

A RESEARCH ON FAMILY CHARACTERISTICS INFLUENCING THE DEVELOPMENT OF TRANSSEXUALITY IN IRAN

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Abstract - *The objective of this research is to survey the factors influencing transsexuality, particularly those pertaining to the parents of transsexuals. In this research, all the clients referring to the Forensic Medicine Center in Tehran during 1991-1993 were studied. They had requested to get permission for operation of their genitalia.*

The subjects were asked questions concerning their families' characteristics, particularly their attitudes towards their parents. The transsexuals taking part in this study comprised 36 males and 8 females. The control group members were identical to the subjects regarding number, sex, age and education.

The findings present a considerable difference between the two male groups' description of their families. The male transsexuals described their parents as passive and rejecting while the descriptions of males in the control group were not the same. In this respect there was no significant difference between females in the two groups. However the small number of females would not permit the researchers to have a clear insight.

Acta Medica Iranica 38 (4): 219-223; 2000

Key Words: *Transsexuality, family characteristics*

INTRODUCTION

Transsexuality is a psychiatric disorder in which a person is inclined to take on the role of the other sex. They are generally dissatisfied with their sexuality and are preoccupied with changing it. The traits are a continuous pretension of being the opposite sex with a strong and persistent desire to be viewed so. However, no sign of inter-sex disorder is observed (1). Basically, they ask for hormonal treatments, operation and other physical ways of changing their sexuality. As a consequence, transsexuals are commonly rejected by their families and the people around. Ultimately, the main concern is about their social and occupational performance.

Upon 'DSM' standards there is no base to estimate statistically the prevalence of the disorder between adults (1,2). There have been attempts to date to study factors conducive to the problem. Amongst these are

factors pertaining to their families and the role of parents in particular on the formation of the disease (3). Stoller (4) explained the influence of family structure on a transsexual boy; his mother felt dissatisfied with her sexuality and was inclined to take on the opposite sex role. Her spouse was a passive person with a weak personality. Their marriage resulted in a destructive situation in which a transsexual boy was growing. His mother used him to subside her feeling of worthlessness. With him she felt perfect as a man and tried to unite with him both physically and emotionally. The son equally saw himself as a female and looked for unity with the mother.

Stoller differentiated between transsexuality in men and women. He stated that during first months or years after childbirth the mothers of female transsexuals are unable to perform their maternal role as a result of physical or psychological disorder. In this situation the girl identifying with the father tries to redress the situation causative to her mother's absence that is, her emotional disturbance, hence her manly characteristics take form.

On psycho-sexual development of transsexuals some studies have been directed so far (5). The first study on the influence of parents on the formation and development of transsexuality has been conducted by W. F. Tsoi(6). There has been psychosocial theories which reveal a positive correlation between parental support of Sex-Opposite behaviour in a child and the continuation of it. These theories emphasize parental reinforcement of sexual behaviour in a baby (during early childhood), but it is difficult to differentiate the cause and effect. Other studies concentrated on social factors (7) influencing the formation of the disease, such as religion and culture (8-11). The aim of the present research which is the first study conducted in Iran is to survey parental influences on the problem. Stoller's theories have been used in this research. It is expected that if the factors causing transsexuality are recognised, there would be progress on the prevention and treatment of this disorder. It would be also possible to find appropriate ways of behavior towards the afflicted people.

MATERIALS AND METHODS

Forty-four persons including 36 men and 8 women being referred to Noorafshar and Dr. Shariati hospitals were studied. All the clients had been referred by the Forensic Medicine Centre in Tehran to the psychiatrists in order to assess their psychological disturbance. They were interviewed then to answer some questions about their parents' characteristics. They were also examined for their mental state. The survey lasted two years from 1991-1993.

Transsexuals taking part in the survey were those who had applied for their genitals' operation. In Iran, applicants need permission from the authorities for transformation. In fact they were all applying for the operation and had not received the permission. During the study no one showed signs of having experienced any major mental disorder such as schizophrenia.

According to DSM-III-R they were all transsexuals (12). The control group comprised 36 men and 8 women; their selection criteria were: (1) Persian, (2) willingness to participate in the study, (3) finished at least primary schooling (4) age below 44, and (5) not suffering from any psychiatric illness. The subjects and controls were matched for age, sex and education.

The questionnaire contained questions about their personal and familial information. Amongst the other subjects were questions about the number of their brothers and sisters, their birth order, the age of parents at their birth and the parents' education. They were also asked as to which of the parents took the

dominant role within the family and at what age, if at all, they suffered from parents' death or divorce.

Four titles were selected to describe the parents' characteristics: a) rejecting, b) kind, c) over-protector and d) passive (13). Except in the case of parents' education in all other issues transsexual females and males were compared with females and males in the control group respectively. Information was analysed by "EPI-Info" version 5 software.

RESULTS

As mentioned earlier, both the subjects and control group members were requested to describe their parents. The difference between descriptions of females in the two groups was not significant. In this regard men in the control group described their mothers as kind(77%), over-protector(15%) and passive(8%). On the contrary, only 33% of male transsexuals described their mothers as kind. 7%, 40% and 20% of the mothers were called over-protector, passive and rejecting respectively. The diversity range was significant at the rate of $P < 0.007$. The results are shown in Fig. 1 and 2 and Table 1.

Concerning fathers, 61% of the males in the control group described them as kind, 14% rejecting, 14% passive and 11% over-protector. Male transsexuals called their fathers rejecting 38%, passive 38% and kind 24%. The difference was significant; $P < 0.03$.

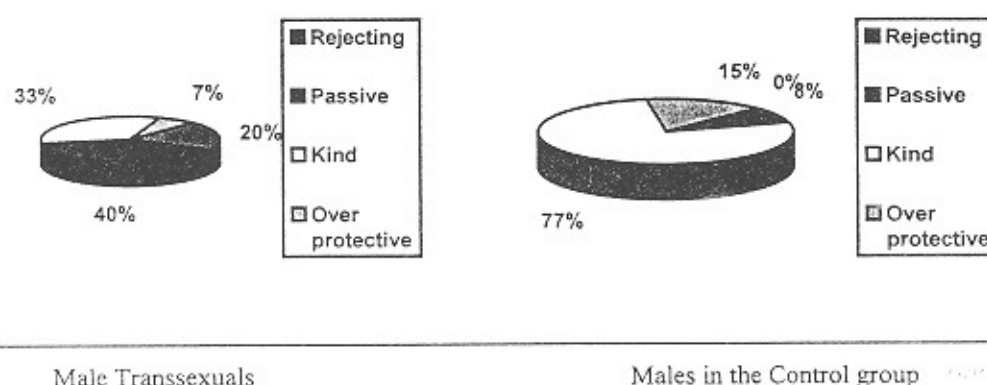


Fig. 1. The descriptions of the subjects and the control group of their mothers (males)

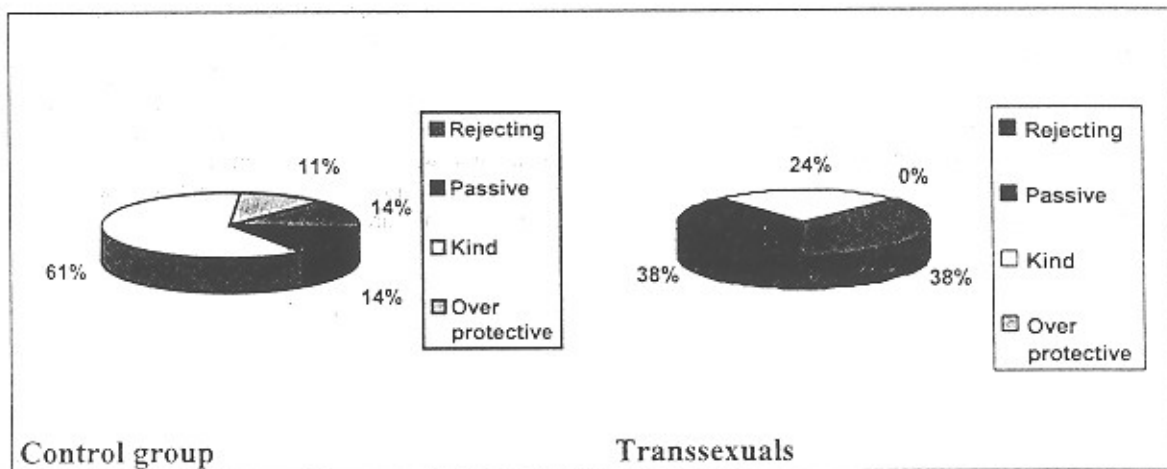


Fig. 2. The descriptions of fathers by the males in the two groups ($P < 0.03$). In respect to their personal and familial information there was no statistically significant difference between the two groups.

Table 1. Personal and familial information of the females and males in the two groups.

Variables	Personal characteristics				Family characteristics							
	Sex	%	age	ed.	marriage	Parents			Sisters/Brothers			
					Mth age*	Fth age*	divorce	Mth death	Fth death	sister No*	brother No*	birth order
MTrs	8 2	16-44	Primary to College	3%	29.8	36.9	8%	6%	33%	2.8	2	4.5
										SD:1.7	SD:1.3	SD:2.7
Mc	8 2	16.44	Primary	62%	26.7	35.2	0%	6%	25%	2.4	2.7	3.6
										SD:1.5	SD:1.6	SD:1.7
FTrs	1 8	22-40	Primary	0%	27	33	0%	0%	38%	2.4	1.5	3
										SD:0.7	SD:0.7	SD:1.4
Fc	1 8	22-40	Primary	25%	25.4	31.6	0%	12%	25%	3	1.8	3
										SD:1.8	SD:1.2	SD:1.7

Average

MC: Male control, MTrs: Male Transsexual, FC: Female control, FTrs: Female Transsexual, ed:Education.

DISCUSSION

The findings of this research did not present statistically significant difference between descriptions of females in two groups regarding their parents. However, the frequency of passiveness recorded by female transsexuals was high compared to the females in the control group. This statement confirms the previous research by Stoller which indicated that female transsexuals had weak and unstable mothers. According to Stoller, these mothers were unable to conduct

efficiently during the first months or years after childbirth because of some physical or psychological problems. Generally mothers of female transsexuals lacked a strong emotional and sentimental relationship with their daughters.

Regarding fathers there was no significant difference between the description of female transsexuals and females in the control group. However, the description of fathers as passive was more frequent in female transsexuals (50%) than that of the others(34%).

This part of the study is in conformity with Sorensen's findings (14,15). Sorensen in a follow up study of 8 female transsexuals and 29 male transsexuals

found that the female transsexuals had a problematic relationship with both parents.

Also in a research by W.F. Tsai (6) on 36 female transsexuals and 62 male transsexuals assessed parental involvement between transsexuals and control groups. For this purpose, he used a questionnaire which included the following questions: "Which one of your parents has done the following for you? feed you - bathe you - sleep with you - carry you - take you out alone - confide in you."

He found that mothers were less involved with the female transsexuals compared to the mothers of the female control groups. However, the small numbers of females taking part in the study hindered the researchers to get accurate information.

On the other hand, the description of mothers between males in the two groups was significantly different. Male subjects had mostly rejecting and passive mothers whereas the males in the other group had kind and over-protector mothers. This result does not agree with the other theories, i.e. Stoller's which explains a rather emotional and exaggerated sentimental relationship between male transsexuals and their mothers. Sorensen also found that the male transsexuals had a more significant emotional relationship with their mothers. W.F. Tsai's research (6) in maternal involvement showed that there did not exist a significant difference between the male transsexuals and the male control groups.

The disagreement might have stemmed from the fact that male transsexuals were rejected by mothers after deciding to transform and we couldn't fully differentiate whether they had talked about their relationship with their mothers before the announcement of their transformity or after it.

Besides, since in our culture, there exists a strong family bond between mothers and sons, the difference between male transsexuals and male control groups was insignificant.

The views of males in the two groups on their fathers were also divergent. ($P < 0.03$) Transsexuals fathers were commented as passive (38%) and rejecting (38%) while the control group called their fathers rarely passive (14%) and rejecting (14%). This finding confirms the notion of Stoller which states that fathers of male transsexuals are generally passive and indifferent to their sons' life. W.F. Tsai (6) found that fathers were less involved with the male transsexuals in comparison to the fathers of the male controls. About the dominance role within the family, the two groups were not significantly different, whereas Stoller found that mothers took a dominant role within the male transsexuals' families. In this regard, there is no information available about female transsexuals' families.

During a study on 42 transsexuals conducted in

Hong Kong, Ma-Joyce-L-C (16) observed that at least 40% of transsexuals suffered from weak and unstable relationships with their families (17). In this research also the negative and indifferent answers to the questions by the subjects are examples of such unpleasant relationships between them and their families. The researchers all stressed on the warm and friendly relationships between family members and transsexuals.

It must be added that however crucial the relationships between parents and their transsexual children might be, it could not be assumed as the single cause of the problem. The reason is that families despite having several children had only one transsexual member. For instance, only one of a monozygot brothers in our research was transsexual while his twin brother was sexually normal. However, it would not be obviously possible to deal with the problem without taking account of families and their contribution to the process of the treatment.

On the other hand, there are negative social attitudes towards transsexuals held by their families and the society assuming them as wrongdoers and deviated people rather than patients. A common result of such attitudes would be rejection them from society and their families, which worsens the situation. Thus it is highly advised that more research be conducted in this field, in order to further inform professionals of transsexuals' problems. The aftermath, will be a better understanding of the transsexuals which in turn will result in them being better treated by the society and their family.

Lastly, centres in which people and the youth in particular are provided with the knowledge about their sexual traits and their relationships, considerably prevent sexual deviations and inappropriate sexual behaviours. Furthermore, there should be clinics available to the public to inform and treat the clients. In such centres people could be given insight into how to deal with the problem appropriately. In some cases long lasting treatments and psychological consultation would be necessary. The enterprise requires collaboration of all experts involved, such as urologists, plastic surgeons, psychiatrists, psychologists, social workers and legal consultants.

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