

Contemporary Issues in Social Sciences and Management Practices (CISSMP)

Practices (CISSMP) ISSN: 2959-1023

Volume 3, Issue 1, March 2024, Pages 42-53 Journal DOI: 10.61503

Journal Homepage: https://www.cissmp.com



Marginalizing Marginalized Individuals: A Study on the Transition of Transgender People as they Age in the State of Punjab

Tauqeer Ahmed Lak¹, Muhammad Zainul Abidin² & Tabassum Razzaq³

¹Lecturer, Department of Sociology and Criminology, University of Sargodha, Pakistan.

² Lecturer Criminology, University of Sargodha, Pakistan.

³Additional Registrar, chief justice Lahore high court Lahore, Pakistan, Pakistan.

ABSTRACT

Article History:		
Received:	Dec	28, 2023
Revised:	Jan	22, 2024
Accepted:	Feb	15, 2024
Available Online:	March	25, 2024

Keywords:

Marginalized, Transitioning, Transgender, Semistructured, Alienation

Funding:

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Transgender individuals in Pakistan encounter distinct societal and economic barriers, which become particularly severe as they age. The elders in this neighborhood face various family and social challenges, health issues, housing limits, and economic concerns that are seldom acknowledged or resolved. This study aims to investigate the challenges faced by elderly transgender individuals within society. The researcher utilized qualitative study to investigate the issues, requirements, and worries of elderly transgender individuals. The researcher employed narrative inquiry to gain a profound grasp of the issue by utilizing storytelling. A purposive sampling technique was used to choose an 11-person sample size, which was then reachable using snowball sampling. Semi-structured in-depth interviews were used to gather the data, and theme analysis was then used to analyze The study revealed that the elderly face challenges such as acceptance, discrimination, housing, employment, family and societal rejection, health issues, and lack of caregiving in old age. The researcher suggests that the state should promptly implement a policy to protect transgenders, especially senior transgenders, by offering free health services in specialized units at hospitals, providing free housing, and giving them a stipend determined by the state to prevent feelings of frustration, isolation, and degradation in their old age. The researcher emphasized the need of studying these communities to gain insight into the lives of marginalized transgender individuals.

© 2022 The Authors, Published by CISSMP. This is an Open Access articleunder the Creative Common Attribution Non-Commercial 4.0

Corresponding Author's Email: tauqeer.ahmed@uos.edu.pk

DOI: https://doi.org/10.61503/cissmp.v3i1.112

Citation: Lak, T. A., Abidin, M. Z., & Razzaq, T. (2024). Marginalizing Marginalized Individuals: A Study on the Transition of Transgender People as They Age in the State of Punjab. Contemporary Issues of Social Sciences and Management Practices, 3(1), 42-53.

1.0 Introduction

Transgender individuals in Pakistan face social, political, and economic marginalization, leading to a challenging life marked by distrust and feelings of inferiority. This community has not been granted the basic privileges that an ordinary citizen typically enjoys while living in civilization. They experience severe social marginalization that reduces self-assurance and societal obligation (Khan, et al., 2009). They are initially excluded by their families and eventually end up living alone during their old age. They are marginalized by society, without sociopolitical space to live a dignified and self-respecting existence.

Transgenders are often viewed as subordinate to both women and men in society. Transgender individuals have a gender identity that does not align with the sex assigned to them at birth, and this persists throughout their lifetime. Individuals with any inferiority or deformity are often referred to as Khusra or Hijra in Pakistan. These derogatory terms are widely used in the culture to describe such individuals. These names suggest a lack of strength and are associated with social groups perceived as physically weak, even more so than women (Fizza, 2021). The transgender population frequently faces prejudice, discrimination, rejection, abuse in many kinds, harassment, and unfavorable social perceptions from the general public. These experiences exacerbate their sense of estrangement and alienation. However, minority stress increases with time.

The challenges faced by transgender individuals can intensify as they age and become elderly. The community, which was already lacking resources, experiences further hardship due to their sidelining. Individuals who are incapable of establishing themselves as ordinary residents for respect and safety in the social order face increased challenges as they age (Khan, et al., 2009). The majority of society frequently criticizes, abuses (mental, physical, psychological, or sexual), harasses, rejects, neglects, discriminates against, and holds unfavorable social opinions about transgender people in their later years, which furthers their sense of alienation and isolation. Nevertheless, minority stress intensifies over time. Research indicates that stigmatization, social exclusion, and subsequent ostracism from society further complicates the lives of transgender individuals, leading to isolation and maybe encouraging them to engage in undesirable behaviors.

Elderly transgender people in Pakistan still face health-related anxiety, desperation, rejection, disapproval, dismay, alienation, and uncertainty, even after the Supreme Court ordered that the National Database and Registration Authority (NADRA) grant them historic status. Numerous initiatives, including the 2018 founding of a school in Lahore specifically for this population, reflect the political resolve of the state apparatus. The "Gender Guardian" school was founded to educate transgender individuals with the goal of helping them secure suitable employment opportunities. However, senior transgender individuals continue to be overlooked by both society and the government. The government is now keen on granting fundamental rights to neglected communities who were previously primarily recognized for their artistic talents (Hashim, 2018). In 2018, Pakistan approved a bill to protect transgender individuals, pending approval by the senate to become legislation. This measure aims to safeguard transgender individuals from emotional turmoil and sexual harassment. It also places the onus on the

government to offer housing, medical care, and psychological support to this population (Osborne, 2018).

There are 10,418 transgender people in Pakistan overall, 6,709 of them live in the province of Punjab, according to the country's sixth housing and population census conducted in 2017. However, the exact number of this community has not been confirmed. There is a significant population of elderly transgender individuals in Punjab. Here is the breakdown of the transgender community in Punjab:

Table1: Transgender population in urban and rural areas of Punjab.

-	Region	Urban	Rural	Total
	Lahore	1441	150	1591
	Multan	289	318	607
	Gujranwala	583	356	939
	Sargodha	274	152	426
	Faisalabad	540	365	905
	Sahiwal	234	203	437
	DG Khan	168	183	351
	Bahawalpur	339	283	622
	Rawalpindi	717	114	831
	Total	4485	2124	6709

Source: Population Census Report 2017.

2.0 Literature Review

Transgenders face increased challenges due to social marginalization, stigmatization, and eventual expulsion from society. This compels people to engage in inappropriate behaviors and actions (Shah, et al., 2018). Suicidal attempts and thoughts in transgender individuals are linked to marginalization, which is recognized as a serious issue. There has been a rise in physical victimization among transgender individuals, contributing to these life-threatening problems. As transgender individuals gain experience and age, they become "Gurus" who are responsible for training "Chelas." They begin residing in a single residence with rules and history established by a Guru. They make a living by singing, dancing, and other hobbies. When faced with financial difficulties, individuals may resort to engaging in viable sex work and pleading (Rehan, Chaudhary, & Shah, 2009). Transgender individuals are often coerced into prostitution as a means of livelihood, increasing their susceptibility to sexually transmitted diseases (Khan, et al., 2009).

Senior transgender people are currently particularly vulnerable, which increases the risk of mental health problems such anxiety, depression, trouble sleeping, loneliness, and loss of autonomy. (Banerjee, 2020). Old members of the society experience a decline in their sexual vitality and auspiciousness as they age, leading to a decrease in their participation in ceremonies and subsequently affecting their revenue. Ageism poses a serious barrier to transgender people's access to the legal, social, and health systems in our culture, as stated by Boggs et al. (2016).

Since they are seen as a minority, they experience exclusion and discrimination based on their group, which denies those rights and social privileges (Canales, 2000). Transgender people

face marginalization in society as a result of bias and discrimination in a number of fields, such as employment, housing, health care, and education. This often results in homelessness or living on the streets (Bolas, 2007). Homeless individuals often experience elevated rates of victimization, deteriorated mental health, and heightened substance misuse when residing on the streets (Ecker, 2016).

3.0 Methodology

This study employs a qualitative methodology to examine the marginalization of elderly transgender individuals in Punjab, a society that is already facing marginalization. Given the scarcity of information regarding this group, it was imperative to conduct a thorough investigation of the case. The qualitative approach is the most appropriate method for investigating my study problem. I have employed narrative inquiry as a research methodology. Connely and Clandinin (1990) argue that humans are innately narrative creatures that experience and make sense of their lives through storytelling, both as a collective and as individuals. This method is most appropriate for studying the experiences of transgender individuals as they mature. The individuals provided the researchers with thorough accounts of their extensive and enriched life experiences.

The sample size in qualitative research is not standardized and lacks explicit guidelines for qualitative study. Patton (2002) suggested beginning with a limited sample size and expanding it as necessary to ensure redundancy. In their study, Fusch & Ness (2015) highlighted the importance of saturation in qualitative research, emphasizing that sample size should be determined correctly. Hennink, Kaiser, & Marconi (2017) hold a similar viewpoint and regard sample size in connection with saturation, specifically referred to as "theoretical saturation". I selected a representative sample of transgender people using the snowball sampling technique. I found one possible volunteer and then used this person to find more members of the underprivileged community. A cohort of transsexual individuals between the ages of 55 and 65 was chosen for semi-structured interviews that aimed to gather detailed information. Interviews were conducted with 11 persons until data saturation was achieved, meaning that no new information was being gathered.

I employed the general interview guide strategy to guarantee thorough exploration of crucial subjects using a well-organized series of questions. This method was utilized to conduct comprehensive, semi-structured interviews in a study aimed at obtaining the narratives of participants while ensuring the interview procedure remained organized and uniform. In order to allow respondents to freely add in-depth narratives, the open-ended questions were translated into the local language and presented in an uncomplicated and straightforward manner. Narrative inquiry recommends doing two interviews with the same individual. I did a first interview with general inquiries, and then conducted a further interview to address any new inquiries that may arise and to elicit narratives.

Qualitative research entails the examination of intricate and complex facts and concepts. Therefore, data requires meticulous depiction, analysis of significance, identification of trends, and extraction of the most pertinent information for research purposes. Data analysis in qualitative inquiry involves the extraction of significance from the data.

I have adopted narrative analysis for data analysis, as it is frequently used in narrative

inquiry. Narrative analysts often adopt one of four methods for analysis, and I utilized the most commonly used approach known as narrative thematic analysis. The technique comprised of five stages: (1) organizing and preparing data through the transcription of audio cassettes from interviews, (2) comprehending the information, (3) encoding the data, (4) generating categories or themes, and (5) interpreting the data.

I conducted individual interviews and actively listened to each participant, providing them with the opportunity to express their experiences in old age. I had the opportunity to occupy establishments such as restaurants and coffee shops, and occasionally even private residences, where the individuals in question felt at ease. The coffee shop proved to be an optimal venue for conducting interviews. I acquired explicit agreement, elucidated the objective of the study, and ensured anonymity. Each interview has a duration that varies between 50 and 75 minutes. The responses were officially recorded with the participants' consent. Subsequent interviews were conducted following the initial study to obtain more comprehensive data and resolve any existing deficiencies.

3.1 Data collecting and analysis

Information was collected from a sample of nine senior persons belonging to the transgender community. Out of the 11 transgender persons, 2 classified themselves as belonging to a third gender, 4 preferred to identify as female, 2 preferred to identify as male, and 1 did not disclose their gender preference. Out of the total of 9 individuals, 7 lived in their neighborhood, 2 lived alone, 1 did not have a permanent residence and remained in temporary shelters such as streets, sidewalks, bus stops, or train stations, and 1 was temporarily staying with a friend. They were classified as impoverished. All of them were constituents of the Punjab province in Pakistan. There was no individual involved in governmental affairs or holding a respected position in the corporate sector. Out of the group of 10 people, just one was able to find a temporary low-skilled job in a restaurant, while the rest remained unemployed. A significant number of individuals were actively seeking donations on the streets.

Below are the details of the participants:

Table-1 Socio-demographic detail of participants

Respondents	Age	Job (Govt/Private)	Residence	Socio- economic status	Education
R1	61	No	With transgender Community	Low	Grade 4
R2	55	No	With transgender Community	Low	No formal education
R3	64	Menial temporary (private)	With transgender Community	Low	Grade 7
R4	59	No	Alone	Low	No forma

R5	61	No	Temporary shelter	Low	education No formal
R6	65	No	Alone	Low Middle	education Grade 5
R7	64	No	With trans Community	Low	No formal education
R8	61	No	With trans Community	Low	Grade 6
R9	58	No	With trans Community	Low	No formal education
R10	65	No	With friend	Lower Middle	Grade 3
R11	64	No	With trans Community	Low	No formal education

The individuals who took part were given the opportunity to elaborate on their experiences. A significant amount of data was collected for the purpose of analysis and coding. The respondents' narratives were transcribed and organized into the following categories and subcategories:

"The Ageing" (a decline in demand, diminished mobility, and waning significance in public and trans communities); "Marginalization" (discrimination, stigmatization, loss of dignity, estrangement from friends, and lack of love); "Residential accommodation" (no private home, crowded apartments, absence of government housing); "Health issues" (hospitals without individual booths, absence of health cards, and lower priority at medical stores); "Poverty" (least access to basic necessities, unemployment, and begging); "Rejection" (disrespect from peers, parents, and society); "Threats" (mental abuse, threats to survival, disease, emotional abuse); and "Needs" (Living, Stipend and Medical facility).

An analysis was conducted to identify themes and sub-themes that arose from the debate, based on the participants' expressed concerns and requirements. The analysis summary is presented in Table below.

Table-2- Themes and Summary of narratives

Table-2- Themes and Summary of narratives			
Themes	Sub-themes	Verbal short extracts	
Marginalization	Discrimination	People treat me inhumanely and request that I	
		keep my distance from them. At times, I feel like an	
		alien	
	Stigmatization		
		People perceive me as the cause of all	
		misfortunes. They regard me as a sexual object. Some	
	Despair of dignity	perceive me as a burden in society.	
	Disconnection	People mock and dislike me The explanation is either due to my age or perhaps because I am different from	
	Disconnection	others.	
	from friends		
		In comparison to when I was younger, my	

contemporaries no longer accept me as I am. My current state of mind is one of insignificance. There was a time when they would sit with me and we would talk Absence of love about our experiences. When I am alone, I feel... There is no love in my life from my friends and family. Residential No personal house It is a source of anxiety for me that I do not accommodations possess the financial resources to own a modest dwelling for myself. In the neighborhood where I live, we have a little flat, Congested and there are times when we have to make due with apartments sleeping in a single bed that we share with other people. There are currently five of us living in a room that has the potential to accommodate three people, but we are currently occupying that space. There is no concern on the part of the state for our situation. The fact that we exist is utterly disregarded by them. Missing govt. housing The Ageing A downturn in People say that you are old and have no demand. value... Elderly being, a creature that serves no purpose. All of my pals avoid me. Reduced mobility As a result of my age, I hardly ever go to parties anymore. My capacity to attend events and even to ask for assistance is restricted due to my advanced age. Fading importance At the moment, my family does not look well upon me. My housemates where I have lived for a long time are not particularly forthcoming with me. At this point, my family and friends do not pay any attention to me. What kind of expectations can I have of other people? Quite simply, I hold no value. Poverty Less access to I am unable to afford a level of living and even basic needs excellent meals... Unemployment People from the state and retailers do not offer me work.

I am of the opinion that I do not belong in this planet.

	Begging	In spite of the fact that I am standing by the side of the road and begging for a tiny amount of money, people do not give me much.
Rejection	Rejection by society	People do not wish to see me sitting with them in any capacity.
	Rejection by parents	As a result of the fact that my former parents do not want me, I do not visit them. I long for the house that my parents had, as well as for my siblings.
		My friends feel that it is a hardship for them to have me because I am getting older.
	Rejection by friends	
Health issues	Hospitals lacking individual booths	People who work in hospitals, including medical professionals, paramedics, and other medical personnel, often feel like social outsiders. There is a lack of clarity regarding which gender line we should join.
	No health cards	The health card service is not available to us because we are not officially registered with NADRA (National Advanced Database Registration Authority).
	Less priority at medical stores	It is often urged of me to exercise patience whenever I am in a medical store or clinic
Needs	Living	I can only imagine a successful and flourishing life for myself. I have little optimism about this event in my latter years.
	Stipend	As a result of my elderly age, I acknowledge that I am incapable of participating in employment. Do you expect the government to provide me with a stipend to cover my living expenses?
	Medical facility	I seek access to specialized healthcare facilities where I can receive dignified treatment.

Threats	Mental maltreatment	In the midst of this universe, I detect a sense of isolation and alienation from the rest of the world. My lack of companionship prevents me from sharing in both my happiness and my misery.
	Threats to survival	Due to the fact that I do not receive any aid in my day-to-day existence, I am having a feeling of imminent mortality. When I am in an environment like this, people have the impression that I am ineffective, and I am always experiencing distress while I am there.
	Disease	At this point in my life, I have reached an old age, and eventually, I shall pass away due to illness. Because of my fragile physical condition, I am scared that I might not be able to withstand infections on my own.
	Emotional abuse	At this moment, I do not have anything in my hand. At the moment, I do not have any savings, and I am completely dependent on Allah (God) for aid.
	Financial abuse	The fact that I am currently going through a difficult financial situation makes it impossible for me to buy fundamental essentials like food and a place to live.

Historical personal narratives of transgender individuals illuminate universal societal issues. As individuals age, they may experience intensified feelings of isolation, despair, exclusion, and apprehension for their future. These emotions may also increase in frequency. These elderly transgender individuals have been living independently, without relying on support from their parents, children, or childhood friends. However, they are now beginning to recognize the need for additional aid and care. The third respondent expressed apprehensions over the healthcare system.

"During my younger years, I used to have frequent discussions about dance, but now I no longer have the physical stamina to actively participate in it. "Currently, my memories are confined solely to the past. I am concerned about the probability of contracting HIV. We lack both specialist hospital facilities and available doctors to conduct examinations.

Elderly transgender individuals lack sufficient housing. Their critique is aimed at the government for its failure to furnish housing amenities, resulting in a substantial population of transgender individuals who lack shelter. They emphasized the significance of dwellings as fundamental necessities for all elderly individuals in their statement. The seventh respondent discussed domestic amenities. "I want to live in my own home." Currently, I do not require a significant one. To ensure a secure and restful slumber, I necessitate a cozy and welcoming setting. Despite my current lack of a permanent residence, I am presently residing with my pals.

Overwhelmingly, the respondents identified poverty as a prominent issue and regarded it as a

primary catalyst for exploitation. Due to their impoverished circumstances, they are compelled to engage in labor across many locations.

The initial respondent asserted that they are not being presented with any employment prospects due to their lack of training or formal education. During my fourth grade, I made the deliberate choice to discontinue my attendance at school, and I have not returned since. Previously, I experienced destitution, and presently, I remain in a state of poverty. I had the perception that my existence was unwarranted.

As individuals age, they encounter a multitude of concerns. They are filled with fear about their upcoming death and believe that they have lost the respect of others. They require the presence and assistance of their parents, friends, and other intimate acquaintances to offer them support and actively participate in their life. "Mortality is an inevitable reality for all individuals, but given my advanced age, my remaining lifespan is limited," they expressed. Currently, I lack charisma. As transgender individuals age, they encounter a range of challenges and meet various requirements. They have a fear of falling ill and being excluded. They possess a pessimistic outlook on their well-being and necessitate prompt resolutions to any and all problems they encounter. It is suitable for them to reside like ordinary individuals.

4.0 Conclusion

The study's findings reveal that the systematic neglect of elderly transgender individuals in Pakistan is a common occurrence. The marginalized group is experiencing significant anguish due to their increased alienation from mainstream society. The results of the study show that older transgender people frequently experience a variety of challenges, such as marginalization, inequalities in health, poverty, rejection, and unstable housing. The government should intervene to tackle these pressing concerns in order to ensure the safeguarding of the populace and their entitlement to the rights bestowed upon them as ordinary citizens of Pakistan. The subsequent significant issues were brought to our attention:

- Older transgender individuals face significant obstacles, such as illness, frailty, and emotional and psychological mistreatment. These hurdles can be arduous to surmount.
- The bulk of them are facing significant challenges in their lives.
- They experience rejection from their peers and lack acceptance from their families.
- Many elderly transgender individuals face difficulties in securing housing.
- They reside in conditions where they are disregarded by their peers, or they reside in public spaces such as streets or train stations.
- Compared to younger individuals, older transgender people experience higher levels of rejection and discrimination from society.
- They face negative social attitudes and increasingly feel alienated as they age. Additionally, many of them live in severe poverty.

The current study suggests the following actions to improve the quality of life for elderly transgender individuals:

• The state should offer free housing to older transsexual individuals.

The state should provide free health facilities by enrolling them in a national database.

- Initiate awareness activities to boost the confidence of transgender individuals and promote respect for underrepresented communities.
- The state should pay a stipend to the elderly members of this community.
- These individuals should be offered recreational activities.

Healthy transgender individuals should be provided opportunities to work in both public and private offices.

Dr. Taugeer Ahmed Lak: Problem Identification and Theoretical Framework

Muhammad Zainul Abidin: Data Analysis, Supervision and Drafting

Tabassum Razzaq: Literature Search, Methodology, and Drafting

Conflict of Interests/Disclosures

The authors declared no potential conflicts of interest in this article's research, authorship, and publication.

References

- Banerjee, D. (2020). 'Age and ageism in COVID-19': Elderly mental health-care vulnerabilities and needs. *Asian J Psychiatr*. doi:10.1016/j.ajp.2020.102154
- Boggs, J. M., Portz, J. D., King, D. K., Wright, L. A., Helander, K., Retrum, J. H., & Gozansky,
 W. S. (2016). Perspectives of LGBTQ Older Adults on Aging in Place: A Qualitative Investigation. *J Homosex*, 64(11), 1539-60. doi:10.1080/00918369.2016.1247539
- Bolas, J. (2007). *City Must Show That Street Homeless Youth Count*. NY: City Limits. Retrieved from https://citylimits.org/2013/07/25/city-must-show-that-street-homeless-youth-count/
- Canales, M. K. (2000). Othering: toward an understanding of difference. *ANS Adv Nurs Sci*, 22(4), 16-31. doi:10.1097/00012272-200006000-00003
- Connely, F. M., & Clandinin, D. J. (1990). Stories of experience and narrative inquiry. *Educational Researcher*, 19(5), 2-14.
- Ecker, J. (2016). Queer, young, and homeless: A review of the literature. *Child & Youth Services*, 37(4), 325-361. doi:10.1080/0145935X.2016.1151781
- Fizza. (2021, October 27). Dance of hunger:Transgenders in Pakistan. Islamabad, ICT, Pakistan. Retrieved from House of Pakistan: https://houseofpakistan.com/transgenders-in-pakistan/
- Fusch, P. I., & Ness, L. R. (2015). Are We There Yet? Data Saturation in Qualitative Research. *The Qualitative Report*, 1408-1416.
- Hashim, A. (2018). *Pakistan passes landmark transgender rights law*. AlJazeera TV. Retrieved January 1, 2023, from https://www.aljazeera.com/news/2018/5/9/pakistan-passes-landmark-transgender-rights-law
- Hennink, M. M., Kaiser, B. N., & Marconi, V. C. (2017). Code Saturation Versus Meaning Saturation: How Many Interviews Are Enough? *Qualitative Health Research*, 591-608. doi:10.1177/1049732316665344
- Khan, S. I., Hussain, M. I., Parveen, S., Bhuiyan, M. I., Gourab, G., Sarker, G. F., . . . Sikder, J. (2009). Living on the extreme margin: social exclusion of the transgender population (hijra) in Bangladesh. *Journal of health, population, and nutrition, 27*(4), 441-51. doi:10.3329/jhpn.v27i4.3388
- Nanda, S. (1986). The Hijras of India: Cultural and Individual Dimensions of an Institutionalized

- Third Gender Role. *Journal of Homosexuality*, 11(3-4), 35-54. doi:10.1300/J082v11n03_03
- Osborne, S. (2018). *Pakistan passes law guaranteeing transgender rights*. Karachi: Independent. Retrieved from https://www.independent.co.uk/news/world/asia/pakistan-transgender-rights-lgbt-national-assembly-law-driver-s-license-passport-a8343321.html
- Patton, M. Q. (2002). *Qualitative Research & Evaluation Methods* (3 ed.). Thousand Oaks, CA: Sage Publication.
- Rehan, N., Chaudhary, I., & Shah, S. K. (2009). Socio-sexual Behaviour of Hijras of Lahore. *Journal of the Pakistan Medical Association*, 59(6), 380-4. Retrieved from https://www.researchgate.net/publication/26299431_Socio-sexual Behaviour of Hijras of Lahore
- Shah, H. B., Rashi, F., Atif, I., Hydrie, M. Z., Fawad, M. W., Muzaffar, H. Z., . . . Shukar, H. (2018). Challenges faced by marginalized communities such as transgenders in Pakistan. *Pan African Medical Journal*. doi:10.11604/pamj.2018.30.96.12818
- Testa, R. J., Wang, L. M., Hendricks, F., Goldblum, M. L., Bradford, P., Bongar, J., & Bruce. (2012). Effects of violence on transgender people. *Professional Psychology: Research and Practice*, 43(5), 452-59.