

Pastoral Care in Transgender Experience

The Reverend Erin K. Swenson, Th.M., Ph.D.

Imagine...

Ann, a faithful adult leader in your congregation and youth group advisor, comes to your office for help. She is married and has two young children. Although less active, Ann's husband is also a church member. As she settles in you remember that Ann was baptized and confirmed in this congregation where both her parents continued to be members until her mother's death three years ago.

Ann fidgets in the chair, appearing very nervous and as if in pain. After a few awkward attempts to get comfortable she blurts out that she is leaving the church. This comes out of the blue, causing your mind to race, "What did I do to drive her away?" She's the backbone of our church camping program, what will we do without her?"

"What's wrong? Wh...why? Uh...I'm sorry, this takes me by surprise. What's going on, Ann?" you reply.

She fidgets still more, looking like she is trying to crawl right out of her skin. "I don't know," she chokes, "I just don't feel comfortable here anymore."

"But Why? This has been your church since you were born?"

"I've never felt comfortable in the church, and recently it's gotten worse. I just feel strange, that's all," her tears turning to a deluge.

"Strange," you reflect, "about what?"

Within the next hour and a half Ann's story unfolds. It is a story unlike any you have heard before. She tells you about her confusion with her gender identity since she was a child, about marrying and bearing children in the hope it would resolve her difficulty, about increasing marital discord as she struggled to hide her dilemma from her husband, about lesbian encounters hoping for

satisfaction, about the two years of therapy she has been through which resulted in her decision to change her gender. As she leaves you realize that you no longer really want her to remain a part of the church, but you're not certain why.

Or imagine...

Your sister calls. You have stayed in touch all these years as your two families have grown up in distant cities, and you have been expecting this call because your niece is having her first child, the firstborn of the new generation in the family. What would normally have been an occasion filled with joy turns dark as you learn that the doctors have not been able to determine the baby's sex. They are talking with the parents now about options. Your sister asks you for advise. "They want to do surgery to make the baby a girl," she says, "but I have been reading in the news lately about how those operations can be terrible later on. My daughter respects your opinion so much. It would really help if you could give us some guidance..."

Or, imagine...

On a quiet Sunday evening as you are relaxing from a full day's activities at church the phone rings. It's Chaplain Gonzalez from the Medical Center, a person you have come to rely upon heavily in the rigorous pastoral demands of a large and aging congregation. You've grown accustomed to her voice on the phone at odd hours reporting the latest stroke or heart attack of a parishioner. This time it's different. An auto wreck has left Bob, the chair of your church board, comatose in the emergency room. His wife is there. His car slammed headlong into a power pole on the edge of town. "There's more," the Chaplain

says, "but we had best wait until you get here."

You occupy your mind during the 20-minute drive with thoughts of Bob. His drinking had seemed a little out of control lately, and Susan, his wife, had asked if you would talk with him. Guilt rises in you as you realize that you had been avoiding it. Bob's quiet standoffishness has always made him difficult to talk to about personal matters - more comfortable to stick to church business.

As you turn into the special clergy parking area of the medical center Chaplain Gonzalez is waiting for you. You've been friends since she came to the medical center almost five years ago, but this is the first time she has taken the trouble to come to the parking area to meet you. Your anxiety rises.

"We've got to talk before you go in there," she commands.

"What's up?"

"I think it was a suicide attempt," she says, "and there's more."

"More?"

"Yes," she confirms, hesitantly, "When the ER staff undressed him he was wearing women's underwear - panties, bra, slip, and even pantyhose - all under his slacks and sweater."

Your knees begin to buckle. "Bob!? No, not Bob," you reply in a state of shock.

"And Susan thinks it was no accident," the Chaplain continues. "They had a terrible fight earlier this evening about Bob's transvestism. She threatened to tell you if Bob didn't quit. So Susan thinks he may have hit the pole on purpose. Bob's in terrible shape, and Susan is not really much better. We had better get in there. Are you ready?"

Or imagine...

...having a teenage son who has always been a sensitive and creative person. Let's say his name is Josh. One day you are in your study when Josh unexpectedly knocks on your door. He's got a problem he wants to talk over with you. You feel a bit annoyed because

you have just been able to get to sermon preparation late in the midst of a terrible week. He is your son, after all, and the two of you really talk so seldom these days. "Let's take a walk," you offer.

"Great," he responds.

A heavy silence accompanies the start of your walk. After a few awkward attempts to start a conversation, you press, "Well, tell me what's on your mind."

"Mom," he starts, "It's about my friend. I'm afraid he's in big trouble." Your heart flops over as you recall the many "my friend" stories that you have heard over the years in your ministry. Your listening sharpens as you begin to think your own son is in trouble. "Tell me about it," you reply, confused about how much you really want to hear.

"He's really confused," Josh starts, "and I'm afraid he's going to do something stupid. He made me promise not to tell anyone, but I just can't keep it to myself any longer. I'm really scared for him."

"I can tell," you reply with a bit of relief that this sounds like it really is about Josh's friend. You begin to wonder which friend is in trouble when he anticipates you.

"It's Terry," he blurts, tears beginning to leak from the corners of his eyes.

Your thoughts flood with images of this friend. You have always sensed Terry to be deeply troubled. His small, almost feminine, stature has always seemed the culprit. You've wished for him that he could find a good Charles Atlas course to build him up.

"He's really confused about himself. Since school started this fall he has been coming to class with makeup on, looking more and more like a girl. He's gotten beaten up a couple of times already, and the guys at school call him a fag and sissy."

"He always has been small for his age," you reply, hoping for a reasonable explanation.

“It’s not that,” Josh says. “It’s Terry thinking he’s a girl. He’s always joked around about it, and I thought he was just being funny. His Dad came home early one day last week, though, and caught Terry with makeup on. Terry got the beating of his life, and his Dad is threatening to send him to military school if he doesn’t straighten out.”

You begin to feel dizzy, like someone started to set the street spinning. Sitting down on a nearby bench you begin to wonder what you would do if you heard something like that from Josh.

Josh sighs deeply, body quivering with the stress, “I just got off the phone with Terry. He’s down in Midtown, been going to the gay bars in drag. I think he’s using drugs, and he says an older man has promised to help him become a woman if he will live with him. He doesn’t sound like the Terry I know. He is scaring me.”

In the midst of Josh’s confusion and hurt you manage to feel like you have offered some comfort. You feel glad you have nothing to do with this.

When you arrive back home there’s a message on your machine, you press the big button to retrieve it, “Hello Rev. Sims, this is Terry’s father. Terry didn’t come home last night and I wondered if Josh has seen him. Would you give me a call as soon as possible...?”

Or imagine...

It has always been customary for you to sit in your chair at the dais during the prelude to the Sunday service. It gives you a chance to collect yourself in preparation for leading worship and is a wonderful opportunity to reconnect with your members, often sharing a smile from across the old sanctuary.

This Sunday is different however. Just after settling into your chair and beginning to scan the sizable crowd that has gathered, you notice an unfamiliar face. It’s a woman, middle aged, rather tall and with striking platinum blonde hair. Something odd about

her, though. Then it dawns on you. That’s no woman, but a man sitting right there in the middle of the sanctuary on a Sunday morning wearing a dress and blonde wig! In horror you observe that others have noticed her, or him... or, whatever. People are shifting uncomfortably in the pews. Mothers are attempting to shield their sons from the view, and here and there a muffled giggle breaks out.

The prelude comes to an end, and automatically you stand as you have every Sunday for the past twelve years and begin, “We want to welcome all...”



These vignettes were intended to get your attention. One of them may remind you of a pastoral situation you have faced in your ministry. It is also possible that you have never been aware of confronting such a situation as this, or you may feel disgusted at the thought of even being involved in gender conflict and believe these stories to be contrived. These are representations of real predicaments in the lives of people — people who are church members or who would look to a pastoral counselor as a source of help. As in just about every other stigmatizing social issue, these individuals will only approach their pastor or counselor if there is a reasonable expectation that they will be listened to with respect and compassion. Working with people involved in gender identity struggles is a complex area that calls for far more preparation than a paper of this scope can provide. The intention here is to provide basic information and resources to guide the pastor who is involved in general parish ministry or the counselor in general practice. To that end we will look at the who, what, why, and how of working with gender identity differences.

WHO ARE THE TRANSGENDERED?

Transgendered individuals can be found in every walk of life, every racial/ethnic

group, every socioeconomic class, and every faith community. When a colleague of mine, an individual with a distinguished Ph.D. in Clinical Psychology and a practicing psychotherapist, was confronted with my transsexualism, his immediate response was, "Transsexuals? I always thought they were schizophrenic winos in drag on the street corner!" Many people would perhaps agree. A survey of the individuals in a support group in a large urban area of the Southeast, however, reveals a different picture. Here is a listing of the vocations of those present on one typical Saturday evening:

- entrepreneur (medical transcription)
- eye bank technician
- Ph.D. student (clinical psychology)
- electrical engineer
- software developer
- Presbyterian minister
- clinical consultant for community mental health center
- painting and wallpaper contractor (restoration specialist)
- long - haul truck driver/owner
- full - time college student (under grad)
- assistant manager of a video store
- computer specialist for a large airline
- emergency medical technologist
- marriage and family therapist
- nursing student
- corrections officer
- behavior specialist

This group included African- American, Asian American, Native American, and Euro - American racial ethnic groups. There were a number of church members or former church members, some active in leadership within their churches. The denominations represented include United Methodist, Southern Baptist, Presbyterian (PCUSA), Roman Catholic, Greek Orthodox, Metropolitan Community Church, Pentecostal, and Unitarian Universalist. While it is certain that somewhere there is a transsexual street person who is suffering from alcoholism and schizophrenia, this is

hardly the typical face of the transgendered person.

It is unlikely that a pastor will be approached by one of these individuals to talk over their gender issues. The vignettes provide a sample of the wide variety of problems encountered by transgendered individuals. Alcohol and drug abuse is fairly high in the transgendered community, coping mechanisms turned into problems themselves. Depression and anxiety disorders are understandably a part of transgender reality. Hopelessness regarding treatment and lack of acceptance by family and community often leads to severe depression and suicide. Risks for HIV/AIDS are high. Family problems are endemic to transgender reality. When a pastor is confronted with any of these other common problems it is possible that lurking behind it is a difficult transgender issue.

Perhaps the most common emotional companion to gender identity differences is shame. Attempts to deal with shame lead to many other problems, like substance abuse or severe depression. And shame interferes with avenues to treatment. Professionals, including clergy, have contributed to shame based avoidance through persistent ignorance and phobic reaction. Transgendered individuals are modern lepers in a culture that worships at the altar of sexual stereotypes, and few professionals in ministry or medicine choose to equip themselves to deal with them.

In spite of the enormous stress inherent in openly expressing a gender identity issue, transgendered individuals have about the same incidence of mental disorders as the population at large. There are indeed a few schizophrenic/alcoholic homeless transsexuals, but only a few. The vast majority of transsexual/transgender people, on the other hand, are otherwise normal contributing members of our churches and communities.

WHAT CAUSES GENDER IDENTITY CONFLICT?

What would cause a rational well educated individual to identify with such a deeply stigmatized group? Let's first look at some of the things that do not cause gender identity conflict.

Gender identity conflict is not a result of unacceptable homosexual orientation. It has been widely held in the past that there are some individuals with same - sex attraction who are repulsed, for numerous reasons, by the idea of sex acts between two men or two women. This theory held that these people sought sex reassignment as an avenue towards emotional acceptability of their sexual attractions. If this theory were correct we would expect that as same sex attachment becomes more socially acceptable that the numbers of transgendered individuals would decline. The reported incidence of transsexualism (one manifestation of transgender experience) has been steadily increasing from 1:100,000 forty years ago to less than 1:10,000 today. It has also become increasingly clear that individuals who successfully change their gender expression do not necessarily change their sexual orientation. A heterosexual man in his mid forties who undergoes gender reassignment has a high likelihood of emerging from the process attracted to women. Hardly what one would expect from the homosexual theory of causation.

Gender identity conflict is also not a consequence of severe stress. It is easy to misinterpret the facts in any transgender situation. Take Bob, for example. One may look at Bob's secret cross-dressing as the result of mid - life and marital stress or a manifestation of the consequences of heavy drinking. Bob himself, who may describe his proclivities for wearing women's underwear as "relaxing" or "stress relieving", can reinforce this impression. This explanation usually falls apart, however, when an exploration of Bob's history reveals that he began his cross-dressing activities before he reached puberty

(the most common starting point for male cross - dressers). It must be a powerful motivator indeed to cause one to feel relaxed while engaging in such a socially stigmatizing activity. So the stress - relief theory of transgender genesis can be true insofar as an already established character trait becomes a refuge in times of mid - life stress. It is clear that mid - life stress does not cause a person who is otherwise typically gendered to suddenly develop cross - gender conflict.

What does cause normal, healthy human beings to develop feelings of inappropriateness about their anatomical and socially reinforced gender role? Experts have not been able to develop any consensus about this, but the arguments run along the traditional nature versus nurture dividing line.

Those who follow the nature argument have much data to back up their perspective. Contrary to the attitudes that most of us were raised with, sex is not a bipolar duality. It has become popular in religiously conservative circles to point to the clear sexual duality expressed in the Hebrew Testament claiming that this is indeed God's intention. If it is, then God has been a dismal failure. Sexual reproduction is only one of a number of ways that God's creatures procreate. There are many species that also express dual sexuality, like sea anemones that are both male and female. Even among species that are clearly sexed, there are numerous variations on individual expression, including intersexuality. Even Jesus recognized that some human beings are born without clear sexual differentiation (cf., Matt. 19:12). Embryologists have known for years that the human fetus does not differentiate into male or female until the twelfth (?) week of fetal development. They also know that this differentiation is fraught with risk and often proceeds without clear expression. Approximately 1 out of 100 live births present a new human being to the world who is neither clearly male nor female. And this represents the only gross anatomical aspect of fetal development. New research seems to

indicate that gross neurological development can be conflicted as well, leaving open the possibility of a child whose brain sex is different from anatomical sex.

On the other side of the developmental isle are the professionals who point to environment as the primary cause of gender identity conflict. They, too, have powerful arguments. Indeed, the earliest scientific arguments about the development of gender identity variations came from this perspective. Psychoanalysts were perhaps the earliest of modern clinicians to note gender identity conflict, which they viewed as a sexual perversion or paraphilia related to castration anxiety. Overbearing or overprotective mothers and absent or weak fathers were often viewed as developmentally causative of male to female gender identity conflict. Attempts to treat this conflict through the use of psychoanalytic reconstruction, however, have been notoriously unsuccessful.

A second and more popular notion about environmental determinants involves those whose gender role in childhood has been confused by parental pressure. These are children who, for some reason, have been raised in a gender role different from that which their anatomical sex would indicate. Mothers conflicted over the desired sex of their children are the most frequently identified culprits. They are reported to dress their sons in crinolines and ribbons and present them as little girls for as long as they can get away with it. While there are, indeed, cases of individuals whose later gender conflict can be traced to such childhood experiences; there are more cases where children asserted a gender identity different from that which was imposed by parents. Professionals are even beginning to question old assumptions about the early malleability of gender identity that led surgeons to willingly change the gender of infants when such change seemed anatomically expeditious.

Perhaps the most compelling contemporary arguments about the etiology

of gender identity conflict, particularly related to transsexualism and sex reassignment in adults, comes from the area of linguistic studies. These linguists raise compelling arguments about the effects of language and technology on human behavior. Radio, television, telephones, computers and the internet have provided the media, and modern medicine, especially, plastic surgery, has provided the means. The confluence of these technologies and the creation of the medical ability to construct anatomical sexual change (at least cosmetically), has spawned the new word, *transsexualism*, and in so doing has in essence created the reality of it.

The linguistic argument, in partnership with modern sociological and anthropological movements to describe the social construction of gender, while having created a compelling argument about the genesis of modern transsexualism, has done little to help us learn how to deal with it. These writers create powerful critiques of modern culture, but offer no realistic solutions. As regards transsexualism itself, the most effective treatment we have continues to be gender reassignment.

As you can see, the causes of gender identity conflict are unclear. Several things emerge, however, that might safely be said about causation. First, it seems clear that being transgendered is not a “choice” in the strict sense of the word. While the transgendered individual’s response to her/his own truth may vary and involve some measure of personal choice, being transgendered itself seems inherent to the individual’s identity. This is very similar to our growing understanding of sexual orientation as biologically inherent to the individual. Second, there appear to be no effective methods by which a person’s gender identity can be altered or reversed. Even various “change ministries” that zealously claim to use spiritual methods for correcting gender expression are clear that gender identity

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Pastoral Care in Transgender Experience

cannot really be changed (they claim to be effective in changing behavior only, not identity). Finally, the only consistently effective treatment appears to be therapy that assists the transgendered individual in finding a more comfortable and confident gender expression.

WHY SHOULD MY CHURCH BE CONCERNED OVER TRANSGENDERED PEOPLE?

For most pastors it seems easy to dismiss the notion that gender identity conflict is in any way an important concern for their congregation. Statistics tell us, however, that probably somewhere between 1 - 2% of our general population have significant intersex or gender identity issues. Since transgender reality effects all socioeconomic and ethnic groups and is not a matter of individual choice but is, rather, a “given” in a person’s life, then you as a pastor can assume that there are 2 members of your own church for every 100 members on your roll who are in some way transgendered. In other words, if you have a church of 250 members, you may well have five members who have significant gender identity conflicts. This may seem a small number, but if that same proportion of your congregation were physically handicapped you would probably view it as a significant pastoral concern. The difference is that the transgendered in our congregations are invisible and will remain invisible until it is clear that they are accepted. Few transgendered people have the courage Ann (in our first vignette) did in confronting their pastors about their realities.

So why not simply allow it to remain a silent minority? There are several reasons.

First, for mainstream Christian and many other faith groups, there is the challenging theme expressed in Jesus’ ministry to seek and to embrace the outcast. In New Testament language the outcast were usually referred to as “widows and orphans.” We are prone to romanticize this expression into a reference to those who are simply needy and

who tug at our heartstrings, but it was much more than that. In Jesus’ time widows and orphans were indeed outcast, persons without station or status. Without a husband or a father women and children were little more than useless chattel, and often left to beg or starve to death. They had no “place.” It requires little imagination to understand our modern version of this reality as those who are transgendered. It may be surprising for you to know that in almost all states and municipalities across the USA transgendered individuals can be legally and summarily fired from their jobs, denied service in public accommodations, denied access to their children, denied housing, and even denied health care - simply because they are transgendered. Think of all these as risks that Bob (from our vignettes), your friend and the chair of your church board, would take in being exposed as transgendered, and you may begin to understand his apparent suicide attempt.

Jesus calls us as a community to participate in the return of those who have been cast out, in embracing those who appear to have little or no value. In so doing we are assured that we have embraced Christ himself.

The second reason that your congregation can benefit by recognizing and embracing the transgendered is that there is so much to be learned from transgender experience. Many of the moral and ethical problems that we face as churches and as a culture can be traced to roots firmly embedded in the experience of being gendered. While the feminist movement has sensitized many of us to the problems inherent in being female in a culture with patriarchal roots, we are only beginning to experience the consequences of this cultural ancestry on our male members. Marriage and family conflict more often than not has clearly gender related causes. Gender studies are new and quickly growing elements in higher education curricula. We are a society that remains fascinated with and fearful of gender. Faith communities that are able and willing to

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become sensitive and knowledgeable about modern gender issues are best able to address the pastoral and theological issues that emerge from those issues. Transgender and intersex experience are manifestations of the larger reality of being gendered that is inherent in every human life. Sensitivity to these will inevitably deepen our understanding of ourselves both as individuals and as communities.

HOW CAN I RESPOND TO TRANSGENDER EXPERIENCE?

The most important response to transgender reality is to become more knowledgeable about it. An excellent resource that should be a part of the counseling or church library is *True selves: understanding transsexualism for families, friends, coworkers, and helping professionals*, by Brown and Rounsley. The simple presence of this book in the church library will signal an attitude of openness to any transgendered church member. The pastor or counselor who is interested in more scholarly investigation will find an excellent resource in Dallas Denny's edited text, *Current concepts in transgender identity*, and the Bullough's excellent work, *Cross dressing, sex, and gender*.

Pastors of larger or urban congregations may consider developing an adult course, reading or discussion group on the issue of being gendered in which transgender experience is a topic. Most medium to large urban areas have transgender support or advocacy groups willing to send speakers and discussion leaders at little or no cost. The most compelling exposure to transgender experience comes in the encounter with real people who are struggling to live real lives.

Groups in the church that are open to discussing transgender experience have been a place where church members who are struggling with a secret gender identity issue have found the courage to express their true selves. It can also become safe space for other

church members to begin to express their own discomfort with sexual stereotypes that interfere with the development of authentic relationships.

Sermons can be an effective place to open safe ground for the exploration of culture and gender identity issues. Topical sermons can be developed from Genesis accounts of gendered creation, especially sensitive treatments of the Adam and Eve story as an expression of organic connection between male and female. Matthew 19:12(a) could easily become the starting place for a sermon on the topic of intersexuality, or the biological reality of individuals whose anatomical sex is not clearly differentiated. Jesus teachings regarding wholeness can always be powerful resources for pastoral preaching.

Faith communities, which have taken welcoming positions on sexual orientation issues, are also places that could consider being openly welcoming of gender identity differences. Many transgender support groups struggle to find safe and economical space for meeting. Faith communities that are welcoming can make a strong statement of support for transgender experience by hosting and integrating such a group in the ministry of the community.

A word of caution. The Internet, movies, tabloids, and television talk shows are unfortunately the most readily accessible and at the same time inaccurate sources for information on gender identity issues. Transgender is a hot topic, and the media has not resisted the temptation to exploit transgender experience. The tendency has been to reflect the stereotypic, sensational, and sordid in the search for an audience. Not only are these poor places for information, they are cultural influences that require confrontation and correction. These are sources that portray transgendered individuals as primarily interested in seeking attention, promiscuous, alcoholic, and poorly socialized who work as nude dancers or sex workers.

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Pastoral Care in Transgender Experience

Individuals who fit this profile are far more interesting to tabloid TV or the popular press than an individual who has changed sex and continues to work in her chosen career in banking while maintaining healthy social and family relationships. The banker is, however, far more exemplary of the whole of the transgender community than the sex worker. And she is far more likely to be next week's visitor to your Sunday morning worship.

Transgender experience challenges faith experience at fundamental levels. The pastoral and theological issues are complex and sensitive. Pastors and counselors with the courage to enter this discourse and lead their communities in the exploration of these topics will find here a rich opportunity to minister as well as to learn.

For Further Study:

Brown, M.L., & Rounsley, C.A. (1996). *True selves: understanding transsexualism for families, friends, coworkers, and helping professionals*. San Francisco, CA: Jossey-Bass Inc.

Denny, D., ed. (1998). *Current concepts in transgender identity*. New York: Garland Publishing, Inc.

Ettner, R., & Brown, G. (1999). *Gender loving care: A guide to counseling gender-variant clients*. New York: W. W. Norton.

Feinberg, L. (1996). *Transgender warriors: making history from Joan of Arc to Ru Paul*. Boston, MA: Beacon Press.

Mollenkott, V.M. (2001). *Omnigender: a trans-religious approach*. Cleveland, OH: The Pilgrim Press.

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The Southern Association for Gender Education, Inc.

...provides educational resources about gender identity and expression for institutions of higher education, professional medical organizations, and faith communities. Our goal is to provide accurate and useful information in a way that will empower these communities to promote healthy attitudes about gender and the expression of gender across a wide spectrum of identities. Your contributions will directly enable us to implement our goals of:

EDUCATIONAL

- ☞ Visiting educational institutions to speak about gender identity and expression.
- ☞ Creating a presence on college and university campuses for students to safely explore transgender issues.
- ☞ Through education to empower students and faculty to advocate for freedom of gender expression on their campuses.

Providing resources for university administration and staff in improving gender diversity in the academic workplace.

MEDICAL

- ☞ Providing training for medical professionals and students to improve awareness and sensitivity to gender issues in treatment.
- ☞ Providing programs for continuing education for medical personnel who treat transgender and other gender variant individuals.
- ☞ Providing clinical consultation for physicians who work with transgender and gender variant clients.
- ☞ Providing resources and training for medical practitioners who want to improve sensitivity of office and clinic staff to clients who are gender different and their families.

FAITH

- ☞ Widening the perspective for welcoming groups within faith communities to include individuals with differing gender identities and expressions.
- ☞ Broadening the reach of progressive faith communities to include people with differing gender identities and expressions.
- ☞ Witnessing to the larger community that transgender expression is compatible with living a faithful life.
- ☞ Providing positive models for individuals struggling with reconciling their transgender identities with their faith journeys.

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