

Received: 22 DEC 2023 Accepted: 11 FEB 2024

Published: 07 JUNE 2024



Research Article

IMPACT OF PSYCHOLOGICAL AND HEALTH CARE FACTORS ON THE SOCIAL EXCLUSION OF TRANSGENDER COMMUNITY IN PAKISTAN Sidra Riaz

Lecturer, Department of Governance and Public Policy, National University of Modern Languages Islamabad, Pakistan

Correspondence

Sidra Riaz

Email: sidra_riaz17@hotmail.com; Sidra.riaz@numl.edu.pk

Citation

Riaz S. Impact of psychological and healthcare factors on the social exclusion of transgender community in Pakistan Health Sciences Journal, 2024; 2(2): 37-48

This is an open access article distributed under the terms of

<u>Creative Commons Attribution License</u> (CC BY).



The use, reproduction, distributions and use in other forums is permitted provided copyright owner(s) and original author(s) are credited and that the original publication in this journal is cited, no use, distribution or reproduction is permitted which does not comply with these terms.

ABSTRACT:

Background: The present study is conducted in Pakistan and investigates the social exclusion of transgender people in different spheres of life.

Material & Methods: The study was conducted on urban population of Islamabad. The sample consists of 150 transgender and collected through snowball sampling. Regression and correlation analysis was undertaken to find out the relationship independent and dependent variables and to find out the effect of social exclusion in different spheres of life.

Findings/Results: The results show a positive and insignificant relationship between transphobia and social exclusion but also reveal negative and significant relationship between education, income, health care services and social exclusion. Government should make policies on the provisions of rights to the transgender people. Education programs must be prepared so these people are not left out of educational environment. Social justice must be provided to made them better people so they can effectively participate and interact in the society.

KEY WORDS

Social Exclusion, Transgender, Health Services, Minority Stress, Transphobia, Education

1 | INTRODUCTION

Everybody is identified by a specific gender. However, because most people's gender identity is dependable with the gender credited to them at birth, they never think about it. Nevertheless, gender identity is very important, mainly because of expectations from society and responses based on one's expression of gender identity. Transgender people are those whose identity is taken as deviant in that their gender varying behavior is not being recognized as either male or female because of some psychological and biological imperfections or physiological and psychological incompatibility and most importantly society's well-established norms about them. The word transgender doesn't only mean that a person identifies with the opposite gender. It also can be used by people who don't feel like they're either completely male or completely female. This research paper explains various dimensions regarding causes and effects of the social exclusion of Transgender people in different spheres of life. There is wide range of factors that contributes to social exclusion of transgender people and so it further leads to multiple deprivations. Transgenders are those people who want to live in the opposite lifestyle of gender they are having. They are not capable of producing children because they don't have reproductive power. They mostly feel like their soul is trapped in the wrong body. So, they wear clothes opposite to their sex to comfort or to satisfy their soul. There are two major categories in transgender.



1.1 | FEMALE TO MALE

These are physically females, but they want to be recognized as males, so they dress up like males and try to lead male-lifestyle. These are having brains of a male but have female organs. (They're like male trapped in a female's body; they believe their rightful gender is male and their sex should be male too.)

1.2 | MALE TO FEMALE

These are physically males, but they feel like they are woman, they think that their soul is feminine. So, they want to be recognized as females instead of their original or assigned sex. These are born with male organs but whose brains are female. (They're females confined in a man's body; they believe their rightful gender is female and their sex should be female too.) Like certain other South Asian countries, there is the concept of a third gender in Pakistan, which generally includes transsexuals, transgender. These persons are referred to as transgender in general. As trans sexuality is a very taboo subject throughout Pakistan, it is not widely discussed on a lot of forums, resulting in a concern amongst the transgender that society treats them in a less-than-human manner. This is backed by the fact that transgender is ostracized by their own families, and often, banished. In such cases (which is the norm, with few exceptions), the transsexual person will join the transgender community. This community of transgender work together to earn a living, by a selected means of income, including singing, dancing, door-to-door begging, begging on the streets, performing at weddings and other private functions such as on the birth of a male child. Along with this, the transgender community is also involved in sex work, although persons from the transgender community claim that they turn to prostitution to subsist when other means of income do not suffice. In Pakistan, the societal attitudes towards the transgender community are very discriminatory. Transgender are denied opportunities in employment and even basic education. Like people dislike the idea of having a transgender in the family, they are also denied a place in hire. This is partly because of the reluctance of the employer to hire a person who belongs to such a taboo community, and partly because of the fear that the transgender will be subjected to ridicule, disrespect, inappropriate behavior, and violence. (Note that violence is an everyday reality for most transgender who step out in the public sphere.

1.3 | SIGNIFICANCE OF THE STUDY

The significance of study is to study and highlight the discrimination and oppression faced by transgender people in different spheres of life. Social injustices which lead towards social exclusion and disparity in gender roles. This is the reasons behind their social exclusion and to raise awareness of rights of transgender people.

1.4 | AIM/RATIONALE OF STUDY

"Gender is made from nature, but in the social sciences gender nature is transformed into culture. As culture, transgender is a part of the relations between human beings and as such it is also an intermediary in those relations". The present study focuses on how gender socialization is affected by certain societal factors and cultural restraints. Cultural restraints, lower incomes, and the concept of gender stereotyping can surely have a negative impact on the gender socialization of an individual. Highlighting the effects of variations, values, attitudes, and beliefs of a person can have both positive and negative effects on gender pattern and such socio-cultural aspects can certainly alter gender socialization. Gender acceptance patterns are also very important, and they can also have great impact on occupation ways. "Gender acceptance is treated as a perceptual/evaluative construct. It is a phenomenological experience, best categorized as a feeling, emotion, or mood with a defining pleasant or unpleasant character. Since it is a subjective construct, the measurement of Transgender acceptance relies on the use of psychometric, psychophysical, and/or behavioral methods".

1.5 | RESEARCH OBJECTIVES

The study is to find out a relation of social exclusion with psychological and health care factors and various issues like education, income, health care, minority stress and transphobia; create awareness for the gender roles and proper policy development; and to highlight the injustices and discrimination faced by the marginalized groups.

- To indicate the reasons why transgender people are socially excluded in Pakistan.
- To explore the relationship of social exclusion of transgender with education, income, health care, minority stress and transphobia.
- To examine the legislations made in Pakistan for the rights of transgender people.



1.6 | RESEARCH QUESTIONS

Based on the objectives of the research, following research questions guide the study:

- How a relationship exists between social exclusion of transgender with education, income, health care, minority stress and transphobia?
- What are the factors that lead transgender people towards social exclusion?
- How the legislation implemented about transgender community in Pakistan has impacted emerging societal trends towards transgender.

2 | LITERATURE REVIEW

Transgender individuals are those whose gender expression and/or gender personality differs from conventional prospects based on the physical sex they were given at birth. Transgender is an umbrella of terms which describes a wide range of identities, experiences, and people whose appearance appears to be conflicting with the gender customs, transsexuals, transgender, intergender, gender queers, cross dressers, and many more¹. Such groups of socially excluded people are not able to take part in societal normal activities. Factors which contribute to social exclusion including education, poverty, non-dominant, unprivileged social identities, e.g. race, ethnicity, caste, religion, and class; social locations (stratified, migrants, refugees); demographic features (standard, occupation, education); and health settings, e.g. physical disability, stigmatized diseases, like HIV and AIDS. Social, cultural, economic, and political aspects of exclusion put into effect scarcities of the basic amenities of life².

Anybody who differs from the normative principles about sex/ gender is showing deviant behavior³. A labeled deviant person starts finding channels for expression of deviant behavior, needs or desires as family, friends and society try to find the ways to effectively end that. This may lead to forming small, organized support groups where they can get appreciation and acceptance of their deviant behavior. Existence of such groups is all over the world under different label⁴. Pakistan is a male dominated society; therefore, most of the transgender mention themselves to be males of their associated family, while they portray womanhood. The notion of transgender is often attributed as an abuse to a man who is powerless, impotent, unproductive or ineffective⁵. Like other part of the world, the attitude in Pakistan towards transgender people is very biased and in discriminatory. Transgenders are not given a quota in employment and education and are deprived of opportunities to earn a healthy livelihood. Moreover, denial of health and psychological assistance is also a cause of social exclusion.

Anyone who differs from general beliefs about sex/gender is labeled as deviant. An individual characterized as deviant then struggles to evolve deviant behavior, wishes, desires as family, friends and kin and most importantly society tries ways to culminate that forcibly. This in turn leads them to join a community of their-types where their identities and deviant behaviors are acceptable. Such groups exist all around the world under different labels⁶. In some cultures, they are not necessarily considered as deviant while others associate them with possession of some divine power. The binary gender framework is one of the components which continually tries to incorporate gender inside of the characterized form and overlooks the substance of gender introduction. Here inside of Pakistan likewise the confinement and selected nature of gender framework confuses a limit of transgendered individual to selfdistinguish and advance strengthens the association in the middle of gender characteristics and gender introduction. It's turns out to be much more difficult to characterize gender introduction when simply male and female gender marking substantiate to be wrong. There has consistently been incredible confusion about the range of gender orientation. What do we mean by transgender? The term often indicates to those mutilated keeping in mind the end goal to perform a particular capacity, as was basic generally in numerous social orders. In the way of life of South Asia, Transgender are physiological guys who receive womanlike gender orientation personality, wearing ladies' garments. In Pakistan numerous Transgender live in sorted out and very much characterized group drove by a master. These groups have supported themselves over eras by "receiving" young men who is rejected by or escape from their family⁷.

Pakistan is overwhelmingly a patriarchal society along these lines; most of the transgender notice themselves to be guys of their related family, while they depict womanhood. Explanations behind getting to be transgender and the impact of society, religion, class and society in all incredibly shapes the way transgendered status and social parts are characterized in a public. The disturbing thing in our public is the socialization of the transgender in Pakistani group. As asserted, the reason that they have acquired fascination towards music and womanhood is unusual in the light of the fact that why transgender, on the off chance that they have acquired premium then contrast in their occupations they gain their living from changing patterns. In Pakistan, transgender is mingled not under ordinary



gender orientation conditions, they are left segregated, embarrassed, disregarded by their families and relatives, treated brutally, not furnished with training et cetera. This poor socialization then results in giving poor or no aptitudes therefore making them absolutely crippled to work as providers or makers in the general public⁸.

Transsexuals encounter their transgender sentiments from various perspectives. Some can follow their sexual orientation –atypical states of mind and practices or their gender and characters back to their gender memories. Some started to experience sexual orientation atypical states of mind and conduct much further down the road and much mindful of transgender character. Some transgender individuals battle with sentiments of disarray or disgrace while a few individuals grasp and aside from their transgender emotions. Various transgender individuals especially transsexuals, experience exceptional and massive disappointment with their introduction to the world sex or with the relationship of sexual orientation part with that sex. Frequently these people look for gender reassignments⁹. In our society, the transgender people are not the only one who face various forms of social, economic, cultural, and legal injustices and are subject to shaming, discrimination and violence but there are some other groups who also face multiple deprivations¹⁰. Most of the research work regarding transgender is done by western researchers whereas transgender people in western countries are leading better life as compared to those living in developing countries (Pakistan and Bangladesh).

Islam grants equal rights and opportunities for all mankind "In Islam, the sex/gender is recognized as male and female only. A child born with sexual deformity is called transgender brought up as male or female depending upon their dominant physical characteristics. Sexual deformity is like other physical handicap, not affecting other mental and physical faculties of the individual. Transgender are accorded equal rights and social in Islam like other beings11 However, certain limitations are imposed on those who transgress the defined in Quran/Hadith. Islam is not against any natural human phenomena. Also, in terms of legal perspective, transgender is accorded equal rights, the only hindrance in carrying them out are cultural, social and behavioral patterns which acts as barriers in the society towards transgender community. Like other parts of the world¹², the attitude towards transgender in Pakistan is generally biased and very discriminatory. Discriminations against transgender reveal our biased mentality that is reluctant to recognize gender deviances. Over the generation, isolations of transgender from each fabric of society has denied them access to fundamental rights such as education, employment, economic opportunities, health care, psychological/psychotherapeutic assistance, and respect, a total negation of all these things. In Pakistan, transgender have no or little space in social setup. This exclusion from society is an unfavorable condition, yet, sadly only few amongst us hardly know these people as family or friends. Because of the denial of fundamental rights, a high number of transgenders in Pakistan work in sex industry and according to family health international transgender are particularly vulnerable to (STDS) they are often exposed to sexual abuse by customers while performing their tasks¹³.

People fears begging transgender because of the superstitions associated with their gender, to avoid their curses and to get good-wishes people give alms to them. Behavioral patterns such as loud clapping, throwing cheap gestures, cracking vulgar jokes, using foul language, inappropriate hygiene induce negative response of people towards them. People try to avoid interacting with them and show reluctance since they are seen as deviant-something (abnormal) as contrasted with normal¹⁴. A landmark decision has been taken in Pakistan to allow Trans people their own gender category on selected official documents. There are still many areas that remain taboo despite progression in civil and social rights in conservative Pakistani society. The transgender community has always been mocked and targeted by people belonging to all classes, no matter how alike or sophisticated they may be, unfortunately these results in compelling them to indulge in immoral practices to earn their living and get income. A year ago, the supreme court of Pakistan issued orders that all transgenders would now be entitled to national identity cards¹⁵. Although Pakistan has taken step by employing transgender as tax collectors to collect the tax from debtors, yet this also restricts their role as looked down upon, bringing "shame" to people who don't pay tax. This association of "shame" notion with the transgender further deteriorates their social and productive roles from society.

2.1 | CONCEPTUAL FRAMEWORK

Based on literature review and research gap existing in the area of the study, the following conceptual framework is considered appropriate for the study. The study measures the relationship between education, income, transphobia, minority stress and health care of transgender people on social exclusion.



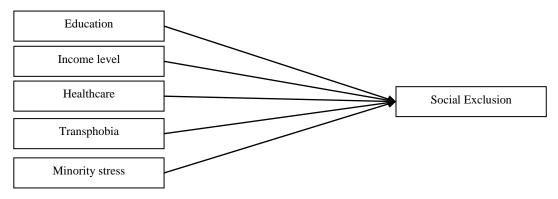


Figure 1 Conceptual Framework

2.2 | GAP ANALYSIS

The discussion analysis of this research explains the re occurring of issues among transgender people, few unique findings about them, and how there is a divide among different transgender groups on the basis of their professions (dancers, beggars, sex trade). The gap was identified to build theoretical framework focusing on the social factors not studied in the society. Unawareness was replaced by education and socialization by transphobia. These social factors can give help in deriving some policy recommendations on the issues faced by transgender and open up some more issues like discrimination in health and other factors.

3 | MATERIAL AND METHODS

This study uses a positivist paradigm, based on empirical investigation using scientific methods to determine cause-and-effect linkages among factors in the transgender community in urban Islamabad, Pakistan. This study aims for generalizability and investigates relationships between preset variables using a quantitative cross-sectional survey design. The research uses a deductive technique based on established theories to examine hypotheses drawn from a theoretical framework. Due to accessibility issues in this population, the survey approach, enabled by a properly developed closed-ended questionnaire, was circulated among 150 transgender individuals in Islamabad via convenience snowball sampling.

3.1 | DATA COLLECTION

The methodology employs a dual approach to data collection, including both secondary and primary sources. Secondary data from credible sources and literature gives a foundational grasp of the context and feeds the review process. The collecting of primary data focuses on specific research objectives involving the psychological and demographic factors causing social exclusion. To collect quantitative data, a modified questionnaire with Likert scale responses was rigorously constructed, depending on proven measures to ensure clarity and ease of response. The questionnaire's administration included demographic and research-oriented questions, with a five-point Likert scale used to assess attitudes, beliefs, and actions within Islamabad's transgender community.

3.2 | RELIABILITY STATISTICS

To bring reliable results of the instrument, reliability analysis is a tool to gain consistent data for analysis and uplift the research on advance level. By assessing the reliability of instrument researcher came to know whether items used in the questionnaire would provide valid results or not. Cronbach's Alpha plays a significant role in determining the reliability of IV and DV. The presented research has the following reliability.

Table 1 Reliability Statistics

Variables	Cronbach's Alpha (α)	No. of Items
Education	.782	5
Income Level	.821	5
Transphobia	.796	5



Health care	.860	5
Minority Stress	.864	5
Social Exclusion	.762	5

Table 1 summarized the reliability statistics of the items. The total number of items for the variable are N=30. The reliability of the items assessed separately, ranging from 1=strongly disagree, 2 disagree, 3= neutral, 4=agree and 5=strongly agree. The five items were of education and the alpha reliability is .78, five items were related to the income level and the alpha reliability is .82, five items were related to the transphobia and the alpha reliability is .79, five items were related to health care and the alpha reliability is .86, five items were related to minority stress and the alpha reliability is .86 and the five items were related to the social exclusion and the alpha reliability is .76. According to researchers 1.0 value shows good reliability contrary to it 0.6 values show the weak reliability. Garson (2016) stated as the reliability must exist between 0.70 to 0.93, Garson (2016) stated as the reliability must exist between 0.70 to 0.93.

4 | DATA ANALYSIS AND DISCUSSION

4.1 | DEMOGRAPHICAL ANALYSIS OF RESPONDENTS

The conducted research consists of 150 participants. All these participants are transgender. 4 demographic items used in the research, namely Age, Gender, Education and Income. The population covers transgender community of Capital City of Pakistan-Islamabad.

4.2 | RESPONDENTS' GENDER

Table 2 Frequency and Percentage Distribution of Gender

Variables	Frequency	Percent	Cumulative Percent
Male to female	59	39.3	39.3
Female to male	91	60.7	100.0
Total	150	100.0	

The gender is summarized in Table 2. It denotes population of the study. The total number of males to female is 59 and the total number of female to male is 91.

4.3 | FEMALE TO MALE

In this research, 91 respondents were female to male. They are physically born as females, but they want to be known as males hence, they decide to dress up like males and spend their life with a male lifestyle. Their brains are males, but they have female body organs.

4.4 | MALE TO FEMALE

In this research, 59 respondents were male to females. They are physically born as males, but they want to be known as females hence, they decide to dress up like females and spend their life with a female lifestyle. Their brains are females, but they have male body organs.

4.5 | RESPONDENTS' AGE

Table 3 Frequency and Percentage Distribution of Transgender Age

Age	Frequency	Percent	Cumulative Percent
18-24	3	2.0	2.0
25-29	35	23.3	25.3
30-34	67	44.7	70.0
35-39	32 21.3		91.3
39-above	13	8.7	100.0
Total	150	100.0	



Table 3 describes that the age of participants lies between various ranges based on years. The age of the transgender surveyed for the purpose of this study ranges from the age of 18-39 above. Total number of transgenders between 18 to 24 years is 3, 25 to 29 years is 35, 30 to 34 years is 67, 35 to 39 years is 13 and above 39 years. 2.0 % lies between the range of 18-24 years, 35% lies between the range of 25-29 years,67% came in bracket of 35-39 years, 13% lies are under the range of 39-above. According to the data shown in this table, most of the transgender who have participated in the research are aged between 30 to 34 years and very few transgenders are aged 39 or above. Because the data is collected from the transgender who were found on streets and roads that is why aged transgender have participated less.

4.6 | RESPONDENTS' EDUCATION

Table 4 Frequency and Percentage Distribution of Transgender Education

Education	Frequency	Percent	Cumulative Percent
None	27	18.0	18.0
Primary	40	26.7	44.7
Middle	38	25.3	70.0
Matric	45	30.0	100.0
Total	150	100.0	

Table 4 summarized the transgender education. The 27 respondents have no education. 40 respondents have primary education, 38 have middle education, 45 have matric education and 0 are above matric. The transgender surveyed have not been qualified much the highest qualification the surveyed transgenders has was till matric and most of them were educated till primary or middle. Almost 45transgendersurveyed were matric before joining the transgender community and the 27 were completely illiterate. The transgender left their education due to unwelcoming behavior at the school.

4.7 | RESPONDENTS' OCCUPATION

Table 5 Frequency and Percentage Distribution of Transgender Occupation

Occupation	Frequency	Percent	Cumulative Percent
Dancer	49	32.7	32.7
Sex worker	64	42.7	75.3
Beggars	32	21.3	96.7
Daily wage Earner	4	2.7	99.3
Bonded labor	1	.7	100.0
Total	150	100.0	

Table 5 summarized the occupation of transgender people. The 49 were the dancers, 64 were the sex workers, 32 were the beggars, 4 were the daily wages, 1 was in bonded labor. The transgenders were doing these jobs because in this society they were not left with many options, just the jobs of entertainers/dancers and begging was given to them. Therefore, they are doing just these jobs to earn.

4.8 | RESPONDENTS 'INCOME

Table 6 Frequency and Percentage Distribution of Transgender Income

Income	Frequency	Percent	Cumulative Percent
5000 -10000	28	18.7	18.7
11000-15000	121	80.7	99.3
21000-25000	1	.7	100.0
Total	150	100.0	

Table 6 summarized the income of transgender. 28 are earning Rs5000-1000 per month, 121 are earning Rs11000-15000 per month, 1 respondent is earning Rs21000-25000 per month. As summarized in the previous table the



transgender were doing very odd jobs because in this society, they were not left with many options just the jobs of entertainers/dancers and begging was given to them. Therefore, their earning pattern is too low. Only 1 transgender among 150 was earning between 21000-25000. This shows their low earnings and livelihood pattern.

Table 7 Gender * Education Cross tabulation

		Gende	r	
	Variables	Male to female	Female to male	Total
Education	None	17	10	27
	Primary	13	27	40
	Middle	14	24	38
	Matric	15	30	45
Total		59	91	150

The cross tabulation of transgender education is summarized in table 7. The 17 males to female are uneducated, 13are having primary education, 14 are having middle education, 15 is having education till matric and 0 are above matric. The 10 females to male are uneducated, 27 is having primary education, 24 are having middle, 30 are having matric and 0 are having above matric. Due to discrimination at harassment in educational institutes transgender cannot have proper education and, they start earning since very young age hence they quit education in early years.

Table 8 Gender * Income Cross tabulation

	Variables	Income of the Respondents					
		5000 -10000	11000-15000	16000-20000	21000-25000		
Gender	Male to female	25	33	0	0	58	
	Female to male	3	88	1	0	92	
Total		28	121	1	0	150	

The cross tabulation of transgender occupation is summarized in table 8. The 11 males to female were dancers, 30 were sex worker, 16 are beggars, 2 are on daily wages and 0 are on bonded labor. The 38 females to male are dancers, 34 were sex worker and 16 were beggars and 2 were daily wage earners and 1 were bonded labor.

Table 9 Correlations Matrix

	Education	Income level	Transphobia	Health Care	Minority Stress	Social Exclusion
Education	1	013	.021	.035	.119	170*
Income level	013	1	.005	.122	013	207*
Transphobia	.021	.005	1	.050	.076	.188*
Health care	.035	.122	.050	1	.434**	228**
Minority Stress	.119	013	.076	.434**	1	.216**
Social Exclusion	170*	207*	.188	228**	.216**	1

^{**}Correlation is significant at the 0.01 level (2-tailed).

In table 9, Pearson correlation coefficient was utilized to measure the strength and statistical significance of the relationship between the independent variables i.e., education, income, health care, minority stress and transphobia and dependent variable i.e., social exclusion. The social exclusion was positively associated with the indicators of minority stress, and transphobia. There is negative and significant relationship between social exclusion and education, $(r = -.170^*)$ shows that when there will be lack of education, awareness and skill, there will be increase in social exclusion of transgender people. The key findings of this research study show that according to correlation analysis it has been confirmed that education and social exclusions of transgender individuals are significantly related and on the negative side. The value shown in correlation table matrix education has negative correlation with social exclusion $(r=-.170^*)$. Hence, it shows negative correlation with social exclusion.

The empirical analysis further elaborates that income and social exclusion are significantly related and on the negative side too. The result shows negative and significant relationship between income $(r = -.207^*)$ as income



increases in the marketplace, the transgender people get fewer working opportunities, and it will increase the social exclusion. In the regression analysis, it is evident from the values of R square, which is .270, confirms that 27% variation in social exclusion is caused by income. r value is -.207* means the relationship is highly significant. Hence, there is negative relationship between income level of transgender and social exclusion. There is also negative significant relationship between health care (-.228**) and social exclusion; as the health care facilities for transgenders get better, they will be less socially excluded. It has been confirmed that transgender face discrimination in accessing health care facilities and expected harassment prevent them from accessing the health care services. In this research study only transphobia and minority stress show positive relationship with social exclusion. There is positive and significant relationship between social exclusion and transphobia, $(r = .188^*)$ as the fear of running away from opposite gender increases the social exclusion also get increased. The results of the regression analysis indicate that the independent variable transphobia identified influences social exclusion of the transgender individuals and does have a significant impact in determining them. It is evident from R square, which is .270, confirms that 27% variation in social exclusion is caused by all the IV's. There is significant positive relationship between minority stress (r=.216**) social exclusion, as the transgenders are in minority in Pakistan, they feel minority stress, and this leads to increase in their social exclusion. The results show that the research model is significant, supporting the variables used to perform the presented study.

4.9 | REGRESSION ANALYSIS

Regression is a statistical tool to assess the relationship and to find out the impact of independent variable on dependent variable. In regression analysis we check the effects of independent variable on dependent variable. In order to perform regression analysis a researcher look at the interaction impact between independent variable and dependent variable and whether or not such impact predict brings any change

Table 10 Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.520 ^a	.270	.245	.83205

In table 10, the different psychological and demographic factors were entered in the regression model. The multiple regressions show that five psychological and demographic factorize income, education, health care, minority stress and transphobia explain variability in social exclusion quite well R^2 = 27%. As indicated, the regression model summary provides the R square value as .270. After adjusting for sample size and the number of independent variables, approximately 24% of the variation in social exclusion is explained by independent variable.

Table 11 ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	36.926	5	7.385	10.667	.000b
Residual	99.693	144	.692		
Total	136.619	149			

Another method for analysis which is used in the study is the ANOVA analysis. The ANOVA test established the fitness of the regression model with F=10.667 and significant level=.000. This depicts that the model fits very well for the prediction of the dependent variable. ANOVA table indicated model fitness of overall model and F value=10.667 which means overall model is fit. In other words, different demographical and psychological factors i.e., Education, Income, Transphobia, Health care and Minority stress are significant predictors of social exclusion of the transgender people. In this table, the partial effects of demographic and psychological factors i.e., Education, Income, Transphobia, Health care and Minority stress on social exclusion are studied. A negative and significant relation occurs between education and social exclusion. This shows that when there will be lack of education, awareness and skill there will be increased in social exclusion of transgender people when other factors are kept constant.

Income has a negative and significant relationship with social exclusion. This means that low opportunities at the



workplace will increase social exclusion. When other factors do not change, Health care was hypothesized to have a negative relation with the social exclusion. It has been found that transgender face discrimination in accessing health care facilities and expected harassment prevent them from accessing the health care services this increase their social exclusion. The minority stress was hypothesized to have a positive relation with social exclusion. The results also show a positive and significant relationship which means Minority individuals living in discriminating social system, stigmatizing face huge stress due to discrimination and harassment which increases their social exclusion. The transphobia was hypothesized to have a positive relation with social exclusion. The results also show a positive and significant relationship, this means as the fear of running away from opposite gender increases the social exclusion also get increased, when other factors remain fixed.

4.10 | DEMOGRAPHICAL AND PSYCHOLOGICAL FACTORS VERSUS SOCIAL EXCLUSION

Table 12 Coefficients

	Model	В	Std. Error	Beta	t	Sig.
1	(Constant)	3.058	.409		7.481	.000
	Minority mean	.414	.085	.390	4.878	.000
	Education mean	202	.072	201	-2.808	.006
	Income means	131	.060	158	-2.194	.030
	Health mean	354	.074	380	-4.752	.000
	Trans mean	.176	.073	.173	2.415	.017

5 | DISCUSSION

The multiple regression analysis conducted in this study revealed significant relationships between demographical and psychological factors (education, income, health care, minority stress, and transphobia) and social exclusion among transgender individuals. Education and Social Exclusion The negative relationship between education and social exclusion aligns with the hypothesis, indicating that an increase in education level corresponds to reduced social exclusion. This relationship signifies that heightened awareness and conscious engagement in education among transgender individuals may alleviate social exclusion. The association between educational activities and social exclusion underscores the importance of education in fostering understanding of social, economic, and political aspects within this context. Income and Social Exclusion The negative relationship observed between income and social exclusion supports the hypothesis that higher income levels correlate with decreased social exclusion. Individuals with higher income capacities tend to seek better living standards and quality of life, impacting their social settings and inclusivity. Conversely, lower-income groups face constraints, leading to social exclusion due to limitations in accessing better community standards.

Health Care and Social Exclusion The negative relationship between health care services and social exclusion substantiates the hypothesis, suggesting that increased access to healthcare facilities reduces social exclusion. Discrimination and harassment barriers faced by transgender individuals in accessing healthcare services contribute to their social exclusion. Transphobia and Social Exclusion The positive relationship between transphobia and social exclusion supports the hypothesis, indicating that heightened transphobia amplifies social exclusion among transgender individuals. Fear or hatred directed towards this community significantly impacts their societal inclusion, emphasizing the need to combat such biases for an inclusive society. Minority Stress and Social Exclusion The positive relationship observed between minority stress and social exclusion confirms the hypothesis. Individuals facing discrimination and stigma due to their minority status experience heightened stress, contributing to increased social exclusion. This stress, rooted in societal discrimination, significantly impacts the social inclusion of minority groups. Overall Model Fitness The analysis, with an R-square value of .270, suggests that 27% of the variation in social exclusion can be explained by the investigated independent variables. The model's F-value of 10.667 reinforces its overall fitness, validating the collective impact of these variables on social exclusion among transgender individuals. The findings underscore the complex interplay between demographic and psychological factors in influencing social exclusion among transgender individuals. Addressing transphobia, minority stress, enhancing educational opportunities, improving income prospects, and facilitating accessible healthcare services emerge as crucial strategies to mitigate social exclusion and foster a more inclusive environment.



Health Sciences Journal EISSN: 2959-2240

6 | CONCLUSION AND FINDINGS

According to their psychological traits transgender children are unable to recognize their sense of identification with either of the parents' male or female. According to many qualitative studies many of the parents give their transgender children to community. Moreover the internalized feeling of being part of the opposite gender at early ages these transgender children start behaving in the manner of opposite sex thus in order to satisfy themselves some transgender children leave their homes by own, as being human they also have desires to associate or to affiliate with a family so for achieving that desire they form their own community because such groups who are marginalized or are in minority they group together and they develop their own norms. Being part of Transgender community, many transgender people have connections with their families as well but only with their sisters and mothers. There are few transgenders who are also supporting their families by sending some portion of their money especially to their mothers.

The initial phase of the discrimination and social exclusion of transgender people starts when at early ages they face separation from a kinship and their own desires sometimes compel them to leave their homes and freely do whatever they want. Also, there were few transgenders who have completed their education till matriculation under most critical circumstances where they are subjected to abuse and harassment, many of them drop out of the education system as they believe that there is no future for us in education as we know that we can't get employed. Transgender people face rampant discriminations in every area of life: kinship, neighborhood, community, education, employment, family life, public accommodations, housing, health, police. Social, economic, cultural, and political aspects of exclusion enforce deprivations of the basic amenities of life. There is a divide between transgender people since their professions those who are dancers or do stage performances blame sex workers for their defaming and that they have been socially excluded because people mostly associate them with sex workers. Most of the research work regarding transgenders is done by western researchers whereas transgender people in western countries are leading better life as compared to those living in developing countries (Pakistan and Bangladesh) Being necessary part of the society there are flaws present on both ends, on transgenders side as well as in social structure and political arrangements. In our social setup we have developed a norm that those at higher positions despite the fact they might be thieves, or they have immoral characters are honorable citizens and no one points finger against them. On the other hand, those who are poor are always associated with odd jobs and immoral characteristics and are the core problem of a society that is causing many issues. According to this research transgenders don't prefer to work under any supervision, they don't want to be controlled, rather they prefer a life of their own, free with freedom to choose and be given rights. Gender is the primary source of information in order to understand oneself. In Pakistan many transgenders are thrown out by their families and live in communal homes under the leadership of a "Guru"- A transgender, who looks after their needs, teaches them and takes a cut of their earnings.

Discrimination against transgender reveals our mentality that is mostly reluctant to recognize gender deviance. They have been completely isolated from access to education, employment, and health care. The sort of discrimination leads to their harassment in public arenas and violence raped and forced prostitution. Hence, they are forced to live in isolated colonies, away from society. The patriarchal situation in our society which refers sons over daughters organizes much of our lives. While we fight against gender discrimination, transgender children have very little or no space in our society. We don't even treat our disabled children in such discriminatory and biased a way.

7 | POLICY IMPLICATIONS & SUGGESTIONS

The social exclusion of transgender people is a problem for both society as well as transgender themselves If the underlined problems of transgender people are not addressed, then these problems will further escalate. Also Government should spend on the provision of rights to the transgender people. Transgender people have no participation in the mainstream of our political, social, and cultural environment that refrain them from leading their lives in secure and healthy environment where they might have different options to earn their living. Schools serve as settings in which students come to understand gender, but transgender students are largely left out of discussions of education. If the field of education is committed to equity and social justice, then education programs must prepare educators to teach gender in more complex ways that take into consideration the existence and needs of transgender people. Many transgender people have taken secondary education but because of no future in jobs and other profession they quit their studies and are relying only on few odd professions for their survival. Social justice must be provided to gender minority which requires excluded transgender people to become less excluded other



believing that excluded transgender people need to be made better people to behave like others to effectively participate and interact in the society.

REFERENCES

- 1. Abbas T, Nawaz Y, Ali M, Hussain N, Nawaz R. Social Adjustment of Transgender: A Study of District Chiniot, Punjab (Pakistan). Academic Journal of Interdisciplinary Studies [Internet]. 2014 Mar 1;3(1).
- 2. Gehi PS, Arkles G. Unraveling injustice: Race and class impact of medicaid exclusions of transition-related health care for transgender people. Sexuality Research and Social Policy. 2007 Dec;4(4):7–35.
- 3. Shah HBU, Rashid F, Atif I, Hydrie MZ, Fawad MWB, Muzaffar HZ, et al. Challenges faced by marginalized communities such as transgenders in Pakistan. The Pan African Medical Journal [Internet]. 2018 May 6;30(96).
- 4. Sineath RC, Woodyatt C, Sanchez T, Giammattei S, Gillespie T, Hunkeler E, et al. Determinants of and Barriers to Hormonal and Surgical Treatment Receipt Among Transgender People. Transgender Health. 2016 Jan;1(1):129–36.
- 5. Saeed A, Mughal U, Farooq S. It's Complicated: Sociocultural factors and the Disclosure Decision of Transgender Individuals in Pakistan. Journal of Homosexuality. 2017 Sep 15;65(8):1051–70.
- 6. Khan AA, Rehan N, Qayyum K, Khan A. Correlates and prevalence of HIV and sexually transmitted infections among Hijras (male transgenders) in Pakistan. International Journal of STD & AIDS. 2008 Dec;19(12):817–20.
- 7. Akhtar M, Bilour N. State of Mental Health Among Transgender Individuals in Pakistan: Psychological Resilience and Self-esteem. Community Mental Health Journal. 2019 Dec 11;56(4):626–34.
- 8. Redding JA. Transgender Rights in Pakistan? Global, Colonial, and Islamic Perspectives. SSRN Electronic Journal. 2016;
- 9. Khan SI, Hussain MI, Parveen S, Bhuiyan MI, Gourab G, Sarker GF, et al. Living on the Extreme Margin: Social Exclusion of the Transgender Population (Hijra) in Bangladesh. Journal of Health, Population and Nutrition [Internet]. 2009 Sep 16;27(4).
- 10. Rutherford L, Stark A, Ablona A, Klassen BJ, Higgins R, Jacobsen H, et al. Health and well-being of trans and non-binary participants in a community-based survey of gay, bisexual, and queer men, and non-binary and Two-Spirit people across Canada. Rendina HJ, editor. PLOS ONE. 2021 Feb 11;16(2):e0246525.
- 11. Bauer GR, Scheim AI, Pyne J, Travers R, Hammond R. Intervenable factors associated with suicide risk in transgender persons: a respondent driven sampling study in Ontario, Canada. BMC Public Health. 2015 Jun 2;15(1).
- 12. Kachen A, Pharr JR. Health Care Access and Utilization by Transgender Populations: A United States Transgender Survey Study. Transgender Health. 2020 May 19;5(3).
- 13. Kachen A, Pharr JR. Health Care Access and Utilization by Transgender Populations: A United States Transgender Survey Study. Transgender Health. 2020 May 19;5(3).
- 14. Perez-Brumer A, Nunn A, Hsiang E, Oldenburg C, Bender M, Beauchamps L, et al. "We don't treat your kind": Assessing HIV health needs holistically among transgender people in Jackson, Mississippi. Shiu CS, editor. PLOS ONE. 2018 Nov 1;13(11):e0202389.
- 15. Kattari SK, Brittain DR, Markus AR, Hall KC. Expanding Women's Health Practitioners and Researchers' Understanding of Transgender/Nonbinary Health Issues. Women's Health Issues. 2019 Nov;
- 16. Stroumsa D, Shires DA, Richardson CR, Jaffee KD, Woodford MR. Transphobia rather than education predicts provider knowledge of transgender health care. Medical Education. 2019 Jan 21;53(4):398–407.
- 17. Scheim AI, Bauer GR, Shokoohi M. Drug use among transgender people in Ontario, Canada: Disparities and associations with social exclusion. Addictive behaviors [Internet]. 2017 [cited 2019 Oct 16];72:151–8.
- 18. Abbas SB. Understanding the Prejudice and Social Exclusion of Transgender Community in Cultural and Theoretical Context. Journal of Social Sciences. 2021 Jan 1;17(1):118–23.
- 19. Cyrus K. Multiple minorities as multiply marginalized: Applying the minority stress theory to LGBTQ people of color. Journal of Gay & Lesbian Mental Health. 2017 Apr 20;21(3):194–202.