

Relationship Between Defense Mechanisms and Identity Styles in Patients with Gender Identity Disorder (GID)

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Abstract:

The purpose of this study is to determine the relationship of defensive mechanism and identity styles in patients suffering gender identity disorder (GID).

Method: *for this purpose 100 individuals were selected through convenience sampling among patients suffering GID in the district health centers located in Sanandaj, Tabriz, Kermanshah and Tehran. They completed two questionnaires including defensive mechanism (DSQ-40), identity styles (isi-6G). The present study was of descriptive research and research design was correlated. The data was analyzed through SPSS software using Pierson correlation test, multivariate regression and radical correlation coefficient.*

Results: *This study revealed a positive relationship between mature defensive mechanism and commitment, normative and*

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informational identity styles, while there is negative correlation between immature defensive mechanism, informational and normative identity styles. It also shows a positive correlation between immature defensive mechanisms and confused-avoidant identity style and a positive correlation between neurotic defense mechanism and confused-avoidant identity style. In spite of this, there is no significant relationship among other variables.

Conclusion: *Due to results, predictor variable of mature defenses include meaningful coefficients for direct predication of informational, commitment and normative identity. Immature defenses contain meaningful coefficients to predict avoidant, informational and normative identity. In addition, predictor variables of immature defenses have meaningful coefficients for inverse prediction, normative and informational identities.*

Key words: gender identity disorder, defenses mechanisms, and identity styles

Introduction:

Gender identity is a psychological state that reflects the individual sense of being male or female. In normal state, it matches the individual's anatomy gender. In other words, gender identity is physiological sex that is accepted by individuals' psychiatric system and thus properly replicated throughout life with their own sex for achieving conventional treatment of gender in individual and social life.

DSM-IV is defined GID as a group of disorders whose common feature is strong preference to adopt the status and role of the opposite sex. In fact, the individual is discontent with the sex he was assigned at birth and wants to have the body of the opposite sex; he has a lining to be seen as another person from the opposite sex. Current diagnostic criteria for children and adults include two major categories: assimilation with opposite sex and discontent with the assigned role associated with that sex (Kaplan & Sadock, translated by Rezaee 2008).

The man, who is dissatisfied with his gender, is a man

who feels he is a woman who has been caught in a male body. He wants to get rid of his genitals. He demands female sex characteristics. He likes to live as a woman. The woman who is dissatisfied with her gender is a woman who feels she is a man who has been trapped in a female body. She likes masculine features and wants to live like men. Transgender people usually feel that they have been given the wrong body from the beginning of life. Such body often makes them disgusting. This thought that they have to spend all their lives in this way and they have to remain in that body make them frustrated and depressed. They sometimes think about suicide and they cut off their genitals (Seligman 2003, translated by Mohammadi 2008).

In most clinical centers, the rate of male patients has been reported 3 to 5 more than female patients (Kaplan and Sadock 2007, translated by Rezaee 2008). This means that the number of men who have demanded to reassign their gender identity to female sex is several times higher than women with opposite demand.

People with GID believe that gender reassignment surgery is the only way to get rid of this condition. In the society of Iran, GID is also not well-defined. Further, the reactions of individuals, families and institutions are not-so-good with the kind of problem, because sometimes some people have certain attitudes based on their traditional or religious beliefs that consider this group as society deviants. The public also knows them as homosexual or androgynous (binary model of gender), but are they really so? There are many uncertainties and gaps in the research due to little knowledge and a lot of ignorance in relation to specific and complex issues of these people. The purpose of this research focuses on two psychological components of defense mechanisms and identity styles to explore their relationship with individuals' gender identity formation and in more holistic view their psychological description.

In the psychoanalysis system, any mental disorder is associated with an individual's non-adaptation defense mechanisms. Defenses will play an important role in mental health (Afzali et al 2008). Current perspectives on defense mechanisms based on theoretical considerations are classifying the relationship between these mechanisms and their overall mental health (Halgin & Whitbourne 2003, translated by Seyed Mohammadi 2005).

(Berzonsky 1989, quoted by Berzonsky 1992) presented a different perspective on the identity based on decision-making and problem- solving mechanism using the theory of Erickson & Marcia. This theory derived from the personal construct of Kelly (1955) that was based on the fact that people act as a theorist in their around world. His view is a structural idea of the identity (Berzonsky 2003). Its basic premise is that sometimes people play roles based on what they think and on the reality in which they live. Personal interpretations from experiences, not the events only, form the personal reality.

In the present study the relationship of defense mechanisms and identity styles in individuals with gender identity disorder will be discussed.

Ghazanfari (2003) in his study showed that there is a significant positive correlation between informational and normative identity processing styles and mental health. Also, there is a significant negative between confused identity style and amount of mental health.

Hosseini Tabatabai (1998) in her study revealed that people in confuse base is more used emotion-based resistance style and people with successful base is often used problem-based method.

Results of Vaillant (2000) suggest that those who use efficient defense mechanisms such as humor and sublimation have created less defensive reactions in their spouses than those who use inefficient mechanisms such as rationalization and separating, while they unconsciously reduced anxiety.

Azimi (2009) in his research did not find a significant relationship between sensation seeking and normative identity style. But he found that the sensation seeking, confused-avoidant identity and informational identity style are significantly related. During this study it was concluded that there is a relationship between confused identity style and high levels of sensation seeking.

Bakhshi (2006) in a research showed that there is a correlation between individual's condition in terms of self-fascination and the way he uses defense mechanisms. That is, the type of vulnerable narcissism has more positive relationship with immature defense mechanisms and then with neurotic defense mechanisms. Additionally, narcissistic noble-minded has a negative relationship with neurotic defense mechanisms and a significant positive relationship with immature mechanisms.

The research results of Besharat (2008) suggest that there is a significant correlation between alexithymia and mature defense style. Further, there is a significant positive correlation between alexithymia and immature and neurotic defense styles.

In a research by Moghanloo (2009), it was revealed that extroversion traits, agreeableness and conscientiousness were positively associated with informational and normative identity. Flexibility feature had positive correlation with informational identity and negative correlation with normative identity. However, neuroticism negatively correlated with informational and normative identity and positively correlated with confused identity.

In a longitudinal study, Vaillant & Vaillant (1992; quoted by Kwon 1999) indicated that immaturity of defensive style predicted psychological adjustment in the next 15 years. In contrast, Vaillant (1986; quoted by Offer & et al 2000) pointed this opinion that defense mechanisms, especially those that are described as immature, are indicative of

psychopathology (Offer & et al, 2000). So, some people who have maintained an immature defense style in their adulthood are at greater risk for psychological disorders (Vaillant & Vaillant 1992; quoted by Kwon 1999). Also, in longitudinal studies, immature defense mechanisms are empirically associated with psychological poor outcomes (Vaillant 1988; quoted by Kwon & Olson 2007).

Khanjani & Bahmanpour (2010) in a study found that confused-avoidant style was the most important style that had low public health. However, normative, informational, and commitment styles had the highest levels of public health.

The results of Sadegh Zadeh (2011) research revealed that informational identity style has a direct effect on public health; meanwhile diffuse-avoidant has a negative effect.

Gerald & Munro (2008) in their research found these results that people with informational identity style may not become daunted if exposed to sudden changes in the environment, and in stressful conditions have very good psychological performance.

Bosma & Vleioras (2008) asserted that there was no significant difference in public health of people with informational identity style and normative identity style.

Berzonsky & Kuk (2009) showed that students with informational and normative identity styles reported higher scores on public health compared to students with a confused-avoidant identity style.

In an exploratory research that was conducted by Speen Howen (1997; quoted by Sadeghi 2012) the results showed that patients with anxiety disorders gained higher scores in neurotic defensive style compared to control group. Moreover, it was evident that anxiety scores showed positive relationship with neurotic and immature defense styles and negative relationship with developed defense style. In level of mechanisms the anxiety was also significantly associated with bodybuilding.

The results of variance analysis of Nishimura (1998)

study illustrated that both immature defenses and neurotic defenses showed main effect for anxiety and anxiety related symptoms. But, for depression and impulsive anger the immature defenses indicated main effects.

Horney believed that neurotic defenses often emphasized on perceptions of imposed expectations from society (Flett & et al 2005).

According to the study purpose and research background, the following hypothesis was tested.

There is a relationship between identity style and defense mechanisms in patients with GID.

Research method

The present study was descriptive and research design was of correlation. For this purpose, 100 individuals were selected through convenience sampling among patients suffering GID in the district health centers located in Sanandaj, Tabriz, Kermanshah and Tehran. The defensive mechanisms (DSQ-40) (Andrew & et al 1993), attachment styles and identity styles (isi-6G) (Brozensky 1989) questionnaires were used to collect data.

Defense Styles Questionnaire (DSQ-40): Defensive Styles Questionnaire (DSQ-40) assesses defensive behavior by empirical evaluation of conscious derivatives of defense mechanisms in everyday life. Its 40 questions version developed by Andrews & et al (1993) which evaluates 20 defense mechanisms at three levels of mature, neurotic, and immature (Andrews, Singh, & Watson 1998). This questionnaire has been translated and evaluated in countries such as Japan, China, France, and Portugal. It had good reliability and validity in terms of these studies (Heydari Nasab 2006). In Iran, it has been examined and normalized by Heydari Nasab (2006). The alpha coefficient was investigated in studied groups separately

in students of both sexes of sample and defense styles groups. The highest and the lowest total alpha were observed in male (0.81) and female students (0.72) respectively. All correlations related to two performs of the questionnaire in studied groups were significant compared to critical values. This indicates that the questionnaire has good validity (Heydari Nasab 2006).

Identity Style Inventory (isi-6G): This questionnaire was made by Brozensky (1989) to measure cognitive-social processes which adolescents use them in dealing with issues related to identity. In Brozensky's belief, teenagers choose three different orientation or three various identity processing styles. This scale assess three identity styles (informational, normative and confused-avoidant). It has 40 questions of which 11, 9, 10 and 10 questions were dedicated to informational identity style, normative identity style, confused-avoidant identity and to commitment scale, respectively. People respond to questions on a five-degree scale (strongly disagree = 1 to strongly agree = 5). Questions 9, 11, 14, 20 are scored reversely. Brozensky (1997) in third revised version of his questionnaire has reported Cronbach's alpha coefficients (N =618) of 0.70, 0.64, 0.76 and 0.71 for each of subscales of informational, normative, confused-avoidant identity styles and identity commitment, respectively. In Iran, Gharaee, Atef Vaheed, Dezhkam & Mohammadian (2005) have reported the reliability coefficients of 0.75, 0.72, 0.81, 0.85 for informational identity, normative and confused-avoidant styles, respectively. Farsi Nezhad (2004) reported the reliability coefficients for above identity styles and identity commitment about 0.77, 0.60, 0.66, and 0.68 respectively. Furthermore, Faizabadi (2005) reported reliability coefficients of 0.59, 0.64 and 0.78 for three informational, normative and confused-avoidant styles.

Research findings:

This section contains the hypothesis with obtained results that are presented below.

The research hypothesis: There is a relationship between identity styles and defense mechanisms in patients with gender identity disorder.

Variable	Informational	Normative	confused-avoidant	commitment	Immature	Mature	neurotic
Criterion variable							
Informational	-	0.577**	0.132	0.622**	-0.285**	0.236	0.019
Normative	-	-	0.086	0.410**	-0.259**	0.208*	0.037
confused-avoidant	-	-	-	0.088	0.218*	-0.001	0.212*
commitment	-	-	-	-	-0.182	0.272**	0.091
Predictor variable							
Immature	-	-	-	-	-	0.072	0.440**
Mature	-	-	-	-	-	-	0.496**
neurotic	-	-	-	-	-	-	-

** P< 0.01

* p< 0.05

Table 1: Correlation between identity styles and defense mechanisms variables

canonical correlation	Square of canonical correlation	Wilks' Lambda test	Chi-square test	df	p
0.491-1	0.241	0.716	31.766	12	0.002
0.228-2	0.051	0.943	5.555	6	0.475
0.071-3	0.005	0.995	0.475	2	0.788

Table 2: Canonical correlation between identity styles and defense mechanisms variables

The above results indicate that the first canonical correlation (0.491) that is calculated, the highest correlation, explains about 24.1% of criterion variable variance of identity style (informational, normative, confusion, avoidance, commitment). Second canonical correlation was calculated as 0.228, which is justified 5.1% of criterion variable variance of identity style (informational, normative, confusion-avoidant, commitment). The third canonical correlation is calculated by 0.071 which

explains 0.05% of criterion variable variance of identity style (informational, normative, confusion, avoidance, commitment).

	First root		Second root		Third root	
	r1	r11	r2	r22	r3	r33
Criterion variable						
Informational	0.755	0.570	-0.420	0.176	0.499	0.249
Normative	0.702	0.493	-0.162	0.026	-0.171	0.029
confused-avoidant	-0.429	0.184	-0.749	0.561	-0.224	0.011
commitment	0.616	0.379	-0.702	0.493	-0.241	0.058
Predictor variable						
Immature	-0.805	0.648	-0.327	0.107	-0.495	0.245
Mature	0.512	0.262	-0.673	0.453	-0.533	0.284
neurotic	-0.210	0.044	-0.973	0.947	-0.096	0.009

Table 3: canonical analysis of correlation coefficients or factor loadings of canonical identity styles and defense mechanisms variables

The results of above table shows that variables whose structure correlation was greater than 0.3, are considered as part of canonical variable based on a general rule. Variables whose structure correlation was less than above value are not considered as part of canonical variable with significant load. In first canonical correlation, variables of identity style (informational, normative, confused- avoidant, commitment) have maximum factor load as the criterion variable. Also, among predictor variables, the variables of defense mechanisms (immature, mature) have the highest factor load. In second canonical correlation, variable of identity style (confused-avoidant, commitment, informational) has the maximum load factor as the criterion variable. Further, among predictor variables, the variables of defense mechanisms (neuroticism, mature, immature) have the highest factor load. Finally, in third canonical correlation, variables of identity style (informational) have the maximum load factor as criterion variable. Moreover, among predictor variables, the variables of defense mechanisms (immature, mature) have the highest factor load. Informational, normative, commitment, confused-

avoidant, immature, and mature variables explained respectively 57% (0.570), 49.3% (0.493), 37.9% (0.379), 18.4% (0.184), 64.8% (0.648), 26.2% (0.262) of the variance of first canonical correlation. Variables of confused- avoidant, commitment, informational, neuroticism, mature and immature explained respectively 56.1% (0.561), 49.3% (0.493), 17.6% (0.176), 94.7% (0.947), 45.3% (0.453), and 10.7% (0.107) of the variance of second canonical correlation. And finally about the third canonical correlation the informational, mature and immature variables are justified respectively 24.9% (0.249), 28.4% (0.284), and 24.5% (0.245) of the variance.

Generally, predictor variables explain 31.8%, 50.2% and 18% of variance of the first, second and third canonical correlation respectively.

With regard to the results, it is evident that the research hypothesis that “there is relationship between identity styles and defense mechanisms in patients with gender identity disorder” is confirmed.

Research results:

Obtained data by canonical correlation showed that variable of neurotic and immature defense mechanisms (predictor variables) and confused- avoidant identity variable (criterion variable) had the highest factor loadings.

In this study, the mature defense mechanisms had positive significant relationship with informational identity style ($p = 0.018$, $r = 0.236$), normative identity style ($p = 0.038$, $r = 0.208$) and commitment identity style ($p = 0.006$, $r = 0.272$) based on the statistical findings.

This research is consistent with the studies of Saemi & et al (2009), Pour Yazdi & et al 2009, Tabayani Nian, Mahdavian & Kamkari (2010), Afzali & et al (2009), Andrews & et al (1993). Noteworthy explanations are that normal people are more used to mature defense mechanisms. This data is

consistent with the idea of Van & et al (2009). He believes that defense maturity is predictive factor of mental health throughout life. In the research literature there is evidence that the adapted defenses have been regularly related to mental health, compatibility in areas such as finding job, relationships, physical health (Vaillant 1976) and good performance.

Next, examining the relationships among variables and based on research findings, it was revealed that there were significant negative correlation between immature defenses mechanisms, informational identity style ($p = 0.004$, $r = 0.285$) and normative identity style ($p = 0.009$, $r = 0.259$). However, there was a significant positive correlation between immature defenses mechanisms and confused- avoidant identity style ($p = 0.030$, $r = 0.218$).

Immature defense mechanisms have negative and inverse correlation with informational identity styles. This means that whenever defenses are more immature the informational identity style gets away more. Instead, whenever defenses are more developed there is a direct positive relationship with informational identity style. This is consistent with much of the research done in this area (Brozensky & Ferrari 1996). Studies have shown that people who use the informational style are usually thoughtful, competent and conscientious; they also focused on the problem. These people have less boredom, stress and anxiety; they choose a good way to solve the life problems and rarely suffer from psychosocial depression. Additionally, they benefited adapted and mentally healthy methods which are mainly along with psychological satisfaction. They also use developed defense approaches (Brozensky & Kuk 2000). In a research under the name of identity styles, psychosocial development and academic performance, identity styles of students' adjustment and their psychosocial development and academic performance were investigated. The results have shown that students with informational identity style have more preparation for success

in a university environment. Moreover, they have higher levels of educational autonomy, a clear sense of educational goals, social skills and academic activities in a favorable manner. Students with diffuse / avoidant style have problems in this respect. Students with normative identity style had a clear sense of education but they had lower emotional autonomy and resistance compared to their counterparts with informational style.

In this study, there was no significant relationship between the following variables:

Neurotic defense mechanisms with informational identity style and commitment identity and normative, mature defense mechanisms with confused-avoidant identity style, and immature defense mechanism with commitment identity style.

What was found out after the study is the fact that some findings are not consistent with previous research. Thus, in previous research there was relationship between neurotic defense mechanisms with informational identity style, normative and commitment identity, but in this study no significant relationship was observed.

Furthermore, it was evident that heterosexual individuals fail to convince themselves to their parents and in self-acceptance they are confronted with serious obstacles. The symbol of rebirth takes place in them when their parents accept the sexual transitioned real identity (Bolin 1988; Saura & Barzak 1983).

It can similar to Marcia's theory (1976) about the types of identity and mode of diffuse identity status in which the adolescent neither makes decision, nor compromises and actively considers his options or choices. On the other hand, it is possible due to lack of coherent mechanism to help these people and their aloneness with a large amount of other problems; they have no motivation to work with researchers who sometimes referred to them to fill out a questionnaire and have no practical feedback for them. They consider this

unimportant. Finally, they have no tendency to retell self-inner, lost identity and to spread light on this darkness.

Also, the severity of GID is on a continuum from mild to severe condition in most cases (heterosexuality). In this study, subjects were selected from among those who referred for assistance to welfare centers. Indeed, despite the many similarities the research subjects are only from this certain group. Heydari (2006) reports that her research findings, including both main and additional findings, were based upon thematic relationship difficulty, thought disorder and perceptual confusion of these people. Further, many expected differences in response pattern due to individual differences and extreme scores obtained by some subjects, which is consistent with the findings of Tuber & Coates (1989).

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