

Stop Switching: Transphobia and Pastoral Counseling Approaches for Families Struggling with Transgenderism

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Abstract This essay surveys contemporary studies, scholarship and burgeoning communities of transgender individuals which challenge traditional notions of gender and gender identity based solely on genitalia. Transgender individuals challenge social conventions based on genitalia and the limit of sexual expression as only being legitimate between cisgendered (gender identity that fits the sex/genitalia assigned at birth) female and male persons. Moreover, this work explores the following two areas: 1) recent ideological cultural shifts regarding transgender issues and the impact that such changes have had upon transgender individuals and their families and religious communities; 2) the need for pastoral counselors to commit themselves to the study of human sexuality, the social sciences (Susanna Cornwall's work will be offered as a useful resource), and pastoral theology in order to assist individuals and families struggling with Christian faith and transgender issues.

Keywords Transgender, Gender, Sexuality, Pastoral Counseling

Social scripts and gender identity

"*Stop Switching!*," Al's mother, Mrs. W., chided to him as he walked down a Chicago street oblivious to the socially prescribed male walk. Although she only spoke two words to her pre-teen son, her admonishment revealed much about her cultural understanding of gender-

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appropriate comportment for a male child. A few years ago, Al shared with me his memory of his mother's hostile reaction to his gait, identified by the larger culture as a "swish," a socially disapproved effeminate walk for males. Mrs. W., an African American mother who embraced the larger society's and black culture's strict gender roles, hypermasculinity and homophobia, felt such "inappropriate" behavior warranted a sharp rebuke.

This story is a familiar one. It reminded me of a similar reprimand that I received as a gay, black son for my less than masculine walk. After listening to Al, also a gay black male, I reflected on his mother's use of the black idiom "switching," which differs slightly from the larger culture's term, "swishing." It occurred to me that the black term revealed a much deeper meaning, and I assert a more accurate one, that angered and terrified Mrs. W. She, like most parents, opposed Al's walk because it did not embody the prescribed male norm for walking. In other words, Al was "switching" the social scripts for male and female walking. "Switching" carries a double meaning here—a walk like a girl (swishing) and changing or switching from a socialized male walk to a female one. It is also a story about the ways in which individuals perceive appropriate behavior based on gender.

Most parents and adults, like Mrs. W., unconsciously internalize social scripts and become enforcers of traditional female/male behavior. Adults generally understand that norms such as being polite, respectful, and fair are products of socialization. They often feel, however, that interests, desires and behaviors such as walking, talking, or the desire to play with guns as innate qualities based on genitalia. Likewise, most still view heterosexuality as innate, while asserting that homosexuality is a learned behavior. In recent discussions, this view has been noted as a glaring inconsistency about sexual desire, underscoring the heterosexual majority's

claim that they are unable to learn same gender sexual attraction or desire while, at the same time, insisting homosexuality as choice.

When parents see their child exhibiting “unnatural” qualities for her or his gender, they get alarmed that something is wrong with their child’s development. And according to the rigid cultural markers that define boys and girls, there *is* something wrong. Even the most progressive-minded parents may be troubled by a son who wants a Barbie Dreamhouse or, to a lesser extent, a daughter insisting on playing with toy trucks. Parents, products of a sexist, gender restrictive and transphobic culture, likely heard in their childhood the nursery rhyme identifying boys as made of “snips and snails and puppy dog tails” and girls made of “sugar and spice and everything nice.” Thus, the normative script for girls is sugar, spice and Barbie while boys must fit the rough dog nature compatible with rugged trucks.

Parents, with varying degrees of energy, spend time fitting their children into these puppy dog tails and sugar and spice gender categories so that their children emerge with female and male behaviors “appropriate” for their genitalia. According to those subscribing to gender restrictive behavior, humans with penises are males who should want trucks, guns and rough and tumble sports while humans with vaginas are girls who should want dolls, doll houses and Easy-Bake ovens. To be sure, there are hormonal differences that affect certain reactions. A good example is testosterone in males, which heightens sex drives and lowers voice pitch, but such biological elements must not be viewed as determinative for all or even most behaviors.

From the time an infant comes home from the hospital until she or he leaves for college, family members, neighbors, day care providers, teachers and peers are active in shaping, coaxing, creating, and even coercing behaviors and interests that fit the child’s nominal gender identity (Tanis, 2003, p.2). The child’s own interests are endorsed only to the extent that they

coincide with the culture's definition of appropriate behavior. Though Al's manner of walking caused no one harm – if Mrs. W. had a daughter walking in the same manner, she would have approved – Mrs. W.'s sharp disapproval communicated to Al that he had done a bad thing. When Al discovered that his “switching” caused a problem for his mother, he, like most males, began fitting in by more closely observing and imitating the walks of older males. In today's culture, transgender individuals present the greatest challenge to gender norms and find themselves at odds with society's conflation of genitalia, gender identity, and “gender-appropriate” behavior. They – by their very being – are a challenge, a perpetual defiance of this social mandate. This essay examines some of the pressing issues confronting transgender individuals, the social and religious fears and biases that diminish their personhood, and the pastoral care and counseling needed for their family members and themselves. I write as an openly gay, middle class, African American cis gendered male Episcopal priest, professor, pastoral counselor and pastoral theologian. And while I do not experience life as a transgender person, my experience as a racial and sexual minority allows me a window into a world that understands gender much too simplistically and monolithically.

A transgender narrative

In our current cultural climate, trans individuals are “coming out” in record numbers. Like the coming out of lesbians and gays decades ago, this coming out holds great potential for moving non-transgender individuals beyond our fears and prejudice to a place of appreciation for the gifts that trans people offer all of us within our social and faith communities. Anton Boisen (1960) claimed almost a century ago that our “living human documents” allow us deeper meaning about the human condition. He understood individual's and groups' experiences as a document. As paper documents inform and educate us about matters, Boisen asserted that when Sacred Spaces: The E-Journal of the American Association of Pastoral Counselors, 2016, vol.8

we study and observe human lives, they offer us greater meaning about the diversity of human experience. A generation later, Charles Gerkin applied Boisen's theory about human narrative. In his pastoral counseling work, Gerkin "developed out of that insight a sophisticated new understanding of pastoral counseling as a retelling of the human story in ways that expand social horizons and liberate persons from oppressive forms of consciousness and destructive patterns of interpersonal relationships" (Couture & Hunter, 1995, p.9).

As heterosexual pastoral theologian, Larry Kent Graham (1997), used narrative pastoral theology in his telling of lesbian and gay narratives (*Discovering Images of God: Narratives of Care Among Lesbians and Gays*), I also focus my scholarship in this vein so that pastoral counselors may achieve greater understanding of LGBT narratives. This understanding holds the potential both for fostering health and wholeness for LGBT persons within their identities and for moving heterosexual and cisgender people toward full acceptance of LGBT people. In the past couple of decades, these living human documents of gays have allowed heterosexuals a greater appreciation for viewing lesbians and gays as fellow human beings sharing in the larger human story with themselves.

This writing offers a transgender narrative whereby we may learn about a population long misunderstood. It brings us closer to the particular pain transgender individuals encounter from those in their families, society and religious institutions. Like all bigotry and prejudice, hostile reactions to trans people are based in fear and a dogma that define them as ill and depraved. Many transgender narratives reveal pain and suffering encountered in a world apart from the cisgendered world most of us inhabit. Their narratives tell us about their weaknesses and strengths, hopes and insecurities. Their story also reveals power, the power to inform, to heal and to transform. For non-trans people willing to recognize trans people as equal human beings, there is

great potential for moving beyond transphobia (the fear and/or disgust toward transgender persons). In my own evolution to be in community with trans individuals as equals, I have witnessed the power of hearing a sermon preached by a trans male priest at the National Cathedral and a trans woman affirmed through an ordination process. Still – given the current social and religious prejudice encountered by trans persons – they have understandable fears and doubts about true acceptance, success, and safety for their lives. In addition, many trans individuals friends, families and co-workers have those same fears. In such a climate, pastoral counselors and pastoral leaders can model greater compassion, support, and acceptance for trans people.

Transgender identity

Anthropologists and historians note that individuals have long identified with the other gender and, in some cases, both genders. Throughout time, space and culture, trans people have existed, often suffering in silence their disconnect between body and self-concept (Tanis, 2003, p.27).

Cultures have responded to gender variance in various ways, with some cultures praising those exhibiting opposite-sex dressing and attributes as sacred individuals, while other cultures, such as the US, have a history of condemnation and murder of this embodied difference. Highly gender-restrictive readings of the Biblical text by religious bodies in the US and elsewhere are often used to justify opposition to gender variance.

Still other cultures, such as the Coptic Amhara peasants of Ethiopia perceive individuals with “alternative gender identities as...god’s mistakes” but exercise tolerance and accept them into the community (Murray & Roscoe, 1998, p.22). Despite this exceptional response, cultural leaders using religious language for trans individuals as “God’s mistake,” create shame for trans people and reinforce fear and negative attitudes about them in their families and communities. In Sacred Spaces: The E-Journal of the American Association of Pastoral Counselors, 2016, vol.8

this climate, trans people “may suppress [their] feelings in order to obey what [they] believe is God’s will or to keep peace within [their] families” (Tanis, 2003, p.25).

Although it is often assumed that a transgender person is simply a butch lesbian or an effeminate gay man, such a conclusion is inaccurate. In a rigid US culture that narrowly defines what it means to be female and male, lesbians and gays have often pushed the boundaries of what it means to be female and male while, at the same time, strongly identifying with and enjoying their female and male gender identity. Such gender non-conformity has also allowed heterosexuals, uninterested in traditional male and female roles, to choose careers that they find fulfilling for themselves, e.g., women in military and men in the Arts. When considering transgender issues, it is important to distinguish gender identity from sexual attraction.

Transgender is the “T” in LGBT. Transgender or trans is a term with broad meaning, but is commonly defined as “people who are knowingly crossing gender lines...and who transgress the...understood definitions of gender all or part of the time” (Tanis, p.19). Transsexuals, although often equated with transgender people, can be understood as a subset of the transgender category. Transsexuals “experience a desire to change [their]...bodies to appear differently than the sex that was assigned...at birth and generally access, or desire to access medical technology in order to accomplish this” (p.19). The terms for such transitions are male to female (M to F) and female to male (F to M). Transgender individuals may or may not change their genitalia through medical means.

In a culture of gender conformity, females and males experience restrictions based on gender, with a significant number resisting these strictures. Often this reality, which is problematic for gays and lesbians, can be traumatic for trans persons. Studies show that a large number of lesbians and gays participate in gender non-conformity and, despite the large number

of heterosexual males and females complying with the gender roles prescribed for them, there are parts of these roles heterosexuals also perform without happiness (see Fortune, 1995). No group has suffered more in this regard, however, than trans people. They do not see themselves as the world sees them. Trans people, of all sexual orientations, identify with and perceive themselves emotionally, mentally and physically as the opposite gender (Tanis, 2003, p.20).

It is only in recent decades that there has been a more enlightened social response to trans people, largely as a result of the historical and current Civil Rights Movement and the increased visibility of trans activists. Prior to this time, transgender people remained on society's margins largely because of clinical definitions in the Diagnostic Statistic Manual (American Psychological Association's official rating of psychological disorders) that labeled them as having one of several gender identity disorders such as Gender Confusion or Gender Dysphoria. The social scientific world is reassessing these early diagnostic approaches, which defined this population as having psychological disorders needing therapeutic treatment.

Historically, such individuals were placed in the larger category of cross dressers without distinguishing their various sexual identities, such as the early twentieth century lesbian/queer or possibly trans blues singer, Gladys Bentley, who openly transgressed social conventions by almost exclusively wearing male attire. This current study allows for a reexamination of those categorized simply as lesbian, gay or bisexual because of a lack of information about transgenderism. The insistence to dress differently may indeed be more than gender non-conformity and may point to a yearning for a different gender identity, as trans people document in their writings.

In my early years as a pastoral counselor, "Sarah," a mother of a four-year old son, "Karl," visited me distraught over her son's strong desire to wear dresses. The four-year-old

found happiness when allowed to wear a dress, expressing that he liked the way it spins. In a sexist and homophobic culture that holds greater disdain for males in female attire (tomboys, females wearing pants, female restaurant staff in shirt and tie, and so on have all found greater social acceptance than males donning dresses), the parents argued with their son and each other over Karl's wearing dresses, eventually reaching a crisis point that prompted Sarah's office visit.

After a couple of sessions, the mother revealed to me her greatest fears: ridicule of her son and her own discomfort that her son was not normal, perhaps ill. The couple's Christian conservatism created the greatest discomfort for them. Sarah and her husband feared that their son would become gay if they did not put a stop to his dress obsession. She shared with me that they had begun taking him to a counselor to straighten him out.

I listened intently, acknowledging her fears as understandable in a society hostile to boys wearing dresses. I explained that the most common bullying comes from boys toward other boys who act like girls and that such sexist, homophobic and transphobic bullying is learned from families, churches and the broader society. I celebrated Karl, whose dress-wearing caused no one harm and only existed as a problem because of a gender restrictive culture. Despite my efforts in offering another perspective, it became clear that Sarah also believed her son had a problem. She, like Mrs. W., wanted her son to "stop switching" and act like other boys.

As I later reflected more closely on this case regarding Karl's rebellion at being forced into pants, it occurred to me that he was more likely transgender. His contentment with dressing reminded me of my study of transgenderism and conversations that I have with trans people. This case raises a number of questions for us to consider about social scripts, gender roles and gender identity. Given the growing visibility of trans folks and gender non-conformists among family members, friends, colleagues and fellow congregants, how are we as pastoral counselors

being called to address transphobia? How have church leaders been responsible for the current struggles of transgender individuals and their families? How are we being called to offer pastoral care and compassion for trans people and family members struggling with acceptance?

Object relations theory and pastoral care for transgender individuals and their families

As trans people become more visible within families, the Church and other faith communities, the coming out process, like that for all marginalized groups, has many challenges and costs that demand responses from pastors and counselors committed to the care of souls. As with lesbians and gays, who are in a constant coming out process from society's assumptions, trans people live in a world replete with gender signifiers such as clothing, hairstyles, speech, etc. Here, assumptions are made about gender based on how one presents to the world. Trans individuals find it essential that their gender representations reflect their gender identity by adopting the signifiers of the opposite gender.

Trans people live with a gender that has been imposed upon them by others without ever feeling connected with that imposed gender. We can all imagine what life would be like if we were required to wear ill-fitting clothes every day. We would spend each day pulling and adjusting our clothes, while at the same time feeling uncomfortable, embarrassed and unhappy. A transgender F to M (female to male) student shared with me that his mother, after having had only two boys, waited years for a girl. After his birth with female genitalia, his mother and family members celebrated the long-awaited girl. Like other trans individuals, this student never felt that he was his parents' daughter, always removing the barrettes from his hair placed there by his mother after leaving for school. The student eventually began the arduous journey of

becoming a trans male. His claim of male gender identity along with surgery created many battles within his family for a long time.

A particularly difficult issue for families and pastoral counselors is the notion that trans individuals are overturning God's intention for them. Many painful arguments occur within families because family members feel that their transgender relative is experiencing identity confusion while the trans person declares that she or he never felt whole or connected with her or his imposed gender; they are simply connecting with the gender that provides mental, spiritual, emotional and often physical wholeness. Key pastoral counseling issues include helping family members with the above faith issue and providing a space for trans people and their families to express their emotions of anger, fear, disappointment and sadness. When trans individuals muster the courage to be connected with their true selves, family members often express fears about what will come with their family member's new gender identity. This process typically taps into the family members' feelings of confusion, anger, and sadness. There is sadness from saying good bye to the family member they thought they knew and all the dreams and hopes assigned to that person. "What do I do with the baby pictures?" one mother of a M to F (male to female) asked me as she grieved the loss of her son.

Since her question, over two decades ago, I have often thought about parents' assumptions about their sons and daughters and the understandable difficulty of dealing with transgender children in our gender-focused and gender-restrictive culture. The first question that gets asked about a newborn – even before the more important question about the infant's health – is, "girl or boy?" Medical technology now allows for parents, families and friends to know the answer to that culturally important question before birth. Parents then begin planning along gender lines, everything from the child's name to the clothes and color of the room. All such

responses to the baby's sex as female or male are based on genitalia. Most parents (and others) do not think about the significant number of cases, approximately one percent of births in the North America, with unclear genitalia or both genitals (Dreger, 1998). In *Sex and Uncertainty in the Body of Christ: Intersex Conditions and Christian Theology*, British theologian and scholar Susannah Cornwall (2010) sheds light on the rarely discussed topic of intersex – infants born with both genitals or indistinguishable genitalia. When such situations occur, more commonly than we think, doctors and family members agree on a gender to be assigned to the newborn, and then a surgeon carries out sex assignment surgery, aligning the sex and gender of the infant. These cases remind us that our bodies and our perceptions of gender identity are “more complex than a simple gender binary where every individual is solely and unambiguously male or female” (p.2).

Intersex is commonly thought to be a medical condition where the individual possesses both female and male genitalia or ambiguous genitalia “rather than one which inevitably affects sex-gender identity” (p.9). I include this reference to intersex, not as a means of explaining trans individuals, but simply as an example of nature's or God's creation of unclear gender identities, despite the claim to the contrary made by many, especially those in religious settings. Both intersex and trans people disturb us because they reflect the arbitrary nature of our gender claims, providing further evidence that the categories of “men” and “women” are arbitrarily and socially constructed rather than products of a natural and self-evident mold. And though trans people are usually born with unambiguous genitalia, Cornwall's scholarship informs us that God's creative intentions for who we are to be are not always nice and neat, clearly defined markings upon our bodies. When considering intersex or the more controversial terminology, Disorder of Sex Development (DSD), it becomes harder and harder to make the claim that God is clear, at least in

terms of genitalia, for our sex and gender as male or female. In the case of “genitally-ambiguous newborns,” doctors conduct chromosomal and hormonal tests to “determine” the sex of the child, “advis[ing] parents to sidestep questions about the baby’s sex from friends and relatives until” the gender has been established (p.3). The process of sex assignment surgery is further evidence that gender is more fluid and dynamic than static. As pastoral counselors engage more trans individuals and their family members along these lines, this knowledge is helpful for both parties rethinking transgender issues. Such information helps families and communities develop a more complete understanding of the rich and complex nature of our bodies, sex and gender identity. This reality also allows a fresh hearing for gender theorists who have long opposed a hard line about how we present ourselves to the world.

The eminent Berkeley gender theorist, Judith Butler (1990), asserts that the way individuals present to the world is a function of the gendered scripts that are given by society and enforced by family. She claims that behavior, the way that females and males walk, sit, and speak, is performative rather than driven and determined by genitalia and hormones. Behavior is a “phenomenon that is being produced or reproduced all the time” (p.5). What Butler raises here is the socially constructed nature of behavior. When individuals exhibit behavior unacceptable for their gender, as in Al’s case, these individuals, regardless of sexual orientation, become the object of ridicule, scorn and even murder (Mollenkott, 2007, p.xiv). In Mrs. W.’s mind, she was doing what every good parent should do: teach her son to walk straight so that he will avoid personal and family embarrassment, danger and, most of all, gender confusion and homosexuality. Butler's work highlights the fact that we perform gender. Those learning the social script well are gender performing. As we are seeing in violent cases throughout this culture and beyond, gender non-conformists can pay the ultimate price of losing their lives. In a

transphobic culture, the role of the pastoral counselor takes on even greater meaning, not just as a guide, healer and mediator, but one literally saving lives.

Religion and pastoral counseling

Pastoral counseling draws primarily from two areas: the social sciences – psychology most of all – and theology. In addition, the pastoral counselor draws from professional judgment, experience, a kind heart, loving care, philosophy, anthropology, sociology, biology and other areas in moving individual and families toward health and wholeness. Object Relations Theory, especially the work of Object Relations theorist, D.W. Winnicott, may be a valuable resource for pastoral counselors assisting trans persons and their families. Object Relations Theory is “a theory within the field of psychoanalysis which postulates that as the self develops it internalizes its early object relations, particularly those between the self and mother and these internalized relationships determine the quality of the self’s relationships in adulthood” (Hunter, et. al., 1990).

In his psychoanalytic work related to the individual’s self-identity, Winnicott theorizes that each individual operates within a “True Self and False Self” persona. He asserts the self is determined by social forces that participate in forming an identity early in one’s childhood. He, like other Object Relations theorists, also recognizes the vital role the family plays in shaping this identity. This influence is particularly profound in the dyadic relationship that the infant and mother share. The health of the individual is greatly affected by the dynamics between mother and child and the creativity that occurs in the context of play (Winnicott, 1971). In this process, the child discovers self, eventually identifying aspects that offer greater meaning in her/his/their world. Here one is also able to distinguish one’s true self from a false self. If an infant senses rejection or abandonment from what is felt at her or his core, the “false self develops as the

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infant is repeatedly subjected to maternal care that intrudes upon, rejects, or abandons his experience” (Daehnert, 1998, p.251). Winnicott describes the necessity of living in one’s true self if the individual is to attain health and wholeness. As Butler describes gender as socially constructed, most of us fit with the gender imposed upon us and our gender identity. For Trans individuals and the gender imposed upon them, they ultimately describe never quite fitting in or performing gender as the world has prescribed to them.

In his compelling, *Transgender: Theology, Ministry and Communities of Faith*, Justin Tanis, an ordained transgender gay MCC minister and Director of the Center for Lesbian and Gay Studies at the Pacific School of Religion, states,

I remember wishing as a child that I was a boy, but I also remember feeling very strongly that the desire should remain a secret. I don’t really know why I believed that no one should know about these feelings, but they were strong. I would play that I was a boy or a man, in my room with the door shut at times when I felt no one would disturb me (Tanis, 2003, p.1).

As I indicated earlier, in trans persons it is a matter of dissatisfaction with the body in which they find themselves. It is a deep yearning to be the opposite gender. Decades ago, transsexuals communicated to a bewildered public that they felt trapped in the wrong body. This yearning is different from resisting the cultural sexism that restricts males and females from doing and being certain things. Many females – and males to a lesser degree – have opposed gender discrimination and broken down gender barriers, not because they felt that they belonged in the other gender, but based on their desire to be treated equally. Trans women and men often experience knowing who they are at a young age and “refus[ing] to lie about it” (Tanis, p.32). The defiance of Karl, Sarah’s son, in wearing a dress, knowing that his decision caused a major

crisis in his family, is the human spirit's attempt for a true self existence. Many transgender children are also now aware that there are other transgender kids and adults in the world, which offers new hope and possibilities for them. Rather than live in misery every day feeling depressed and incomplete, some kids present remarkable courage and, as an eight-year-old trans kid told his therapist, "I can't be what I am not, and I am not a boy" (p.32). For another transgender male, wearing a bikini felt just as strange, as foreign, as unnatural to him as the pants that Sarah's son, Karl, refused to wear.

In the twenty-first century, individuals and family members are confronting a number of major issues that have surfaced in the last two decades; transgenderism is certainly one. The first task for a pastoral counselor is to allow the trans person and family members a place to be heard. One of the most valuable contributions that a pastoral counselor can provide is space for family members "in care and counseling that will be creative and diverse in response to the challenges of [trans issues]" (Couture & Hunter, 1995, 13). In this space, each person is allowed an opportunity for voicing feelings about the fears that surround living as a transgender person in an uninformed and even hostile church and society.

People generally oppose difference because they are uninformed about the group that is different. The lack of experience with a member of a sexual minority, even when the individual is a family member, creates a vacuum that gets filled with negative stereotypes, and the conviction that the individual's life is morally inferior to those of heterosexual or cisgender family members. Hence, a transgender family member confronts perceptions based on social and religious prejudice, which creates confusion, depression and sadness for the non-trans family members as well as trans individuals. After providing space for emotions, it is important to establish clarity regarding what relationship is desired between the transgender family member

and other family members. If a trans person and family members are working on reconciliation (which usually comes later for families struggling with a lot of traditional religious and social assumptions), it may be useful to meet with the transgender person separately from the family for a short or even a long period of time.

Pastoral theologian Nancy Ramsey (1998) writes that our “[pastoral] diagnosis relies on three sets of assumptions....[:] anthropological assumptions, communally shared guiding values or worldview and mutually understood dynamics of authority in the helping relationship” (p.14). And though the pastoral counselor holds authority in the counseling relationship, it is essential that the counselor avoid telling the counselee “how to feel [and] does not plant feelings for the counselee to discover [or] infer from theory or prior experience what feeling the counselee should have” (Dittes, 1999, p.100). This is not to say that the counselor cannot explore this challenging issue with the transgender counselee, especially given the widespread suspicion and lack of knowledge about transgenderism. Counselors are, perhaps, most helpful if they think of themselves as “ archeologist[s] guiding over terrain that belongs to the counselee but in which the guide can help the counselee notice things. However, the guide must not overload the archeological lecture and must not get too far ahead of what the counselee is noticing” (Dittes, 1990, p.100).

After an initial conversation with a transgender person and his/her family that allows space for anger, sadness and tears, the pastoral conversation can engage theological questions and scripture. Since the trans and cisgender family members are choosing a pastoral counselor rather than a secular therapist, they presumably want to engage spiritual and faith perspectives. Although the pastoral counselor considers social science and a commitment to do no harm, the trans individual’s and family’s faith are also to be considered. The pastoral counselor must first

work through her or his own feelings about transgenderism and God's will before offering guidance to trans people and their family members. Do trans people deny God's intention for them? In the Christian church context, there are theological concerns with two questions: *What does the Bible say about gender identity?* and *Is it within God's will that one changes genitals, hormones and gender identity?*

For some religious leaders and pastoral counselors, transsexuality is viewed as "a medical problem with a medical solution that does not necessarily have spiritual implications, while others cite scripture that they believe forbids cross-dressing and gender reassignment surgery. [It is even worse in unenlightened churches when pastoral leaders and congregants] won't even dare mention transgender," ignoring their very existence (Tanis, 2003, pp.89-90). In a culture that conceals intersex reality and refuses conversations about gender variance and the many sex assignment surgeries that take place throughout the world, it is not surprising that this lack of response is quite common, though it is, of course, disappointing. For many pastoral counselors and pastors there is also a logical need to engage scripture. The issue of gender variance appears to be addressed in scripture, even more than homosexual activity. Tanis writes gender variance can be found in Genesis 1:26-28; 2: 4-9; Deuteronomy 22: 5/62; 23:1/67; Isaiah 56 1-5/69; Matthew 19:11-12/72; Acts 8: 25-39/76; Galatians 3:28/80.

The most common scriptural reference associated with transgender people is the popular text in Matthew 19: 11-12. In this passage Jesus says,

Not everyone can accept this teaching, but only those to whom it is given. For there are eunuchs who have been so from birth, and there are eunuchs who have been made eunuchs by others, and there are eunuchs who have made themselves eunuchs for the sake of the dominion of heaven. Let anyone accept this who can.

Tanis suggests that this text actually presents Jesus as offering a range of human expression and he rejects the more limited reading by some scholars that the scripture is just about celibacy. Tanis's reading gains further plausibility when one considers that the notion of transitioning one's genitals into that of the other sex/gender would have been a foreign concept in the ancient near eastern world. In this twenty-first century where sex reassignment is a possibility, Tanis emphasizes Jesus' words that "not everyone can accept this teaching" and lauds Jesus, "acceptance of those whom society has deemed dishonorable" (Tanis, 2003, pp.72, 74).

In the context of a contemporary issue like transgenderism, as pastoral theologian Ryan LaMothe (2001) notes, "narratives and rituals, which establish and maintain normative forms of the dynamics of faith and faith as vital concern, can also demonize, obstruct and pathologize (represent people as mentally ill) other forms of faith as vital concern. In short, those passions and experiences that are incongruent with more socially accepted forms are frequently portrayed as diseased or evil" (p.41). Parents and most of society use their conservative Christianity as justification for opposition to homosexuality *and* transgenderism which may – and frequently does – lead to verbal and physical violence and death. The death of an Ohio transgender female is a tragic example:

[On December 31, 2014, the Boston Globe] reported that Early Sunday, 17-year-old Leelah Alcorn died after being hit by a tractor-trailer while walking along a stretch of Interstate 71 near her Ohio hometown. The death was eventually ruled a suicide after a pair of social media posts,...garnered notice and served as a flashpoint for transgender progress in 2014.

Alcorn's suicide note, which she scheduled for posthumous posting, explained how she reached the breaking point: At 14, she came out to her parents as

transgender, and they reacted by taking her to conversion therapy and cutting her off from social media. After protracted periods where she felt isolated and depressed, she wrote, “I realized that my parents would never come around, and that I would have to wait until I was 18 to start any sort of transitioning treatment, which absolutely broke my heart” (Johnston, 2014).

Leelah’s parents defended their actions and opposition by citing their faith beliefs. The Christian right has been quite vocal in promoting an anti-transgender viewpoint as synonymous with being Christian. In order to be Christian, one “must be either male or female, heterosexual and living within an identifiably ‘traditional family,’ in which women stand for submissiveness, passivity and lack of economic productiveness, but also for spiritual connectedness to God” (Mollenkott, 2007, p.177). Leelah’s parents are just two of many parents in our society and around the world convinced that their parenting is correct. This tragedy, like others that will be addressed later, points to the need for pastoral counselors’ wisdom and skill, which can help conservative family members of faith or fundamentalist Christian family members struggling with transphobia embrace other faith perspectives that do not deem trans people as sinful or evil. If Sarah had another faith community informing her of simple facts about gender variance, she could have engaged Karl’s cross dressing as part of a gender and sexual orientation continuum rather than as a product of demonic forces or illness.

The increasing presence of trans people in congregations and their service as clergy greatly assist pastoral counselors and the families of transgender individuals toward viewing them as Christians or people of faith. Their witness of God’s presence in their lives brings about further transformation of non-transgender individuals within families and social and faith communities. This witness, along with other readings of the texts cited above, contributes to a

new understanding of transgender people and the ability to develop new perspectives regarding such persons. The process of reassessing traditional views by engaging contemporary studies and theological analyses is also beneficial for transgender people. One of the most effective ways that this can be done is for pastoral counselors to engage with transgender Christians or other trans people of faith and trans pastors who can serve as positive models for trans people and their family members.

Malcolm Himschoot, a United Church of Christ transgender minister, found the first passage, Gen. 1:26-28 quite helpful after undergoing gender transition. In pursuing his call into ordained ministry, he still needed to reconcile his faith with what he knew to be right for himself. In the documentary, *Call Me Malcolm*, Emily, his pastor at Washington Park United Church of Christ in Denver, CO, asserts in a pastoral counseling session that God declares transgender people in creation from the beginning. Genesis 1:26-28 reads,

Then God said, “Let us make humankind in our image, according to our likeness; and let them have dominion over the fish of the sea, and over the birds of the air, and over the cattle, and over all the wild animals of the earth, and over every creeping thing that creeps upon the earth. So God created humankind in his image, in the image of God he created them; male and female, he created them.

According to her theology of transgenderism, she argues, “if you are looking for someone who incarnates the most clear and whole vision of who God is...based on our scripture tradition, it has to be a transgender person who has experienced both male and female...the most whole vision of the sacred that we are going to get” (Filmworks, 2004).

Finally, in pastoral counseling to transgender individuals and their families, it is critical that there is an affirmation of their humanity and a call for compassion for the plight of

transgender people. Carl Rogers's client-centered therapy can be helpful for transgender folks struggling to overcome low self-esteem and even self-hatred to achieve self-acceptance. In an environment that affirms individuals and values their worth, such persons can simply be and thrive with mental, emotional and physical health. Drawing from Winnicott's work, pastoral counselors can create a space for the emergence of the true self which leads toward wholeness. Such an approach will lower the number of transgender suicides and, through educating others, lower the rates of violence against transgender people.

Transgender people are currently one of the groups most targeted in violence and hate crimes. There is great social and religious contempt for transgender people and when acts of violence are directed at Trans individuals, "crimes against [them] are characterized by overkill and by underreporting...because law enforcement officers are hostile to [trans people] and sometimes the chief perpetrators of the abuse" (Mollenkott, 2007, p.74). A good example is the now infamous case of the Nebraska (F to M) female to male Brandon Teena, popularized by the powerful film, *Boys Don't Cry*. In this case, the police's failure in responding to his personal crisis and vulnerability left him as an easy target for the shooting that ended his life. According to The Blog, an agency that tracks transgender assaults and deaths, in 2014 alone, there were over one hundred attacks on transgender people, many committed by family members and some ending in death.

These statistics of transphobia and trans-hatred remind us of the work currently needed to save the lives of our family members, friends, colleagues and fellow citizens. A common factor in hate crimes committed against trans individuals is the severity of the attacks and the particularly heinous nature of the crimes. Pastoral counselors and pastors are well-positioned as resources for their counselees and parishioners and families confronting transgender issues.

Regardless of where a pastoral counselor may find her or himself regarding the issue, each counselor can obtain information, offer compassion for trans people and become an advocate for legal protections against discrimination and violence as I have outlined here. The safe space created by a pastoral counselor is a wonderful act of pastoral care. At the heart of pastoral counseling is journeying with counselees toward health and wholeness. Leelah's story is a haunting example of what can happen when a transgender person is forced into a stifling life of false self. Her parents refused her reality that eventually left her feeling that she had no choice but to take her life. She concluded that if she could not be true to herself then life is not worth living. Like many, Leelah understood that living into one's true self allows for wholeness; however, her feeling of not having options to deal with her pain and suffering that she experienced as a trans individual is a real tragedy. Did she not feel like she could stay with relatives, speak with a counselor about leaving home or find support groups that might help her cope until she turned eighteen? While these questions cannot be answered, they remind us of the work that we must do now so that other lives will be spared this outcome.

Mrs. W., Sarah and Leelah's parents have one thing in common: they wanted their sons to stop switching. Their responses created so much havoc in their children's lives that one is not here for simply being true to self. If Leelah's death can move us to reexamine our social teachings, religious messages and interpretations of scripture, then Leelah will get her last wish and her dying will not be in vain. As pastoral counselors, it is my hope that we consider the offerings of social science, along with teachings within our own faith traditions, teachings which remind us of the dignity of all God's people. Let us reimagine that there is the possibility for seeing all of us, including transgender people, as the manifestation of the complexity, diversity and beauty of God.

References

- Boisen, A. (1960). *Out of the Depths*. Harpers and Brothers: New York.
- Butler, J. (1990). *Gender Trouble: Feminism and the Subversion of Identity*. Routledge: New York.
- Cornwall, S. (2010). *Sex and Uncertainty in the Body of Christ: Intersex Conditions and Christian Theology*. Chelsea Manor Studios: London.
- Couture, P. & Hunter, R. (eds.) (1995). *Pastoral Care and Social Conflict*. Abingdon Press: Nashville.
- Daehnert, C. (1998). "The False Self as a Means of Disidentification: A Psychoanalytic Case Study in *Contemporary Psychoanalysis*. 34, 251-271.
- Dittes, J. (1999). *Pastoral Counseling: The Basics*. Westminster John Knox Press: Louisville, KY.
- Dreger, A. (1998). "Ambiguous Sex or Ambivalent Medicine? Ethical Issues in the Treatment of Intersexuality" republished from *Hastings Center Report*, vol. 28, issue 3: pp. 24-35).
- Fortune, M. (1995). *Love Does No Harm*. Continuum: New York.
- Graham, L. K. (1997). *Discovering Images of God: Narratives of Care Among Lesbians and Gays*. Westminster John Knox Press: Louisville, KY.
- Hunter, R., Maloney, H.Mills, L., and Patton, J., (eds.) (1990). *Dictionary of Pastoral Care and Counseling*. Abingdon Press: Nashville.
- Johnston, M. (2014). "Transgender Teen Leelah Alcorn: My Death Needs to Mean Something" in *Boston Globe* online article. www.bostonglobe.com/lifestyle/2014/12/31/transgender-tee.
- Sacred Spaces: The E-Journal of the American Association of Pastoral Counselors, 2016, vol.8

- LaMothe, R. (2001). *Revitalizing Faith through Pastoral Counseling*. Abingdon Press: Nashville.
- Mollenkott, V. (2007). *Omnigender: A Trans-religious Approach*. The Pilgrim Press: Cleveland, Ohio.
- Murray, R. & Roscoe, W. (eds). (1998). *Boy Wives and Female Husbands: Studies of African Homosexualities*. St. Martin's Press: New York.
- Ramsey, N. (1998). *Pastoral Diagnosis: A Resource for Ministries of Care and Counseling*. Fortress Press: Minneapolis.
- Tanis, J. (2003). *Transgender: Theology, Ministry and Communities of Faith*. The Pilgrim Press: Cleveland, Ohio.
- United Church of Christ Films. (2004). *Call Me Malcolm*. Filmworks: Cleveland, OH.
- Winnicott, D.W. (1971). *Playing and Reality*. Tavistock Publications: New York.