

The War on the Family and Biological Sex

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Ask this question when you're next with a "trans"-affirming friend, relative, or colleague: "What are maleness and femaleness?" This person can't coherently say that maleness and femaleness are related to anatomy or physiology because the "trans" cult has already said maleness and femaleness have nothing to do with breasts, vaginas, penises, and testes. In fact, the "trans" cult claims that humans with congenital penises—like Bruce Jenner—can be fully female.

And they can't coherently say it means liking certain clothing styles, wearing make-up, or playing with certain kinds of toys, because they've already said those are arbitrary socially constructed conventions imposed on humans. You see, the entire "trans" ideology is built on circular reasoning.

Disciples of the "trans"-affirming movement have been advancing their science-denying, intellectually incoherent beliefs at blinding speed. One would think it impossible that the belief that men can become women or that humans can be "born in the wrong body" could catch fire in the modern world, but we don't live in modernity. We live in postmodernity, which denies the existence of objective reality and objective moral truth. Prior to the emergence of postmodernism's exaltation of subjectivism and relativism, the notion of pregnant or "chest-feeding" men would have been considered absurd by all.

The idea that preceded the social chaos we now see is the idea that biological sex has no intrinsic meaning and no necessary connection to the now-slippery concept of "gender." "Trans"-activists, whom I will be referring to as passers, knew that in order to convince society that the emperor's peignoir makes him an empress, they had to do some tricky linguistic work.

They started by severing sex conceptually from "gender." In this brave new world, biological sex and gender now represent distinct phenomena. Sex denotes the two categories into which the human species is divided based on chromosomes, anatomy, and biology (i.e., male and female), while "gender" refers to those arbitrary, socially constructed conventions and norms associated with males or females. The American Psychological Association defines gender as the "psychological, behavioral, social, and cultural aspects of being male or female."

At the apex of the radical and incoherent "trans" ideology sits "gender identity," which, according to the Human Rights Campaign, is "one's innermost concept of self as male, female, a blend of both or neither."

One example of the incoherence of the "trans" ideology is revealed in the legislative changes that allow men and women who reject their biological sex to have their birth certificates falsified to

facilitate their passing. Passers in 46 states can now have their birth certificates, which are both legal and historical documents, certify a lie.

Passers defend this legalized fraud by arguing that, at birth, doctors "coercively assign" or "designate" a "gender marker," which, in their cases, was wrong. But here's where things veer off into incoherence.

Remember, passers do not deny the existence of the phenomenon of sex. Rather, they argue that sometimes there is a mismatch between one's sex and one's gender identity, that is, between one's biological makeup and one's internal sense of being male or female. Does it make any sense to say that when doctors deliver babies, they assign them a "gender"—that is, arbitrary, socially constructed expectations and conventions?

No, it doesn't. At birth doctors don't assign to newborns social conventions associated with maleness or femaleness. They identify the **sex** of babies, an objective feature of the human species that never changes. Bruce Jenner remains forever objectively male.

If gender identity is totally separate from anatomy, why did Jenner suffer through a castration and tracheal shave? If, when he had all his male body parts, he was truly and authentically a woman—in other words, if his womanness was not constituted by his body parts—why did he lop off any parts? Is he more of a woman now that his body has been artificially molded into the verisimilitude of a woman's body?

Perhaps the willingness to endure the pain and expense of multiple surgical procedures is testament to the truth that anatomy has profound meaning to which humans instinctively respond. And perhaps anatomical differentiation is the source of feelings of modesty and the desire for privacy in spaces where people engage in private activities.

The proposition by passers that maleness and femaleness have no necessary connection to objective sex and its anatomical manifestations creates cohesion problems for the heretofore mostly cozy relationship between homosexuals and passers.

A tweet from well-known homosexual activist Zack Ford, senior editor of the homosexuality-promoting website Think Progress, exposes the splintering of the unholy LGBT alliance. On May 2, 2017, Ford tweeted, "I've personally met many trans men I'm attracted to. If genitals determine how you feel about someone, you're transphobic."

To be clear, a "trans man" is, in reality, a woman.

If it's "transphobic" to claim that one's sexual attraction is determined by genitalia, then the entire homosexuality-affirming ideology is transphobic. Those who identify as homosexual assert that they are attracted **only** to persons of their same sex. Virtually everyone has correctly

understood homosexuals to be saying that genitalia matter. While Zack Ford may find anatomy irrelevant to sexual attraction, many other homosexuals beg to differ.

Fully grasping the comprehensive and culture-shattering nature of the "trans" revolution requires understanding that passers do not believe they need to take cross-sex hormones or undergo surgical mutilation before they can compel society to treat them as if they are the sex they are not. Nor is the experience or diagnosis of gender dysphoria required. Not even cross-dressing and make-up are necessary.

All that's necessary for the establishment of a "trans" identity is a personal proclamation. And based on that proclamation, society in every way and in every context—including restrooms, locker rooms, showers, dressing rooms, dorm rooms, sex-segregated shelters, nursing home rooms, semi-private hospital rooms, and the military—must treat "trans" people as if they are the sex they are not.

Even as passers fight for the purported right to access opposite-sex private spaces, they are rarely, if ever, compelled to respond to questions like these:

1. Why should one's subjective feelings about gender take precedence over one's objective sex when it comes to undressing, showering, or using restrooms? In other words, if gender-dysphoric men should not have to use private facilities with those whose "gender identity" they don't share, why should women have to use private facilities with those whose objective sex they don't share?
2. Do "progressives" believe it is unnatural or pathological for girls or boys to object to engaging in excretory functions in a stall next to an unrelated person of the opposite sex doing likewise?
3. Why should a boy's subjective feelings about his objective sex affect girls' feelings or beliefs about undressing near him?
4. How do female-identifying men who want to use private spaces with women *know* the gender identities of those women? Maybe the people with vaginas in the women's restrooms internally identify as men.
5. How will society know whether the objectively male persons using female facilities actually **do** view themselves as women or are predators masquerading as "transwomen" in order to view or molest their prey?
6. Which private spaces should "genderfluid" persons be expected to use?

7. If there is a mismatch between a man's anatomical sex and his “gender identity,” how can he or anyone else be sure that the error resides in his body and not his mind?

Ultimately, however, those questions won't matter because we're moving rapidly toward co-ed private spaces everywhere, which means **no** private spaces anywhere.

We should have learned this from the efforts of former president Barack Obama and his attorney general Loretta Lynch who sought to prohibit segregation based on both sex **and** "gender identity" in spaces that historically have been sex-segregated. This would mean that **neither** condition could be considered in determining who can access facilities that preserve privacy for intimate bodily acts.

For example, access to women's locker rooms at a state university could not be limited just to women and to men who identify as women. If "transwomen" (i.e., actual men) were admitted but "cismen" (i.e., normal men; men who accept their sex) were refused entry, the university would be guilty of discriminating based on gender identity.

And this is the ultimate goal of "trans" anarchists: the eradication of all public recognition of sexual differentiation everywhere. A day will come when we will see a man with an intact penis and breast implants walking naked through a women's locker room in the presence of children. And we will see an objectively female person who pretends to be a man and has obtained a falsified birth certificate and driver's license, but chooses not to have a mastectomy swimming topless at a public pool on a hot summer day like other men.

An incoherent, irrational, science-denying ideology like the "trans" ideology cannot endure forever, but while we wait for the restoration of common sense (and courage), all lives will be harmed to a greater or lesser degree.

Some of our elderly living in nursing homes will be forced to room with persons of the opposite sex. Pernicious legislation, like a bill passed in California that makes it illegal to assign nursing home rooms based on objective sex will spread. Soon grandma and grandpa will be forced to live out their final days deprived of their right to privacy and robbed of their dignity.

Little children in public schools will be taught by the government that to be compassionate, inclusive, and just, they must be willing to relinquish their privacy. They will be taught that those who object to co-ed restrooms and locker rooms are ignorant, bigoted, and hateful.

Children will be raised amid chaos and confusion by fathers who masquerade as women and mothers who masquerade as men.

Adults will suffer personal, professional, and legal repercussions for refusing to lie when ordered to refer to passers by incorrect pronouns.

But the most egregious harm will befall those who, deceived by the doctrinaire "trans" ideology, will have their healthy bodies mutilated and their psychological and social development perverted.

There's been an explosion in the numbers of children and teens identifying as "transgender," including teens who never before exhibited signs of gender dysphoria. This latter phenomenon, which affects primarily teen girls, has been called "rapid onset gender dysphoria."

Some parents are reporting that their children have **several** friends who identify as "trans," and some are reporting that their children self-diagnosed after spending time on the Internet where they encountered videos or chat rooms in which young people describe their gender dysphoria or "trans" identity. Many believe the dramatic increase in this profoundly unnatural phenomenon results from "social contagion," which tends to affect adolescents much more than adults.

Loving parents will be deceived by "trans" activists into believing that the only way to prevent their children's suicides is to facilitate their gender confusion. Taking puberty-blockers to prevent the development of secondary sex characteristics is the first step in the "trans"-affirmative medical protocol.

Quack doctors will allay parents' concerns about health risks by assuring them that the effects of this unnatural hormonal interference are reversible. But these parents likely won't be told that puberty blockers alter irrevocably the social experiences that attend puberty, thus increasing the likelihood that their child's biological-sex-rejection will persist.

Kaiser Health News recently wrote about one of the primary puberty blockers administered to gender-dysphoric children: Lupron. Lupron is thought to cause osteopenia (bone-thinning), osteoporosis (bone loss), degenerative disc disease, fibromyalgia, and depression. Due to the number and nature of complaints received, the FDA is now reviewing the safety of Lupron.

After puberty blockers, something more wicked comes: cross-sex hormone-doping that irreversibly changes voices and renders young people permanently sterile.

And finally, for some, there will be "gender confirmation surgery." Already minor girls as young as 15 are undergoing double mastectomies.

Evidence suggests that without "trans"-affirmative social support and medical interventions, upwards of 80 percent of gender-dysphoric children would eventually accept their sex, a phenomenon called "desistance."

Because the mainstream media are the handmaidens of all things sexually deviant, most Americans remain unaware of another phenomenon, the growing "**detransitioning**" movement.

Young men and women are stopping their testosterone- or estrogen-doping and telling their painful stories of regret. They talk about the real reasons for their gender dysphoria, which include tragic personal losses, sexual abuse, and autism. And they talk about the unalterable effects of their "trans treatment."

In a YouTube video—since removed—a *very* liberal young woman, Carey Callahan, spoke not just about the unhappiness she felt while taking testosterone and her concerns about the ease with which she was able to access cross-sex hormones but also about the profound dysfunction she witnessed firsthand when she was a full-fledged member of the "trans" cult:

I used to believe I was a trans guy. When I was trans, I felt that my trans identity should not be pathologized, that it was a healthy beautiful thing, that I was making these decisions from a clear state of mind. Looking back, I do not think I was in a clear state of mind. The feelings that I had interpreted as gender dysphoria were actually long-term trauma symptoms that I had never addressed.

Every step I took in affirming that trans identity, life got worse. People in my little trans bubble were some of the most anxious people I've ever met. Lots of everyday drug use, eating disorders, compulsive working out, lots of over-the-top sex stuff, cutting, alcoholism. It was obvious that people were not doing well.

Two years ago, Cari Stella, a 24-year-old lesbian who started taking cross-sex hormones at age 17, had a double-mastectomy at 20, and at 22 detransitioned, offered this painful truth that "trans" activists don't want the public to hear: "[Detransitioners] are not just statistics. We're real people. I'm a real live 22-year-old woman with a scarred chest, a broken voice, and a five o'clock shadow."

Rebecca Feldhaus, a 25-year-old woman who identified as a man, will never be able to share her feelings about "transitioning" because, in May 2017, just days after she had a hysterectomy in her disordered and futile quest for a male body, she died.

Conservatives can and should do more than gnash their teeth at the tide of suffering, confusion, and chaos that is flooding the land from those who seek to destroy God's created order. Conservatives should speak and act at *all* times with courage and conviction in accordance with truth, even when doing so is costly.