

Exploring Ethical Challenges In Gender Transition: A Comprehensive Overview

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Abstract:

This study delves into the intricate process of sex reassignment surgery (SRS) and its profound implications for transgender individuals. Through an extensive analysis of scholarly articles, medical documentation, and personal narratives, it offers a comprehensive understanding of SRS. By exploring its effects on physical, mental, and interpersonal aspects,¹ the research illuminates the transformative nature of SRS in transgender lives. However, alongside medical progress, ethical dilemmas, legal ambiguities, and societal stigmatization persist, underscoring the urgency of continued investigation and advocacy to ensure comprehensive support and rights for transgender individuals throughout their journey of gender affirmation.

Keywords: Sex change surgery, transgender, gender identity disorder, advantages, disadvantages, societal acceptance, psychological impact, employment discrimination, legal challenges.

Introduction:

Sex reassignment surgery (SRS) is a complex and contentious issue within the transgender community, offering both promise and peril for individuals seeking to align their physical bodies with their gender identity. While SRS can provide relief from gender dysphoria and improve quality of life for some, it also presents significant challenges and limitations. This paper examines the multifaceted nature of SRS, exploring its benefits, drawbacks, ethical issues, and the broader implications for transgender individuals in society.

Methodology:

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This paper employs a comprehensive review of existing literature, including academic research and medical reports. By synthesizing information from diverse sources, it aims to provide a nuanced understanding of the complexities surrounding sex change surgery.

Literature Review:

Existing literature on sex reassignment surgery offers insights into its various aspects, including the physical, psychological, and social impacts on transgender individuals. Studies highlight both the potential benefits, such as alleviation of gender dysphoria and improved mental well-being, as well as the challenges and limitations, such as the inability to change internal biological structures and ongoing societal discrimination.

Discussion:

Change of sex is not an easy job or a playful activity. It demands great care and thought before taking this step. No doubt it has several benefits for transsexual people. It gives them peace of mind, increases their confidence level, makes them adjustable in society and saves them from the jeer and taunt of the people and more others etc. But along with the benefits it has disadvantages as well. In next pages we are going to enumerate few of disadvantages of sex change.

Navigating Realities: The Limits of Sex Change Surgery

Some transgender individuals believe that undergoing sex change surgery will completely transform them, allowing them to live as "normal" people and gain societal respect. However, the reality is that while surgery can alter their physical appearance, it cannot change their internal biology. Science has not advanced enough to completely alter internal structures, though it may be a possibility in the future.

In "My Secret Self," Barbara discusses the limitations of sex change surgery. Transplantation, castration, and hormonal treatment cannot enable a man to impregnate his wife. Similarly, procedures like penis insertion and breast reduction cannot erase a woman's femininity. Chromosomes remain unchanged and resistant to surgical alteration. (Walters, April 27, 2007)

The Toll of Unmet Expectations in Transgender Surgery

Some reports suggest that undergoing sex change surgery doesn't bring the expected benefits. Currently, there's no conclusive evidence that this surgery improves the lives of transgender individuals. Studies indicate that many people continue to feel distressed after the surgery, and some even attempt suicide. ("Transphobia," Answers.com, Wikipedia, <http://www.answers.com/topic/transphobia>, 2024)

A report from the UK Daily Telegraph presents a harsher view, suggesting that transgender individuals may end up worse off after surgery. Instead of improvement, they may find themselves with a disfigured body and some internal conflicts. (Daily Telegraph, July 15, 2002, cited in The Christian Institute, "Transsexualism,") Not only do they face physical mutilation, but their emotional well-being suffers as well. After enduring the painful process of sex change, only to find that they are still viewed the same by society, they may feel that their money was wasted.

Love, Loss, and Longing: A Transgender Journey

We've talked about how surgery only changes their appearance, not their insides. This means they can't have children, something many families want. So, their marriages often fail, and they end up separating from their partners. Afsaeh, a transgender woman, tried to become a woman

through surgery but didn't succeed. In 1999, she saved \$10,000 for the final surgery step and went to Thailand for it. When she returned, she fell in love and got married. She hoped for a happy married life, but it didn't turn out as expected.

Her mother-in-law wanted grandchildren, but Afsaeh couldn't have any. Her mother-in-law kept pressuring her to try medicines or see a doctor. Afsaeh felt overwhelmed and decided to end the marriage in 2008. After the divorce, she felt like she had tried everything. She left Iran, hoping for a better life. But things didn't improve. She couldn't handle the challenges. (Apologetics, Institute, <http://www.christian.org.uk/briefingpapers/transsexualism.htm>, n.d.)

Biological Implications of Sex Reassignment Surgery

In simpler terms, changing one's sex through surgery doesn't alter the intricate internal systems of the body, such as the reproductive system. Even with surgical procedures that implant sexual organs, they can't perform the functions of producing sperm or eggs. Furthermore, these surgeries are highly complex and can lead to various complications. For instance, in male-to-female conversion, patients might encounter issues like vaginal stenosis or the need for additional surgeries to correct the labia. Similarly, in female-to-male surgeries, complications such as flap contracture or necrosis can arise, along with problems with prostheses or urinary fistulae.

These complications often leave patients dissatisfied or only partially satisfied with the results, sometimes even prompting them to consider reversing the surgery. In cases where female-to-male surgeries fail, the patient's decision to utilize the constructed vagina depends on the specific technique used for phalloplasty. Besides the followings complications are also reported.

1. The patient cannot be able to ejaculate because he does not have spermatid fluid, testicular, prostate glands and seminal vesicles.
2. The male will not be able to pregnant a woman as they do not have production of sperm. (Muhammad Yaseen, 2022)
3. In females, they cannot be menstruated because of the lack of ovaries and urethra. (Afsaneh, 2010)

Hormone Replacement Therapy: Risks and Complications

When transgender individuals undergo hormone replacement therapy, they sometimes face risks and complications. Excessive and uncontrolled use can lead to psychosomatic disorders or worsen cardiovascular issues. Additionally, there's a risk of uterine or ovarian cancers. (Yaseen, 2018)

The surgical procedure for female-to-male (FTM) transition often yields less satisfactory outcomes compared to male-to-female surgeries. Constructing a functional penis using smaller clitoral tissues presents challenges. Some FTM individuals opt for breast removal, while others prefer prosthetic penises. Phalloplasty, attaching a penis surgically, is another option. Initially, surgeons focus on removing the ovaries and uterus, deferring penis construction for later. This multi-step process involves creating a tube-like structure using skin from the thigh or abdomen, leading to complications like urinary issues and imperfect intercourse. Despite these challenges, having a penis can provide a sense of completeness for some. However, research suggests that one-third of individuals who undergo FTM surgery opt not to revise it, indicating

satisfaction with sex reassignment surgery (SRS). (Does A Sex Change Really Change Your Sex? Juniper <http://www.articlesnatch.com> , n.d.)

Complications Post-SRS: Navigating Infections and Surgical Revisions

After undergoing sex reassignment surgery (SRS), individuals may encounter risks such as wound infections. In some cases, complications like a shortened vagina may necessitate additional surgery within six months, adding to the financial burden already borne by the individual. With costs often exceeding \$100,000 ([http://www.faqs.org/ Sex change surgery \, Information about Sex change surgery.html](http://www.faqs.org/Sex%20change%20surgery%20Information%20about%20Sex%20change%20surgery.html), n.d.) this expensive procedure remains out of reach for many in the poor and middle class. The psychological toll of these challenges can be severe, leading some individuals to contemplate suicide.

Title: "Unraveling the Pitfalls of Sex Reassignment Surgery: Lessons from David Reimer's Tragedy"

The narrative of David Reimer, known as the John/Joan case, serves as a poignant reminder of the complexities inherent in sex reassignment surgery (SRS). Initially hailed as a success, Reimer's transition from female to male was later revealed to be fraught with challenges and psychological turmoil. Despite living as a male for three decades, marrying, and raising a family, Reimer ultimately took his own life in 2004. His story, documented in 'As Nature Made Him,' serves as a cautionary tale, prompting reflection on the limitations of SRS and the need for more comprehensive approaches to transgender healthcare. (Obituary, David Reimer, 38, Subject of the John/Joan Case, N.Y. Times, May 12, 2004, at A21)

In 1979, Meyer, co-founder of the clinic alongside John Money, announced that Johns Hopkins would cease performing sex reassignment surgeries. Emphasizing objections to transsexual surgical procedures, Meyer highlighted the enduring psychological struggles faced by such patients, which persisted even post-surgery. (Hoopes, 1974)

Identity Struggles

Despite enduring the pain and expenses of surgery, transsexual individuals face additional challenges, particularly in obtaining official recognition of their gender identity. In Malaysia, where laws ostensibly recognize transsexual status, bureaucratic hurdles persist. Requests for gender changes on identity cards are often met with refusal by registration authorities, as highlighted by a deputy minister's statement in 2012 (<https://www.hrw.org/report/2014/09/24/im-scared-be-> , n.d.)

Khartini Slamah, one of the transsexual activists reported that till 1996 the change of the name was allowed then the severer rule was framed out. A transgender person who got sex surgery can register additional name, one of female and others of male. The registration department argued that it was only due to stop a person to marry males because Islam does not permit the marriage of two men. The sex changed Maknyahs are regarded males. (Slamah)

Another Iranian trans individual shared the difficulties encountered in changing their identity card. They recounted their experience of appearing in court, where they were subjected to physical examinations by a panel consisting of five females and two males. The examination began with scrutiny of their beard growth, followed by inspection of their breasts. They were then instructed to obtain medical documents confirming the removal of their ovaries and uterus from Imam Khomeini Hospital. Upon returning with the documents, they were coerced into removing their pants for genital examination, despite their protests. Threatened with non-cooperation consequences, they complied with a sense of humiliation. Despite their efforts to explain delays in surgery, the panel remained indifferent. Ultimately, they received a court letter

stating that although mastectomy, hysterectomy, and oophorectomy had been performed, their genital appearance remained feminine. Consequently, the court deemed the prerequisite steps for surgery incomplete, denying issuance of new identity documents. (“Stop Reparative Therapies & Mandatory Sex Reassignment Surgeries, Homophobia and Health Care Abuses in the Islamic Republic of Iran”, www.6rang.org, n.d.)

After undergoing sex reassignment surgery, individuals face challenges in securing employment due to discrepancies between their identity cards and their new gender. In Malaysia, some doctors refuse to perform surgeries upon learning that their patients are experiencing distress in their new gender. Dr. Khairuddin Yousaf, one such doctor, attempted to facilitate the changing of identity cards for post-operative patients, but encountered resistance from the registry department. Despite his efforts to explain the scientific basis for the surgeries, officials at the National Fatwa Council failed to comprehend, reflecting a stark contrast in their understanding. This disagreement mirrored the historic plight of Galileo, highlighting the doctor's frustration. He argued that surgical interventions would enable transsexuals to find employment, but his reasoning was rejected, leading to a halt in services. (Yusuf, 2014)

Perpetual Fight for Transsexuals' Legal Recognition

The challenges faced by transsexual individuals extend beyond surgery, becoming a lifelong stigma. Legal name changes involve complex and exhaustive processes, including updating academic degrees, medical insurance, credit histories, life insurance, social security cards, and employment records. These processes often feel like battles against the system, with some officials showing curiosity about sex changes and refusing to assist in record updates. Despite cautious efforts, many post-operative women have aged without successfully amending their records. At age 65, when seeking medical and social security benefits, they face rejection due to mismatched gender identities in official records, making it challenging to prove their true gender.

Employment Challenges

Following sex reassignment surgery, transgender individuals encounter significant hurdles in employment. Despite investing their savings and often borrowing substantial sums for surgery, they struggle to secure employment opportunities. Many face termination from their jobs due to their gender conversion, making it exceedingly difficult to restart their careers. Former employers are unwilling to provide references, further complicating job searches. Even obtaining professional licenses, such as for driving, proves arduous as authorities refuse to issue new licenses reflecting their updated identity. Those fortunate enough to find employment live in constant fear of job loss if their previous gender is discovered. Moreover, in the event of accidents or medical emergencies, obtaining proper medication and care becomes challenging, as medical professionals often treat them with coldness and indifference.

Challenges with law enforcement agencies

Following sex reassignment surgery, transgender individuals encounter significant challenges when interacting with law enforcement agencies. Instead of understanding their gender conflicts, police officers often subject them to ridicule and discrimination. Minor infractions can lead to arrests, resulting in humiliation and mistreatment by authorities. In cases of incarceration, they are frequently housed with male inmates, increasing their risk of brutal sexual assault. Additionally, they are unfairly labeled as prostitutes and subjected to harsh treatment in public spaces. Fearful of further mistreatment, they hesitate to report crimes such as robbery or sexual assault to the police, fearing blame and further humiliation. Advised to

conceal their past and avoid communication with officials, they turn to religion for solace during times of distress.

Religious discrimination

Many transgender individuals face religious discrimination, often being forced to leave their religious communities. Even those who have fully transitioned to their new gender are not spared from this prejudice. While religious texts remain silent on the issue, many religious groups view transsexualism as a grave sin due to its perceived deviation from traditional gender norms. Consequently, post-operative individuals are expelled from churches if their former gender is revealed. Those who manage to conceal their past often face hatred and ridicule from clergy members, silently enduring feelings of oppression and rejection. When subjected to derogatory remarks like "Homosexuals and Transsexuals are instruments of the devil" by their peers, their anxiety and suffering intensify, leading to shattered self-confidence and social isolation. In their eyes, these attackers become enemies, disregarding the harm inflicted upon them as if they were unbelievers. (<http://ai.eecs.edu>, n.d.)

A Painful Lesson: Stories of Post-Operative Regret

Many people who have undergone surgery later regretted their decision due to severe post-operative complications. Here are two stories shared by those who suffered greatly after their operations, offering lessons for others.

Kia underwent breast surgery at the tender age of 17, hoping for a positive outcome. However, her experience turned into a nightmare. During her initial surgery, the doctors forgot to remove a gauze pad, leading to two more corrective surgeries. These multiple surgeries drastically reduced her chances of full recovery.

Her breast size was too small for a formal mastectomy, resulting in the need for liposuction, hormone therapy, and extensive exercise to achieve the desired appearance. Unfortunately, her doctor failed to inform her about these additional procedures and instead pushed for further bodily surgeries, which left her with permanent damage.

Kia prayed continuously for recovery, but her suffering persisted. The poorly performed surgeries inflicted lifelong agony, making even sneezing painful. She can no longer carry heavy items due to the pressure it puts on her body. This ordeal also led to chronic chest and back pain, persistent urinary tract infections, and constant bleeding. ("Stop Reparative Therapies & Mandatory Sex Reassignment Surgeries, Homophobia and Health Care Abuses in the Islamic Republic of Iran", www.6rang.org, n.d.)

Kia's story is a stark reminder of the importance of thorough medical advice and ethical treatment. Her doctor's negligence and pursuit of personal gain over her well-being resulted in enduring physical and emotional trauma. Patients must be fully informed of all potential procedures and outcomes, and medical professionals must prioritize patient care above all else.

Sex change surgery, while offering many the chance to align their physical bodies with their gender identities, is fraught with serious complications. One of the most severe risks involves the use of free silicone injections. These can lead to disfigurement, neurological impairment, and pulmonary disease, ultimately increasing the risk of death. (Schmid, 2005)

Vaginoplasty Risks

In vaginoplasty, daily dilation is necessary to maintain the width and depth of the neo-vagina. Failure to perform regular dilation can lead to a loss of vaginal dimensions. Additionally, since the prostate is not removed during this procedure, there remains a risk of developing prostate

cancer. (Feldman, Transgender primary medical care: Suggested guidelines for clinicians in British Columbia, 2006)

Augmentation Mammoplasty Risks

Patients opting for augmentation mammoplasty face potential risks including wound infections, post-surgical bleeding, and asymmetry in the size of the breasts, nipples, or areolas. There is also a possibility of infection or extrusion of the implants. (Feldman, 2006)

Penile Inversion Complications

The male-to-female genital reconstruction through penile inversion can result in infections and dissatisfaction with the shape and size of the newly constructed vagina, labia, or clitoris. These complications highlight the importance of thorough pre-surgical consultations and choosing experienced surgeons to minimize risks and ensure better surgical outcomes. (Kanhai, 1999)

Same case is seen in the penile inversion in females who change their sex to males. For construction of penis the skin is used which makes a lasing wound on the site of donor. (Krege, 2001) To avoid the scar on donor site some doctors use metoidioplasty but it makes the micro phallus usually small enough that sexual association or passing urine whilst standing become difficult. (Monstrey S, 2009)

Medical Missteps and Identity

Years ago, John experienced a significant medical mishap that led to the loss of most of his penis. Influenced by the recommendations of John Money, a well-known psychologist, his parents decided to raise him as a female, believing it would be better to have a "normal" daughter than an "abnormal" son. This case quickly gained attention in the scientific community.

In the initial stages, the remnants of John's penis were surgically removed, and he was raised as a girl. Despite these efforts, John never felt at peace with his assigned female identity. He consistently asserted that he was male, showing agitation and distress at being treated as female. Even as a youth, unaware of the details of his infantile surgery, he resisted his parents and doctors, demanding testosterone treatment and further surgeries to affirm his male identity.

Ultimately, John underwent surgical procedures to transition back to male. His story underscores a profound truth: an innate sense of one's original sex cannot be easily altered, even with significant medical intervention.

Finally, in the mid-1990s, Diamond figured out how to find the youngster "Joan," now accepted as a developed lady, whose case had been the foundation of Money's entire perspective. Needing to simply confirm what had or had not happened to her, Diamond discovered the incredible fact that she had never felt like a young girl at all and was now a married man.

The story later reached a very tragic end. Despite the fact that "John" had been able to socially and surgically reverse his childhood reassignment and become a male, he acknowledged a deep well of burning anger that would never go away. In 2000, he told the "Seattle Post-Intelligencer," "I had parts of my body cut away and thrown in a wastepaper basket. I've had my mind in rags away." (94. "John" committed suicide on May 4 2004 <http://ai.eecs.umich.edu/people/conway/TS/TS.html> , n.d.)

Ethical Issues.

Sex change surgeries, while providing critical support for many individuals seeking alignment with their gender identity, present a range of ethical issues due to their potential disadvantages. Here are some key ethical concerns:

1. Informed Consent

Lack of Comprehensive Information:

Patients may not be fully informed about all possible risks and complications, such as the need for lifelong maintenance procedures (e.g., daily dilation post-vaginoplasty) or the potential for severe complications like infections or disfigurement.

Psychological Impact:

The long-term psychological effects of undergoing such significant surgeries may not be thoroughly discussed, potentially leading to regret or mental health issues.

2. Medical Integrity and Experimentation

Experimental Procedures:

Cases like John's suggest that some medical professionals may treat patients as subjects for experimental procedures without sufficient evidence of long-term benefits.

Pressure and Coercion:

There may be pressure on individuals to undergo surgery to conform to societal norms, rather than supporting non-surgical approaches to gender identity.

3. Physical and Psychological Harm

Permanent Damage:

As seen in the stories of John and others, there is a risk of permanent physical harm, such as nerve damage, loss of sensation, or severe scarring.

Identity and Acceptance:

Surgical changes may not always lead to the desired acceptance of one's gender identity, leading to ongoing psychological distress and identity crises.

4. Ethical Responsibility of Medical Professionals

Duty of Care:

Medical professionals have an ethical duty to prioritize patient well-being over experimental interests or societal pressures.

Honest Communication:

Doctors must ensure honest, transparent communication about the limitations and potential negative outcomes of sex change surgeries.

5. Long-Term Health Risks

Complications and Maintenance:

The necessity for ongoing medical treatments (e.g., hormone therapy, additional surgeries) can lead to a lifetime of medical dependency and related health risks.

Cancer Risks:

It can lead to many cancer risks, for example, in vaginoplasty, the prostate is not removed, leading to a continued risk of prostate cancer.

6. Social and Ethical Implications

Social Stigma and Support:

There may be insufficient social support for individuals who undergo sex change surgeries, leading to isolation and discrimination.

Misinformation and Bias:

Society and even the medical community may perpetuate biases and misinformation about the effectiveness and necessity of such surgeries, impacting ethical decision-making.

Here is one of the examples of the medical experts' negligence in Sex reassigned Surgery which led to many complications in the life of the patients, having gender disorder cases. Farzam, another post-operative woman, endured significant suffering after her surgery. She experienced severe pain in her breasts, which became stiff and required binding to prevent them from growing larger. Seeking help, she consulted a doctor who suggested draining the breasts as a solution. Despite the procedure, her breasts remained stiff, and their condition worsened over time.

As the stiffness increased, her breasts also began to swell, growing larger instead of smaller. Her doctor assured her that this was a temporary effect of the suctioning and that the swelling would subside soon. However, the swelling persisted for four months, spreading to her neck and causing more discomfort. Desperately seeking advice, she faced additional challenges when the "State Welfare Organization" failed to pay her, preventing further consultations.

Her condition deteriorated, leading to severe damage to her body and back. She reluctantly agreed to another surgery, which proved fruitless. A third operation also failed to provide relief, and she still requires another breast surgery. Tragically, her nipples became detached, compounding her lifelong distress.

Her situation forced her to swim with a T-shirt to cover the damage. With no external support, she became subject to medical experimentation. Her back and chest pain became so intense that it often woke her in the middle of the night. To alleviate the stiffness, the surrounding muscles were removed, only worsening her condition.

Ultimately, she sought help from a renowned doctor in Canada. However, he declined to assist, citing the extensive damage to her ribs and the removal of chest muscles. Farzam's story highlights the profound ethical failures in her medical treatment, emphasizing the need for better patient care and responsible medical practices. ("Stop Reparative Therapies & Mandatory Sex Reassignment Surgeries, , n.d.)

Religious Teachings

Holy Quran

Preservation of the Body

The Quran emphasizes the sanctity and preservation of the human body. In Surah Al-Baqarah it says: "And do not throw [yourselves] with your [own] hands into destruction [by refraining]. And do good; indeed, Allah loves the doers of good." (Al-Quran 2:195)

This verse implies the importance of avoiding harm to oneself, which can be extended to unnecessary or harmful medical procedures.

Nature of Creation

Surah Ar-Rum in is said, "So set your face toward the religion, inclining to truth. [Adhere to] the fitrah of Allah upon which He has created [all] people. No change should there be in the creation of Allah." (Al-Quran 30:30)

This verse refers to the concept of fitrah, the natural state of creation, which is often interpreted to mean that altering one's natural form can be seen as going against divine intention.

Hadith

Prohibition of Self-Harm

The Prophet Muhammad (peace be upon him) said: "There should be neither harming nor reciprocating harm." (Sunan Ibn Majah, Book 13, Hadith 2341)

This hadith reinforces the principle of not causing harm to oneself or others, applicable to the context of risky medical procedures.

Mutilation of the Body

The Prophet (peace be upon him) cursed those who practice tattooing and those who get tattooed, those who pluck their eyebrows, and those who file their teeth for the purpose of beautification, altering the creation of Allah. (Sahih al-Bukhari, Book 72, Hadith 823)

This hadith reflects the prohibition of altering one's natural physical appearance unnecessarily.

Bible

Respect for the Body

It is mentioned, "Or do you not know that your body is a temple of the Holy Spirit within you, whom you have from God? You are not your own, for you were bought with a price. So, glorify God in your body." (Corinthians 6:19-20:)

This passage emphasizes the sanctity of the human body as a creation of God, urging believers to honor their bodies and avoid unnecessary alterations.

Prohibition of Mutilation

"No one whose testicles are crushed or whose male organ is cut off shall enter the assembly of the Lord." (Deuteronomy 23:1:)

This verse highlights the Old Testament prohibition against physical alterations that mutilate the body, reinforcing the principle of preserving one's natural form.

Conclusion

In simple terms, while gender transition surgery can help transgender individuals regain their place and respect in society, it's a complex process that needs to be handled carefully. If not, it can lead to serious ethical problems and unintended consequences. Different religions have

varying views on this issue; some are completely against it. In Islam, gender transition surgery is allowed in certain cases, especially when there's a medical reason. So, it's important to approach this sensitive issue with a clear understanding of both the ethical and religious aspects.

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