

## ORIGINAL RESEARCH—TRANSGENDER AND GENDER NONCONFORMANCE

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### Social Support and Psychological Well-Being in Gender Dysphoria: A Comparison of Patients With Matched Controls

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#### ABSTRACT

**Introduction.** There is a paucity of research in the area of social support and psychological well-being among people with gender dysphoria.

**Aims.** The present study aimed to investigate levels of social support among individuals with gender dysphoria compared with a matched control group. It also aimed to examine the relationship between social support and psychological well-being.

**Methods.** Participants were 103 individuals diagnosed with gender dysphoria (according to ICD-10 criteria) attending a national gender identity clinic and an age- and gender-matched nonclinical control group recruited via social networking websites.

**Main Outcome Measures.** All participants completed measures of social support (Multidimensional Scale of Perceived Social Support, MSPSS), psychopathology (Symptom Checklist 90 Revised, SCL), quality of life (Short Form 36 version 2, SF), and life satisfaction (Personal Wellbeing Index, PWI).

**Results.** Trans women reported significantly lower MSPSS total and MSPSS family scores compared with control women, although these differences in levels of social support were no longer significant when SCL depression was controlled for. No significant differences were found between trans men and any other group. MSPSS scores did not significantly predict SCL subscales but did predict both SF subscales and PWI total scores.

**Conclusions.** Trans women perceived themselves to be lacking social support. Given that social support is beneficial to quality of life and life satisfaction in those with gender dysphoria, this is of great concern. Though these findings have been derived from correlational results, extended research may highlight the value of clinicians helping trans women to seek out and maintain social support. Additionally, efforts could be made to educate and challenge attitudes of nontrans people towards those with gender dysphoria. **Davey A, Bouman WP, Arcelus J, and Meyer C. Social support and psychological well-being in gender dysphoria: A comparison of patients with matched controls. J Sex Med 2014;11:2976–2985.**

**Key Words.** Gender Dysphoria; Transsexualism; Transgender; Social Support; Psychological Well-Being; Depression

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#### Introduction

Psychological well-being is a multifaceted construct that encompasses affective aspects of personal experience [1]. Individuals with gender dysphoria experience compromised psychological

well-being in terms of both psychological health and life satisfaction. Specifically, a considerable number experience mental health difficulties [2,3], with more than half reporting clinically depressive symptoms [4]. For instance, one clinical study reports that 80% of trans women and 55% of trans

men with gender dysphoria have a history of mental illness [3]. Similarly, prevalence rates of attempted suicide in this population, at 32%, are worryingly high [5]. This may be explained by the fact that those with gender dysphoria are frequently exposed to gender-based prejudice and discrimination [5–7], which has been associated with an increased risk of depression [4,8] and diminished life satisfaction [9]. Given these elevated risks, it is important to elucidate factors that might potentially increase psychological well-being in this group.

There are several factors known to affect psychological well-being in the general population, including levels of self-esteem, problem-solving coping strategies, and social support [7,8]. Social support is defined as the provision of resources from others that are perceived to be beneficial to the recipient [10]. Being socially connected and supported has been found to have a positive effect on self-esteem, mood, perceived control, and coping behaviors in the general population [8,11]. Conversely, a lack of social support is associated with an increased vulnerability to mental health problems, such as depression, suicidality, and eating psychopathology [8,10–13]. Recent research has highlighted some of the benefits of social support, specifically among individuals with gender dysphoria. For example, social support has been linked with lower levels of both depression and anxiety [8,14] and fewer suicidal behaviors [15]. In addition, social support has been positively associated with self-esteem [16] and quality of life [14] among individuals with gender dysphoria and is considered a predictor of psychological functioning following sex reassignment surgery (SRS) [17].

While social support may be beneficial in many ways [13], it is often limited among those with gender dysphoria. For example, compared with their siblings, specifically their sisters, individuals with gender dysphoria perceived less social support from their families [18]. In fact, outright rejection from families is not uncommon, particularly when individuals first disclose their gender identity [19]. In addition to a lack of familial support, support from friends may also be limited. For instance, Tully [20] describes a tendency among treatment-seeking individuals to avoid making new friends until SRS has been completed. Consequently, post-treatment, they may face a challenging new life with few existing support resources readily accessible. One plausible theoretical model explaining limited support networks

in this population is that the stigma surrounding a trans identity may impair an individual's ability to form and maintain relationships [21]. An alternative explanation is that reduced social support may be linked to the high levels of depression observed in this population [4,8], given that depression is typically associated with social withdrawal [22]. However, not all research suggests a lack of social support. For example, Erich et al. [16] reports that the majority (78%) of transgender individuals rate support from family members positively.

While the term “gender dysphoria” denotes a dissonance between a person's gender and phenotype, individuals' experiences of dysphoria can vary considerably, and as such, heterogeneous samples are often apparent in the literature. Additional inadequacies of previous studies include that they have primarily recruited self-identified, rather than clinically identified, transgender individuals and typically lack control groups. Trans women, as a group, tend to be researched independently [8,21], with far fewer attempts to study trans men. In studies where both trans women and trans men are invited to participate, gender differences are rarely distinguished. The only study to separate trans women and trans men reported similar levels of social support from family and friends across the two groups [18]. Therefore, it remains unclear as to whether levels of social support differ specifically between the general population and clinically diagnosed, treatment-seeking trans women and men.

### Aims

The global aim of this research was to examine a potential theoretical model whereby gender dysphoria is linked with low levels of perceived social support and where such a lack of support is linked with decreased psychological well-being. There were four objectives and associated hypotheses.

The first objective was to examine whether individuals with gender dysphoria perceive different levels of social support compared with an age- and gender-matched control sample. In this instance, the focus was on individuals' perceptions of, rather than actual, social support, though the two are often conflated in the literature. In keeping with the nonclinical findings of Factor and Rothblum [18], hypothesis 1 predicted that individuals with gender dysphoria feel significantly less socially supported compared with matched controls.

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