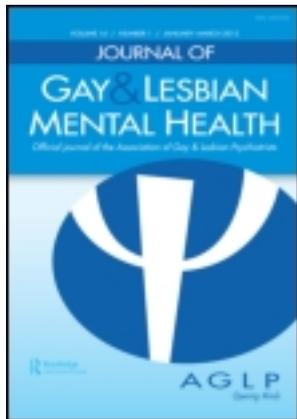


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Risk and Resilience During Transgender Identity Development: The Effects of Awareness and Engagement with Other Transgender People on Affect

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Risk and Resilience During Transgender Identity Development: The Effects of Awareness and Engagement with Other Transgender People on Affect

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Research examining risk and resilience among transgender individuals suggests that connection to a transgender community may be protective. Utilizing archival survey data of 3,087 adult transgender participants collected in 2005–06, this study further evaluated how awareness and engagement with other transgender people influences risk and resilience during early gender identity development. As hypothesized, among male-to-female and female-to-male respondents, both prior awareness and prior engagement with other transgender people were independently related to less fearfulness, less suicidality, and more comfort. These relationships were not significant among male-to-different-gender or female-to-different-gender participants. Implications of these findings are discussed.

KEYWORDS *transgender, anxiety, suicidal ideation, resilience, community support*

Attention to trans¹ individuals' experiences in the literature has increased over the past few years (Drescher & Byne, 2012; Grant et al., 2010; Spicer, Schwartz, & Barber, 2010). More people are becoming aware of this diverse population whose gender identity (internal sense of gender) is different from their sex assigned at birth, along with some of their unique challenges and resilience. Research on trans issues in psychology has primarily focused

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on mental health issues that disproportionately affect the trans community, including alarmingly high rates of suicidal ideation, suicide attempts, and substance abuse (Grossman & D'Augelli, 2007; Haas et al., 2011; Risser et al., 2005; Testa et al., 2012; Xavier, Bobbin, Singer, & Budd, 2005). These mental health disparities are interpreted as signs of distress resulting from the stressors faced by trans individuals living in social environments that often victimize and marginalize trans people (Clements-Nolle, Marx, & Katz, 2006; Goldblum et al., 2012; Kenagy & Bostwick, 2005; Testa et al., 2012). Much less research has examined determinants of resilience in this population. This article examines the potential importance of awareness of other trans people and engagement with other trans people on resilience during identity development. Specifically, we examine how these experiences relate to increasing positive affect and reducing negative affect during early trans identity development.

REVIEW OF LITERATURE

Risk Among Trans Individuals

The current literature consistently reveals alarmingly high rates of distress and mental health issues in trans populations (Haas et al., 2011). In particular, recent research has revealed that 38–83% of trans individuals report suicidal ideation (Grossman & D'Augelli, 2007; Testa et al., 2012; Xavier et al., 2005) and approximately one-third of participants indicate that they made one or more suicide attempts over their lifetime (Hass et al., 2011; Risser et al., 2005; Testa et al., 2012). Furthermore, trans individuals are at higher risk for alcohol and illicit substance abuse (Risser et al., 2005; Testa et al., 2012; Xavier et al., 2005).

Psychological risk in trans populations has been directly linked to stresses resulting from society's intolerant and even aggressive attitude toward trans individuals (Clements-Nolle et al., 2006; Goldblum et al., 2012; Kenagy & Bostwick, 2005; Testa et al., 2012). Kenagy and Bostwick found that half of trans respondents reported a history of forced sexual activity and 60% indicated that they had been physically abused during their lifetime. Respondents report that violence comes from multiple sources, including family members, strangers, and acquaintances (Testa et al., 2012), and discrimination occurs in multiple contexts, including employment and housing. In addition, there are significant barriers to accessing general medical and mental health services (Bradford, Xavier, Hendricks, Rives, & Honnold, 2007; Grant et al., 2010; Lombardi, Wilchins, Priessing, & Malouf, 2001). Finally, many trans people face rejection from family members and others (Clements-Nolle et al., 2006; Grant et al., 2010; Grossman & D'Augelli, 2006).

Resilience Among Trans Individuals

Despite much of the literature noting the high prevalence of victimization, discrimination, and psychological distress among trans people, there are many in the trans community who demonstrate clear resilience, that is, attaining happiness and satisfaction, successful careers, and meaningful relationships with family and friends (Beemyn & Rankin, 2011). Few studies to date have examined what factors promote resilience in this population. However, among the few studies, several suggest that alongside other factors, an individual's sense of connection to others in the trans community may be an important factor in promoting resilience.

For example, a recent qualitative study by Singh, Hays, and Watson (2011) examined the components of resilience among 21 trans participants. The study revealed five common themes reflecting resiliency in the sample: the ability to define their own identity, a strong sense of self-worth, being aware of oppression, connection with a supportive community, and being able to cultivate hope for their future. In a similar qualitative study of resilience among trans people of color who had experienced trauma, Singh and McKleroy (2011) found six overall common factors among participants leading to resilience in dealing with their traumatic events: having pride in their gender and ethnic/racial identity, recognizing/negotiating gender and racial/ethnic oppression, relationships with one's family, access to health care and financial resources, connecting with an activist trans community of color, and sense of spirituality and hope for the future. Further, Sánchez and Vilain (2009) examined whether collective self-esteem, a concept defined as positive identification with one's social group, was a buffer against experiences of discrimination among self-identified male-to-female transsexuals. Results indicated that the more positively the participants felt about the transsexual community and its support of them, the less psychological distress they reported experiencing. Thus, studies to date indicate in a variety of ways that connection with a trans community may be a determinant of resilience. Finally, a needs assessment survey conducted at two lesbian, gay, bisexual, and transgender (LGBT) youth centers by Davis, Saltzburg, and Locke in 2009 found that LGBT youth explicitly stated a desire for increased opportunities for interaction and support within the LGBT community, both from their LGBT identified peers and older LGBT identified adult role models. This factor was seen as beneficial and necessary for psychological and emotional well-being by the participants.

Study Aims

This study aims to increase understanding of how trans individuals' risk and resilience may be related to their connection to other trans people. Using archival data, these analyses will test the following hypotheses: (1) Prior awareness that other trans people exist will be independently related to

experiencing less fearfulness, less suicidality, and more comfort during early trans identity development. (2) Prior engagement with other trans people will be independently related to experiencing less fearfulness, less suicidality, and more comfort during early trans identity development.

METHODS

Procedure

The survey analyzed in this study was administered as part of a larger mixed methods design research study aimed at understanding the experiences of American trans people, detailed in *The Lives of Transgender People* (Beemyn & Rankin, 2011). The survey portion, implemented from 2005 to 2006, recruited a large and diverse sample of trans individuals in all 50 states. Participants were invited to complete the anonymous online survey through various sources, including trans-related listservs, online support groups, people who had personal profiles on trans websites, and public figures in the trans community. Participants were eligible for the study if they were at least 18 years of age and currently identified as trans or gender nonconforming in some way or had identified in such a way in the past. Participants provided consent for the survey after being informed of procedure, potential risks and benefits, confidentiality, and rights as a research participant. They were also given information on support resources and researchers' contact information should questions or concerns arise. Participants then completed the 41 item survey online, taking approximately 20 minutes. No remuneration was provided. Detailed information regarding trans respondents' experiences of identity development that is outside the scope of this paper can be found in the book, *The Lives of Transgender People* (Beemyn & Rankin, 2011).

Measures

DEMOGRAPHICS

Demographic questions were included in the initial portion of the questionnaire to assess various characteristics of participants including age, sex assigned at birth, current gender identity, current gender expression, race/ethnicity, and sexual orientation.

AFFECT WHEN FIRST IDENTIFYING AS TRANS

Participants were asked, "How did you react when you first thought that you might be transgender?" They were then asked to mark all of the following that applied: "fearful," "marginalized," "angry," "suicidal," "comfortable," "curious," and "other" (which they could specify). For the purposes of this study, affect analysis was limited to "fearful," "suicidal," and "comfortable" as outcome

variables. These descriptors were chosen because they relate respectively to the most prevalent mental health concerns of anxiety (fearful) and depression (suicidal), as well as to resilience (comfort).

AWARENESS OF THE EXISTENCE OF TRANS PEOPLE BEFORE IDENTIFYING AS TRANS

Participants were asked both at what age they “began to feel they might be transgender” and at what age they “first understood that there were a group of people whose gender identity or expression did not coincide with their birth sex.” Response options for both questions were “12 and under,” “13–19,” “20–29,” “30–39,” and “40 and over.” Participants were coded as having had awareness of the existence of trans people before identifying as trans if the age span in which they first were aware that a group of trans people existed was prior to the age span in which they first felt trans themselves. All others were coded as *not* having had awareness of the existence of trans people before identifying as trans.

MEETING ANOTHER TRANS PERSON BEFORE IDENTIFYING AS TRANS

Similar to the above, participants were also asked at what age they “first met another transgender person,” with response options “12 and under,” “13–19,” “20–29,” “30–39,” and “40 and over.” Participants were coded as having met another trans person before identifying as trans if the age span in which they first met another trans person was prior to the age span in which they first felt trans themselves. Others were coded as *not* having met another trans person before identifying as trans.

Participants

A total of 3,087 participants completed the survey measures described above. Demographic information is presented in Table 1 for four gender groups. Individuals assigned female at birth who described in any response format a gender identity of male or man were categorized as female-to-male (FTM). Individuals assigned male at birth who described in any response format a gender identity of female or woman were categorized as male-to-female (MTF). A small portion of respondents felt that their current gender identity was different from both male/man and female/woman categories. For these respondents, if sex assigned at birth was female they were categorized as female-to-different-gender (FTDG), and if sex assigned at birth was male they were categorized as male-to-different-gender (MTDG). Breakdown of the language used by participants and rationale for dividing participants into these four gender groups is described in *The Lives of Transgender People* (Beemyn & Rankin, 2011).

TABLE 1 Demographics and Experiences Respondents by Gender Group

	MTF (<i>n</i> = 2178) %	FTM (<i>n</i> = 653) %	MTDG (<i>n</i> = 152) %	FTDG (<i>n</i> = 104) %
Age at time of survey				
18–22	16.1	37.5	18.4	71.2
23–32	19.6	24.2	19.1	17.3
33–42	31.5	15.0	31.6	10.6
43–52	27.0	2.8	25.0	1.0
53+	5.8	0.5	5.9	0
Race				
White	88.1	82.8	88.8	80.8
People of color	11.2	15.6	10.5	18.3
Age at first feeling transgender				
Child	5.3	21.4	5.9	32.7
Adolescent	88.9	78.1	88.2	67.3
Adult	5.8	0.5	5.9	0
Affect at first feeling transgender				
Fearful	52.2	56.0	43.4	56.7
Suicidal	16.8	17.5	7.9	20.2
Comfortable	25.9	31.5	20.5	29.8
Awareness of other transgender people prior to first feeling transgender	17.5	29.4	28.9	32.7
Engagement with other transgender people prior to first feeling transgender	8.2	14.5	14.5	19.2

Data Analysis

Chi-squared analyses were used to analyze the association between each of the two independent variables—(1) awareness of the existence of trans people before identifying as trans and (2) engagement with other trans people before identifying as trans—and the presence of the three different affects of fearful, suicidal, and comfortable at time of first identifying as trans. These analyses were completed separately for each of the four gender groups described above.

RESULTS

Awareness of Other Trans People and Affect When First Feeling Trans

At the time of first feeling trans, both MTF and FTM respondents who had prior awareness of other trans people were significantly less likely to report feeling fearful as compared MTF and FTM individuals who did not have

TABLE 2 Prior Awareness of Other Transgender People and Fearfulness

Gender	<i>n</i>	χ^2	<i>df</i>	<i>P</i>	Cramer's V	No Awareness & % Fearful	Awareness & % Fearful
MTF	1158	4.47	1	.020	.062	55.3	48.7
FTM	297	4.51	1	.023	.123	60.4	47.6
MTDG	85	.078	1	.476		43.9	40.9
FTDG	50	1.68	1	.162		25.0	44.1

Note. *n* = sample size, χ^2 = Chi-Square, *df* = degrees of freedom, significant *p*-values are less than .05 and marked in bold, Cramer's V = strength of the relationship indicated by the mean canonical correlation between the variables, No Awareness & % Fearful = percent of individuals who did not have prior awareness of other transgender people who indicated fearfulness at the time they first felt transgender, Awareness & % Fearful = percent of individuals who did have prior awareness of other transgender people who indicated fearfulness at the time they first felt transgender.

this prior understanding ($\chi^2 = 4.47$, $p = .020$ and $\chi^2 = 4.51$, $p = .023$, respectively; see Table 2). For MTF participants, 48.7% of those who had this prior awareness of others felt fearful compared with 55.3% of those who had not had this prior awareness. For FTM respondents, 47.6% of those with prior awareness of others reported feeling fearful, as compared to 60.4% of those with no prior awareness. The relationship between prior awareness of others and fearfulness was not significant for MTDG and FTDG participants.

Similarly, among both MTF and FTM respondents, those who were aware of other trans people prior to first feeling trans were significantly less likely to report feeling suicidal when first identifying as trans compared with MTF and FTM individuals who did not have this prior awareness ($\chi^2 = 9.76$, $p = .001$ and $\chi^2 = 10.67$, $p = .001$, respectively; see Table 3). For MTF participants, 11.3% of those who had this prior awareness of others felt suicidal compared with 18.4% of those who did not have this prior awareness. For FTM respondents, 10.4% of those with prior awareness of others reported feeling suicidal compared with 24.8% of those with no prior awareness. The

TABLE 3 Prior Awareness of Other Transgender People and Suicidality

Gender	<i>n</i>	χ^2	<i>df</i>	<i>P</i>	Cramer's V	No Awareness & % Suicidal	Awareness & % Suicidal
MTF	1158	9.76	1	.001	.092	18.4	11.3
FTM	297	10.67	1	.001	.190	24.8	10.4
MTDG	**						
FTDG	**						

Note. *n* = sample size, χ^2 = Chi-Square, *df* = degrees of freedom, significant *p*-values are less than .05 and marked in bold, Cramer's V = strength of the relationship indicated by the mean canonical correlation between the variables, No Awareness & % Suicidal = percent of individuals who did not have prior awareness of other transgender people who indicated suicidality at the time they first felt transgender, Exposure & % Fearful = percent of individuals who did have prior awareness of other transgender people who indicated suicidality at the time they first felt transgender.

**Insufficient expected cell count for logistic regression analysis.

relationship between prior awareness of others and suicidality could not be evaluated for MTDG and FTDG participants due to insufficient sample size.

Finally, MTF and FTM respondents who had prior awareness of other trans people were significantly more likely to report feeling comfortable when first identifying as trans compared with MTF and FTM individuals who did not have this prior awareness ($\chi^2 = 6.15, p = .008$ and $\chi^2 = 9.83, p = .001$, respectively; see Table 4). For MTF participants, 30.4% of those who had this prior awareness of others felt comfortable compared with 23.6% of those who did not have this prior awareness. For FTM respondents, 35.4% of those with prior awareness of others reported feeling comfortable compared with 18.1% of those with no prior awareness. The relationship between prior awareness of others and comfort was not significant for MTDG and FTDG participants.

Engagement with Other Trans People and Affect When First Feeling Trans

At the time of first feeling trans, MTF respondents who had previously met another trans person were significantly less likely to report feeling fearful as compared to MTF individuals who had not yet met another trans person ($\chi^2 = 4.69, p = .019$; see Table 5). For MTF participants, 48.0% of those who had previously met others felt fearful compared with 56.6% of those who had not met others. The relationship between having met other trans people prior and fearfulness was not significant for FTM, MTDG, or FTDG participants.

At the time of first feeling trans, both MTF and FTM respondents who had previously met another trans person were also significantly less likely to report feeling suicidal compared with MTF and FTM individuals who had not yet met another trans person ($\chi^2 = 6.91, p = .004$, and $\chi^2 = 4.09, p = .029$, respectively; see Table 6). For MTF participants, 10.6% of those who

TABLE 4 Prior Awareness of Other Transgender People and Comfort

Gender	<i>n</i>	χ^2	<i>df</i>	<i>P</i>	Cramer's V	No Exposure & % Comfort	Exposure & % Comfort
MTF	1158	6.151	1	.008	.073	23.6	30.4
FTM	297	9.833	1	.001	.182	18.1	35.4
MTDG	85	1.835	1	.136		17.1	29.5
FTDG	50	.018	1	.572		31.3	29.4

Note. *n* = sample size, χ^2 = Chi-Square, *df* = degrees of freedom, significant *p*-values are less than .05 and marked in bold, Cramer's V = strength of the relationship indicated by the mean canonical correlation between the variables, No Awareness & % Comfort = percent of individuals who did not have prior awareness of other transgender people who indicated comfort at the time they first felt transgender, Awareness & % Comfort = percent of individuals who did have prior awareness of other transgender people who indicated comfort at the time they first felt transgender.

TABLE 5 Prior Engagement with Other Transgender People and Fearfulness

Gender	<i>n</i>	χ^2	<i>df</i>	<i>p</i>	Cramer's V	No Exposure & % Fearful	Exposure & % Fearful
MTF	1502	4.690	1	.019	.056	56.6	48.0
FTM	277	.006	1	.520		51.1	51.6
MTDG	99	.003	1	.574		49.4	50.0
FTDG	43	.467	1	.355		34.8	45.0

Note. *n* = sample size, χ^2 = Chi-Square, *df* = degrees of freedom, significant *p*-values are less than .05 and marked in bold, Cramer's V = strength of the relationship indicated by the mean canonical correlation between the variables, No Exposure & % Fearful = percent of individuals who did not have prior engagement with other transgender people who indicated fearfulness at the time they first felt transgender, Exposure & % Fearful = percent of individuals who did have prior engagement with other transgender people who indicated fearfulness at the time they first felt transgender.

had met others prior felt suicidal compared with 18.6% of those who had not met others. For FTM participants, 14.7% of those who had met others prior felt suicidal compared with 25.3% of those who had not met others. The relationship between having met other trans people and suicidality was not evaluated for MTDG or FTDG individuals due to insufficient sample size.

Finally, at the time of first feeling trans, both MTF and FTM respondents who had previously met another trans person were significantly more likely to report feeling comfortable compared with MTF and FTM individuals who had not yet met another trans person ($\chi^2 = 7.382$, $p = .005$, and $\chi^2 = 3.75$, $p = .037$, respectively; see Table 7). For MTF participants, 31.3% of those who had met others prior felt comfortable compared with 22.1% of those who had not met others. For FTM participants, 35.8% of those who had met others prior felt comfortable compared with 24.7% of those who had not met others. The relationship between having previously met other trans people and comfortableness was not significant for MTDG or FTDG participants.

TABLE 6 Prior Engagement with Other Transgender People and Suicidality

Gender	<i>n</i>	χ^2	<i>df</i>	<i>p</i>	Cramer's V	No Exposure & % Suicidal	Exposure & % Suicidal
MTF	1502	6.909	1	.004	.068	18.6	10.6
FTM	277	4.085	1	.029	.121	25.3	14.7
MTDG	**						
FTDG	**						

Note. *n* = sample size, χ^2 = Chi-Square, *df* = degrees of freedom, significant *p*-values are less than .05 and marked in bold, Cramer's V = strength of the relationship indicated by the mean canonical correlation between the variables, No Exposure & % Suicidal = percent of individuals who did not have prior engagement with other transgender people who indicated suicidality at the time they first felt transgender, Exposure & % Fearful = percent of individuals who did have prior engagement with other transgender people who indicated suicidality at the time they first felt transgender.

**Insufficient expected cell size count for logistic regression analysis.

TABLE 7 Prior Engagement with Other Transgender People and Comfort

Gender	<i>n</i>	χ^2	<i>df</i>	<i>p</i>	Cramer's V	No Exposure & % Comfort	Exposure & % Comfort
MTF	1502	7.382	1	.005	.070	22.1	31.3
FTM	277	3.748	1	.037	.116	24.7	35.8
MTDG	99	.141	1	.452		23.4	27.3
FTDG	43	.102	1	.502		30.4	35.0

Note. *n* = sample size, χ^2 = Chi-Square, *df* = degrees of freedom, significant *p*-values are less than .05 and marked in bold, Cramer's V = strength of the relationship indicated by the mean canonical correlation between the variables, No Exposure & % Comfort = percent of individuals who did not have prior engagement with other transgender people who indicated comfort at the time they first felt transgender, Exposure & % Comfort = percent of individuals who did have prior engagement with other transgender people who indicated comfort at the time they first felt transgender.

DISCUSSION

The study's results indicate that for both MTF and FTM trans individuals, having prior awareness that other trans people exist and having prior engagement with other trans people are both important for psychological well-being during early stages of identity development. Specifically, having such awareness and experiences decreased anxiety and suicidality and increased comfort at the time individuals first felt they were trans. The importance of implementing changes based on this knowledge to support resilience in this population is highlighted by the high rates of distress reported by participants during this early point in identity development. After discussing the study's findings in more detail, recommendations for improving trans psychological well-being based on research findings will be provided.

While prior studies have demonstrated a history of high levels of distress among trans individuals (Clements-Nolle et al., 2006; Grossman & D'Augelli, 2007; Haas et al., 2011; Risser et al., 2005; Testa et al., 2012; Xavier et al., 2005), the timeline of distress and types of distress have rarely been investigated. The results of this study indicate that some distress in this population is related to the experience of first identifying that one is trans. While this point occurred at various ages, it most often occurred during adolescence for all groups of trans people. This underscores a need for services for trans youth.

In terms of types of distress experienced, prior research has mainly assessed suicidal ideation and attempts in this population. This has been in part because of alarmingly high rates reported of up to 41% attempting suicide (Grant et al., 2010). Sixteen percent of this sample reported that they did feel suicidal when they first felt they might be trans, indicating that early identity development may contribute in some part to suicide attempts in this population, but that other factors, such as gender-based violence and discrimination, may account for the much higher rates of suicidal ideation

and attempt reported by trans samples over the lifespan (Clements-Nolle et al., 2006; Testa et al., 2012). It will be important in the future to examine if distress is more or less associated with other identity development points, such as “coming out” to others or initiation of medical interventions for those who choose to pursue them.

Much more prevalent than suicidal ideation, was reported anxiety at the point of early identity development. Approximately half of all gender groups reported feeling “fearful” at the time they first identified as trans. This finding opens a new and important direction for future research on anxiety in trans youth. At this point it is unknown what these fears focused on (i.e., potential reactions of friends and family, potential for future victimization, or other concerns) and the intensity and duration of these feelings. For instance, future investigations should assess whether trans individuals are typically experiencing mild levels of anxiety that subside as they adjust to life changes, or whether they may be at risk for Social Anxiety Disorder or Adjustment Disorders, around this time of early transition.

As hypothesized, for MTF and FTM respondents both having prior awareness of other trans people and having previously met another trans person had a positive influence on affect experienced during early identity development. Among MTF respondents, having such experiences was independently related to significantly less fearfulness, less suicidality, and more comfort. Among FTM respondents, these experiences were independently related to significantly less suicidality and more comfort. Further, these effects were clinically highly significant, with rates of suicidality among those with such awareness of or engagement with other trans people being only half of the rates of those who had not been exposed to such resources. These findings therefore support the idea that having connection with other trans people fosters resilience.

However, it must be noted that these associations between awareness of and engagement with other trans people and reported affect were not statistically significant among MTDG and FTDG samples. The reasons for these differences are unknown. In part, the much lower sample sizes in these gender groups may explain insignificant findings. For example, FTDG respondents with prior awareness of other trans people reported fearfulness 18.1% less frequently than FTDG respondents without prior awareness. While this percentage difference was larger than that reported for MTF and FTM samples, the association was statistically significant only for MTF and FTM groups. Further, sample size was too low to perform statistical analyses on the factors associated with suicidality. However, in other analysis it seemed less clear that sample size was the primary reason for insignificant findings among MTDG and FTDG groups. In these cases insignificant findings for the MTDG and FTDG groups may also reflect that social and informational resources related to trans people largely speak to MTF and FTM models of identity. Therefore, MTDG and FTDG individuals may not see themselves

represented in these resources and therefore do not get support in their identity development and sense of belongingness from such resources, as they currently exist.

Having established that awareness and engagement with other trans people prior to identifying as trans is associated with less distress and more comfort for MTF and FTM individuals, it is unfortunate to find that many trans people in this survey did not have these experiences. Specifically, among FTM respondents, less than one-third reported awareness of the existence of other trans people prior to first identifying as trans, and fewer (14.5%) reported having met another trans person before feeling they might be trans. Even fewer MTF respondents reported awareness of the existence of other trans people prior to first identifying as trans (17.5%) or having met another trans person before feeling they might be trans (8.2%). Thus, these findings highlight important and easy targets for future intervention.

The nature of the relationship between awareness and exposure to other trans people and affect remains unknown, and should be explored in future research. For example, awareness of others may influence emotions by increasing one's sense of belongingness and/or facilitating understanding of one's own identity and experiences. Engagement with other trans people may act similarly and may also provide access to group-level coping mechanisms and self-esteem (Meyer, 2003).

Limitations

There are several limitations of this study. First, it is unclear how generalizable this sample of respondents is, considering the demographic information and sampling strategy. For example, the majority of respondents were White. Findings in and outside of this study suggest that some aspects of identity development, social support, and stress may be different for trans people of different racial/ethnic groups. Additionally, survey respondents represent a young demographic, especially among FTM and FTGD samples. Second, there is no SES data for this sample, making it impossible to determine how representative this sample is and whether there are differences between socio-economic groups. Since it is arguably impossible to gather a representative sample of a population of individuals who often may not feel safe revealing their identity, sampling trans people is inherently difficult. The respondents to this survey likely overrepresent a particular portion of the population who are involved in trans-related services or online support groups as opposed to individuals who may not be engaged in such networks at all. Despite these limitations, the high number of respondents, with a variety of identities, and from a range of geographic regions, represents one of the most comprehensive samples of trans people ever gathered.

In addition, it must be noted that use of archival data limited measurement of affect and of the timeline of individual's awareness or engagement

with other trans people relative to their identity development. Affective experience was measured by a simple checklist of six emotions and a write-in box for “other,” which was constructed by the survey authors and has therefore not been validated. Further, this measure asked respondents to recall their emotions from a time that could have been decades earlier for some respondents. Validity of such retrospective recall for emotions has not been demonstrated. Further, presence of different affects should not be conflated with psychopathology and may be only loosely related to other measures of resilience. With regards to assessing the timeline of whether an individual had been aware of or engaged with other trans people before identifying as trans themselves, categorization of participants was imperfect because age span categories, instead of exact age, were the response options for evaluating time-points of first feeling trans, first having awareness of other trans people, and first engaging with other trans people. Thus, those who responded that they experienced these time-points during the same age span category could not be accurately classified. The methods of categorizing participants for this study ensured that only those who truly had awareness of or exposure to others prior to identifying as trans were categorized as such. However, the portion of the sample categorized as not having had such prior experiences may have contained some individuals who in fact had. In terms of study results, such inaccuracy in categorization would have increase the chance of null findings.

Finally, study findings were based on retrospective self-report data and cannot therefore be interpreted as demonstrating causality. It remains possible that third variables explain the found relationships. For example, it is reasonable to imagine that trans individuals who grew up in environments that had more acceptance of gender non-conformity would have yielded more exposure to trans concepts and people as well as less victimization and discrimination, which might also explain more positive and less negative affect.

Implications

As detailed above, findings indicate that both having awareness of other trans people and having engagement with other trans people prior to identifying oneself as trans is beneficial for psychological well-being. Our research also indicates that this awareness and engagement with other trans people would need to occur at an early age, usually during childhood, to follow such a timeline. These findings have clear implications for mental health professionals, educators, and others who interact with youth.

Low-cost, easily implemented interventions can be developed to educate children and early adolescents that gender identity is separate from assigned birth sex, and that these two things are not always aligned as typically portrayed. Schools and families can be encouraged to present this information

to children broadly, as the protective effect seen here is for those who would be exposed to these resources before identifying and signaling that they are themselves trans. This is becoming easier to do as movies, books, and media are beginning to represent more trans people, opening up room for dialogue with youth and others on these issues. Along these lines, we believe it will be useful to advocate for continuing and increased representation of trans role models in media programming for youth. It is also necessary to incorporate representative information on gender and sex into how we structure our social environments because this also conveys information about what sex and gender are. For instance, providing gender neutral bathrooms and dressing room options, changing biology textbooks to not conflate gender and sex and portray them as binary constructs, providing athletics options that are not divided by a gender binary, and changing identification documents to be more inclusive, will all be helpful in increasing awareness among youth that trans people exist. In pursuing each of these suggested interventions, it is important to acknowledge that resistance or hesitancy to such changes will exist in certain communities. Mental health professionals can be advocates and consultants in developing and implementing educational interventions and environmental changes, in line with each community's values and needs.

In addition, it is clearly valuable for individuals to meet other trans people at an early age, before they identify as trans themselves. Changes in social climate, including those influenced by policy, may be most helpful on this front. For example, as trans people are ensured non-discrimination in school, at work, and at home and safety from violence across settings, more trans individuals will feel safe enough to come out. As a result, some trans people will become more visible community members, increasing the likelihood that youth will be able to say they have met another trans person. Mental health providers can serve as important advocates for these social changes by being involved in policy and public education on trans-related issues.

CONCLUSION

While trans people are subjected to a variety of stressors that increase rates of distress, there are steps that can help these same individuals express their resilience. In particular, merely understanding that a group of people exist whose gender is different from their assigned birth sex, and simply meeting another trans person, are protective factors for MTF and FTM individuals when these experiences occur *before* they identify as trans. By providing psycho-education on the nature of gender and sex and by facilitating social environments that allow trans people to live openly, mental health professionals, educators, and others who interact with youth can have a direct impact on the psychological well-being of trans people.

NOTE

1. In this article, we use “trans” to refer to the range of persons who identify or present as transsexual, transgender, or gender nonconforming. This term was proposed by Lev (2004) and has met with broader acceptance than many other terms that have been previously proposed or used.

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