Gender Identity: Perspectives from Psychology and Religion

Glen A. Bowman, Assistant Professor, York College,1 US

Abstract

In recent years, gender identity has become a controversial issue in the United States, especially in psychological research. Instead of using the classical definition of gender, a growing trend has involved some perceiving their gender differently than their original anatomical characteristics would indicate based on their personal perspective. Many in the scholarly community have embraced this new definition of gender identity, transforming the meaning of transgender from someone who had a sex-change operation to someone who perceives themselves differently than their gender designated at birth.

Multiple religions seem to indicate a different philosophy towards gender identity that aligns with the classical meaning. Based on the biblical text, Judaism, Christianity, and Islam describe God as the creator who made people male and female from their conception instead of a fluid concept of gender. However, sometimes insensitivity from people who hold this view has caused psychological issues for those who feel otherwise, and a significant divide has developed in society. A discussion of the logical arguments from both viewpoints supports the classical religious concept of gender identity. However, instead of merely dismissing alternative viewpoints, a proposal for how to view gender identity moving forward appears, contrasting gender identity with gender roles and stereotypes.

Keywords: American Psychological Association, Bible, Christianity, Islam, Judaism, Psychology, Transgender

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The definition of the term gender identity has changed in recent years from describing an individual’s biological gender (Egan & Perry, 2001) to defining his or her own perception of his gender identity and expression (American Psychologist, 2015). This shift in thinking has been incorporated into the American Psychological Association’s (2010) ethics code to recognize gender based on their perceived gender identity instead of the classical view of biological gender. While this acceptance of gender identity’s new definition has not received universal acceptance (Jobson et al., 2012), the issue has greatly influenced psychology ethics in the United States for the past two decades. Arguments for a biological understanding of gender identity can come from both a psychological and religious perspective, especially using biblical teachings from religions such as Christianity and Judaism. To explore this topic, arguments from scholarly and subjective

1 Former Assistant Professor
views of psychology will appear, followed by examining religious literature to understand this topic from varying perspectives. Then, a proposal for how to view gender identity and support transgender individuals appears, contrasting an emphasis on gender identity versus gender roles and stereotypes.

OVERVIEW OF THE ISSUE FROM A PSYCHOLOGICAL VIEWPOINT

The classical viewpoint on gender identity came from a biological and anatomical assessment at birth (Egan & Perry, 2001) and then the consequent assignment of those identities on a birth certificate. However, researchers have shifted towards the defining gender identity based on individuals’ personal perceptions of their gender based on their psychological understanding of themselves and that topic (e.g., Wood & Eagly, 2015). Correspondingly for discussion in this paper, transgender will describe people who identify with a gender different than the gender assigned at birth. More transgender youth have sought psychological care in recent years (Olson-Kennedy et al., 2016), which could indicate both a rise in the transgender population and the growing psychological problems that can come from biological and psychological discordance. Newfield et al. (2006) noted that those who have a transgender perception tend to have a lower quality of life, and some individuals alter their biological traits to anatomically conform to their perceived gender identity.

However, some people have rejected this alternate idea of transgender categorization, sometimes to the extent of persecuting those who behave consistently with their alternate view of their gender identities (Herman, 2013). Gordon and Meyer (2007) mentioned that discrimination against transgender people mirrors that of lesbian, gay, and bisexual (LGB) people, and some transgender individuals also face LGB prejudice. Consequently, attention from healthcare providers has increased towards transgender individuals in the last twenty years, accepting their psychological gender identities as accurate despite their biological gender traits (Lombardi, 2001). This increase in acceptance of the transgender population’s beliefs and the reactionary persecution that they face has promoted the issue to become a matter of serious ethical concern for psychologists.
How the Issue Influences Psychology Ethics from a Scholarly Perspective

Recently, many scholars have shifted towards the psychological view of gender identity (e.g., Egan & Perry, 2001; Gordon & Meyer, 2007; Lombardi, 2001), which has shaped the ethical stance of the American Psychology Association (APA). The APA forbids their psychologists to help someone to accept their biological gender if that person believes that they have a different gender (Fisher, 2017). Their Standard 3.01 on Unfair Discrimination and Standard 3.03 covering Other Harassment forbid psychologists from encouraging transgender individuals to accept their biological gender in the same manner that it forbids discrimination on external factors such as disabilities, race, and culture (APA, 2010).

This increased sensitivity to transgender ethics in psychology likely stems from an increased awareness of the psychological difficulties that transgender individuals encounter. Mathy (2003) noted that transgender people had higher suicide ideation, attempt rates, drug issues, and psychological medication use. Olson-Kennedy et al. (2016) stated that transgender youth have a higher risk for negative medical and psychosocial outcomes. Gordon and Meyer (2007) found a significant increase in major prejudice and discrimination acts towards transgender people. Herbst et al. (2007) listed other issues connected to psychological struggles that transgender people often endure, such as isolation, economic marginalization, and unmet transgender-specific medical issues. These difficulties may have resulted in the APA and other scholars to side with protecting transgender individuals as opposed to reflecting on the arguments against adopting a purely psychological view of gender.

How the Issue Influences Psychology Ethics from a Subjective Perspective

While the scholarly perspective makes logical sense if gender identity existed as a personal choice, none of the other areas of respect for people’s rights and dignity in the APA ethics code have a psychological option for rejecting a biological evaluation (APA, 2010). For example, age comes from a chronological number based on the person’s date of birth, and the APA does not dictate that practitioners must respect people’s alternate beliefs about their age. The same holds true for other factors such as race and socioeconomic status since psychologists would probably question the mental health of a 40-year-old, poor, white woman who said that she was an 18-year-old, wealthy, black man. It seems paradoxical that psychologists may question her viewpoints concerning her assessment of her race, age, and socioeconomic status but have to affirm her perception of her
gender, despite her DNA and anatomical traits indicating that she has only biologically female traits. Relatedly, emerging scientific data have not supported the idea of transgender individuals born with incongruent anatomical features and gender identity (Powell et al., 2016).

The author previously coached an elementary school girl in basketball who expressed an interest in receiving an operation to become a boy. Her guardians stated that she could not have the surgery while living with them but could do whatever she chooses later in life. At this young age, she understood that she was not a boy physically, but she believed that she could eventually change her gender to conform to her desires. However, the APA teaches that she can recognize herself as a man even before undergoing that surgery, possibly from societal pressure to make transgender acceptance a virtue ethic (Koocher & Campbell, 2016). From a removed perspective, it seems that this girl had a stronger understanding of her gender than the APA professionals because despite cutting her hair short and having the desire for future surgery, she knew that she was still a girl and continued to play on girls’ basketball teams. Perhaps groups such as the APA could embrace this wisdom and choose to accept gender identity based on the gender declared at birth, DNA results, or even current anatomical status as opposed to simply following their self-imposed ethical values (Knapp et al., 2013).

OVERVIEW OF THE ISSUE FROM A RELIGIOUS VIEWPOINT
Despite the view mandated by the APA, the religious teachings of Christianity, Judaism, and Islam would favor a biological view of gender over a psychological perspective. Both the teachings of Islam (Surah 4:163; 5:46) and Christianity (John 17:17; Romans 15:4; 2 Timothy 3:16-17) refer to the Old Testament and New Testament as inspired by God. Judaism teaches that the Old Testament comes from God (Deuteronomy 4:2; 2 Kings 17:13), which indirectly points to divine authority in the New Testament through the words of Christ (Deuteronomy 18:15-19; Jeremiah 31:31-34). Connected to that authority recognized by these religions, the Old Testament and New Testament make strong assertions about gender as created and determined by God.

The beginning of the Old Testament describes God creating male and female genders (Genesis 1:27; 5:2) and that a biological difference exists between men and women (Genesis 2:20-23), emphasized later by specific anatomical differences (e.g., Deuteronomy 25:11; Genesis 17:10-14; Song of Solomon). Sex chromosomes have been later discovered that almost always
predictably reflect these biblically-endorsed differences between males and females (Palmer et al., 2019). Therefore, these gender differences exist both at a molecular level as well as an anatomical level, which Israelites and Christians needed to evaluate objectively and consistently to keep certain biblical commands (e.g., Exodus 21:7; 1 Corinthians 11:3-16). In addition, this method of designating gender from traits noted at birth receives further support from other passages outside of biblical commands but still contained within that narrative (e.g., Exodus 1:15-19; Romans 1:26f). Clearly, these examples and input from corresponding empirical literature (Bell, 2019) support the practice of using the biblical text to define gender from anatomical traits noted from birth.

Unfortunately, the lack of sensitivity from certain people with religious beliefs towards people struggling with their gender identity may have caused significant societal strife from this issue (Rhodes & Stewart, 2016) and led to the consequent safeguards instituted by the APA. Some of this turmoil may come from recent struggles in changing societal gender roles (Ejeh, 2019), which may cause people to question their gender identity. However, the Bible uses language concerning gender roles that crosses cultural stereotypes to illustrate positive behaviors, such as strong women working hard and godly men caring for others like nursing mothers (Proverbs 31:16f; 1 Thessalonians 2:7). Unfortunately, many psychological issues concerning gender identity may arise from individuals not viewing themselves as incongruent to certain cultural norms and stereotypes regarding gender roles. Therefore, instead of receiving assurance about their differences as acceptable and originating with God (1 Corinthians 12:3-11; Matthew 25:15), they question their gender identity based on societal pressures to attain certain gender norms and accepting the growing narrative about their gender identity as a personal choice (Lumby, 2008).

A modern consideration in evaluating religious viewpoints outside of biblical texts comes from the acceptance of women in church leadership roles in recent years historically occupied by men (Burnet, 2017). While a few passages seem to limit women’s participation in certain congregational roles (1 Corinthians 14:33-37; 1 Timothy 2:11-3:2, 12), the church has increasingly used a cultural argument to place women into these roles (Ademiluka, 2017). Perhaps this increasing fluidity of gender roles in both society and the church has facilitated the cultural shift toward fluidity in gender identity. The influence of recent societal shifts into religion has become evident in many religions such as Christianity (Kregting et al., 2018), Judaism (Fader, 2017), and
Islam (Nasr, 2018). If religions shift in a similar direction as secular culture, it seems that gender identity changes would become more accepted by both religions and mainstream society.

CONCLUSION

Clearly, gender identity has developed into a major topic of concern in psychology ethics, with differences in understanding between certain psychological and religious perspectives. This issue has been magnified by practices such as the APA’s current rules prohibiting practitioners from offering any biblically-based counsel contrary to their gender identity beliefs. Evolutionary ethics and biblical ethics tend to differ overall (Bishop, 2016), and this difference has undoubtedly presented itself in recent controversies over gender identity and related transgender issues. An objective perspective that transcends biases from unyielding liberal and conservative thought (Knapp et al., 2013) may best help those who have a transgender mindset and others who offer psychological help to people struggling with difficulties based on their personal gender perception. Explaining the differences between gender identity, gender roles, and gender stereotypes may help transgender individuals to feel more self-acceptance in their biological birth designation and less need to conform to strict male or female stereotypes. This may help to alleviate many of the psychological issues correlated with individuals in the transgender population. Assistance with understanding gender roles and the limited connections to gender identities and stereotypes may prove more effective than silencing the discussion about gender uncertainties and instead treating the symptoms of psychological discordance.

While this method seems worthy of consideration, a problem with easily implementing this solution comes from organizations imposing their views on gender identity upon those who practice certain helping professions. Those professionals could either choose to disassociate themselves with groups such as the APA or attempt this solution with possible loss of licensure. Perhaps in a religious setting, clergy and others would have the freedom to teach a biblical perspective on gender roles and identity (Tackett, 2006), but they would probably have to avoid certain secular occupations. This exclusion of certain religious values shapes the membership of the APA and similar organizations, further solidifying their support of a psychological view of gender identity but potentially limiting options for treatment.
An experiment could evaluate the effectiveness of this practice, providing counseling for transgender groups struggling with psychological issues, with one group receiving guidance using the APA approach and another group receiving counsel about gender roles, stereotypes, and identity from a biblical perspective. This type of randomized experiment could provide evidence about which treatment option would produce greater effectiveness. Additionally, because spiritual well-being correlates with positive psychological outcomes (Milstein et al., 2020), a third group in that experiment could consist of people who receive biblical counseling regarding all areas of their psychological needs in an attempt to discover if well-rounded biblical counseling would have greater positive outcomes with transgender individuals. This method would not necessarily point to God or the Bible directly in its practice but use biblical principles in counseling and offering advice to patients regardless of their worldview.

If successful, these proposed forms of treatment could facilitate what both practitioners of psychology and religion ultimately hope to achieve by providing positive psychological outcomes for people with struggles connected to their transgender perspective. Unfortunately, a polarization has occurred between people with differing views on religion and spirituality, with religious expression sometimes coming across as offensive to those who encounter their message (Bowman et al., in press). However, by not myopically forcing a viewpoint on transgender individuals but offering new methods to understand their gender roles and identity, this could facilitate them accepting their biological gender status. People react differently to messages connected to faith based on the means of presentation (Bowman, 2020), so offering biblical wisdom without citing the Bible or forcing that perspective upon others may prove most successful to help people suffering from psychological transgender issues regardless of their religious beliefs.

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REFERENCES


