


***Sexual Identity  
Development and Healing***

**Andrew J. Sodergren, M.T.S., Psy.D.**  
Ruah Woods Psychological Services ([www.RWpsych.org](http://www.RWpsych.org))  
January 14, 2022

1

**Psychology of the Sexual  
Difference**

2




Richard A. Lippa  
**Gender, Nature, and Nurture**  
SECOND EDITION

**Why Gender Matters**  
SECOND EDITION  
WHAT PARENTS and TEACHERS NEED TO KNOW ABOUT the EMERGING SCIENCE of SEX DIFFERENCES  
Leonard Sax, M.D., Ph.D.  
New York Times bestselling author of THE COLLAPSE of PARENTHOOD

Sex Differences in Cognitive Abilities  
DIANE F. HALPERN  
Fourth Edition

3



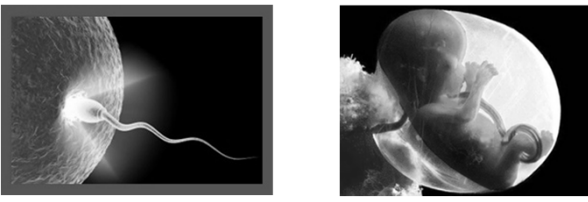
COLLOQUIUM SERIES ON THE DEVELOPING BRAIN  
**SEX AND THE DEVELOPING BRAIN**  
SECOND EDITION  
Margaret M. McCarthy, PhD  
MORGAN & CLAYPOOL PUBLISHERS

**GENDER and PARENTHOOD**  
Biological and Social Scientific Perspectives  
EDITED BY W. BRADFORD WILCOX AND KATHLEEN KOVNER KLINE

THE SURVIVAL of the SEXES  
**WARRIORS AND Worriers**  
JOYCE F. BENENSON  
with Henry Markovits

4

**Sexual Differentiation at the Beginning**



5

**Sexual Diff. at the Beginning (cont.)**

- ▶ Differences emerge in the womb
  - ▶ Rates of conception
  - ▶ Vulnerability
  - ▶ Responsiveness to environmental stimuli
  - ▶ Size and morphology
  - ▶ Brain development
  - ▶ Birth experiences

6

Contents lists available at ScienceDirect

**Developmental Cognitive Neuroscience**

ELSEVIER

journal homepage: [www.elsevier.com/locate/dcn](http://www.elsevier.com/locate/dcn)

**Sex differences in functional connectivity during fetal brain development**

M.D. Wheelock<sup>a</sup>, J.L. Hect<sup>b</sup>, E. Hernandez-Andrade<sup>d,e</sup>, S.S. Hassan<sup>d,e,f</sup>, R. Romero<sup>c,d,g,h,i</sup>, A.T. Eggebrecht<sup>h,i,\*</sup>, M.E. Thomason<sup>h,d,i,\*</sup>

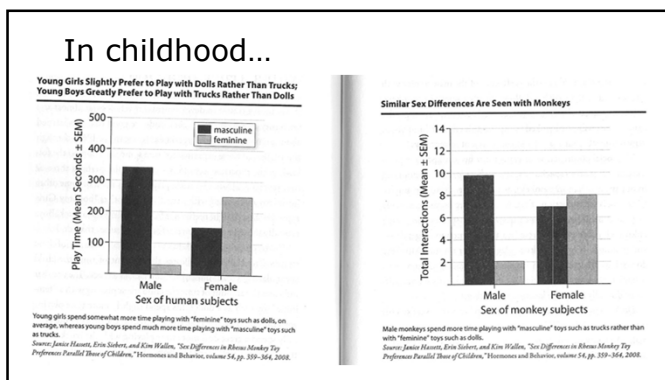
- fMRI study of 118 children in the womb (70 male, 48 female, 26-40 weeks)
- "These observations confirm that sexual dimorphism in functional brain systems emerges during human gestation."

7

**In childhood...**

- ▶ Differences in sensation begin to emerge
  - ▶ Olfaction
  - ▶ Hearing
  - ▶ Vision
- ▶ Infant girls prefer to look at faces than objects
- ▶ Toy preferences emerge...

8



9

**Sex Differences in Childhood...**

- ▶ Style of play
- ▶ Social behavior
- ▶ Temperament
- ▶ Moral development
- ▶ Developmental Disorders

10

**Nurture and "Gender Identity"**

- ▶ Family Influences
  - ▶ Parents expectations, hopes, fears, etc.
  - ▶ Parents treat boys and girls differently
  - ▶ Parents "teach" gender to children
  - ▶ Attachment
- ▶ Peer Influences
  - ▶ Importance of acceptance with same-sex peers

11

**Development of "Gender Identity"**

**Gender identity in childhood: A review of the literature**

International Journal of Behavioral Development  
2019, Vol. 43(4) 289-304  
© The Author(s) 2019  
Article reuse guidelines:  
[sagepub.com/journals-permissions](http://sagepub.com/journals-permissions)  
DOI: 10.1177/0165025418811129  
[journals.sagepub.com/home/jbd](http://journals.sagepub.com/home/jbd)

David G. Perry,<sup>1</sup> Rachel E. Pauletti,<sup>2</sup> and Patrick J. Cooper<sup>2</sup>

**SAGE**

- ▶ They highlight eight dimensions of "gender identity"

12

## Eight Dimensions of Gender Identity

- ▶ Gender self-categorization
  - ▶ Felt same-gender typicality
  - ▶ Felt other-gender typicality
  - ▶ Gender contentedness
  - ▶ Felt pressure for gender differentiation
  - ▶ Intergroup bias
  - ▶ Gender centrality
  - ▶ Gender frustration
- Perry et al, 2019

13

## Eight Dimensions of Gender Identity

- ▶ Gender self-categorization
  - ▶ Felt same-gender typicality
  - ▶ Felt other-gender typicality
  - ▶ Gender contentedness
  - ▶ Felt pressure for gender differentiation
  - ▶ Intergroup bias
  - ▶ Gender centrality
  - ▶ Gender frustration
- Perry et al, 2019

14

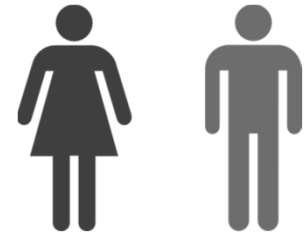
## In adolescence...

- ▶ Puberty
  - ▶ Sexual maturation of the body
  - ▶ Erotic attraction emerges based on feeling "different"
- ▶ Psychological tasks of adolescence
  - ▶ Identity, Community, Mission
- ▶ Differential mental health issues

15

## Sex Differences In Adulthood

- Body
- Brain
- Cognition
- Emotion
- Self-Image



16



Cerebral Cortex, August 2018;28: 2959-2975

doi: 10.1093/cercor/bhy109  
Advance Access Publication Date: 16 May 2018  
Original Article

ORIGINAL ARTICLE

### Sex Differences in the Adult Human Brain: Evidence from 5216 UK Biobank Participants

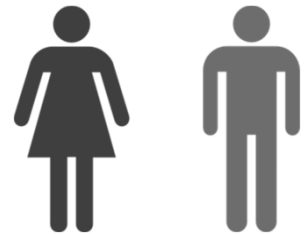
Stuart J. Ritchie<sup>1,2</sup>, Simon R. Cox<sup>1,2</sup>, Xueyi Shen<sup>3</sup>, Michael V. Lombardo<sup>4,5</sup>, Lianne M. Reus<sup>6</sup>, Clara Alloza<sup>3</sup>, Mathew A. Harris<sup>2,3</sup>, Helen L. Alderson<sup>7</sup>, Stuart Hunter<sup>8</sup>, Emma Neilson<sup>3</sup>, David C.M. Liewald<sup>1,2</sup>, Bonnie Auyeung<sup>1</sup>, Heather C. Whalley<sup>3</sup>, Stephen M. Lawrie<sup>3</sup>, Catharine R. Gale<sup>2,9</sup>, Mark E. Bastin<sup>2,10,11</sup>, Andrew M. McIntosh<sup>2,3</sup> and Ian J. Deary<sup>1,2</sup>

- Among various differences, results "showed stronger connectivity for males in unimodal sensorimotor cortices, and stronger connectivity for females in the default mode network."

17

## Sex Differences In Adulthood

- Interpersonal relations
- Occupational choice
- Morality
- Religiosity
- Sexuality



18

What is the essence & purpose of femaleness?

19

What is the essence & purpose of maleness?

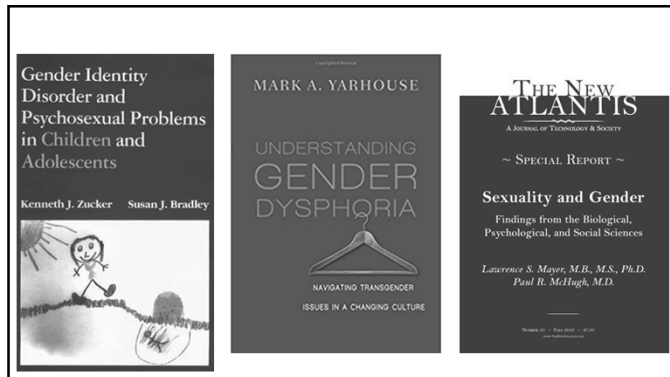
20

Image of God:  
Transcendent & Immanent

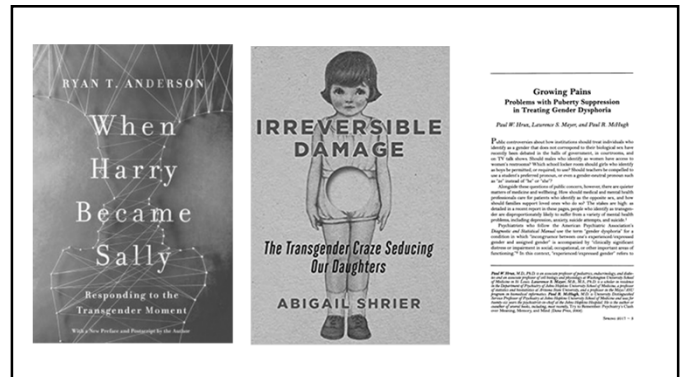
21

Understanding Gender Dysphoria

22



23



24

### What is Gender Dysphoria?

- ▶ The experience of “clinically significant distress or impairment” associated with the perceived incongruence between one’s psychological / emotional “gender identity” and one’s biological sex.
- ▶ Formerly known as “Gender Identity Disorder”
- ▶ With or without an underlying DSD (i.e., intersex condition)

25

### What is the experience of GD like?

- ▶ Preference for toys, games, activities, and types of play associated with other sex
- ▶ Rejection of typically masculine / feminine toys, games, activities, types of play
- ▶ Preference for cross-gender roles in make-believe
- ▶ Preference for playmates of other sex
- ▶ Preference for cross-dressing

26

### What is the experience of GD like?

- ▶ Belief one has typical qualities of other sex
- ▶ Desire to be treated as the other sex
- ▶ Desire to be other sex or insistence that one is
- ▶ Dislike of one’s sexual anatomy
- ▶ Desire to get rid of one’s primary / secondary sex characteristics
- ▶ **Essentially,**
  - ▶ **I am not at home with my body and sexuality**

27

### What is the experience of GD like?

- ▶ Subtypes
  - ▶ Early vs. Late Onset
  - ▶ Blanchard’s typology:
    - ▶ FtM
    - ▶ MtF
      - ▶ Androphilic
      - ▶ Autogynephilic

28

### What is the experience of GD like?

- ▶ Associated with tremendous psychological suffering (comorbidity)
  - ▶ Children: anxiety, depression, disruptive / impulsive behavior problems, autism spectrum disorder
  - ▶ Adolescents & Adults: anxiety, mood disorders, eating disorders, substance abuse, self-harm, and suicide

29

### What is the experience of GD like?

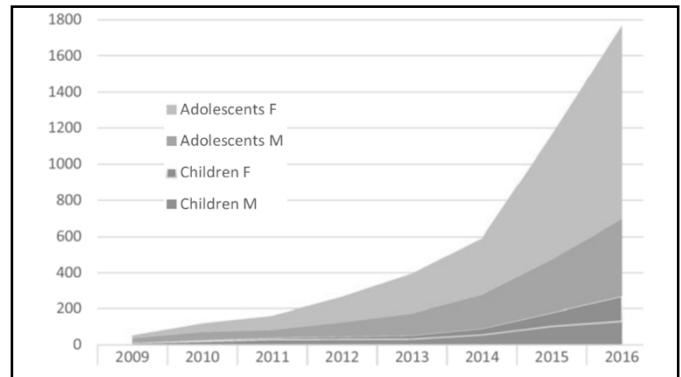
- ▶ Zucker (2019) offers three explanations for all the comorbidity:
  - ▶ “gender dysphoria has emerged as secondary to another, more ‘primary’ mental health diagnosis”
  - ▶ “gender dysphoria is inherently distressing”
  - ▶ social ostracism, rejection, minority stress, etc.

30

## How common is gender dysphoria?

- ▶ DSM-5:
  - ▶ .005 to .014% of adult males
  - ▶ .002 to .003% of adult females
  - ▶ Other research:
    - ▶ 1 in 10-13,000 males
    - ▶ 1 in 20-34,000 females
- ▶ If you let people self-select "transgender":
  - ▶ Rates are higher
  - ▶ Recent study of HS: 1-2% (Johns et al., 2019)
  - ▶ Historically, males are 3-5x more likely, but...

31



32

Kaltiala-Heino et al. *Child and Adolescent Psychiatry and Mental Health* (2015) 9:9  
DOI 10.1186/s13034-015-0042-y

CHILD & ADOLESCENT  
PSYCHIATRY & MENTAL HEALTH

RESEARCH Open Access

### Two years of gender identity service for minors: overrepresentation of natal girls with severe problems in adolescent development

Riittakerttu Kaltiala-Heino<sup>1,2\*</sup>, Maria Sumia<sup>2</sup>, Marja Työljälä<sup>2</sup> and Nina Lindberg<sup>3,4</sup>

- All cases referred to two specialty gender clinics in Finland between 2011-2013 (n=47)
- Surprising increase in adolescent females with a history of psychosocial problems

33

Citation: Littman L (2018) Rapid-onset gender dysphoria in adolescents and young adults: A study of parental reports. *PLoS ONE* 13(8): e0202330. <https://doi.org/10.1371/journal.pone.0202330>

PLOS ONE  
RESEARCH ARTICLE

### Rapid-onset gender dysphoria in adolescents and young adults: A study of parental reports

Lisa Littman\*

Department of Behavioral and Social Sciences, Brown University School of Public Health, Providence, Rhode Island, United States of America

- Surveyed 256 parents of ROGD young people
- Identified cluster outbreaks and possibility of social contagion

34

## How persistent is gender dysphoria?

- ▶ The majority of early onset cases remit before adulthood.
  - ▶ DSM:
    - ▶ 2-30% of GD males persist
    - ▶ 12-50% of GD females persist
  - ▶ WPATH: 6-27% of GD children persist to adulthood
- ▶ If GD lasts through puberty or is late-onset, it tends to be more persistent
- ▶ If transitioning and/or puberty suppression occurs, then persistence goes WAY up

35

## What causes gender dysphoria?

- ▶ Biology
  - ▶ Genes?
  - ▶ Hormones?
  - ▶ Brain structures?

36

## What causes gender dysphoria?

- ▶ Psychosocial factors (e.g., Zucker & Bradley, 1991)
  - ▶ Parental psychopathology
  - ▶ Family dynamics
  - ▶ Adverse childhood experiences
  - ▶ Peer issues
  - ▶ Cultural / social pressures

37

## What causes gender dysphoria?


"Psychosocial factors also have a role to play in the etiology of gender-variant identities. There is evidence that poor or absent parental relationship, childhood abuse, and parental encouragement of gender-variance are more common amongst gender-variant populations" (Veale et al., 2010, p. 364).

38

## What about Attachment?

- Recall Perry et al.'s Dimensions of Gender Identity
  - At least three of those dimensions are scientifically linked with childhood attachment experiences:
    - Felt same-gender typicality
    - Gender contentedness
    - Felt pressure for gender differentiation
  - These play a major role in whether someone will come to acceptance of their bodily sex

39

 **frontiers**  
in Psychology

ORIGINAL RESEARCH  
published: 01 February 2018  
doi: 10.3389/fpsyg.2018.00060

### Attachment Patterns and Complex Trauma in a Sample of Adults Diagnosed with Gender Dysphoria

Guido Giovanardi<sup>1\*</sup>, Roberto Vitelli<sup>2</sup>, Carola Maggiora Vergano<sup>1</sup>, Alexandro Fortunato<sup>1</sup>, Luca Chianura<sup>3</sup>, Vittorio Lingiardi<sup>1</sup> and Anna Maria Speranza<sup>1</sup>

- 95 Gender Dysphoric adults
- 123 non-GD adults in a control group
- Adult Attachment Interview
- Complex Trauma Questionnaire

40

## What about Attachment?

- Giovanardi et al. (2018): Attachment results

	Gender Dysphoria	Control Group
Secure	<b>27%</b>	<b>61%</b>
Insecure	<b>73%</b>	<b>39%</b>
Disorganized	<b>46%</b>	<b>13%</b>

41

## What about Attachment?

- Giovanardi et al. (2018)
  - Complex Trauma results
    - Four or more developmental traumas?
      - Control group = 7%
      - Gender dysphoria group = **56%**
    - Gender dysphoric group scored similarly to a clinical reference group consisting of patients with dissociative and/or personality disorders

42

## Treatment Options

43

## Catholic Moral Principles

- Persons confused about sexual identity must be accepted with respect, compassion, and sensitivity
- We must honor and respect our bodies

44

## Vatican II: Gaudium et spes, no. 14

- Though made of body and soul, man is one. Through his bodily composition he gathers to himself the elements of the material world; thus they reach their crown through him, and through him raise their voice in free praise of the Creator. For this reason man is not allowed to despise his bodily life, rather he is obliged to regard his body as good and honorable since God has created it and will raise it up on the last day.

45

## Catholic Moral Principles

- Persons confused about sexual identity must be accepted with respect, compassion, and sensitivity
- We must honor and respect our bodies
- All are called to acknowledge and accept the sexual identity revealed by the body

46

## Catechism of the Catholic Church

- "Sexuality affects all aspects of the human person in the unity of his body and soul..."
- "Everyone, man and woman, should acknowledge and accept his sexual identity..."

Nos. 2332-2333

47

## Catholic Moral Principles

- Persons confused about sexual identity must be accepted with respect, compassion, and sensitivity
- We must honor and respect our bodies
- All are called to acknowledge and accept the sexual identity revealed by the body
- Publically simulating the other sex is dishonest / deceptive and potentially scandalous
- While medicine can be used to treat physical illness, it must never be used to poison or mutilate a healthy body system

48



### Catholic Moral Principles (cont.)

- Intersex conditions (DSDs): we should favor the least invasive approach possible that resolves the difficulty in line with the dominant sex expressed in the person's reproductive anatomy, if possible
- In cases of gender dysphoria without an underlying DSD, we should seek treatments to help the person accept the natural sexual identity revealed by the body

49

### Catholic Moral Principles (cont.)

- What about the name issue?
  - **2158** God calls each one by name. Everyone's name is sacred. The name is the icon of the person. It demands respect as a sign of the dignity of the one who bears it.
  - **2159** The name one receives is a name for eternity...

50

### Morally Acceptable Tx Options

- For Children:
  - Psychosocial Tx to promote acceptance of sex revealed by the body
    - Examples:
      - Zucker (2008); Zucker et al. (2012)
      - Meyer-Bahlburg (2002)
  - Watchful Waiting
    - Remember, about 85% of cases desist on their own

51

### Morally Acceptable Tx Options

- For Adolescents and Adults:
  - Tx to resolve GD in line with birth sex
  - Tx for comorbidities, underlying factors
  - Tx without fixed endpoint
    - Exploratory work regarding identity, body image, family relations, sexuality, etc.

52

### Morally Acceptable Tx Options

- For Adolescents and Adults:
  - Zucker (2019):
    - "One could consider recommending exploratory psychosocial treatment without social transition and hormonal suppression, particularly if the case formulation is that the gender dysphoria has emerged in the context of other psychosocial factors or as a result of other mental health issues."

53

### Morally Acceptable Tx Options

- For Adolescents and Adults:
  - D'Angelo et al (2020):
    - "We believe that exploratory psychotherapy that is neither 'affirmation' nor 'conversion' should be the first-line treatment for all young people with GD, potentially reducing the need for invasive and irreversible medical procedures. This is especially critical now, when we are witnessing an exponential rise in the incidence of young people with GD who have diverse and complex mental health presentations and require careful assessment and treatment planning."

54

## Morally Problematic Tx Options

- The Affirmative Approach (the "Dutch Protocol")
  - Social Transitioning
  - Puberty Suppression
  - Cross-sex Hormones
  - Plastic Surgery
- Studies show that most people report subjective satisfaction in the short-term, but...

**Growing Pains  
Problems with Puberty Suppression  
in Treating Gender Dysphoria**

*Paul W. Hruz, Lawrence S. Mayer, and Paul R. McHugh*

*New Atlantis, 52: 3-36.*

55

OPEN ACCESS Freely available online

PLOS one

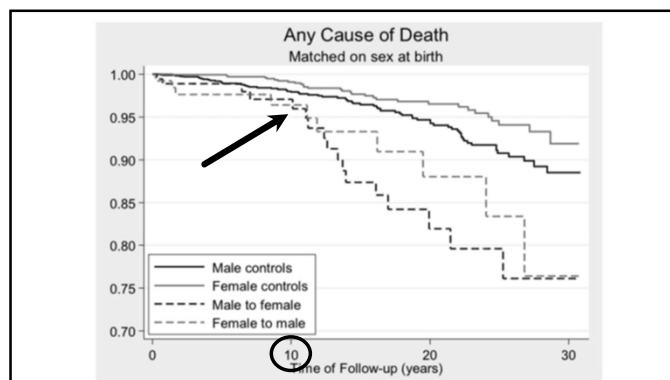
## Long-Term Follow-Up of Transsexual Persons Undergoing Sex Reassignment Surgery: Cohort Study in Sweden

Cecilia Dhejne<sup>1</sup>, Paul Lichtenstein<sup>2</sup>, Marcus Boman<sup>2</sup>, Anna L. V. Johansson<sup>2</sup>, Niklas Långström<sup>2,3</sup>, Mikael Landén<sup>1,2,4\*</sup>

<sup>1</sup> Department of Clinical Neuroscience, Division of Psychiatry, Karolinska Institutet, Stockholm, Sweden, <sup>2</sup> Department of Medical Epidemiology and Biostatistics, Karolinska Institutet, Stockholm, Sweden, <sup>3</sup> Centre for Violence Prevention, Karolinska Institutet, Stockholm, Sweden, <sup>4</sup> Institute of Neuroscience and Physiology, The Sahlgrenska Academy at Gothenburg University, Gothenburg, Sweden

- N=324
- 3x higher psych hospitalization
- 19.1x higher rate of suicide

56



57



➤ Walt Heyer

➤ <http://WaltHeyer.com> & [www.sexchangeregret.com](http://www.sexchangeregret.com)

58

## Tx Options dwindling...

- Pressure to ban Tx to bring noncongruent "gender identity" back in line with birth sex.
- WPATH: "Treatment aimed at trying to change a person's gender identity and expression to become more congruent with sex assigned at birth... is no longer considered ethical."
- At least, 20 states and 99 municipalities have passed legal bans for Tx with minors aimed at aligning with birth sex

59

## Minnesota Conversion Therapy Bans

- At least these municipalities currently have "Conversion Therapy" bans:
  - Bloomington
  - Duluth
  - Minneapolis
  - Red Wing
  - Robbinsdale
  - St. Paul
  - West St. Paul
  - Winona

60

## Duluth's Conversion Therapy Ban

- **34-43: "Prohibition of Conversion Therapy"**
  - Bans provision of "conversion therapy" with minors and threatens monetary fines
  - "Conversion therapy is an ineffective and unsafe practice based on the discredited premise that a person's gender identity or sexual orientation is a mental disorder that can be cured or corrected."
  - "Conversion therapy means any practice or treatment by a provider that seeks to change an individual's sexual orientation or gender identity..."

61

## Duluth's Conversion Therapy Ban (cont.)

- **34-43: "Prohibition of Conversion Therapy"**
  - This does NOT include "counseling that provides support and assistance to a person undergoing gender transition, or counseling that provides acceptance, support and understanding of a person or facilitates a person's coping, social support, identity exploration, development, including sexual orientation and gender identity, and neutral interventions to prevent or address unlawful conduct or unsafe sexual practices if such counseling is not conducted with the goal of changing the person's sexual orientation or gender identity."

62

## Minnesota Conversion Therapy Bans (cont.)

- Gov. Walz Exec. Order 21-25 "Protecting Minnesotans from 'Conversion Therapy'"
  - Not a law, but a rule applying to state agencies
  - Limiting ability of providers to get reimbursement for "conversion therapy"
  - Encourages licensing boards to enact bans on conversion therapy
  - A sign of things to come?

63

## Pastoral Response

64

## General Pastoral Principles

- Joyfully announce the Gospel
- Always affirm the dignity of the person
- Welcome and accept people as they are
- Be careful with language / terminology
  - Better to say "people who experience gender dysphoria" rather than trans person, etc.

65

## General Pastoral Principles

- Speak the truth in love:
  - "departure from the Church's teaching, or silence about it, in an effort to provide pastoral care is neither caring nor pastoral. Only what is true can ultimately be pastoral." (CDF, 1986, no. 15).
  - Uphold the truth of being created male and female and called to love
    - Men are called and equipped to love as fathers
    - Women are called and equipped to love as mothers

66

## General Pastoral Principles

- Ministers must:
  - Teach and model the truth regarding the nature of the human person, male and female
    - Theology of the Body
  - Live our own vocations as men and women, fathers and mothers faithfully and joyfully
  - Encourage others to accept the sexual identity revealed in their body as a gift and a call from God

67

## General Pastoral Principles

- Ministers must not:
  - Teach, promote, or encourage an understanding of the human person contrary to the teachings of the Catholic Church
  - Advocate or celebrate relationships or conduct, including transgender attitudes, that conflict with Catholic teaching
  - Participate in or promote the denial of students' biological sex or transitioning to different sex

68

## General Pastoral Principles

- Ministers must not:
  - Sponsor, facilitate or host organizations, events or activities that would promote views of gender that conflict with Catholic teaching, either on or off campus, or through social media
  - Put vulnerable youth in harms way by exposing them to gender ideology, cross-dressing or scandalous behavior, or by allowing access to opposite sex bathrooms / locker rooms
  - Shame youth for having gender dysphoria

69

## When a Youth says he/she is trans...

- Don't Panic!
  - Remember, with God all things are possible
  - He has a plan for this child of His
  - There is no wound that He can't heal, no sin that He can't forgive.
  - It is not your job to "fix" it
  - Seek consultation: Pastor, other youth ministers, Archdiocese

70

## When a Youth says he/she is trans...

- Take the "Long View"
  - Some wounds take a lifetime to heal and some take more.
  - A lot can happen in life and God can bring good out of any circumstances.
  - His love and mercy are more powerful than our mistakes
  - Entrust this person to God

71

## When a Youth says he/she is trans...

- Show Them the Love of Christ
  - Spend time with them building a relationship
  - Show them that you care
  - Affirm the goodness of the person and their desire for love, happiness
  - Help them encounter God with you
  - Pray with them and for them

72

### When a Youth says he/she is trans...

- Listen, listen, listen
  - These kids have a story to tell and they need caring adults to listen
- Show genuine interest in their experiences, their feelings, their desires / hopes / fears
- Show empathy
  - Imagine what their experiences have been like
  - Reflect back to them the key elements

73

### When a Youth says he/she is trans...

- If rapport is good, ask open-ended questions to invite deeper exploration
  - If possible, help them connect the dots in their story
  - Help them give words to their experiences and see the connections between them
  - Listen for other signs of psychological distress and even suicidality

74

### When a Youth says he/she is trans...

- Affirm young person's identity as child of God
  - Ensure all children treated with compassion, sensitivity and respect
  - Distinguish between those who are struggling with it and those who "present" it publicly as an identity, expecting to be recognized and accommodated

75

### When a Youth says he/she is trans...

- Gently teach when there is an opening
  - God creates male or female and provides a plan for life, a calling to love as a man or woman
  - The body reveals the person
  - His body and sexuality are integral to his identity and vocation
  - Help him re-evaluate his assumptions in light of this

76

### When a Youth says he/she is trans...

- Gently teach when there is an opening
  - Help them to see that the person is more than his experiences
  - Culture: you feel trans → therefore you are trans
  - Church: the body reveals who you are even if you feel different → I am a man who experiences dysphoria / distress / confusion about my sexual identity

77

### When a Youth says he/she is trans...

- Gently teach when there is an opening
  - Lovingly try to dissuade them from actions that ultimately will not contribute to their own good and may cause long-term harm
  - Help them, support them in making good choices in accord to their true, authentic good

78

### When a Youth says he/she is trans...

- Explore and expand their understanding of male and female
  - Breakdown stereotypes while also validating how they may have come to their views
- Help them find same-sex role models to look up to
- Help them make friendships with healthy same-sex peers
  - Opportunities and activities where they can experience acceptance and belonging

79

### When a Youth says he/she is trans...

- Work with parents to understand the situation, clarify what best serves the true good of the youth and the good of the group / school, etc.
  - Try to build alliance around pursuing these goods
    - Goal: acceptance of one's body and the sexuality it reveals
  - Make **good** referrals (see resource sheet)
    - Pastor, psychologist, medical doctor, support groups, books, websites

80

### When a Youth says he/she is trans...

- If they want you to use a different name, seek a reasonable compromise that doesn't go too far
- Set clear boundaries around gender-bending behavior.
  - Patiently, help them to see the difference between loving the person and approving one's actions

81

### When a Youth says he/she is trans...

- If student and/or family insists on publically embracing a "trans" identity and/or allowing transitioning...
  - There is not an alignment of goals, values
  - Out of love for them and for others who would be impacted, we may need to refuse participation

82

### Cautions

- Don't say or do anything that allows them to justify the idea that God or the Church hates / rejects them
- Don't lecture them
- Don't invalidate their experience
- Don't stereotype them
- Don't get into arguments about causes
- Don't bog them down with overly technical theological or moral language
- Don't implicitly or explicitly endorse things that are not in accord with the true good of the person

83

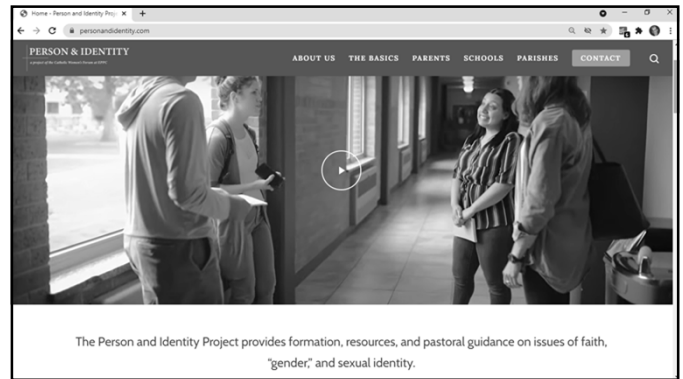
### ***Discussion***

84

## Resources

- See the resource sheet for an extensive list of websites, documents, books, support groups and more.
- In particular...

85



86

One more resource....

### **ROOTED: Theology of the Body K-12 Curriculum**

Age-appropriate teaching inspired by  
the masterwork of  
Pope St. John Paul II.

**RuahWoods**

[www.RuahWoodsPress.com](http://www.RuahWoodsPress.com)

87