<u>Opinion</u> <u>Letters to the Editor</u>

by NCR Staff

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NCR staff writer <u>Brian Fraga wrote</u> about how the U.S. Catholic bishops would vote this week during their spring assembly on whether to amend official directives for Catholic health care institutions to mandate that they cannot provide genderaffirming medical treatment. To make that decision, NCR columnist <u>Michael Sean</u> <u>Winters suggested</u> that the bishops listen to the Catholic Health Association, not the ideological National Catholic Bioethics Center. Following are NCR reader responses to these stories with letters that have been edited for length and clarity.

Thank you for offering two excellent stories as a way to listen and learn. As an ally with an adult son who is gay, I can say what a great blessing it has been to join, learn from and stand with the LGBTQ community. It has expanded my understanding of what unconditional love and nonjudgmental support really is, and what God's mysterious love calls us to, including being an "upstander" (instead of being a bystander) against hateful legislation and fear-mongering. The parents who love their LGBTQ children need our support. Thank you for being a true Christian "Upstander."

JEAN SULLIVAN Pepper Pike, Ohio



Everyone who engages a health care professional believes the training and expertise of that individual will be marshaled on our behalf whether it is a routine encounter or a major intervention. One thing we do not want to consider is that our clinicians are in any way hampered in providing their professional judgment when delivering care. The unfortunate involvement by our bishops in second guessing or even preventing the exercise of medical judgment can only lead to otherwise preventable morbidity and possibly mortality if that clinician practices in a Catholic facility. The clinician must not substitute the limited knowledge of their bishop for the training and experience which they have acquired through years of practice.

The intervention of non-clinically trained theologians to replace clinical knowledge and experience is a recipe for disaster. The bishops do not have the acumen to understand the psychological foundations of gender dysphoria so they have no business telling those who do understand that phenomenon how they should treat any patient who presents with that condition.

If the bishops insist they are the arbiters of what constitutes competent medical care in Catholic hospitals, then it would be wise to seek out medical care in a public hospital or a non-Catholic sectarian one. In either case the principals who manage those hospitals need to recognize their own knowledge base is not a substitute for the biomedical expertise which is only found in and practiced by clinicians who have made health care their life's vocation.

CHARLES A. LEGUERN Granger, Indiana

It makes me very sad that any thinking Catholic would second guess what God has created. None of the transgender people I have met chose to be so as a matter of will; it has always been a genetic imperative. We are all a mix of X and Y genes. Most of us are, at birth, dominated by one or the other. Some by the gene that is not readily distinguishable by facial or bodily features. God created many variations throughout creation. We should respect God's creations in all forms.

JOHN P. CLARK Cary, North Carolina

The totally inadequate recommendation to the U.S. bishops concerning trans health care is an embarrassment of antiquated theology and ignorance of medical science. Even worse, it tramples upon the conscience-level decisions of parents and their children. The disregard for the doctor-patient relationship is seized by people who have an intrinsic bias. The Catechism's "definition" of certain people who are "disordered" is a flagrant falsehood. The misguided role of "saving" trans people being assumed by American bishops simply adds to the Catholic list of wayward pronouncements that also includes LQBTQ+ persons. The possible and unintended consequences of this rhetoric: such decisions add more energy to the hatred and discrimination leveled against people who do not fit a 3rd century judgment as to the "definition" of ordered humanity. In the name of all that is sane, the USCCB should plead for more time to study the situation. One way to do so: talk to actual trans people and their families. Please look them in the eyes and explain why a "one-size-fits-all" decision like this is what Jesus would have wanted.

MIKE OSLANCE St. Louis, Missouri

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Bigotry is born of ignorance and nowhere is that more apparent than with the prejudice of some of our ecclesial leaders as reflected in their complete lack of understanding of gender dysphoria. They seem to think that wanting to transition from one gender to the other is a matter of personal choice and not the conundrum which the individual is forced to confront.

Clinical acumen, which medical clinicians have gained from years of study, can not be dismissed by theologians. The tendency of some prelates to impose their limited understanding of medicine in place of that of clinicians shows arrogance and a lack of charity for the patients.

Will clinicians at Catholic hospitals be reprimanded if they provide medical care to LGBTQ patients or if they determine a woman has a toxic pregnancy and needs to terminate gestation? Will the bishops demand proof that the clinician acted as necessary to save a patient's life?

The imposition of church rules in place of medical judgment portends a bleak future for health care in many parts of our country where only Catholic hospitals are available. The government needs to intervene and assert that the fundamental rights of all our citizens under the Constitution takes precedence to Canon Law since we are a constitutional democratic republic and not a theocracy. Perhaps the argument that trans individuals are asserting their religious freedom, when seeking health care that might otherwise be precluded through church rules, should be their fallback position.

CHARLES A. LEGUERN Granger, Indiana

God made each of his children in his own image. Trans children are genetically created and physically born trans. For the most part, it's not a condition that one chooses. To not care for their genetic and emotional needs is not what Catholicism should be about. Listen to Pope Francis and his position on this. Acting contrary is unconscionable and against vows made at ordination.

MICHAEL CAMARATA Philadelphia, Pennsylvania

This is a well written article by Brian Fraga. Sadly, we all know how that vote will go. Trans people in the U.S. have a target on their backs, and the right-wing, reactionary hierarchy of the church is hellbent on sprinkling holy water on the transphobic crusade.

I've been thinking about the great number of LGBTQI people whose deaths have been caused by Catholic bigotry. How many lives have been lost? Thousands? Hundreds of thousands? Millions? Not to mention the many LGBTQI Catholics (and non-Catholics in Catholic environments) whose deaths weren't necessarily premature or violent but whose lives were needlessly full of pain and sadness. How many trans lives have been lost already due to Catholic transphobia?

I think of the centuries of repression that women have experienced within the Catholic Church. How much death and violence could have been avoided were it not for misogyny and sexism receiving the stamp of approval from the hierarchical church? Imagine how much evil could have been avoided if the hierarchical church had sided with women. Imagine if the hierarchical church sided with trans people! I don't speak of the gender ideology of the Western academy, but of trans people. How hard is it for these men in miters to say: "It's going to take awhile for us to understand transgenderism theologically, and we don't yet understand it scientifically, but we will love and accept trans people."

JEFFREY JONES Hamburg, New York