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## **Psychosocial Risk Factors in the Lives of Transgenders – A Qualitative Analysis**

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### **Abstract**

*Transgenders encounter unique and complex challenges due to societal intolerance of gender nonconformity. The present study focuses on exploring and describing the risk factors among transgenders. Using a semi-structured interview schedule, individual in-depth interviews were conducted with 12 transwomen from a mid-sized city in South India. Thematic analysis was used to analyse the interviews, which were recorded, transcribed, and coded. The themes that emerged as risk factors that thwart healthy adaptation of the transgenders include discrimination, bullying, and harassment, physical health risks, financial challenges, poor family environment, adverse effects of discrimination, and poor structural support. Transgenders are confronted with multiple challenges that thwart their physical and psychological health. The present study highlights the need to study and promote factors that contribute to resilience in transgenders by buffering against the vulnerabilities posed by risk factors in their lives. Future research should concentrate on this target group in designing interventions that promote healthy psychosocial development in the face of adversity.*

**Keywords: Transgenders, risk factors, resilience.**

**Introduction:** Transgenders are susceptible to a wide range of psychosocial problems including financial adversity, drug and substance abuse, challenges in accessing health and social care services, contracting HIV (Human immunodeficiency Virus) infections, violence, discrimination, and sexual exploitation (Bockting et al., 2013; Dispenza et al., 2012; Reisner et al., 2010) and an existing study reported that global prevalence of HIV was 43.7% in India (Baral et al., 2013). Hence, transgenders experience psychological distress as a reflection of challenges linked with gender related victimization and social oppression (Ellis et al., 2015). These issues, in turn, have a negative health outcome. Here, resilience,

defined as a process of overcoming adversity, is needed to buffer against the vulnerabilities caused due to multiple risk factors. Resilience is the capacity to cope with adverse situations and successfully adapt to life changes despite social disadvantages and negative circumstances (Meyer, 2015). It entails a protective process that mitigates the adverse effects.

Transgenders confront unique challenges in determining who they are and who they are drawn to in a society that does not understand them. The social and psychological needs of transgenders are of major concern. Previous research reported that 83% of transgenders experienced discrimination in various forms (Clements-Nolle et al., 2006). Discrimination extends to educational setting, employment, housing, legal protection, and health care services (Cruz, 2014; Gamarel et al., 2014) and it is correlated with suicide attempts resulting in social isolation among transgenders (Bariola, 2015; McNeill et al., 2012). Discrimination in health care services has also been linked to a high risk of physical and emotional problems among transgenders (Reisner et al., 2015). Indeed, three fourth of transgenders tend to hide their gender identity to avoid discrimination leading to psychological distress (Bockting et al., 2013; Grant et al., 2011).

Transgender stigma is one of the risk factors leading to a poor psychological health affecting transgenders by means of victimization including bullying, physical abuse, substance abuse, and childhood sexual exploitation, and verbal abuse by family resulting in transphobia, depression, and post-traumatic stress disorder (Kenagy, 2005; Reisner et al., 2016; Hughto et al., 2017). As a result, stigma appears to be one of the major driving forces contributing to the poor mental health of transgenders. An existing study reported that transphobic trauma increased suicidal attempts (30.1%) and suicidal ideation (67.3%) in transgenders (Kenagy, 2005). Other factors responsible for transphobia include rejection from family, violence, and discrimination at workplace (Lev, 2004). In addition, psychosocial risk factors such as societal stigma and financial crisis have increased the risk of HIV among transgenders (Krammerer et al., 2001).

Despite the high prevalence of risk factors, many transgenders show high level of resilience. An earlier investigation found that gender minorities with high level of resilience had successful jobs, high income, and family and community connectedness (Bariola et al., 2015; Beemyn & Rankin, 2011). Hence, resilience aids in successful adaptation to hardships, dangers, trauma, or other major stressful events. Developing resilience and enhancing coping skills can positively impact health and quality of life among transgenders. It was found that the ability to challenge prejudice in LGBT (Lesbian Gay Bisexual Transgender) was associated with their positive adaptation (Friend, 1991). Furthermore, transgenders who engage in social activism and serve as a positive role model for others have a high level of resilience (Singh et al., 2011) and the presence of hope and supportive community plays a key role in building resilience among transgenders. Even though there are a handful of studies focusing on risk factors among transgenders across the globe, there is a dearth of studies that focus on the psychosocial problems and the role of resilience in

transgenders in India, especially in South India. Hence the present study aims at identifying the possible risk factors experienced by transgenders.

Method

Participants

A sample of 330 transwomen completed a survey that included a measure of resilience for a larger study. 12 transwomen who scored the top high scores on resilience were selected and interviewed, the results of which is presented in this paper. The participants were from different regions of a mid-sized city in South India. The selection criteria included the participants with age ranging from 18 years to 55 years and who had undergone sex reassignment surgery. The interviews were conducted in the participants’ place of residence. Before interviewing, the participants were assured of confidentiality and privacy, and were informed about their rights to decline or withdraw at any time.

The qualitative data were collected using a semi-structured interview schedule in which the interview questions focused on identifying the risk factors. The duration of the interview ranged from 20 mins to 44 mins (*M* = 33.32, *SD* = 7.01). Interview notes were taken and analysed to understand the risk factors among transgenders.

Data analysis:

The qualitative data were analysed using the inductive thematic analysis technique (Braun & Clarke, 2006).

Results

Table 1: Themes identified across the interview summaries of risk factors using inductive thematic analysis

Themes	Sub themes	Codes
Discrimination, bullying, and harassment	Discrimination and harassment in public places	<ul style="list-style-type: none"><li>• Experiences of sexual assaults</li><li>• Verbal abuse at public places</li><li>• Hesitation to sit nearby in public transport</li><li>• Blatant harassment or rejection by friends and relatives</li><li>• Negative attitude of police towards transgenders</li></ul>
	Bullying and discrimination at school	<ul style="list-style-type: none"><li>• Few teachers teased about the body language</li><li>• Verbal attacks by others inside the school</li><li>• Being called by nick names</li><li>• Teachers using them to run to shop for buying tea/coffee</li><li>• Avoided during sports activities</li><li>• Excluded from informal lunch</li></ul>

Themes	Sub themes	Codes
Physical health risks	Discrimination at workplace	<ul style="list-style-type: none"> <li>groups</li> <li>• Lack of trust</li> <li>• Nonacceptance and hostility</li> <li>• Called by nick names</li> <li>• Stigma that transgenders are only fit for prostitution</li> <li>• Being harassed by alcoholics</li> <li>• Verbal abuse</li> </ul>
	Physical illness	<ul style="list-style-type: none"> <li>• Joint pain, back pain because of anesthesia given during sex reassignment surgery</li> <li>• Use substance occasionally</li> <li>• Lack of awareness about HIV and AIDS (Acquired Immuno Deficiency Syndrome)</li> </ul>
Financial challenges	Economic instability	<ul style="list-style-type: none"> <li>• Unemployment and no income</li> <li>• Suffered for basic requirements like food, groceries, and medicines</li> <li>• Increased debts</li> </ul>
Poor family environment	Non acceptance	<ul style="list-style-type: none"> <li>• Disappointed, frustrated, and hesitated to face the society</li> <li>• Domestic violence and verbal abuse by siblings and extended family</li> <li>• Family rejection</li> <li>• Threatened, scolded, and tried changing the behavior</li> </ul>
Adverse effects of discrimination	Academic failures	<ul style="list-style-type: none"> <li>• Refusal of care</li> <li>• Hatred towards attending school and dropped out from school</li> <li>• Lost concentration and failed in exams</li> <li>• Felt ashamed and changed the school</li> </ul>
	Emotional instability	<ul style="list-style-type: none"> <li>• Scold them back</li> <li>• Self-harming and suicidality</li> </ul>
Poor structural support	Lack of governmental support	<ul style="list-style-type: none"> <li>• No employment opportunities and loan facilities</li> <li>• No proper education</li> <li>• No pension or insurance coverage</li> </ul>

Themes	Sub themes	Codes
	Lack of NGO support	<ul style="list-style-type: none"><li>• No counselling or emotional support from government</li><li>• No constant support from NGO</li><li>• Expecting regular counselling</li></ul>

**Discussion:** Following a thematic analysis, six key themes were identified: (i) Discrimination, bullying, and harassment; (ii) physical health risks; (iii) financial challenges; (iv) poor family environment; (v) adverse effects of discrimination; and (vi) poor structural support.

*Discrimination, bullying, and harassment.* One of the themes that emerged from the analysis was discrimination, bullying, and harassment, and it comprised of three subthemes, namely, discrimination and harassment in public places, bullying and discrimination at school, and discrimination at workplace. The increased occurrences of discrimination in educational settings, workplace, and public places had resulted in high depressive symptoms in transgenders (Boza & Perry, 2014). As a result of discrimination, many transgenders discontinued education at their high school or senior secondary level. The number of dropouts was high which limited their possibilities for future careers (Balu, 2020). An earlier investigation reported that even if they were admitted into an academic institution, they were bullied and harassed daily at school, and they were either asked to leave the school or they quit on their own (Rajesh & Naved, 2013). Moreover, transgender students reported discrimination and harassment at school, which may persist into college, as well as disparaging comments and homophobic language about their gender identity from peers and staff (Greytak et al., 2009). Thus, academic disengagement and decrease in school attachment were found which in turn developed isolation and distress among transgender students (Grossman & D’Augelli, 2006; Poteat & Espelage, 2007). One of the transwomen in the present study narrated how she was excluded and bullied,

*“My friends teased me about my body language, avoided me during lunch and sports. Few among them peeped inside the restroom and I felt very disgusting. I was not able to concentrate on my subjects because of all these actions” (#P7, Jhansi, 20yrs).*

Other participants also described that teachers used them to run to shop for buying tea/coffee, and some students in school called them by nick names because of which many dropped out from schools.

Transgenders experience different forms of discrimination in different places. Irrespective of the type of employment, transgenders encounter a number of challenges in the workplace including disclosure of their transition, fear of losing job because of their gender identity, prejudice, and discrimination by co-workers (Walworth, 2003). Transgenders experienced sexual assaults and physical violence resulting in depression, anxiety, low self-esteem, emotional distress, and poor personal relationships due to discrimination (Irwin, 2002). In addition, a cisgender participant in a qualitative interview

narrated that transgenders are embarrassment to the organization and co-workers refused to work with them (Barclay & Scott, 2006). The participants in the present study also narrated their experience of being verbally abused, called by improper pronouns, nonacceptance, and hostility at workplace. One of the participants working as a supervisor in a company described how she was treated in her workplace,

*“One of my co-workers refused to work with me and sometimes abused me verbally. He often looked at me with a disgusting face in the workplace. Whenever he saw me, he had a negative facial reaction as if what people you are” (#P9, Meena, 30yrs).*

An estimate of 53% transgenders being abused verbally, treated disrespectfully in public places like streets, public restrooms, and workplace, 44% being denied from their treatment in hospitals and 8% being physically assaulted is reported (Burns & Ross, 2011). An earlier investigation reported that transgenders were attacked, bullied, threatened, and mistreated in public places on multiple times and sometimes even by police officers (Ganju & Saggurti, 2017). The participants have experienced societal discrimination in forms of sexual assaults, verbal abuse, faced rejection in public transport, negative attitude of police, and blatant harassment by friends and relatives in the present study. These forms of societal discrimination, stigma, and violence need to be prohibited in ensuring non-discriminatory society in the lives of transgenders.

*Physical health risks.* One of the themes that emerged from the analysis was physical health risks and it comprised of one subtheme, physical illness. The physical health of transgender youth and adults is highly influenced by their exposure to enacted stigma and violence. The high probability of experiencing stigma and violence resulted in excessive use of alcohol and substance use (Coulter et al., 2015; Nuttbrock et al., 2014; Rowe et al., 2015) and contracting HIV increased the rate of depression in transgenders (Melendez & Pinto, 2007). However, the association between unsafe sex and stressful life events was documented among transwomen (Sanchez et al., 2010). This is because transwomen get emotional support from sexual relationship which is seen as one of the maladaptive coping strategies (Nuttbrock et al., 2015; Sanchez et al., 2010). On the other hand, illicit drugs, namely, amphetamine and cocaine were used in high amount by transgenders when compared to the cisgender population (Benotsch et al., 2013; Scheim et al., 2017). One of the participants in the present study described about her physical health problems:

*“I often get back pain and joint pain caused by the side effects of anesthesia given during sex reassignment surgery. I get leg pain even after walking for a short distance” (#P7, Jhansi, 20yrs).*

Other participants in the present study stated that they were not given adequate information regarding HIV infections, because of which many transgenders may be at risk of contracting HIV and AIDS. They also narrated that they mainly use alcohol and other substances when depressed and to cope with emotional distress caused by family members and intimate partners. They consume alcohol sometimes at special occasions like temple festivals, marriage functions, and at rituals for celebrations. Not surprisingly, many

transgenders face discrimination at health care services, providing health insurance coverage that is essential for their life (Barik & Sharma, 2020). Transgenders, in particular, reported low self-esteem as a result of negative experiences they had while disclosing their gender identity in healthcare settings (Grossman & D'Augelli, 2006). Few participants in this study claimed that they were denied treatment and were sent out of the hospital solely due to their gender identity. As discussed above, the result of the present study highlighted the pertinent issues related to physical health among transgenders.

*Financial challenges.* One of the themes that emerged from the analysis was financial challenges and it comprised of one subtheme, economic instability. Income is an essential factor in understanding transgenders' psychological health. Transgenders, being one of the stigmatized groups in society confront economic challenges once they move out of their home leaving their family and after that they face unemployment and everyday discrimination in the society which are among the challenges they confront (Barik & Sharma, 2020). Structural stigma plays a key role which is responsible for the low socioeconomic status of transgenders and having a low income increased the level of depression and anxiety (McDowell et al., 2019). Furthermore, transgenders face sexual harassment and abuse in their formal employment sector which forces them to quit their job leading to unemployment. Hence, most of the transgenders are excluded from their financial, social, and political activities due to illiteracy resulting in unemployment (Gokilapriya & Annalakshmi, 2021). One participant described about her experience of being unemployed:

*"Since we do not have proper jobs, we go for begging, and we get scolding from shopkeepers for begging. They treat us badly and use abusive words. One of the main reasons for our condition is that we have not done our schooling properly"* (#P4, Ani, 31yrs).

Transwomen narrated that due to covid-19, they struggled for basic requirements like food, groceries, and medicines, and they also faced unemployment and increased debts which are evident from the interviews in the present study. Moreover, they are at risk of financial exclusion due to decreased awareness and financial literacy, and they are also not included in formal financial systems initiated by government organizations. In fact, the participants in the present study narrated that economic hardship was one reason why they engage in sex work, and they have to finance themselves for their sex reassignment surgery leading to increased debts. These conditions caused depression and suicidal ideations among the participants in the present study. Thus, income plays a significant role in determining the physical, psychological, and social conditions of transgenders.

*Poor family environment.* One of the themes that emerged from the analysis was poor family environment and it comprised of one subtheme, non-acceptance. Familial rejection is considered as a major risk factor among transgenders (Clements-Nolle et al., 2006). They are alienated, discriminated, physically and verbally abused not only by the society but also by their family members (Boza & Perry, 2014). As a result, they lose their ownership of

property, and it becomes difficult to claim their rights after fleeing the family (Barik & Sharma, 2020). This implies the dire need of acceptance by the family and living along with the family (Virupaksha & Muralidhar, 2018). An existing study reported a high level of psychological distress due to lack of parental support and unsafe environment at home in transgenders (Barik & Sharma, 2020; Gamarel et al., 2014). Moreover, when transgenders are excluded from the family, they discontinue their education. In a qualitative study, a participant narrated that her mother assaulted her physically and psychologically for being a transgender (White, 2013). Therefore, family showed hostility (Cianciotto & Cahill, 2003) and rejection resulting in psychological violence (Domínguez-Martínez et al., 2020) and lack of support (Balsam et al., 2005). One of the participants in the present study described about the problems she faced in her family:

*“My parents were disappointed, frustrated, and hesitated to face the society because of my gender identity. They often beat me and abused me verbally. They locked me inside a room and tortured me to change my behavior” (#P1, Sree, 35yrs).*

Few participants in the present study described that they were threatened and scolded by the family, and parents tried changing their behaviour. The participants were abused verbally and physically by siblings and extended family resulting in familial rejection and refusal of care. Lack of parental support was associated with depression, low self-confidence, and decreased life satisfaction among transgenders (Eisenberg & Resnick, 2006). On contrary, transgenders who lived with their biological family pursued higher education and had a high level of resilience (Virupaksha & Muralidhar, 2018). However, many participants in the present study had poor family support, both emotional and economical. Therefore, transwomen experienced familial rejection which serves as one of the crucial factors impeding their future.

*Adverse effects of discrimination.* One of the themes that emerged from the analysis was adverse effects of discrimination and it comprised of two subthemes, namely, academic failures and emotional instability. Social discrimination is a key factor in assessing the mental health among transgenders. Transgenders who experienced everyday discrimination had an increased level of depression, anxiety, intimate partner violence, and non-suicidal self-harm (McDowell et al., 2019). Especially, the financial status including decreased educational achievements and decreased income had a strong association with discrimination (Cruz, 2014). Discrimination in educational settings resulted in dropouts, and academic failures (Rajkumar, 2016). One participant described her academic difficulties:

*“I was excluded from school activities and others except my friends also rejected me because of my gender identity. I lost concentration and failed in exams and when I was in 10th standard, I dropped out of the school. I joined another school, but I discontinued my education once again when I was in 11th standard due to the same reason” (#P12, Geetha, 23yrs).*

Other participants in the present study reported that they attempted suicide, involved in self-harming behavior, and consumed excessive alcohol due to various forms of



discrimination. A previous study reported that transmen used illegal drugs to cope with discrimination, stigma, and victimisation (Grant et al., 2011). As a result, society's negative approach to a person's gender identification has a significant impact on that person. Transgenders also experience limited access to essential resources leading to adverse psychological health (Hughto et al., 2015; Reisner et al., 2015). In addition, discrimination experienced in health care settings had increased the level of physical and psychological negative symptoms (Reisner et al., 2015). Few participants in the present study narrated that discrimination exist in all places and the lingering effects of past discrimination cannot be ignored. Hence, transgender discrimination, being one of the pervasive types of discrimination may have a negative impact both emotionally and physically among transgenders.

*Poor structural support.* One of the themes that emerged from the analysis was poor structural support and it comprised of two subthemes, namely, lack of governmental support and lack of NGO support. Investigations that address the issues of transgenders by the governmental or non-governmental organization are limited. The problems because of poor structural support include lack of access to surgery and insurance coverage, refusing to make needed changes in driving licenses, identification documents, social security cards, birth certificates, marital rights, and child adoption (Barik & Sharma, 2020). For instance, in a survey, 11% of transgenders in the United States had their preferred names on ID cards issued by the government and many of them reported that their gender did not match the names on the ID cards, resulting in harassment, denial of health care services, and assaults (James et al., 2015). Transwoman from the present study reported about lack of support from the government:

*"Government is not providing us loan facilities in order to start up a small business for our development. Government should provide free land for housing. We are not provided with exact information on health insurance policies, pension schemes, and welfare schemes provided by the government which is essential for our livelihood" (#P5, Latha, 30yrs).*

Other participants in the present study reported that the government had not provided any employment opportunities for transgenders and no financial support or counselling was provided either by the government or NGOs. Further, they are not provided with any kind of loan facilities. Hence, denial of access to vital resources can create a stressful environment contributing to poor psychological health among transgenders.

The exploration of psychosocial risk factors in transgenders is of great importance. It is essential to understand the concerns encountered by transwomen in the present study which may help in educating them to deal with their problems effectively and to provide them the psychosocial support they need. It is evident from the present study that transgenders continue to face challenges in the form of discrimination and stigmatization which thwarts their growth and development economically, socially, and psychologically in the society. Despite the risk factors, many transgenders possess resilience, a significant protective mechanism. Resilience serves as a crucial element in combating the social stigma and discrimination faced by transgenders.

## Conclusion

The purpose of the study was to identify the risk factors experienced by transgenders. Discrimination, harassment, rejection, bullying, stigmatization, victimization, educational and financial challenges, negative coping mechanism, physical health risks, lack of family support, unemployment, and lack of structural support were the risk factors documented from the present study. The risk factors are strongly associated with the psychological health of transgenders. Depression, anxiety, self-harm, isolation, and suicide attempts were the common psychological problems mainly addressed by transgenders. The risk factors can be minimized by strengthening the capacity of overcoming difficult situations and negative events. Hence, resilience is important for transgenders to deal with negative events effectively as well as to achieve healthy psychological outcomes.

## Limitations

A comparative study between different ethnic minority and racial groups was not carried out in the present study. This may help in providing deeper insight into the risk factors experienced by different groups. The voices of family members, staff working for the welfare of transgenders, and neighbors of transgenders were not included in the present study which would have supported in better understanding the challenges faced by transgenders. The other groups of LGBT were not included which is essential in determining their lifestyle and the psychosocial risk factors in their lives. The protective factors were not explored in the present study. The comparison between risk and protective factors would have provided a different perspective among transgenders.

## Implications

Given the risk factors identified among transwomen, future research should focus on designing multi-level intervention programmes which will help in creating awareness and resilience in them, which in turn can improve their livelihood. Future research should concentrate on structural level coping factors namely, legal support, psychological support, and health care support which can ultimately help them in protecting their rights and promoting policy development for the transgender community. Awareness campaigns can be organized to make the public understand the challenges faced by transgenders. Mental health practitioners should be encouraged to conduct family counselling in order to create a supportive environment for transgenders. The government and policy makers should bring in job opportunities for transgenders to improve their standard of living. Moreover, awareness programmes about the anti-discriminatory regulations should be implemented for social inclusion of transgenders.

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