

**SOCIAL INTERACTION ANXIETY AND
LIFE SATISFACTION AMONG TRANSGENDER PEOPLE**

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ABSTRACT

Existing studies unearth social interaction anxiety as the chief contributor to life satisfaction among the transgender population. Hence, the primary objective of the study was to investigate the predictive association between social interaction anxiety and life satisfaction among transgender People. The secondary objective was to investigate the differences between Guru transgender and Chaila transgender on the variable of social interaction anxiety and life satisfaction. Purposive sampling technique was used for data collection within Faisalabad and Lahore (Pakistan) from 200 transgender (guru and chailas) with an age range from 18 to 49 years. Social Interaction Anxiety Scale (Mattick & Clarke, 1998) and Life Satisfaction Scale (Diener et al., 1985) were used as research measures. The results of linear regression analysis show that the social interaction anxiety is a significant predictor of life satisfaction among transgender people. The results of independent t-test reveal statistically insignificant difference between Guru (teacher) and Chaila (disciple) on the variable of social interaction anxiety and life satisfaction. The findings of this research have significance with regard to the mental health of transgender.

Keywords: Social Interaction, Anxiety, Life Satisfaction, Transgender, Guru, Chaila

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INTRODUCTION

The term “transgender” is an umbrella term that includes those who may identify as a gender other than the one they were given at birth as well as those who want to present their gender identification differently from the gender they were given at birth (Commissioner for Human Rights, 2011). The term gender describes both males and females. One is naturally divided into one of two genders however the issue arises when a newborn cannot be put into any category. (Tabassum & Jamil, 2014). Many transgender persons feel acute conflict with assigned natal sex, identified sex, and sexual characteristics (Beek, et al., 2015). In Pakistan, when referring to people whose gender identification deviates from societal expectations based on the sex they were given at birth, the labels Khawaja Sira, Hijra, Khusras, Zenanas and eunuch have historically been used like the umbrella term transgender. The labels "transsexual," "transgender," and "third gender" have also begun to be used recently (Rashid & Rashid, 2022).

Prejudices and social stigma are widespread in many cultures, and social attitudes on gender incongruence and deviance from society standards differ across the globe. As a result, the main challenge faced by persons with stigma is communicating how they typically present themselves to others in social situations and at work. (Ragins, 2008). Therefore, due to discrimination and unfavourable public perceptions (Norton & Herek 2013) transgender people faced increased challenges and it has been discovered that these issues are linked to poor mental health (Anderssen et al., 2020; Bränström & Pachankis).

One of the common mental health problem transgender people experience is anxiety. The term anxiety refers to a number of biochemical changes to human emotions. It activates the sympathetic nervous system, increasing heart rate, causing palpitations, raising blood pressure, making us sweat, and causing our breathing to become quick and shallow (Kreibig, 2010). Social interaction anxiety refers to the occurrence of one's alert understanding that the people of society would assess him negatively or maybe they say something which would shame him. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5), describes different types of anxiety disorders including the ‘social anxiety disorders’. The characteristic feature of social anxiety disorder is the discomfort with social interaction and worry about being embarrassed or evaluated by others (American Psychiatric Association, 2013).

Evidences indicate that anxiety disorders are more prevalent in people who are not sexually active with the gender they are given at natal (Neubauer et al., 2013).

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Transgender people experience anxiety, especially in a social setting (Meyer, 2003) as they face the negative attitude and discrimination whenever they interact in public. In underdeveloped countries, Hijras are reported to experience harassment, personal insecurity, and physical abuse for the first time at the school level (Haider & Bano, 2006). Anderssen et al. (2020) conducted a study on a sample of transgender students in Norway to examine life satisfaction and mental health problem. Their findings indicated that transgender students scored significantly higher on all mental health measures including depression, anxiety, loneliness, and suicidal ideation. Likewise, transgender students reported lower life satisfaction. In another study conducted by Chumakov et al., (2021) examined mental health concerns in transgender population. The findings revealed the higher rates of depression and anxiety in transgender population than normal community population. Smith et al. (2018) conducted a study on transgenders using participatory research approach. Their findings indicated the discrimination faced by the participants at all level a contributory factor to mental health challenges and also to restricted access to services both general and as well mental health.

People are constantly looking for ways to improve their lives; their ultimate goal is to achieve their goals and ambitions in order to live happy, fulfilling lives. According to Grossman and D'Augelli (2007), the desire to meet one's mental, biological, and emotional demands marks the point at which one becomes conscious of their level of life satisfaction. (Poteat et al., 2015). Transgender people face discrimination in accessing healthy facilities, job opportunities, and education, making them feel worse and inferior as compared to other communities. Due to this callous public attitude towards transgender people, their fundamental right to education is neglected, and they are also denied employment and subjected to harassment at events and intimidation in bazaars, all of which have an adverse effect on their level of life satisfaction (Poteat et al., 2016). Studies have documented poor level of life satisfaction in transgender people (Bober et al., 2016; Flynn & Bhambhani, 2021). Earlier Travers et al. (2012) emphasized the importance of having supportive parents for one's gender identity and expression. They also reported having better mental health, fewer attempts at suicide, adequate housing, and higher life satisfaction than their counterparts who lack parental support for their innate gender. Bauer et al. (2015) indicated that medical support, social support and having their personal identification documents are the protective factors for transgender persons in reducing mental health issue, special transphobia, suicide, and discrimination.

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In summary, above stated studies reveal that little has been explored pertaining to the the constructs of social interaction anxiety and life satisfaction among transgender people. Particularly how the social interaction anxiety influences the life satisfaction of transgender is one of the under researched area. Since there are evidences of link between anxiety and life satisfaction in population other than transgender (e.g., Winnie et al., 2005; Yu et al., 2020). Thus, the present study is an endeavor to fill the gap of knowledge regarding the mental health aspects of this neglected group of society, thereby enabling counsellor and psychologists to play a key role by providing interventions to assist them. The objectives of the study were:

1. To investigate the predictive association between social interaction anxiety and life satisfaction among transgender people.
2. To investigate the differences between Guru transgenders and Chaila transgenders on the variable of social interaction anxiety and life satisfaction.

METHOD

Participants

The sample comprised of 200 transgender people (46 Gurus & 154 Chailas). The participants' ages ranged from 18 to 49 years. The sample was collected from public/private organizations and resident transgender of Lahore and Faisalabad (two major cities in Punjab province of Pakistan) using purposive sampling technique. The demographic characteristics of the sample are presented in Table 1.

Measures

Demographic Form

The demographic form was used for collecting essential data about the participants. Demographic sheet comprised; age, sex, birth number, qualification, occupation, siblings, residential region, and socio-economic status.

Social Interaction Anxiety Scale

The Social Interaction Anxiety Scale (SIAS) is designed to estimate and calculate anxiety of social interaction that is described as "distress "while talking

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and interacting with members of society (Mattick & Clarke, 1998). The 20 item scale is responded using 5-point Likert type rating scale ranging from 0 = *not at all characteristic of me* and 4 = *Extremely characteristic of me*. The instrument is beneficial for identifying social interaction anxiety symptoms over time and may help evaluate for social phobia or other anxiety-related disorders. The SIAS is reported to have high test-retest reliability and validity. Recently Ahmad et al. (2021) established psychometric properties of SIAS on Pakistani University sample and found high reliability and validity .80, .93, .90 and .91 for the four dimensions.

Satisfaction with Life Scale

The 5-item Satisfaction with Life Scale (SWLS) was developed by Diener et al. (1985) to assess an individual's life satisfaction cognitively. The SWLS is a 7-point Likert type scale with options of 7 (*strongly agree*) to 1 (*strongly disagree*). The sum of the scores for each of the seven items produces the final score. The cut-off value for the SWLS total is 19, below which there is poor life satisfaction and above which there is great satisfaction. In the current investigation, the SWLS's Cronbach's alpha was .89, showing very good internal consistency.

Procedure

The study participants were contacted and provided enough information about the nature of the study, their role as a participant, and confidentiality of provided information and data to make an informed decision. Transgenders were administered the research measure after seeking formal written consent. Two closed-ended questionnaires were administered individually and one after the other. They were requested to give accurate and honest responses according to the scales requirement and requested not to leave a single statement. Ultimately, all the transgenders were expressed gratitude for their cooperation and time.

Ethical Consideration

The whole process used in this study is based on ethical principals and the practice of APA (American Psychological Association, 2015). The well-being and liberty of trans-genders are secured throughout the research. The sub-sequential ethical commandments were used during the study. The integrity, respect, and comfortless of transgender people are always safe. The researcher collected data was kept secret far and wide.

Statistical Analysis

To test the proposed assumptions, linear regression analyses and independent *t*-tests were applied through the Statistical Package for Social Sciences (SPSS) software version 23.0.

RESULTS

Table 1
Demographic Characteristics of Sample (N=200)

Characteristics	<i>f</i>	%
Age (in years)		
18- 25	76	38
25-35	76	38
36-49	48	24
Education		
Illiterate	38	24
Primary	57	28
Middle	28	14
Matriculation	55	27
Intermediate	08	4
Graduation	04	2
Transgender Status		
Guro	46	23
Chaila	154	77

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Table 2
Linear Regression Analysis with Social Interaction Anxiety as Predictor of Life Satisfaction among Transgender People

Predictor	<i>B</i>	<i>SE</i>	β	R^2	<i>F</i>	<i>Sig.</i>
Constant	22.44	1.15				
Social Interaction Anxiety	-.17	.03	-.42	.17	41.73	.00*

* $p < .05$

Table 3
Independent t-test showing differences between Guru Transgender and Chaila Transgender on the Variables of Social Interaction Anxiety and Life Satisfaction

Variable	Guru (<i>n</i> =46)		Chaila (<i>n</i> =154)		<i>t</i>	<i>P</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
Social Interaction Anxiety	0.96	.89	3.15	7.34	1.52	.13
Life Satisfaction	5.87	.43	4.90	3.36	2.16	.33

$p > .05$

DISCUSSION

The present investigated the predictive relationship between social interaction anxiety and life satisfaction among transgender people. In addition, differences on social interaction anxiety and life satisfaction between Guru transgender and Chaila transgender were also investigated.

The findings with regard to the first objective indicate that social interaction anxiety explained 42% variance in the scores of life satisfaction and model is significant (Table 2). Hence, suggesting social interaction anxiety as significant

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predictor of life satisfaction in transgender people. The findings of the current research proved and validated previous research that social interaction anxiety affected life satisfaction and lead to mental health challenges among transgender people (Anderssen et al., 2020). As humans are social animal hence they possess a primary desire to interact with others. Identified as transgender can cause depression, social anxiety, inability to work, make good contributions, and adversely affect their life satisfaction. A positive response from others increases life satisfaction, while a negative one decreases life satisfaction. When confronted with this discriminatory behavior, they become frustrated and less satisfied. They are also harassed and harassed on daily social platforms and treated differently (Winter, 2009).

The results regarding second objectives of the study reveal statistically insignificant differences between Guru transgenders and Chaila transgenders on the variable of social interaction anxiety and life satisfaction (Table 3). These findings are consistent with the finding of a recent study by Anderssen et al. (2020) which showed no differences on mental health problems and life satisfaction and facing discrimination in either group of trans persons. These findings imply the same level of social interaction anxiety and life satisfaction in guru and chail transgender. Since, regardless of the status of guru or chaila, transgender people are marginalized in every aspect of life and are subjected to same level of discrimination and negative attitude of society. The transgender society of Lahore, Pakistan gets less chance of development in business or jobs and the government has no clear rules for their betterment. Even they are denied to give quota seats in academic institutions. Many transgender adopted the field of taking part in parties and being sex workers at young ages and beggars in their later life, which decreased their life satisfaction (Saeed & Ahmed, 2018). The biggest cause of discrimination faced by transgender people is the role of their own family of origin. The parents can accept a disabled or a murderer child but don't own their transgender children. They are denied at home their fundamental rights to an education, respect, and wellness (Redding, 2019). Thus, depriving them of their fundamental rights begins in their homes with their loved ones, and then society follows. If transgender people were allowed to live out their lives with their families then many of their fundamental rights would be protected and ultimately their psychological needs would be met (Sultana & Kalyani, 2012).

In conclusion, the findings of our study suggest that the social interaction anxiety is a contributory factor to life satisfaction among transgender people. There are no significant differences evident on the level of social interaction anxiety and life satisfaction between guru and chaila transgenders hence indicating that the level

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of social interaction anxiety and satisfaction with life are same in either group. It is noteworthy that People dislike some people but don't know them and don't want to know them because they dislike them. Support from society to transgender people is critical to safeguard their mental health. It is essential to raise awareness and educate all sections of society about transgender persons. The Transgender assistance and welfare program will help overcome the mental health problems in them. There are few limitations of this study. The sample was small and only taken from two cities of Punjab, Pakistan, hence the generalizability to those special areas is applicable. Future research should be conducted in other cities and sample should be taken from different educational level and socio economic status.

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