

Social anxiety and internalized shame among transgender individuals

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Abstract

This research is on Internalized Shame and Social Anxiety among transgender individuals. The sample of the study included transgender men (n=10) and transgender women (n=22). The tools used were Internalized Shame Scale and Social Anxiety Scale for Adults. The major findings of this study are, there is high internalized shame and a moderate level of social anxiety among transgender Individuals. There is positive significant correlation between, internalized shame and social anxiety.

Keywords: social anxiety, internalized shame, transgender

1. Introduction

Trans-gender is an umbrella term used for a person whose gender expression, gender identity or their behaviour that is not conformed to the sex to which they were born. Transgender people are individuals of any age or sex whose appearance, personal characteristics, or behaviours differ from stereotypes about how men and women are "supposed" to be (Satashivam 2012). Gender Identity is a person's internal sense of being a male or a female. Gender expression is the way in which a person communicates their gender identity with others through their dressings, behaviour, bodily characteristics etc. There are many identities that come under the transgender term. Transsexuals are those whose gender identity is different from their assigned sex. Often transgender people wish to change or alter their bodies through surgeries and other ways to make their bodies to match with their gender identity. People who are born as females but identify themselves as male are known as transsexual men or Trans men (female to man). People who are assigned as male but see themselves as female are known as transsexual women or Transwomen. According to a report by NHRC, Around 92% of transgender individuals are deprived of the right to participate in any form of economic activity, forcing the majority of transgender individuals to resort to sex work and begging, only 2% transgender individuals live with their families. However, leaving their families is not a guarantee against social discrimination as 99% of the respondents said they faced social rejection on more than one occasion. 50-60% of transgender individuals have never attended school and those who have faced continuous harassment from classmates and teachers. While 62% said they are verbally abused in school, 15 percent said they are harassed by students as well as teachers.

Social anxiety is defined as significant and persistent fear which emerges in social situations or in front of strangers or in situations that require performance in DSM-IV (APA, 2000). It is expressed as the fear of being eyed by other people in relatively small groups in ICD-10 (WHO, 1993).

Social anxiety can be described as a fear of being negatively evaluated and judged by others. Such people fear to appear in public, making a phone call. They withdraw themselves

from the social situation and the society. For instance, a person with normal anxiety feels anxious before making a presentation or attending an interview. But a person with social anxiety turns down a well-earned promotion that might involve meeting new people, making presentation and public speaking. In short, high level of shyness is known as social anxiety/Social anxiety is associated with a negative interpretation of social outlook. Watson and Friend (1969) first defined fear of negative evaluation as "apprehension about others' evaluations, distress over their negative evaluations, and the expectation that others would evaluate one negatively.

Shame is an emotion and life experience can push shame to higher levels, and then it becomes a crippling part in an individual's life. "A pervasive sense of shame is the ongoing premise that one is fundamentally bad, inadequate, defective, unworthy, or not fully valid as a human being" (Fossum & Mason, 1986). Shame can act as a warning that we 'live in the minds of others' as someone with negative characteristics, or lack of positive ones, and thus are at risk of their rejection, exclusion, being passed by or even persecuted (Gilbert, 2002b, 2007a). Shame emerges from our complex evolved mental abilities to be aware of 'how we exist for others,' and make predictions of what they think and feel about us (Gilbert, 2002b, 2003; Lewis, 1995). Hence shame can be an experience of the self-related to how we think we exist in the minds of others (Gilbert & McGuire, 1998; Keltner & Harker, 1998), linked to the exposure of negative aspects of the self (e.g., deficits, failures and flaws) to others and to the experience of the others feeling contempt or ridicule for the self; that is to say, shame is about being seen as an unattractive and undesirable self (Gilbert, 2007a; Lewis, 1993, 2003; Tangney & Dearing, 2002).

Lee, Kim and Park (2014), conducted a study on the Impact of Internalized Shame on Social Anxiety in Adolescence. This study tested a structural model which indicated the impact of internalized shame on social anxiety through. Results revealed that all three variables showed a positive correlation with each other. Also, the full mediation model showed a better fit to given data compared to the partial mediation model, which indicated that internalized

shame indirectly influenced social anxiety through experiential avoidance. Gilbert (2000) ^[1] explores the association between shame, depression and social anxiety from the perspective of social rank theory. Results confirm that shame, social anxiety and depression (but not guilt) are highly related to feeling inferior and to submissive behaviour.

The studies of Doğan (2018), Bautista and Hope (2015), Kocovski and Endler (2000) ^[4], Lee, Kim and Park (2014), Gilbert (2000) ^[1] shows fear of negative evaluation and internalized shame as a predictors of social anxiety.

1.1 Focus of the study

Majority of the Indian family does not approve their male child behaving in a feminine manner. Violence begins from the family where the parents begin to scold or beat their male child when behave in a feminine way. Later when they grow up into adults, the society begins to ostracize them. These external messages may become internalized and shape how they feel about themselves and later cause psychological distress. There are no much study done on this population, especially these variables together. Hence, this study aims to find the influence and relationship between Internalized Shame and Social Anxiety and also throws a light into the major areas where the Transgender individuals face challenges and un-comfortableness in the society.

2. Method

This is a non-experimental within group descriptive research design with a quantitative approach.

1. To assess the level of social anxiety and internalized shame and among the Transgender Individuals.
2. To study the dimensions of social anxiety.
3. To find the relationship between Internalized Shame and social anxiety among the Transgender Individuals.
4. To find the relationship of age, education, occupation and income per month on social anxiety among transgender people.

2.1 Operational definition of the variable

- “Social anxiety is persistent fear in which an individual feel fear or anxious while facing situations such as interacting with strangers, being watched, criticized and speaking in public or going in to a social place.”
- “Internalized shame is a kind of shame, where an individual internalized the external message and judge themselves as inferior, unimportant and unworthy when compared with others so the transgender individuals will have a negative view about self”

Demographic variables

The demographic variables of the study include age, gender identity, place, educational level, occupation and income.

2.2 Samples and sampling techniques

This study uses non-probability sampling method with purposive sampling technique where individuals who self-

identify as transgender. The reason for choosing this sampling technique is to select particular characteristics from a population to create a sample. For the purposes of the current study, only transgender men ($n=10$) and transgender women ($n=22$) were included in the analyses. Participants’ ages ranged from 18 to 50 ($M= 27.125$, $SD=6.2204$) residing in Bangalore and Kerala.

Inclusion criteria

- Transman and Transwoman from southern states of India
- Age range from 18 years to 50 years

Exclusion criteria

- Cross dressers, drag king, drag queen, gay, lesbian
- Age range below 18years

2.3 Tools used

Social Anxiety Scale for Adults (SAQ-A30): SAQ-A30 was Caballo, V. E., Salazar, I. C., Iruiria, M. J., Arias, B., and CISO-A Research Team. The questionnaire is designed to measure specific / generalized social phobia/ anxiety in adults (18 years and more) from general and clinical population. It contains 30 items, Likert scaled with five dimensions. The five dimensions are the following: 1) Speaking in public/talking with people in authority, 2) Interactions with the opposite sex, 3) Assertive expression of annoyance, disgust, or displeasure, 4) Criticism and embarrassment, and 5) Interactions with strangers. Validity and reliability: the internal consistency (Cronbach’s alpha) estimates total score and 5 factors were very good. Caballo, Salazar, Arias, *et al.* (2010) found that Cronbach's alpha for the whole questionnaire was .91 and split-halves reliability coefficient (Guttman) was .93. Pearson correlations found with the LSAS-SR ($N=15,504$) was .70

Internalized shame scale: Internalized shame scale was developed by David Cook and his associated in 1987 at the university of Wisconsin Stout. This is the only widely accepted measure of shame. The ISS is a dichotomous questionnaire of 30 items, Likert scaled, self-report, paper pencil instrument. This scale has 2 subscales: alienation and inferiority. 6 self-esteem items are used as a filler to reduce responding answers alike. The subscales have been identified and validated (Cook, 1989). The Cronbach's alpha reliability coefficient for the ISS shame scale was found to be .94. The test re test reliability yielded a coefficient of .84.

2.4 Procedure

A good rapport was established and Participants were told that the purpose of the present study. Before giving the questionnaire, written consent was taken from the participant. Demographic details were taken from the participants. Instruction of the test was explained to them in their mother tongue/ local languages. As the study included 3 questionnaire. Instructions for each was given. Confidentiality was maintained. As there was 3 questionnaire, a time gap of 5 mins was given after the completion of each questionnaire to avoid fatigue. Later the

data were entered in the microsoft excel sheet. SPSS (Statistical Product and Service Solutions) 21 was employed to analyse the data.

3. Results and Discussion

Table 1: Descriptive of the variables- internalized shame and social anxiety

Variables	N	Mean		Std. Deviation
	Statistic	Statistic	Std. Error	Statistic
Fear of negative evaluation	32	32.563	1.7734	10.0320
Social Anxiety	32	88.781	5.7967	32.7914

*Primary Source

The mean score for internalized shame is 87.031 and social anxiety is 88.781. As a whole the group has high level of and internalized shame and a moderate level of social anxiety.

Both humans and animals have been shown to be more vigilant to social threats, tense and vulnerable to a variety of problems (Sapolsky,1998)..Previous researches on anxiety symptoms and anxiety disorders in the transgenders have found an association with frequent experiences of discrimination in employment and housing, violence, physical and verbal abuse, societal harassment related to gender presentation, perceived need to keep one’s transgender identity a secret and lack of gender confirming treatment (Bockting *et al.*, 2013;

Table 2: Descriptive of the five dimensions of social anxiety

Dimensions of social anxiety	Sum	Cut off	Mean	Std. Deviation
Interacting with strangers	547.0	512	2.849	1.4698
Speaking in public	550.0	576	2.865	1.5117
Interaction with opposite sex	590.0	576	3.073	1.5603
Criticism	605.0	640	3.151	1.5189
Assertive expression	547.0	608	2.849	1.5863

Descriptive statistics computed shows the scores of different dimension in social anxiety questionnaire for adults. Dimension 1, 2 and 3 i.e. interacting with strangers, speaking in public and interacting with opposite sex have score more than the cut off score, which indicates that the transgender people face problems and fear in these areas. The findings suggest that transgender people face a lot of problems or fear while interacting with strangers, speaking in public or talking to people in authority and they also fear while talking to the people of opposite sex.

Table 3: Correlation between Internalized shame and Social anxiety

Variables		Social anxiety	Internalized Shame
Social anxiety	Pearson Correlation	1	.801**
	Sig. (2-tailed)		.000
	N	32	32
Fear of negative evaluation	Pearson Correlation	.714**	.679**
	Sig. (2-tailed)	.000	.000
	N	32	32

The Pearson correlation results showed that there is a significant positive correlation between social anxiety and fear of negative evaluation (0.714) Therefore, the study rejects the hypothesis that there is no significant relationship

between internalized shame and social anxiety.

A significant level of correlation was found between fear of negative evaluation and social anxiety. Which is consistent with the previous research “people with social anxiety have more tendency to produce negative feelings about their affect and bodily symptoms” (Edelmann & Baker, 2002) and “fear of negative evaluation is a hallmark feature of social anxiety disorders (Rapee, R. M., & Heimberg, R. G. (1997).

Table 4: Showing the relationship between social anxiety and demographic variables such as education, age, occupation and monthly Income. Chi- square for independence in social anxiety and education

Demographic variables	Value	Df	Asymp.Sig.(2sided)
Education	89.651 ^a	81	.239
Occupation	117.333 ^a	108	.254
Monthly income	90.311 ^a	81	.224
Age	492.622 ^a	459	.134
N of Valid Cases	32		

A Chi-square test of independence was calculated comparing education and social anxiety. The Pearson’s Chi-square value ($X^2 = 89.651, p = .239$), ($X^2 = 117.33, p = .254$), ($X^2 = 90.311, p = .224$), ($X^2 = 492.622, p = .134$). The results revealed there is no significant relationship between social anxiety and demographic factors like education, monthly income, age and occupation.

3.1 Findings

- There is high internalized shame and a moderate level of social anxiety among transgender individuals.
- There is positive significant correlation between internalized shame and social anxiety.
- They experience comfortableness or uneasiness while talking to strangers, interacting with people in authority and people of opposite sex and speaking in public.

3.2 Implication

The result of the study suggests that transgender people are prone to varieties of problems. Association with frequent discrimination in various walks of life cause distress and social anxiety among trans-people. Family, peer and social support have proved to help them to reduce psychological problems. The transition to male was perceived more acceptable and transition to female might cause a lot of losses than transgender man, internalized shame and social anxiety may have caused a difference between transman and transwoman.

Public health interventions targeting the transmission of cultural messages in different ecological systems— family, community, mass media—are needed in order to promote the health of TGNC individuals. Social support and relationship quality may prove to be powerful sources of protection for Trans persons, providing impetus for fostering cultural acceptance and celebration of trans identities. Lack of understanding of transgender identity and stigma may adversely affect the health of the transgender community. Awareness must be created among the people (Zucker *et al.*, 2008), it is important that counselling psychologists expand their multicultural competence to include the experience of transgender people Previous studies have shown that hormone therapy have helped to reduce anxiety symptoms among transgender individuals.

One 2012 study looked at a sample population wherein about two thirds had undergone hormone therapy, while the remaining third had not, and found that individuals who had not begun hormones experienced approximately 30% higher levels of anxiety and depression.

Inculcating emotional focused coping styles can help the transgender individuals to reduce their social anxiety. Emotion-focused coping style was positively correlated with social anxiety. Presumably, emotion-focused coping styles include strategies that reduce emotional distress and expression of feelings and prevent taking appropriate actions in stressful situations (Struthers *et al.*, 1995).

3.3 Limitations

There is a possibility that a larger sample size may have yielded different or more significant results. However, even with a small sample size, the study did reveal some significant results that are supported by current research. Another limitation of this study was the uneven ratio of trans man to trans woman. A larger sample size may have yielded a more even ratio.

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