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A Study to Assess the Psychosocial Problems and Quality of Life among Transgender in Puducherry

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ABSTRACT:

Background: Transgender is an umbrella term that describes people whose gender identity or expression does not match the sex they were assigned at birth. Transgender are most among the vulnerable and marginalized population in all over the India. Transgender people are stigmatised in our society and are being discriminated in every aspect of life. They are faced with a multitude psychosocial problem it starts from in early childhood and it continues throughout their lifespan.

Aim: To assess the psychosocial problems and quality of life among transgender.

Materials and Methods: A descriptive survey research design was undertaken in SCOHD Society (Sahodaran community-oriented health development), Puducherry and Pookkal association in (Ariyankuppam). Around 215 transgender were selected based on the inclusion criteria through Non probability convenience sampling technique. Data collection was performed based on the interview schedule, demographic variables, DASS 21 scale, & WHO-BREF scale. The data was analysed by descriptive and inferential statistics.

Result: The present study findings revealed that, relationship between the psychosocial problems of depression (r=-0.361), anxiety (r=-0.257), stress (r=-0.354) and quality of life had a negative correlation, which clearly infers when depression, anxiety and stress level increase, the quality of life automatically get decreased. Hence the P value is < 0. 0001. **Conclusion**: The transgender was exposed to have increased psychosocial problems of depression, anxiety and stress, they have a poor quality of life.

Keywords: Assess, Psychosocial Problems, Quality of Life, Transgender.

BACKGROUND:

The term "transgender" refers to identification differs from the normal sex they were assigned during their birth by determination of sexual chromosomes. They are facing with a multitude psychosocial problem that starts from in early childhood and it continues throughout their lifespan. (1) Transgender are not accepted by their own family members, relatives and societal



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members. (2) Gender dysphoria is a medical term for a disorder in which a person is assigned to one gender but identifies as belonging to anotheror opposite gender (3)Gender reassigned psychological a important and vital role to reduce their discomfort. (4) Transgender experiences psychosocial problems like stress, depression, maladjustment, anxiety, personality disorders, and post-traumatic stress disorders. (5) People who identified as transgender have a greater risk of obtaining HIV and other sexually transmitted infections. (6) They faces the mental health problems related to foster isolation, lack of social support, discrimination. (7) Systematic reviews meta analysis reported that poor quality of life is evident by transgender comparatively general population. (8)

QoL measurements may be seen as a technique of assessing people's degree of functioning and subjective well-being. (9) Researchers looked their stigma, discrimination and found that both were linked to geographic context, gender, low socioeconomic status, ethnic minority, lack of health insurance, gender transition indicators, lack of health care availability, history of violence, substance abuse, maladaptive behaviour, interpersonal relationship, occupation and poor quality of life. (10) Transgender quality of life was poorer than bothgender. An assessment of quality of life after hormone therapy and transition found that the most majority (80%) improved, with more stable relationships, improved psychosocial adjustment, and overall better health. Financial, professional, and employment status perceptions all improved. (11)

MATERIALS AND METHODS:

This descriptive study, was conducted among transgender who were underwent sexual reassignment surgery. Non probability convenient sampling technique was used to select 215 samples. The ethical permission to conduct the study was obtained from the institutional ethical committee and written informed consent was taken from all the individuals.

PROCEDURE

Initially, the transgender were asked to fill a pro forma designed to collect sociodemographic data, DASS 21 Scale and WHOQOL- BREF scale.

The tool consists of three sections

Section A: Demographic variables (age, educational status, religion, occupation, income, marital status, living arrangement& health status etc.)

Section B: DASS 21 Scale to assess the psychosocial problems among transgender. Beaufort I.N (2017) was formulated this standardized tool for assessing depression, anxiety, & stress. This tool consist of 21 question related to depression, anxiety, and stress (DASS 21 scale) to assess the depression, anxietyand stress level. It consists of 21 items (each heading consist of 7 questions) it help to measure psychological problems of transgender.



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Section C: Dr John Orley (1996) was formulated this WHOQOL- BREF standardized tool to assess the quality of life among transgender is scored from 1-5 on a response scale, which is stipulated as a five – point ordinal scale. The domain includes physical health, psychological, social relationship, and environment. The scores are then transformed linearly to a 0-100-scale.

STATISTICS

Demographic variables, level of psychological problems level of quality of life of transgender were analyzed by frequency and percentage distribution. Karl persons correlation were used to analyze the correlation were used to analyze the correlation between psychological problems and quality of life among transgender. A chi- square test was applied to ascertain the association with level of psychosocial problems and quality of life among transgender.

RESULT:

In our study total number of the transgender was 215 and the most of them belongs to, 153(71.2%) were aged between 21–35 years, 89(41.5%) were graduate/post graduates, 197(91.6%) were unemployed, 202(94%) earned a monthly income of below Rs.1000/-, 214(99.5%) were Hindus, 176(81.9%) belonged to nuclear family, 156(72.6%) were residing in rural area, 208(96.7%) were divorced / separated and 137(63.7%) were healthy were given in [table 1].

Table 1: Distribution of Study Subjects According to Demographic Variables

Demographic Variables	Frequency	Percentage
Age in years		
18 – 20 years	8	3.7
21 – 35 years	153	71.2
36 – 45 years	40	18.6
45 and above	14	6.5
Educational status		
Illiterate	5	2.3
$1-8^{th}$ std	36	16.7
$9-12^{th}$ std	85	39.5
Graduate / post graduate	89	41.5
Occupation		
Unemployment	197	91.6
Self employed	2	0.9



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Agriculture	-	-
Salaried	-	-
Daily wages	10	4.7
Commercial sex worker	6	2.8
Others	-	-
Monthly income		
Below Rs.1000/-	202	94.0
Rs.1001 to 5000/-	-	-
Rs.5001 to 10000/-	13	6.0
More than Rs.10000/-	-	-
Religion		
Hindu	214	99.5
Christian	1	0.5
Muslim	-	-
Others (Specify)	-	-
Family system		
Nuclear family	176	81.9
Joint family	39	18.1
Living alone	-	-
Living with transgender	-	-
Residential area		
Rural	156	72.6
Semi urban	38	17.7
Urban	21	9.7
Marital status		
Single (Married)	4	1.9
Divorced / Separated	208	96.7
Widowed	3	1.4
Health status		
Healthy	137	63.7
Unhealthy	78	36,3

The mean score of depression among transgender was 10.16±3.88, anxiety was 10.15±3.59 and stress was 10.48±3.92 shown in [figure 1].



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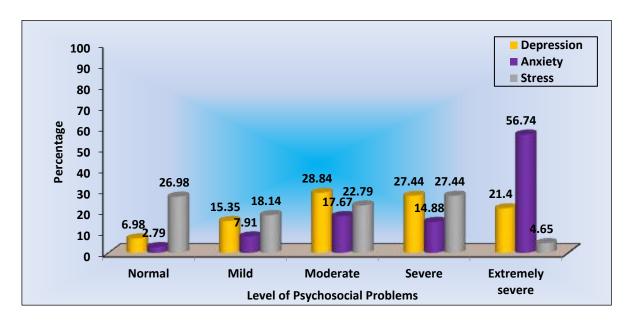


Figure 1: Percentage Distribution of Level of Psychosocial Problems

Percentage distribution of level of quality of life among transgender(FIGURE 2)

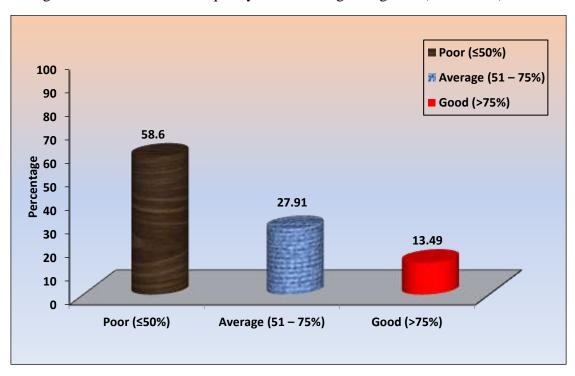


Figure 2: Percentage Distribution of Level of Quality of Life Among Transgender

The calculated Karl Pearson's Correlation value of r=-0.361 between depression and quality of life, r = -0.257 between anxiety and quality of life, r = -0.354 between stress and quality of life shows a negative correlation which was found to be statistically significant at p<0.001 level which clearly infers that when depression, anxiety and stress among transgender level increases, their quality of life decreases were given in [table 2].



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Table 2: Correlation Between Psychosocial Problems and Quality of Life Among
Transgender

Variables	Mean	S.D	Karl Pearson's Correlation 'r' Value
Depression	10.16	3.88	r= -0.361
Quality of life	48.29	17.44	p=0.0001, S***
Anxiety	10.15	3.59	r= -0.257
Quality of life	48.29	17.44	p=0.0001, S***
Stress	10.48	3.92	r = -0.354
Quality of life	48.29	17.44	p=0.0001, S***

DISCUSSION:

Among transgenders depression shows that 21.40% were belongs to extremely severe depression, 27.44% were belongs to sever depression 28.84% of transgender had moderate depression, 15.35% of transgender were belongs to mild depression and 6.98% of transgender were belongs to normal level. Anxiety shows that 56.74% were belongs to extremely sever anxiety, 14.88% of them belongs to sever level of anxiety, 17.67% of transgender were belongs to moderate level anxiety, 7.91% of transgender were belongs to mild level of anxiety and 2.79% were belongs to normal level. Stress shows that 4.65% had extremely severe level of stress, 27.44% of transgender were belongs to severe level of stress, 22.79% transgender were belongs to moderate level of stress, 18.14% of transgender were belongs to mild level of stress 26.98% had normal level. **MS. SWETHA C** (2020) research finding reveals that this study helps the transgender to know about their coping strategies which will help them to reduce physical and psychosocial problems. (12)

Quality of life among transgender reveals thatmajority of transgender 58.60% had poor level of quality of life, 27.91% transgender had belonged to average level of quality of life and 13.49% of transgender were belonged to good level of quality of life. **ProsenjitNaskar** (2018) study findings revealed that 56.9% people were found to have good QOL score as a whole. (13)

Correlation between psychosocial problems and quality of life among transgender. In general, the mean score of depression among transgender was 10.16 + 3.88, anxiety was 10.15 + 3.59 and stress was 10.48 + 3.92 the mean score of quality of life was 48.29 ± 17.44 . The calculated Karl Pearson's Correlation value of r=-0.361 between depression and quality of life, r = -0.257 between anxiety and quality of life, r = -0.354 between stress and quality of life shows a negative correlation which was found to be statistically significant at p<0.001 level which clearly infers that when depression, anxiety and stress among transgender increases their quality of life decreases. **Dr. B. Golden Kisha (2017)**. The findings revealed that the younger



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transgender have had higher social anxiety. Transgender live in rural and urban area brought significant difference in Quality of Life and Self Esteem. Educational Qualification, Occupation, Income brought significant difference in domains of QoL, Social Relations and Environmental domains. Transgender who undergone SRS –Sex Reassignment Surgery live alone or with other peer transgender have higher self-esteem and higher social anxiety. (5)

Association between level of psychosocial problems among transgender with selected demographic variables. The demographic variables had not shown statistically significant association of level of depression, anxiety and stress among transgender. The demographic variables like monthly income have shown statistically significant association with quality like among transgender, the chi-square value($x^2 = 15.472 \, df = 4$) at p = 0.004 level respectively.

CONCLUSION:

The transgender was exposed to have psychosocial problems of depression, anxiety and stress, they have a poor quality of life. The demographic variables of the monthly income had shown statistically significant association of quality of life among transgender. Transgender who undergone sex reassignment surgery (SRS) lives alone or with other peer transgender had higher self-esteem, higher social anxiety and poor quality of life.

RECOMMENATIONS:

- Generalization of the research findings made by further replication of the study with large samples.
- A comparative study can be conduct in various settings with different groups. A study can be done in quantitatively with large samples and different ethnic group.
- A study can be done with some intervention to reduce the psychosocial problems and improve their quality of life.
- A similar study can be conducted by using experimental research design.
- A similar study can be focused with different educational and socio-economic groups.

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