

TRANSCRIPT

An Undeceptions podcast.

CONTENT WARNING

In this episode, we are talking about the experience of gender dysphoria and transgender more broadly, and there's mention here of abuse, depression, and suicide. So let me say upfront, if you are struggling or if anything we raise in the show causes you to stress, please just press pause and search online for Lifeline here in Australia. In the U.S., the National Suicide Prevention Lifeline, and in the UK, Samaritans Helpline. Stay safe.

PODCAST BEGINS

Dana Pham:

I have memories as a four-year old thinking that there was something different about me, but I hadn't quite figured it out. Mind you, this was in the '90s, and in the '90s, we weren't really talking about gender theory, for example, in schools. So I had a feeling that I was different somehow. It felt very innate, but I struggled with a language or terminology. I had no idea, but I knew that there was something different about me, deep down.

JOHN DICKSON EDITORIAL

I first met Dana Pham online just a couple of months ago when she patiently waited through 500 or so comments on one of my Facebook posts about today's topic. I had asked my Facebook followers to suggest questions they'd like me to ask and expert on transgenderism, and people were mostly thoughtful and challenging, and it really helped us piece together today's show. So thanks a lot for that.

Anyway, I noticed this Dana responding calmly and politely to lots of people, even people who were up for a bit of a fight. I was so impressed. I reached out privately to Dana and asked if she'd be willing to meet with me and my microphone to talk in depth about her experience.

Dana Pham is transgender. She isn't sure what she makes of Christianity. She's on a journey, she told me. A journey that's even taken her to enroll in theology at the University of Notre Dame here in Sydney. But it's not her theology I wanted to probe, it's her experience as a transgender woman. We sat down recently for this fascinating chat.

John Dickson:

When did you begin to have some terminology about it?

Dana Pham:

Probably as a teenager, as a 14, 15-year-old, early 2000s. Google had only been around for a few years. So one day in the school playground, I received a Catholic education from kinder to year 12, someone one day, as a 14-year-old in the playground blurted for word transsexual, but something about it spoke

to me without really understanding the term. So this is probably 2003. I Googled it and away we went, and I was slowly just trying to figure out, what does that mean? Is that me?

Dana had spent her childhood feeling uncomfortable in her own skin, more than uncomfortable, she struggled to see where she fitted in the world. Dana was experiencing gender dysphoria, which we're going to explore in detail as this episode unfolds.

JOHN DICKSON EDITORIAL

Gender dysphoria is defined in the Diagnostic and Statistical Manual of Mental Disorders or DSM as, "A clinically significant distress or impairment related to a strong desire to be of another gender." According to the DSM, somewhere between 5 and 14 people per thousand assigned male at birth are later diagnosed with gender dysphoria. The numbers are lower for those assigned female at birth, between two and three per thousand. Those statistics refer to people who seek formal treatment, so they're likely to be an underestimate. This is such a fraught topic and not just in the Christian arena. There are plenty of people, psychologists included, who challenge the idea that gender dysphoria is a real condition.

Some argue that transgender is a social identity and not a mental condition. Others argue that classifying gender dysphoria as a mental health concern is like classifying homosexuality as a mental health concern, which it was until the late 1980s. And that's before we get to the culture wars. I'm sure there are listeners right now who fundamentally object to using female pronouns for Dana, because as she freely admits, she was born a male. There are other practical questions to be answered to from which bathroom to use to whether transgender women, those born male, but identifying as female, should participate in elite sport. And all of these questions are being argued loudly in the media.

The more fundamental question though is, how do we respond to the person standing right in front of us who's experiencing gender dysphoria? Dana is a real person, not a pawn in a culture war. Regardless of where you fall on the politics of all of this, my main question is something like, is there a Christian way to think about and engage with people who identify as something other than their birth sex?

There are some really smart, wise Christian people, experts in the relevant disciplines, thinking through the implications of all this and advocating for a particular way forward, and we've got one of those on the show today. And of course, you're going to hear a lot more from Dana, for whom this isn't a theoretical or political problem, it's life and death.

I'm John Dickson, and this is Undeceptions.

Undeceptions is brought to you by Zondervan Academic's new book, *Religious Freedom in a Secular Age* by friend of the podcast and my good mate at Ridley College, Michael F. Bird. Each episode at Undeceptions, we explore some aspect of life, faith, history, science, culture, or ethics that's either much misunderstood or mostly forgotten. With the help of people who know what they're talking about, we're trying to undeceive ourselves and let the truth out.

EPISODE CONTINUES

Professor Mark Yarhouse:

My research is really at the intersection of either sexual or gender identity and then religious identity. So I study that potential for conflict between, especially Christians, but not exclusively, but especially a Christian identity and how people of faith navigate either same sex, sexuality, or gender identity questions that come up in their life.

JOHN DICKSON EDITORIAL

That's Professor Mark Yarhouse, a clinical psychologist and director of the Sex and Gender Identity Institute at Wheaton College in Illinois, in the U.S. He's published over 80 peer-reviewed journal articles and book chapters and is the author or co-author of several books, including *Understanding Gender Dysphoria: Navigating Transgender Issues in a Changing Culture*. A great book. Mark's research straddles the academic and Christian spheres and he specializes in the conflict tied to religious identity and sexual and gender identity. Can you just imagine the mail this guy gets.

Professor Mark Yarhouse:

I was providing training to youth ministers and it was on sexual identity. So how do you work with gay youth in your youth group and what does that look like. So I would do these hour, two-hour, three-hour workshops, and it was all on sexual identity, but I get to the Q&A, and it was almost exclusively on gender identity, transgender experiences. And I realized that this was showing me, I think where the conversation was going in our middle school, high school conversations where youth ministers were feeling kind of stumped and overwhelmed.

JOHN DICKSON EDITORIAL

Mark has been at the core face of these issues for ages. He saw before most of his peers, at least in Christian circles, saw that gender identity was going to be a huge issue and that the church needed to figure out how to respond. And that insight led him to write *Understanding Gender Dysphoria* back in 2015. It was well ahead of the curve and the church still really hasn't figured out how to deal with some of the issues Mark raised back in 2015 and continues to raise to this day. We're going to put a link in the show notes to Mark's writings. I really want to encourage you to track them down.

The first thing that confronts a newcomer to this debate is the confusing array of terms being used on all sides. So I asked Mark to give us a rapid fire rundown of the most popular term so we know what we're talking about.

John Dickson:

Could you give me definitions of transgender, and is that the same as transsexual?

Professor Mark Yarhouse:

So transgender is really an umbrella term for many ways that people experience or express or live out a gender identity that doesn't correspond with their biological markers like chromosomes, gonads, genitalia, but usually what it refers to as a cross gender identity. So trans meaning spanning across versus cisgender, which is this side of. Cis meaning "this side of" versus trans.

JOHN DICKSON EDITORIAL

The term cisgender refers to people whose gender identity and expression matches the biological sex they were assigned with when they were born. Cisgender was coined in an academic journal article way back in the 1990s, but it's been picked up in popular culture only in the last, I don't know, 10 years. It marks an increasing effort to make us more aware of everybody's experiences of gender. Like when musician Moby described himself in 2009 as a run-of-the-mill, cisgender, heterosexual male.

Of course, the term has many detractors, perhaps some listening to me now. For a lot of people, including many people of faith, cisgender is just normal gender. Why would you use the jargon of a subcategory for what is the norm, the category itself? Doesn't that definitionally make people with transgender and people without transgender morally, logically, and psychologically equivalent, just variations on a theme. Now, we're going to ponder these objections a little later, but for now it's worth just noting that cisgender is part of the vernacular for many in society.

Professor Mark Yarhouse:

Transsexual is usually reserved for cases where a person has used medical interventions, like hormone treatment, gender confirmation, surgical procedures. We don't use it as much in the U.S. anymore just because it's quite medical and psychiatric. And I think the feedback we've gotten from the broader transgender community is that it feels pathologizing in ways. So if you're interested in kind of bridge building or being in dialogue, it's not a great starting point to use that term.

John Dickson:

Transvestite?

Professor Mark Yarhouse:

Yeah, this is another one that in the history of psychiatric nomenclature was at one time to describe some of the gender concerns that we're talking about, but the transgender community elected to move away from transsexual and transvestite towards this more of a personal identity and a political identity as transgender to sort of capture how they wanted to be known in the broader society. So transvestite would have more to do with cross-dressing activity itself. I think today would be reserved more for experiences that are a little closer to having a fetish quality to it, something along those lines.

John Dickson:

Yeah. And this is all quite different from intersex, the other technical term.

Professor Mark Yarhouse:

Yeah. So an intersex experience refers to different medical conditions that can involve shared reproductive tissue of male and female, sometimes makes it difficult to identify child as a boy or a girl, or a baby as a boy or a girl at birth. It doesn't have to be that way, but there's a lot of different causes that could be chromosomal, gonadal, genetic. There's a lot of different reasons why a person could have an experience of intersex.

John Dickson:

And can you break down for us sex, gender, and gender identity?

Professor Mark Yarhouse:

Usually when we say sex, we're referring to biological sex. So usually people are referring to chromosomal differences, gonadal differences, genitalia. When people refer to gender today, they're usually referring to more of the emotional, psychological, social aspects of being male or female. So we think of being a man or a woman or a boy or a girl. And then gender identity is your experience of yourself, that way you experience yourself as a boy or a girl growing up or a different gender identity than that, or experience yourself as a man or a woman or a different gender identity than that.

JOHN DICKSON EDITORIAL

Gender dysphoria then refers to the distress that can be associated with a discordant gender identity when a person's gender identity doesn't correspond with their birth sex.

Professor Mark Yarhouse:

It's very popular right now to think of this largely as nature, as something happening that's biological, that's contributing to diverse gender identities, including experiences of gender dysphoria. And so are we further along with that? I would say we still don't know what causes it. I don't think many people are really studying environmental... Sort of how nurture and other things might just be associated with it. I think most of the energy right now is towards... One question is this, could this phenomenon be sort of an intersex condition of the brain? Is a phrase that's often used, so that a person has shared male and female distinct aspects of the brain. And I think this is a very compelling sort of presentation. The idea that, okay, maybe that is what's going on.

JOHN DICKSON EDITORIAL

An intersex condition of the brain. It's a fascinating idea and it ought to give us pause. There is a statistical difference on average between the male and female brain. Neuroscientists describe it as a continuum between the male and female brain structures. The journal, *Science*, reported that a large study in 2017 with over 5,000 subjects found that about a dozen areas of the brain are larger in women than in men, and another dozen, different areas of the brain are larger in men than in women. Other studies have found things like men and women use different parts of their brains to rotate objects in their minds, weird.

Now, here's the thing. There is a bit of evidence, not a lot, but a bit, as Professor Yarhouse notes, that some biological boys have a brain structure more at the female end of the spectrum, and some biological girls have a brain structure more at the male end of the spectrum. This difference between biology and brain structure may in part explain the gender dysphoria that some people experience. The research is ongoing, but it could be that many transgender boys are biological girls with male-like brains, and many transgender girls are biological males with female-like brains.

In the show notes, we'll link to an article in *Nature* that outlines the research in a really measured way. The whole thing gives me pause. Whatever the causes of gender dysphoria, whether neurological or

environmental or both or neither, it is clear that most people who end up identifying as transgender first experience the tension between their biological sex and their self-perception really early in life. It's not a life choice one makes in one's late teens because you want to be promiscuous. According to the evidence, it begins as young as seven years of age. Now, for Dana, it was slightly later, in her teenage years.

Dana Pham:

The distress as a child, young child, it wasn't really there, but as I grew older, especially in my teenage years, it heightened. It really heightened during my mid teens, and I never grew out of it. I just generally didn't relate to boys. I looked at the girls and I felt I could relate to them better, although, because I was socialized as a boy, I would at times struggle in terms of how do I relate to girls when I'm presenting as a boy when I was a child.

Again, that feeling of, I feel that I'm more of a girl than a boy because of what I see in the world because of a boys, girls, men, women, mothers, fathers, because of the gender binary I see throughout the world, I gravitate, generally speaking, it's more complex than this, but I would gravitate and still do towards the feminine, to what I perceive to be female. And I transitioned at around the age of 20-21. So that would involve legal name change, new clothes, testosterone blockers, estrogen. So a number of measures to help me feel at ease, feel like that I'm a woman like anyone else, maybe not biologically, but what I think would help me best to alleviate the distress or the dysphoria.

JOHN DICKSON EDITORIAL

Like I said before, doing an episode on gender identity is tricky in many, many ways, not the least of which is that the field is rapidly changing. As Mark wrote in the preface of his most recent book called *Emerging Gender Identities*, "Work in the area of gender identity seems to be fast forwarding at a rapid pace. It feels somewhat like trying to follow the plot of your favorite series by watching it at four times or ten times the normal speed. You just want to slow it all down so you can understand what's happening to your beloved characters."

Health experts are also saying that the number of adolescents requesting medical care for gender related concerns is skyrocketing. So in 2017, around 3% of teens in the U.S. reported that they are or maybe transgender. A more recent 2021 study suggests that the rate of transgender identification amongst U.S. youth may be as high as 9%. That would be a nearly 300% rise in four years. The cause of this increase is something we'll get to a little later in the episode, but all this is to explain why the so-called treatment of gender dysphoria is also in flux, it's changing all the time. How it's to be approached depends very much on your perspective on whether changing gender is an appropriate action.

In a fascinating piece in the *Washington Post* in November 2021, two psychology professionals wrote that the mental health establishment is failing trans kids. Now, that's the kind of headline that might get an article dismissed really quickly as being perhaps transphobic, except the two authors have really serious credentials. Laura Edwards-Leeper was the founding psychologist of the first pediatric gender clinic in the U.S. And Erica Anderson is a member of the American Psychological Association Committee that's writing the guidelines for working with transgender individuals, and a former president of the U.S. Professional

Association for Transgender Health, and a former board member of the influential World Professional Association for Transgender Health. Erica is also a transgender woman herself.

Now, these authors write, “American opinions about transgender youth have shifted dramatically in the past 15 years. The pendulum has swung from a vile fear and skepticism around ever treating adolescents medically to what must be described, in some quarters, as an overcorrection. Now the treatment pushed by activists, recommended by some providers and taught in many training workshops is to affirm without question,” they say. The authors are questioning practitioners who go straight to treating gender dysphoria medically, skipping over mental healthcare, and then just administering hormones to children as young as 12.

Now, this kind of questioning of early medical intervention is controversial for many, but these authors insist that “comprehensive assessment and gender exploratory therapy is the most critical part of the transition process.” Regardless of opinions on what should be the final outcome, current agreed standards of care from the World Professional Association for Transgender Health say that mental health support like counseling is an important first step, but as Mark Yarhouse points out, that first step isn't always, or even that often a fix for gender dysphoria. Counseling does often help, but it can't claim to be a resolution.

Professor Mark Yarhouse:

I don't know of protocols that would resolve the dysphoria in the direction of their birth sex or something like that. Let's say you had a fear of flying and you had an anxiety disorder, we could identify unhelpful thoughts and we could dispute those thoughts and we could teach you relaxation exercises and deep breathing and we could help correct through disputational strategies, irrational thoughts, and replace them with rational thoughts, helpful thoughts. We could make you a frequent flyer in a matter of months, right? So that's a very treatable experience, but that's not what this is with gender dysphoria. There's not like a set of unhelpful, irrational thoughts that you can dispute and replace with more helpful thoughts. That's why sometimes when people say to me, “Well, this person used to think they were this way and now they think they're this way.” Like it's a cognitive experience solely, and that if you could just get them to sort of correct their thinking that the whole thing would resolve. There isn't a protocol like that. I don't know of anyone who's really been helped by that kind of a strategy.

John Dickson:

Are there any treatments of gender dysphoria that are as effective in relieving the distress experience as medical interventions, hormone therapy, transition surgery, and so on?

Professor Mark Yarhouse:

Well, the way I think about this, first of all, gender dysphoria can be experienced with a range of severity. So it can be pretty mild, it can be pretty severe, and a lot in between, and it can ebb and flow in strength from one person from time to time, and it can ebb and flow. It could just be different for different people. So when we talk about treating it, like I know somebody which happens to be a friend of mine who has a pretty mild experience of gender dysphoria and she just kind of natal female, keeps her hair kind of short, wears baggy clothing, just presents as a woman, is pretty comfortable like that, and she

would say, "Mark, don't use me as a poster child for what every person should do, or every Christian should do with their experience of gender dysphoria. I'm able to do this because these strategies help me."

Professor Mark Yarhouse:

So she's using hairstyle, clothing, those types of things, and it's sufficient for her to function. Another person with more severe gender dysphoria wouldn't be able to manage it with just those strategies. And so I try to locate it along a continuum of steps from least invasive to most invasive. If you think of surgical procedures and hormone treatment as most invasive, then least invasive would be things like these steps that she took and others might take, and there's a lot in between. So are they helpful? Well, they're helpful depending on the severity of the dysphoria.

Dana Pham:

So during my teenage years, this is in the early 2000s, I saw a number of professionals, whether they be counselors, psychologists, psychiatrists, and we would have, broadly speaking, talk therapy. We would talk about how I felt, why I think I feel the way I would feel. Is it because I just don't want to deal with puberty? All these questions to figure out what's driving it. Obviously, that didn't work out that great.

So as a 20-year-old, I start off on testosterone blockers to see how I would go and it would block testosterone production in my body, which Fin has a range of repercussions such as slowly developing secondary sex characteristics of women. But it takes two to tango, so it's not just testosterone blockers. Eventually, I got onto estrogen medication in a form of tablets. These days, especially in recent years, I've been on a subdermal estrogen implant, and I haven't been on testosterone blockers for quite a number of years because I've had sex reassignment surgery, which is the final piece part of the process.

JOHN DICKSON EDITORIAL

Even the terms we use for gender reassignment surgery are changing. These days, many people prefer the term gender affirmation surgery, or confirmation surgery. That too is of course controversial, depending on your perspective. Some would say it's the opposite of affirmation and confirmation. It's an attempt to deny bodily reality. Again, the distinction between gender and sex becomes key here. If gender is thought of as one's perception of manhood or womanhood, rather than one's biology, then trying to conform aspects of the body to that perception is affirming. It's confirming gender, even though it's a contradiction of one's sex. But again, whatever you make of the language, the procedure itself is huge. And no one takes the decision to have surgery lightly. And actually, only a minority of people with gender dysphoria transition surgically. Mark Yarhouse says only about one in four.

Professor Mark Yarhouse:

The language I often use is, in our society, sometimes right now, we're treating medical interventions almost like a mountaintop experience that everybody should move towards if they have this experience of dysphoria. But the reality is, at least in the United States in the last large transgender survey of adults, most had not been using hormone treatment and most were not using gender confirmation surgeries. For whatever reason, they didn't ask that question. But I think only 25% were using surgical

interventions, only about 44% were using cross-ex hormones. And so what it suggests to me is that many people kind of find their plateau. They actually don't sort of go to a mountaintop, they kind of find a plateau. So one way to think about counseling somebody is, how can I help you find your plateau? What will that look like for you? And a plateau could be six months, it could be six years, it could be a little bit less time, it could be more time, but that's kind of the way this work has been in my experience.

JOHN DICKSON EDITORIAL

Dana agrees, surgery isn't for everyone.

Dana Pham:

For some trans people, especially trans women, reassignment surgery is the final step. Now, to clarify what I mean by reassignment surgery, we also call it bottom surgery. It's basically to, using what's available, change our private region to reflect how we think it should have been to begin with, like other women.

John Dickson:

And at the end of this process, do you feel no longer any of the distress?

Dana Pham:

For me, I felt much more at home. For some trans people, including trans women, they may feel that it's not appropriate because they don't feel dysphoric enough about their genitals. So they don't do it and they're quite comfortable with doing that, they're quite comfortable with being on testosterone blockers and estrogen.

BBC TAPE

Dr. Anna Hutchinson:

The burden of treatment for people who are trans-identified is very significant, even for those for whom it works. It might involve forgoing fertility, it will certainly involve, or usually involves reliance on medication for the whole of your life and often surgery. Now, some people are more than happy to live with that burden of treatment because it works for them. However, there are a group for whom it won't work, and that creates a situation where there's almost a double burden, that they have to live with all of those changes that they've undergone, and it still hasn't helped alleviate their distress.

JOHN DICKSON EDITORIAL

That's Dr. Anna Hutchinson, a clinical psychologist in the UK, speaking with BBC's Newsnight back in 2019. Dr. Hutchinson spent five years working in the UK's only child and adolescent gender service, where she worked with hundreds of young people questioning their gender. As the temperature rises in the culture war over gender identity, statistics are being thrown around on the number of people who express regret over medical intervention to change their gender, but reliable statistics just don't exist yet. There is little academic research about people who have transitioned to the opposite gender and then

express regret over that decision. This is also sometimes called detransition, stopping or reversing a transgender identification or gender transition, whether by social or legal or medical means.

The studies that have been done so far suggest that the rate of detransition is actually very low. One study put the proportion of trans people who return to the gender they were assigned at birth at less than 0.5%. That's one in 200. But the thing is, researchers haven't tracked a large cohort of transitioning people over a number of years. So what's the story?

John Dickson:

I've read wildly different things about transgender regret, especially when young people transition only to feel they've made a mistake later in life. Is this a real issue or is this a bit of a conservative beat up or argument?

Professor Mark Yarhouse:

Yeah, I've been concerned about this as well. I don't think it's currently an issue that's been documented. So let me back up and say, there was a clinic in the Netherlands that recently published a 30-year study of their own rates of regret and they were remarkably low. And I was wondering the same thing. Like, are we going to start... Especially with this gender ratio flip, the questions that are being raised about peer influences, and things like that. So I don't know the answer to, will we have that in 10 years from now? That is a concern that I have and others, I think share that concern. But you can't look at the scope of what's been going on in the last 20, 30 years and say that the numbers are showing that, at least not the numbers I have seen.

JOHN DICKSON EDITORIAL

Statistics do suggest that transgender people are way more likely to experience a range of mental health issues, whether they regret the decision to transition or not. The first peer-reviewed study of The Health and Well-Being of Transgender Australians paints a grim picture. Of the 928 participants, lifetime diagnosis of depression was reported in 73% and anxiety in 67% of transgender people. 63% reported previous self-harm, and 43% had attempted suicide. These statistics are many times higher than the rates for the general Australian population. And at least part of the reason for this, according to health experts, is the stigma and discrimination transgender people experience.

When I posted on Facebook about this topic, asking people for their best questions to Mark Yarhouse, I saw firsthand just how fiery, snarky, or just plain rude some of us can be toward trans people. That's not new for Dana. She spent a long time wading through the comments and replying graciously, and that grace wasn't always reciprocated.

John Dickson:

You very graciously interacted on my Facebook page when I announced that I was doing an episode on gender dysphoria. And I'm sorry for a couple of the comments you received from people.

Dana Pham:

Mm-hmm. It's okay.

John Dickson:

I winced and deleted one or two. One of the questions people kept on asking is stuff like, if people can just choose their gender, why can't they just choose their race?

Dana Pham:

It's a valid question, and it comes down to what have we observed in the world. Yes, in the past decade, and partly thanks to social media, we've seen a few people into the limelight, whether it's in the U.S. or Europe or the UK or somewhere else in the West, where they claim to, for example, to identify as a "race" other than what they've been "assigned".

JOHN DICKSON EDITORIAL

Dana tells me about Oli London, a British-born, white internet personality, who I must say I'd never heard of before. He's had 18 plastic surgery procedures to make him look like a member of the K-pop band BTS, which I have heard of. He says he is now transracial. He now identifies as Korean.

Oli London:

[Korean 00:36:36]. Hey guys, I'm finally Korean. I've transitioned. I'm so, so happy, I've completed my look. I'm finally Korean guys. I have the eyes, just had a brow lift as well. So I'm so happy, finally. I've been trapped in the wrong body for eight years. Finally, I'm Korean. I can be myself and I'm so, so happy.

JOHN DICKSON EDITORIAL

Dana isn't impressed.

Dana Pham:

He had some, it appears to be cosmetic surgery to look more Korean and he almost kind of reminded me of blackface. Now, how often are these instances across the world? I'd say not very often. Now if the question is, how often throughout human history? Barely. Is gen... Not gender, racial dysphoria, is that an actual thing? I don't know. I'm not racially dysphoric, I wouldn't have a clue. I also don't want to be relativistic about this because if I have to be honest, I just don't really see this as a natural human phenomenon.

John Dickson:

Do you mind if I continue to ask questions I think conservatives might want me to ask? Is that okay?

Dana Pham:

Yes, I can do it.

John Dickson:

Do you feel you are, as a matter of fact, a woman?

Dana Pham:

From a philosophical, specifically from a metaphysics ontological point of view, no. Why? Because for example, I can't give childbirth, I can't menstruate. If we were to do a chromosomal test on me, it would probably say XY, not XX. These indicators would indicate to me that metaphysically, I'm not a woman. So what am I'm? A trans woman. What does that mean? I'm someone who's taken steps to present as a woman. Does that make me a woman? Probably in the sense of, for all intents and purposes in today's society, where I'm walking into a restroom, I'm walking to various women's spaces. Obviously, I don't do it because I want to be predatory. There's no predatory intent. I just fit into the "female category" because this is how society generally works.

John Dickson:

So you're not even trying therefore to define a woman because I mean, one thing that conservatives often say around the gender debate is define a woman, and people kind of struggle to do that, right?

Dana Pham:

And if we went down this rabbit hole, I would continue to struggle. As my earlier comment, just Fin would suggest, but I feel like it's a debating point that is getting us nowhere. We can debate until the cows come home, but how is that helping us, cisgender, transgender people better understand each other? I don't think it's helpful. I think [inaudible 00:39:53].

JOHN DICKSON EDITORIAL

I found this really interesting. There's a lot of discussion in some circles about the question, what is a woman? It's seen as a kind of knockdown argument against transgenderism because some people answer it with something like, "A woman is anyone who feels like a woman," which doesn't really work because it's using the term to be defined in the definition itself. That's circular and dumb.

You may know that a recent appointee to the U.S. Supreme Court, Ketanji Brown, was asked by Senator Marsha Blackburn if she could define a woman. And Brown, somewhat weirdly, replied that she couldn't because she wasn't a biologist. But I was struck talking to Dana by the way she just sidesteps this issue. She's happy to define female biologically, humans with two X chromosomes. But her whole point is that despite having an X and a Y chromosome, she can't help identifying in her core with those who are XX. A woman in this sense is anyone who personally identifies with females in a given culture. Dana is a woman on this definition, even though she freely admits she is not female. Okay, that's complicated, but things get more complicated when we talk sport.

Sport Australia Tape:

It's a pleasure to be here today to launch the guidelines of inclusion for transgender and gender diverse people in sport. It is an important sport and human rights document. Traditional views of gender make participation in sport a struggle for many, and particularly those members of our community who identify as transgender or gender diverse.

JOHN DICKSON EDITORIAL

In June 2019, Sport Australia released new guidelines to promote the inclusion of transgender and gender diverse people in sport. In Australia, the law that governs this type of thing is the Sex Discrimination Act, which legislates against discrimination based on sex or gender identity. There's an exemption when it comes to sport for competitive sporting activities. The objective of the exemption is to restrict competitive sporting activity to people who can effectively compete with each other. Leveling the playing field, you could say. The exemption recognizes that "biological differences between men and women are relevant to competitive sporting activities." Things are changing all the time, but at the moment, Australia is a little bit reticent to allow transgender women freely to compete in women's sporting events on the grounds that many transgender women still retain the physiological advantage of being biological males, which would go against the rules of effective competition.

Now, I've got to say, this reticence makes sense to me. I want to show all the kindness and social courtesies I possibly can to transgender people right up to the point where it negatively impacts others. In this case, other female athletes who potentially loses competitions and don't even make a team because they are beaten by a transgender woman with, on average, a bigger male body structure, larger muscle mass, more fast twitch fibers, and higher testosterone. But sport isn't the only practical controversy around transgender.

John Dickson:

Where does your approach land on the very practical questions of the use of a transgender person's preferred pronouns, or inviting transgender people to use their preferred change room and so on?

Professor Mark Yarhouse:

Well, I've shared that I do use a person's pronouns and name as they present to me. I don't use that as a time to shout anything about integrity, or my theological beliefs, or things like that. I find that to be so unhelpful just in terms of, as a matter of hospitality and just kind of meeting people where they are. I wouldn't be for people compelling speech, but I think that to be able to say to someone, I'll meet you where you are, is a bridge that I am happy to cross and to meet someone there.

The average person I know who occupies this space is not that hurt or worked up about language and categories like man, woman, boy, girl. I think they want to be seen and respected and understood. But the average person is not asking all of society to change for fear that if you don't, that their feelings would be hurt. So I wonder if we're not talking about more an advocacy posture that I can understand, I can appreciate the desire to advocate for your people, but I'm not sure it really captures the average person navigating these experiences in the way that some people claim it does.

And the thing about restrooms and things of that nature, it really depends on where someone is in their experience of their gender and how they're expressing themselves. I mean, people who have transitioned have likely been using the restroom that they're most comfortable with, and most of us have never known. Most people I know, this is not an issue they want to raise.

Dana Pham:

I haven't had bad experiences in those spaces because one, I transitioned not as a teenager, but close enough, as a 20-year-old, that's when it started. And of course, especially for natal males, the older you

grow, even past your teenage years, the more the effects of testosterone sets in. So let's say if I transitioned as a 40 something natal male, the effects of estrogen and testosterone blockers would not be as effective. So what I've done is transition medically as a 20-year-old.

John Dickson:

Yeah. So you've been using female bathrooms and change rooms for years and years and years and years no problem?

Dana Pham:

No problem because of presentation. That really what it comes down to. Because I'm able to present, maybe not necessarily the most convincingly, this isn't about perfection, it's about you're walking down the street, usually you're not thinking, is that a man or a woman that I just passed by? Your brain is categorizing. Otherwise, the world is just too complex for your brain to handle. Your brain is categorizing, and if someone fits into the female category, whether there's cisgender or trans, you may not necessarily think twice about it. For some who don't "pass" too well, because they physically look like they're in... their presentation is in between, they may struggle more. They make a dirty looks, for example. I've never had a dirty look.

Professor Mark Yarhouse:

Now, if they don't themselves pass, it's a different conversation. They don't feel like that would be safe for them. They don't tend to put themselves in that position. So rather than legislate around these things and sort of come at this as though it was the same for every person out there. It's so different for different people. And so to work with people more on a case by case basis, to have a little charity towards people, I think would go a long way in these conversations.

JOHN DICKSON EDITORIAL

Some objections are more on the psychological side than the practical. A couple of comments on my Facebook post about transgenderism called gender dysphoria a delusion, that was their language. And the point was made that with no other mismatch between body and mind would we give priority to the mind over the bodily reality. We try to help people with various kinds of body dysmorphia, for example, to think truly about the body. We try and encourage the mind to conform to the bodily reality. Mark Yarhouse though, says it's not that simple.

Professor Mark Yarhouse:

Well, I think for one thing, when I think of other areas where people... Sometimes people will compare this to like an eating disorder or something like that. Those are treatable conditions. You know there's ways, there are protocols to help people with those conditions. So it's not like there's a dozen of these protocols for gender dysphoria, no one's showing them to the public. Like, there are not well developed, well studied protocols for resolving it. And as I've said, something like this has been experienced in other cultures and throughout history and there has been a broad concession towards the direction of presenting differently that corresponds with how a person experiences themselves. That doesn't mean

it's the right thing to do, but I'm pretty sympathetic with the fact that in other cultures that's been done, and it hasn't always had the moral significance it appears to in some quarters today.

JOHN DICKSON EDITORIAL

In 2020, Wall Street Journal writer, Abigail Shrier, published her controversial book, *Irreversible Damage: The Transgender Craze Seducing Our Daughters*. In it, Shrier attributes the increase in young people identifying as transgender mentioned earlier, as a type of social contagion, the product of a transgender supportive culture. She writes provocatively, "Unsuspecting parents are awakening to find their daughters in thrall to hip trans YouTube stars and gender-affirming educators and therapists who push life-changing interventions on young girls, including medically unnecessary double mastectomies and puberty blockers that can cause permanent infertility." I put some of Shrier's argument to Mark.

She argues that there's been a kind of psychosocial craze just in the last 5 years, maybe 5 to 10 years, especially amongst girls wanting to transition to be boys, so transgender boys. Now, she's held up by, I guess conservatives as speaking the truth to cultural power, and she's heavily criticized by the trans community. Can I ask you for your take on this very polarizing approach about what's happened in the last 5 years?

Professor Mark Yarhouse:

Well, I think what she hit on is that there are definitely trends that have happened in the last 5 or so years. And everybody knows that these trends exist. There's not agreement as to how to explain those trends, but you see these differences in studies of clinics in the UK, in the Netherlands, in the United States, I would assume Australia.

So you have a pretty significant rise in the number of cases of people coming to specialty clinics for gender-related questions, and the ratio is more female, natal females to males, which is the exact opposite of what people would've seen when I started my career. You saw maybe a four or five to one ratio of boys to girls being referred to specialty clinics. And in those cases, it was early onset or at a pretty young age. You could see that a child was what we might call gender atypical, but they felt different than their peers for gender-related reasons is what that means. And now, you're seeing, with this ratio, also a flip in what we call late onset. So it's at or after puberty. Why that change is happening is a question that I think that author of the book was raising.

JOHN DICKSON EDITORIAL

The response Shrier's book was overwhelming. While Shrier stresses in her book that adults should have the freedom to choose medical transition, her suggestion that teenagers might not be in the best position to make that call earned her the badge transphobic. The vitriol on social media was swift and brutal. Amazon refused to allow Shrier's publisher even to run ads for the book. Major newspapers and trade magazines declined to review it. The American Booksellers Association was forced to issue an apology after sending the book out in a promotional pack to bookshops. It's just more evidence of the polarizing nature of this debate. Is there a way out of the noise, and does Christianity have anything sensible to say on this topic? That's after the break.

SPONSOR BREAK: ZONDERCAN

This episode of Undeceptions is sponsored by Zondervan's new book, Religious Freedom in a Secular Age by my friend, Michael F. Bird.

John Dickson:

Hey, mate. In one sentence, if that's possible, what is your book about?

Michael F. Bird:

It's about the meaning of secularism, which may I add is not a bad thing. It's not a big stick to beat up religious communities. It's about creating space for people of all faith and none. And I also want to talk about religious freedom. What is religious freedom? Why does it matter, and why is it absolutely necessary for a healthy and multicultural democracy?

John Dickson:

Hey, but why did you write it? I can't imagine anyone's interested in that little tangential topic nowadays.

Michael F. Bird:

Well, it's actually quite a big topic, as we know, from recent events in Australia, the U.S., and all over the world, parliaments are debating it. And some people want to define religious freedom as nothing more than a license to discriminate against minorities, which I think is a horrible way to define religious freedom, because you cannot restrict religious freedom without restricting other cognate rights. Things like freedom of speech, freedom of association. And a good metric for how liberal free and good any democracy is, is often what they do with religious freedom. If you have a narrow view of religious freedom, you can have a narrow view of other cognate rights and freedoms as well.

Secularism means keeping the government out of religion and keeping religion out of government. In other words, this book is about why we should not be a theocracy like Iran, but why we also shouldn't be a totalitarian atheistic state like North Korea. So if you don't want your country to be Iran or North Korea, then you really should read this book.

John Dickson:

And I want you to tell me, what do you hope believers would gain and what do you hope doubters, people who don't believe might gain from this book?

Michael F. Bird:

Okay. To believers, I hope they will come away thinking of secularism as a good thing, because we often talk about secularists are the enemy. No secularism is not your enemy. Secularism is what protects you from the government. Secularism is a good thing. Secularism is your friend. And then what I would want to say to doubters or skeptics is look, even you have a vested interest in religious freedom because a government that could curtail and restrict religious freedom can also curtail and restrict other freedoms. So maybe you don't like your local Muslim school, maybe you don't like your Catholic charity and their

hiring policy, but a government that takes it upon itself the right or the prerogative to regulate religion can also start regulating other areas of life.

John Dickson:

You're a legend, mate, thanks. I really hope this book knocks it out of the park. Mike Bird has been a guest of this podcast a few times now. So we reckon if you listen to Undeceptions, you'll get a lot out of Mike's new book, *Religious Freedom in a Secular Age*, published by Zondervan. You can get it on Amazon now.

SPONSOR BREAK: ANGLICAN AID

John Dickson:

15-year-old Zawadi stopped going to school when a deformity in her lower limbs progressed to a point where she just couldn't make the long journey on foot. Zawadi's mother sold part of the family farm in rural Tanzania to get help from traditional healers, but Zawadi continued to deteriorate. When a medical worker from the Karagwe Program saw Zawadi she was sent to a local hospital for treatment and began receiving physiotherapy. Now, Zawadi can walk with crutches and she's started leather work classes, learning to make school shoes, which will provide ongoing employment. The Karagwe Disability Program supported by Anglican Aid offers assistance for people in rural Tanzania living with a disability. Services like this are all too rare, but for people like Zawadi, they are life changing. You can help Anglican Aid support more people like Zawadi by going to anglicanaid.org.au. That's anglicanaid.org.au. Thank you for supporting this organization I trust.

MONTY PYTHON SKETCH

Speaker 9:

Why are you always on about women, Stan?

Stan:

I want to be one.

Speaker 9:

What?

Stan:

I want to be a woman. From now on, I want you all to call me Loretta.

Speaker 9:

What?

Stan:

It's my right as a man.

Judith:

But why'd you want to be Loretta, Stan?

Stan:

I want to have babies.

Speaker 9:

You want to have babies?

Stan:

It's every man's right to have babies if he wants them.

Speaker 9:

But you can't have babies.

Stan:

Don't you oppress me.

Judith:

Here, I've got an idea. Suppose you agree that he can't actually have babies not having a womb, which is nobody's fault, not even the Romans', but that he can have the right to have babies.

Speaker 13:

Good idea. Judith.

JOHN DICKSON EDITORIAL

Monty Python's sketch about Stan's right to be Loretta gets at the extremes of the debate surrounding gender dysphoria, from those who are openly critical to those who see it as an opportunity to express sympathy. In his book, *Understanding Gender Dysphoria*, Mark Yarhouse says our response to the issue will emerge from the frame of reference we bring to the discussion. He talks about three lenses through which people tend to view this stuff. The first is the integrity framework, the view that there is something sacred about maleness or femaleness, which comes from the creator and is made clear in the opening chapter of the Bible, "God made them male and female."

Professor Mark Yarhouse:

So the integrity, I was using the language of people who I thought represented the view. So the person I was quoting was a theologian who talked about the integrity of male-female differences that God

intended at creation. So proponents here tend to draw from Genesis 1, Genesis 2 stories of creation. And so when you think about God laying the parameters for what would be a covenantal understanding of marriage between a man and a woman. So that sexual behavior that resides within that relationship is morally permissible and outside of it is morally impermissible, you have this male-female distinction. And so adopting a cross gender or other gender identity is thought to go against the integrity of those differences that God intended at creation.

Professor Mark Yarhouse:

So you have more of an emphasis on what is God's creational intent. And so ministry or counseling might then come out of, how do we restore creational intent, and what does it look like to help people have a gender identity that corresponds with their birth sex? That's kind of that first lens. I would say the people who say things like, "Hey, this is willful disobedience," tend to come out of that framework. Like it's a series of bad choices, if you could make better choices, this would resolve.

John Dickson:

Yeah. And then there's the disability framework.

Professor Mark Yarhouse:

So the disability framework is seeing these experiences of gender identity as variations that occur in nature. And so over several dozen or several hundred cases, whatever we determine prevalence to be, you would imagine that there would be variations in gender identity that would be experienced from time to time. So those would be non-moral realities that you might respond to more with compassion. So something like, likened hearing loss or something like that. So it's not something that you would say to the person, "You made a bad series of choices that got you here, now you have to make these better choices." You would say, "I'm really sorry that the variations that happen in nature has been part of your experience. I wonder if I could come alongside you and offer you support." So it pulls more empathy forward.

If you're a Christian drawn to this, you're drawing more on the story of the fall in Genesis 3, because the Christians would say, "Well, why would these variations occur in nature?" Well, nature's fallen, so that's why. So it's not like the disability lens doesn't believe in Genesis 1 and 2, or the integrity lens doesn't agree with Genesis 3, but they're highlighting different things in their approach to ministry where I think the disability folks would say, "How do we help someone live and grow in spiritual maturity with a more enduring reality of a discordant gender identity?"

John Dickson:

And the third is the diversity framework.

Professor Mark Yarhouse:

Yeah. So this is where society is rapidly moving. It's where my field psychology is. And so the idea here would be when you think of diverse gender experiences, they're not a moral concern to be corrected, they're not a condition to be empathized with, they are a reflection of a culture that we should be

celebrating. And so we think of diverse gender identities, part of a people group, transgender community as a whole part of the larger LGBTQ community and culture. And so it has a very affirmational position. That's I think very compelling

JOHN DICKSON EDITORIAL

Mark reckons that all three frameworks contain some truth and that they should in a way be combined. His starting point as a believer in the creator and the Bible is that biological sex is real and intended.

Professor Mark Yarhouse:

I think the biblically faithful starting point comes out of the integrity lens. I do think that reading God's creational intent is the right starting point and understanding that, but I think that it's ministry approach has fallen far short in empathy and compassion for people. And the expectation that you sort of restore creational intent has I think done great harm to some people. And so I think what the disability lens brings to the table is much more compassion, much more empathy. It asks a better set of questions about how do we help people grow in maturity, grow in spiritual depth, and their own Christlikeness with a more of an enduring or a besetting condition rather than trying to kind of manipulate the condition back to creational intent.

And then what the diversity lens does is it offers a sense of identity and community that the other two lenses don't really address to people's satisfaction. People don't like being thought of as having, you know, that this is willful disobedience because they know they haven't chosen to experience their gender the way they experience it. And I don't know that they always respond really well even to... I mean, some do. Like, I have this condition, I have this experience, and they'll talk more freely about gender dysphoria. Whereas, the mainstream of the transgender community defines that kind of phrasing unhelpful and it sort of pathologizes them in ways that they don't find very affirming.

And so what the diversity lens does is it addresses identity, transgender, it addresses community, you're one of us. And I may disagree with the answers that come from that lens, but I have to at least recognize that to the vast majority of people in the transgender community, it's addressing something about who I am and of what community am I a part that the other two lenses aren't addressing. So if you're a proponent of the other two lenses and you want to integrate the best of the three, you have to find a way to address identity and community because that's a very compelling answer from the diversity lens.

JOHN DICKSON EDITORIAL

Mark's way of thinking encourages Christians and other people to sympathize with, that is to love and respect transgender people and be in community with them while also maintaining that biological sex is true and good. In his view, gender dysphoria is part of this fallen world. It's where two good things, a male body and a sense of womanhood, or the other way around, a female body and a sense of manhood are mismatched, but that doesn't in any way diminish a trans person's full dignity as a human being, just as the various mismatches I experience between the ideal and my lived experience don't diminish my dignity. Finding a way to hold convictions about the goodness of biological sex while showing compassion to those who experience their biological sex as alien is the goal of Professor Yarhouse's important project.

John Dickson:

The plea in some parts of society is that a boy who transitions to a girl must be thought of as a girl, you know, transgender women are women, full stop. Are you comfortable with that language, that plea or not, and why?

Professor Mark Yarhouse:

Well, I think this raises a number of questions in a diverse and pluralistic society where we're just going to have differences of viewpoints here. So the question of, are you a real woman, are you the same kind as this type of a woman is more of an ontological question about the nature of reality and how a person understands what it means to be a woman, what it means to be a man. And there are going to be different answers to that because we have different epistemic or epistemological understanding. So epistemology is how you know things to be true. And so Christians, we draw on special revelation, general revelation. Other people have different ways of knowing truth claims that they make. And the whole point is we live in diverse and pluralistic culture. So if we're going to have differences, it's going to land on things like this.

And so it seems to me that rather than argue, that we all have to view this the same way. It has to be this conclusion that we all reach, we all agree to, I think is unrealistic from the very starting point of saying we live in a culture of great diversity. That diversity is for understanding of forms of life, how people live the life that they lead, how we understand basic concepts around gender and gender identity, ontological commitments, epistemic commitments. I mean, that's the nature of a pluralistic culture. We're going to have to agree to disagree on some things.

John Dickson:

Yeah. So am I picking up that you are okay with, in fact, maybe you'd encourage say Christians who believe a classical view of these matters, it's okay for them privately to think that a transgender woman isn't a real woman and yet to interact with that person for the sake of their good as a woman, am I right? My thinking about this person doesn't have to shift the conviction about biological sex doesn't have to shift, but my interactions will be flexible and gracious and full of love.

Professor Mark Yarhouse:

Well, certainly the latter. I mean, you're certainly going to be viewing them as made in the image of God, that God has a deep desire and love for that person, wants a relationship with that person, may already have a relationship. That person may be a Christian, right? So there's all kinds of layers of complexity to this. And you could have your own view about what it means to be a woman and what it means to be a man and what it means to think about different truth claims about that and know that there's not consensus within the transgender community about that. There's different opinions about the very question you asked me. It doesn't have to be a non-Christian conversation. There's a number of different voices chiming in on those questions.

So I would rather us listen a little bit more as to why there's such diversity of thought here and what are the grounds for the diversity of thought and why we reach different conclusions, but to do it with charity,

of course, to do it with a sense that God makes people in his image and loves people. And God graciously loves me and invites me into these conversations as well.

JOHN DICKSON EDITORIAL

From Dana's perspective, a little compassion can go a long way.

Dana Pham:

I'm a Catholic myself. I go to traditional Latin Mass. And from what I've seen, some Catholics, for example, will try to be as charitable as possible. They may not necessarily understand that they don't get too hooked up into these debates and get emotional about it, but they try to be as loving, as charitable, as accommodating as they can without compromising on their principles. And I think that's quite a reasonable approach to take. And of course, I've come across Catholics and other conservative Christians who "want to Bible bash" me with verses, or they want to obsess over what they think are my body parts or what my DNA says. And for them, it's such a narrow focus that I'm not sure it's exactly Christian to be very focused on very specific things about the human person. Because when we look at the human person and if we want to respect the dignity of the human person, we have to look at the entire package, not what the genetic says, for example, because that's very materialistic.

John Dickson:

What would you say to someone who feels that the Bible's opening statement about human beings, that they're made in the image of God, male and female, he made them? That statement is backward and frankly harmful.

Professor Mark Yarhouse:

Yeah. So I do think a number of commitments that Christians hold are now being pitched as oppressive. They're part of a structure of authority that's oppressive to other people, and sometimes they have been. So I think Christians could be humble enough to begin with, saying that has been the case, we have sometimes capitalized on some of those power structures and claim them or hung onto them in ways that have hurt people. But I think it's okay to acknowledge that Christians hold that there are these distinctions that God intended at creation, but because they're intended at creation, doesn't mean it's everybody's experience. Because we live in a fallen world where the fall would touch all of creation, including our sexuality and gender in ways that complicate this part of a person's life.

And to say that or to say that those experiences exist isn't to take away from Christian teaching, but it's to sort of bring more into a fuller conversation about Christian teaching. There's four acts to the biblical drama. There is creation, there is the fall, there is redemption, there's the consummation of all things. So to think about it through those four acts, I think would be a better way to do that than to just land on creation as something I'm going to argue for, and then wield it as a weapon against another person. That's not how I want to relate in society.

John Dickson:

Yeah. And it struck me as you were talking that the very next verse says to the male and female, “Multiply, be fruitful and multiply.” As if that's the expectation of every male and female. But of course, we all know that isn't the experience of every male and female.

Right. And for some people, they're not able to. So is there an indictment against them? Of course not. God's heart is very tender towards them, and yet people forget the diversity of experiences. We have this side of creation during a fallen state that is being redeemed.

JOHN DICKSON EDITORIAL

Mark says it's important to remember that in most cases of gender dysphoria, you're not dealing with a placard-raising activist.

Professor Mark Yarhouse:

You relate to activists differently than you do the average person, your neighbor, your coworker, who's navigating transgender experiences or gender identity or the person who experiences gender dysphoria. So I think being nimble as a Christian and sort of how you relate to different people, some for whom this is their political identity, and this is activism. For others, this is their personal identity and they're your neighbor. And still for others, this is their private identity, and it might be distressing to them or something that they're working out right now. They're trying to figure out how to resolve it. They may or may not invite you into that conversation. But I think you'd want to as a Christian sort of think, where is my area of ministry? What's God calling me to? And most of us aren't engaging with activists, most of us are engaging more with a neighbor, extended family member, those types of things.

And there, I think you relate to people the way you do anybody whose individual or group characteristics are such that you're not that familiar with them. You already have this skillset. You do this with people who aren't Christians, for example, you do this with people from different backgrounds than you. So you're just applying that skillset as a Christian to people whose experience of their gender differs from you. It's a demographic characteristic that you're not that familiar with. So ask them about it. If it's respectful, be curious, be in relationship, walk alongside them as you would any other person in your life.

I think of a 17-year-old who came to see me with her mother and father, and they had been to three pastors in a pretty rural, conservative part of the United States. And each of the three pastors, the mother relayed to me, had said that their daughter's experience of gender dysphoria is willful disobedience. That's what's causing this. She is willfully disobedient to God. The mother was just beside herself, just in tears, trying to understand what was happening, because the only sources of authority she had were saying, this is the way to think about your daughter.

And I was the first Christian in any sort of position of authority in her life to say, “I don't think that this experience, your daughter's reporting is willful disobedience.” From everything I'm seeing, she found herself with her experience of her gender at this age and we kind of traced the beginning of it and the course of it and the challenges that she was facing. And I remember the mother just broke down into tears at that moment and just didn't have any other frame of reference for this conversation than what three other people in authority had told her. And so it didn't answer all the complex questions of where to go from there, but it certainly thickened the plot for her and for her daughter.

JOHN DICKSON EDITORIAL

I'm incredibly grateful for my conversation with Dana. And if you're listening, thank you so much. She assured me no question was off limits. She just wanted there to be more understanding. So I put to her a question that really comes from my own reflections on this issue over the years. I do think bodily reality matters, that biology is good, that the creator intended it. And so I guess I've got sympathy with the so-called conservative take on transgender to the degree that our discourse dilutes the good biological reality of male and female, to the degree that some insist I have to think of sex and gender as fluid. I oppose the new gender ideology, but does that mean I'm against using people's preferred pronouns? Do I oppose the inclusion of trans people in my community, my church? No. And so I guess this is where I let my more conservative friends down a bit.

I find myself happy to hold a theoretical conviction and yet not follow that conviction through to its every logical expression in our messy world. I'm content to interact with a transgender person like Dana in accordance with their perception, because my convictions about our shared humanity and Christ's compassion seem to me to be just as important as my convictions about bodily reality. The only caveats I have, and you can take or leave this is where showing respect and care for transgender people has the real potential to harm others. I am reticent about transgender women in elite female sports. This is where our care for one important group takes away from another important group.

Another example would be transgender women in female prisons. Already, there are numerous examples of females being harmed by male-bodied transgender inmates. As The Economist recently pointed out, "Putting trans women in female prisons sets up a clash of rights. The policy is likely to create more problems than it solves." So I guess at that point, I'm going to annoy my more progressive friends. I'm sorry. But back to my final question to Dana and her beautiful response, which I think points the way forward.

John Dickson:

I want to ask you, are you okay with people, let's say conservative Christians who give you all the support and friendship that you would want and expect around pronouns and change rooms and all that sort of stuff, but who nonetheless believe that you are a man, not a woman? They don't argue about it, they don't bug you about it, but are you okay with them treating you graciously on the one hand, but knowing in their heart that you are a man who is dressing and presenting as woman?

Dana Pham:

I'm okay with that because we all have our own worldviews, our own ideologies, our philosophies, however we perceive the world or we think the world works. We all have our own opinions. Everyone's entitled to their own opinion. An opinion becomes unproductive when it's presented to others in a way that isn't well considered, that then becomes a problem. So I would much rather a conservative Christian who ask a range of questions politely about my trans experience, what they think about gender theory, what they think God has to say about male and female, he created them. Like, you know, when they ask these questions, you can kind of tell, but they ask politely because they genuinely want to know and understand, not so they can then all of a sudden agree with gender theory, because then that's just dishonest, and I'm not really into that.

Dana Pham:

I'm happy for them to ask those questions in a charitable way. I'm okay with it. And I have Catholics and other Christian friends who they may not bring it up with me, but I can tell because I do see what they post on Facebook, or they might bring it up with me because they're really curious and we can have a conversation, and some of them I've had. And they don't necessarily walking away thinking because they're now friends with me, they now have to get it on board with gender theory. They don't necessarily walk away thinking like that, but at least they acknowledge, actually this world's very complicated and there's so much more that I need to learn, as in they need to learn, they realize, and they just want to have dialogue.

Professor Mark Yarhouse:

There's one woman that she is transgender, she's Christian. I was interviewing her for a study we were doing, and she had not transitioned. So I'm going to use she/her because that's how she introduced herself to me, but she did present as androgynous in her clothing and hairstyle and things like that. I was asking her about her coping strategies. Like obviously, she was keeping her hair a little bit shorter, wore some baggy clothing, and had this kind of androgynous presentation. But anyway, and she said, "Actually it's not a coping strategy. The most helpful thing for me is that my family of Christians believes me." And so what she went on to say is that many people in her shoes, their family, loved ones, they don't believe that this is real, that they really experience this. It's kind of made up thing or manipulation or whatever it would be. It's not a real thing.

And so when she said, "This is real. My family believes me. It lets me cope with this in all these other different ways. I can not go to events, not go to a wedding, not dress in a hyper feminine way, and no one's manipulating me." No one's saying, "We really need you to show up as the woman God made you to be." No one's over spiritualizing it, no one's doing these things. And so that wasn't a large faith community, that wasn't a church where she was flourishing, but it was in her family, and you've got to start there. If you can't have that level of love and support from Christians that you were raised by that you're part of, this family and kinship network, there's no chance then I think for how that would play out in a church with multiple families convening together. And so it gave me great hope that there was a possibility for them.

Now, that situation, it's different. They hadn't fully transitioned. It was a different kind of experience. But I wanted to really underscore the point that being able to walk alongside someone and say that I see you, I believe you will go a long way in ministry and being in relationship with that person in the years to come.

John Dickson:

Mark Yarhouse, thank you so much for your time.

JOHN DICKSON EDITORIAL

If anything we spoke about in this episode has brought up issues for you and you need to talk to someone, please know that you can. If you or someone you know needs help, there are some excellent services ready to talk to you right now, literally right now wherever in the world you are at whatever

time. In Australia, go to lifeline.org.au. In the U.S. suicidepreventionlifeline.org, or in the UK, go to samaritans.org.

I'm sure there are plenty of questions on all of this. So if you've got one, I'd love to hear them, and we will try to answer them in an upcoming Q&A episode. You can tweet us, @Undeceptions, send us a regular, old email at questions@undeceptions.com. Or if you're brave, audio record your question for the show by heading to undeceptions.com and just clicking the send voicemail button. I'd love to hear from you.

We're also planning a special Q&A session for our Undeceptions Plus subscribers. Our Undeivers, as we call them. I'll be in the special Undeivers Facebook group in the next few weeks to try and answer any questions that come up from this episode. See you there.

If you'd like to be part of that and get access to tons of other extras, you can become one of our Undeivers. Just go to undeceptions.com and click the big link, Become an Undeiver. This Undeceptions Plus service will set you back just \$5 Aussie a month. That's £2.73 for British listeners. And every pence goes back into this show, so we can keep bringing you this kind of content. And if you don't want to become a plus member, but still want to support us, please head to the website and click donate. We don't make a cent in this podcast, but with your help, we are almost covering costs. Please consider donating. Thanks so much.

Next episode, we're chatting to one of the world's leading contemporary artists and also to an author and pastor who wants to help us see the beauty that such art can bring into our own lives and how it points beyond. See ya.

Undeceptions is hosted by me, John Dickson, produced by Kaley Payne, and directed by Mark Hadley, editing by Richard Hamwi, social media by Sophie Hawkshaw, and admin by Lyndie Leviston. Special thanks to our series sponsor Zondervan for making this undeception possible. Undeceptions is the flagship podcast of undeceptions.com, letting the truth out.

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