Impact Of Resilience Strategies On Internalized Transphobia And Body Esteem Of Transgender Population In Peshawar, Pakistan

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Abstract
This research is designed to examine the relationship between internalized transphobia of transgender people, resilience strategies and perception of their own body (body esteem). Regression analysis was used to study the association among these variables based on data collected from 100 respondents from Peshawar city (Pakistan) who identified themselves as transgenders. The scales for self-reported internalized transphobia, body esteem and resilience strategies were utilized as measures in this study. According to the findings, there is a strong negative relationship between internalized transphobia and resilience strategies. On the other hand, it was found that body esteem increases with increase in coping skills (resilience) among transgenders. These results highlight how resilience can help against internalized transphobia by fostering positive psychosexual outcomes such as body esteem.

Keywords: body esteem, internalized transphobia, resilience strategies, Peshawar, transgender.

Introduction
It is indisputable that gender diversity has gained a lot of recognition globally, thus demanding people from every walk of life to understand more about it and consequently leading to the understanding of human identities as being complex (Bussey, 2011). This discussion revolves around transsexuals who are seen as abnormal because they do not conform themselves within traditional gender roles but rather identify themselves beyond those limits set by society for men or women (Hines, 2007). The term “transgender” acts like an umbrella ¹under which all these different types of people fall such as transvestites, cross dressers, and those who want opposite sex organs (Greenblatt & Greenblatt, 2011). In addition, it refers to those persons who change their bodies medically in order to match them with what they feel inside as being true about themselves concerning their gender identity (Camminga, 2019). Sometimes transgender individuals become part and parcel with lesbians’ gays bisexuals forming LGBT community as a whole (Mumcu & Lough, 2017).

According to The Human Rights Campaign (2020), transgenderism refers to individuals whose gender identities differ from those assigned them at birth. There are two main groups under this umbrella; binary and non-binary. Binary transgenders identify as either male or female, but non-binary people do not subscribe to such limited options (Kaplan & Berkley, 2021). However, regardless of how they define themselves in particular transgenders face many problems with the most common one being transphobia (Lombardi, 2011). Transphobia is shown through negative attitudes and unfair treatment against these persons due to their gender identity or expression alone (Bettcher, 2014). The mental health impacts

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that come as a result of such discriminations among transgender population have been widely studied; thus, they become more prone to different forms of ill-mental states as society continues rejecting them (Meyer, 2003).

Internalized transphobia, where a person accepts within themselves society’s bias against their gender identity, creates an uneasy environment and mental distress (Whelehan & Bolin, 2015). This event involves adopting the norms and expectations of social gender roles which leads to guilt and hatred for not conforming to the recognized manliness or womanliness as defined by a particular culture (Hendricks & Testa, 2012; Bockting & Coleman, 2016). In a wellbeing study by Cronin et al. (2019), investigated the relationship between internalized transphobia and self-esteem finding that it is associated with poor mental health such as lower life satisfaction and decreased self esteem. Additionally, reinforcing these findings, Scandurra et al.’s (2018) research found out how anti-transgender discrimination can worsen mental health problems but resilience acts as a buffer against this negative cycle when combined with other protective factors. This points out that there are complex connections among societal biasness, self-stigma and psychological wellness of transgender people thus demanding broad based interventions that seek to address different dimensions of internalized transphobia so as to allow trans individuals to flourish in their lives.

Orth and Robins (2022) define self-esteem as a person’s judgement of their own worth, and that judgement could be positive or negative. According to Yumurtacı (2012), body image refers to subjective perception or consciousness concerning physical appearance; sometimes used interchangeably with ‘body esteem’ which means overall evaluative attitude towards one’s own body whether good/bad (Cecil & Stanley, 1997; Mendelson et al., 2001). Frequently mental health among transgender people gets profoundly affected by social attitudes towards their looks, life stories or feelings (McNeil et al., 2017). This indicates that mental health professionals should recognize the significance of self-esteem issues related to body image problems among trans populations and provide appropriate interventions in supportive environments that validate gender diversity.

People identified as transgenders employ different techniques or methods of resilience in order to boost their mental health. By increasing level of resilience in their lives transgender individual feel satisfied with their current identity (Testa et al., 2017). This has been shown to work by creating social support networks and fostering a sense of belongingness which helps reduce bad psychological outcomes (Barr et al., 2016) Secondly; having someone to look up to in life helps us become more resilient in the face of challenges hence it's important for one person not only be limited towards their immediate environment but rather try exposing themselves widely so as they may come across many individuals capable acting as motivation sources during times when we need them most especially all through our lives. According to researchers like Bird et al. (2012) level of resilience can be increased in individuals tagged as transgender by introducing role models in their lives.

This research aims to build on current theories, particularly the minority stress theory, about transgender mental health. Psychology has become increasingly interested in trans and gender nonconforming people because they are more visible now than ever before (Pipkin et al., 2023). Nonetheless, most research in this arena has concentrated on physical or medical issues; therefore, there is a need for more exploration into other areas of psychology (Abbas, 2021). This study wants to help us learn what all affects the mental wellness among people who identify as transgender by investigating different areas related to their resilience and psychological well-being.

To find out what the problem is, this study aims to look at how mental health among transgender people can be improved from resilience (Trinh et al., 2022). Internalized transphobia may cause sexual problems and prevent them through resilience interaction are
the main subjects that will be discussed in this paper. In fact, there is not much information available about these points of contact between different fields which helps fill up missing parts in knowledge (Liebowitz et al., 2023). This topic has been chosen because it is very sophisticated given that most of the literature concentrates on marginalized communities but fails to go deep enough into such fine details concerning mental health among transgender individuals. We hope that our research will shed more light on how best to enhance sexual well-being by examining various aspects relating to psychological adaptation nature among different groups with unique gender identities like cisgender women or men compared against those who identify as nonbinary persons for example.

**Literature Review**

**Transgenders**
Irrespective of whether they recognize themselves as either non-binary or binary, transgender people face many challenges that are sparked by transphobia (Lombardi, 2010). Transphobia refers to a preconception held by individual’s concerning transgender individuals which is based on their perceived differences or transgender identity (Bettcher, 2014). This pervasive prejudice affects mental health in such a way that victims become susceptible to various psychological problems due to continuous social maltreatment (Meyer, 2003). According to Scandurra et al.’s (2018) research findings it is clear that self-hate intensifies the impact of anti-transgender discrimination on mental well-being; however, resilience acts as an antidote within this destructive process. Therefore, we should do everything possible because these points indicate how necessary inclusive strategies are for addressing transphobic attitudes while building up strong points among the gender variant communities so that they can thrive psychologically.

In a very thorough review of 1478 papers, McCann et al. (2016) narrowed down to 19 studies by following strict inclusion and exclusion criteria. This process of selecting only the best papers strongly indicated that we should put transgender people first when thinking about their needs; it also showed that there is a shared desire among everyone involved in this kind of work for improving the quality of life and health outcomes experienced by trans folks. Discrimination can really harm them mentally but many still manage to stay strong with positive coping skills as well. These findings are consistent with what has already been discovered through studying other areas so it just goes on proving that even though they face so much difficulty in life, these individuals have some built-in abilities which allow them to adjust themselves better than anyone else might think possible.

**Resilience Strategies**
In a world that does not understand or accept gender diversity easily, transgender people have to be very strong. These individuals work (Gorman et al., 2022) on developing various resilience tactics to handle stressors related with their gender identity. Furthermore, there is a complex relationship between life events and resilience among transgender persons as studied by Hendricks and Testa (2012). It looked at how different stressors can affect resiliency within the transgender community among different types of transgenders. Based on Luther et al.’s (2000) definition, resilience refers to positive adjustment in specific environments or circumstances which also reflects the fact that findings show that learning processes and strategies are multiple for them (Hendricks & Testa, 2012).

In addition, Catelan et al. (2022) looked at how depression, self-esteem and resilience are related to each other and found that all aspects of sexual life are deeply connected with self-confidence and ability to recover from trauma. When coupled with lower levels of resilience, higher rates of depressive symptoms were shown to be associated with reduced sexual satisfaction (Catelan et al., 2022). Mental health disparities were evident among non-binary transgender people compared with their binary peers as consistently found by
Eisenberg et al.’s (2017) study on mental health outcome differences between these two groups.

Nevertheless, within such difficult times some strategies for resilience building may be used by transsexuals in order to enhance psychological well-being. First off, according to Testa et al.’s (2017) research it was observed that one’s ability for finding fulfillment in being themselves can greatly increase their chances at bouncing back from negative experiences stronger than ever before. Secondly, Barr et al.’s (2016) study concluded that creating social support networks where individuals feel like they belong and are accepted can help them cope better with adverse psychological events. Finally, Bird et al.’s (2012) investigation into role models showed that having more exposure to such figures tends make one more resilient so far as transgender people go through this process; which is indicative of positive growth even in the face of challenges like those encountered by transitional populations.

Resilience strategies and internalized transphobia
Particularly among the transgender community, the connection between resilience strategies and internalized transphobia is complex and multilayered (McConnell et al., 2018). For example, resilience strategies refer to a wide range of coping mechanisms and adaptive processes that help deal with various problems that arise from gender identity (Mizock & Mueser, 2014). Conversely, internalized transphobia refers to an individual’s self-acceptance of negative societal attitudes or perceptions about being transgender. In other words, it implies how people relate themselves with what others think about them as far as their gender is concerned. Furthermore; this interaction points out that along their journey towards mental empowerment and self-actualization despite inner turmoil and outer tribulations; these two – resilience strategies vis-à-vis internalized transphobia – may play a key role for individuals who identify themselves as members of the third sex or those who do not conform fully to either male or female genders.

Transgender people use various methods aside from resilience strategies to decrease the harmful effects of internalized transphobia (Mizock & Mueser, 2014). This can be achieved by self-identifying one’s gender which demonstrates the importance of understanding and defining individual gender identity (Singh et al., 2014). Another critical factor is dealing with family relationships where having supportive ties within the family becomes a strong pillar for resilience (Walsh, 2015). Furthermore, being resilient means hoping for better days to come in future life; participating more socially; besides getting motivated by other activists’ efforts towards change making around them as wells those who have gone before them (Singh et al., 2011). Moreover. it has been found out that incorporating religion into one's belief system may help improve mental wellbeing or even act as an effective way of becoming strong again after failure (Fatima et al., 2023). These different approaches show how well transgender individuals are able to adapt themselves when facing inner obstacles brought about by societal discrimination against them thus leading not only to their mental health but empowerment too.

Reframing Mental Health Challenges is another strategy which can be used by persons alongside those given above. The core of this method involves knowing what one’s challenges are, thus making it possible to think about them differently in a way that empowers a person even more. Additionally, fostering Connection to a Trans-Affirming Community becomes an essential point too; this highlights the need for creating relationships within supportive and affirming communities. For individuals who identify as transgender or non-binary, connection with suchlike groups holds great significance because they realize how much it matters being recognized by people who have gone through similar things (Bull et al., 2022). Such connections offer not only emotional backing but also direction and validation thereby contributing positively towards their mental health journey according to Singh (2013). Therefore, these methods enable one
navigate through the complicated nature of his or her mental health problems with increased strength and resilience while at the same time fostering inclusive belongingness as well as inner power in relation to transgender identities.

According to Scandurra et al. (2018), internalized transphobia is a type of self-stigmatization in which people adopt society’s negative beliefs about their own gender identity. However, resilience tactics can go a long way in reducing the harmful effects of this condition. What Bitton and Weiss (2023) found is that those who use resilience strategies well are better at dealing with hostile messages and stigma concerning their gender identity. They also suggested that when individuals boost their psychological resilience it helps them feel stronger mentally while still accepting themselves; thus, breaking down any harm caused by inner hatred of being transgendered and creating space for positive experience with one’s sex through life.

**Resilience strategies and body esteem**

Many transgender individuals still maintain positive attitude and live fulfilling lives in the society despite facing prejudice and violence due to their gender identity. A lot of research has found that such people are so resilient that they can be hopeful about their future and accept themselves even when everything around them seems unfair (Pathak et al., 2020). According to Virupaksha and Muralidhar (2018) there are a number of key elements which contribute significantly towards building resilience among transgenders as a community these include but not limited to family support, educational achievements as well employment opportunities.

Resilience strategies have complex associations with different aspects of body image that are mediated by cultural, social and individual factors within diverse global contexts. Resilience strategies refer generally to methods used in dealing with difficulties or setbacks in life; these may vary depending on where one is coming from worldwide hence impacting greatly on how we feel about our bodies (Oorthuys et al., 2023). For instance, developing countries may have unique ways of building resilience based on their cultural norms being different from those found in other parts of the world (Ungar, 2008), thereby influencing their perception of body esteem (Matsumo & Israel, 2018). The positive body image can be developed by acceptance and the value of society together with adaptive coping mechanisms (Tylka & Wood-Barcalow, 2015). Nevertheless, in developed nations there are many self-help methods grounded on individualism, mental health care access and personal resilience (Zilberstein, 2021). In this case, media representation; societal benchmarks as well as levels of knowledge about mental illness are among those things that may shape how an individual values their physical appearance (Clay et al., 2005). Strategies for resilience might involve seeking help from professionals; caring for oneself or questioning conventional beauty standards (Skovholt & Trotter-Mathison, 2016). When considering different cultures, it is found that through these kinds of interactions people become more aware about what could boost their self-esteem concerning the body thus making them feel good about themselves regardless of where they come from or who they are according to Gordon et al. (2016).

**Internalized Transphobia**

Bockting (2015) coined the term “internalized transphobia” to describe what happens when people try to fit into society’s expectations about gender by suppressing their own transgender identity. This means that individuals take in and believe prejudices against themselves as a result of their gender identity which greatly contributes to discomfort and distress (Whelehan & Bolin, 2015). It refers to the idea of accepting societal gender norms so much so that one feels extreme shame or self-hatred for not being masculine/feminine enough or not identifying with manhood/womanhood as defined by culture at large (Hendricks & Testa, 2012; Bockting & Coleman, 2016). To delve into how it affects mental health, Cronin et al.’s (2019) examines internalised transphobia in relation to well-being finding lower self-esteem along with depression symptoms among those who were
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dissatisfied with life due to this issue. These results demonstrate just how much this condition can impact on a person’s overall sense of happiness while also pointing towards necessary actions being taken up promptly so as address these harmful impacts which could include interventions aimed at both realizing them and minimizing their effects.

Body Esteem
According to the Neagu (2015), body image includes all subjective thoughts about a person’s body. As such, some researchers use the terms body image and body esteem interchangeably (Cecil & Stanley, 2007). However, while this may be so, what they mean by it is that body esteem is an overall judgment of one’s own physical appearance as good or bad (Mendelson et al., 2001). For transgender people their mental wellbeing often comes under threat due to how they feel about themselves in relation with other individuals’ bodies including those of different sexes from theirs (McNeil et al., 2017). There can be seen variations in terms of male-to-female (MTF) and female-to-male (FTM) transgender individuals’ levels of satisfaction with their looks but none have higher than cisgender men or women who identify with the sex assigned at birth (Van de Grift et al., 2016).

The idea of body, which is one of the most important elements of gender identity issues, makes people less satisfied with sex and sexual pleasure (Doorduin & Van Berlo, 2014; Gijs et al., 2014). Gender identity is related to self-esteem about the physical appearance as well; Van de Grift et al. (2016) found that gender incongruence is associated with low levels of body satisfaction whereas dissatisfaction with one’s gender identity may lead to less favourable evaluations of own physical attractiveness. In addition to this, Kennis et al. (2022) revealed that daily activities have different effects on sexual and bodily self-respect among transgender individuals indicating complex links between everyday experiences and mental health within this group.

Conceptual Framework
Resilience strategies, internalized transphobia and self-esteem for body are the three main factors discussed in this model for understanding how intervention programs or systems can help improve psychological states among transgenders by targeting certain paths through resilience.

Methodology
To assess the connection between self-image, bounce-back capacity and an internally accepted transphobic attitude in people who have changed their sex, this research uses a design that cuts across different sections. Such investigations are conducted at one given moment thus making it possible for the researcher to collect data of which he or she can use to find out about associations between variables (Babbie, 2016). The study targets transgender persons aged between eighteen and forty years who openly live according to their gender identity within a community setting. One hundred subjects took part in this experiment; they were chosen through snowball sampling technique described by Biernacki and Waldorf (1981) as recruiting initial informants before asking them to bring along others from among their friends or acquaintances who meet specified criteria. To be included in this survey, candidates must identify themselves as such but not less educated than having completed an equivalent junior secondary school education while openly declaring that fact too. Those exceeding the upper limit of age bracket i.e., being over forty years old will be excluded if found wanting either by hiding their true nature or failing to show any proof of attending formal schooling beyond primary level where applicable. In order for diversity as well representation across various demographic groups among transgender communities can be achieved during recruitment process Biernacki and Waldorf (1981) recommended using snowballing method when identifying potential participants from different walks of life within these communities.
The instrument of data collection consists of demographic analysis and three sets of measures, which include body esteem, resilience and internalised transphobia. Name, age, education level, family structure and marital status are among the variables examined in the demographic analysis. The Body Esteem Scale is a self-report measure designed to assess how people feel about their physical selves (Franzoi & Shields, 1984). They respond on a five-point Likert-type scale ranging from strong negative feelings through no opinion or mixed feelings to strong positive ones. Next comes Resilience Scale which comprises eight items tapping into individuals’ ability to bounce back after facing challenges (Gm, 1993). Furthermore, an adaption according to former studies will be used as another form for measuring Testa et al.’s (2015) 13-item scale on Internalized Transphobia among Transgender Individuals.

Structured interviews will be carried out by well-trained researchers who will collect data. It is in one-on-one interview settings that respondents are required to complete a demographic questionnaire and answer questions from a body esteem scale, resilience scale and internalized transphobia scale. This method guarantees uniformity of information gathering as well as allows for clearing any doubts that may arise among participants concerning the items of the questionnaire. The process of analyzing data will employ descriptive statistics and inferential statistical techniques. Descriptive statistics shall summarize demographic characteristics together with scores on scales while inferential stats like correlation analysis or regression analysis will probe into relationship between body esteem, resilience and internalized transphobia among transgender people. Ethical issues must be taken into account throughout the study; thus, informed consent shall be sought from all individuals involved thereby ensuring confidentiality towards what they disclose about themselves. Moreover, relevant institutional review boards’ ethical norms should guide researchers who also need to seek approvals before commencing data collection. Furthermore, those taking part should know where support services can be found if there is any emotional distress.

Results and Discussion
In this part, the researcher carried out different examinations to ascertain the demographics of the respondents, check whether the scale used was valid and reliable in gathering information, test for normality of the collected data from the sample, establish a connection between an independent variable and a dependent one and conduct regression so as to confirm or refute the hypotheses put forward in this study. Lastly, a conclusion is given in terms of findings at the end of the chapter.

Table 1: Sociodemographic Characteristics of sample (transgenders)
Evaluation of the Sample Group’s demographics have shown what schools they attended, their families and where they fall in terms of birth order. In relation to education, 44% of respondents hold a middle level qualification making it the highest percentage. The second largest number comes from matric with 33 respondents (33%). Bachelor degrees are held by 18 people or 18% while only six participants (6%) have master’s qualifications and none has M.Phil/PhD degree holders. When it comes to family structure, majority (51%) come from small families consisting not more than four members followed by those who were raised in larger families of between four to six members accounting for 28%. These were closely trailed by those who grew up in extended families which constituted for 31%, then blended at 26% whereas single parent made up just 18%. On birth orders; middle children being most common at 33%, followed by first born who comprised about two thirds that figure i.e. 28%, later born one quarter i.e. 25% and lastly only kids at fourteen.

Table 2: Reliability analysis of scale
The summary in the table above indicates that all five scales used in this research have alpha values between 0.7 and 0.90, which are within an acceptable level of reliability. Also, the body esteem scale (consisting of 41 items) has achieved a Cronbach’s alpha coefficient of 0.893. On top of that resilience strategy (comprised eight items) received an internal consistency estimate as high as .810; Similarly, Internalized Transphobia subscale with thirteen questions yielded $\alpha = .839$ hence it can be concluded that instrument employed by this particular investigation possesses adequate psychometric properties required for conducting further studies.

**Table 3: Descriptive analysis of data**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Skewness</th>
<th>Kurtosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body Esteem</td>
<td>3.5585</td>
<td>.48165</td>
<td>-.854</td>
<td>2.991</td>
</tr>
<tr>
<td>Resilience Strategy</td>
<td>3.6108</td>
<td>.65553</td>
<td>-1.304</td>
<td>2.940</td>
</tr>
<tr>
<td>Internalized Transphobia</td>
<td>3.6413</td>
<td>.69782</td>
<td>-1.511</td>
<td>2.809</td>
</tr>
</tbody>
</table>

To describe key variables and their central tendencies and distribution characteristics, Table 3 is used. Showing a moderate to high rating, body esteem scores remain fairly constant around the average ($M = 3.5585$, $SD = 0.48165$). Leaning towards lower figures is indicated by a mild leftward skewness while positive kurtosis shows that it is more peaked around the middle part. Moderate to high levels of resilience strategy adoption are also revealed by scores ($M = 3.6108$, $SD = 0.65553$) along with score variability and left-skew distributional pattern among them; Internalized transphobia reflects an average level of moderate intensity ($M = 3.6413$, $SD = .69782$) having various degrees and being negatively skewed in distribution as well.

**Table 4: Relationship analysis (Pearson correlation)**

<table>
<thead>
<tr>
<th>Variable</th>
<th>BE</th>
<th>IT</th>
<th>RS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body Esteem (BE)</td>
<td>1</td>
<td>-0.794**</td>
<td>0.854**</td>
</tr>
<tr>
<td>Internalized Transphobia (IT)</td>
<td>1</td>
<td>-0.823**</td>
<td></td>
</tr>
<tr>
<td>Resilience Strategy (RS)</td>
<td></td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

**Correlation is significant at the 0.01 level (2-tailed).**

The Pearson correlation coefficients are very useful in finding out the relationship between internalized transphobia, body esteem and resilience strategies among transgender people. Initially, a strong negative correlation ($r = -0.794$, $p < 0.01$) is shown between internalized transphobia and body esteem which highlights how society’s negative self-perception affects us most deeply. People with more self-hatred have less regard for their physical appearance or worth which clearly indicates towards psychosocial problems faced by such individuals hence mental health should concentrate on dealing with these problems secondly; another thing that can be observed from this study is that there exists a positive relationship between resilience strategies and body esteem ($r = 0.854$, $p < 0.01$). This
implies that whenever someone uses many ways of dealing well with difficulties, they tend to feel better about themselves physically too – especially those who identify as being changeable gender-wise might need some protection against feeling bad always because of not having fixed bodies.

Finally, what this means is that there exists an extreme adverse correlation ($r = -0.823$, $p < 0.01$) between resilience strategies and internalized transphobia which suggests that when people deal with higher levels of resilience, they usually experience lower levels of internalized transphobia. This highlights the need for interventions aimed at fostering resiliency as a way of reducing negative self-perceptions associated with gender identity disorder or any other social stigmatization so that mental health among transgender individuals can be improved. In general, these results help us to understand better how body image issues may relate with coping skills but it also shows where we should direct our efforts in terms of helping out those who are struggling most within the community themselves surrounding gender dysphoria-related concerns such as self-esteem building programs or counselling services.

**Table 5: Hypotheses analysis**

<table>
<thead>
<tr>
<th>IV</th>
<th>DV</th>
<th>$R^2$</th>
<th>Beta</th>
<th>SE</th>
<th>F-value</th>
<th>df</th>
<th>t-value</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>RS</td>
<td>IT</td>
<td>.851</td>
<td>-.823</td>
<td>0.043</td>
<td>560.71</td>
<td>1</td>
<td>-23.679</td>
<td>0.000</td>
</tr>
<tr>
<td>RS</td>
<td>BE</td>
<td>.729</td>
<td>.854</td>
<td>0.040</td>
<td>263.10</td>
<td>1</td>
<td>16.220</td>
<td>0.000</td>
</tr>
</tbody>
</table>

Regression analysis strongly supports Hypothesis 1 by showing a significant negative relationship between resilience strategies and internalized transphobia among transgender persons. This model indicates that F-Statistic significantly reduces internalized transphobia because of resilience strategies. In this case, internally felt hatred towards oneself as being different from what one wants to be like or become changes by 85.1% according to the model used in the study. Each additional step taken towards becoming more resilient was associated with an average drop of 0.823 points on measures assessing inner hatred directed at the self for failing to live up to gender identity ideals while trying hard enough; hence underscoring their effectiveness. The standard error is low and T-statistic is significant which implies that these are reliable predictors for determining whether or not someone has had a lot of difficulties accepting themselves because they were born something different than what they want themselves to become.

In order to cope with internalized transphobia, it is important for transgender individuals to be resilient. There are three main ways identified by this article; finding social support, validating one’s own identity and employing coping mechanisms. This is done in order that they may empower themselves with the capacity of self affirmation. Community should therefore foster self acceptance among its members. (Bockting et al., 2013; Perez-Brumer et al., 2015). By doing so it improves mental well-being in general while at the same time building up psychological resilience against these inner struggles.

Substantial evidence has been given by Bockting et al. (2013) and Perez-Brumer et al. (2015) in their study that shows how well resilience-focused interventions work to reduce the impact of self-internalization gender identity problem. The fact that these investigations demonstrate what can protect against psychological distress brought by internalized transphobia is realization and development skills useful for surviving hard times in this area; therefore, they are highly important for mental health promotion among transgender people who face different challenges related to their life satisfaction. This is because such strategies deal with the root causes of this problem and equip individuals with necessary
knowledge on how best to overcome it, hence making them strong in the midst of adversity (Bockting et al., 2013; Perez-Brumer et al., 2015).

Basically, resilience strategies are very important for transgender people to face internalized transphobia challenges. These methods also promote general health and mental well-being among the transgender community by creating self-acceptance, fostering resilience and empowering them (Bockting et al., 2013; Perez-Brumer et al., 2015). Consequently, integration of resilience-based interventions into mental health support programs for this community is crucial as shown in studies conducted by Bockting et al. (2013) and Perez Brumer et al. (2015), consequently leading to development inclusive and efficient practice of mental healthcare services.

The model (H2) is a very strong one and can explain as much as 72.9% of the variance in Body Esteem scores which means that it is highly explanatory. What this also means is that Resilience Strategy accounted for about 73% of all variability in Body Esteem score according to this model. It shows a positive correlation between them with robustness signified by its beta coefficient of 0.854 being positive too; this shows that an increase in Resiliency Strategies will lead to higher levels of body satisfaction among transgender people. The F-value was substantial at 263 points but what makes it more so significant? These results demonstrate clearly that rebouncing from adversities can greatly foster self-confidence about their own bodies henceforth contributing greatly towards general happiness among trans community members.

This positive association between strategies for resilience and body image is consistent with previous studies highlighting the protective role of resiliency in promoting positive mental health outcomes among those who are marginalized (Testa et al., 2017; Singh et al., 2011). Such methods include social support, self-affirmation of identity, and healthy coping mechanisms which shield against internalized transphobia thus fostering empowerment and self-acceptance (Bockting et al., 2013; Perez-Brumer et al., 2015). Resilience building should also work towards improving self worth through promoting acceptance of one’s physical appearance leading to better overall psychological sexual health amongst transgender people as they learn how to handle societal challenges while relating positively with their own bodies and sexual identities at large (Morrison et al., 2016; Singh et al., 2011). Therefore, interventions designed to increase resilience have potential for enhancing psychosexual well-being and realizing comprehensive health outcomes within such communities.

Positive mental health and self-concept development among transgender individuals depend on resilience strategies. The connection between resilience strategies and body esteem constitutes an argument towards much needed adaptive coping skills development as well as identity affirmation. It helps them deal with internalized transphobia which eventually leads to empowerment and acceptance of oneself due to perceived challenges from within (Bockting et al., 2013; Perez-Brumer et al., 2015). Resilient individuals also tend to have higher levels of self-esteem which promotes acceptance towards their own bodies resulting in better sexual confidence that enhances overall psychosexual wellness (Morrison et al., 2016; Singh et al., 2011). Besides this, being resilient empowers people to question social norms while advocating for equal rights thus creating an environment where all sexual orientations can thrive freely (Testa et al., 2015).

Psychosexual health can be enhanced through interventions which develop resilience among people identifying as transgender, at the same time reducing the negative effects brought about by internalized transphobia towards body image in particular. Knowledgeable therapy programs and culturally appropriate counseling can equip individuals with effective tools to fight prejudice hence fostering resilience as well as adaptive coping strategies (Singh et al., 2011; Gorman et al., 2022). Also, support groups
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based in communities and networks of peers provide opportunities for socializing while affirming identities leading to increased self-esteem thus strengthening ability to recover from stressors or bounce back after setbacks (Perez-Brumer et al., 2015; Singh et al., 2011). It is important for healthcare providers to create inclusive environments and adopt policies that acknowledge diverse gender identities so as to remove systemic barriers against obtaining care which would promote support from others thereby improving mental health relating to sex within transgender populations holistically (Bockting et al., 2013; Morrison et al., 2016).

Conclusion

This research, on the other hand, has tackled the complex relationship among body esteem scale (BES), internalized transphobia (IT) and strategies used in resilience by transgender people. Moreover, it has shown many important links between them; thus, demonstrating that these factors are multifaceted. The study also underscores the need to deal with IT and build resilience strategies for positive psychosexual outcomes namely; body image satisfaction. It highlights necessary interventions for Peshawar Pakistan where they should be attuned to specific challenges faced by such individuals while advocating holistic approaches towards their health as well-being. Such knowledge can only come about when we take into account methodological shortcomings related to time orientation through longitudinal surveys or qualitative inquiries alongside creating tests which factor in cultural sensibility during measurements so as to ensure our understanding of AI inclusive well being is deepened through targeted intervention development plus support systems aimed at enhancing overall welfare of transgender communities in this setting. Additionally, there needs further investigation around social support systems but not only these but also those of a therapeutic nature supplemented with considering intersectionality between gender identity and sexuality including other areas like fostering more inclusive and supportive environments for transgender individuals to thrive authentically.

References

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