



Does Psychosocial Support Improve the Socio Economic Status of a Marginalized Group?

A Case Study of the Transgender Community in Penang, Malaysia

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Abstract

Discrimination, social prejudice and intolerance have dogged the transgender population due to their 'confused' and 'mixed' gender identity and sexual expression. Local communities especially in most third world countries where gender equality and acceptance of sexual minorities are lagging behind first world nations view them as something of an aberration and misfits particularly from the social and religious contexts. Legal and social protection and safeguards for the transgender community in conservative societies such as Malaysia is virtually nonexistent. This is the inspiration behind this qualitative study which analyses whether psychosocial support given by the older transgender community to their young counterpart has an impact on improving the latter's socio-economic status. Additionally, this study examines social interaction challenges faced by the youth transgender community primarily due to their marginalization and alienation by the wider heterosexual society. A total of 18 respondents aged between 18 and 40 was selected for this study via a snowballing sampling technique. Results of the study suggest that: 1) psychosocial support given by the older transgender community does assist the young adult transgender to go through their daily life with minimal challenges, and 2) social interaction challenges faced by youth transgender are ironically originating from their own transgender community. Therefore, the study recommends that both government and non-governmental organizations play a more active role in instilling awareness in society about the challenges faced by the transgender community, to stop discrimination against them at all levels and accept them with dignity as fellow human beings. One step towards this is for the Malaysian government to institute legal and social protection for sexual minorities, in this case the transgender community, that would safeguard their interests and protect their human rights as enshrined in the Constitution.

Keywords: Transgender Youth, Psychosocial Support, Discrimination, Social Interaction Challenges, Awareness and Legal Support

Introduction

Sexual identity is a component and an aspect of one's identity and it reflects their sexuality and sexual preference. A person's character, religion, ethnicity, and occupation all make up their personality, and increasingly their sexuality. Gender non conformity refers to Lesbian, Gay, Bi-Sexual, Transgender and Queer (LGBTQ) persons who continue to face discrimination and social marginalization from the wider community (who identify themselves as heterosexuals) who view the former as sexual deviants. According to Savin-Williams (2011), sexual identity is a label given based on one's 'sexual attractions, fantasies, desires, and behaviors ... and it usually falls within existing social categories, such as straight, bisexual, or lesbian/gay, and are historically and culturally specific. Youth in today's cohort have expanded the list of sexual identities, moving beyond traditional notions of a gay, bisexual, or heterosexual orientation to include gender identity and partner characteristics'.

The transgender community particularly in the Third World, has received basic and utilitarian forms of support which are inadequate in enabling them to participate as fully functioning members of society. Social



integration referring to the degree a transgender is associated with their social network, social ties and social organization indicate they are wanting in all these aspects. Their interaction is confined to their 'own kind' and even then, they face numerous challenges within their community which will be discussed further in the following section. Given the level of stress and its pernicious impacts on youth transgender in particular, due primarily to avoidance and shunning by 'ordinary' society, the youth transgender have turned to their older peers as a source of support (Scott et al., 2014; Simons et al., 2013; Singh et al., 2011).

Transgender women in particular, have to confront the complex formative undertaking of building a non-conforming gender identity as a way of life, and this has led to them facing multifaceted challenges primarily from the local communities which is not willing to accept their new or reordered sexual identity (Graber & Archibald, 2001). In fact, the transgender community as a whole has to bear social discrimination, stigma and continuous badgering in their ordinary lives only because they have rejected the 'norms' of society (Clements-Nolle et al., 2006). However, it is important to acknowledge that gender rights have become progressively more established socially and politically in recent times. As organizations that represent gender rights and ethnic minorities and individuals have become more prominent and visible in influential positions, the voices of subgroups within this community, namely the sexual minorities, are however, at risk of becoming lost among the larger mass.

The more regrettable and unfortunate outcome of this non-inclusion and subsequent repression is the high suicide rate among the transgender community as a result of their psychological and emotional trauma and stress (Clements-Nolle et al., 2006; Goldblum et al., 2012; Miller & Grollman, 2015; Su et al., 2016; Testa et al., 2014; Testa et al., 2012), depression (Budge et al., 2014; Gonzalez et al., 2012; Nuttbrock et al., 2010; Su et al., 2016), substance use (Reisner et al., 2015; Wolf & Dew, 2012), and common mental distress (Bockting et al., 2013; Sanchez & Vilain, 2009).

Distressingly, efforts to include transgender individuals in the larger Lesbian, Gay, Bi-Sexual, Transgender and Queer (LGBTQ) rights movement have been met with resistance and conflict (Stone, 2009). Past studies have linked the LGB community with the Transgender community creators, to signify absence of contrast in sentiments of association to the Trans community when comparing Trans men, Trans women, and genderqueer Trans individuals. In any case, genderqueer members feel essentially more associated with the LGB community than the transgender men and women (Factor & Rothblum, 2008). In spite of the reality that it is common to converse "the" LGBT community or "the" transgender community, a single bond among sex minority communities does not exist due to several associate issues among transgender individuals (Frost & Meyer, 2012).

Research shows the different ways in which the transgender community deals with the negative and positive reactions of non-transgender people in their social orders to their in-betweenness and nonconforming sexual personality confirming how the transgender community can be similarly negative and positive in adapting their responses and states of mind to such societal reactions (Nordmarken, 2014). Negative responses can as it were affect their mental health and emotional wellbeing affecting their tranquility as they see binary individuals who form the bulk of society look at them with disgust, and consequent reject their identity and their presence (Carver, 2011). According to of social control theory, this pessimism is a reflection of lack of sympathy or empathy from society at large (Lakey & Orehek, 2011).

The global transgender community have faced and continue to face a range of discriminatory practices against them despite the fact their counterparts in the West have made significant progress in their legal rights and recognition. The Malaysian transgender community however, lag behind. They are subjected to additional



forms of rejection and negativity mainly as a result of Islamic beliefs and tenets subscribed by and enforced by the Malaysian government. Government departments (including the department of religion), local authorities, the police force, school teachers, and ordinary Malay families practice this negativity on a day to day basis. The nation also draws on the religious guidance of Iranian 'fatwas' (considered authoritative Islamic opinion) to support its stance on transgenderism, and to exercise and impose its own interpretation of Islam among nonconformist (Alipour, 2017).

Despite that, the transsexual youth have their own way and method of circumventing the authority's imposition of their religious interpretation in Malaysia (DeAlwis & David, 2010; Chodzen et al., 2019). It is significant that Malay transgender youth have their own communication language. Despite that, the transgender community face large scale problems in health care access, the risk of all forms of sexual and physical abuse is high, community intolerance is common, mass depression is experienced by most transgender persons, and local government policies do little to protect them against discrimination (Sellers, 2014). Overall, there is overt abuse of the rights of transgender persons on religious grounds (Craig et al., 2017; Super & Jacobson, 2011), a practice not unlike that of theological exclusion perpetrated by Christian universities across the globe (Coley, 2018).

Minority Stress Model

The minority stress model (Meyer, 2003) has recently been used to distinguish how sexual minorities experience pressure, with various researchers suggesting that one particularly model is applicable to examine transgender individuals (Bockting et al., 2013; Testa et al., 2012).

Although studies on lesbian and gay communities have increased over the last decade, and models have been developed to better understand the stress they experience as sexual minority groups (Meyer, 2003), research is still limited when it comes to Transgender and Gender Nonconforming (TGNC) communities. Transgender individuals experience disproportionately high rates of discrimination and stigma, as well as anxiety, depression, and other symptoms of distress (Bockting et al., 2013).

The basic premise of the minority stress model is that all other things being equal (e.g., race and ethnicity, social class, gender), prejudice toward sexual minorities predisposes them to excess stress compared with their heterosexual counterparts. In turn, this increases the risk of negative outcomes contributing to health disparities (Meyer, 2003).

Recent literature on transgender views gender identity as having a key social component; it recognizes how gender is socially constructed. This new transgender model proposed by Boswell has shifted the locus of pathology from the transgender individual to a society and culture that reject difference and deviation from norms. The author suggests that societal mistreatment, violence, and discrimination cause stress, psychological difficulties, shame and guilt, self-destructive behaviors, mood disturbance, dissociative conditions, personality and behavior disorders—many of the conditions the old transsexual model assumed were symptoms of the mental illness of transsexualism (Boswell, 1991).

Methods and Materials

This study analyses the impact of psychosocial support given by the transgender community to their young adult counterparts. It also examines social interaction challenges faced by the youth transgender stemming from their own community's rejection and marginalization.



This is a qualitative study involving 18 transgender respondents aged between 18 and 40 selected via snowballing sampling technique. This age range represents the largest population in Malaysia at risk of HIV/AIDS. The criteria for inclusion are males with feminine inner-feelings, and living as females.

Transgender people are not the only ones who are marginalized because of their conflicting or non-conforming sexual identities—the lives of intersex people are similarly stigmatized. The word intersex covers a broad range of conditions, but its simple definition is “when an individual’s body present ambiguities, anomalies or inconsistencies in the biological components of his or her sexual identity, i.e. in his or her sex chromosomal, hormonal, and/or morphological sex” (Fraser & Lima, 2012).

A semi-structured interview method is adopted to collect data and the latter are analyzed and transcribed carefully to ensure data accuracy. Data are subjected to content analysis to identify main themes and sub-themes. A total of 18 face-to-face audio-recorded interview sessions are conducted in this study. Prior to the interview, the researcher had verbally explained the purpose and nature of this study to the respondents. The interview sessions are conducted only after the respondents had given their consent to participate in the study. The focus is on the impact of psychosocial support given by the transgender community on young adult transgender in Penang, Malaysia. The semi-structured interview instrument allows the respondents a greater latitude in answering the open-ended questions.

Study Design and Recruitment of Participants

With an acceptable margin of error, and confidence level of 95% (Creswell, 2014), 18, HIV/AIDS-free participants meet the selection criteria. They are aged between 18 and 40 years, of Muslim faith, and are practicing transgender persons. This age range represents the largest population in Malaysia at risk of living with HIV/AIDS. Additionally, this age group have routinely been denied medical and social assistance aid due to prevailing stigma in Malaysia. All this mean there is very little data available on the transgender persons’ life style, especially the community’s common values and norms in Malaysia.

Data Collection

The in-depth interviews and observation are the primary methods employed to collect primary data while related literature, documents, official records, and newspaper reports and articles are the sources of secondary data. The semi-structured interview method allows the respondents to answer the open-ended questions freely and without restriction (Creswell, 2014). The ethical considerations (described in the relevant section of this report) are explained to interviewees as the basis on which the interviews are to be conducted.

Research Instrument

An open-ended questionnaire is used to collect data (Denzin, 2012). In keeping with Cronbach’s postulations, the questionnaire’s Alpha value for reliability is .75 (Creswell, 2014). Content validity is tested by research colleagues familiar with the research procedures who find it to be acceptable. In cases where interviewees face language difficulties, the questionnaire is appropriately altered.



Data Analysis Procedure

Quantitative data are analyzed to obtain mean, frequency and percentage (Creswell, 2010). After conducting the interviews, the researcher transcribed into English interview conversations that are in Malay. The data from interviews, documents, and records are coded and analyzed using content and narrative analysis. The results of qualitative data analysis are integrated using triangulation (Denzin, 2012). The data are again analyzed and transcribed carefully to ensure accuracy. A narrative analysis is performed to better understand the themes and sub-themes that emerge from the collected data (Terrell, 2012). Content analysis is carried out to identify the themes and sub-themes that emerge from the collected data. A total of 18 face-to-face audio-recorded interview sessions were conducted and prior to the interview, the researcher verbally explained the purpose and nature of the study.

Ethical Consideration

All participants in the empirical phase of the case study were selected and treated with appropriate sensitivity, in recognition of their vulnerability, the sensitivity of the topic (transgenderism), and their close connection with the aim and objectives of the research. During the initial approaches to garner support and participation of the transgender volunteers, as well as during the interviews, additional ethical considerations were applied. This research had obtained approval from the Ethics Committee of School of Social Sciences, Universiti Sains Malaysia.

Results

Two major themes were identified in this study: 1) psychosocial support received by young adult transgender from their own community in terms of supporting their daily lives, and 2) social interaction challenges faced by youth transgender from their own transgender community. The results showed that 50% of the respondents were commercial sex workers. The two main findings are discussed in the following section.

1. Psychosocial Support Given by the Transgender Community to Young Adult Transgender

Most of the respondents admit they receive moral support and advice from their friends who share similar transgender identity, particularly their life as a transgender. A respondent remarks:

“My transgender friends are my beloved family in my life. They are the ones who taught me about the transgender world especially giving encouragement living as a transgender in my daily life. In fact, some of my friends I treat them like my mother and sister.”

(Respondent 14)

A majority of the respondents admit that they took non-prescribed hormones to align their outward physical sex or sexual identity modification with their internal gender identity, as advised by their transgender friends. This was indicated by several respondents:

“At one moment in my life, I was sad because I was not happy with my physical appearance. I wanted my body to become beautiful like a woman’s body. I really wanted a sexy body like a woman. Then, my life started to change when my transgender friends introduced



some hormone pills which can be bought from the local pharmacies in Penang. After almost two months taking these hormone pills, finally my body changed into a woman's body."

(Respondent 9)

"I'm a Hindu and my religion has a transgender deity. My religion can accept our gender. In this case, all my Indian transgender friends have encouraged me to undergo sex reassignment surgery so that my body will resemble that of a female."

(Respondent 6)

Nine sex worker respondents feel more comfortable living together in the same household. A respondent shares the following:

"I felt very safe and happy when staying with my transgender friends in the same house. It's easy for me to bring my clients who want sex service from me. At the same time, my friends and I can have discussions and share our problems when we stay together in one house."

(Respondent 11)

The respondents provide insightful feedback on to the encouragement and support they receive from their transgender friends for their sexual reassignment surgery. A respondent make the following remark:

"We Hindus accept transgender reassignment surgery. My Indian transgender friends are always worried because I haven't performed this surgery in removing my male sexual organ. My friends always give me moral support to undergo this surgery. Some of my friends are willing to give money, so that I can undergo this surgery as soon as possible."

(Respondent 7)

2. Social Interaction Challenges Faced by Young Adult Transgender

Almost half of the respondents admit having differing opinions with each other. The primary reason the presence of life partners in the respondents' life which the housemates and friends find unacceptable. The following remark describes the scenario:

"It's very common whenever I have a new boyfriend, most of my transgender friends will be jealous towards me. This jealousy will turn into flight. They will say all kinds of bad things about me to my boyfriend. Then as usual, argument will spark between these friends and me."

(Respondent 4)

Some of the respondents' friends competed with them in an unhealthy way to lure clients for sex. For example, one respondent had the following to say:

"Sometimes my transgender friends will say all kinds of bad things about me to my regular sex customers. For example, there was one situation when one of my friends told my customers that I have sex-related diseases. Once these customers hear these things about me, they begin to avoid me. It's really a sad thing that happened to me. I was betrayed by my own good friends."

(Respondent 4)

Further, in some situations, the older transgender fails to offer social support to their younger counterparts. A respondent has this to say:



“It’s normal for these old transgender to feel jealous towards me. I’m still young and beautiful. Sometimes they are rude towards the younger transgender. They even won’t share any health information regarding hormone treatment for transgender.”

(Respondent 18)

The findings of this study reveal that there is little social interaction between the Muslim and Hindu and their relationship is not strong. Two respondents expressed:

“I’m not really sure why we are not in good terms with the Hindu transgender. Maybe it’s because we don’t share the same religion and culture.”

(Respondent 12)

“We seldom talk with the Malay transgender. Sometimes they look down on Indian transgender. I guess they think that we are ugly and they are so beautiful due to their fair skin.”

(Respondent 18)

Studies also find that some youth transgender face separation or rejection from their family members (Wilson et al., 2012). As a result, they seek alternative sources of social support, namely from friends, especially those who share similar transgender identity. The youth transgender seek guidance and advice on gender transitions from their older counterparts, as well as economic support by introducing them to the sex industry. It is their primary source of income for sustenance. This is mainly due to their difficulty in securing a decent job as a result of their transgender identity which contradicts the prevailing norms and culture of the Malaysian society.

Past studies on sexual minorities suggest that social network and support within the LGBTQ community is stronger than those provided by their family members (Nesmith et al., 1999). Most of the respondents acknowledge to have received moral support from their transgender friends, particularly about living the life of a transgender and many who take non-prescribed hormones for sexual identity modification to align with their internal gender identity have done it upon receiving advice from their transgender friends. The nine respondents in this study who are sex workers admit to be more comfortable when living together in the same house, which serves as their accommodation and a safe place to entertain their clients. Living together in the same house allows social interaction with each other, apart from meeting their social and moral needs. The results of the current study are consistent with those of Collumbien et al. (2009), who find that the transgender community typically live together in a house or hostel, hence directly and indirectly form a social support system, where they share their problems and provide moral support to each other. This situation has also led to the recognition of their transgender friends as part of their family.

The young adult transgender who do not receive moral support from their family members usually get alternative social support from their life partners. Some of them are supported by and depend on their older mentor from the LGBTQ community. The transgender community often play a role as ‘the mother’ of these young transgender individuals who do not receive much support from their parents or other family members (Wilson et al., 2012). Sausa et al. (2007) also find that the young transgender tends to depend on their older counterpart to get access to clients in the sex industry; the latter also offers advice on finance and job opportunity (sex industry).



Upon being introduced to the sex industry, this marginalized population often take on the identity of a female gender, an instinct which is inherent in them. In the streets, the young transgender often form a social support network with their 'own kind' (Bockting et al., 1998). Past studies support this finding, namely reliance on the older transgender for clients in the sex industry to earn an income. Some of the respondents admit they enjoy the warm affection or attention given by their sexual partners. They are happy that their clients or sexual partners accept their female sexual instinct, gender identity, and sexual expression.

There are several interesting findings related to HIV and Sexually Transmitted Infections (STIs). The respondents report their community members do not encourage them to take the Voluntary Counselling Test (VCT) for HIV/AIDS and STI screening test. This main reason is they do not have good social interaction with their counterparts. Therefore, it is clear there is conflict among and within the transgender community as a result of differences of opinion and religion as well as the element of jealousy due to competition in seeking male customers. They are also jealous if their counterparts have a steady male partner who take care of them financially and socially. It has to be emphasis that very few Malaysian men accept a transgender person as their life partner due to the prevailing conservative culture in Malaysia. This dominant conservative culture and traditional societal outlook have had an impact on the transgender community who suffer stress and depression as a result. The unwillingness of society to accept their life style is the key challenge faced by the transgender group.

Only one respondent said that her transgender friend, mainly due to their personal bonding, encouraged her to go for regular VCT and STI screening which made the respondent feel appreciated and loved. Thus, it is clear for better wider social acceptance, and social support from their own community are important for the transgender group fell accepted and function in society without fear, depression or alienation.

There are mixed views on the issue of support from their friends regarding sexual reassignment surgery. Only two respondents had underwent sexual reassignment surgery (from male to female). The Muslim transgender community, however, does not support sexual reassignment surgery because it is against their Islamic faith.

The Hindu youth transgender in this study has an opposite view on gender reassignment whereby their transgender community provides moral support for them to undergo surgery in order to meet their feminine instinct. Additionally, Hinduism is not against transgender identity as there is a transgender goddess in that faith. The study also find that the Hindu transgender community encourage the respondents to wear women's attire.

In terms of social interaction with friends who share similar transgender identity, this study reveals that almost half of the respondents have had misunderstanding and differing opinions with their counterparts. Some of the respondents' friends do not accept their life partners due to jealousy. In fact, jealousy has driven some of their friends to compete in an unhealthy manner to attract clients in the sex industry. This scenario is regarded as common within the community as many of them compete for clients to earn a living.

Wilson et al. (2012) reports that the youth transgender who live within the transgender community face a highly competitive situation. Some older transgender do not offer social support to the younger ones due to jealousy as the younger ones possess more attractive physique and many also have a life partner. The respondents in this study claim that although the older transgender have useful information and the knowledge regarding transgender transition, they refuse to help their younger counterpart due to competition in the sex industry.



Differences in ideology, ethnicity, religion, and culture pose additional obstacles in uniting the transgender community, especially against a hostile wider society. The findings suggest that social interaction and social support between the Malay and Indian transgender communities are minimal due primarily as a result of differences in religion and culture.

Conclusion and Suggestion

This study has examined social support and social interaction within and without the transgender community. It has focused primarily on how the lack of support from the wider society as well as from government and non-government players have affected their wellbeing. Additionally, the findings also point to lack of unity within the transgender community due to competition, jealousy and differences in religion and culture. Nevertheless, the majority of the respondents report receiving moral support from their friends who share similar sexual identity with them. Their advice is mainly on how to live the life of a transgender. There is a vital need for that both government and non-governmental organizations to empower the transgender community, particularly in developing their skills and introduce capacity building programs so the community does not have to resort to being a sex worker to support themselves. Relevant socio economic programs as well as legal support will ensure the community attain success in their life and enable them to function fully in society. This study contributes to literature on this topic as it delves into challenges faced by younger transgender in Malaysia in developing their full potential and living a life of dignity.

Significance, Limitations of Study and Future Research

This research is persuaded and inspired by the conviction that the Malaysian transgender community requires social and economic support and increased protection and legal safeguards from the authorities to protect them against harm. It is imperative their human rights are recognized and they are allowed to live the life and the sexual identity they have chosen. Non-governmental organizations have an important role to play here by increasing awareness on the contributions the transgender community can make and that the wider society must accept and treat them as individuals who are dignified and their needs respected. The limitation of this study is that the scope is confined to the transgender community in Penang. Future research can look into how the transgender community in Malaysia is faced with socio economic and political challenges.

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Conflict of Interest

The authors have no potential conflict of interest to declare.



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