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Impact of Sexual Transition of Transgendered Adolescents and Young Adults on Social Support Systems in Southern Thailand

Kumarashwaran Vadevelu^{1*} and Abdulkhaliq Arrahimee²

¹Social Work Programme, Faculty of Humanities and Social Sciences, Prince of Songkla University, Pattani Thailand ²Social Development Programme, Faculty of Humanities and Social Sciences, Prince of Songkla University, Pattani Thailand

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ABSTRACT This mixed-method study analysed the impact of the transition of transgender adolescents and young adults on their social support systems as well as its consequences in the Provinces of Pattani, Yala, and Narathiwat, Southern Thailand. With the aid of open-ended, semi-structured questionnaires, interviews were conducted focussed on how they had experienced their sexual identity, the levels of their feminine, inner selves, the different ways in which they expressed their femininity, the ages at which they had started transitioning, and the unique consequences of their transitioning in society. Content analysis identified the themes and sub-themes that emerged from the data analysis. The research concluded that transitioning had negative effects on the lives of respondents and on the social support systems which they had relied on for acceptance, recognition, inclusion in society, and for ongoing help in addressing adjustment challenges. The study recommended ways whereby acceptance of and social support for transitioning adolescents and young adults might be advanced.

INTRODUCTION

Included in the most written about definitions of transgender persons are the categories of feminine men and cross dressers (Stewart et al. 2018; Davies and Kessel 2017; Cremin 2017). In this study, the focus is on these categories both of whom are generally perceived and studied as separate entities as well as categories that can be taken as interrelating and inter-connected. In this study, feminine adolescents and young adults are under investigation as transgendered males who also cross-dress following transition to their female identity. The findings and conclusions of community-based, factoranalytic investigations into transwomen in Thailand, Philippines, Laos, Malaysia, Singapore, Korea, and Japan, including a clinically-based focus on Singapore is evidence of the far-reaching effects of sexual identity 'otherness', transition, and societal responses of pathologizing the latter, on the lives of transgendered persons themselves, and on the perceived threat it has on the sense of wellbeing of the families of transgendered persons (Winter et al. 2009).

*Address for correspondence: Kumarashwaran Vadevelu E-mail: kumarashwaran@yahoo.com

Being born male might for most people remain a fait accompli for all their lives especially when the identity and acceptance of their maleness is not an impediment to their sense of wellbeing. This cisgender identity would, however, be threatened by the appearance of female instincts. The concomitant, growing desire to live as one would therefore necessitate decisionmaking as to whether one wishes to transition or keep female instincts and indeed female identity secret and hidden: by choosing the former, the transgendered would in all probability find peace of mind, self-satisfaction and a sense of worth yet simultaneously evoke the opposition and rejection of those who could otherwise have offered social support; choice of the latter would invariably be burdensome and cause for selfharm, isolation, and other soul-destroying reactions (Belfort 2019; Allen 2014; Hong et al. 2011; Kourkoutas 2011).

Feelings of femaleness in males at a very young age would understandably be difficult to handle and satisfy for reasons of immaturity and lack of life experience. It is these reasons that many recent studies of the transition process assert and provide evidence for the delay in the onset of transition to later life stages (WPATH 2011). In later life, persons with such feelings or sense of identity could unavoidably be repelled

by females and instead be attracted to males, masturbate the male sex organ for lack of finding a suitable sex partner, and be unhappy about the male sex organ (Koch 2019b; Chester et al. 2017).

The transition process endures from the time when the transgendered person starts to live according to his/her new gender (Wren 2019; Mouton 2017). Relevant changes in his/her life would take place at a rate determined by the person and culminating in full expression of that new identity in public (Koch 2019a). This process would not be easily endured especially when sex reassignment requires changes of name, use of hormone, surgery, life partner, changes in legal records, official documents like birth certificate, passport, driver licence, and social security card. Opposition, exclusion, and rejection may be the initial reactions of society generally, one that would impact negatively on the chances of social support that the transitioning person would expect from outside of the transgender sector (Norwood 2012). These reactions could cause strong dysphoria among the transitioning sector, who would rely on the prospect of an improvement of social support over time to allay their dysphoria. Generally, however, there is no guarantee that social support would readily be forthcoming or improve. A solution might lie in the study by Rodela and Tobin (2017). It suggests that, to overcome the problem of reduced social support, those closest to transitioning persons should develop empathic, informed strategies that might boost their self-confidence, resolve, self-worth, and capacity to integrate with society as transgendered persons.

A further impediment to social support would be in the case of transitioning persons openly engaging in cross-dressing, using female facial adornment, and a-natural sexual activity with males. Otherwise, their transitioning and open expression of it could result in families feeling ashamed, abuse by parents (Hong et al. 2011; Stieglitz 2010), loss of meaningful friendships, discrimination at their schools and workplaces, and being labelled as sex workers.

A lack of clearly postulated conclusions of other studies on gender transition in the wider, global context do not relate directly nor can they be extrapolated for application to the Southern Thailand context (Butler 2020). Apart from the

above study by Winter et al. (2009), this research has also been unable to locate and use any literature, research studies, or documents of credible scientific value or relevance in respect of the topic under investigation in relation to Thailand as a whole or the geographic areas of Pattani, Yala, and Narathiwat in Southern Thailand. Therefore, the aim of this small-scale research initiative was to provide some initial data and information to fill this gap.

Objectives

In pursuit of the aim of this mixed-method study to explore the impact of sexual transition on the social support systems for adolescents and young adults of transgender identity in Southern Thailand, the objectives were to do a small scale, mixed method study of the transition experience of a sample of transgender adolescents and young adults in Pattani, Yala, and Narathiwat (Creswell 2010). In particular, the objectives were to investigate the duality of their sexual identity, the origin, process, and expression of their transition, the ways in which support systems reacted to it, and the overall consequences of the process of their transitioning

METHODOLOGY

The geographic area of focus of the study, Southern Thailand is part of the Malay Peninsula. It has a land mass of 70,714 km². Its north is the Kra Isthmus, the narrowest part of the peninsula. Steep heights are found on its western coast, while many rivers have estuaries on its east side. The last census estimated the region's population to be 9,256,000 (National Statistics Office of Thailand 2017). There is no legal requirement for transgender persons to register hence the lack of records as to the number of persons in this subsector of the population.

Located on the northern part of the Malay Peninsula, Pattani has the Gulf of Thailand to its north. On its southern border is the Sankalakhiri mountain range and the Budo-Sungai Padi National Park adjacent to Yala and Narathiwat. The 2014 census found that 88 percent of the population of Pattani were Muslim of Malay ancestry (National Statistical Office 2017).

Yala is the southernmost point of Southern Thailand. It has the highest point of the Sankalakhiri mountain range, known as the Northern Titiwangsa Mountains, also known as Ulu Titi Basah at 1,533 metres high (National Statistical Office 2017).

Narathiwat is located to the south of the country. It is bordered by the Malaysian states of Kelantan and Pattani to its west and south respectively. Its location on the Gulf of Thailand makes it ideal for fishing for local and international fishermen. Parts of the Sankalakhiri mountain range and the Budo-Sungai Padi National Park extend into this province. Muslims account for a major part of its population of 40,000 people while Bhuddists equal an estimated 16 percent of the population (National Statistical Office 2017).

Research Process, Procedures and Methods

Distributed at schools, training centres, and universities during May 2019, notices explained the goals and objectives of the study. They also invited volunteers to participate.

With the use of the snowballing sampling method, and to reduce sample error, a random means of selection of participants was used (Creswell 2014). Thirty (30) respondents were selected from those who responded and who met the selection criteria (Creswell 2014). That is, only those were selected who were males with feminine inner-feelings and living as females; were between the ages of 15 and 25 years; were in favour of the qualitative research goals, ethical considerations, and objectives which were explained to them. The size of the sample was considered suitable to meet the research goals and objectives as it was not meant to produce results that might be regarded as representative of the larger population. The sample was subdivided thus: 17 respondents (56.7 %) were 15-19 years old and 13 (43.3 %), were 20 to 25 years old.

Semi-structured, face-to-face interviews were conducted to gather data and collect respondents' qualitative statements about their experiences. During the interviews, ethical considerations were applied. These covered: sensitive recognition of the vulnerability of the respondents; sensitive recognition of the topic of transgenderism and transition; avoiding physical and psychological harm; guaranteeing ano-

nymity and confidentiality; safely collecting and handling information and data; respecting their human rights; treating them without discrimination, sexism, and sectarianism; not compelling them to participate; being socially just; and, expressing the intention to serve the greater good through the research (Iphofen 2016; Creswell 2014).

This research had also gained Ethical approval by the Research Ethical Committee Board of the Prince of Songkla University, Thailand. Relevant documentation validates their approval.

Open-ended, objectives-appropriate questions put to respondents produced rich responses which were meticulously recorded and enumerated in Table form, followed by thematic, content analysis.

For the qualitative phase, and with the aid of the Taro Yamane Formula, coding was used including n=N/1+N(e)2; n=sample size; N= population; e=acceptable sampling error; and p<0.05 (Cresswell 2014). The research process lasted for a period of 4 weeks in December 2019.

RESULTS

As shown in Table 1, the distribution peak in scores for declared female identity of respondents is in excess of three times more than those who regarded themselves as transgender persons. This strong declaration of their identity as female vis-à-vis male is a nuanced result that is open to analysis in order to establish the predisposing factors that led to that self-perception, and the motivation for society to recognise that sexual identity. The score of n=0 for 'male' is consistent with the research assumption of this study. Individual respondents expressed their inner conflicts about their sexuality, that they felt uneasy about not being able to be their true selves.

While the n=0 score for 'male' inner self and expression is also consistent with the research

Table 1: Individually perceived and socially recognised sexual identity (N=30)

S. No.	Sexual identity	Number of respondents	Percentage (%)
1.	Male	0	0
2.	Female	23	76.7
3.	Transgender	7	23.3

assumption of this study, the high frequency score of 80% for the use of facial makeup and the wearing of female attire is an indication of the majority need of respondents to express their feminine sexuality (Table 2). The 20 percent of the respondents who lived as both female and male appeared to have experienced this duality at adolescent and early adult ages. Some respondents explained that their inner conflict proved hard to bear, while it had lasting and negative effects on their psychological states of wellbeing.

Table 2: Sexual inner self and expression of sexuality (N=30)

S. No.	Category	Number of respondents	Percentage (%)
1.	Male	0	0
2.	Female (facial makeup; wearing female attire)	24	80
3.	Male /female confli (at age 15-19 year		20

All 30 respondents offered multiple responses to the five forms of 'attraction and practice' put to them and as shown in Table 3, hence the tally of scores exceed the total frequency in responses. The finding that only half of the respondents were attracted to men or indulged in anal sex with men is indicative of a discrepancy in the group's expression of their sexuality. Only a third of the respondents was found to be displeased about their male sex organ, a finding that seemed logical and explicable given their female sexuality. Those who were displeased stated that they had vacillated continually between surgical sex change and staying as they were.

Table 3: Sexual attraction and practices (N=30)

S. No.	American and practice	Number of respondents	Percentage (%)
1.	Sexual attraction towards women	0	0
2.	Sexual attraction towards men	15	50
3.	Indulgence in anal sex with men	15	50
4.	Unhappiness abou	t 9	30
5.	Masturbation of male sex organ	6	20

Respondents were found to have decided to 'come out' and initiate transition to female identities at different age stages. The predominance of this transition at the 7-year-old stage of their lives as transgendered persons (40%) (Table 4) reflects a change in sexuality at a very young, immature stage of development; the 26.7 percent of responses for the transition at the age of 12 years is regarded by this study as pre-adolescent stage when transition would have been more prudently undertaken by the respondents concerned. It was presumed that analysis of the finding that the rest of the respondents had transitioned at age 5 and 6 years would expose significant reasons for it at these post-infant stages of development. Some of those who scored in this group admitted that at these ages they were largely influenced by parents and older friends.

Table 4: Age stages of gender transition to feminine identity (N=30)

S. No.	Ages	Number of respondents	Percentage (%)
1.	12 years old	8	26.7
2.	7 years old	12	40
3.	6 years old	6	20
4.	5 years old	4	13.3

Family shame was found to have been the unanimous reaction evoked by the transition of respondents, one that some of the latter admitted was a source of hurt and humiliation. The significant frequency of scores for the four other consequences listed in Table 5 were negative reactions by those who would likely have been sources of social support. Some of the high per-

Table 5: Significant consequences of gender transition (N=30)

S. No.	Challenges	Number of respondents	Percentage (%)
1.	Family shame	30	100
2.	Friend's termination of friendship	6	20
3.	Discrimination at workplace	6	20
4.	Labelling as sexual workers by society generally	10	33.3
5.	Discrimination in school setting	8	26.67

centages of respondents who experienced loss of friends, poor treatment at school and workplaces, and labelling as sexual workers, stated that they were dismayed and flabbergasted by such reactions, especially those of bosom friends, fellow learners, and society in general.

DISCUSSION

The results of the interviews with respondents is clear evidence of an acceptable achievement of the objectives of the study. Data obtained show variations in how the duality of the sexual identity of respondents were expressed, the origin, process, and expression of their transition, and the ways in which their support systems reacted to it.

The finding (Table 1) that almost 80 percent of respondents had in society declared their identity as female vis-à-vis male is evidence of an uninhibited self-perception, self-acceptance, and recognition of what their sexuality was in real terms (Haimson et al. 2015). This declaration would have been the main grounds on which society had accepted it as a legitimate sexual identity as well as an exposition of their own inner selves. However, the inner conflict and unease that some respondents had about their identity reflects their inability to come to terms with their identity and lack of determination to be themselves (Mouton 2017; Norwood 2013).

In Table 2, the majority score for the use of facial makeup and the wearing of female attire is the practical, logical, overt, and self-expression of their feminine sexuality. Being transgendered and prepared to display this openly in the presentation of themselves in society is evidence of a strong self-awareness and preparedness to field whatever reactions society might show towards them whether positive or negative (Young 2016; Rankin and Beemyn 2012). This high score, however, does not alter the fact that 20 percent of the respondents lived as both female and male at adolescent and early adult ages. Together with the finding that some respondents had found it hard to bear such duality and inner conflict which compromised their psychological wellbeing – the sexual duality would have been strong grounds for them to be reluctant to present themselves as female in society (Thurston and Allan 2018).

The inner conflict which influenced the male/female dichotomy among some respondents is further reflected in the lack of unanimity in their attraction to men (Table 3). The lack of unanimity in their indulgence in anal sex is probably less attributable to inner conflict and more to the probability that those 50 percent who did not indulge in it had found it unacceptable (Leibowitz 2018).

Having distinctly female feelings while having male genitals could be reason for discomfort and unease about what sexual activity would be most appropriate and indeed gratifying to the transgendered person. The 30 percent of respondents who were unhappy about their male sex organ demonstrates their need to have unfettered sexual relations with others of their choice, in ways of their own choosing, and without the restriction of a sex organ that they regard as inappropriate for themselves. The apparent legitimacy of these factors against the male sex organ do not mitigate the finding that some respondents had considered surgical means to resolve this quandary (Dominguez 2020).

As suggested by other relevant studies (Augustyn 2020; Ashley 2019; Ellis et al. 2014), it is a fait accompli that transgendered persons would 'come out' and initiate transition to female identities at different age stages (Table 4). It might be assumed that the earlier the transition the more likely the process would be at stages of human growth and development when the person transitioning would be less mature and unschooled about the full import of their change in sexual identity. These factors would have been relevant to the counts of 40 percent and 20 percent of respondents who transitioned at 7 and 6 and years of age respectively, whereas the contrary would have been the case of the 26.7 percent of respondents who had done so when they were 12 years of age (Staples 2020; Miller et al. 2018).

Those 13.3 percent of respondents who had transitioned at the even younger age of 5 years would likely have been less mature and schooled than the 7- and 6-year olds. The influence that their parents and older friends would have had on them on whether to transition or not would have been essential given their post-infancy

stage of growth and development, dependence on guidance, and need for direction as they grew up and developed (Rohner 2016a,b, c; Machado et al. 2014; Simons et al. 2013; Deater-Deckard 2011; McNeely and Barber 2010).

The overall finding on the consequences of transitioning for the study respondents illustrates that it is a process of sexual identity expression for transgendered persons that could, in the wider social context, also evoke negative responses by the non-transgendered (McGuire et al. 2016; UNESCO 2016; Grant et al. 2011). The consequence of the unanimous reaction of family shame evoked by the transition of respondents, and the admission of some that such reaction was hurtful and humiliating, is evidence of their sensitivity (Ibrahim et al. 2015; Budge et al. 2013). While they were driven to find solace in transitioning, they were not psychologically empowered to withstand this shame especially from family. As sources of social support, the family, friends, schools, and workplaces all stood to be lost or adversely affected through transitioning (Fiori and Jager 2012; Norwood 2012; Taylor et al. 2011). This was evidenced in the responses to items 1, 2, 3, and 5 in Table 5. The significantly high score for respondents who had been labelled as sex workers could only have also caused them dismay and flabbergast about such labelling. Further, it could have exacerbated their feelings of hurt and humiliation generated by their transitioning (Young 2016; Coolhart et al. 2013).

CONCLUSION

The process of transition for transgender persons in general is stressful, especially when the process starts at a very early age without the opportunity or will to begin expressing the new sexual identity. Stress also emanates from the realisation that it is against societal norms, and when it impacts negatively on many aspects of their lives. In the case of adolesent and young adult transitioning persons in Thailand, such stress could be heightened whereas the negative impact on their lives could have far reaching ways in so far as their social support systems become less accommodating, harder to access, and conditional. These influences could result in self-destructing actions, reduced posi-

tivity in their worldview, rejection by society, marginalisation, discrimination, and alienation from family and friends. The latter are made worse when the transitioning person decides to express their new sexual identity by dressing and making themselves up as female, and has sex with males. Without genuine, unconditional social support, the chances of integration in society and the chances of a life free of stress for the transitioning person can be made remote.

RECOMMENDATIONS

It is recommended that:

- The Thai government and non-governmental bodies offer accessible, social support assistance for transitioning transgender persons.
- 2. That human rights legislation address, in specific terms, the rights of the transgender sector of the population.
- Community awareness be initiated and maintained through all media about the needs, difficulties, aspirations, and capabilities of transgender persons in transition.
- Follow-up research to this study explore and investigate the many other aspects and challenges of transition by transgender persons.

LIMITATIONS

This small-scale, mixed-method study had set out, by way of a small sample of transgender individuals, to investigate the interrelationship between their transition, social support systems, and broader consequences in three regions of Thailand. The findings and conclusions drawn are therefore limited in their general representativeness beyond the scope of the study. They could nonetheless be regarded as having reasonable scientific worth and could serve as research basis for further, broad-based investigation of the topic of this study, and the issues and nuances that lurk behind those covered by this study.

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REFERENCES

- Allen S 2014. Whither the transvestite? Theorising male-to-female transvestite in feminist and queer theory. *Feminist Theory*, 15(1): 51-72.
- Ashley F 2019. Thinking an ethics of gender exploration: Against delaying transition for transgender and gender creative youth. *Clinical Child Psychology and Psychiatry*, 24(2): 223-236.
- Augustyn MB 2020. An intersectional look at the "Rush to Adulthood": Considering the role of gender, race and SES in the link between precocious transitions and adult antisocial behaviour. *Youth & Society*, 52(1): 3-26.
- Belfort EL 2019. Working with complex families and gender dysphoria: Preventing depression and navigating gender transition. *Journal of the American Academy of Child & Adolescent Psychiatry*, 58(10): 73-82.
- Budge SL, Adelson JL, Howard KAS 2013. Anxiety and depression in transgender individuals: The roles of transition status, loss, social support, and coping. *Journal of Consulting and Clinical Psychology*, 81(3): 545–557.
- Butler C 2020. Debate: The pressing need for research and services for gender desisters/ detransitioners. Child and Adolescent Mental Health, 25(1): 45-47.
- Chester K, Lyons A, Hopner V 2017. 'Part of me already knew': The experiences of partners going through a gender transition process. *Culture, Health & Sexually*, 19(2): 1404-1417.
- Coolhart D, Baker A, Farmer S, Malaney M, Shipman D 2013. Therapy with transsexual youth and their families: A clinical tool for assessing youth's readiness for gender transition. *Journal of Marital and Family Therapy*, 39(2): 223-243.
- Cremin C 2017. Man-made Woman: The Dialectics of Cross-dressing. London: Pluto Press.
- Creswell JW 2014. Research Design: Qualitative, Quantitative, and Mixed Methods Approaches. Thousand Oaks: Sage.
- Creswell JW 2010. Mapping the developing landscape of mixed methods research. In: Abbas Tashakkori, Charles Teddlie (Eds.): SAGE Handbook of Mixed Methods in Social and Behavioural Research. Thousand Oaks, CA: SAGE Publications, Inc., pp. 45-68.
- Davies RD, Kessel B 2017. Gender minority stress, depression, and anxiety in a transgender high school student. The American Journal of Psychiatry-American Psychiatric Association, 174(12): 1151-1152.
- Deater-Deckard K 2011. The association between parental warmth and control in thirteen cultural groups. *Journal of Family Psychology*, 3(25): 790–794.
- Dominguez M 2020. Treatment in transition: The rapidly evolving landscape of transgender and gender non-binary care. *Journal of Gay & Lesbian Mental Health*, 24(1): 112-134.

- Ellis SJ, McNeil J, Bailey L 2014. Gender, stage of transition and situational avoidance: A UK study of trans people's experiences. *Sexual and Relationship Therapy*, 29(3): 351-364.
- Fiori K, Jager J 2012. Social support networks and well-being across the lifespan: A longitudinal, pattern-centred approach. *International Journal of Behavioural Development*, 36(2): 117-129.
- Grant JM, Mottet LÅ, Tanis J 2011. Injustice at Every Turn: A Report of the National Transgender Discrimination Survey. Washington, D.C.: National Center for Transgender Equality.
- Haimson OL, Brubaker JR, Dombrowski, L, Hayes GR 2015. Disclosure, stress, and support during gender transition on Facebook. CSCW: Proceedings of the Conference on Computer-Supported Cooperative Work, 2: 1176-1190.
- Hong JS, Espelage DL, Kral MJ 2011. Understanding suicide among sexual minority youth in America: An ecological systems analysis. *Journal of Adolescence*, 34: 885–894.
- Ibrahim DM, Rohner RP, Smith RL, Flannery KM 2015. Adults' remembrances of parental acceptance-rejection in childhood predict current rejection sensitivity in adulthood. *Family and Consumer Sciences Research Journal*, 44(1): 51-62.
- Iphofen R 2016. Ethical Decision Making In Social Research: A Practical Guide. Springer: New York.
- Koch AL 2019a. It Never Goes Away: Gender Transition at a Mature Age. New Brunswick: Rutgers University Press.
- Koch AL 2019b. What physicians should advise their mature patients concerning gender transition. Maturitas, 128: 87-88.
- Kourkoutas E, Erkman F (Eds.) 2011. Interpersonal Acceptance-Rejection: Social, Emotional, and Educational Contexts. Florida: Brown Walker Press.
- Leibowitz S 2018. Gender dysphoria across development: Multidisciplinary perspectives on the evidence, ethics, and efficacy of gender transition. *Journal of the American Academy of Child & Adolescent Psychiatry*, 57(10): 123-132.
- Machado M, Machado F, Neves S, Fávero M 2014. How does parental acceptance-rejection, power, and prestige affect psychological adjustment? A quantitative study with a sample of Portuguese college students. Cross-Cultural Research, 48(3): 295-304.
- McGuire JK, Catalpa JM, Lacey V, Kuvalanka KA 2016. Ambiguous loss as a framework for interpreting gender transitions in families. *Journal of Family Theory & Review*, 8(3): 373-385.
- McNeely CA, Barber BK 2010. How do parents make adolescents feel loved? Perspectives on supportive parenting from adolescents in 12 cultures. *Journal of Adolescent Research*, 25(4): 601-631.
- Miller SJ, Mayao C, Lugg CA 2018. Sex and gender in transition in US schools: Ways forward, *Sex Education*, 18(4): 345-359.
- Mouton M 2017. Gender roles in transition across the globe. *Journal of Women's History*, 29(3): 176-185.
- National Statistics Office of Thailand 2017. *Population Census*. Bangkok: NSOT.

- Norwood K 2012. Transitioning meanings? Family members' communicative struggles surrounding transgender identity. *Journal of Family Communication*, 12(1): 75-92.
- Norwood K 2013. Grieving gender: Trans-identities, transition, and ambiguous loss. *Communication Monographs*, 80(1): 24-45.
- Rankin S, Beemyn G 2012. Beyond a binary: The lives of gender nonconforming youth. *About Campus*, 17(4): 2-10.
- Rodela KC, Tobin JM 2017. On Anna's terms: Supporting a student's gender transition in elementary school. The Journal of Cases in Educational Leadership, 20(4): 42-57.
- Rohner RP 2016a. International Project on the Relation Between Parental Rejection in Childhood and Adults' Fear of Intimacy. Paper presented at the 6th International Congress on Interpersonal Acceptance and Rejection, Madrid, Spain, June 7-10, 2016.
- Rohner RP 2016b. International Project on the Relation Between Remembered Parental Rejection in Childhood and Adults' Loneliness. Paper presented at the 6th International Congress on Interpersonal Acceptance and Rejection, Madrid, Spain, June 7-10, 2016.
- Rohner RP 2016c. Introduction to Interpersonal Acceptance Rejection Theory (IPAR Theory) and evidence. Culture and Human Development: Infancy, Childhood, and Adolescence, 6(1): 1-40.
- Simons L, Schrager SM, Clark LF, Belzer M, Olson J 2013. Parental support and mental health among transgender adolescents. *Journal of Adolescent Health*, 53(6): 791-793.
- Staples JM 2020. Improving the gender-affirmation process for transgender and gender-nonconforming individuals: Associations among time since transition began, body satisfaction, and sexual distress. *The Journal of Sex Research*, 57(3): 375-383.

- Stewart L, O'Halloran P, Oates J 2018. Investigating the social integration and wellbeing of transgender individuals: A meta-synthesis. *The International Jour*nal of Transgenderism, 19(1): 46-58.
- Stieglitz KA 2010. Development, risk, and resilience of transgender youth. *Journal of the Association of Nurses in AIDS Care*, 21(3): 192–206.
- Taylor S, Burke LA, Wheatley K, Sompavrac J 2011. Effectively facilitating gender transition in the workplace. *Employee Responsibilities and Rights Journal*, 23(2): 101-116.
- Thurston MD, Allan S 2018. Sexuality and sexual experiences during gender transition: A thematic synthesis. Clinical Psychology Review, 66: 39-50.
- UNESCO 2016. Out in the Open: Education Sector Responses to Violence Based on Sexual Orientation and Gender Identity/Expression. Paris. UNESCO.
- Winter S, Chalungsooth P, Teh YK, Rojanalert N, Maneerat K, Wong YW, Beaumont A, Ho LMW, Gomez F, Macapagal RA 2009. Transpeople, transprejudice and pathologization: A seven-country factor analytic study. *International Journal of Sexual Health*, 21(2): 96–118.
- World Professional Association for Transgender Health (WPATH) 2011. Standards of care for the health of transexual, transgender, and gender non-conforming people. *International Journal of Transgenderism*, 13(4): 165-232.
- Wren B 2019. Reflections on 'Thinking an ethics of gender exploration: Against delaying transition for transgender and gender variant youth.' *Clinical Child Psychology and Psychiatry*, 24(2): 237-240.
- Young S 2016. She, He, They: Families, Gender, And Coping With Transition. Paisley, USA: CCWB Press.

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