

A Transitional Journey: Exploring the Experiences of Transsexuals

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ABSTRACT

The aim of this study was to understand the psychological and social underpinnings of the life before and after sex reassignment surgery. Three transsexuals (Male to female) living in India who underwent sex reassignment surgery (SRS) were taken. The interviews were analyzed using Interpretative Phenomenological Analysis, with the aim of revealing the experiences of participants with the society in context of being accepted for how they wanted to live and the factors that lead to sex reassignment surgery. 4 themes emerged: (1) Tug of war: search for True gender identity having subthemes (a) Expressing the girl in me and (b) Identity in question; (2) Societal challenges having as subthemes (a) Social control and (b) Self in relationships; (3) Steps towards happiness (4) Life after sex reassignment surgery. The results showed the effects such as participant's identity confusion; the effects of societal pressures on the psychological health and their interpersonal relationships. Results also reveal certain factors such as interpersonal support and high motivation for SRS which motivated the transsexuals to undergo the surgery. After transition, participants reported experiencing overall satisfaction in life.

1. Introduction

From the moment we are born our gender identity gets defined. The world around a child gets organized into pinks or blues determining the roles as females or males by their society. Researchers have agreed that an individual's gender identity is a result of his/her physical and psychosocial experiences which are shaped by the relational and societal expectations around them (Mascis, 2011). As we grow up we naturally fit into our defined gender roles which are defined by the society. When an individual's physical sex and gender are in sync with each other, this process is known as 'cisgenderism' (Bauer et al., 2009). For instance being born as a female and having feminine ways of being. However for some children this distinction does not come that easily. They insist that they were born into wrong body; they are transgender children which DSM 5 defines as individuals with gender Dysphoria. According to the Diagnostic and Statistical Manual of Mental Disorders (5th ed.), "Gender Dysphoria (GD) is a condition whereby persons experience persistent identification with the opposite gender. The critical element is the presence of persistent and significant psychological distress which can lead to marked impairment in social, psychological, emotional and occupational well-being". (American Psychiatric Association, 2013).

The present study focuses on Transsexuals. According to the International Classification of Diseases (10th ed.) Transsexuals are defined by the intense desire to live a life and be accepted as a member of opposite sex which is usually accompanied by the wish to make their bodies as similar as possible with the preferred sex through surgery and hormone treatment. These physical changes are together referred to as sex reassignment therapy and often include hormone replacement therapy and surgery. The entire process

from switching from one sex and gender presentation to the other is often referred to as "transition" and usually takes several years. All Transsexual persons can be classified in broadly into two ways as MTF (male-to-female) or FTM (female-to-male) (Bauer, Travers, Scanlon, & Coleman, 2012). The transition takes place through a sex reassignment surgery. The process includes changing the physical look of a person's anatomy and making it similar to the anatomy of the opposite sex. The procedure also includes changing the existing sexual characteristics to that of the opposite sex. Sex reassignment surgery is also known as gender affirmation surgery, sex reconstruction surgery and gender confirmation surgery. Several researches have shown that the individuals who underwent sex reassignment surgery experienced less difficulty in context of social adjustment than the transsexuals who did not go under the surgery. (Wilhelm, Sander & Stiftung, 2006). On the other hand a study showed that after sex reassignment, higher risks for mortality, suicidal behavior, and psychiatric morbidity than the general population have been recorded. (Dhejne et al., 2011).

In Indian context, the evidence to altered sexual states can be seen in the hindu mythology. The concept of Ardhanarishwara, reference to King Ila in Ramayan, who spent half his life as man and half as woman, Arjuna in Mahabharata had spent a year of his life in as the member of the "Third gender" can all be seen in the hindu scriptures (Gupta R & Murarka A, 2009). Furthermore "Koovagam" festival at Villupram, Tamil Nadu is celebrated by transsexuals is a festival that draws around 60,000 transsexuals every year. Even after the historical presence of the concept of transsexuals still it's a taboo in present India and the life of these individuals is surrounded by discrimination and social stigmatization.

Looking at the contemporary scenario in India the 2011 census revealed that India has as many as 4,90,000 transgender and yet their identity has always been a questionable matter until , supreme court of India in landmark judgment declared their community as "The Third Gender". In India within the third gender community, there are many stories of transgender who did not let societal pressure decide their fate. For instance - Kalki Subramaniam the "First transgender entrepreneur", Padmini Prakash : First transgender news anchor and just a few more.(India Tv, 2015) . However these are just a few successful stories. The work and attention in this area is still very less in India.

Considering the growing discussions in the global climate, it is evident that issues related to transgender has gained an immediate importance for psychological research, even more considering the scarcity of scientific studies in this topic. Most of the literature on transsexuals is represented by review papers or theoretical papers (Labato et al., 2001; Miguel et al., 2008; Lopes, 2017) and most of them do not represent the Indian scenario. While they provide valuable analysis of occurrences they cannot capture the inner world of the transsexuals who went under sex reassignment surgery and the meaning the transsexuals take from this experience. In the present study, Interpretative Phenomenological Analysis (IPA) was used. IPA aims to understand a phenomenon by the point of view of the participants involved in the study. It has its origins from phenomenology, ideography and hermeneutics and is focused on revealing the personal experience, perception and account regarding the phenomenon in consideration. This approach was developed by Jonathan Smith (Smith, Harré & Langenhove, V, 1995). The objective of the present study was to understand the experiences of transsexuals before and after sex reassignment surgery.

Research Questions:-

1. What are the social and psychological challenges faced by a transsexual?
2. What are the factors that motivate a transsexual to undergo SRS?
3. What are the changes brought by the sex reassignment surgery in their lives?

2. Method

The participants were reached out through contacting various non-governmental organisations and also in person. Initially there were 6 participants however due to personal reasons 3 participants opted out of the study and only three others were left. Recruitment for the participants was purposive. The interviews were conducted by one of the researcher who had similar background as the participants, in Hindi. Informed consent was taken before from the participants and no compensation for taking part in this study. A semi-structured interview was developed, following the IPA guidelines (Eatough & Smith, 2006; Visser & Smith, 2006). The participants were interviewed using the semi-structured interview for 1 hour. Because of the sensitive nature of the topic, the interview was conducted in a private room where participants were comfortable, in New Delhi. In the beginning of the interview, the participant was very briefly explained the study's aims and it was followed by allowing the participants to speak freely,

without a time or topic constraint. At the end of the interview, the researcher talked about the way the participant felt about the interview, the questions, the topic and the sensitive issues discussed. The interviews were audio recorded, transcribed verbatim, translated by a native speaker of hindi and then anonymised. The participants signed an informed consent form prior to data collection. The data analysis was conducted for the transcript, by two researchers. The analysis of the transcript included a thorough reading, taking notes of thoughts and identifying the key words (Smith, Flowers & Larkin, 2009). Later the possible themes and subthemes were identified. After a final reading of the transcript the emergent themes were revised to get a clear story of participant. The final table of themes and subthemes was created by the two researchers and were revised by the third researcher (Smith et al., 2009).

3. Results

From the analysis four themes emerged: (1) Tug of war: search for true gender identity having as subthemes (a) Expressing the girl in me and (b) Identity in question; (2) Societal challenges having as subthemes (a) Social control and (b) Self in relationships; (3) Steps towards happiness (4) Life after sex reassignment surgery. Below is a detailed analytic description of each theme, supported by quotes from the transcript.

1) The tug of war: Search for true gender identity

The participants shared that from a very young age they exhibited cross-gender behaviour where they liked dressing in opposite sex clothes, preferred opposite sex playmates and engaged in games which are usually played by the opposite sex children.

"From my childhood I loved playing with dolls and house games. I always used to have interest in the toys of my sister. I used to hide and wear my sister's frock and play with my mother's scarf". (Participant 1)

"I was in class six when I first wore my mother's sari. I also used to frequently visit my neighbour's house to smear lipstick and kohl on my face" (Participant 2)

"I used to get fascinated by the girls things. I used to love getting dressed up and play with the dolls". (Participant 3)

From very early the participants felt that they knew that something was wrong in the way they were and the way they felt, the distressing feeling that they belonged to the opposite sex. They seemed to show this distress through constant questions they asked to themselves and to their parents about their sex and gender identity.

"I always felt that I am a girl. I remember that I used to ask God to turn me into a girl. I always knew that I am a girl but never understood why others did not believe in me" (Participant 1)

"It was when I was in class seventh when I became aware of my confused sexuality" (Participant 2)

"Yes, I used to often ask my mother why I am a boy. One day I cried a lot because of this. I had asked my father also about it". (Participant 3)

Apart from the distress caused the participants also seemed to feel trapped in the wrong body because they felt that their body was not consistent with what their preferred sexuality was. Further they seemed to believe that it was God's mistake that they were born in wrong body.

"It is God's mistake because of which I am in this body. I feel as if this body is not my own because i feel that i am a girl". (Participant 3)

"Yes. It was a mistake done by God who trapped me in the wrong body" (Participant 2)

Another important evidence of confusion about their identity highlights the important role of linguistics in reflecting ones Gender identity. One of the participant shared that it was very difficult to decide which gender congruent linguistics to use in order to communicate one's identity.

"I used to not understand which toilet to use gents or ladies....When had to talk to others then did not understand whether to address myself to other with which gender linguistics in hindi". (Participant 1)

From the above analysis it seems obvious that participants were aware at an early age of their confusion about their sex and identity. They seemed to express the same through various cross-gender behaviours and their constant distress with their current sex and gender identity. Furthermore it's also revealed that they felt trapped in the body which they were born into and saw it as God's mistake.

2) Societal Challenges

Participants shared that they were often bullied by people around them either by calling names or by disgracing them and their family members. They were made fun by not only the outsiders but their own relatives and friends.

"Neighbour used to call me names....have also heard a lot of abuses from them" (Participant1)

"Relatives used to introduce me as the only girl in our clan and egged me to dance like a woman at get together. My mother felt they were trying to make fun of my ways. She would even ask me to behave like a boy" (Participants 2)

"Whenever I used to go out of my house then people used to call me eunuch. Everyone started feeling scared from me. Living in village became difficult." (Participant 3)

Further they shared that due to the mocking by the society there own family members were greatly affected, which indirectly influenced their family members thought process such as the participants were taken to shamans for getting rid of black magic, not letting them step outside their home or go to temple because they were seen as impure and even some of

the families were forced to leave the country and the place they lived in.

"My mother got into the words of other people. She took me to shaman for getting rid of black magic. She said I was possessed because of which I wanted to become a girl".

(Participant 1)

"My mother stopped me from entering the temple and from praying. She used to say that I was impure". (Participant 2)

"Because of society's pressure and their unacceptability for me, their ill treatments changed attitude, made my father to shift to U.S". (Participant 3)

Another significant piece of information that was shared by participants was their interpersonal relations with their family members. For some their parents were supportive and for others the relationships had negative impact.

"All through my hard time my parents, my sister and my brother have been supportive. Without them by my side I would not have been alive today". (Participant 1)

"I tried to explain to my mother with a lot of difficulty. With difficulty she agreed to let me be like a girl in the house". (Participant 2)

The participants shared the difficulties that were posed by the society on them. They had to face shame by the society and their families were also affected by the pressures of the society, as a result of which their relationship with their own family members saw a significant change both in positive and negative directions.

3) Steps to happiness

All participants shared that they were introduced to SRS by people within their social circle. Furthermore all of them became aware about this surgery from media awareness campaigns as well.

"I read about SRS from internet but never believed in it...but then during those days there was a lot coming about sex change in news...Rose,Malika,Bobby Darling, and many others. So that was when I also thought that I should get this operation done and correct the mistake done by God" (Participant 1)

"After 2 years God sent an angle for me. Some foreigner came who paid for my sex change operation. This operation was very long and costly" (Participant 1).

"In Madras the person whose place I used to work he introduced me to SRS". (Participant 2)

An important experience that they shared was the fear that they had about the uncertainty attached with the success of SRS and its outcomes.

"In 1998 i went through hormonal treatment from delhi lok nayak hospital...i could see a lot of changes taking place within me ...my voice became thinner(feminine) , body weight reduced

, started having breast, skin became completely soft, hair growth reduced significantly on body, mood also showed changes . But with it was a little scared also”. (Participant1)

“Initially i was really scared but i was sure of getting it done”. (Participant 2)

Two of the participants also shared that they used to visit psychologists and they had been significant pillars for them in the transitional journey.

“It was 1984 when I was 15 years old, when I started seeing a psychologist. I used to go for therapies for almost 2 years. My therapist helped convinced my parents to have me go under SRS”. (Participant 2)

“Alongside my regular treatment with SRS doctors I also used to go to mind doctor. In my smooth transition their contribution was equally important as the other doctor”. (Participant 1)

Hence this theme brought forward important elements in the present study. It highlighted the social support, willingness

of the participant themselves and presence of psychologists in successful motivation and transition from male to female SRS.

4) Life after sex reassignment surgery

The participants shared that after the surgery they feel much more satisfied and happy with who they are now i.e their identity.

“My life is now filled with happiness. I am very happy and satisfied with myself now”. (Participant 1)

“I started feeling complete” (Participant 2)

They have further shared that now they have more satisfied life and also relationships which make them happy.

“I have a man in my life. He loves me a lot even after knowing everything about my past.” (Participant 1)

“Currently i am with the man who loves me unconditionally for how I am. We are thin king of marriage.” (Participant 2)

Table 1: Table showing the categories and themes yielded by qualitative analysis

Themes	Subthemes	Excerpts
1) Tug of war: search for True gender identity	Expressing the girl in me	“I used to get fascinated by the things of girls. I used to love getting dressed up and play with the dolls”.
	Identity i question	When had to talk to others then did not understand whether to address myself to other with which gender linguistics in hindi”.
2) Societal challenges	Social control	“Neighbour used to call me names....have also heard a lot of abuses from them”
	Self in relationships	“Because of society’s pressure and their unacceptability for me, their ill treatments changed attitude, made my father to shift to U.S”.
3) Steps towards happiness		“After 2 years god sent an angle for me. Some foreigner came who payed for my sex change operation. This operation was very long and costly”.
4) Life after sex reassignment surgery.		“My life is now filled with happiness. I am very happy and satisfied with myself now”.

4. Discussion

The present research provides insight into transsexual’s experiences before and after the sex reassignment surgery, by exploring their challenges and by revealing their life before surgery and after.

The study included 3 transsexual persons (3 Male to Female) who had undergone sex reassignment surgery. The data in the form of transcripts was analyzed by the technique of IPA. IPA was chosen with the goal of understanding the phenomena the world of participants by using participants’ own words. It also aimed at obtaining a wide view of the life of transsexuals in general and comprehends how the transition journey affects the life of the transitioned.

The results revealed that past experiences, environment and self are all decisive factors which can influence the intention to go under the sex reassignment surgery. The qualitative results show the difficulties faced by the participants such as social rejection and gender identity confusion. Furthermore the results also highlighted the difficulties faced by

the families of these individuals due to the societal pressures which directly or indirectly affected the relationships between the participants and their families. Apart from the difficulties faced before the SRS all the participants reported overall satisfaction and better mental health status after undergoing SRS. Also it was highlighted that all participants were motivated to match their physical bodies with their gender identities.

According to the social exclusion framework of transgender women, society and families of the individuals often oppose the people who behave in opposite gender ways. Despite Indian society being broadly accepting and tolerant to its wide diversity within the country still there appears to be limited public knowledge, understanding and acceptance for people whose gender identities are incongruent to their biological sex. In India, total population of transgender is around 4.88 Lakh as per 2011 census with Uttar Pradesh having the maximum population. Even after the immense number counted only 28,341 people registered as belonging to the third gender. This was mainly due to the fear of facing discrimination by society as a result of revealing their true identities. (The times of India, 2014).In the

present study results show that participants faced discrimination and rejection as well as non acceptance by their own families which caused a lot of emotional distress to the participants.

Another aspect of the social exclusion framework highlights the difficulties in getting basic education and job opportunities as a result of discrimination. As per the 2011 censuses in India revealed the low literacy level among the transgender community, just 46%, compared to 74% literacy in the general population. (census, 2011). The reason for such a percentage is embedded in the discrimination that they face in the schools often leading to many of them dropping out of their schools, and the discriminations faced when seeking better job opportunities. The results of the present study showed that participants took up odd jobs such as bar dancers as it was hard to get other respectable jobs. A survey done among Indian citizens revealed similar results which showed that most of the respondents were in favor of Supreme Court verdict on accepting the third gender but for social acceptance or Social Inclusion of Transgender Population in India the answers of the participants still varied. (Choudhury, Bhutra & Patha, 2016).

Apart from mental stress caused by the discrimination by their society, the present study revealed that participants also experience gender identity confusions as results of the incongruence between their gender identities and sexual orientation. A study was conducted which used three focused groups to understand the identity issues in transgender youth results of this study showed that participants reported that they experienced transgender feelings at puberty, and also faced negative reactions to their gender atypical behaviors, as well as confusion between their gender identity and sexual orientation. (Grossman & Dugall, 2006). Another study was done by interviewing 65 male to female transgender, the results showed that participants felt that their actions and identities are challenging to the binary system of gender in the society which causes a lot of interactional challenges with the society. (McGaughey, Gagne & Tewksbury, 1997).

An important point that came through the data of the present study was the significant relevance of linguistics in reflecting gender identity and hence subtly effecting our interactions with the society. Gender identity is an important aspect of an individual's identity, so much so that the polarization in gender identity (male and female) can be seen in the official language of India itself i.e. Hindi. The Hindi language consists of a group of grammatical gender languages. Therefore in the Hindi language which is widely spoken in India irrespective of India's multilingual status the representation of an individual and communication with others is impossible without the reflection of one's gender. Recent research in language and gender has seen the importance of language that it not only reflects our gender but it also constitutes our gender (Winter, 2013). For example, I am thirsty in English will be translated as "Mein pyasi hun" (feminine) or "Mein pyasa hun" (masculine), depending on the gender of the speaker. A binary model of gender is seen in most of the sentences in Hindi language. Hence it becomes very difficult to think about oneself and of others without this dualism. Furthermore, it is much easier to think and speak about oneself and to be perceived by others, if one's appearance is congruent with one's gender identity. In the

present study this linguistic argument becomes important to highlight the identity confusion that the participants experienced and the social reactions that came along when the individuals addressed themselves with the opposite sex linguistics in their societies. The results also showed that participants experienced immense distress when they were addressed as males even though they felt as females. The present argument brings forth an important consideration for future implications as well i.e. that the counselors dealing with the third gender should be trained into how to use linguistics effectively while addressing the transgender in order to have effective and successful sessions.

Further the study revealed rather positive effects of SRS on participants' lives and well being. Results showed that all the three participants were self motivated to undergo the sex reassignment surgery with the support of a significant person from their personal lives. After the SRS the participants showed overall satisfaction with their lives and themselves. Numerous studies have shown similar results of overall satisfaction in life (Nataša Jokić-Begić et al., 2014) also many studies found that factors contributing to favorable outcomes of SRS include good social support, good surgical results, and satisfaction with physical appearance (Smith et al., 2005; Lawrence 2003). This was also reflected in the results of the present study, where participants reported having good social support which in turn, greatly influenced their feelings of satisfaction with the procedure.

The study brings forth some important future considerations as well. First it highlights the importance of awareness campaigns which can help in reducing the stigma and discrimination against the transgender community in India. Another important point that is brought forth is the silence of the Indian legal system on the issue of sex reassignment surgery. According to Section-320 of the Indian Penal Code (IPC), 'emasculating' (castrating) someone is causing him 'grievous hurt' for which one can be punished under Sec 325 of the IPC. Hence we can assume those doctors who do operations of individuals voluntarily who choose to be emasculated will have to face punishment according to this provision. Furthermore the patient may also be punished for abiding the law. However, under Section-88 of IPC, an exception is made which says that "Nothing which is not intended to cause death is an offence by reason of any harm which it may cause or intended by the doer to cause any person whose benefit it is done in good faith, and who has given consent...to suffer that harm, or to take the risk of that harm". Given the legal stand for SRS in India, it clearly shows confusion and no specific medical guidelines have been laid for the SRS and hence services are available nowhere except for Tamil Nadu, India. As a result of majority of transgender are unable to pay the fees and end up with unqualified medical practitioners for undergoing SRS. Due to bad surgical procedures adopted by unqualified medical practitioners many of them face post-operative complications. These complications can be avoided by affordable sex reassignment surgery offered in the government hospitals.

Lastly in the light of current findings, it is important that families and friends of the transsexuals should be provided with psychological education which can help them support the transgender people well while going through the surgeries and

life after. This further highlights the importance of having trained counselors and psychologists who would work with this sector of population. One of the considerations can be incorporating the biopsychosocial model and basic principles of the SOC while training the professionals for dealing with transgender individuals. SOC emphasizes basic care trainings for professionals such as respect for patients, reducing the stress caused by body Dysmorphia etc. SOC however comes from a North American and Western European perspectives, hence forth its Indian adaptation needs to be done. (Coleman et al., 2012). The findings of the present study also supported the above argument as participants also shared the important role that their respective psychologists play in their transitional journey.

The main limitation of the present study is the small number of participants. While the findings have allowed for some insight into the individual experiences of transsexual persons in India and some important future considerations still the size of the sample does not allow for any generalization. For future considerations a wider sample size should be considered.

5. Conclusions

The current study was conducted with individuals who had undergone sex reassignment surgery; the results of the present research confirm the importance of individual and social factors in the psychosocial adjustment of transsexual individuals before and after SRS in India where the social environment is still hostile towards gender nonconformity. The results demonstrate the identity conflicts that these individual face as a result on incongruence between their gender identities and sexual orientation. The findings of the present study also brought forward the importance of well trained professionals, Clearer government law and actions and introduction of awareness programs in India. Lastly there is absence of a robust body of research on transsexuals in India which limits our knowledge about relevant factors contributing to the overall adjustment of transsexual individuals living in the country having negative public attitudes and poor standards of care in the medical field. Overall the present study brings forth a different perspective of viewing transgender and transsexuals issues and challenges within the society from the perspective of the minority community itself and creates an insight for future research and policies for this population.

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