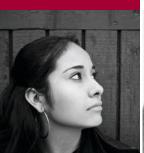
# SOCIAL WORK CHRISTIANITY

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# SPECIAL ISSUE: CHRISTIANITY AND SOCIAL WORK PRACTICE WITH LGBTQ CLIENTS

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# Gender Ideology and the Truth of Marriage: The Challenge for Christian Social Workers

### Paul Adams

This essay explains and defends both a welcoming and accompanying approach to LGBT people and also a comprehensive rejection of gender ideology as false, an attack on marriage, families, and especially children, and incompatible with Christian orthodoxy and the Judeo-Christian tradition. The article explores the challenge to Christian social workers of being truthful, patient, and present in working with clients who identify as LGBT while rejecting gender ideology.

Recent extensions of gender ideology's influence have changed the terrain for Christians in social work. There is still the challenge, for example, of working with adolescents and their families when a youth "comes out" to his parents—when coming out may range from acknowledging same-sex attraction to an embrace of a lifestyle and identity in which such desires are acted out and when the family response may range from loving embrace to expulsion. The issues involved there may include risk of homelessness, suicidal ideation and attempts, drug use, and risky sexual behavior. The tasks for social workers may be manifold, and there may be much work to do with the family system and dynamics as well as with the individual youth.

These matters are taken up elsewhere in this special issue. Here the focus is on the challenge for Christians in social work in the face of the increasing adoption of gender ideology, in law and regulation, as well as in the social work profession, as a new official orthodoxy.

The challenge is twofold. It includes how to practice ethically and competently with individuals who embrace the new orthodoxy as well those who do not; and secondly, how to protect children and families from harm, as well as defending practitioners' conscience rights and duties in

the face of the growing attack and the failure, perhaps uniquely unbending among professional organizations, of the National Association of Social Workers (NASW) to defend their own members in this regard (Adams, 2011). Meeting the challenge requires clarity about the relation of the underlying ideology—variously called gender theory, sexual orientation, and gender identity (SOGI), gender mainstreaming, or simply, as here, gender ideology—to its contrast, as a comprehensive worldview, that is, the prevailing Christian (as well as Jewish) orthodoxy over previous millennia (George, 2001).

# Three Stories and Two Contrasting Visions

Consider these stories, based on actual events, which reflect some current transgender issues or dilemmas.

- 1. In the first case, a boy of ten years old, in answer to a question about what he wants to be when he grows up, answers, "A girl." Upon further inquiry, the boy's father learns that at school that day the boy's class had been taught that gender was a matter of choice or feeling, unconnected with a person's sex, and that they could decide or determine for themselves that they were "really" of one of, in principle, any number of genders that were culturally associated more or less closely with either biological sex.
- 2. In the next example, a boy of thirteen is brought by his parents to a mental health center. His parents insist that social workers and medical staff address him with feminine pronouns. They want him treated to inhibit puberty, with the idea that he can choose (as most patients do in such circumstances), to receive further chemical and surgical intervention to achieve a body that more closely resembles that of the opposite sex.
- 3. In the final case, it is late November in Boise, Idaho, 14 degrees with a foot of snow. "Kim" was biologically male, but identified as female and dressed as such, with pink sweat suit, pigtails, and makeup. Kim came to Interfaith Sanctuary, a shelter run by a collaborative of the Roman Catholic Diocese of Boise, Mormons, Lutherans, Muslims, Jews, Methodists, Mennonites, and a humanist organization. The only other shelter in the vicinity, run under evangelical Christian auspices with very strict admission rules, had turned him away.

In the third case, there is an emergency situation that is potentially a matter of life and death. Christian charity demands an unconditional response, welcoming Kim out of the cold, accompanying him in his brokenness (even respecting his preference for feminine pronouns), listening to him and discerning his situation, with a view to integrating him healthily into his community. What kind of community that is and what constitutes health in this case remain matters for future exploration, but not while he is in danger of freezing to death.

The first two cases are not so clear. They pose particular problems for social workers and social work values. They involve children who are being encouraged by at least some of the adults in their lives to accept and "go with" their feelings that they are in some sense "really" of the opposite sex from that of their birth and biology. In one case, the parents are shocked by what the school is teaching and encouraging. In the other, the parents are actively supporting and encouraging efforts to bring the boy's body into line with his feelings. In some 80 to 95 percent of such cases, in the absence of the kind of adult "encouragement" described here (and promoted on internet sites and chat communities)—that is, with no intervention beyond watchful waiting—the "gender dysphoria" (GD) is resolved by late adolescence and the young person accepts the sense of his own sex and identity that corresponds to his birth and biology (American College of Pediatricians, 2016; Cohen-Kettenis, Delemarre-van de Waal, & Gooren, 2008). Social contagion—the promotion and normalization of transgenderist ideology in the child's environment at home, school, or in the media—may itself be a significant cause of gender dysphoria. Similarly, chemical and surgical interventions aimed at altering the body into something resembling more closely that of the opposite sex may inhibit efforts—even when they are not prohibited by law—to understand and treat the mismatch between sex and gender feelings by helping clients adapt to and accept their biological sex.

The origins and nature of gender dysphoria are contested. Some medical practitioners and researchers variously regard gender nonconformity as a normal variation of gender expression, a medical condition, or a psychiatric disorder in which the emphasis may be on the dysphoria or distress rather than the nonconformity. In the absence of a clear understanding of the etiology, these views influence the management approach (Olson-Kennedy & Forcier, 2016). Drescher and Byne (2012) note the sparseness of evidence to support one approach as opposed to another. "Presently, the highest level of evidence available for selecting among the various approaches to treatment is best characterized as 'expert opinion.' Yet, opinions vary widely among experts and are influenced by theoretical orientation and assumptions and beliefs regarding the origins of gender identity, as well as its perceived malleability at particular stages of development" (p. 501). Some studies have suggested that cross-gender identification is not simply a subjective state

of mind, but has a basis in the disjunction between a female-type brain in a male body or vice versa (Sapolsky, 2013). In rare cases—intersexuality (as opposed to cross-gender identity where there is "no discernible neuroendocrinological abnormality")—biological features of both sexes are present (Bostwick & Martin, 2007; Intersex Society of North America, n.d.). A careful review of the evidence in this area finds "inconclusive evidence and mixed findings regarding the brains of transgender adults" (Mayer & McHugh, 2016). Diamond and Rosky (2016) conclude from their scrutiny of the scientific and legal literature that to argue that gender dysphoria is innate is unscientific, unnecessary (for protection of "sexual minorities"), and unjust. One group of physicians, the American College of Pediatricians (2016), reviewing the literature and in view of twin studies, concludes that gender dysphoria is neither innate nor immutable. They emphasize family dynamics and social contagion rather than interventions aimed at changing the body and its normal development:

There is no single family dynamic, social situation, adverse event, or combination thereof that has been found to destine any child to develop GD. This fact, together with twin studies, suggests that there are many paths that may lead to GD in certain biologically vulnerable children. The literature regarding the etiology and psychotherapeutic treatment of childhood GD is heavily based upon clinical case studies. These studies suggest that social reinforcement, parental psychopathology, family dynamics, and social contagion facilitated by mainstream and social media, all contribute to the development and/or persistence of GD in some vulnerable children. There may be other as yet unrecognized contributing factors as well.

What appears to one professional as competent and ethical practice with transgender individuals suffering from gender dysphoria—namely the use of chemical and surgical interventions to inhibit puberty and reshape a patient's body to resemble that of the opposite sex—will appear to others as a particularly callous form of child abuse with irreversible effects and unknown harms, in violation of the fundamental medical maxim and principle of bioethics, "first, do no harm."

Christian social workers confront dilemmas like these in a particularly hostile environment. They seek to integrate the demands of love and those of truth in such situations where the prevailing ideology, at least among those in law, academia, helping professions, politics, and media, reduces both love and truth to subjective feelings. The conflict between orthodox Christian teaching for two thousand years and the current ideology of sexual progressivism is fundamental and intense. It is a world in which,

in the words of the title of Eberstadt's (2016a) recent work on religious freedom and its enemies, "It's dangerous to believe." Eberstadt draws on historical experience of witch-hunts and drives to extirpate heresy to find historical analogies to what she observes in the West. She describes our current situation as a relentless and virulent anti-Christian campaign to coerce traditional religions and believers to change their beliefs—or as Hillary Clinton put it, laws must be backed up with political will—"And deep seated cultural codes, religious beliefs and structural biases have to be changed" (Thiessen, 2016). The political nature of this task to change religious belief was underscored by the series of emails released by Wikileaks that involved Clinton's campaign chairman and leading Democratic political adviser, John Podesta. The messages evinced both a deep contempt for faithful Christians, especially Catholics, and the setting up and funding of front organizations aimed at splitting Catholic laypeople from their bishops and campaigning for changes in doctrine to bring it more into line with current progressive thinking (George, 2016b).

The legal scholar and political philosopher Robert P. George (2001), a professor of jurisprudence who has served on U.S. or presidential councils and commissions on civil rights, bioethics, and international religious freedom, argued that we face, not a clash between religion and science, or between a public political neutrality and personal, faith-based beliefs, but a Clash of Orthodoxies, a conflict between two comprehensive views of reality and morality in the areas of life, death, sex, and marriage, one being that of the Judeo-Christian tradition, and the other being that of secular progressivism. George (2016b) says of the Podesta emails, "These Wikileakspublished emails confirm what has been evident for years. Many elites, having embraced secular progressivism as not merely a political view but a religion, loathe traditional faiths that refuse to yield to its dogmas." Several recent and about-to-be-published works by prominent Christians describe the deep-seated and intense animus against Christians in our culturally post-Christian society and propose ways to respond to the discrimination we face (e.g., Chaput, 2017; Dreher, 2017; Esolen, 2017; for a contrasting, global and more positive view of the "triumph of faith," see Stark, 2015).

To see the orthodoxies in sharp contrast, consider the view each takes of the issues of marriage, sex, and children as well as the underlying assumptions about truth, identity, desire, character, and the virtues, about the meaning, purpose, and direction of life (what in the older tradition is called theological anthropology) in each of these worldviews. In an essay of this length the contrast must necessarily be drawn broadly and schematically, but even in that form may be sufficient to indicate the incommensurability of the two traditions (MacIntyre, 2007). George (2001) contrasts the Judeo-Christian and secular-progressive orthodoxies without any appeal to revelation. He aims to show, as he does in his other work on natural law, marriage, and conscience,

the superiority even in secular terms of the comprehensive view of the world within Judeo-Christian orthodoxy to that of its more recent but no less comprehensive rival. That rival is the "religion"—increasingly the official state religion promulgated and enforced in the courts, education, and media—of secular (or in this context, sexual) progressivism. (On sexual progressivism as a new, evangelical, and intolerant religion, see Eberstadt, 2016b.)

In this briefer treatment, I compare each orthodoxy's views of marriage. I use the teachings of the Catholic Church (for the most part, but not in every respect, common to Judeo-Christian belief as a whole over the past two thousand years) to represent one tradition and gender ideology (the ideology of sexual orientation and gender identity—SOGI) as expressed in law and policy to represent the other. This is not, I argue, a clash between faith and reason, or religion and science, but between two comprehensive views of reality.

#### **Catholic Christian Teaching on Marriage**

Sex, the division of human beings, like many other species, into male and female, each necessary to and completing the other, is fundamental to the Jewish and Christian understanding of the human person. Men and women were created for each other and complete each other biologically (they form individual digestive, nervous, circulatory systems, but only together have a reproductive system). "God created mankind in his image; in the image of God he created them; male and female he created them" Gen.1:27). It is man and woman together who are created in the image and likeness of God

This is the nuptial meaning of the body, of which John Paul II (2006) speaks. God, who is Love, created us, male and female, out of love, and for love. We are called to be a gift for one another, a complete gift of the self, holding nothing back. Marriage is the institution through which the sexes come together in a one-flesh union (Gen. 2:18; Mt 19:6)—in modern parlance, they have sex, a unitive act that has a "generative meaning" (John Paul II, 2006). It is the act through which marriage is consummated and without which it may be annulled; it is the act that is necessary for defining adultery. (These ancient provisions of civil and canon law required a special exception when same-sex marriage was adopted in English law in 2013.) This one-flesh union is the only sexual act ordered to bringing a new person into the world, the natural and normal (but not inevitable or invariant) fruit of that union. In that sense, it is the only true sexual act and the act fundamental to our human participation in God's work of creation and to the survival and propagation of our species.

Marriage varies in many details from culture to culture and one historical period to another, but it is a primordial, pre-political bond rooted

in our biology and nature as human persons. In Christian understanding it communicates God's Trinitarian life and love. But even in pre-Christian and non-Christian cultures, it is tied closely (until recent decades) to the bearing, raising, and educating of children, in which every society has a strong interest. Marriage has by its nature certain features, which can be discerned even without benefit of revelation or scripture. As Girgis, Anderson, and George (2012), Lee and George (2014), and Girgis (2016a; 2016b) argue, marriage by its nature and logic has certain features. It brings the sexes together in a union that is:

- permanent (unconditional, for better or worse, expressing the complete gift of self);
- exclusive (again, an expression of their being each for the other, holding nothing back and vowing their fidelity without mental reservations
- comprehensive—a bodily, emotional, and spiritual union; and
- open to life—rooted in the one and only sex act that can in any circumstances generate new life.

Husband and wife, not priest, are themselves, in the Catholic understanding (which differs in the Eastern Orthodox church and other communions), the ministers of the sacrament of marriage. They consummate the sacrament through the conjugal act, the one-flesh union of man and woman. Marriage enables children to be raised where possible in a natural family by their own mother and father. As evident in the earliest legal codes, long preceding Christianity, marriage creates fatherhood as a legal and social bond and obligation rooted in the biological relationship. "In all observed societies," Scruton (2006) observes, "some form of marriage exists, as the means whereby the work of one generation is dedicated to the well-being of the next" (p.5). Marriage is, in short, the sacrifice each generation makes for the next—it is the gift of self of each spouse to the other and to any children that result from their one-flesh union.

In this understanding, we all have appetites and desires that may correspond more, but often less, to the nuptial meaning of the body. They may be more or less disordered and we may, still in adulthood in some cases, be more or less, in the psychoanalytic term, "polymorphously perverse" (Freud, 1962 [1905], p. 57). As with other appetites and desires, say for food, sexual desires call, in the Christian as well as classical understanding, for the exercise of the cardinal virtue of temperance or self-mastery. In this traditional understanding, our character and identity are not defined by those appetites or desires, but by our mastery of them.

If this is the central case of Christian marriage, rooted in our biological and spiritual nature, what of the exceptions and objections that are commonly raised against this comprehensive worldview—often as if they were knockdown arguments never before thought of? One frequently voiced

objection, repeated no matter how often or cogently it is answered, is that some male-female couples are infertile due to age or disease (and that no couple is always fertile all the time). This objection is supposed to refute the view of marriage as fundamentally about children and the conjugal act that produces them. It is supposed to show that there is no morally significant difference between 1) acts that are inherently, by their very nature, *per se* infertile or inept for generation and 2) those that are behaviorally conjugal acts but that *per accidens* are infertile in their biological outcomes in the given circumstances. The books already cited by (in various combinations) Girgis, Anderson, George, and Lee as well as others deal with all these objections, which nevertheless continue to be raised as if for the first time.

The purpose of this article, however, is not to rehearse these objections and respond to them, but to set out the basic Christian understanding of marriage in the sharpest form to show its contrast, as a fundamentally incommensurable tradition, to the prevailing secularist orthodoxy. That modern secularist view is often presented and understood as the simple and obvious fact of the matter, informed by science and unclouded by primitive superstitions and prejudices. On the contrary, I argue, that view is less coherent and less supported by evidence than the traditional view it seeks to suppress.

# Gender Ideology as Secularist Orthodoxy

Gender ideology, the secularist-progressive alternative to the Judeo-Christian orthodoxy in matters of sex and marriage, differs in fundamental respects in its positions, philosophical assumptions, and practical implications. As ideology it embraces what Haldane (2012) calls the

argumentum ad consummationem, which runs as follows. Major premise: Sexual attraction and love are determinants of human happiness and should be consummated where sincerely felt. Minor premise: You cannot choose to whom you are sexually attracted, and you cannot choose with whom you fall in love. Conclusion: Whether or not they are chosen, attraction and love should be consummated where sincerely felt. This simplistic syllogism (uncritical in its use of choice, love, sentiment, and sincerity) provides the rational foundation for a culture of often unrestrained, promiscuous, and unfaithful, yet indulgently sentimental, coupling. And it undergirds the push for same-sex marriage on both sides of the Atlantic.

As Eberstadt (2016b) puts it, "The first commandment of this new secularist writ is that no sexual act between consenting adults is wrong. Two

corollary imperatives are that whatever contributes to consenting sexual acts is an absolute good, and that anything interfering, or threatening to interfere, with consenting sexual acts is ipso facto wrong."

It is a mode of argument fostered by liberal or radical individualism, a consumerist tendency that defines freedom as absence of restraint. (See Pinckaers, 1995, for a discussion of the alternative view which he calls "freedom for excellence.")

This consumerist individualism creates a sense of "erotic entitlement" (Haldane, 2012) that stands in sharp contrast not only to the Judeo-Christian tradition but also to a way of thinking about the common good in the politics and morality of the founding cultures of Greece and Rome. "In this perspective, institutions such as education, law, and marriage are grounded in human nature and focused on shared life. They are rooted in what joins humans in natural communities, not what separates them into sectional interest groups" (Haldane, 2012). So education is understood, not as entitlement of children to schooling, but as a necessity for society and a benefit to be shared within it. "Similarly, marriage exists for the sake of making and maintaining family life, the roots of which lie in natural complementarities: in male and female of the species joining together one-to-one, with the intention of creating another" (Haldane, 2012).

Just as the individualist ideology implies an entitlement (within certain limits) to express one's sexual desires, whatever they are or wherever they came from, so it defines identity in terms of those desires. What is new is not the behaviors or desires but the defining of identity in terms of them, as if they were equivalent to identities of race or sex. So new terms like homosexuality—extended from its coinage in the nineteenth century as a term for a particular psychosexual pathology—become in recent times a term of "gender identity." The number of genders is potentially limited only by each person's imagination and the willingness of others to treat the claimed gender and its preferred pronouns as real and claiming respect. Homosexuality is complemented by terms like bisexuality and heterosexuality. Even the term "heterosexual community" is used as if there were such a thing (Hannon, 2014).

Gender is originally a grammatical term implying nothing essential about or intrinsic to the object—so sun is masculine and moon feminine in Latin and Romance languages, but the reverse in German. Gender in its modern ideological sense is thus a term well adjusted to the project of delinking sex from marriage and children. It separates sexual attraction (the subjective, mental state) from the natural, biologically rooted, objective relations of husband and wife, mother and father, brothers and sisters, and so on. (In some current and official usage, the term gender is substituted for sex, in part to distinguish it from sex as activity and partly to avoid the binary, male-female sense of the word. So a passport form may ask

your gender rather than your sex.) Gender ideology delinks marriage and children from these natural relations and in some countries replaces them with bureaucratic terms like Parent 1 and Parent 2 so as not to privilege the natural family, now understood as one among many possible "family structures." In some countries and U.S. states, the designation of sex on official documents like passports or driver's licenses may be changed on production of evidence of surgery to change sex designation. In others, it is necessary only to fill out a form. And there is a movement in several countries to remove designation of sex from new passports altogether (National Center for Transgender Equality, 2015; Guardian, 2016). Gender, the sense of myself as male or female (or something else), is thus disconnected from biology.

The sense of the person suffering from gender dysphoria of being, for example, a "woman trapped in a man's body," can be taken literally if we think of the self in Gnostic terms, in which "human beings are non-bodily persons inhabiting non-personal bodies" (George, 2016a; Girgis, 2016a). The real person becomes the non-bodily person inhabiting, trapped in a non-personal body. It then appears reasonable to change that body through chemical castration, surgical amputation, or other measures that make it appear more like what the trapped self feels it is. The aim is to relieve distress by altering the body to match the current sense of self, even at the cost of permanently disabling the reproductive organs, even during childhood or adolescence, when feelings of the moment are apt to seem, but turn out not to be, forever. Such an approach to other kinds of body dysphoria is unthinkable. Imagine treating an anorexia patient with liposuction! (See Fleming, 2016, for an essay by a brave social work student and sufferer from anorexia nervosa, who asks why transgender is an identity but anorexia a disorder.)

The paradox of such thinking about what it means to be a woman is that it runs into precisely the kind of essentialism that modern feminism has fought strenuously to reject. Women are no longer, as feminists and anti-essentialist postmodernists commonly claimed, different from men only in a few body details. Rather the "real woman" that wants out of the man is, so to speak "essentially feminine." She wishes to adopt a full range of what in other contexts would be called socially constructed sexist or at least "gendered" stereotypes—of hair, clothes, gait, voice, and so on.

The "new Gnosticism" is at the heart of the revisionist view of marriage (Girgis, 2016a). It breaks the intrinsic connection between marriage and sex (the one-flesh union of male and female from which new life springs), between the sexes themselves (same-sex marriage dispenses with one of the sexes altogether), between mother and father and their children. The revisionist view severs marriage from all the principles that distinguish it as different in kind from other sorts of friendship. Apart from its source in the givenness

of our nature and biology, from its combined and inseparable unitive and procreative purpose, there is no reason in principle why marriage should be:

- permanent (rather than for as long as the feelings last—"until the wind changes");
- exclusive—friendship is not and does not need to be limited to two adults, as opposed to three, four, or more, as polyamorists reasonably point out;
- comprehensive, including bodily as well as emotional or mental union (why does sex matter, ask elderly sisters living in long-term, financially and emotionally interdependent but non-sexual relationships? (For example, the English Burden sisters, asked, in the wake of the passage of same-sex marriage in England and Wales and faced with loss of their home to estate taxes when one of them died, to be treated like lesbians in terms of inheritance taxes (Neil, 2007); or
- open to life—why does procreation matter, if it's even possible?

#### Truth, Conscience, and Religious Liberty

We have, then, a clash of orthodoxies, with conflicting and contradictory views and assumptions. These are not simply matters in the realm of politics and public policy. They are incommensurably different comprehensive views of reality. Such a clash does not at all mean that "truth is relative" or that claims to truth are just a matter of opinion, or, in the Nietzschean view, of will and power. At stake are conflicting views not only of what is true, but also of the meaning of truth itself. In the mainstream Christian (and Jewish and Aristotelian) view, there is a givenness to nature and to human being and we flourish to the extent that we act in accord with our nature and purpose as rational creatures made in the image and likeness of God. It is a Christian realism that can speak truth to power, be a constraint on power, and resist the temptation to act as if we were little gods unconstrained by an intractable reality.

The Nietzschean view, in contrast sees claims to truth as disguises for the will to power. We see this contrast in the conflicting views of marriage. The Christian understanding bases itself on the truth about the human person—biological, social, spiritual. It is a pre-political reality rooted in Nature and Nature's God, as the opening paragraph of the American Declaration of Independence puts it. In contrast, the revisionist view of marriage sees the institution as a human, social invention that (like the meaning of the universe) we define subjectively, according to the infamous "mystery clause" in the 1992 Planned Parenthood v. Casey Supreme Court ruling, which has been called, not without reason, "the worst constitutional decision of all time" (Paulsen, 2012). In this view, it is not that individuals

define marriage for themselves, but that marriage is defined by those with the will and power to do so. That is, marriage is whatever the state says it is and enforces through law.

These contrasting approaches to truth and reality have far-reaching consequences for the lives of social workers and those with whom we work. We see this in the question of the claims of conscience, an area where no professional organization that I have discovered does less than NASW to protect its members (Adams, 2011). Here too there are two sharply contrasting views of the nature of conscience itself and therefore of its claims to be respected and not unduly burdened by the state. Each view has a very different implication for the relations of state and civil society, of the proper limits of the state's power to impose its will.

In the first view, embraced by the *New York Times* (2012) and the late political scientist Brian Barry (2002), conscience is an expression of personal preference, no more entitled to special protection and consideration than any other private preference simply because those who hold it are Christians. Indeed, according to the editors of the *Times*, the claim of Christians to be exempt from undue burdens on their conscience is no more than an attempt by Christians (especially Catholics) to impose their will on society. The "real threat to religious liberty comes from the effort to impose one church's doctrine on everyone." (These arguments are effectively refuted in an article by Moschella, 2012.)

In short, I may prefer strawberry ice cream or driving above the speed limit, but those preferences do not entitle me to impose my will or press my claim to exemption from the law. It is this kind of view of conscience that informs the ubiquitous contrast in social work ethics between professional duty and personal "values" (i.e., beliefs or preferences). In that view, one's personal values must be left at the door. Conscience must give way in professional practice to the demands of professional duty and the Code of Ethics.

In the traditional Christian understanding, in contrast, that view is incoherent and trivializes conscience. Conscience is a practical judgment, all things considered, about the right thing to do. Conscience is the supreme and final arbiter for an individual's actions precisely because it represents the agent's best ethical judgment, all things considered. In social work (and in life generally), we do wrong both when we act against our conscience and when we follow a badly formed conscience into evil actions, thinking they are good or neutral. It is the final conclusion after all is considered—including, for example, the Code of Ethics, the law, and the employer's wishes. It cannot coherently be reduced to one matter to be taken into account among others, to be dropped at the office door if need be. What is left to be considered after everything has already been taken into account (Adams, 2011; Novak & Adams, 2015)?

Conscience represents a truth claim. It is not a conversation stopper, like a preference for strawberry ice cream or a report on inner voices. Citizens should not be compelled to do what they believe as a matter of conscience they ought not to do. Conscience imposes a moral burden, as the supreme and final arbiter of our actions, that the state ought to respect and only override for compelling public reason (e.g., when an individual's conscience directs him to perform human sacrifice or kill apostates) and when there is no less restrictive or coercive option. It should not force people to speak lies or celebrate evil.

But conscience is not only a matter of freedom from coercion by an overweening state or bullying professional association. It involves America's "first freedom," that of the free exercise of religion. As Thomas Jefferson (1809) put it to the New London Methodists in 1809, "No freedom in our Constitution ought to be dearer to man than that which protects the rights of conscience against the enterprises of the civil authority." Conversely, no claim should alert us more clearly to the threats of a "soft totalitarianism" (Mahoney, 2016; Legutko, 2016) than the dismissal of the claims of conscience and religious freedom, so common among gender ideologists and marriage revisionists, as "code" for discrimination.

And religious freedom is a matter of truth, not simply freedom from constraint. In the words of Benedict XVI's Message for World Day of Peace 2011: "Religious freedom should be understood, then, not merely as immunity from coercion, but even more fundamentally as an ability order one's own choices in accordance with truth."

#### Truth, Science, and Tolerance

"For decades," Girgis (2016a) writes, "the Sexual Revolution was supposed to be about freedom. Today, it is about coercion. Once, it sought to free our sexual choices from restrictive laws and unwanted consequences. Now, it seeks to free our sexual choices from other people's disapproval." The phenomenon Girgis notes here is not unique to sex and marriage. It is common to modern ideologies that rely on state power to enforce a view of reality that contradicts reality itself and the lived experience of masses of people. As gender ideology becomes more ambitious and far-reaching in its efforts to remake humanity and the human person in ways that deny the realities of marriage and family, so it becomes more coercive and intolerant of dissent.

Morabito (2016) points out how the "de-sexing of society" has profound implications for human beings and human society. "A de-sexed society is a de-humanized society." It is one based on denial of the reality of sex and family, the imposing in New York City and on some campuses of the use of made-up pronouns as preferred by the person addressed, the

replacement of the biological and objective language of sex with the desexed language of gender. "Every single cell of you," she says, "has either 'male' or 'female' written into its DNA, but the law refuses to recognize such categories. Such laws will only recognize an infinite, immeasurable 'gender spectrum,' your place on which is determined only by your mind."

According to Morabito (2014), "This puts us on the path to banning recognition of the reality that every single human being exists through the union of one male and one female. There are no exceptions to this reality. You exist as the union of the two opposites through whom you were created."

In such a scenario, the state controls all personal relationships right at their source: the biological family. The *abolition of family autonomy* (emphasis added) would be complete, because the biological family would cease to be a default arrangement. The "family" would be whatever the state allows it to be. Again, in the de-sexed world of gender politics, all personal relationships end up controlled and regulated by the state.

Elites seeking to implement such massive schemes of behavior modification on the whole population, to remake human nature and society, look for ways to accrue more and more power over the mediating institutions of civil society, including marriage and family, religion, and other associations that mediate between individual and state. The more completely the culturally dominant become unmoored from the intractable realities of the human condition, the more they have to rely on the coercive apparatus of the state to enforce their view of the world and the more intolerant they become of any dissent. The more successful they are in imposing their will, the more they push the limits of absurdity—and the more coercion they need to do so.

Orwell (1949) captures this dynamic well in his dystopian novel, 1984:

In the end the Party would announce that two and two made five, and you would have to believe it. It was inevitable that they should make that claim sooner or later: the logic of their position demanded it. Not merely the validity of experience, but the very existence of external reality, was tacitly denied by their philosophy (71).

What Kersten (2016) calls the "transgender crusade" has shown this link between coerciveness and unreality:

Today's transgender crusade can be seen as the latest manifestation of this denial. It is inherently authoritarian, as other latter-day Gnostic projects have been, because it has to be. Nature and common sense oppose it.... Critics who persist in drawing attention to reality must be discredited or silenced. Otherwise, the Gnostic fantasy world crumbles.

Bradley (2016a) describes the speed with which the Obama administration moved from the promise to "restore science to its rightful place" in his Inaugural Address to an ever more extreme and intrusive "sex-driven war on science" in recent years. Obama long argued for "gay rights" and same-sex marriage on the basis that sexual orientation was an inborn characteristic. Refusing to defend the Defense of Marriage Act, his Attorney General, Eric Holder, referred to a growing scientific consensus that sexual orientation was immutable. As Bradley notes, "That claim was unsupported by scientific evidence when Holder made it. That claim is certainly false, as a recent review of the scientific literature by Clifford Rosky and Lisa Diamond [Diamond & Rosky, 2016] (neither a friend of traditional sexual ethics) conclusively shows."

Many or most of the assumptions on which policy and legislation on LGBT issues have been based appear in light of meta-analyses and more recent research to be unsupported by scientific evidence. For example, early studies that purported to show that there was no difference outcomes between children raised by same-sex couples and those raised by a mother and a father; or that the health disparities between LGBT youth and others were explained by stigma; that gender identity is an innate, fixed property of human beings that is independent of biological sex — that a person might be "a man trapped in a woman's body" or "a woman trapped in a man's body"—have been shown to be methodologically, deeply flawed or unreplicable. These assumptions are not supported by scientific evidence (Mayer & McHugh, 2016; Regnerus, 2012; Regnerus, 2016; Sullins, 2015). But they are still believed and propagated with undiminished fervor and determination.

Despite the evidence that sexual orientation is not immutable, Obama called for an end to "conversion" therapies for same-sex attracted or transgender youth, taking on himself and the state the competence to determine what treatments were acceptable (e.g., hormone and surgical intervention) and what were not (psychotherapy)—a policy already enacted in some states. In fact, Bradley (2016a) explains, the President

...would ban a lot more than any sexual orientation change regimen. He would effectively make it illegal for a psychologist or psychiatrist [or social worker] to discuss with anyone under eighteen the conflicts between his or her sexual feelings and that person's own long-term goals and interests. The president would brush aside a teen's expressed desire to develop stable heterosexuality. He would ignore *overwhelming scientific evidence* (emphasis added) that

the vast majority (80-90 percent) of teenage boys and more than half of teenage girls who report same-sex attractions (and in some cases, a homosexual or lesbian identity) turn out by age twenty-five or so to be peacefully heterosexual, in favor of a policy to make professional assistance during these passing difficulties illegal. The President's policy would entail that the traumas and pathologies that so often underlie these expressions of homosexuality and lesbianism be left untreated, all so that the afflicted youth can be "affirmed" in their self-reported sexual identity.

This approach, favored by many in social work, may in effect deny mental health treatment to same-sex attracted and transgender youth, attributing (again without evidence) the large discrepancies in mental health and risk of disease and suicide between heterosexual and LGBT youth, to the stressors resulting from the prejudice such youth face in society. Inconveniently for this narrative, prevalent since the political decision of the APA Board in 1973 to remove homosexuality from its list of disorders, such discrepancies in health and mental health prevail in countries that have been the most supportive, culturally, institutionally, and legally, of LGBT youth. In a much-cited study suggesting the profound negative impact of structural stigma on the differential mortality of LGBT populations, Hatzenbuehler et al. (2014) reported an average of 12 years' shorter life expectancy for sexual minorities who resided in communities thought to exhibit high levels of anti-gay prejudice. They used data from the 1988-2002 administrations of the US General Social Survey linked to mortality outcome data in the 2008 National Death Index. But Regnerus (2016) used ten different methods to replicate the findings, including a more refined imputation strategy than described in the original study. The attempt to replicate the findings failed. The original study's conclusions were not supported.

In the case of transgender youth, there is also a lack of scientific evidence that treating boys as girls (and vice versa) solves their underlying problems. Bradley (2016b) concludes that the "compassionate and professionally competent approach to treating those with gender dysphoria is to help them to solve their underlying problems, and so to help them to come to live peacefully as the male or female that God created them." This requires the continued research and development of mental health approaches and not their suppression.

# **How Should Christian Social Workers Respond?**

There are at least three ways in which Christians in social work can and do respond to these challenges or threats to their clients, to society, and to themselves as practitioners.

# 1. Subordinate conscience to "professional values."

The first is full-scale surrender to the new orthodoxy. This response subordinates conscience to "professional values" that are increasingly defined by the ideology of sexual progressivism in general and SOGI ideology in particular. The Christian social worker, in this scenario, keeps a low profile and is indistinguishable from her secularist counterparts. She has accepted Hillary Clinton's advice to change her backward religious views. Finding a conflict between her religious faith and demands of SOGI ideology to compromise it, this worker abandons or compromises her faith.

# 2. Seek accommodations or exceptions.

The second strategy emphasizes seeking exceptions, accommodations, or exemptions from requirements to practice or advocate in ways that burden conscience. It is the live-and-let-live approach, the "grand bargain" offered reassuringly by politicians and same-sex marriage advocates before their unconditional victory in the culture war-namely that same-sex couples would be allowed to marry, and Christians and others with religious objections would be protected from coercion of their consciences. That option is simply off the table and, so long as Obergefell (Obergefell v. Hodges, 2014) establishes same-sex marriage as a constitutional right, legislatures are stripped of the power to make such compromises. Appeals to conscience and religious freedom are increasingly dismissed as code for discrimination. Even the long-established practice of referring to another practitioner a case—say, for counseling a gay couple about their relationship issues—with which a counselor or social worker does not feel comfortable or competent, is being closed off as an option. As in the Julea Ward case at Eastern Michigan (Ward v. Wilbanks, 2010), such a referral request is likely itself to be taken as evidence of an unfitness to practice and a need for remedial counseling—for the professional (Oppenheimer, 2012).

Christians in social work face challenges to their faith and conscience whenever they are expected to treat psychological conditions and (what they understand to be) sinful activities as normal expressions of identity to be honored as morally equivalent to marriage and the conjugal act. We understand that all of us, clients and professionals, are sinners, and many in both groups live in sinful relationships traditionally referred to as adultery and fornication. We know from a great deal of research that these relationships and family structures are not equivalent for adults, especially women, or for children in two-parent families with a married mother and father. Furthermore, the undeniable disparities in health, mental health, education, crime, and violence cannot be explained in terms of social stigma (for example, Amato, 2005, Regnerus, 2012; Sullins, 2015, 2016).

It is not necessary to pretend that all family structures are equal to work with adults and children in all such situations.

Nevertheless, social workers may find themselves in a position where they are expected to endorse structures, relationships, or interventions that they consider harmful, whether or not they see them as sinful. For example, in the second story above, a Christian social worker is asked to go along with the parents of a thirteen year-old who want him to be addressed as if he were a girl. They and the medical team want to proceed with a regimen of chemical and surgical interventions that the social worker considers destructive and unethical. How does she respond in this situation?

For both pragmatic and spiritual reasons (Benedict XVI, 2011), the approach of seeking conscience exemptions and accommodations is necessary. But is unlikely to be sufficient to protect Christian social workers (or bakers, photographers, or florists). Neither transgenderism nor homosexuality is innate or immutable, recent research suggests. Yet the powerful ideological drive to coerce the conscience of practitioners and organizations like hospitals has appealed effectively to the idea that LGBT is an identity analogous to those of race and sex. Marriage, for example, has been redefined by the Supreme Court to include a constitutional right of same-sex-attracted people to marry each other. A refusal to participate in celebrating such unions by declining to use one's creative or artistic skills to bake a cake or provide flowers specifically for the occasion, then, is seen as unjust discrimination, a violation of civil rights comparable to refusal of service on grounds of race. The notion that same-sex attraction and transgenderism, like race and sex, are innate and immutable has proven a powerful buttress for this view and so an ideological weapon against conscience accommodations.

George (2012) argued that the idea that there could be a "grand bargain" on marriage was always an illusion. In such a bargain, supporters of conjugal marriage would accept the legal redefinition of marriage and, in return, the proponents of same-sex marriage would respect the right of Catholics, Evangelicals, Mormons, Eastern Orthodox Christians, Orthodox Jews, Muslims, and others to act on their consciences without penalty, discrimination, or civil disabilities of any type. Same-sex partners would get marriage licenses, but no one would be forced for any reason to recognize those marriages or suffer discrimination or disabilities for declining to recognize them. Proponents of redefinition might give lip service to such a bargain when they were relatively weak, but in the wake of their total victory it could not survive even a day. The Supreme Court's ruling in Obergefell could find no rational basis in the universal, millennia-old conjugal view of marriage, but only bigotry. In doing so, it provided the legal basis for treating the traditional view of marriage as equivalent to racism and requests for conscience accommodations on religious grounds as

demands for a license to discriminate and exclude. George (2012), writing two years before Obergefell, concluded:

The lesson, it seems to me, for those of us who believe that the conjugal conception of marriage is true and good, and who wish to protect the rights of our faithful and of our institutions to honor that belief in carrying out their vocations and missions, is that there is no alternative to winning the battle in the public square over the legal definition of marriage. The "grand bargain" is an illusion we should dismiss from our minds.

Recognition of transgenderism as an identity has been even more rapid. The Obama administration's use of civil rights legislation, extended from race and sex to include LGBT people, has been draconian and brooked no dissent or conscience exemptions. The HHS transgender mandate (2016) allows no room for conscience or even professional judgment about the harm of conducting transition procedures on transgender children. It impacts nearly all doctors and hospitals. The mandate does not allow room for the physician's professional judgment about the harm that such procedures would cause the child or accept referral "to another doctor, even one more qualified, or for a hospital to find a doctor willing to perform the procedure. Any refusal by a qualified and practicing doctor to perform such a procedure is a violation of the Mandate" (transgendermandate.org, 2016). At this writing, the mandate is under appeal (Becket Fund, 2016) and we do not know whether, or in what form, it may survive the appeal process or the incoming Administration. In any case, treating LGBT as identity rather than condition, as we understand anorexia nervosa, other kinds of body dysphoria like Body Integrity Identity Disorder, or some other kinds of disordered thinking or desire, has provided courts, legislators, and bureaucrats with a rationale for dismissing conscience concerns as demands for a license to discriminate. It reinforces the subjectivist view of conscience as little more than a matter of personal preference. The free exercise of religion, so central to Jefferson and the other Founders, is similarly reduced to freedom to worship, ending at the temple door, as a British chief of the Equality and Human Rights Commission put it (Tartaglia, 2012).

Many Christian social workers find or are likely to find themselves in the position of the Catholic health educator, Alexia Palma, who was fired for refusing to promote contraception or attend a class on birth control at Planned Parenthood (Chretien, 2016). She faced a hostile anti-Christian management that, she alleges, rejected its legal obligation to accommodate its employees' religious beliefs so long as doing so would not cause an undue hardship to the company. She had received such accommodation

until the company came under new management. As a lawyer in the case put it (Chretien, 2016),

In this case, all that she was asking for was an accommodation for less than two percent of her job...that could never have been an undue hardship for the company. There were ready volunteers that were willing to cover that part of her responsibility while she did some work on their parts too. This could have easily been handled without forcing her to violate her convictions or to lose her job. They put her to that choice between her job and her faith. She chose her faith and was fired because of it.

Social workers now must navigate an environment that is immensely more hostile to religious liberty, even in the realm of abortion and abortifacient birth control. Bradley (2016b) describes a series of coercive measures that restrict the conscience rights of health professionals and institutions. Together they represent a transition "from culture wars to conscience wars" (Messner, 2011). The threat to social workers from SOGI laws is even more severe and imminent, with no Church or Weldon Amendments to limit damage to the rights of conscience. The presidential election may have provided a reprieve after years of erosion of religious liberty (Towey, 2016), but the threat from current and proposed SOGI laws continues, even when accompanied by protections for conscience and religious liberty. As a recent strong statement from religious leaders (Colson Center, 2016) says,

SOGI laws empower the government to use the force of law to silence or punish Americans who seek to exercise their God-given liberty to peacefully live and work consistent with their convictions. They also create special preference in law for categories based on morally significant choices that profoundly affect human relations and treat reasonable religious and philosophical beliefs as discriminatory. We therefore believe that proposed SOGI laws, including those narrowly crafted, threaten fundamental freedoms, and any ostensible protections for religious liberty appended to such laws are inherently inadequate and unstable.

The strategy of seeking conscience exemptions is then a necessary but limited response to gender ideology and its expression in politics, law, academia, and the media. It cannot be detached from the truth claims inherent in the appeal to conscience, rightly understood. Trying to do so reduces conscience to a subjective preference. The appeal against coercion of conscience is a claim to be free from being forced to lie as a condition of keeping one's job, career, or business.

# 3. Prudently affirm and argue for the truth as they understand it.

The third strategy is prudently to affirm and argue for the truth, in season and out. It involves campaigning against laws and policies that deny basic truths about marriage, sex, and the human person and that forbid good holistic social work practice or neglect or obscure the health and mental health needs of LGBT youth, or seek to "treat" gender dysphoria by changing an adolescent's body to approximate the young person's current perception of or feelings about it. This third approach requires compassion in working with distressed individuals, competence in listening to them and discerning their situation, an ability to find the room to maneuver in the situation (e.g., in terms of laws and policies that restrict or mandate practices)—and all without colluding in or reinforcing the disordered thinking and feeling of the client.

Ivereigh (2016), drawing on the approach of Pope Francis, with which I concur, discusses the need to make a clear distinction in transgender debates between theory and people. The distinction is important but, as we have seen, theory frames the way we treat people, whether by condemning or excluding or by pointing to an injurious approach to "helping" that does more harm than good. Theory or ideology may reject stigma and discrimination while following a false narrative that reinforces problems through social contagion and normalization, treating social issues as medical issues, preventing other kinds of treatment and even a strategy of watchful waiting, in a rash and unprincipled abandonment of the ancient precept, "first do no harm." So there is no wall of separation between theory and practice.

### Pope Francis and Social Work Practice

Social workers, like priests and pastors, *typically* work with those engaged in or subjected to destructive or addictive behaviors. Christians and others of faith may see those they work with as mired in sin, whether or not the client sees it that way and whether or not they themselves are wrestling with sinful behaviors. They learn to engage and work compassionately with clients without endorsing or colluding in the disordered thinking or feeling that may be trapping them (families and communities as well as individuals) in problem-perpetuating patterns of behavior. They learn and teach the message of cognitive-behavior therapy (CBT), as of some Buddhist and self-help practices: don't believe everything you think! Working with a client suffering from anorexia requires compassion and competence but not reinforcing her belief, in the first case, that she is fat and needs liposuction. A practitioner who reinforces the disordered thinking or feelings of a youth—who, for the moment, thinks he is a girl

trapped in a boy's body—and supports hormonal and surgical treatment is not helping and may be doing immense and irreparable harm.

The situations social workers confront, in a social and political environment of hostility to the Christian faith and its adherents, are many and complex, not least in the area of competent and ethical practice with LGBT individuals. How should a conscientious social worker respond in the situation described in the second story above—that of the teenage boy whose parents were steering him decisively in the direction of chemical and surgical intervention?

Pope Francis, appropriately, does not provide direction for practice in a specific case like this. He teaches a pastoral approach that has two sides that seem at first to be in conflict. He has denounced, as fiercely as anyone, the whole ideology or "theory" of gender. He has argued that "gender theory is an error of the human mind that leads to so much confusion; it's one reason why the family is under attack." He has even compared gender theory to nuclear weapons (San Martin, 2016).

In Europe, Latin America, Africa, and in some countries of Asia, there are genuine forms of ideological colonization taking place. And one of these ...is [the ideology of] 'gender.' Today children—children!—are taught in school that everyone can choose his or her sex. Why are they teaching this? Because the books are provided by the persons and institutions that give you money. These forms of ideological colonization are also supported by influential countries. And this is terrible! (Magister, 2016)

This is the context in which social workers practice, one of a regnant gender ideology being imposed as a new orthodoxy, a religion that tolerates no dissent and which does immense harm to youth, to families, and to society. Recognizing the evil for what it is, however, is only one side of Francis's coin. The other is his emphasis on a strong pastoral approach, of accompanying the 'wounded,' being open and welcoming to those who are distressed or isolated with seemingly insuperable problems and little understanding from others. His four-fold approach is aimed at faithful Christians rather than social workers specifically, but its application and resonance with the accumulated wisdom of social work practice will be apparent.

Francis's (Catholic News Agency, 2016) four-fold approach, which I list here with some more familiar social work language, includes:

- 1. welcoming (building a relationship vs. stigmatizing, excluding);
- 2. **accompanying** (walking with the 'client' in the direction of healing, starting where the client is);
- **3. discerning** the situation (listening to their story, assessing the situation); and

4. **integrating** (not rejecting or 'excommunicating') into the community/Church.

It is a both/and approach. On one hand, it rejects the gender ideology and the means through which it spreads as a social contagion, infecting both those with whom we work and our own profession. On the other, this approach works in love and truth with those we serve. It defends the right of LGBT people to a full range of mental health treatment including psychotherapy to address underlying or co-occurring issues of depression, problem-perpetuating family dynamics, suicidality, and the other health and mental health issues that beset them. It resists the drive by activists, courts, and legislators to override professional judgment and conscience by mandating or prohibiting particular interventions, and upholds the principle of first doing no harm as well as that of informed consent.

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