

Cherishing Transgender Children

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This document refers to the article "*Children Sacrificed to Appease Trans Lobby*" by Janice Turner published in the Times on the 11th November 2017, and the letters also published in the Times on the 15th November by Gavin Ashenden and Joshua Sutcliffe, on the "*Church of England and the Gender Debate*". All of these documents rely on the viewpoint expressed in the traditional teaching of the Church which regards all forms of gender and sexually variant behaviour as a falling from Grace which is driven by desire and the rewards of inappropriate sex. It is notable that the people who disagree with their arguments are dismissed as activists who are in pursuit of a political agenda. The current worldwide scientific consensus which exists on these matters is also ignored. This consensus regards both gender and sexually variant identities and behaviour as naturally expected variations of the human condition, which are intrinsic to the personality created, that arise very early in development and cannot be changed either by the individual concerned or by the predations of others in subsequent life. This viewpoint further affirms that gender identity is NOT determined by biological sex, and the reasons for this are again confirmed in my own neurophysiological and psychological research¹. That is also the position taken for example by the British Royal College of Psychiatrists, the British Psychological Society and parallel United Kingdom organisations. Each of the major medical organizations across the UK has signed a memorandum of understanding which very strongly condemns any attempt to try to 'cure' gender and sexually variant people. Corresponding positions are taken by the American Psychiatric Association and the American Psychological Association who have released statements which are equally as strong. Other international mental health organizations, including the World Health Organization have followed. All of these organisations are signatories to the World Professional Association for Transgender Health standards, which provides the consensus view.

However Christian tradition ignores this development process and instead determines that gender identity is a God-given feature which is fixed exclusively from birth by biological sex. Although scientific opinion regards the formation of gender identity as part of the process of personality formation, the traditional Christian doctrines consider the expression of all gender and sexually variant identities and the subsequent self-identification, to be a consequence of pursuing inappropriate rewards, and sexual desires. In the identity driven conflicts the characteristics which drive it are determined before any cognitive analysis can take effect. In reward driven conflicts the sense of identity comes after the cognitive experiences have already occurred. The medical methods for managing these different types of conflict are almost opposite to each other. Since the legalisation of homosexuality and the implementation of gender equality legislation, people can see for themselves that the full range of moral expression is present within these gender and sexually variant groups. Great harm can be created by the medical misdiagnoses that are made.

A medical and theological contradiction therefore exists. It is notable that the letters by Gavin Ashenden and Joshua Sutcliffe, together with organisations like Christian Concern take the view that on the grounds of

¹ Gilchrist, S. (2016): "Taking a Different Path": Chapter 10 in: "*This Is My Body: Hearing the Theology of Transgender Christians*", Ed: Beardsley, T. and O'Brien, M: Darton Longman and Todd. May 2016 ISBN 978-0-232-53206-7 also Gilchrist, S. (2016): "*Science and Belief. A New Approach to Identity and Personality Formation in Early Life*": <http://www.tgdr.co.uk/documents/218P-PaperPersonality.pdf>

biology alone, stereotypical male and female gender identities must be imposed on all children: otherwise confusion and distress will arise. However scientific research shows that these core gender identities have already become unchangeably fixed by the age of three years. That is well before children can examine their own minds, and make any choice. Giving all children the ability to explore their gender identity gives them the ability to find it. It does not give them the freedom to choose it. While a great majority of children do find that they identify with their biological sex, some will not, and the hurt, guilt and self-loathing that can result may have a very harmful effect. Like the consequence of the medical misdiagnoses, this enormous trauma, guilt and the high rates of attempted suicide among young transgender people is not caused by giving children the freedom to explore it: it is caused by the denial of that freedom instead.

These medical misdiagnoses mean that what is adopted as a compassionate approach by one group is understood as coercion by the other. The articles and letters by Janice Turner, Gavin Ashenden and Joshua Sutcliffe dismiss the scientific research which already exists and take a one-sided view. Of course nobody should try to force children into any gender identity or role: and contrary to the allegations made by Janice Turner, Gavin Ashenden and Joshua Sutcliffe, every protocol which is adopted in the United Kingdom for transgender children is designed to prevent any irreversible choice being made until each person reaches eighteen years of age. A recent report, which studied 3700 people, shows that more than four in five transgender young people have self-harmed and more than two in five transgender young people have attempted to take their own lives. For transsexuals the actual suicide rate is 8 to 10 times higher than that of the general population. Both groups use these high suicide rates to justify their own arguments: one group uses it to condemn what they see as the harm created by the "transgender lobby" the other group cites the reason for the high suicide rate as being due to the persecution and harassment suffered by transgender children (and by others), because their ability to be true to their own identities is derided or denied. These are not academic concerns. Instead of the scaremongering and the secular scapegoating of transgender people by society, these are issues which need responsible argument and unbiased reportage: they are issues where children's lives are at stake. If transgender children and all children are to be cherished, it is essential that the decisions are correct.

It should be a matter of great urgency that these issues are addressed. However Pope Francis has repeatedly stated that there can be no change in the traditional doctrine of the Church. The Church of England has placed an embargo which determines that any changes it considers must not deviate from its traditional doctrine as "*the Church of England has received it*". In the detailed papers given below it is shown that the contradiction between science and theology arises because of changes in a theology which is developed from the traditions of the Church. When science considers gender and variant behaviour to be driven by the search for identity, and the traditional doctrines of the Church instead determine that it is driven by the search for reward, no embargo which prevents full and open discussion of these matters should be tolerated. The harm which is being created through the medical misdiagnoses which occur because of the continued refusal to face up to these issues has already been described.

For research and background details see: Gilchrist, S. (2017): "*What does it mean to be Transgender?*" <http://www.tgdr.co.uk/documents/242P-TransgenderIdentities.pdf> . Gilchrist, S. (2017): "*A House Built on Sand? Attitudes to Gender and Sexual Variant Identities and Behaviour in Christianity and the Christian Church*": <http://www.tgdr.co.uk/documents/231P-HouseUponSand.pdf>

My own research on these matters is summarised in two statements: Gilchrist, S. (2017): "*Summary of my Neurophysiological and Scientific Research into the Development of Personality and Identity in Early Life*": <http://www.tgdr.co.uk/documents/240P-NeuroscienceSummary.pdf> and Gilchrist, S. (2017): "*Summary of my Research into the Attitudes to Gender and Sexually Variant Identities and Behaviour in the Christian Church*": <http://www.tgdr.co.uk/documents/240P-ResearchSummary.pdf> .

For other papers which support this research see: <http://www.tgdr.co.uk/documents/000B-SG-SelectedPapers.pdf> This document is online at: <http://www.tgdr.co.uk/documents/241P-CherishingTransgenderChildrenLeaflet.pdf>

An alternative version of this document is also online at: Gilchrist, S. (2017): "*Mistreating Transgender Children*": <http://www.tgdr.co.uk/documents/241P-MistreatingTransgenderChildrenLeaflet.pdf>