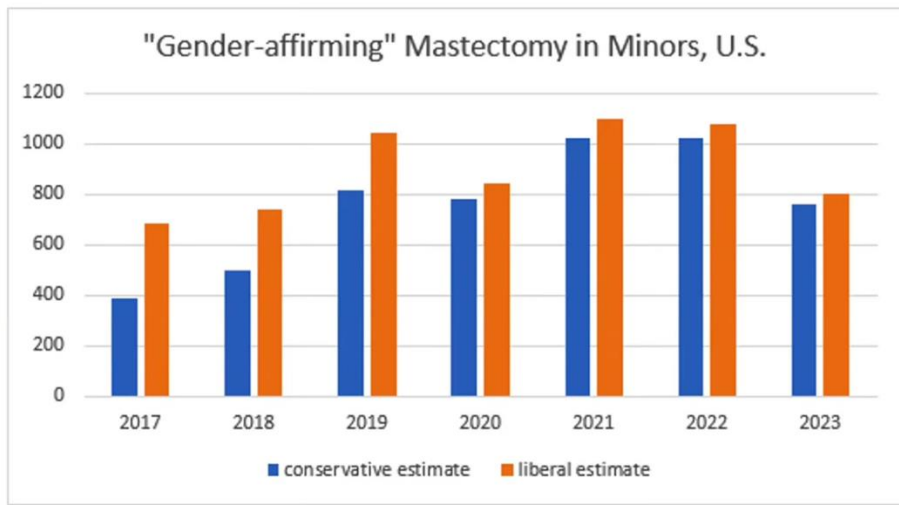
Risk blood clots, cardio, metabolic disorders, liver, pain (hysterectomy) Long term?

Surgery (yes, on minors): Breasts, face, genitals, organs

- **Claim:** Align mind-body. Improve mental health. “Authentic”
- **Fact:** Amputate breasts, flay penis, remove ovaries/testes/uterus; reshape brow, jaw...
- **Fact:** Permanent harm. Destroys function. Can't change sex.
- **Fact: Sterility. Impaired sexual function.**
- **Fact:** Surgery cannot replicate opposite-sex function, fertility
- **Fact:** Complications - fissure, stenosis, necrosis, incontinence. **Repeat surgeries.**
- **WPATH (2022): No minimum ages**



Gender docs performed 5,300 to 6,300 mastectomies on gender dysphoric minors as young as 12 years old (2017 – 2023, based on insurance data)



Manhattan Institute 2024, based on insurance data

Professional Organizations with Affirming Transgender Policy Statements

Ann & Robert H. Lurie
Children's Hospital of Chicago

Ann & Robert H. Lurie
Children's Hospital of Chicago

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®



AMERICAN PSYCHOLOGICAL ASSOCIATION

AMERICAN ACADEMY OF
CHILD & ADOLESCENT
PSYCHIATRY
WWW.AACAP.ORG



National Council of
Teachers of English



National Association of Social Workers



AMERICAN COLLEGE
of NURSE-MIDWIVES
With women, for a lifetime®



Canadian Psychiatric Association
Dedicated to quality care
Association des psychiatres du Canada
Dévoués aux soins de qualité



Leading Change. Improving Care for Older Adults



American College of Physicians
Leading Internal Medicine, Improving Lives



Association of Title Administrators



National Association of School Psychologists
Helping Children Thrive • In School • At Home • In Life





Telehealth, “informed consent” – 18 years

You get to be you.

Gender-affirming care for
transgender and nonbinary
individuals.

Embrace your authentic self.

Schedule your appointment today, and together, we'll help you take confident steps on
your journey toward authenticity and wellbeing.



“Jazz” – male
“I am a girl”

David Bertozzi / BuzzFeed

Why? Emotional Blackmail: Suicide Prediction

Claim: “Trans kids” must be “affirmed” + transitioned or they will commit suicide. **FALSE**

Fact: Gender docs Erica Anderson and Laura Edwards-Leeper: “no evidence” that failure to transition causes suicide

Fact: Kids diagnosed w “gender dysphoria” or identifying as “trans” have many pre-existing mental health issues w/ high risk of suicide

Fact: Suicides occur at all stages of “transition.” Poor long-term mental health.

Is “gender transition”
“lifesaving”?
No.

“Suicide prevention”?
No.

- Finland 2024: “dysphoric” youth suicide **rare** (.3%)
 - **Higher suicide risk due to pre-existing psych issues**
 - “not justified” to tell parents ...a young person is at risk of suicide without medical treatments and that the danger can be alleviated with gender reassignment.” Kaltiala (2024)
- 2022 UK Tavistock clinic .03% suicide (Biggs)
- CASS Review (2024): No evidence transition prevents suicide
- Not “lifesaving” -“unreliable claim,” no evidence (Appleby 2024)
- **Avg time to suicide 6+ years after 1st GAC (Wiepjes 2020)**
- 10-20 yrs. after surgical transition, suicide = 19x gen pop (Dhejne 2011)
- Among ER patients, “trans” w GAC: 12x higher suicidality (Straub 2024)

The Cass Review

Independent review
of gender identity
services for children
and young people

8 substantive evidence reviews

Qualitative interviews

3+ years

April 2024



“Gender-affirming care” A Medical Scandal

BAD MEDICINE - LACK OF EVIDENCE

- * uncertain basis for diagnosis
- * unclear rationale
- * “poor quality” studies
- * lacks “reliable evidence base”
- * “weak evidence” of benefit
- * “many unknowns” (no follow-up)

HARM:

***Puberty suppression**

bone, brain (IQ), vision, emotional, sterility

***Cross-sex hormones**

disable healthy sex/repro function, metabolic, cardiovascular, liver, cancer, genital atrophy, pain, mental health

***Surgery**

destroys healthy anatomy, sterility, sexual dysfunction, significant complications

***Persistent Mental Health Issues**

diagnostic overshadowing

The weight of evidence does not support “gender-affirming” body modifications (hormones/surgery)

BAN OR LIMIT

UK (Eng, Scotland, Wales)

CASS (7+ 2 reviews)

NICE (2 reviews)

SWEDEN (1 review)

FINLAND (1 review)

NORWAY

DENMARK

Ban or Limit: Hormones/surgery

CAUTIONS:

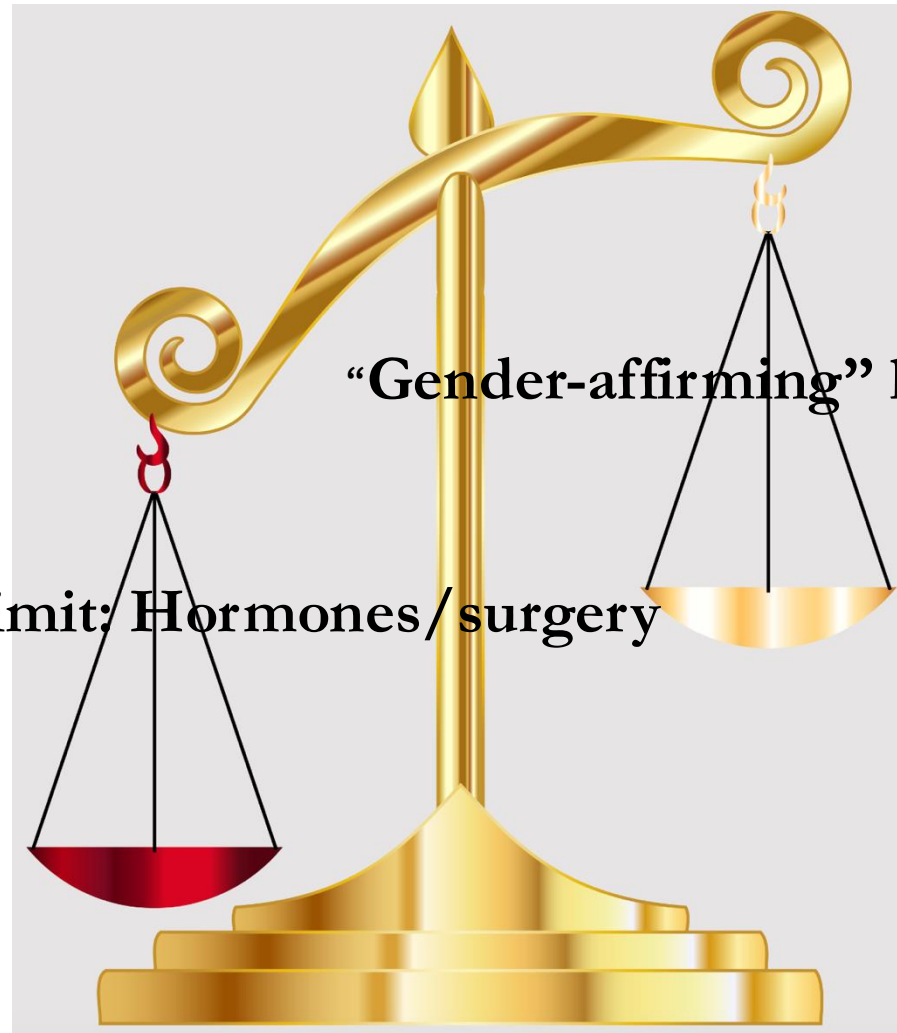
France Acad Med

German (1 review)

Dutch Parliament

AUS psychologists

Am Soc Plastic Surgeons



“Gender-affirming” hormones/surgery

**“REMARKABLY WEAK”
EVID “Low quality” evidence**

WPATH (1 review)

suppressed Hopkins research

Endocrine Soc (1 review)

Am Acad Pediatrics (no review)

Gender clinics + lobby

“statements”



Gender Dysphoria

A Therapeutic Model for Working with
Children, Adolescents and Young Adults

Susan Evans and Marcus Evans

What is going on? If not
“trans,” then what?

Reality: Person is hurting, seeking to
escape pain and confusion, or even
themselves (self-hatred).

**“Trans” = “maladaptive” response
to very real pain, trauma, need**





Who: Vulnerable youth: hurting, troubled backgrounds

- CASS: Among youth who ID as “trans”
- * Autism dx - 3-6 x more likely
- * High rates mental health dx (89%)
- * High rates of adverse childhood exp.
- physical abuse (15-20%)
- sexual abuse (5-19%)
- emotional abuse (14%)
- maternal mental illness or substance abuse (53% and 49%) (paternal - 38%)
- domestic violence (23-25%)
- Parental death or loss (abandonment) (.5 – 19%)
- Earlier study (2002)– 50% single-parent
- Kozlowska, Elkhadi studies: High rates of pre-existing mental health and adverse childhood exp.

“trans identification is a “maladaptive response” to real pain


Attachment Patterns in Children and Adolescents with Gender Dysphoria (Kozłowska 2021)



Psychiatric Diagnoses (DSM-V):

Gender Dysphoria code 302.6

Comorbid mental health dx (DSM-5) 88%



Autism	16%
Depression.	63%
Anxiety.	67%
Self harm history	52%
Suicide Ideation	49%
Suicide attempt	10%
Child Protective Services Involvement	21%

Adverse childhood events,
unresolved loss, trauma

Family conflict 67%

Loss of a loved one. 60%

Maternal mental illness. 52%


Paternal mental illness 40%

Domestic violence 25%

Physical abuse 19%

Sexual abuse 17%

Note: 19% Superior intelligence



Kids w/ gender dysphoria and kids w/ other psych disorders have similar co-morbidities, histories of poor attachment, high rates of adverse childhood events (ACE)

Female Detransitioner Sues American Academy of Pediatrics for Pushing Youth Gender Transition

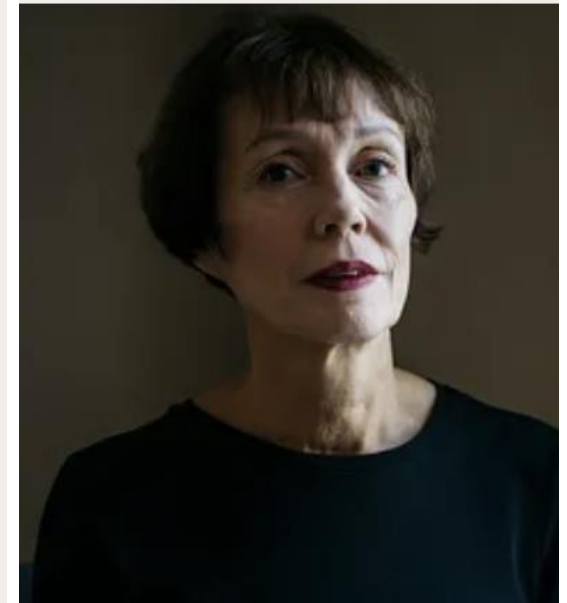
Story by Caroline Downey • 3d

AAP and
Endocrine Soc.
still champion
“gender
affirmation”

‘Gender-Affirming
Care Is Dangerous. I
Know Because I
Helped Pioneer It.’

My country, and others, found there is no solid evidence supporting the medical transitioning of young people. Why aren't American clinicians paying attention?

By Riittakerttu Kaltiala
October 30, 2023



EU, Lawsuits, whistleblowers

“Detransitioner” Testimony

Chloe Cole, 18-yr old female

Identified as “a boy” at 12

Parents scared, turned to experts

“live son or dead daughter”

Extreme duress.

13 – puberty blockers

One month later – testosterone

15 –double mastectomy

De-transitioned at 16.

Medical “de-transition” needs unmet

“Medicine failed me.”



In brief

- There are no “trans kids” (“trans people”). Only hurting, vulnerable male or female kids/young adults
- “Gender-affirming care” (GAC) is medical experimentation on youth, with life-altering consequences
- GAC trajectory: once begun, medical “dominoes”
- Once “trans” dx – underlying mental health issues go untreated
- “Remarkably weak evidence” underlying GAC – a medical scandal
- US medicine is “out of step” with the research. “Misleading” the public. (CASS 2024)

Pastoral Care – Responding to Identity Distress



**What is “good”
for us as human persons?**

When we lose sight of what’s
true, we no longer know what
is “good.”

If truth is subjective (“my
truth”), then “the good” is
“whatever I desire.”



Andrea Montañez, NBC News , March 31, 2024

Accompaniment “leads others closer to God”

“[S]piritual accompaniment must **lead others ever closer to God**”

“To accompany them would be **counterproductive if it became a sort of therapy** supporting their self-absorption and **ceased to be a pilgrimage with Christ to the Father.**”

Evangelii Gaudium 170



Source: USCCB media

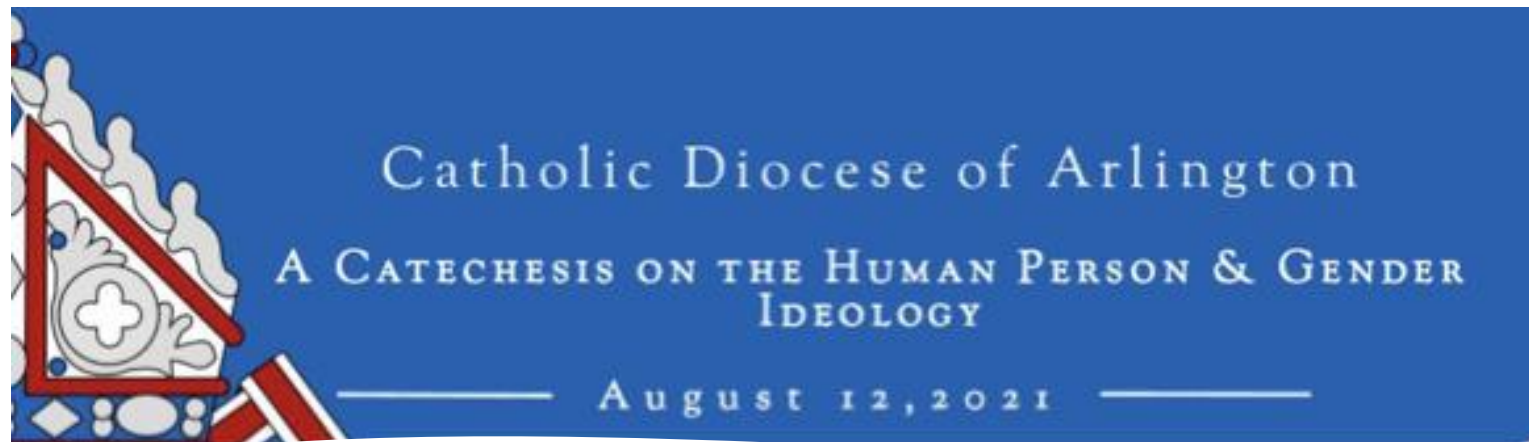
**The Church
has clear
teaching
Not only on
the Human
Person
But also
on Gender
Ideology**

- **Catechism of Catholic Church:** 2333, 2334, 362, 371 “accept sexual identity”
- **Pope Benedict XVI:** 2008, 2012 Christmas addresses; address to German parliament
- **Pope Francis:** Numerous addresses to Bishops
Amoris Laetitia 56
Laudato si 155
- **Vatican (CCE)** (*Male and Female* 2019)
- **USCCB** Doctrinal note medical interventions 2023
- **Bishops** – US, Nordic, Ukrainian. Dioceses
- **APRIL 8: Vatican (DDF) “Human Dignity”**
- **See PersonAndIdentity.com “Resources”**

Objection: “The Church hates “trans people”

“The Church does *not* teach that people who experience gender dysphoria or confusion are immoral or bad”

But by choosing a ‘gender transition,’ “they are embarking on a path that is objectively wrong and harmful.”





Declaration “Dignitas Infinita” On Human Dignity

Vatican Dicastery
For the Doctrine of the Faith

March 25, 2024

“Infinite dignity” of every person (Pope St. John Paul II)

- “ontological/metaphysical” - image + likeness of God
- Union of body and soul. Body shares in human dignity.
- Sexual difference (male or female) is gift we receive.
- Respect natural order of body (sexual difference)
- Avoid “unjust discrimination”

Gender theory:

- Denies human life, sexual identity are gifts (received)
- Denies Inseparable union of body and soul
- Denies significance of sexual difference
- “any sex-change intervention” – threat to human dignity
- Distinguishes disorders of sexual development

Our Bodies: A Gift from God

Valuing Sexual Difference, *Laudato Si*

Human ecology:

“**[A]cceptance of our bodies as God’s gift** is vital for welcoming and accepting the entire world as a gift from the Father ...Learning to accept our body, to care for it and to respect its fullest meaning, is an essential element of...human ecology.”

Sexual difference:

“**{V}aluing one’s own body in its femininity or masculinity is necessary** if I am going to be able to recognize myself in an encounter with someone who is different...It is not a healthy attitude...’to cancel out sexual difference because it no longer knows how to confront it.”



Pope Francis, Laudato Si 155

Sexual Difference: Anthropological Basis of Family

Respecting our humanity as created

Creation is a Gift: “Creation is prior to us and must be received as a gift.

At the same time, we are called to protect our humanity...accepting it and respecting it as it was created.”

Ideology of gender **“denies the difference and reciprocity in nature of a man and a woman and envisages a society without sexual differences, thereby eliminating the anthropological basis of the family...”**

[This] .leads to educational programs...that **promote a personal identity and emotional intimacy radically separate from biological difference between male and female....”**



Amoris Laetitia, 56



USCCB Note: Catholic health care may not cooperate with gender transitions

- “Transition” interventions:
 - *do not repair a defect in the body:
 - **normal and healthy bodies**
 - * do not sacrifice a part of the body to restore health to rest of body
 - no serious threat to health
 - * “These **interventions are intended to transform the body so as to make it take on as much as possible the form of the opposite sex, contrary to the natural form of the body.**”
 - * They are **attempts to alter the fundamental order and finality of the body** and to replace it with something else.”
- p.11



Practical Guidance for Ministry



Proactive

Truth, relationship, health



Protective

Warn, explain, Monitor, Limit boundaries

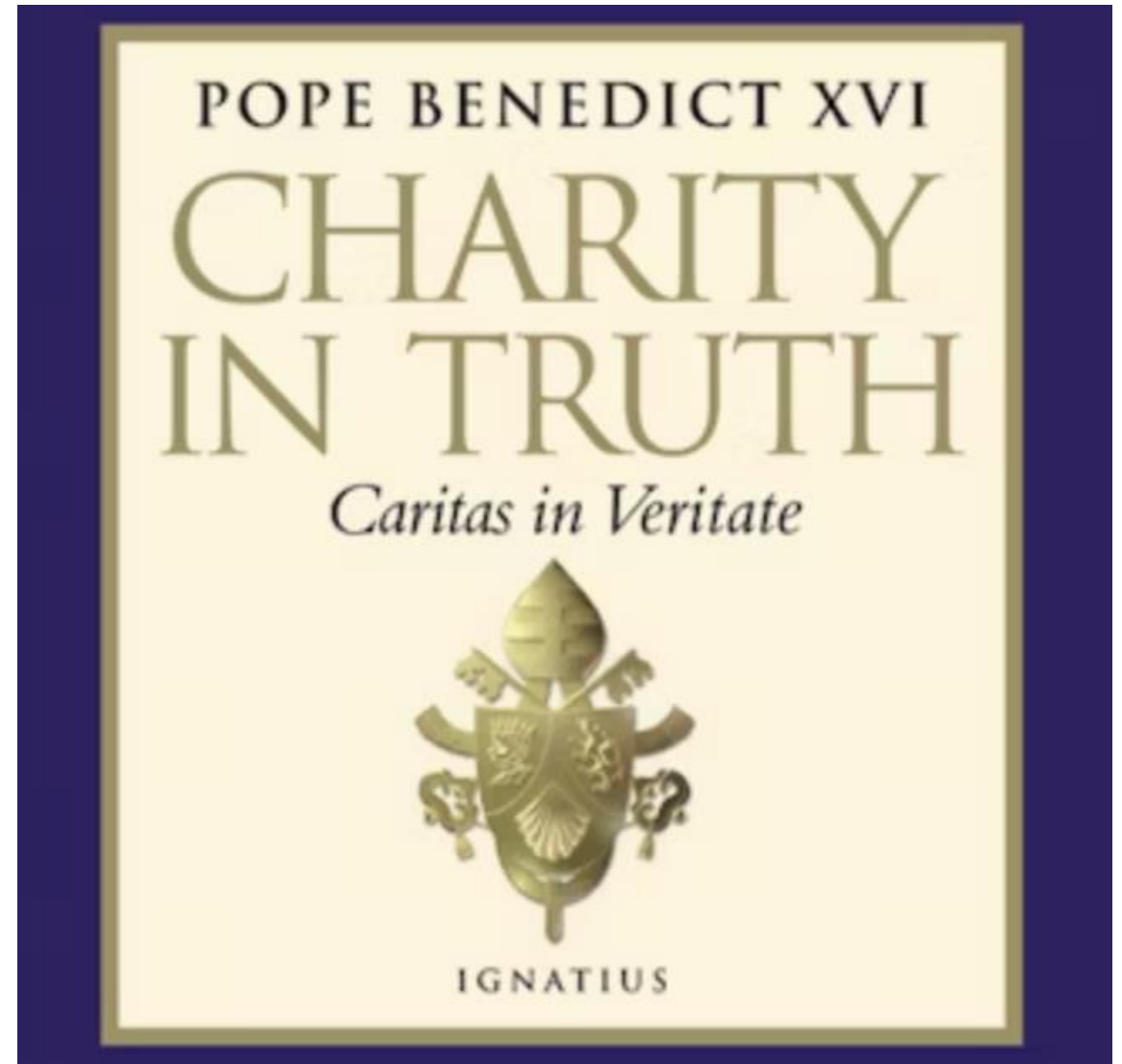


Personal

Love, ask, Listen, guide

Truth and Charity

- Unfailing kindness - virtue
- Compassion in tone and disposition
- Unyielding in truth
- Promote the “good news”
- Factual de-bunking of opposing arguments
- Find allies. (Sports, safety - sexual assault survivors)
- Highlight Persuasive Messengers (Chloe Cole, Riley Gaines)



Important language considerations

Use

- “sex” or “sexual difference”
- male or female
- man and woman (when biological link is clear)
- Sex discrimination
- Family
- Person who identifies as “transgender”
- transgender-identified person
- Pregnant women
- Friendship, pastoral care, support, accompany
- “identity or body-related distress”

Avoid

- gender
- gender identity
- gender bias - gender equality/equity
- kinship (as replacement for family)
- cisgender
- transgender people, LGBTQ gay etc.
- Homophobic, transphobic (as if true)
- Pregnant people
- Allyship
- “gender-affirming care”

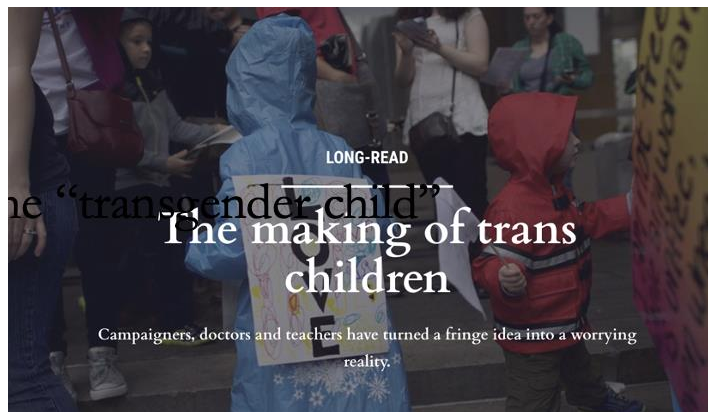
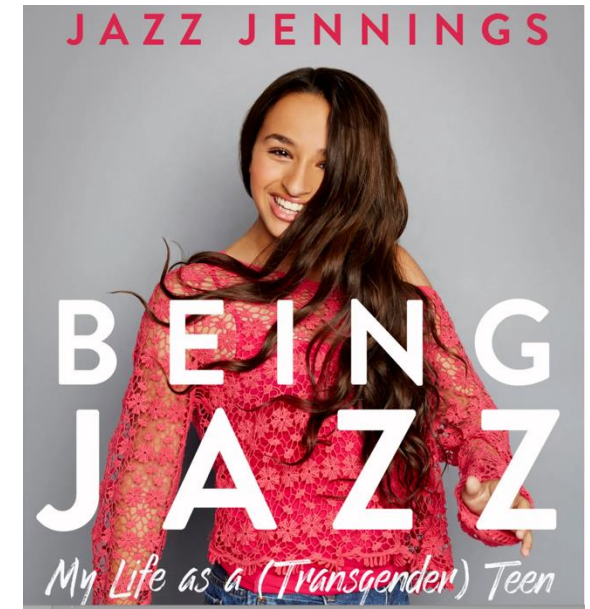
Cautions “gender dysphoria,” conversion therapy, inclusive (of whom?)

Myth: Some kids are “trans kids” (“trans people”)

Fact: All people are either male or female.

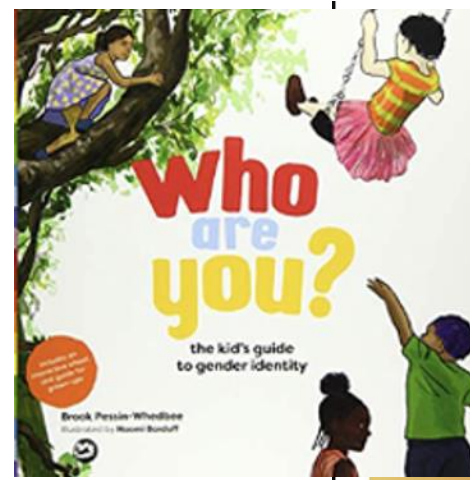
“When I talk about bodies I’ll talk about bodies with a penis and testicles or bodies with a vulva and ovaries.... there aren’t just two kinds of bodies.”

**Principles of Gender-Inclusive
Puberty and Health Education**



Myth: "Born in the wrong body"

"Gender identity"



THE INTERACTIVE WHEEL




Sexual Characteristics



"Assigned sex"

- External genitalia
- Hormones
- Chromosomes
- Body shape
- Voice pitch
- Body hair





Explain confusing feelings. Don't "label" self or others. Be patient. Grow.

"Welcome and inclusion" are inadequate responses. "Then what?"

Protective: Address same-sex attraction

- **Identity confusion** can be related to same-sex attraction (2/3 experience SSA before 'trans')
- **No one is "born gay"** – same-sex attractions/behaviors are influenced mostly by environment and experience. Not "choice"
- **No "gay gene."** (DNA study, Science 2019)
- **Sexual attractions and behaviors often shift in adolescence**, until age 25. Women may experience sexual fluidity as adults.
- **Do not encourage teens to "come out"** as "LGBTQ". Need freedom/privacy to grow, mature, heal. Seek trusted counsel
- **"Then what?" - LGBTQ identity- high risk. lower mental health-** more likely to abuse drugs/alcohol, engage in early sex, multiple partners, STIs



Love.
Listen.
Ask.
Guide

Messages: “You’re wonderful as you are.” Affirm dignity, value as person. (not affirming “trans” identity) God loves you and has a plan for your life. I love you and I am here for you.

Open-ended: Ask.

“**When you say....**[you’re “trans”/feel like a boy/born in wrong body/need to transition...”

“**What do you mean by that? I’d like to understand.**”

“**What does it mean to ‘feel like a boy’ (female)**”

“**Tell me aboutI’d like to understand...**”

“**When did you begin feeling this way**”

“**Where** have you gone for information...” Videos? Tiktok? Quiz?

“What do your **friends** think?” teachers? (who validates “trans”)

Reflect/ Empathize: “So you feel....”

Affirm truth: “Sex cannot change. You are [M/F] – and that’s wonderful!”

Accompany: “**We’ll help you get through this.** It’s tough now- won’t always be. I’m with you for the long haul.

Boundaries: “**I am here for you but, can’t support actions that harm you.**”



“Respond with LOVE”

Affirm the person (not the “trans” identity).

“I love you. You are a beautiful person – a gift. I know God has a plan for your life.”

“I am here for you. We’ll get through this together.



”Mom, dad, I’m trans.”



Listen. Ask. (open-ended)

“When you say...[you’re ‘trans’/feel like a boy/born in wrong body]...what do you mean? I’d like to understand.”

“What does it mean...[to feel like a boy”]

“Tell me about... I’d like to know more.”

“When did you start feeling this way?”

“Where did you go for information about this?”

“What do you friends think?” “Your teachers?”

Empathize. Guide.

Validate feelings: “So you feel...”

Affirm truth: “You are [male/female]. You are wonderful the way you are. Sex can’t change.”

Accompany: “We’ll help you get through this...”
“I’m with you for the long haul.”

Set Boundaries: “I love you so much, I can’t say yes to medicines that will harm your body [can’t support actions that hurt you]”



Know your experts (must vet)

- Catholic psychotherapy association
- <https://catholicpsychotherapy.org/>
- Catholic therapists
- <https://www.catholictherapists.com/>
- Catholic Charities (depending on diocese)
- CatholicCounselors.com
- Ruah Woods (Dr. Andrew Sodergren)
- Local Catholic or Christian therapists
- Secular: Gender Exploratory Therapy Association* <https://www.genderexploratory.com/>
- *not aligned with Catholic teaching on homosexuality
- No “gender therapists” or gender clinics

“Better no therapist than
a bad therapist.”

Pray

- For your child
- For others to come into their lives
- For our culture
- For our professionals/ schools

- Our God is a God of miracles and mercy!



Have Hope

See the Opportunity for Evangelization!

- In a world desperately seeking meaning,
- We have the truth and Love Himself to give!

•



A man and a woman are sitting on a wooden bench, smiling and holding mugs. A small dog is sitting between them. The background is a wooden wall.

The Truth is...You are “wonderfully made.”

Male and female
Your body. Your identity.
God’s gift to you.

Case study

- Camille, a teen girl who is part of the Confirmation religious education class, has begun wearing androgynous clothing and shortened her name to “Cam.”
- One week before the Confirmation retreat, and three weeks before Confirmation, she confides in you (DRE/Youth minister, etc) that she has begun socially transitioning at her local high school and she identifies as a “transboy.”
- Cam asks to be roomed with the boys on the Confirmation retreat.
- What are the concerns here?
- What additional info do you need?
- How might you respond?

Appendix



“Trans” adolescent suicidality: Less social stigma but suicidality still high (*de Graaf 2022*)

- Despite more accepting society, “[w]e did not find any strong evidence that more recently assessed adolescents were any less suicidal than adolescents seen many years ago...”
- “the rate of [non-suicidal self-injury] did not change over time and remained elevated compared to cisgender, heterosexual controls.”
- Source: de Graaf NM, Steensma TD, Carmichael P, et al. Suicidality in clinic-referred transgender adolescents. *European Child & Adolescent Psychiatry*. 2022 Jan;31(1):67-83. DOI: 10.1007/s00787-020-01663-9. PMID: 33165650.

Appleby 2024 NHS

* Suicide by any young person is a profound tragedy: it should be seen as an indictment of our society.

* Suicide is rare, but higher suicide risk b/c pre-existing issues

* “the evidence for “gender-affirming care” in the form of puberty-blocking drugs is unreliable.”

* Cites Ruuska Finland 2024 – psych issues explain suicidality

- **Summary of conclusions**

1. The data do not support the claim that there has been a large rise in suicide in young gender dysphoria patients at the Tavistock.
2. The way that this issue has been discussed on social media has been insensitive, distressing and dangerous, and goes against guidance on safe reporting of suicide.
3. There is a need to move away from the perception that puberty-blocking drugs are the main marker of non-judgemental acceptance in this area of health care.

 GOV.UK

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[Home](#) > [Health and social care](#) > [National Health Service](#) > [Patient safety](#)

> [Review of suicides and gender dysphoria at the Tavistock and Portman NHS Foundation Trust](#)

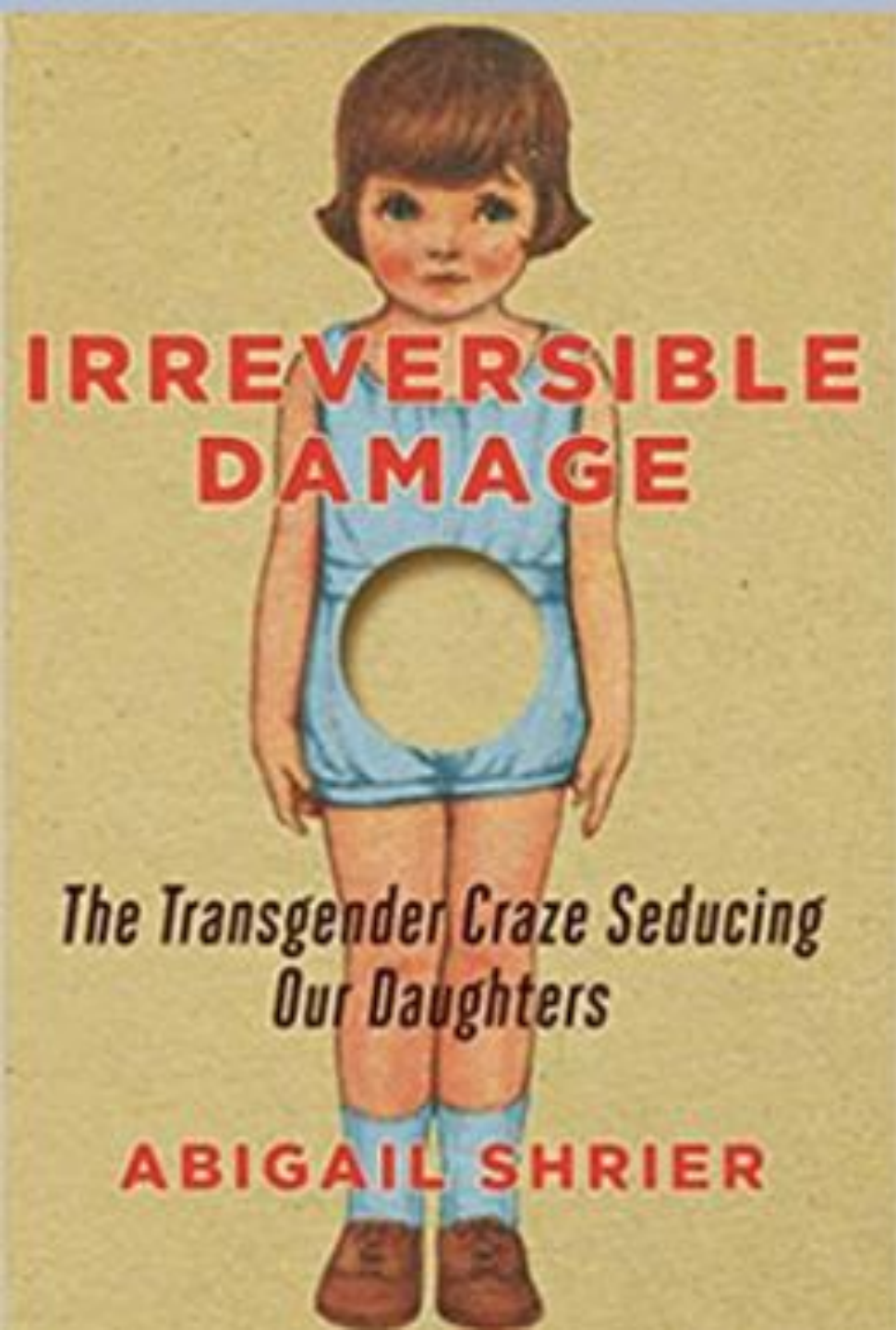


Department
of Health &
Social Care

Independent report

Review of suicides and gender dysphoria at the Tavistock and Portman NHS Foundation Trust: independent report

Published 19 July 2024



“Gender dysphoria” – Why? *“Rapid-onset gender dysphoria”*

- **Precipitators and vulnerabilities**
- Mental health issues
- Body issues
- Autism (2 – 4 x)
- Same-sex attraction (2/3)
- Excessive time online, social media
- Social contagion (peer groups)

Source: Lisa Littman studies 2018, 2019, 2021
<https://littmanresearch.com/publications/>

Christian anthropology

- Created by God. Loved
- M/F Son/daughter of God
- Inherent (Imago Dei)
- Unity (soul-body)
- “me” – meaning
- Union – M/F – self-gift
- Covenant – perm
- Mom-dad-child
- Sin – need mercy, grace
- Eternal life

Origin
Identity
Dignity
Person
Body
Sex
Marriage
Family
Sin
Purpose

Gender Ideology

- Atheist. Autonomy
- Self-determined
- External (law, others)
- Dualistic (mind-body)
- Thing, tool
- Pleasure, any
- Contract – adult benefit
- Chosen (any kind)
- Oppressor-oppressed
- Utopia

God, who is love, created me.

I am loved.

I am known.

I am gifted and designed (male or female).

I belong (son or daughter).

God created me body and soul.

I am good. I am priceless.

I am made for love (not to be “used”)

I am made for self-giving.

My body is good.

My body is designed for self-gift.

I am made for more: to seek truth + “the good”

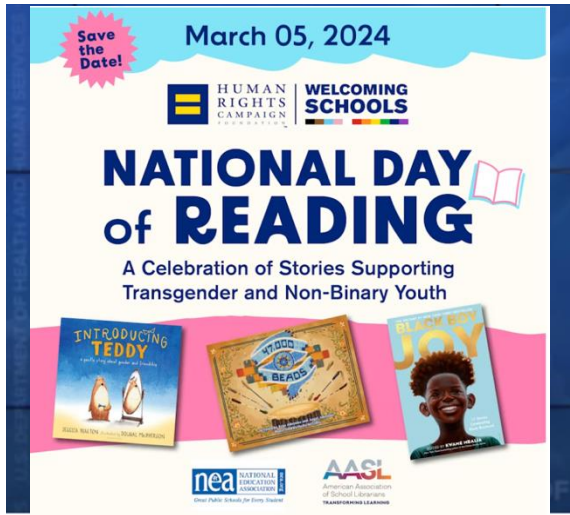
I have a purpose. My life matters.

I am made for eternal life with God.

I am sinful, called to conversion (mercy)

I am not alone. Church: teaching, Sacraments





125,000 educators. 43 States. 10.5 Million kids



Public Schools Promote Gender Ideology

Top-down and bottom-up

- Title IX: “gender identity” – **ENJOINED – KANSAS FED CT**
- Moms for Liberty, Young America’s Foundation, and Female Athletes United, Kansas AG
- **BUT state + local “gender identity”**
- **Culture:** language, norms, celebrations...
- **Communication:** trans terminology
- **Curriculum:** LGBTQ language, examples across all subjects (digital)
- **Contagion:** peer to peer, GSA clubs
- **“Cancel”** - social ostracization
- **Coercion:** “pronouns,” “misgender”
- **Counselors + teachers** > activists
- **Confidentiality:** secrets - parents *** **KS AG**


Myth: feelings
determine reality



“I feel like a boy...I don't feel like a girl”
“I don't fit in... my body feels wrong”

**FACT: Feelings do not
define reality**

- Humans hard-wired to seek “good” + avoid “evil”
- Evil can masquerade as “good”
- Feelings are neither good nor bad
- Feelings cannot reliably tell us what is good
- Reason must govern emotions and channel them towards “good” - then choose the good



USCCB Doctrinal Note: No one is “born in the wrong body”

- **“A soul can never be in another body, much less be in the wrong body. *This* soul only comes into existence together with *this* body.”** (p. 3)
- “The soul does not come into existence on its own and somehow happen to be in this body, as if it could just as well be in a different body.”

Personal

Lead with love

Ask questions. Listen

Speak the truth. Guide

Set boundaries.

Stay in your lane

Pray

Depend on God