



Created & Loved

A guide for Catholic schools
on identity and gender



INTRODUCTION

A Catholic school is a particular community of faith called to live in accordance with, and to witness to, the God of love as revealed in Christ Jesus. Each school, and each governance authority within which the school sits (be it parish, diocese, congregation, Public Juridic Person) will have its particular way of expressing in words and actions the mission common to all ministries within the life of the Church.

Because we each participate in the joy of a shared mission, we are duty-bound to support one another in facing common challenges and opportunities.

The following material offers a guide for decision-making about the care of individual students with respect to identity and gender. It is intended for Catholic school leaders, including principals, teachers and parish priests where appropriate, as they work through some considerations inherent in these questions in their local context.

The title draws from the prophet Isaiah:

*Thus says the Lord:
Who created you...
Who formed you...
Do not fear, for I have redeemed you;
I have called you by your name,
you are mine.
you are precious in my sight,
and honoured, and I love you,
(Isaiah 43:1, 4)*

The prophet Isaiah calls to mind a universal truth, that we are each called by a loving Creator who has formed us and claims us by name. This guide is not a theological document, although it takes as its starting point the truth expressed in the Catholic tradition, that every human person, made in the image and likeness of God, is equal in worth and dignity along with every other human person, and is precious in the eyes of God.

CONTEXT

The society in which we live and work today sees the world and our place in it in a variety of ways. Contested and sometimes conflicting views about what it means to be human inevitably create diverse understandings of sex

and gender. Some of these views have significantly influenced social perceptions and legislation, as well as healthcare and education, and so have implications for Catholic schools both in pastoral care and in curriculum. As principals and leadership teams keep up to date on these changing social trends it is important for them also to ensure their staff and school communities are well grounded and adequately formed in the principles of a shared Christian anthropology.¹

Catholic school leaders are responsible for guiding students through the opportunities and challenges of contemporary culture with a spirit of discernment, engagement and care. In Australia over the last decade, the number of children and young people presenting to gender clinics has steadily risen.² There has been a dramatic rise in the number of children and young people either experiencing, or experimenting with, a gender different from their biological sex. Gender variance is the umbrella term used to describe gender identity, expression or any non-conforming gender behaviour, including a non-binary expression of gender.³ The child's or young person's desire to be of the opposite sex is often an indicator of gender variance.⁴

Some children or young people will feel a discordance between their biological sex on the one hand, and their belief about their gender on the other. This can lead to distress, especially as they develop, requiring specialised support. The gender variance at these levels would be described as gender incongruence. When the level of distress impairs the young person's 'social, schooling or other important areas of functioning' it becomes clinically significant and is termed gender dysphoria.⁵

Within this environment, Catholic schools are likely to encounter students who are experiencing different levels of gender variance. There may be students who have a formal diagnosis and are under the care of a specialised medical team undergoing medical and/or psychological support. Other students may not require medical intervention

but wish to attend school in a different gender identity. Some schools might encounter a staff member, or a student's family member, who has a similar self-understanding.

Such situations can give rise to difficult questions – theological, philosophical, medical, ethical, legal, psychological, educational and pastoral. Schools and parents have a duty of care for all children and young people (many of whom feel vulnerable), as well as for staff.

The principles outlined in this paper may be relevant and of use in these situations, however school leaders are encouraged to contact the appropriate Catholic education office for advice and support should these needs arise. The relevant Catholic Education authority should develop policies and protocols in consultation with the relevant governance authorities and principals of schools in their diocese.⁵ Principals and teachers should always feel supported and accompanied when facing these circumstances.

Research data strongly suggests that for the vast majority of children and adolescents, gender incongruence is a psychological condition through which they will pass safely and naturally with supportive psychological care:⁷ studies quote between 80-90% of prepubescent children who do not seem to fit social gender expectations are not gender incongruent in the long term.⁸ This majority are sometimes referred to in the literature as *desisters*, whereas the minority who continue into adolescence with symptoms of distress are referred to as *persisters*.⁹

As they seek to meet their duty of care for a gender-variant student, a school principal may well experience substantial pressure arising from uncertainty about the nature of gender variance; competing anthropologies of sex and gender; assumptions implicit in the dominant rhetoric around gender; and the need to deepen the school's mission of living the gospel of God's love for all persons. While this document will touch on all of these themes it cannot develop all of them comprehensively.



'A Handful of Selfies', Years 3-6, St Anthony of Padua Primary School, Melton South

A Catholic school has a responsibility to create an environment hospitable to a life of faith, which can be expressed in multiple ways. For a culture of lively Catholic witness to thrive, the language of school leaders is instrumental in encouraging a celebration of each individual in their uniqueness, balanced with the dynamics of the whole community. Because of this healthy diversity and witness, school leaders will be diligent in resisting the incursion of political lobbying, ideological postures, organisations and movements at odds with the school's mission, along with their language and symbols. For the good of the whole community, sometimes a school principal will respectfully decline the involvement of such movements or organisations in the life of their Catholic school.

All schools naturally wish to provide effective pastoral care for gender variant students. At the same time it is important to note that while the motivations behind some pastoral initiatives are good and commendable, the use of ideas, words and images that are in conflict with the generosity of the Christian vision should be respectfully avoided. Popular rhetoric around gender variance sometimes accepts perceptions of sex and gender that are inconsistent with a Christian understanding: that gender

is something entirely separate from biological sex; that gender is arbitrarily assigned rather than (usually) a given aspect of the gift of life; and the concept that gender can be fluid and oscillate between a male or female gender identity according to a subjective personal choice.

In order to fulfil their duty of care, as they must with all students, Catholic leaders should seek to understand the needs of the student and the full scope of support options. If it is suggested to a school that the only pathway forward is simply to affirm the student's chosen gender, school leadership should be careful to be guided by the Christian anthropology described below.

This document sets out guidance for compassionate and well-defined policies and protocols. It offers distinct guidance so that Catholic school leaders have a framework in which to make prudential judgments in specific circumstances. Policies and protocol documents based on this framework should provide foundational statements and pastoral principles that clearly articulate the Catholic vision and understanding of the human person.

The following sections of the paper provide content and structure to be drawn from as each educational

institution develops guidelines suitable for their own circumstance.

- A Foundations: Anthropological and theological understandings of sex and gender'
- B Pastoral Principles: Key principles which should inform guidelines
- C Practical Protocols: Suggested steps for consideration by schools
- D Definitions

A. Foundations: Anthropological and theological understandings of sex and gender

Christian anthropology

Catholic schools share in the Christian vision of the human person, directed towards the dignity and the flourishing of each person, and this distinguishes the Catholic school approach from other approaches to education.

In order to respond in truth and love to young people in the care of Catholic schools who may experience confusion or distress about their gender, an essential starting point is an understanding of Christian 'anthropology'. Without a grasp of key elements of a Christian understanding of the human person we will struggle

to respond well to each individual child, their family and school community. Responding well requires a broad sense of vision about our hopes and aspirations for the good of each student in our care.

This vision starts with the Christian understanding that every human being is both physical and spiritual in nature.

A human being's sex is a physical, biological reality. Sex is how human beings' bodies are organised with respect to reproductive function. Each person's biological sex unfolds in the womb from conception onward as complex genetic and hormonal processes combine to give each person a unique set of male or female characteristics. Apart from rare cases of people born with a combination of both male and female biological characteristics, every human being is born either biologically male or biologically female.

Individuals experience and express their biological sex—their masculinity and femininity—in a wide range of ways. This sense of one's own sex is often referred to as one's gender. Gender in this sense can be influenced by a range of early experiences and expectations in the family and at school, on social media and in the wider culture and society.¹⁰ In this sense, gender can also change over time and vary both between individuals and across different cultures. Rigid cultural stereotypes of masculinity and femininity are thus unfortunate and undesirable because they can create unreasonable pressure on children to present or behave in particular ways.

There is much natural variation in how individuals experience their masculinity or femininity. In addition, children often experiment with various expressions of their sense of themselves as masculine or feminine. Some children may experience confusion, even distress, caused by feelings of discordance or incongruence between their biological sex and their sense of their gender. A few go on to be diagnosed with 'gender dysphoria'. It is important to note that any degree of gender

incongruence can only have meaning in reference to one's biological sex.

While biological sex and the socio-cultural role of gender can be distinguished, they cannot be completely separated.

All of these ideas are accessible to human reason unaided by faith. That is, these are aspects of human nature available to our understanding whether or not we have a religious faith. A Catholic school is a place of respect and celebration of both faith and reason.

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Enriching this 'philosophical' anthropology is a complementary 'theological' perspective that human beings are created in the image and likeness of God¹¹, that they are created male and female¹², that human beings are 'relational' beings who are created for friendship with God and with others¹³ and that the complementarity of male and female is part of the goodness of creation.¹⁴

In the Christian vision, the human person is an essential part of the goodness of creation, and we are stewards of all that God gives us, from the smallest of creatures to the uniqueness of our own body.¹⁵

All that we find in nature is a fragile gift to be respected, as Pope Francis powerfully reminds us.¹⁶

In the extraordinary beauty of creation, each unique human person, male or female, is to be received and appreciated, protected and nourished, respected and cherished. Christians are committed to respecting the dignity of every

individual. No human person is to be diminished or devalued, and all have an indispensable part to play in the human community regardless of differences.

This Christian anthropology has important implications for what it means to respond in truth and love to one another. It demands that we respect the worth of each person at every moment of their existence - from conception to death - regardless of who they are or how they present themselves in the world. It also asks us to see each person holistically rather than seeking to define them by just one aspect of their identity.

Any relevant educational programme and the care of individuals in a Catholic school must be faithful to this Christian Anthropology.

B. Pastoral Principles

In recent times contrasting anthropological views regarding human sexuality and gender have been accepted into Australian law and medical practice. This has resulted in the situation where a child's mere beliefs about themselves—including their race, sex or gender—can determine their identity. Beliefs about a child's sex being assigned, perhaps by others, at birth or earlier, are fast becoming accepted as mainstream in Australian society.

In some important contexts the notion of biological sex is being replaced in law by gender identity. Once gender has been accepted as *assigned*, it can later be *re-assigned* through medication, by surgery, or simply by clothing and language (social transitioning). This view, which seeks to settle gender incongruence by simply affirming and normalising the child's self-belief, is known as the *gender affirmative* model.¹⁷ Whilst providing psychological support this medical intervention often consists of using puberty blockers followed by cross sex hormones, and for some, when they are older, gender reassignment surgery. In many cases this treatment causes permanent infertility.¹⁸ Currently this has become the

dominant form of treatment offered to children and adolescents diagnosed with gender dysphoria or identifying as experiencing gender incongruence in Australia.¹⁹

Many medical and healthcare professionals do not endorse this form of treatment, finding it medically and ethically controversial. Traditional medical ethics and Catholic Church teaching maintain that health professionals should not disable or destroy healthy bodily organs or systems, or perform and/or advise actions that render a person incapable of parenting a child. There are also serious concerns regarding a young person's capacity to consent to these treatments, as well as concerns with the safety of using puberty blockers and cross sex hormones on children and adolescents, particularly as many research studies continue to note the absence of reliable longitudinal data on this approach.²⁰ A school community has a responsibility to avoid cooperation with actions which risk unnecessary damage, or which limit a student's future possibilities for healthy human growth and development.

An increasing number of medical professionals support the *Biopsychosocial* model, which is less invasive and more closely aligned with a Catholic worldview, as it is a family centred, more holistic approach.²¹

In this model practitioners promote ongoing psychological support for the child or young person through engaging with families and thorough inquiry into family dynamics. Their research, together with a substantial body of work, reveals a high correlation between childhood gender incongruence and family dynamics including what are known as 'adverse childhood events'.²² By discovering the child's and family's stories, practitioners are able to understand the gender variance felt by the child or young person within the context of family and their domestic environment. They treat adverse childhood experiences alongside the gender incongruence by using a trauma informed model of mental health care.²³

It is important for Catholic school leaders not only to be aware of disagreement around forms of treatment which may be offered to the individual but also to recognise that the school community is a microcosm of our larger society, a society that typically views gender as a social construct and has widely adopted the belief that each person's innermost concept of themselves determines their gender identity.²⁴ These recent social changes in definition and language are in conflict with the Catholic understanding of Creation, in which every person is created good and is loved unconditionally as they are. Each life is a gift with an inherent purpose and meaning which is to be discovered and celebrated.²⁵

How do leaders of Catholic schools manage these tensions and create a sense of equilibrium and balance for their staff, students and families?

Foundational to Catholic schools is the acknowledgment of the gospel truth that we are called to have life and have it abundantly (Jn 10:10), along with our commitment to care for the whole person, spiritually, emotionally, socially, intellectually and physically. Such a broad vision sees school communities walk alongside ('accompany') their students as they grow and mature. They offer students opportunities to excel, flourish, and ideally invite them to see themselves as God sees them. It is a vision of hope and promise, and it is inclusive and accepting of all, embracing weakness and accompanying diminishment.

It takes a community to deliver this vision, a community built on authentic loving relationships who value the inherent dignity in each of its members.

C. Practical Protocols

School leaders are advised of the following practical protocols and considerations when responding to the unique pastoral needs of a student presenting with concerns regarding their identity, sexuality and gender.

Key Principles

The following principles lay the foundation for Catholic educational institutions to build communities that give witness to this pastoral vision specifically in the area pertaining to the care of students experiencing gender variance. Catholic Education leaders, in consultation with the relevant Church or bishop and governance authorities and school principals, are advised to base their guidelines and pastoral responses on these key principles:

1. Catholic schools should endeavour to be strong communities of faith where the love of God is witnessed through the care, respect and love shown by the staff to those in their care. An education promoting the whole person should be delivered within an environment of respectful relationships.
2. School leaders should provide all staff with ongoing formation in Christian anthropology and human sexuality, promoting the Christian vision of the person as relational, made in the image of God, and flourishing only when a part of a community.
3. School leaders should endeavour to be informed about and aware of relevant and current legislation, along with health and medical research data, in order to inform accurate and up-to-date decision-making.
4. Staff should strive to establish a safe and trusting relationship with the student presenting with concerns about their identity, and with their family, and provide a nurturing and supportive environment for the student to learn and mature in their journey towards wholeness.
5. Catholic schools should always communicate openly and clearly with all parties involved with the student, consistently observing the duty to protect the student's privacy and maintain confidentiality. School leaders in particular should act truthfully, charitably, with good will and with absolute respect for the human dignity of the student, their family, and every member of the community.

Catholic Characteristics

- The mission and purpose of the Catholic school should guide and inform school leadership as they build a community of faith. By giving witness to the Christian life, school communities should embrace all in their care including students and their families who are exploring issues of identity and gender.
- A coherent understanding of Christian anthropology should guide and inform school leaders as they provide a sound formation for the whole community of a shared world view.
- A common and consistent vision is necessary to ground individual responses to students and families who are exploring issues of identity and gender.
- All Catholic school community members are invited to explore and be open to an understanding of the human person that is consistent with philosophical, scientific and theological insights, giving witness to the role of faith and reason.
- All interactions in Catholic schools should be grounded in the principles of solidarity, participation and subsidiarity:
 - Catholic school communities are motivated by a commitment to **solidarity**. The principle of solidarity is demonstrated by colleagues in the school working together to accompany the gender variant student and their family.
 - The principle of **participation** is realised in the daily experience of school leaders fostering a spirit of inclusive involvement, always looking to find new ways to address problems responsibly and encourage open communication with all affected parties.
 - The principle of **subsidiarity** is a crucial component in the Catholic school on gender issues; it is this principle that protects the freedom and responsibility of the Catholic school to be the steward of the relationship with the student experiencing gender variance in their local context.²⁶ That relationship is not primarily directed by policies

and protocols or governed from afar; rather it is managed first and foremost by the individuals encountered in the school community who show patience, charity and wisdom in their everyday, loving human interactions.

Foundational to Catholic schools is the acknowledgment of the gospel truth that we are called to have life and have it abundantly (Jn 10:10), along with our commitment to care for the whole person, spiritually, emotionally, socially, intellectually and physically.

Legislation

- Catholic schools must respect, protect and promote authentic human rights.
- It is unlawful to discriminate against a person on the grounds of their sexual orientation, gender identity or intersex.²⁷
- Catholic school leaders and staff are to:
 - Be informed about and observe relevant Commonwealth and State (or Territory) legislation;²⁸
 - Stay updated about changes in legislation and education regulations/policies pertaining to sexual discrimination, orientation, gender identity and intersex issues;
 - Be aware of the differences between, and convergences in, government and diocesan policies.

School Leadership Responsibilities

- Catholic school leaders are responsible for:
 - Providing specific, ongoing and whole-school staff formation that includes Christian anthropology, human sexuality, the mission of the Catholic school and health literacy.
 - Aligning related school policies

(i.e. pastoral care, anti-bullying, privacy) and ensuring that staff understand their inter-relationships and requirements;

- Seeking advice and support from their Catholic education authority;
- Using a whole-school approach to meeting their duty of care toward the student;
- Developing clear and agreed communication protocols and pathways;
- Using accurate language that is understood and applied by all staff;
- Assigning a designated senior staff member to accompany and liaise with the student and their family and to case manage the school's response.
- Establishing, as appropriate, a 'community of care' group where required (perhaps including student representatives) to assist the student and family and to liaise with relevant stakeholders.
- Despite the complexities and challenges of the issue, maintaining an ongoing conversation with the student and family, in which all parties are invited to continued dialogue and relationship building.

School Programming and Provision

In light of these pastoral principles and practical protocols, undertaking a review in the following areas will see schools well placed to deal with most matters that may surface if a student is undergoing psychological and /or medical intervention.

- Curriculum – Religious Education, Health & Physical Education, wellbeing and pastoral programs, human sexuality education, personal development, respectful relationship programs.
 - It is important that these accurately reflect Christian anthropology, and use shared understandings and language. All learning areas and pastoral care needs to reflect a common commitment to promoting a hope-filled worldview where each student can learn and grow towards the fullness of life.
- Toilets and changing room
 - Providing a unisex toilet and

change room area or creating a bathroom space that is private and not aligned to biological sex increases the access and safety options of vulnerable students and may alleviate anxieties.

- School uniforms and dress codes
 - Offering flexibility with uniform expectations, would cater to the diversity of the student body.
- School documents and records
 - Ensure school policy states that all school documentation is to record students' biological sex at the point of enrolment.
 - Ensure strict adherence to privacy laws regarding the maintenance, storage and disclosure of student documents and records. In the case of individual students, note the student's preferred name, identity and use of personal pronouns in school records.
- School sports and physical education
 - It is paramount that close attention is paid to providing access and participation for all students and ensuring environments are inclusive, safe, fair and free from discrimination.
 - In single-sex competitive competition where students are over the age of 12 years, it may be lawful to exclude a student from a team where the strength, stamina or physique of competitors is relevant. Refer to current Commonwealth guidelines when developing policy.²⁹
- School camps and events
 - There needs to be awareness of the unique needs of the gender variant student, thus providing appropriate bathroom and sleeping arrangements where all students feel safe and supported.

Catholic schools are well placed to handle the above practical matters sensitively and thoughtfully, keeping in mind that the majority of students experiencing gender variance may not desire or seek out a medical intervention for transition.



Recycled Paper Cross Art, Years 3 & 4, St Augustine's Primary School, Keilor

"Those directly engaged in decision-making and managing gender dysphoric students will have much to contribute to developing appropriate processes for dioceses, education offices and schools. Good processes will help them remain focused on seeking the truth and striving to act in the student's best interests; they will help engender a degree of confidence that a complex situation can be managed successfully. But the best processes cannot substitute for a fundamental attitude of charity and respect, of care and compassion. In this matter, as in all associated with Catholic education, we can do no better than to extend into every moment of every day the healing love of Jesus, who came that we all might 'have life, and have it to the full'".³⁰

D. Definitions

The importance of language cannot be overstressed. A sensitivity to the words that will be included and not included into the community's vocabulary is highly significant in this specialised area.

As children and adolescents are in a stage of development of growing towards maturity, research confirms a degree of variation in self-perception over time. A school commitment to use language that recognises this and promotes the development of the whole person is proposed. Using labels that limit personhood to only gender identity restricts full flourishing and growth towards wholeness.

It is recommended to use the terms 'gender dysphoria' or 'gender incongruence' when referring to students rather than using the term 'transgender'.

'Transgender' means on the other side from: it infers a fixed decision about one's identity.

The following is a glossary of words regularly used in this specialised area. The disambiguation of their meanings have been explored and explained to help shed light on the many perspectives operating simultaneously within the same environment.

Anthropology

In common use, 'anthropology' means the science of human beings, including their physiology and psychology and how these two dimensions bear on each other. The Christian vision of the human person includes all aspects and dimensions of a person: physical, spiritual, intellectual, emotional, social, psychological, etc. Because faith and reason mutually inform Christian anthropology it also incorporates the science as described above, but offers a far more inclusive and holistic vision of what it means to be human.

Binary, non-binary

In common use, 'binary' is used to describe (and reject) the claim that human beings biologically are usually either male or female. 'Non-binary'

refers to a gender identity that is neither male nor female. When this occurs for social reasons (i.e. not because of gender incongruence), a person may self-identify as 'queer' ('Q') or 'gender variant'.

In the Christian vision human beings as a species are and always have been fundamentally binary - male or female,³¹ absent an intersex condition (see below). Being biologically male or female does not determine how people present themselves socially;³² likewise non-binary gender presentation does not depend on biological sex and so does not require rejection of this fact.

Cisgender

In common use this term refers to those who believe that their biological sex is merely a category to which they were assigned at birth and that their gender matches their biological sex ('cis' means 'on the same side as').

The Christian vision of the human person acknowledges the biological fact of a person's sex as a 'given' foundation of their personhood, not an arbitrarily assigned category; absent an intersex condition.³³ It is advisable to avoid using the term 'cisgender' because it reflects a misunderstanding of the significance of biological sex.

Gender

In common use, the term gender has a variety of meanings. This can be a source of confusion.

It sometimes refers to a person's biological sex; sometimes to a person's psychological self-belief ('felt' gender or gender identity); and sometimes to the way a person presents to the world as a sexed being or their expressed gender (whether binary or non-binary). It is often very difficult to know which meaning is intended. For instance, it is sometimes suggested that, because a person's gender or gender identity has no relationship to their biological sex, gender can change many times during life.

In the Christian vision, 'gender' is distinct from but always related to

a person's biological 'sex'. Even when it is used to refer to a person's psychological sense of self, as distinct from their biological sex, gender is nevertheless grounded in or referent to biological sex. Not everyone of the same sex experiences their gender, or lives it, in the same way. While there is a broad variety of ways of being 'male' or 'female', each is grounded in or referent to the person's biological inheritance. Even the concept of being 'gender incongruent' references a biological sex with which the person experiences discomfort or distress.

The Christian vision sees the whole person in all aspects of their humanity and steers away from language that reduces the person to their gender alone.

The noun 'sex' refers to whether a person is biologically male or female. A school records a student's sex, which cannot change. Their felt gender, which could change multiple times, might be noted on the school record but does not replace their sex.

Gender incongruence

In common use, this refers to a felt difference between one's sex and one's gender causing a feeling of discomfort or 'mismatch'. When this discomfort causes distress such that it prevents one from functioning well, the term 'gender dysphoria' is often used.³⁴

The Christian vision acknowledges the medical evidence that gender incongruence has a strong psychological dimension.

Intersex

Strictly speaking, 'intersex' refers to persons born with indeterminate biological sex characteristics (i.e. chromosomes, hormones, internal reproductive organs, external genitalia and/or secondary sexual characteristics) such that it is difficult or impossible to know on sight whether an individual is biologically male or female. Often a genetic test is required. There are several recognised medical conditions that qualify as 'intersex'.³⁵

In our Christian vision we are careful to note that intersex conditions are medical in nature, not psychological.

Sex (n.)

As it is commonly used, 'sex' sometimes refers to biological sex (male or female), sometimes to a person's belief about themselves ('gender'), and sometimes to the way in which they manifest or present themselves to others or 'self-identify' ('gender identity').

In the Christian vision the noun 'sex' refers only to a person's biological inheritance as male or female. Human life is biologically binary in nature, even if no two males or females experience or express their biological sex in exactly the same way.

Sexuality

In common use, 'sexuality' may refer to a person's interrelated systems of chromosomes, hormones, internal reproductive organs, external genitalia and secondary sex characteristics.³⁶

In LGBTQ terms 'sexuality' usually refers simply to a person's sexual orientation as lesbian, gay or bisexual (L, G or B).

In Christian terms 'sexuality' has a much wider and more holistic meaning. It refers to all aspects of the human person as a physical and spiritual being, including their physical, intellectual, spiritual, social, and psychological dimensions as these relate to and shape their natural need to form and sustain meaningful personal relationships of all kinds, but especially oriented to the good of marriage and the flourishing of family life.³⁷

Transgender, 'trans'

In common use, this term is used to describe people who believe that their gender does not match their biological sex and, in addition, that their biological sex is merely a category to which they were 'assigned' at birth ('trans' means 'on the other side from'). More specifically it refers to people who have 'transitioned' across (whether medically, surgically or only socially) to their preferred gender.

The Christian vision insists on a more focused meaning: it should only be used to describe persons who have gender - transitioned, whether medically, surgically, or socially in a more or less permanent way. It should not be used for children or adolescents of any age who are 'testing' a new gender presentation (e.g. temporary social transition to a new gender) because it risks 'pigeon-holing' the young person in what may be a false self-belief.

Transition

In common use, 'transition' is the process a person has undertaken to 'change' their gender so that it no longer matches their biological sex. Transition processes include hormonal (e.g. hormones taken to adopt physical characteristics of the other sex), surgical (e.g. breast or genital reshaping) and social (no medical or surgical processes, but changes only to dress, appearance, name, pronoun). A person who transitions and then transitions back is said to 'detransition'.

The Christian vision is careful to note that any 'transition' is in gender presentation only and not in the person's 'sex' which, as a permanent biological given, cannot be changed by either hormone or surgical treatments.

Footnotes

¹ Significantly, Pope Francis rejects any ideology of gender that '... denies the difference and the reciprocity in nature of a man and a woman and that envisages a society without sexual difference, thereby eliminating the anthropological basis of the family. This ideology leads to educational programmes and legislative enactments that promote a personal identity and emotional literacy radically separated from the biological difference between male and female. Consequently, human identity becomes the choice of the individual, one which can also change over time.' *Amoris Laetitia* #56.

² Hewitt (2012); Vickery (2015) & O'Leary (2017) in Parkinson (2017). Some estimates quote a 500% increase (Parkinson (2020) CEWA Webinar). International research shows a twenty-fold increase in referrals to clinics over the last 30 years (Wiepjes et al 2018).

³ Simons et al (2014).

⁴ McPhate et al (2021).

⁵ *Diagnostic and Statistical Manual of Mental Disorders* (5th ed) (DSM-V).

⁶ Such policies and protocols should be approved by the Bishop and/or relevant governing authority and updated with their approval.

⁷ Hewitt (2012); Steensma (2013); Vickery (2015); Kozłowska (2021).

⁸ Kaltiala-Heino (2018).

⁹ Ristori & Steensma (2016), Singh et al (2010), Steensma et al (2010), Zucker (2018).

¹⁰ 'Gender identity is a multifactorial process involving both prenatal and postnatal variables. Psychosexual development is influenced by multiple factors such as exposure to androgens, sex chromosome genes, social circumstances and family dynamics.' See Öçal, Gönül (2011).

¹¹ *Genesis* 1:27.

¹² *Ibid.*

¹³ Jn 15:15, *Catechism of the Catholic Church* 1; 1878.

¹⁴ *Ibid.*

¹⁵ *Genesis* 1:31.

¹⁶ *Laudato Si* #5.

¹⁷ For an account of the gender affirmation model grounded in critical psychology, see Damien W Riggs (2019), *Working with Transgender Young People and their Families*.

¹⁸ Bizic et al (2018).

¹⁹ Kozłowska (2021).

²⁰ See Kaltiala-Heino Rantakerttu et al (2018), Kozłowska (2021), Vrouenraets, L.J. et al (2015).

²¹ See Kozłowska (2021).

²² See Parkinson (2021).

²³ See Kozłowska (2021).

²⁴ See Telfer (2018).

²⁵ *Laudato Si'* 121 (2015).

²⁶ *The Identity of the Catholic School for a Culture of Dialogue* (2022), #92.

²⁷ Ensure through policy and pastoral care that any student is not subject to bullying, harassment and/or discrimination, either directly or indirectly.

²⁸ Relevant Commonwealth legislation includes the *Australian Human Rights Commission Act* (1986); the *Sex Discrimination Act* (1984); and the *Sex Discrimination Act Amendment (Sexual Orientation, Gender identity and Intersex Act 2013)*.

²⁹ Australian Human Rights Commission (2019) publications. See Resources.

³⁰ Parkinson (2017).

³¹ *Genesis* 1:27; CCC 2331.

³² CCC 2333.

³³ CCC 2333.

³⁴ Both conditions are listed in the *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.) (DSM-V).

³⁵ See Jones T et al (2016) in Resources.

³⁶ Human sexuality involves inter-related systems of chromosomes, hormones, internal reproductive organs, external genitalia and secondary sexual characteristics. Medical and health research continually advances in its understanding of the complexity of the relationships between these factors, and in its understanding of how they interact with positive and negative social experiences from birth onwards. See Kaltiala-Heino et al (2018), Saleem, Fatima et al (2017) & Baudewijntje P.C et al (2016) in Resources.

³⁷ CCC 2332-2333.

E. Resources

- Allen, Sr Mary Prudence (2014), 'Gender Reality', *Solidarity: The Journal of Catholic Social Thought and Secular Ethics*, 4(1). Online at <http://researchonline.nd.edu.au/solidarity/vol4/iss1/1>
- American College of Pediatricians (2017), *Gender Dysphoria in Children*. Online at <https://eds.a.ebscohost.com/eds/pdfviewer/pdfviewer?vid=7&sid=39983c83-e3be-46a8-8257-3ec0c92d046d%40sessionmgr4006>
- American Psychiatric Association (2013a), *Diagnostic and Statistical Manual of Mental Disorders*, 5th edition [DSM-V].
- American Psychiatric Association (2013b), *What is Gender Dysphoria?* Online at <https://www.psychiatry.org/patients-families/gender-dysphoria/what-is-gender-dysphoria>
- Anderson RT (2018), *When Harry Became Sally: Responding to the Transgender Moment*, Encounter Books, New York.
- Ashley BM, deBlois JK and O'Rourke KD (2006), *Health Care Ethics, A Catholic Theological Analysis*, 5th edition, Georgetown University Press, Washington DC.
- Australian Human Rights Commission (2019), Guidelines for the inclusion of transgender and gender diverse persons in the inclusion of sport'. Online at <https://humanrights.gov.au/our-work/lgbti/publications/guidelines-inclusion-transgender-and-gender-diverse-people-sport-2019> See also <https://humanrights.gov.au/our-work/lgbti/publications/guidelines->
- Bizic, Marta, et al (2018), "Gender Dysphoria: Bioethical Aspects of Medical Treatment", in *BioMed Research International*. Online at <https://doi.org/10.1155/2018/9652305>
- Catechism of the Catholic Church* (1994), St Pauls Publications, Strathfield NSW. See especially #362-368, with particular reference to #365. See also #2332 and #2334. Online at www.vatican.va/archive/ENG0015/_INDEX.HTM
- Cohen-Kettenis, PT et al (2008), 'The treatment of adolescent transsexuals: Changing insights', in *Journal of Sexual Medicine* (5), pp 1892-1897. Online at [http://www.jsm.jsexmed.org/article/S1743-6095\(15\)32124-X/fulltext](http://www.jsm.jsexmed.org/article/S1743-6095(15)32124-X/fulltext)
- Congregation for Catholic Education (for Educational Institutions) (2022) *The Identity of the Catholic School for A Culture of Dialogue. Instruction* Online at https://www.vatican.va/roman_curia/congregations/ccatheduc/documents/rc_con_ccatheduc_doc_20220125_istruzione-identita-scuola-cattolica_en.html
- , (2019), *Male and Female He created them: Towards a path of dialogue on the question of gender theory in education*. Online at https://www.vatican.va/roman_curia/congregations/ccatheduc/documents/rc_con_ccatheduc_doc_20190202_maschio-e-femmina_en.pdf
- Congregation for the Doctrine of Faith (1975), *Persona Humana*. Online at https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_19751229_persona-humana_en.html
- Drummond KD, Bradley SJ, Peterson-Badali M and Zucker KJ (2008), 'A follow-up study of girls with gender identity disorder', in *Developmental Psychology*, 44(1), pp 34-45. Online at <https://doi.org/10.1037/0012-1649.44.1.34>
- Fitzgerald K SJ (2016), 'Viewing the transgender issue from the Catholic and personalized health care perspectives', in *Health Progress*, Winter.
- Francis, (Pope) (2016) *Amoris Laetitia: Post-Synodal Apostolic Exhortation on Love in the Family* https://www.vatican.va/content/dam/francesco/pdf/apost_exhortations/documents/papa-francesco_esortazione-ap_20160319_amoris-laetitia_en.pdf
- , (2020) *Encyclical Fratelli Tutti: On Fraternity and Social Friendship* https://www.vatican.va/content/francesco/en/encyclicals/documents/papa-francesco_20201003_encyclica-fratelli-tutti.html
- , (2015) *Encyclical Laudato Si: Care for Our Common Home* https://www.vatican.va/content/francesco/en/encyclicals/documents/papa-francesco_20150524_encyclica-laudato-si.html
- Green R (1987), *The 'Sissy Boy Syndrome' and the Development of Homosexuality*, Yale University Press, New Haven, CT.
- Hembree WC et al (2009), 'Endocrine treatment of transsexual persons: An Endocrine Society clinical practice guideline', in *The Journal of Clinical Endocrinology and Metabolism*, 94(9) September, pp 3132-54. Online at <http://www.cpath.ca/wp-content/uploads/2009/12/JCEM-20099493132-3154.pdf>
- Hewitt JK et al (2012), 'Hormone treatment of gender identity disorder in a cohort of children and adolescents', in *Medical Journal of Australia* 196(9) 21 May, pp 578-581. Online at https://www.researchgate.net/publication/225057369_Hormone_treatment_of_gender_identity_disorder_in_a_cohort_of_children_and_adolescents
- John Paul II (1980), 'The Nuptial Meaning of the Body', *General Audience* 9th January. Online http://www.vatican.va/content/john-paul-ii/en/audiences/1980/documents/hf_jp-ii_aud_19800109.html
- John Paul II (2006), *Man and Woman He Created Them: A Theology of the Body*, Translated by Michael Waldstein, Pauline Books, Boston.
- Jones T et al (2016), *Intersex: Stories and Statistics from Australia*. Openbook Publishers, Cambridge UK. Online at <https://interctadvocates.org/wp-content/uploads/2016/01/Intersex-Stories-Statistics-Australia.pdf>
- Kaltiala-Heino, Riittakerttu et al (2018), 'Gender dysphoria in adolescence: current perspectives', in *Adolescent Health, Medicine and Therapeutics* 2018:9. 31-41.
- Kosky R (1987), 'Gender-disordered children: does in-patient treatment help?', *Medical Journal of Australia*, 146 June, pp 565-69.
- Kozłowska, Kasia et al (2021), 'Australian children and adolescents with gender dysphoria: Clinical presentations and challenges experienced by a multidisciplinary team and gender service', in *Human Systems: Therapy, Culture and Attachments* (2021) 0(0)1-26. doi 10.1177/26344041211010777
- Mayer LS et al (2016), 'Sexuality and gender: Findings from the biological, psychological and social sciences', in *The New Atlantis*, 50 (Fall). Online at http://www.thenewatlantis.com/docLib/20160819_TNA50SexualityandGender.pdf

- McPhate L et al (2021) 'Gender variance in Children and Adolescents with Neurodevelopmental and Psychiatric Conditions' in *Archives of Sexual Behaviour*, 202150:863-871 <https://doi.org/10.1007/s10508-021-01918-9>
- Öçal, Gönül (2011). 'Current concepts in disorders of sexual development', *Journal of Clinical Research in Pediatric Endocrinology* 2011 Sept; 3(3): 105-114. Online at <http://www.ncbi.nlm.nih.gov/pubmed/21911322>
- Parkinson Joseph (2017), 'Preparing Catholic schools to care for gender dysphoric students', unpublished (monograph). Online at <https://cevn.cecv.catholic.edu.au/Melb/Document-File/Catholic-Identity/Identity-and-Growth/Preparing-Catholic-Schools-to-Care-for-Gender-Dysp.aspx>
- , (2018), 'Identity and growth: Honouring the sacred dignity of all', keynote presentations (video series) at professional learning days, Catholic Education Melbourne, October. Online at <https://cevn.cecv.catholic.edu.au/Melb/Document-File/Catholic-Identity/Identity-and-Growth/Preparing-Catholic-Schools-to-Care-for-Gender-Dysp.aspx>
- , (2021) Update Gender Incongruence in Children and Adolescents unpublished (addendum to monograph). Online at <https://cevn.cecv.catholic.edu.au/Melb/Document-File/Catholic-Identity/Identity-and-Growth/Preparing-Catholic-Schools-to-Care-for-Gender-Dysp.aspx>
- Parkinson, Patrick (nd), 'The controversy over the Safe Schools Program - Finding the sensible centre', Legal Studies Research Paper 16/83, Sydney Law School. Online at https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2839084
- Riggs, Damien W (2019), *Working with Transgender Young People and their Families. A Critical Developmental Approach*. Palgrave/MacMillan
- Ristori J and Steensma TD (2016), 'Gender dysphoria in childhood', in *International Review of Psychiatry*, (28)1, pp 13–20. Online at <http://dx.doi.org/10.3109/09540261.2015.1115754>
- Sacred Congregation for Catholic Education (1983), *Educational Guidance in Human Love: Outlines for Sex Education*. Online at https://www.vatican.va/roman_curia/congregations/ccatheduc/documents/rc_con_ccatheduc_doc_19831101_sexual-education_en.html
- Second Vatican Council (1965), *Gaudium et spes: Pastoral Constitution on the Church in the Modern World*. Online at http://www.vatican.va/archive/hist_councils/ii_vatican_council/documents/vat-ii_cons_19651207_gaudium-et-spes_en.html
- Simons LK, Leibowitz SF, Hidalgo MA. (2014), 'Understanding gender variance in children and adolescents'. *Pediatr Ann*. 2014 Jun; 43(6):e126-31. doi: 10.3928/00904481-20140522-07. PMID: 24972420
- Singh D, Bradley SJ and Zucker KJ (2010), 'A follow-up study of boys with gender identity disorder. Paper presented at the University of Lethbridge Workshop' (June), *The Puzzle of Sexual Orientation: What Is It and How Does It Work?*, Lethbridge AB, Canada.
- Spack NP et al (2012), 'Children and adolescents with gender identity disorder referred to a pediatric medical center', in *Pediatrics*, 129, pp 418–425. Online at <http://pediatrics.aappublications.org/content/pediatrics/early/2012/02/15/peds.2011-0907.full.pdf>
- Steensma TD (2013), 'From gender variant to gender dysphoria: Psychosexual development of gender atypical children and adolescents', Dissertation, Vrije Universiteit Amsterdam. Online at <http://dare.ubvu.vu.nl/handle/1871/40250>
- Steensma TD and Cohen-Kettenis PT (2011), 'Gender transitioning before puberty?', *Archives of Sexual Behaviour* (40), pp 649–50. Online at <https://www.ncbi.nlm.nih.gov/pubmed/21373942>
- Steensma TD, Biemond R, de Boer F and Cohen-Kettenis PT (2010), 'Desisting and persisting gender dysphoria after childhood: A qualitative follow-up study', in *Clinical Child Psychology and Psychiatry*, 16(4), pp 499–516. Online at <https://www.ncbi.nlm.nih.gov/pubmed/21216800>
- Telfer, M M et al (2018), 'Australian standards of care and treatment guidelines for transgender and gender diverse children and adolescents', *MJA* 209(3): 132-136.
- Tobin B (2017), 'Sex and gender: two views', *Bioethics Outlook*, March.
- Tonti-Filippini N (2012), Gender reassignment and Catholic schools, *National Catholic Bioethics Quarterly*, 12(1), Spring, pp 85–98.
- Vickery K (2015), 'Perth transgender clinic sees 26 children a year', *PerthNow*, 13 June. Online at <http://www.perthnow.com.au/lifestyle/perth-transgender-clinic-sees-26-children-a-year/news-story/c2907ff5af7191ac5b0c36ee59f86c24>
- Vrouenraets, L.J. et al (2015), 'Early Medical Treatment of Children and Adolescents with Gender Dysphoria: An Empirical Ethical Study'. *Journal of Adolescent Health* 57(4) October 2015. 367-373.
- Wallien MS and Cohen-Kettenis PT (2008), 'Psychosexual outcome of gender-dysphoric children', *Journal of American Academy of Child & Adolescent Psychiatry*, 47, pp. 1413–1423. <https://doi:10.1097/CHI.0b013e31818956b9>
- Wiepjes CM, Nota NM and de Blok CJM (2018), 'The Amsterdam cohort of gender dysphoria study (1972-2015): Trends in prevalence, treatment and regrets', *The Journal of Sex Medicine*, 15(4), pp 582–590. <https://doi:10.1016/j.jsxm.2018.01.016>
- Zucker KJ (2018), 'The myth of persistence: Response to a critical commentary on follow-up studies and "Desistance" theories about transgender and gender non-conforming children', *International Journal of Transgenderism*. Online at <https://doi:10.1080/15532739.2018.1468293>
- Zucker KJ (2008), 'On the "natural history" of gender identity disorder in children' [Editorial], *Journal of the American Academy of Child and Adolescent Psychiatry*, 47, pp 1361–1363.



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