



Transition experiences of the Malay Muslim Trans women in Northern Region of Malaysia: A qualitative study

Siti Nur Afiah^{a,b,*}, Abdul Rashid^b, Yufu Iguchi^c

^a Unit for Research on Women and Gender, School of Social Sciences, Universiti Sains Malaysia, Penang, Malaysia

^b Department of Public Health RCSI & UCD Malaysia Campus, Penang, Malaysia

^c Ritsumeikan Asia Pacific University, College of Asia Pacific Studies, Oita, Japan

ARTICLE INFO

Keywords:

Transgender
Trans Women
Transition
Malay
Muslim
Malaysia

ABSTRACT

Transgender topics are controversial in Malaysia and trans people are subject to stigma and persecution. In this study context, the transition is defined as a phase where a person changes from one gender to the gender that an individual chooses. Little is known about the transgender people's transition experiences in Malaysia. Studies have shown that transition helps boost transgender individuals in most aspects. This study seeks to understand the transition experiences of the Malay Muslim Trans women in Northern Malaysia. A qualitative study using a snowball sampling method was used to interview in-depth 13 trans women. The interviews focused on their gender transition experiences, support systems, family and friends' reactions, and coping strategies. The study found four primary themes: transition, reaction, support system, and coping method. Most of the respondents agreed that they felt conflicted about their gender at a young age and started transitioning when they were adolescents. Overall acceptance and reaction of family and society to their transition was low and not good. Most mentioned the importance of a good support system and that they received essential support from their peers in the transgender community. However, they acknowledged that family support was also crucial for them. All of the respondents specified that they did not regret their gender transition. Although this study gained insight, more is needed to understand in depth a very sensitive subject such as this.

1. Introduction

A person is commonly identified as a male or a female based on the sexual characteristics that they were born with. However, some individuals do not fit into the gender assigned at birth and/or comply with the binary gender system. Gender is defined as a social and cultural construct that categorises the different characteristics of men and women, girls and boys based on the role and responsibilities of each gender [1]. Sex usually refers to a person's biological status at birth and is typically categorized as male, female, or intersex. When a person's gender identity and biological sex are not congruent, the person is identified as transgender or trans. Transgender or trans is the umbrella term used to describe persons whose gender identity is the opposite of their assigned sex and includes persons who place themselves between or outside the binary gender categories (male-female) [2].

Transgender individuals may identify in ways that contradict society's traditional, dichotomous gender construction. For many transgender individuals, recognizing who they are and deciding to start gender transitioning involves serious reflections. They may express their gender in various ways, including by changing their clothing, using hormone treatments, and opting for sex and/or gender reassignment surgery [3].

Compared to certain countries in the world where society tolerates and accepts trans people, transgender people in Malaysia are often accused of violating the country's official religion, Islam. Most Malaysian societies do not accept transgenders, and some parents may even disown them [4,5]. Openly being transgender is considered a criminal offence in Malaysia in both the civil and Sharia judiciary [5,6]. Transgender people in Malaysia are shunned by the community and are stigmatized by society. They struggle to secure legal employment because of societal pressure [4,6–10]. They are also marginalization in health care, education, housing and face family rejection, and have their human and political rights violated [6,11,12]. These factors contribute to lower human resources, higher unemployment and poverty rates, homelessness, and negative physical and mental health outcomes, such as higher rates of depression and self-harming compared to cis people [12–18].

The Oxford Dictionary defines transition as the process of changing from one state or condition to another. According to the National Centre for Transgender Equality, transition refers to the period when an individual begins to live according to their gender identity rather than the gender they were born with [2] and transitioning is the steps trans people take to live in the gender of their choice [19].

* Corresponding author at: Unit for Research on Women and Gender (KANITA), School of Social Sciences, 11800 USM, Universiti Sains Malaysia, Georgetown, Penang, Malaysia.
E-mail address: sitnurafiahz@gmail.com (S.N. Afiah).

Transitioning is different for each person [2] and may involve different steps depending on personal preferences and circumstances, such as changing their name, pronouns, clothes, and hormonal interventions [2,11,12]. However, it is important to remember that not everybody will want to transition and it is very dependent on the laws of the country they live in.

Some may choose to undergo physical transformations by using hormonal therapy and surgery, while others may be satisfied with only one or the other [20]. Studies have shown transition leads to healthier self-image, lower depression rates [12,21,22] improved attitude towards life, extraversion, good stress coping ability, optimism, improved quality of life, self-reported well-being, social relationships, elevated self-esteem, and body image [12,20,23–27]

In Malaysia, there are limited publications related to trans women, most are in the areas of healthcare, especially HIV and Sexually Transmitted Diseases, human rights, psychology, religion, and law [5,6,28–31]. Little is known about the transitioning process and to date no published data is available. The objective of this study was to understand the transition process experienced by the Malay Muslim transwomen in Northern Malaysia.

2. Material and methods

2.1. Study design

This qualitative study was conducted among the trans-women community living in the Northern Region of Peninsular Malaysia.

2.2. Background place of study

This study was conducted among the Malay Muslim members and affiliates of a Non-Governmental Organization (NGO) which work with trans women on the west coast of peninsular Malaysia. This NGO help to create awareness and advocates for trans women's rights in peninsular Malaysia. Trans women usually approach the NGO for support and help because the NGO provides counselling and other social activities. A member of the NGO, who is also a trans woman was trained as a research assistant to help in identifying and recruiting participants.

2.3. Population

The study was conducted among 13 Malay Muslim trans women who were associated with this NGO. Eligible participants included Malay Muslim trans women aged 18 years old and above who consented and were willing to be interviewed.

2.4. Sampling

A convenient sampling method was used to recruit the participants. Due to the sensitive nature of the study, a snowball sampling method was used to sample the respondents. This method was applied because of the difficulty to get access to the respondents with the target characteristics. All the trans women were recruited with the help of the NGO representative, and in-depth interviews were done with thirteen of the respondents. However, due to the COVID 19 pandemic, which resulted in restricted movement control order, some interviews were conducted by video calls using Google meets. The participants were contacted by the NGO representative who informed them of the purpose of the interview, and if they agreed, they were met in a location of their choice. For the video interviews, once the respondent agreed, a link to the meeting was sent after the date and time of the meeting were agreed upon.

2.5. Tools

In-depth interviews were conducted using a semi-structured interview guide with open-ended questions. The interview guide mainly asked enrolled trans women to describe their gender transition, the start of their transition, their support system, and their family and friends' reactions.

They were also asked to describe experiences and the challenges they faced during their transition and their coping mechanism. The data were collected using face-to-face interviews in the Malay language. However, because of the COVID 19 pandemic, five interviews were done using the google meets application, and all the interviews were recorded. Data were collected until saturation was achieved [32] which in this case after 13 participants were interviewed. This complies which Hennick and Kaiser's (2022) paper which showed that saturation is achieved after around 9–17 interviews [33].

2.6. Analysis

All interviews were transcribed verbatim and included in the analysis. An integrated content analysis methodology was used in this study to categorize verbal data based on emergent themes within previously identified topics relating to the gender transition process, support system, family and friend's reactions, and coping mechanisms of the challenges faced. The researchers performed repeated reading to familiarise themselves with the contents, and codes were identified after looking at the patterns of data, taking important notes, and marking ideas for the coding process. Meaningful statements and quotations were extracted and were assigned the relevant codes using NVivo version12 software. The codes were sorted into potential themes and sub-themes, and this step was established after a consensus among the research team members. Finally, the extracted data were reviewed to determine their relevance and relationship between the codes and the themes or sub-themes.

2.7. Ethics

The research obtained ethical approval from Joint Penang Independent Ethical Committee (JPEC 03-18-0021). All respondents were given an information sheet that provided information concerning the study, including the objectives, benefits and their rights as respondents whether or not to participate in the study and withdraw from the study at any time. Once the respondents read the information sheet, written informed consent and permission to audio-record and video-record (google meet) the interviews were obtained from each respondent before the interviews. Each respondent was given a unique identifier code to ensure confidentiality. Data is stored on the principal investigator's laptop who alone has access to the data.

3. Findings

Table 1 shows the demographic information of the thirteen respondents who voluntarily participated in this study. The age range of the participants was from 22 to 56 years old. Most (9) had the highest level of education up to secondary school. Ten were working full-time, and the rest had part-time jobs. The majority of these participants were single except for one who was a divorcee. Most of the respondents stayed with their families, and their monthly income ranged from RM900 to RM8000 (1 USD = RM4). All of these respondents described themselves as trans woman, Malay and Muslims. Ten (10) were interviewed face-to-face, and three (3) were interviewed online for approximately 45 minutes per interview.

3.1. Themes

Four main themes were identified; 'transition process', 'reaction', 'support system', and 'coping mechanism'.

3.1.1. Theme 1: transition process

The transition process described by the respondents was diverse and complex. In general, all respondents reported feeling conflicted with their gender identity at a very young age. They realized that they had different interests and feelings from what a typical male should have. These mixed emotions became more obvious when they were teenagers, and this was when they became aware that the assigned gender did not match their gender identity. During this teenage period, they began to search for other

Table 1
Demographic data of the respondents.

Respondents	Age (Year)	Marital status	Education level	Job	Type of job	Monthly income	Living arrangement	Sex worker
R1	39	Single with partner	Tertiary	Full time	Tailor	RM3500	Alone	Part-time
R2	41	Single with partner	Secondary	Full time	Beautician	RM3000	Family	Part-time
R3	32	Single	Secondary	Full time	Hair-dresser	RM1600	Family	Part-time
R4	22	Single	Secondary	Full-time	Hair-dresser	RM1500	Alone	Part-time
R5	42	Single	Tertiary	Full time	Hair dresser	RM 2000	Family	Part-time
R6	48	Single	Secondary	Part Time	Bridal Boutique Helper	RM900	Family	Part-time
R7	37	Single	Tertiary	Full time	Clothing boutique	RM 4000	Friend	Part-time
R8	32	Single	Secondary	Part time	Sex worker	RM2000	Friend	Full time
R9	36	Single	Secondary	Full time	Sex worker	RM8000	Alone	Full time
R10	25	Single	Secondary	Full time	Personal shopper	RM8000	Friend	Full time
R11	30	Single with partner	Secondary	Part time	Restaurant helper & Sex worker	RM2000	Family	Full time
R12	39	Divorce	Tertiary	Full time	NGO	RM2000	Alone	Part-time
R13	56	Single with partner	Tertiary	Full time	Artist	RM1200	Partner	Part-time

trans women and groups that could help them understand these mixed emotions. They sought people who had gone through the same experience and could provide advice and emotional and physical support.

All respondents mentioned that they started to feel the changes in their body or desire differently from their assigned gender when they were young. Some found that they were born to feel and act feminine.

Sub-theme 1: Age

"From a young age, I was always interested in things which were associated with the female gender in our culture, such as cleaning the house, cooking, I even started to dress like a girl... and I prefer playing with girls. I love looking at the boys, and developed an interest in boys...this was when I was 6 or 7 years old... In secondary school, I had to wear the boys' uniform, but right after school, I usually will go out wearing a dress, like a girl. I started to use skincare and lotion and always took care of my beauty routine. I got to know about hormones around the same age, but at that time, I was afraid to try." (Respondent 2)

"Since a very young age, around 5 years old. When I looked at the boys, I feel attracted to the boys and I played more with the girls. I like boys, they are cute and I am more interested in men, I feel like with the girls, I am always as same as they are (feminine)" (Respondent 10)

"At a very young age, I love all the activities that are usually done by the female, for example, cooking, cleaning the house. When I was 6 years old, I started to wear girl's clothes and play with my female siblings, I love watching female dancers dancing at that time and I love dancing too" (Respondent 5)

"When I was 12 years old, I have the feeling and urge to be a girl. I love wearing girls' clothes and playing with dolls, I hate playing with the robots like the boys. I preferred the dolls and always played cooking with the girls. I love to wear my mother's clothes since young. At that time, I like looking at the boys, I love boys, but I do not know why and clueless" (Respondent 4)

"I think I started feeling different when I was 5 or 6 years old. My brother kept scolding me as he said that I have changed, from the way I ate to the way I walked. No one can tell the difference in my appearance as I wore normal clothes. I was not want to wear as girls but it showed through the way I ate, the way I walk and with whom I played.. so that is more obvious..." (Respondent 12)

Many trans women in this study mentioned that they fully started transitioning their appearance in their teenage years. Three respondents said that they completed their gender transitioning in their twenties.

Sub-theme 2: Usage of hormones

"I started taking hormones at age of 16, when I was in school, I dressed up as a boy but my demeanour was that of a girl...I wore male clothes because at

that time I still lived with my parents and they were strict. Once I finished school and started working, I slowly changed my appearance...only when I moved out of my parents' house, did I fully transition... (Respondents 5)

Sub-theme 3: Surgical Implant

"I did a breast implant when I was 20 or 21 years old, I did the operation in Thailand..." (Respondent 5)

Some of the respondents mentioned taking time to transition fully because of the conflict in trying to reconcile with their culture and religion.

".. the other reason why I took my time to fully transition is because of the uncertainty caused by the culture and religion as in Malaysia we always bind by the religion, the guilt and some would question on the death matters (of the transgender, whether to be bury as male or female) and so on.." (Respondent 13)

"I was fully transitioned at the age of 22 years old. besides the financial problem which held me from fully transitioning at an earlier age, I was a little bit hesitant at first because of my family. I have to think of how am I supposed to behave.. what should I show or what should I hide? I need to be fully confident to take care of myself in society. I know my family do not like how I dressed, so I have to wear a big T-shirt. I need to know how to carry myself and try not to hurt anybody with my changes." (Respondent 12)

3.1.2. Theme 2: reactions

Some respondents mentioned that their family neither supported them nor hated them for being trans women, and some even claimed that their family members still accepted them. Receiving family support was so important for these trans women because family played a crucial part in receiving love and support especially when they were rejected and discriminated against by society. But not all were lucky, some of the respondents were chased out of their homes by family members because their parents could not accept their decision to become trans. While others reported that they moved away from their family homes on their own to avoid conflict within the family. Although most parents could accept the transition the society they lived in, influenced the families' reactions.

There were both negative and positive reactions but overall acceptance was very low.

Sub-theme 1: Religion

"At first, of course, my family could not accept it...especially because we are Muslims, it was hard... I received a lot of resistance until I had to run away from home... I did not receive any support from my family and because I was a rebellious person, I ran away from my house when I was 15 years old. I stayed with my seniors (trans women). (Respondent 2)

Sub-theme 2: Family's Rejection

"My late father was an abusive person... he physically abused me... but now he has passed away and I have forgiven him... I understand that he received a lot of pressure from society, from his siblings, my uncles, and aunts... each time he went back to his hometown, he would come home with an angry face... my mom, on the other hand, loved me because I am her child... she didn't accept me as a trans woman but because of her love towards her child she always backed me up and gave me moral support but until now deep down in her heart she still cannot accept me as a trans woman... My mom is old now... from time to time she will still pressure me and ask me to change... I keep telling her I am not going to change because I am a trans woman. Some of my relatives still cannot accept it and they too try to convince me to go back to my assigned gender... so I will usually avoid attending any family functions... (Respondent 2)

Some of the respondents mentioned that they did not face any resistance from their family members as the family members could accept their transition but, they took steps to not show and be open about being a trans woman as they wanted to avoid any conflicts and at the same time wanted to take care of the family's reputation in the society.

"My sister was the first person to know about me being a trans. My sister told my mom and my mom kept it from my father, then from time to time, they eventually accept it. I think any family would like to see their children happy. So when we have money and a stable job, our family will accept us in a good way and like me, I avoid openly wearing female clothes during the family gathering and wear a big T-shirt to cover my breast so they are okay with it." (Respondent 12)

School friends would either avoid them or in some cases be abusive, not so much physically but more so emotionally.

Sub-theme 3: Friends' reaction

"Most of my friends who were not from the transgender community cannot accept me. If you want to know whether they were okay or not, you just need to read their Facebook post... nowadays, I only meet with my 'normal' friends' once a while... very rarely because I try my best to avoid meeting or seeing them... we have our circle (transgender) who support each other, that's it, others I consider them, acquaintances... if I meet them, I just say hello but if someone doesn't like me, I cannot do anything." (Respondent 2)

3.1.3. Theme 3: support system

Most of the participants interviewed mentioned other senior trans women who shared their transition experiences and provided them with support and advice.

Sub-theme 1: Mentor

"Mostly we would meet other senior trans persons... as for me, I met Shasha (trans women) when I was 16 years old... she is like my sister. She was the first person I told I wanted to become a woman and I received so much support and advice from her... I would ask about hormones to make my breast bigger and where to buy them (Respondent 11)

"I met with senior trans persons, so they are more experienced and able to give advice. So, I ask them, how and what hormones I should take to make my breast bigger and they will tell me the details and I would go to the pharmacy or shop to buy the suggested hormones." (Respondent 9)

The participants understood the importance of having a good support system and the risk of having none

Sub-theme 2: Peer support

"I am closer to my circle (of trans friends) than my family but for me my family support is essential and a lot of transgender people who did not get

any help from their families turn to immoral activities such as drug abuse or they got involved with sex work" (Respondent 2)

3.1.4. Theme 4: coping mechanism

The respondents faced many challenges while transitioning. Although experiences varied among the trans women but most had coping mechanisms when encountering problems caused mainly by stigma and discrimination. All of them did not feel regret or feel guilty about their decision to transition.

Sub-theme 1: Correct decision

"I have never felt regret, I feel more comfortable (after transitioning) to live like this... I am comfortable now compared to my previous life (before transitioning)... I have never thought of going back to my previous life at all... I believe what I did is right and I believe in my decision" (Respondent 1)

Some mentioned that they need to be positive in every way and try not to put any emotional pressure on themselves.

Sub-theme 2: Self-Acceptance

".. it is hard to make society understand trans women... It isn't easy to get other people's acceptance... We cannot force people to like us and understand us, I choose to be patient, I need to stay calm and have the patience to live in peace in this society. Secondly, I choose not to stress myself, I think that I am a normal person, when I think in that manner, I will act normally and when people see me, they will think we are normal people... always stay positive." (Respondent 5)

".. I have no problems, I don't care about others, except when they started verbally talking about something funny about me, I would not keep quiet and I will stand for myself. So far, no bad events is happening to me, maybe because I keep my circle small" (Respondent 2)

4. Discussion

All the participants felt they had a different gender identity from their biological sex during their childhood and they embraced their new identity when they became adolescents. These findings are similar to research by Gibson et al. (2016) that found, that the conflict during childhood and their inner gender awareness did not match their biological sex was common in these stories. Many participants in Gibson's recalled exhibiting similar effeminate behaviours as children, frequently referring to themselves as "soft" and noting their penchant for traditionally feminine activities [29]. According to Teh Yik Koon (2002), most trans women in Malaysia believed that they were female when they were young and realized they were different from other boys between the ages of 6-15 years old [34]. Likewise, Mileham (2016) in her study on the transgender community in the United States of America mentioned that all participants in her study responded that they had a realization about their own gender identity sometime during their childhood, commonly during ages 3 to 9 years old [35].

One of the critical variables highlighted in these transition processes is family acceptance. When questioned about the family's initial response to their gender identity, nine participants reported negative reactions. Four of them mentioned that their parents had physically harmed them due to their new identity. Despite this, the majority believed that family attitudes and acceptability had shifted positively over time. This result is comparable to a study by Magalhaes et. al. (2020), the trans people in the study mentioned that they did not receive family acceptance, and the family members rejected them. Some were even thrown out of their houses [21]. However, studies among the transwomen and transgender community in New York and California found that while many of the participants reported that their family members did not initially agree and accept their transition, over time, the rejection changed to a positive acceptance and family

members became more supportive [35,36]. Yukari Ishii (2018) stated in her study on the parents of Japanese Transgender Children, that parental support is very crucial to many transgender people who suffer from social exclusion and prejudice [37]. In that study majority of the family could not accept the transition and some of their parents even physically attacked them. On the other hand, some transgender persons in Thailand stated that they received positive support from their mothers and faced relatively few problems in society [38]. In Indonesia, transgender people or called *waria* reported to be attacked and are still deemed shameful to their families and some of them are exiled by their families [39].

Transgender people who did not receive positive feedback from their families will usually receive support from their transgender community. Studies show that the transgender community provide significant support for their own [40,41]. The finding of this study is very much like the previous studies where most of the trans women who did not receive support from their families managed to get advice, help, and support from someone in the transgender community. Even minimal support from loved ones can reduce the impact of stigma and depression [36]. This finding is strengthened by Budge's study that described the support from their transgender community as invaluable and by getting the support of other trans women made a meaningful difference in their emotional experiences [42].

Transgender people who frequently face social challenges will have a higher probability of feeling unfortunate and isolated resulting in mental health issues and suicidal ideation [22]. To date, there is no law covering gender reassignment to allow an individual who has undergone sex transition to change his or her sex on his or her legal documents in Malaysia [43]. This is contrasting with its neighbouring country Indonesia, where in Indonesia, trans people can legally change their gender by obtaining a court decree under their law [44]. Therefore, facing this social challenge with other trans women who had encountered almost the same situation and experiences can enhance inner resources, particularly by becoming resilient [45]. Many trans women have reported that resilience is a vital resource and strength and resilience can increase with family support and connection to the transgender community [45].

Most of the respondents coped well with the challenges and difficulties during their transition process. Budge and her co-researcher (2013) in their study on the coping mechanism of gender transitioning, found that many avoidant coping mechanisms were used to cope with their emotional process including the feelings of affirmative emotions during their transition. An example is acting confident or pretending to be confident to overcome insecurities or worries about their gender transition [42]. The participants in Budge's study also mentioned that they were emotionally stable after went through the transition process and acknowledged that transition changes the perception of self and being true to oneself and accepting their "destiny" to be transgender [42]. Similarly, the trans women in this study also mentioned that they have no regrets about their gender transition and accept and embrace their new identity.

Although one participant alluded that her mother could have influenced her to be a trans, the nature-nurture argument is considered redundant by social scientists. Craddock (2011) stated it as 'outdated, naïve and unhelpful' while Traynor (2010) called it a false dichotomy' [46,47]. Since gender concepts vary among cultures and history, therefore gender is one of the most fluid concepts.

4.1. Strength and limitation

The design of this study allows for a more in-depth understanding of the transition process and experiences of these trans women. However, the study population's sample size is small, and the results cannot be extrapolated to the entire trans women population, let alone the transgender population as a whole as in this context, it focuses only on the Muslim transgenders.

4.2. Recommendation

This study only focused on Malay Muslim Trans women in the northern region of Malaysia. The author suggests that more studies should be

conducted to understand the transition experience among the transgender community.

5. Conclusion

This qualitative assessment adds to the limited information available on trans women and the transitioning process. It is important to understand the transitioning experiences and the challenges to understanding the mental health challenges faced by them.

Funding

This study was made possible through the financial support of RCSI & UCD Malaysia Campus, Penang, Malaysia. The funding source had no role in the study design or the collection, analysis, or interpretation of data.

Declaration of Competing Interest

No potential conflict of interest was reported by the authors.

Acknowledgement

The authors acknowledge the contribution of Ms Hezreen Sheikh Daud who contributed to the success of this project.

References

- [1] UNICEF. U.N.C.s.F. Gender Equality: Glossary of Terms and Concepts; 2017.
- [2] Equality, T.N.C.f.T. Frequently Asked Questions about Transgender People; 2016.
- [3] Korell S, Lorah P. An Overview of Affirmative Psychotherapy and Counseling with Transgender Clients; 2007.
- [4] Nadal K, Davidoff K, Fujii-Doe W. Transgender women and the sex work industry: roots in systemic, institutional, and interpersonal discrimination. *J Trauma Dissociation*. 2013;15.
- [5] Rashid A, Afiqah SN, Iguchi Y. Use of Hormones Among Trans Women in the West Coast of Peninsular Malaysia: A Mixed Methods Study. *Transgender Health*; 2021.
- [6] Vijay A, et al. Factors associated with medical doctors' intentions to discriminate against transgender patients in Kuala Lumpur, Malaysia. *LGBT Health*. 2018;5(1):61–8.
- [7] Logie CH, et al. Factors associated with sex work involvement among transgender women in Jamaica: a cross-sectional study. *J Int AIDS Soc*. 2017;20(1):21422.
- [8] Miller WM, et al. Sex work, discrimination, drug use and violence: a pattern for HIV risk among transgender sex workers compared to MSM sex workers and other MSM in Guatemala. *Glob Public Health*. 2020;15(2):262–74.
- [9] Jenkins C, Ayuthaya PPN, Hunter A. Katoey in Thailand: HIV/AIDS and Life Opportunities. Washington: USAID; 2005.
- [10] Samsul D, et al. Knowledge and Attitude towards HIV/AIDS among transsexuals in Kuantan, Pahang. *IJUM Med J Malaysia*. 2020;15(1).
- [11] Drydak N. Transgenderism, Sex Reassignment Surgery and Employees' Job-Satisfaction; 2016; 83–99.
- [12] Drydak N. Trans People, Well-Being, and Labor Market Outcomes. *IZA World of Labor*; 2017; 386.
- [13] OECD. Society at Gance; 2019.
- [14] Trevor M, Boddy J. Transgenderism and Australian Social Work: a literature review. *Aust Soc Work*. 2013;66(4):555–70.
- [15] Reisner SL, et al. Global health burden and needs of transgender populations: a review. *Lancet*. 2016;388(10042):412–36.
- [16] White Hughto JM, Reisner SL, Pachankis JE. Transgender stigma and health: A critical review of stigma determinants, mechanisms, and interventions. *Soc Sci Med*. 1982; 2015(147):222–31.
- [17] Dhejne C, et al. Long-term follow-up of transsexual persons undergoing sex reassignment surgery: cohort study in Sweden. *PLoS One*. 2011;6(2):e16885.
- [18] Glynn TR, et al. The role of gender affirmation in psychological well-being among transgender women. *Psychol Sex Orientat Gend Divers*. 2016;3(3):336–44.
- [19] Budge S, Tebbe E, Howard K. The work experiences of transgender individuals: negotiating the transition and career decision-making processes. *J Couns Psychol*. 2010;57: 377–93.
- [20] Bocking WO, Knudson G, Goldberg JM. Counseling and mental health care for transgender adults and loved ones. *Int J Transgenderism*. 2006;9(3-4):35–82.
- [21] Magalhães M, Aparicio-García ME, García-Nieto I. Transition trajectories: contexts, difficulties and consequences reported by young transgender and non-binary spaniards. *Int J Environ Res Public Health*. 2020;17(18).
- [22] Drydak N. Trans People, Transitioning, Mental Health, Life and Job Satisfaction. Germany: IZA - Institute of Labour Economics; 2019.
- [23] Kraemer B, et al. Body image and transsexualism. *Psychopathology*. 2008;41:96–100.
- [24] McNeil J, et al. *Trans Mental Health Study*; 2012.

- [25] What We Know Project, C.U. What Does the Scholarly Research Say About the Effect of Gender Transition on Transgender Well-Being? Center for the Study of Inequality, Cornell University; 2018.
- [26] Cheng Z, Smyth R. Sex and Happiness, vol. 112; 2015.
- [27] Linley P, et al. Measuring happiness: the higher order factor structure of subjective and psychological well-being measures. *Personal Individ Differ*. 2009;47:878–84.
- [28] Barmania S, Aljunid SM. Transgender women in Malaysia, in the context of HIV and Islam: a qualitative study of stakeholders' perceptions. *BMC Int Health Hum Rights*. 2017;17(1):30.
- [29] Gibson BA, et al. Gender identity, healthcare access, and risk reduction among Malaysia's mak nyah community. *Glob Public Health*. 2016;11(7-8):1010–25.
- [30] Lee Wei C, et al. Transgenderism in Malaysia. *J Dharma*. 2012;37:79–96.
- [31] Koon Teh Y. HIV-related needs for safety among male-to-female transsexuals (mak nyah) in Malaysia. *Sahara J*. 2008;5(4):178–85.
- [32] Charmaz K. *Constructing Grounded Theory: A Practical Guide through Qualitative Analysis*. SAGE Publication; 2006.
- [33] Hennink M, Kaiser BN. Sample sizes for saturation in qualitative research: a systematic review of empirical tests. *Soc Sci Med*. 2022;292:114523.
- [34] Koon TY. *The Mak Nyahs: Malaysian Male to Female Transsexuals*. Singapore: Eastern Universities Press; 2002.
- [35] Mileham AL. *The Transgender Experience*, in Office of Graduate Studies. San Bernardino: California State University; 2016.
- [36] Koken JA, Bimbi DS, Parsons JT. Experiences of familial acceptance-rejection among transwomen of color. *J Fam Psychol*. 2009;23(6):853–60.
- [37] Ishii Y. Rebuilding relationships in a transgender family: the stories of parents of Japanese Transgender Children. *J GLBT Fam Stud*. 2018;14(3):213–37.
- [38] Schultz VS. *Confronting Reality in a Transgender Paradise*; 2019.
- [39] Guyer H. *Waria: The Lives of Indonesia's Transgender Women*; 2018.
- [40] Budge SL, et al. Transgender emotional and coping processes: facilitative and avoidant coping throughout gender transitioning. *Counsel Psychol*. 2012;41(4):601–47.
- [41] Bockting W, Benner A, Coleman E. Gay and bisexual identity development among female-to-male transsexuals in North America: emergence of a transgender sexuality. *Arch Sex Behav*. 2009;38(5):688–701.
- [42] Budge S, et al. Transgender emotional and coping processes facilitative and avoidant coping throughout gender transitioning. *Counsel Psychol*. 2013;41:601–47.
- [43] Lynn WE. *Neither Here Nor There: the Legal Dilemma of the Transsexual Community in Malaysia*; 2005.
- [44] Equality S. *Stonewall Global Workplace Briefings 2019: Indonesia*; 2019. England.
- [45] Aaron AJ. *Transgender individuals' social support experiences in central appalachia*. Educational, School, and Counseling Psychology. University of Kentucky; 2015.
- [46] Traynor BJ, Singleton AB. Nature versus nurture: death of a dogma, and the road ahead. *Neuron*. 2010;68(2):196–200.
- [47] Craddock N. Horses for courses: the need for pragmatism and realism as well as balance and caution. A commentary on Angel. *Soc Sci Med*. 2011;73(5):636–8. discussion 643-4.