

Gender Identity: Transgender

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Abstract: Third gender people include individuals whose gender identity, gender expression or behavior do not typically conform to the sex they were assigned at birth, While the term “Transgender” is commonly accepted, not all gender-diverse individuals self-identify as transgender, Since researches have been found out, transgender’s visibility and community have grown considerably, This paper, therefore, seeks to shed light upon how gender identity, sexual orientations, and their interactions are represented in the lived experiences of the transgender people, and which attempts to establish the reliability and the validity of the gender identity disorder, starting by providing with a full literature review about the concept of transgenderism followed by a section of research methodology based on quantitative method and relied on a questionnaire submitted to this specific social category of people in order to collect data and then formulating a discussion about the results gained by using SPSS program for the analysis of the findings and finally, drawing a general conclusion.

Keywords: Gender Identity; Sex; Transgender; Individuals; Third gender people; Gender expression

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1- Introduction

Transgender people are identified by their sexual orientation, The exact definition is complex and variable, Therefore, an accepted definition of transgender has been formulated and states that transgender is the one with an orientation towards people of the same gender in sexual behavior, affection, and/or attraction.

Khandelwal, A.; Agarwal, A.; & Jiloha, R.C. (2010, 1022) revealed that: “According to DSM-IV-TR, gender identity disorder (GID) (also known as transsexualism), has two features:

- Strong and persistent cross-gender identification.
- Persistent discomfort about one’s assigned gender or a sense of inappropriateness in the role of that gender. “

This study explores the lived experience of transgender people because there is a lack of understanding about this category of the society ‘members and how they might express their sexual orientation and gender identity.

It aims to provide with an understanding of the complexity of the transgender’s lives and how their sexual orientation and gender identity play out in their lives.

Baker, W.B. (2017, 9) stated, “Theory suggests that identities cannot be understood in isolation, but only when considered with other intersecting identities (Bilodeau & Renn, 2005; Crenshaw, 1999; Diamond & Butterworth, 2008; Warner & Shieldy, 2013)”.

1.1- Background of the Study

Transgender individuals are often an understudied group, forgotten and not well represented, This study focused on the lived experience of this social category.

Baker, W.B. stated “Trans men are often assumed to be in a better position as they take on the identity of “privileged” men, but many studies show that this may not be the case (Baams, Beek, Hille, Zevenbergen, & Bos, 2013; Testa et al., 2012)”.

According to Fontanella, Maretti, & Sarra, 2014 “As society has become more open to gender variant expression and behavior, it appears that the transgender community is becoming more gender fluid.”

Although, some transgender people feel underestimated, today, most of them are proud of their gender identity and every year they celebrate their gender behavior in the world to express their satisfaction and social autonomy.

1.2- Statement of the Problem

The transgender people are often considered by the different societies as the marginalized social category usually targeted for discrimination, The most majority of research works into transgenderism were clinical and have presented these people to be pathological (Cromwell, 1999; Hill, 2005), which has the objective of determining causal factors.

On the other hand, Burdge, B.J. mentioned, “The appreciation of being transgender is a dimension of transgender experience that has been virtually invisible in the academic literature, yet holds promise to inform social work practices that are sensitive to the value of gender diversity and attuned to the strengths and hopeful possibilities of transgender people.”

1.3- Purpose of the Study

The purpose of this research paper is to get a broad overview concerning the complexity of the transgender lived experience and how the lived experience changed during the phase of transition.

In this paper, the question was structured to inquire about the intersectionality of gender and sexual identities.

1.4- Research Question

How do Gender Identity, Sexual Orientation, and their Interactions are represented in the lived experiences of the transgender people?

1.5- Literature Review

Transgender is an umbrella term, which describes individuals with special gender identities, This term is growing in familiarity and many cultures and countries recognize it as third gender, and the experiences of transgender people are becoming more visible in cultures media, and biographical literature.

These people are identified by their sexual orientations, So varied definitions and research methodologies have been illustrated in order to clarify the identity of this category of these society's members.

1.5.1- Definitions

Individuals whose gender identity matches with their sex-birth are termed cisgender while those whose gender identity is different from their sex-birth are categorized as transgender.

Gomez-Gil, E. et al., (2010, 546) mentioned that "GID as defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), (APA; 1994) is characterized by two features = A strong and persistent cross-gender identification and persistent discomfort with the individual's assigned gender"

Burdge, B.J (2013, p.3.4) has provided with some definitions:"

- Sex: refers to the biological aspects of maleness and femaleness, including chromosomes, chemistry, and anatomy (Diamond, 2002; Kessler & McKenna, 1978).
- Gender Identity: refers to" The person's self-concept and how individuals perceive themselves, that is, self-image and the subjective sense of self." (Cromwell, 1999, 8) It refers to "One's basic conviction of being a man, a woman, or another gender such as transgender (Backting, 1999, 3).
- The word transgender: is most commonly used today as an intentionally broad umbrella term referring to anyone whose gender identity does not align with one's biological sex or assigned gender in traditional ways (Gender Education & Advocacy, 2001; Mallon 1999; Roth blatt, 1995; Xavier, 2000). "

1.5.2- Etiology

The different causes of transgender have been examined from two perspectives, which are Biological and Psychological that contribute to the development of transgender.

a- Biological Factors

From the beginning of the 90's, there was considerable growth in research of the transgender biological mechanisms.

Monoteiro, I. (2010, 29) revealed that some assumptions have been mentioned in the literature concerning these factors and are as follows:

"Interaction between brain development and sexual hormones or changes in chromosomes molecular genetics, gene behavior, prenatal sexual hormones, prenatal maternal stress maternal immunization, neurological process, pheromones, anthropometric, and neuro-anatomical bases. "

b- Psychological Factors

Several psychological mechanisms have been investigated and various schools of thoughts were salient regarding the interference of these factors:"

According to Monoteiro, I. (2010, 36 & 39):"

- Breton et al., (1985) refer to a trans-sexuality as pathological state, and it is neither a fantasy nor a different way of life, not a delusional idea as transsexual, and not a sexual perversion but a disorder identity.
- Kraft-Ebbing, (1877) suggests that transgender is a paranoid sexual metamorphosis, a psychosis characterized by the logical organization of delusional themes built upon false premises.

- Quaglia, (1980) suggests various causes that lead to the emergence of transgenderism like:
 - Numerical or structural changes in the sex chromosome.
 - Poorly functioning fetal testicle.
 - Unusual stressing of the pregnant mother.
 - Intake of barbiturics or anti-androgenic substances by the pregnant mother.
 - Tissue insensitivity to male hormones.
 - Adverse environmental factors that would harm the body's identification with the paternal figure, during infancy.”

1.5.3- DSM-IV Diagnostic Criteria for Gender Identity Disorder in Children

Bartlett, N.H.; Vasey, P.L.; & Bukowski, W.M. (2000, 777) reported some criteria that help clinicians and researchers to identify a gender identity disorder, which are as follows:”

- A strong and persistent cross-gender identification, In children, the disturbance is manifested by four (or more) of the following:
 - Repeatedly stated desire to be, or insistence that he or she is the other sex.
 - In boys, preference for cross-dressing or simulating female attire; in girls, insistence on wearing only stereotypical masculine clothing.
 - Strong and persistent preferences for cross-sex roles in make-believe play or persistent fantasies of being the other sex.
 - Intense desire to participate in the stereotypical games and pastimes of the other sex.
 - Strong preference for playmates of the other sex.
- Persistent discomfort with his or her sex or sense of inappropriateness in the gender role of that sex, In children, the disturbance is manifested by any of the following:
 - In boys, assertion that his penis or testes are disgusting or will disappear or assertion that it would be better not to have a penis, or aversion toward rough-and-tumble play and rejection of male stereotypical toys, games, and activities.
 - In girls, rejection of urinating in a sitting position, assertion that she has or will grow a penis, or assertion that she does not want to grow breasts or menstruate, or marked aversion toward normative feminine clothing.
 - The disturbance is not concurrent with a physical intersex condition.
 - The disturbance causes clinically significant distress or impairment in social occupational, or other important areas of functioning.”

2- Method and Tools:

This research process was conducted in different places in Algeria in which the term transgender was unveiled and which attempts to establish the reliability and the validity of the gender identity disorder using the SPSS program.

2.1 Data Collection Method

This chapter details the methodology used to examine the experiences of transgender people with the focus on their gender identities, spaces of families, and on some cultural factors related to transgender people.

It describes:

- The population.
- The procedure used to conduct the questionnaire.
- The analysis of the results.
- The conclusion.

The population recruited was limited to individuals of the same sex i.e. males because females revealed their inability to share their own transgender experience due to some social barriers and taboos.

The demographic questionnaire was adapted from several sources and from different perspectives. This questionnaire prepared according to the objectives and the results expected from this research was submitted hand to hand to the sample selected, Its analysis requires the use of SPSS program to check its reliability and validity.

Participants were selected randomly and encouraged to share the survey with potentially eligible friends, They were 39 participants, ranged in age from 18 to over 30 years old, self-identified as transgender, or as gender identity rather than their sex assigned birth, and allowed to use a variety of words to describe their sexual orientations.

The criteria of selection were:

- ❖ Being at least 18 years old.
- ❖ Self-identification as being transgender.
- ❖ Ability and willingness to share one’s life experience.
- ❖ Experience with one’s transgenderism aspect of life.

The purpose of this study is to understand and clarify the lived experience of transgender people, Therefore, the most meaningful source of data is the person’s own description of their lived experiences and the questionnaire was the preferred data collection method, The instrument used in this work aims to provide with a description of the personality, the psychopathology, and the level of social adaptation of the targeted people.

3- Results and Discussion:

3.1- Reliability Statistics Analysis

SPSS reliability analysis was conducted in order to check the reliability of the 19 items mentioned in the questionnaire.

Cronbach’s Alpha coefficient was used to investigate and demonstrate the internal consistency, and homogeneity of the questionnaire.

Cronbach’s Alpha values equal or above 0.60 are qualified reliable and once above 0.80, they are highly reliable.

In this study, the reliability analysis revealed that the results of the total items (19 items) were highly reliable and Cronbach’s Alpha was equal to 0.815 (See Table: 01 below).

Table (1) Reliability Statistics

		N	%
Cases	Valid	39	100
	Excluded ^a	0	0
	Total	39	100

Cronbach's Alpha	N of Items
.815	19

3.2-Correlations between some Items

In this part of study, SPSS was applied and Pearson product moment correlation Coefficients were run to specify the relationship between the variables.

Table 02 presents the correlation of some items such as current circumstances, current relationship status, physical health, mental health, sexual orientation, how Transgender consider their self, and age.

As a result, good positive correlations were found between all these items (see Table 02) which indicates that all participants who participated to the survey achieved high results and share the same manner and conditions of life. These results are as follows:

		Currentcircumstances	Currentrelationshipstatus	Physicalhealth	mentalhealth	sexualorientation	Consideryourself	Age
Currentcircumstances	PearsonCorrelation	1	.569**	.545**	.846**	.569**	.714**	.708**
	Sig. (2-tailed)		.000	.000	.000	.000	.000	.000
	N	39	39	39	39	39	39	39
Currentrelationshipstatus	PearsonCorrelation	.569**	1	.647**	.774**	1.000**	.796**	.750**
	Sig. (2-tailed)	.000		.000	.000	0.000	.000	.000
	N	39	39	39	39	39	39	39
Physicalhealth	PearsonCorrelation	.545**	.647**	1	.732**	.647**	.592**	.868**
	Sig. (2-tailed)	.000	.000		.000	.000	.000	.000
	N	39	39	39	39	39	39	39
mentalhealth	PearsonCorrelation	.846**	.774**	.732**	1	.774**	.795**	.876**
	Sig. (2-tailed)	.000	.000	.000		.000	.000	.000
	N	39	39	39	39	39	39	39
sexualorientation	PearsonCorrelation	.569**	1.000**	.647**	.774**	1	.796**	.750**
	Sig. (2-tailed)	.000	0.000	.000	.000		.000	.000
	N	39	39	39	39	39	39	39
Consideryourself	PearsonCorrelation	.714**	.796**	.592**	.795**	.796**	1	.810**
	Sig. (2-tailed)	.000	.000	.000	.000	.000		*.000
	N	39	39	39	39	39	39	39
Age	PearsonCorrelation	.708**	.750**	.868**	.876**	.750**	.810**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	
	N	39	39	39	39	39	39	39

****.** Correlation is significant at the 0.01 level (2-tailed).

- Age/current circumstances: 0.708**
- Age/current relationship: 0.750**
- Age/physical health: 0.868**
- Age/mental health: 0.876**
- Age/sexual orientation: 0.750**
- Age/self: 0.810**

Remark: The correlation is significant at the level 0.01 level (2-tailed)

3.3-Descriptive Statistics Analysis

Table (3) Statistics descriptive of Age

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total
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Number of participants	10	17	07	05	39
Percentage	25.64%	43.58%	17.96%	12.83%	100%

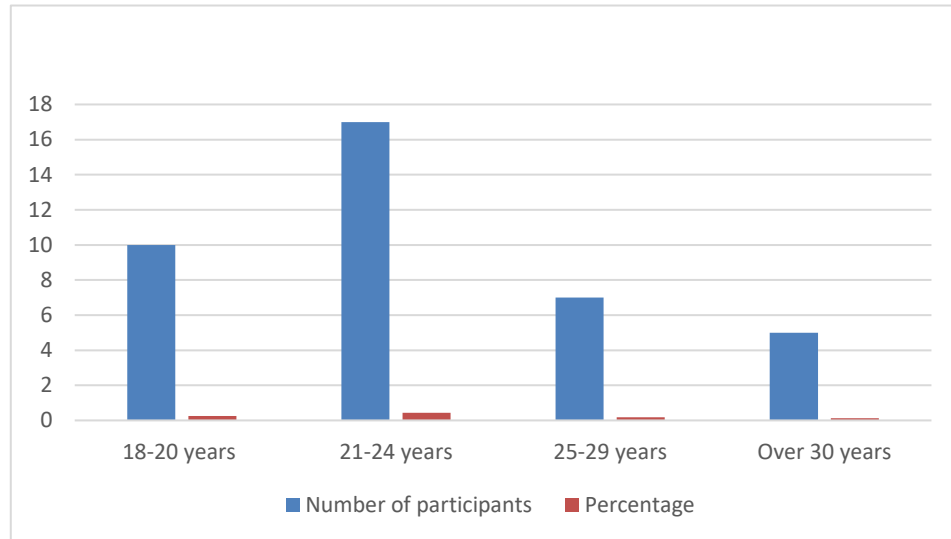


Fig (1): Statistics descriptive of Age

Table (4) Statistics descriptive of level of education

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Primary	00	00	00	00	00	00%
Secondary	03	00	03	05	11	28.20%
Undergraduate	07	10	00	00	17	43.59%
Postgraduate	00	07	04	00	11	28.21%
Total/participants	10	17	07	05	39	100%

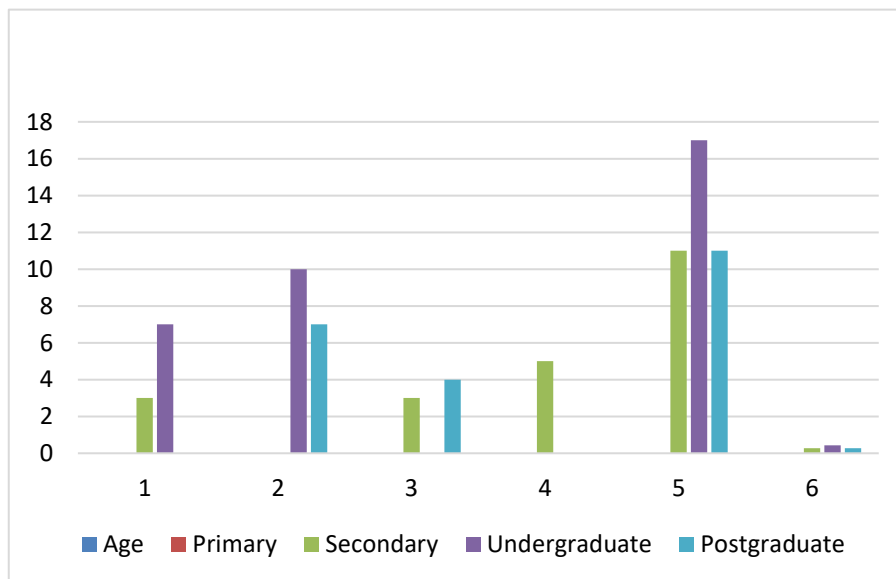


Fig (2): Statistics descriptive of level of education

Table (5) Statistics descriptive of current circumstances

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Unemployed	07	14	00	00	21	53.85%

Doing apprenticeship	03	00	00	00	03	7.69%
Part-time	00	03	07	05	15	38.46%
Full-time	00	00	00	00	00	00%
Total/Participant	10	17	07	05	39	100%

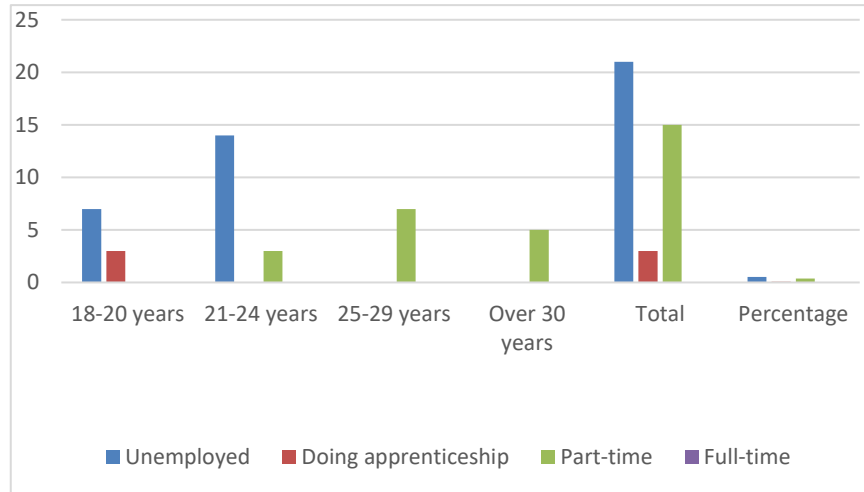


Fig (3) : Statistics descriptive of current circumstances

Table (6) Statistics descriptive of relationship status

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Single and not dating	10	17	05	00	32	82.05%
Single and dating	00	00	00	00	00	00%
Open relationship	00	00	02	05	07	17.95%
Total/participants	10	17	07	05	39	100%

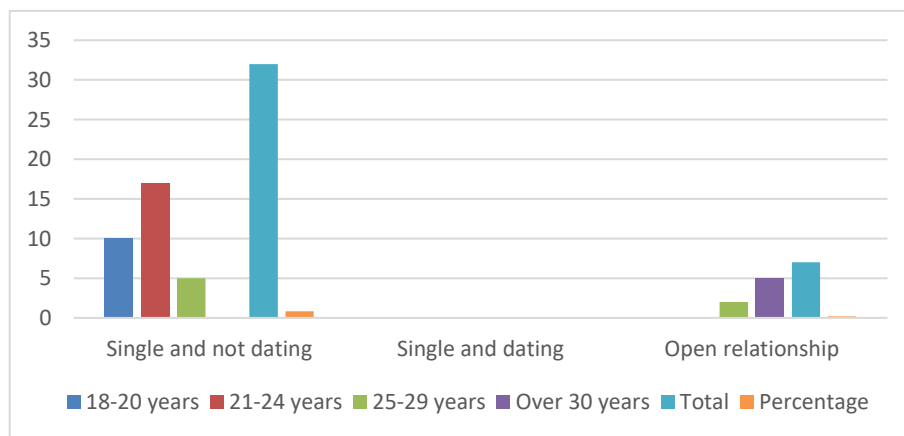


Fig (4):Statistics descriptive of relationship status

Table (7) Statistics descriptive of physical health

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Very good	08	00	00	00	08	20.52%
Good	02	17	07	00	26	66.66%
Bad	00	00	00	05	05	12.82%
Very bad	00	00	00	00	00	00%
Total/participants	10	17	07	05	39	100%

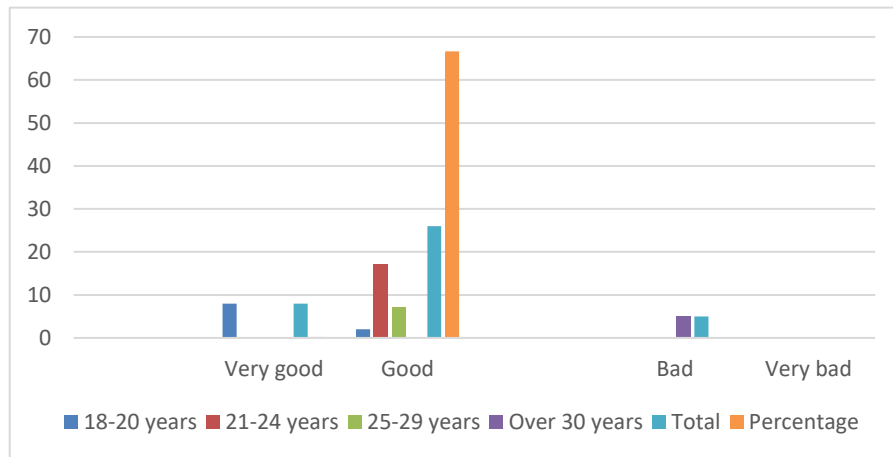


Fig (5): Statistics descriptive of physical health

Table (8) Statistics descriptive of mental health

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Good	10	13	00	00	23	58.98%
Anxiety	00	04	07	00	11	28.20%
Depression	00	00	00	05	05	12.82%
Post-traumatic disorder	00	00	00	00	00	00%
Obsessive compulsive disorder	00	00	00	00	00	00%
Total/participants	10	17	07	05	39	100%

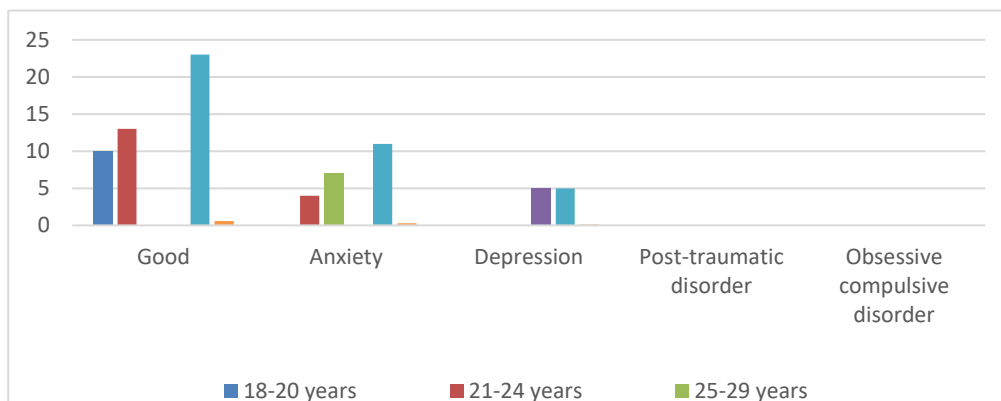


Fig (6): Statistics descriptive of mental health

Table (9) Statistics descriptive of sexual orientation

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Exclusively homosexual	10	17	05	00	32	82.05%
Predominantly homosexual	00	00	02	05	07	17.95%
Exclusively heterosexual	00	00	00	00	00	00%
Predominantly heterosexual	00	00	00	00	00	00%

Total/participants	10	17	07	05	39	100%
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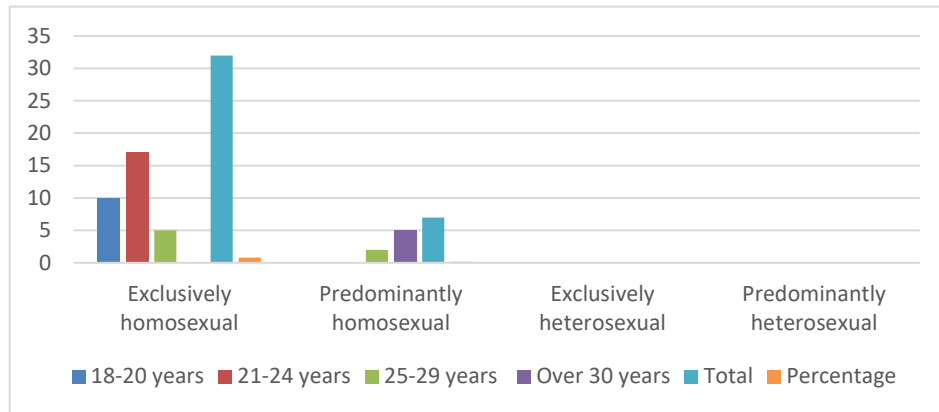


Fig (7): Statistics descriptive of sexual orientation

Table (10) Statistics descriptive of consideration of the one-self

Age	18-20 years	21-24 years	25-29 years	Over 30 years	Total	Percentage
Homosexual	10	17	02	00	29	74.36%
Heterosexual	00	00	05	05	10	25.64%
Total/participants	10	17	07	05	39	100%

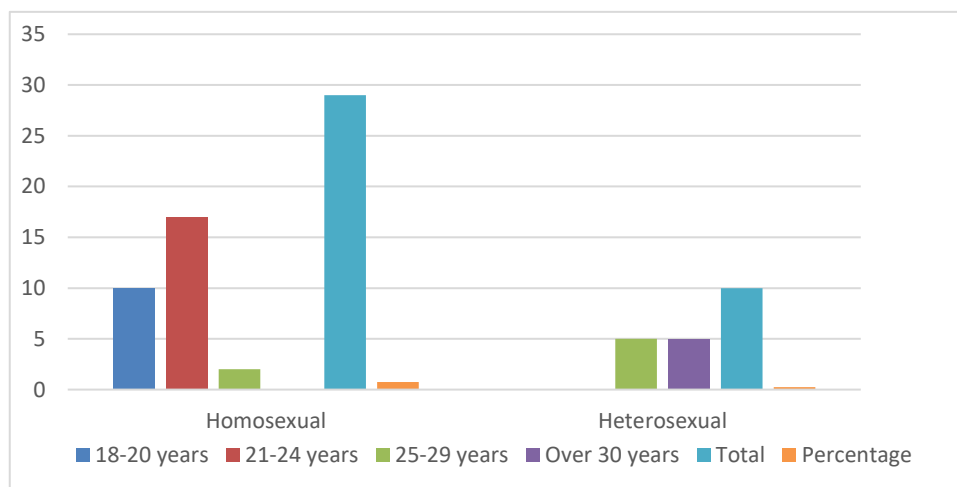


Fig (8): Statistics descriptive of consideration of the one-self

The study of the descriptive statistics reveals the following results:

The most majority of the participants were ranged in age from 18-24 years old (70%), holding a level of education between undergraduate to postgraduate degrees (72%).

Their current circumstances revealed that they are unemployed (54%) and their relationship status showed that they are single and not dating (82%), having good physical health (67%) and a good mental health equal to (59%).

In the other side, 82% of them declare that they are exclusively homosexual, while 18% are predominantly homosexual, and their sexual orientation is mainly homosexual at 75% (Figures from 01 to 08).

Remark: The rest of the results in this section of descriptive statistics shows that all of the participants share the same results, which are as follows:

The gender in their birth certificate is male, while their gender identity is female, never married, live with their families, consider themselves as people without disability, never having attempted suicide, but sought surgical treatment or medications. They are attracted to people of the same sex and some of their sexual partners have been transmen, They declare also that their physical appearance is feminine and are satisfied of their life in general.

4. CONCLUSION

The study of the concept of gender identity disorder (GID) has provided during the last decade a framework on transgenderism. The evidence shows that transgenderism has a complex of bio psychological etiology, which leads to more investigations to improve the understanding among researchers and clinicians to better transgender health and well-being and to a social acceptance of these people instead of rejection and humiliation.

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