Hermeneutics and Communications

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Write a three-paragraph essay responding to the following question: When have you noticed your pre-judgments influencing your interpretations? How have you experienced a "fusion of horizons" in your learning experiences?

During my year of residence in Clinical Pastoral Education, my supervisor informed my group that a college student dealing with gender dysphoria would be meeting with us to discuss his experience. At the time, I rejected gender dysphoria could be anything more than rebellion against God’s design for humanity. I was taught and believed God had created humanity in His image, male and female. The idea of anyone choosing to abandon their biologically given gender was offensive to me. I went into the required encounter adverse to what I expected to experience.

During the visit, Sam (not the individual’s actual name) opened up revealing she/he had been born a biological female. As a female child, Sam had experienced the traditional socialization associated with being a girl child: being dressed as a girl, provided with girl’s toys, and so forth. Sam remembered from an early age a curiosity about boys’ clothing, and toys and preferring to associate with boys and play boys’ games. Later, having proceeded into puberty, Sam began to hate her/his body, especially her breasts. Sam very openly asserted she wanted to remove them. Sam had come to identify as a young man rather than as a young woman. As Sam told her/his story, I began to empathize with her/his expressed suffering. More appeared to be emerging than rebellion against God. There was confusion, pain, and an expressed desire to be congruent with her/his being, as well as a desire to remain a faithful Christian.

Following the encounter, I was curious to learn more about the potential causes of gender dysphoria. I discovered gender dysphoria may have a biological basis. For example, in Swyer Syndrome individuals are born with male sex chromosomes (XY) but due to other hormonal problems have female genitalia. This additional learning expanded my horizon of understanding regarding a contentious topic today. This learning broadened my approach both when discussing the topic theoretically and when providing pastoral care to affected individuals and their families. While I still assert that God’s design for humanity as created in His image involves the two traditional genders, I recognize the fallenness of the creation (Romans 8:19-23) can produce real biological nonconformities with God’s original design causing confusion and suffering. Many of these conditions require medical care and nuanced spiritual care. In some cases, the individual’s experience is shaped by clear biological disorders and/or psychological disorders. In some cases, the roots of the experience may be socialization from an LGBTQ-saturated environment or potential rebellion against traditional culture and authority. Authentic and productive pastoral care will listen first and seek to discover as much as possible about the person’s reality and then ascertain whether a call to repentance is required or the proclamation of Christ’s healing and redemptive action for sin and suffering is vital. In severe chronic cases, the proclamation of Christ’s redemptive and recreative action provides the spiritual basis to sustain faith and promote spiritual growth. Here Christ’s promises of a new heaven and a new earth, the elimination of sin, and the healing of all things broken are useful.