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GENDER DYSPHORICS IN PAKISTAN

The purpose of the study is to investigate dissimilarities between the gender identities of different types of male–to-female gender dysphorics. Three separate components of gender identity are proposed: personal identity, social identity and sexual identity. Participants selected for the purpose were persons born with physically male appearance, raised as males, but who demonstrated some degree of gender dysphoria. Participants completed an interview-based questionnaire about their beliefs and what contributed to their personal gender identity. Analysis of the data showed that in the sample, the three components of gender identity were not strongly related to each other and were also not strongly related to a person's sexual orientation. Although people who were identified as transsexual, identified themselves strongly with the sex opposite to that assigned at birth in one or more of the three areas. There was no single set of scores on these three components that was unique to transexulaism

Keywords: Male-to-female gender dysphoric, gender confusion, transsexual, self-concept, persona identity, social identity and sexual identity.

Introduction

Gender Dysphoria is a general term used for persons who have bewilderment or discomfort about their birth gender. Milder forms of gender dysphoria cause incomplete or periodic feelings of being the opposite sex. The most intense form of the condition, with complete gender reversal is called Transexulaism. According to Docter (1988) "a transsexual is a

male or female who has a lifelong feeling of being trapped in the wrong body". The identification with the opposite sex is so strong and persistent that the transsexual feels the only way to achieve peace of mind is to change the body to match his mind. Some go through the process of living in the chosen role with the help of hormones, eventually leading to sex reassignment surgery. Others seek help to learn to live with their secret feelings with less guilt and shame. (Tong, 1999)

There are four dimensions of gender dysphoria identified by Coleman. (1992).He stated that only one of these, the aversion of being a man, is an indication of transexulaism. The other three; desire to be a woman, feeling not to be a man and feeling to be a woman are too widespread in the sample and are less correlated with well-being and thoughts about suicide.

There is a great confusion about the possible causes of transexulaism and we can make a distinction between biological and psychological views. According to Bem (1974) the biological view will focus especially on possible disturbances in a chromosomal or hormonal balance or potential or other organic deviations. Similarly, Susan (1998) explains that the psychological view is more focused on what can go wrong during the development of a person in his (her) early childhood. Yet, neither one, nor the other has ever succeeded in giving a clear answer to the question about possible causes of the phenomenon.

The essential part of gender dysphoria is feeling oneself as 'being captured' in the body of the wrong sex. Bornstein, (1998) Kipnis and Diamond (1998) explain that the problem the gender dysphoric poses to the social assistance is the adjustment of the body to the mind. Science can readily give a satisfying answer to this problem. Biology enables us to adjust the body to that of the transsexual's mindset by hormonal preparations and surgical methods Tamara, (2000). The psychologist and the psychiatrist would provide an accompanying and human support

before as well as after the operation. Therefore, the transsexual person can be helped. **(**Freilberg, 1995)

The mystery about 'being different' remains unsolved. Gender identity cannot be explained scientifically; it is part of the mystery of the human life. Downey (2002) in her thesis: ' gender dysphorics can differ very much although a global line can be depicted in a certain way: some behaviors, experiences and feelings can be identical:

- It is not bound to a stable or unstable personality.
- It can occur at every age, with a peak between 20 and 30 years.
- It is not culturally defined (it appears in every society) and it is spread over every layer of the population
- .It is not bound to certain Intelligence. Winter,(2002)

In Pakistani culture, a male-to-female gender dysphoric is a physically male or intersex person who is considered a member of "the third sex. Sharpe, (2004) explicates that they usually refer to themselves as females and many of them are castrated. Gender dysphorics trace their historical roots to Hinduism (where they mirrored androgynous deities), as well as to the royal courts of Islamic rulers. These gender dysphorics, evening people of Pakistan, are biological males who choose to live a life in which they dress and compose themselves in a way intermediate between the ways typical men and women dress and act. (Khairuddin, 1997)

Not all Male-to-female gender dysphorics are true transsexuals. Haq, (2005) elucidates that some are rather cross-dressers or men with homosexual tendencies. Like the Western gay scene, their society forms a space in which men with various tendencies and different images of themselves can be together. Similarly, Landen, (1999) enlighten that Gender dysphorics could be called "transgender" people who feel a deep need to reject and go beyond their biological sex and social gender roles, something that has existed for centuries in all cultures. According to Sharma, (2000) unlike Western "transgender"

people, the gender dysphorics are not solitary, invisible fighters but are visible and organized and have been present in society for thousands of years.

Hypotheses

1. There will be significant difference between the gender identities of different types of male –to-female gender dysphorics.

2. The higher the proportion of feminine gender, the higher will be the consistency on the personal identity, social identity and sexual identity of Male-to-Female gender dysphorics.

Participants

Two hundred and nineteen Male-to-Female gender dysphorics with ages ranging between fifteen to fifty- five years were chosen to participate. Male-to-Female gender dysphorics were those who were born with male primary sex organs and were raised as males but reported some degree of frustration with their assigned sex role. They categorized themselves amongst five categories of gender dysphoria namely, transvestites, feminine male, transgender, probable-transsexual and transsexual. The criteria for determining gender dysphoria was set upon its operational definition and never was it deemed final until the participant had been reported as "gender dysphoric " for at least six months. These participants were drawn from different areas of Pakistan namely Peshawar, Mardan, Abbottabad, Haripur, Islamabad, Lahore, Swat, Nagumaan, and Mansehra. Sample selection was carried out using the snowball technique depending on the availability of gender dysphorics.

Instrumentation

The following instruments were used in the present study.

1. Personal Information Sheet

2. Combine Gender Identity And Transsexuality Inventory (Cogiati)

3. Personal Identity Scale (PIS)

4. Social Identity Scale (SIS)

5. Sexual Identity Scale (SXIS)

Dr. Banks (1996) and Dr. Jennifer (1998) designed these scales for Male-to-Female gender dysphorics in order to measure their Personal Identity Scale, Social identity Scale, Sexual Identity Scale and Sexual Orientation Scale. These scales were translated and slightly modified by reducing the number of questions and by grouping the answers to change this 7-point scale into 4-point scale. The reason for this modification was the cultural differences and the education level of the group. Some questions were not in accordance with our culture and religion.

Procedure

Every interviewee was given a series of questionnaires i.e. five instruments, each comprising of sections, one for the participants' demographics and second for the Likert-scale questions about three dimensions of gender identity, the fourth and fifth intended to verify the participant's sexual orientation and social identity respectively. Each question was endorsed by the participant on a scale from 1 (meaning "strongly disagree") to 5 (meaning "strongly agree") however, because of the requirement for correct assessment, scaling and ultimately to get the true results, the questions were placed in random in each of the category.

For the purpose of the questionnaire, personal identity was presented as the state of the person's genitals: Social identity was presented as living (overtly) as male or female and Sexual identity was presented as how the participant wants to be perceived by the partner.

Results

Table –1
Alpha Reliability Coefficient of Five Scales for Male-to-Female Gender Dysphoric

Group (N=219)

Scale	No of Items	Alpha reliability coefficient
COGIATI	65	.8590
PIS	14	.9288
SIS	10	.7840
SXIS	9	.9083
SXOS	12	.8836

Note: Read COGIATI as Combined Gender Identity And Transsexuality Inventory, PIS as Personal Identity Scale, SIS Social Identity Scale as, SXIS as Sexual Identity Scale, SXOS as Sexual Orientation Scale.

Table-1 indicate the values of reliability coefficient of Combined Gender Identity And Transsexuality Inventory "COGIATI", Personal Identity Scale (PIS), Social Identity Scale (SIS), Sexual Identity Scale (SXIS), and Sexual Orientation Scale (SXOS) administered to the Male-to-Female gender dysphoric group (N=219) participants. These values are significant at $p < .01$ levels indicating high significant correlation among each other for Male-to-Female gender dysphoric group.

Table -2
Summary Statistics of Mean, Standard Deviation and Ranges of Score on five Scales for Gender Dysphoric Group (N=219)

Scales	N	No of Items	Standard Score Range		Mean	SD	Score Achieved	
			Min	Max			Min	Max
COGIATI	219	65	-650	650	-4.625	139.36	-455.0	265.0
PIS	219	14	14	56	58.47	11.26	16.00	69.00

SIS	219	10	10	40	41.67	6.374	19.00	48.00
SXIS	219	9	9	36	37.35	7.546	11.00	59.00
SXOS	219	12	12	48	49.92	8.716	15.00	59.00

Note: Read "COGIATI" as Combined Gender Identity And Transsexuality Inventory, PIS as Personal Identity Scale, SIS as Social Identity Scale, SXIS as Sexual Identity Scale, and SXOS as Sexual Orientation Scale.

Similarly, the above Table-2 indicates, the descriptive statistics including total number of items for each scale, standard score range, the means, standard deviations, maximum and minimum of ranges of the Combined Gender Identity And Transsexuality Inventory, Personal Identity Scale, Social Identity Scale, Sexual Identity Scale, and Sexual Orientation Scale were calculated for the male to female gender dysphorics.

Table –3
Correlation Matrix between Identity Scales For Male-to-Female Gender Dysphoric Group (N=219)

Scales	PIS	SIS	SXIS	SXOS
PIS	-	-	-	-
SIS	.931**	-	-	-
SXIS	.980**	.924**	-	-
SXOS	.950**	.953**	.918**	-

*p<.05, **p<.01
Note: Read PIS as Personal Identity Scale, SIS as Social Identity Scale, SXIS as Sexual Identity Scale, and SXOS as Sexual Orientation Scale.

Similarly Table-3 presents the Inter- correlation between all gender identity scales. The overall relationship is positive and statistically highly significant. This relationship is statistically significant at p< .01. The personal identity score were

significantly correlated with social identity score r=-.931 (p<. 01); personal identity score are correlated with sexual identity score r=. 980 (p<. 01); and social identity correlated with sexual identity score r = -.954 (p<. 01)

Table-4: Demographics of Participants (N=219)

Types		Age		Age of first cross-dressing		Monthly Income	
Category	N	Mean	SD	Mean	SD	Mean	SD
Transvestite	39	45.85	13.84	12.73	10.05	43,462	27,305
Feminine male	33	47.64	15.23	16.09	11.40	47,727	23,703
Transgender	22	46.50	8.32	8.40	4.35	40,000	35,198
Probable transsexual	10	41.97	9.94	9.89	6.33	32,027	20,865
Transsexual	8	46.21	9.48	10.89	10.78	32,895	27,204
Fake	106	40.33	9.73	5.33	9.09	55,000	31,937
Overall	219	45.03	10.81	10.89	9.09	38,592	26,780
F		1.06	(ns)	1.39	(ns)	1.68	(ns)

[1]Mean income based on income ranges reported by participants on the questionnaire.

Table-4 given below showed the difference between ages of different types of Male-to-Female gender dysphorics. The results showed majority of gender dysphorics were between ages twenty-six and thirty-five years while only 7.7 % were between forty-six and fifty-five years. This frequency difference is statistically significant at the p<.01 level.

Table –5: Summary Statistics of Mean, Standard Deviation and Ranges of Scores on five Scales for Gender Dysphoric Group

Scales	N	No of Items	Score Range	Mean	SD	Min	Max
COGIATI	40	65	-650-650	-4.625	139.36	-455.0	265.0
PIS	40	14	14-56	58.47	11.26	16.00	69.00
SIS	40	10	10-40	41.67	6.374	19.00	48.00
SXIS	40	9	9-36	37.35	7.546	11.00	59.00
SXOS	40	12	12-48	49.92	8.716	15.00	59.00

Note: Read COGIATI as Combined Gender Identity and Transsexuality Inventory, PIS as Personal Identity Scale, SIS as Social Identity Scale, SXIS as Sexual Identity Scale, and SXOS as Sexual Orientation Scale.

Similarly, the above Table-5 indicates, the descriptive statistics including the means, standard deviations, maximum and minimum of ranges of the Combined Gender Identity and Transsexuality Inventory, Personal Identity Scale, Social Identity Scale, Sexual Identity Scale, and Sexual Orientation Scale were calculated for the male to female gender dysphorics.

Table-6: Correlations between Scale Scores Derived from identity Scale Items to those Derived from the Combined Gender Identity And Transsexuality Inventory.

Gender identity -scale Items			
Cogiati	Personal Identity scale	Social Identity scale	Sexual Identity scale
Personal Identity scale	.321***	-.379***	-.048
Social Identity scale	.185*	-.098	.058

| Sexual Identity scale | .258** | -.216* | .080 |

* p<.05; ** p<.01; *** p<.001

Table-6 presents the Inter- correlation between all gender identity scales. The overall relationship is positive and statistically highly significant. This relationship is statistically significant at p<.01.

Discussion

The intent of this research was to investigate difference between the gender identities of different types of male–to-female gender dysphorics. The findings offered support for two of the three proposed categories for gender identity. The differences between the groups mean scores on the scales provide a means of differentiating between the groups and offered some fascinating insights into the distinctiveness of the groups.

Among the participants surveyed, feminine males placed significantly less importance on issues of social identity than the other groups, while transvestites and transsexuals placed significantly less importance on issues of personal gender identity than the other groups. Examination of group means on both scales showed that transvestites and transgenders rated high on social identity and low on personal identity. Transgenderists and those who are undecided about gender scored high on both scales, while transsexuals scored high on the personal identity scale and low on sexual identity.

Furthermore obvious differences were noted in preferences between the Cogiati (in which a complete life situation and other identity scales. One interesting finding from the Cogiati scale is that among the 219 participants, 126 certified being accepted as female in social and sexual encounters, yet still possessing male genitalia as also acceptable. This can be interpreted as a general acceptance of a transgenderists lifestyle as being an acceptable alternative for most of the participants.

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