

AN OVERVIEW OF THE THIRD GENDER- TRANSSEXUALS

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Abstract

The issues about transgender have become hot at present, which focuses on meeting the grievances and needs of transgender. Society isolates them naturally based on the abnormality in their body that creates a contradiction between man and woman. Government and non government voluntary organizations have become sensitive to the issues and needs of transgender. It is the need of the hour for a common man to know the facts related to Transsexuals. The article aims at explaining i.how transsexuals feel, ii.why there is sexual identity disorder, and iii.the causes of transsexuals. The types of transsexuals and the treatment for changing sex have been also discussed.

Introduction

The transsexual is a person who feels trapped in the body of the opposite sex .Case histories of transsexuals indicate that their cross-gender identifies began in childhood and continued into adult hood. Gender identification does not automatically correspond to one's physical sex but in most cases appears to be established early by environmental factors – probably during the first 18 months of life and is highly resistant to change thereafter. (Green, Money & Ehrhardt, 1972, p.974; and Sabalis 1974, p.600). The transsexual occur because of disorder in their chromosomal formula i.e. the 'X' chromosome and 'Y' chromosome and 'X' chromosome were jointed mean it is a female this is a normal but in "XY" chromosome like this there will be "XXY", "XXYY" is there because of this only the transsexual were born. (Dinathandi, 2004, p.13)

Klinefelter's syndrome (47,XXY) : Those individuals who suffer from this syndrome have a male transsexual appearance and under developed external male sexual organs. These people suffer from gynecomastia (Excessive development of the mammary glands) They are sterile XXX syndrome. The individual has female morphology but very masculine looks. Often, they are mentally retarded and cannot reproduce. XYY or YY syndrome (47XYY, 46YY) : These individuals have the appearance of males, are tall, have heavy acne and are mentally deficient.

Girl with varying degrees of masculine characteristics. In girl (46,XX), masculinization may be because by an excessive amount of androgen (male hormones) being produced by the adrenal glands. In boy (46,XY), Feminization might be due to an insufficient production of androgens. (I. Aguilar and H.Galbes 1991, p.p.114-116).

Definitions

"A transsexual is a person who emotionally feels herself of himself to be a member of the other sex or a person who has had her or his external sexual organs removed or altered in order to resemble the other sex". (Oxford Dictionary ,1999, p.364).

“The transsexual is a person who feels trapped in the body of the opposite sex”.
(James C.Coleman 1964, p.597).

“People who were assigned a gender at birth, based on their genitals, but who feel that this is a false or incomplete description of themselves”.

Feelings of Transsexual

A transsexual feels, that he or she is trapped the wrong body. A female transsexual feels she is really a man who by a mistake of nature ended up in the body of a woman. A transsexual man involved sexually with another man does not define the relationship as homosexual but as a conventional one involving a woman (himself) and a man.

Sexual Identify Disorder

Sexual identify disorder is defined as the “discord between the physical sex and the psychological sex of the Individual” (H.Galbes 1991, p.114). The Individual tends to have an abnormal opinion about his own sex. This sexual deviation is more frequent among males. The man possesses a normal genetic formula, normal gonads and is physically and sexually male; yet he considers himself to be a woman imprisoned in a man’s body or vice versa.

Frequency of Inter sexual or Transsexual

As early as 1937 young stated that the frequency of intersexual cases (where the individual simultaneously carries visible characteristics of both sexes) was one per 1000 of the population. The Gender identify disorder is three times as frequent in men as it is in women. According to the most recent studies in our western society. One or two in every 10,000 people are transsexual. Today more than 5 per 1000 suffer some disorder in their chromosomal formula.

Sexual Expression of Transsexual

Sexual expression of transsexual is different from homosexuality, which consists in feeling sexually attracted to members of the same sex. But transsexual are not homosexuals and may not even wish to have sexual activity. As opposed to the homosexual, this type of person does not accept his own sex, and feels the need to transform himself physically, socially and professionally into the opposite sex. Often the sexual preferences of the transsexual are oriented toward members of the same biological sex, but most do not identify with the homosexual community and may in fact be hostile to it.

Changing Sex Among Transsexual

Many people with gender identify disorder are extremely unhappy and for this reason they decide to acquire as many characteristics as possible of the opposite sex. They will

often turn to medical or surgical treatment in order to accomplish this. A team of surgeons and an endocrinologist in Denmark started to combine surgery and hormones to change a person's Sex. In 1962 the well publicized transformation of George Jorgensen an American, into Miss Christine Jorgensen brought a flood of letters to the surgeons in Denmark. The press coverage of this first sex change operation brought hope to many unhappy transsexuals. The one thing all transsexuals share is a desperate, determined desire not to continue to live in the wrong body. The risks or pain of surgery, or of hormonal treatments and the ridicule to which they are often exposed are seen a trivial compared to the relief at finally becoming the right sex.

Causes of Transsexualism

There is no scientifically proven cause of transsexualism. However, many theories have been proposed which suggest that the cause of transsexualism has its roots in biology.

i. Psychological Causes

Many reasons for transsexualism have been proposed. Those reasons have usually been psychological including 'Over bearing mothers' and 'Absent fathers', parents who wanted a child of the other sex, and repressed homosexuality.

ii. Physical Causes

Many transsexual people have assumed that there is a physical cause of their transsexualism, because they claim to have had the feeling of being a girl or a boy for as long as they remember.

Types of Transsexualism

True Hermaphroditism – when the individuals genitals are made up of both testicular and ovarian tissue.

- i. Queer:** Queer is a controversial word, literally meaning unusual, used by and for people whose sexual orientation and gender identity are against the normative.
- ii. Cross dresser:** A cross dresser is any person who wears the clothing of the opposite gender, for any reason. Cross dressing is one type of transgender behaviour.
- iii. Transvestic Fetishism:** Transvestic fetishism is a sexual fetish for the clothing of the opposite gender. It is one of a number of cross – dressing behaviours.
- iv. Male Pseudohermaphroditism:** when there are testicles, although the individual also has female physical sexual characteristics.
- v. Female pseudohermaphroditism:** when there are ovaries, although, the individual also has male sexual characteristics.

- vi. Transmen:** Transmen are transsexual people who were assigned female sex at birth and who feel that this is not an accurate or complete description of themselves. They therefore assume a male gender identity or strive to present in a more male gender role.
- vii. Transwomen:** Transwomen are transsexual people who were assigned male sex at birth and who feel that this is not an accurate or complete description of themselves. They therefore assume a female gender identity or strive to present in a more female gender role.
- viii. Inter sexual:** An intersexual is someone who is born with genitalia and secondary sexual characteristics of indeterminate sex, or which combine features of both sexes.

Brain of Transsexual

Transsexual women have a female brain and transsexual men have a male brain. This evidence concerns the central subdivision of the bed nucleus of the stria terminalis BSTc. Males have a larger BSTc than females ; in a study of six male to female transsexuals 'brains, it was found that all had a female – sized BSTc.

Treatment for Changing Sex

i. Estrogens

Through this treatment, men achieve development of breasts, a decrease in muscle size and smoothness of the skin. At the same time, erections diminish and the prostate gland and the seminal vesicles atrophy. However, there are no changes to facial hair or to the voice. The genetic sex does not change.

ii. Surgery to Feminize

Surgery offers results which are much more visible in the case of would be women than in that of would be men. It consists of removal of the penis and testicles, and the creation of a false vagina and of external female genitals. The vagina is even functional.

iii. Androgynous

The woman transsexual is given masculine hormone (testosterone) which stops menstruation, makes facial and body hair appear and lowers the voice.

iv. Surgery to Masculinize

As far as surgery is concerned, this is less successful than in the case of the man. Breasts must be reduced surgically. The penis can be artificially constructed, but it is not able to have an erection, and it remains insensitive to touch. An inflatable device is needed along with a simulator of ejaculation if erection is wanted. Such devices can be very

awkward. For this reason, many women Transsexuals submit to breast reductions and removal of the uterus but they do not ask for an artificial penis.

v. Gender Reassignment Therapy

Most transsexual men and women suffer from great psychological and emotional pain due to the conflict between their gender identify and their original gender role and anatomy. They find their only recourse is to change their gender role and undergo gender reassignment therapy. This may include taking hormones and having sex reassignment surgery to modify their primary and secondary sexual characteristics.

The requirements for hormone replacement therapy vary greatly. Often a minimum time period of psychological counseling is required, along with a time of living in the desired gender role in order to assure they can psychologically function in that life role. This period is usually called the Real life test (RLT). Generally speaking, physicians who perform sex – reassignment surgery require the patient to live as the opposite gender in all possible ways for at least a year (Cross – live) prior to the start of surgery. The RLT is usually part of a battery of requirements. Other frequent requirements are regular psychological counseling and letters of recommendation for this surgery.

vi. Hormone Replacement Therapy

For both transsexual men and women hormone replacement therapy (HRT) causes the development of the secondary sexual characteristics of their desired gender. The already existing primary and secondary sexual characteristics are not undone by HRT; surgery is required to remove them or change their appearance; transwomen also require epilation or remove their unwanted facial and, if necessary, body hair.

vii. Sex Reassignment Surgery

Sex reassignment surgery consists of processes transsexual women and men take in order to match their anatomical sex to their gender identity; however, this surgery to correct genitalia (SRS) is also very expensive and not every where covered by public or private health insurance. Prior to surgery, transmen and women are often referred to as pre-operative those who have already had the surgery may be referred to as post-operative or simply identified by the sex and sexual status to which they have ascribed. Not all transsexual people are able to or choose to have sexual reassignment surgery, although they live constantly in their target gender role; these are often called non-operative.

Conclusion

The first thing that needs to be attempted obviously is to understand his/her psychology. The person suffering a deviation from what is considered normal in sexuality,

usually suffers, in addition from a persecution complex. On the other hand, the aberrant practice is enough to provide an exclusion complex for other non-erotic social activities entertainment, labour relations, social and legal consideration etc. All this promotes the aberrant attitudes of the deviated individual, and affirms his/her tendencies even more. To truly help a person with some form of sexual deviation, it is important that in no way should they be socially isolated. If instead of extending bridges we dig deeper holes, communication will never be established, and the distances will become beyond reach.

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