

## Investigation of Personality Characteristics and Mental Health in People with Gender Identity Disorder (GID)

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### Abstract:

*The purpose of this study was to investigate personality traits and mental health of people with gender identity disorder and healthy control subjects. Measures of this survey are General Health Questionnaire (GHQ-28) and NEO's Inventory of Personality Features. The sample included 80 individuals with gender identity disorder and 80 healthy individuals and 25 patients with gender identity disorder postoperative transsexuals in this study reached the conclusion between personality traits and mental health disorders there is no significant difference between gender identity and common people. Also there are significant differences between personality characteristics of patients with gender identity disorder except in Responsibility and Agreeableness and mental health of people with Gender Identity Disorder and Gender Identity Disorder scale of postoperative anxiety and sleep disturbance and depression, there are significant differences. There are significant differences between mental health of people with*

*gender identity disorder postoperative in anxiety and sleep disorders and depression.*

**Key words:** Gender Identity Disorder, Mental Health, personality

## **Introduction**

In growth of each individual, personality characteristics and mental health are very important. Especially in light of the characteristics of the early forms in training parents and mental health in the shadow of the character is formed.

Thus, knowledge of psychology and how to use it in life is essential for anyone particularly vulnerable individuals and communities, among which may be noted that people with gender identity disorder, family support is important in development(Enferadi,2011). There are people who have gender identity disorder is very unhappy and wretched diagnostic from criteria and their physical structure. It's quite opposite gender as one of their own and become a strong desire to join them exert.

The quality of image of person causes disorders and changes in behavior and procedures. Expectation that such patients to conventional makeup, and clothes to wear and can transform your hormonal environment strongly there (Kohannejad, 2012).

People with gender identity disorder often suffer from anxiety and depression and this is not surprising given that they have a bad psychological state. Wanting a sex change male-oriented than men, by his own interpretation is known as a heterosexual preference, because he really considers himself a woman. It's anticipated that the changes made when wingers often wear clothing of the opposite sex other than their denunciation provoke, as indeed in many countries it is illegal for men to wear women's clothes (Azad, 2008).

Gender Identity Disorder (GID) includes extensive

category which society doesn't support them and the best way to treat gender identity disorder is surgery to change sex and treatment of sex assignment is divided into four stages: 1\_ Hormone replacement therapy, 2\_ Second Sex reception features, 3\_Change hair forever, 4\_Facial Plastic Surgery (Sullivan, 2012).

Gladio in his studies found that the difference in levels of sex hormone-oriented adult males, gay straight men gay men exist is negligible. On other hand, today's society, including mental health issues is important and its study among high-risk groups is very important and sensitive.

Particularly when they are caught in limbo own body and because of this, people who have depression and guilt in their life so mental health is low in them.

People with gender identity disorder characteristics and personality disorder subscales were higher than normal levels of personality disorders, some of them obvious. It can be noted theater personality disorder.

As importance of study of personality characteristics and mental health among people with gender identity disorder and normal individuals, aim of this study is to investigate personality and mental health in people with gender identity disorder. The findings of this study will show whether the personality traits and mental health of people with gender identity disorder and normal subjects there is difference?

## **Method**

This research survey is based on comparison.

## **Sample**

The population studied included all patients (n = 138) diagnosed with gender identity disorder who have referred to Urology Imam Reza Hospital in Mashhad and Mirdamad

Hospital in Tehran. The 40 female and 40 male healthy individuals were selected for sampling.

The estimation of sample size is based on principle of informed consent of those who agreed to fill out the questionnaires. Therefore, it was not possible to investigate and study entire population of people with gender identity disorder in Mashhad and Tehran, so samples were randomly selected.

Given that total population of about 138 people were admitted to hospital patients and of those, about 105 people were satisfied that fill the questionnaires. Sampling and sampling methods are available. It should be noted that the normal subjects were selected by random sampling.

## **Measures**

### **1- General Health Questionnaire (28\_GHQ)**

This test has 28 items in this questionnaire will be given to two groups of phenomena: a) the inability of people to enjoy a healthy, productive action, b) new phenomena of with disabilities. This questionnaire has four subscales :(Physical symptoms, symptoms of anxiety and insomnia, social dysfunction, symptoms of depression). This scale has been run on normal group consisted of 80 subjects were randomly assigned in 1392 in Mashhad and Tehran. And Cranach's alpha was calculated at  $p = 0.05$  was significant and reliability of Mental Health questionnaire %0.91.

### **2- NEO questionnaire**

This questionnaire is a personality test that is based on factor analyzing which has 60 items to assess five main characters.

In this short form each factor is measured by 12 questions. The top five characters include neurosis, extraversion, flexibility, agreeableness, responsibility and conscientiousness (Enferadi, 2011). This scale has been run on normal group consisted of 80 subjects were randomly assigned

in 1392 in Mashhad and Tehran. And Cranach's alpha was calculated at  $p = 0.05$  was significant and reliability of Mental Health questionnaire %0.81.

## Procedure

People with gender identity disorder who had referred to Urology Mashhad Imam Reza Hospital and Mirdamad hospital in Tehran or mental health questionnaire GHQ\_28 questionnaire were given the NEO Personality Characteristics. It is noted that many people refused to fill out the questionnaire. Into number of people with gender identity disorder, and normal manner, we randomly selected a total of 138 subjects were diagnosed with gender identity disorder, only 80 responded. It is noted that the implementation of this questionnaire is very important relationships with these people. And 80 were ordinary people. Independent t-tests were used for data analysis.

Variable	Group	Average	Standard deviation	df.	T test	Sig.
Neurosis	Normal people	9.54	6.84	79	4.52	0.06
	People with Gender Identity Disorder	8.05	6.64			
Extroversion	Normal people	13.32	9.10	79	2.46	0.00
	People with Gender Identity Disorder	11.93	7.97			
The desire for new experiences	Normal people	12.25	8.26	79	5.80	0.07
	People with Gender Identity Disorder	12.63	8.14			
Agreeableness	Normal people	12.96	8.74	79	2.58	0.07
	People with Gender Identity Disorder	12.79	8.26			
Responsibility	Normal people	12.64	9.52	79	0.2	0.07
	People with Gender Identity Disorder	13.22	9.06			

**Table 1. T-test results for comparison of personality characteristics in normal subjects and patients with gender identity disorder in the NEO**

According to Table 1, with an emphasis on T-test, it can be pointed that there is no significant difference between subscale of NEO in normal individuals and individuals with Gender Identity Disorder level ( $\alpha=0.05$ ).

Variable	Group	Average	Standard deviation	df.	T test	Sig.
Physical Symptoms	Normal people	4.06	3.95	63	1.29	0.00
	People with Gender Identity Disorder	7.13	8.64			
anxiety symptoms and sleep disorder	Normal people	6.42	7.10	63	0.24	0.00
	People with Gender Identity Disorder	7.18	6.11			
Social functioning	Normal people	6.42	5.11	63	0.66	0.00
	People with Gender Identity Disorder	7.18	8.42			
Depression	Normal people	6.08	7.12	79	1.98	0.00
	People with Gender Identity Disorder	8.80	8.35			

**Table 2. T-test results for comparison of mental health in normal individuals and individuals with Gender Identity Disorder in GHQ-28**

According to Table 2, with emphasis on T-test it may be concluded that there are significant difference in test's subscales of mental health(GHQ), physical symptoms, symptoms of anxiety and insomnia, social dysfunction and depression in normal individuals and individuals with Gender Identity Disorder level ( $\alpha=0.05$ ).

Variable	Group	Average	Standard deviation	df.	T test	Sig.
Neurosis	People with Gender Identity Disorder (GID)	8.15	6.64	63	1.29	0.07
	People with Gender Identity Disorder (GID) after surgery	10.40	7.46			
Extroversion	People with Gender Identity Disorder (GID)	11.93	7.97	63	0.24	0.08
	People with Gender Identity Disorder (GID) after surgery	12.43	8.14			
The desire for new experiences	People with Gender Identity Disorder (GID)	11.09	7.69	63	0.66	0.08
	People with Gender Identity Disorder (GID) after surgery	12.40	6.66			
Agreeableness	People with Gender Identity Disorder (GID)	12.79	8.26	63	0.53	0.00
	People with Gender Identity Disorder (GID) after surgery	11.06	7.69			
Responsibility	People with Gender Identity Disorder (GID)	13.22	9.74		0.16	0.07
	People with Gender Identity Disorder (GID) after surgery	12.46	8.69			

**Table 3. Results of independent t-test to compare the characteristics of patients with gender identity disorder, and people with gender identity disorder after surgery to NEO**

According to Table 3, with emphasis on T-test, it may be noted that there is no significant difference between subscale of NEO; neurosis, introversion and extraversion, agreeableness, the

desire for new experiences and responsibility of normal individuals and those with gender identity disorder ( $\alpha=0.05$ ). There is significant difference between means of two groups in agreeableness's subscale.

Variable	Group	Average	Standard deviation	df.	T test	Sig.
Physical Symptoms	People with Gender Identity Disorder (GID)	9.54	7.54	63	1.56	0.07
	People with Gender Identity Disorder (GID) after surgery	8.24	6.86			
Symptoms of Anxiety and sleep disorder	People with Gender Identity Disorder (GID)	10.52	9.40	63	1.17	0.01
	People with Gender Identity Disorder (GID) after surgery	6	7.28			
Social functioning	People with Gender Identity Disorder (GID)	6.42	7.10	63	0.30	0.08
	People with Gender Identity Disorder (GID) after surgery	8.05	9.01			
Depression	People with Gender Identity Disorder (GID)	8.80	9.12	63	1.15	0.00
	People with Gender Identity Disorder (GID) after surgery	8	7.02			

**Table 4 .Results of independent t-test to compare the mental health of individuals with gender identity disorders, and people with gender identity disorder after surgery GHQ-28 test**

According to Table 4, with emphasis on T-test has been obtained it may be the noted that there is no significant difference between small-subscale tests of GHQ, somatic symptoms and social functioning in normal individuals and individuals with gender identity disorder in the ( $\alpha=0.05$ ). But in rejecting the subscales of anxiety symptoms, sleep disturbance and depression, there are significant differences between the means of two groups And symptoms of anxiety and sleep disorders, and depression in people with gender identity disorder who did not have gender reassignment surgery was higher.

## **Discussion and Conclusion**

Since the term neurosis is meant to emotional instability. People with gender identity disorder experience more emotional instability and because they are less able to control their impulse and are much weaker than others, but this is the opposite of all these findings between healthy individuals and individuals with gender identity disorder, there was no significant difference in dimensions of neurosis but in extraversion subscale there was a significant difference between the two groups. It can be pointed out that since those early childhood ostracized by friends and family members who could not make social good and healthy subjects, unconsciously opposing traits of extraversion means introspection grows in population. It also found that there is significant difference between mental health of normal individuals and mental health of people with gender identity disorder. Mental health in normal subjects received lower scores in the test.

And whatever individuals get low scores have more mental health in comparison people with gender identity disorder. It implies that people with gender identity disorder face with problems such as social isolation, forced marriages, suicides, attempted to escape from the house and even prostitution that much of this communication because of inappropriate relationship of the family with all of these people are affected by mental health patients. In people with gender identity disorder is seen in all types of cosmetic surgery in addition to changing their penis if they do all kinds of cosmetic surgery and disfigure is a sign of symptoms. This in turn affects the social work. This research shows that depressed people with Gender Identity Disorder Gender Identity Disorder are more people who have undergone surgery. In fact, fingers' pointing towards family and society is looking to get rid of symptoms of depression and anxiety treatment is the best way. The depression is suicide to your child when parents are aware of

problem the first thing they do disowns their child. Then the child with emotional and economic problems faced, could not endure the burden of these problems, and suicide is the best solution. The problem with these people because they feel they refused to blame why people were trapped in Limbo and This is because all people with gender identity disorder first and most important task in life is sex change surgery in Maslow's hierarchy is still in first place for their category will not flourish. Among those not acted, gender identity disorder with psychological comfort and overall quality of life in a meaningful relationship. People with gender identity disorder that meets their basic needs and are looking for higher needs of their GID greatly reduced and the quality of their lives significantly increased. This indicates different levels of quality of life of patients with gender identity disorder due to the differences in their needs are different.

One limitation of this study is limited sample and non-deterministic generalization results this means that there is no possibility of verification questionnaire results, given that the patient may not wish to respond, not even willing to give personal information, thus is not possible to generalize the final result and these results may be quite different results in two different therapeutic areas. Finally, it is suggested for people who cannot obscure trance community groups and operating conditions have to be created. Classes and group therapy for people with gender identity disorder once a week will be held (to accept his sexuality and did not attempt a sex change operation).

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