

GENDER IDENTITY DISORDER (GID) IN SCHOOL SETTINGS: A REPORT FROM PRIMARY SCHOOL STUDENTS' EXPERIENCE IN PEKAN, PAHANG

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ABSTRACT

This paper aims to elucidate the nature of GID students in primary school. Although the number of primary students who experience GID is relatively small, they are subjected to few problems causing by their peers from the same sex. The genetic factor is said to be one of the reason that developed GID among primary students in schools. The social factors caused by family and peers have also been elucidated as one of the major cause. In this study, we have employed the qualitative approach by using in depth interview with 5 identified GID male students in the area of Pekan, Pahang. The findings of this small scale study show that the GID among primary school students has something to do with environmental factor, school engagement and support as well as teacher's role in assisting the problem. It is hence interesting to see the outcome of this small scale study as it contributes to the development of new knowledge especially in the field of guidance and counselling.

KEYWORDS: Primary School, Small Scale Study

INTRODUCTION

Recently, the case of men dressed in women that appeals in court invited various polemics. Winning cases against the federal court on the ground that the offender suffered from gender identity disorder (GID) has got received various reactions in all walks of life. However, in general, people do not know and were not informed clearly about these things then blame the perpetrator. Who is to blame? Are genetic factors become the main cause of treatment concerned? What about socialization factors and the local environment of an individual growing up? This paper attempts to elucidate the issue of mental health in school. Since we have been given an option to choose the topics based on our observation and interest. We choose the topic on gender identity disorder (GID) as the topic for further research for this course as we always believe that the root cause of the societal calamities nowadays and confusion are due to the misconception, misunderstanding and wrong approach in dealing with the GID related matter. Most of all, let us make it clear that the issue to be investigated is not related at all, at least for this case, to the social and cultural issues related to Lesbian, Gay, Bisexual and Transgender (LGBT) but merely the misunderstanding of the notion. Correspondingly, this paper discerns the real scenario in Malaysian school in regard to gender identity disorder. This research is basically a case study. Therefore, we utilized the in-depth interview with 5 identified GID students in primary school at my place. Although the number of sample is relatively small, we believe the depth-ness and richness of data gained is invaluable and can be shared with other researchers from other continents and culture.

BACKGROUND OF THE STUDY

There are plethora of opinions and confusions while debating on the issues related to GID. Indeed, some confusion occurred due to the misconception about the said issue. First and foremost, GID has always understood to be associated with LGBT. However, the existing research has noted that some GID patients have married and even established a steady family. Secondly, the GID issue has mostly been elucidated from the medical point of view and the social science community has engaged since it has been declared as “disease” by American Psychological Association (APA). Thus, by researching the issue, we might see this from the point of view of education and counselling in particular.

STATEMENT OF THE PROBLEM

The GID in education setting is indeed a unique topic to be explored by the researcher. Plenty of theses, researches and journals have seen the issue (of GID) from the medical and sociological perspectives. These two perspectives have indeed explained the nature and characteristics of the GID issues. However, by researching the topic, we will have the opportunity to fill up the gap by seeing and analysing the issue from the context of education and counselling, which is rare and unique. Since the existing research in the GID has focused mostly on adults as the sample of population engaged in the study, it has certain degree of relationships with their lifestyle and sexual orientation. Accordingly, my research has focused on the school children as the sample of population. We might anticipate new findings as they are still under the tutelage of teachers in schools and parents in their houses. The findings would essentially contribute to the new knowledge in the field of education and counselling.

OBJECTIVE OF THE RESEARCH

The objective of this small scale research is to understand the nature of GID among primary school students. To achieve this, the study seeks to utilize an analysis of the life experience of the GID among primary school pupils. There are two specific objectives in my mind:

- To explore how the GID students schooling experience as well as their social and daily activities.
- To examine the problems and challenges facing by respondents.

Research Questions

The above objectives of study are reduced to a set of specific questions. Hence, the following research questions are formulated.

- What are the characteristics of students with GID?
- What is the problem and challenges facing by them?
- How their parents and teachers assist their GID inclination?

LITERATURE REVIEW

The academic fraternity and interest around the world have seen this GID issue from two perspectives namely sociological as well as medical point of view. Thus, these two perspectives have briefly initiated an idea of GID. In this part, we will highlight some important literature taken from both sociological and medical traditions.

SOCIOLOGICAL AND CULTURAL DIMENSIONS OF GID

It is no exaggeration that the sociological notion of GID has started with the idea of gender identity. By this, sociologists meant that the gender could be more feminine or masculine. As pointed out by Stets and Burke (2010), the idea of femininity and masculinity can be traced via social role than biological inheritance. It is indeed socially and culturally defined. Since it has been determined socially and culturally, it is impossible for one's gender to stray from it. More aggressively, the research in social science and humanity often associated the GID issue with sexual minorities, the use of drug (Lai, Norliza & Marhani, 2012) and transsexual/transgender issues (Amran Hassan & Suriati Ghazali, 2013).

Other social scientists would highlight the GID issue from the perspective of socialization. Socialization is the process, where we learned norms and values in a particular society or community. This simple but concise definition is understood among academic circle. Therefore, it is interesting to learn how the previous researchers have connected the issues with the gender socialization as it focuses on how boy is learned to be a boy and girl is learned to be a girl to confine with a social norm and custom, as noted by Crespi (2009). By taking the example of Great Britain, she noted the role of family in the socializing process of a child as we all confine to particular gender stereotype;

The main agencies in Western society are the family, peer groups, schools and the media. In respect with gender socialisation, each of the agencies could reinforce the gender stereotypes.

(p.1)

Be that as it may, the Crespi's study on GID in regard to family role as well as socialization is strongly supported the study conducted by Tucker and Keil (2001). In their previous study GDI in Thailand, they found that the parents' cultural belief can be a factor that causes GID. The study conducted has also systematically defined the notion of GID, which is confined to the definition of gender identity by American Psychological Association (APA);

(GID) is a disorder in which a child demonstrates behaviors that indicate cross-gender identification and persistent discomfort with his or her sex or gender role.

(p.22)

GID and Medical Point of View

Indeed, the extensive study on GID has initiated from the medical field to see whether it has connection with genetic or biological factors. The study in genetic behaviors conducted by Coolidge, Thede and Young (2002) has surprisingly noted that the GID is not a matter of choice as it is related to biology. In the quantitative study that conducted among children and adolescent twin, they noted;

The correlation between GID and depression was modest, but significant ($r=.20$, $p<.05$), whereas the correlation between GID and separation anxiety was nonsignificant ($p>.05$).

(p.251)

Although, the result of the study shows some significant correlation between GID and biological features, the study conducted by another medical fraternity proved to the contrary, as they suggest the importance of undertaking

treatment and support the findings of their social science counterparts;

The importance of treatment is not only because of the high rate of mental-health problems, including Depression but with higher suicide rate among untreated transsexual people than in the general population. These problems are not usually related to the gender identity issues themselves, but the social and cultural responses to gender-deviated individuals

(p. 83)

Apart from those medical explanations to the field, it has to be said that the medical field serves the opportunity for the people with GID to be treated in accordance to their needs. Treatments, especially through the consumption of certain drug, were given so that the individuals with GID can overcome their problem of depression and anxiety. However, some treatments are not confined to the problem solving of sexual orientation, which is socially and culturally debated. According to Kettenis and Pfa'fflin (2009);

Considering the strong resistance against sexuality related specifiers, and the relative difficulty assessing sexual orientation in individuals pursuing hormonal and surgical interventions to change physical sex characteristics, it should be investigated whether other potentially relevant specifiers (e.g., onset age) are more appropriate.

(p.1)

In a nutshell, medical field has its practical implications in facing the GID issues regardless of norm, and cultural values as they consider the problem as a part of human right issues. It is however interesting to see the amalgamation of the medical explanation as well as the socio-cultural expression in manifesting the issue.

METHODOLOGY

This small scale study is exploratory and descriptive in nature. Therefore, we have employed qualitative research and case study as the research design. Indeed, there are five characteristics of qualitative research: naturalistic, descriptive data, concern with process, inductive and meaning (Bogdan & Biklen, 2007). Basically, the qualitative researcher is immersed with context and action that can be understood when observed in their research settings. In that matter, correspondingly, we employed qualitative methods. It is due to the fact that qualitative methods help researchers, like me, to understand meanings and experiences from the emic (participants) perspectives. In other words, this approach takes into account impression, words, sentences, photos and symbols of a specific group or culture. Accordingly, it serves a holistic description and outlook of daily life activities. Additionally, the researchers found that the qualitative method is suitable for this small scale study and give a better outcome for a field of guidance and counselling. It is due to the fact that this method deals with human experience. It also allows me to be flexible while initiating and collecting data. It also allowed my students to express their feelings and opinions about the issues asked.

Sample and Data Collection

In this small scale study, we have recruited my participants by using the purposive sampling. We have chosen 5 identified GID students from my school. These students are between the ages of 11-12 years old. They are from the Malay ethnic group who resides at FELDA area of East Chini. Thus, in obtaining meaningful data, we have employed the in depth

interview. We utilized in depth interview because of its flexibility during the data collection process. In assisting the participants, we have also used vignettes in stimulating the discussion. The in depth interviews have been conducted in Malay language. To preserve the actual words of the participants, all interviews have been audio-taped with the participants' knowledge and consent. Pseudonyms are used to protect the privacy of the participants. The data collected from in depth interviews analyzed using thematic analysis.

Findings

The finding of this small scale study is divided into three themes, namely; a) Environmental experience, b) School's engagement and support, and d) teacher's role.

- **Environmental Experience**

The first finding noted that the GID inclination among respondents has something to do with their environmental experience as well as historical background of the respondents. It is in the line with the idea and proposition that highlighting the importance of socializing process in one's individual life and parenting role too;

Since before kindergarten, as I recall, mother dress like women's clothes on me. Maybe I like girls and not boys. Every day I wore women's clothes and bought dolls to play. Every evening, mother would take me to his friends' house and I was left to play with their daughters.

(Zakir, 12 years old)

Apart from the childhood experience, the socializing process that took place in school is said to be the contributing factor as well. A child with GID inclination tends to play and make friends with girls in schools;

During recess, I always accompanied Ina and Karina (not their real name) playing under the tree. We also enjoyed sharing stories about other male friends. Sometimes, it is also fun to play with other female friends.

(Syed, 11 years old)

- **School's Engagement and Support**

It is also interesting to find that the institution such as school has played an important role in assisting children with GID inclination. This action indeed has benefited them especially in reducing their problem in schools. They are even special to the eyes of their teachers;

Cikgu Safiyah (not her real name) has taken care of my welfare. When I go to her class, she always focused on me than the other boys. Perhaps the other boys have bullied me frequently. I love Cikgu Safiyah.

(Samri, 11 years old)

The role of counselling unit is appreciated. The teacher's in-charge has always taken care of their problem as they put the GID students under their special supervision. The frequent meeting has indeed shown the concern by schools administration;

Cikgu Sahiri (not his real name) has always come to class and taken me to his counselling room. He often asked the questions and problems that I faced while in and out of the school. He sometimes sends me home after school hours.

(Fazilan, 12 years old)

- **Teacher's Role**

No doubt that teacher is playing an important role in the socializing process of school children. Correspondingly, we found that teacher in the school has taken initiatives to engage those GID students in the activities. Since they are considered as minority in school, it is best for the teachers to nurture their talents in many fields;

Cikgu Nasir (not his real name) has always invited me to participate in cultural activities such as choir and dance to occupy my time. Thus, I take the opportunity to hone my talents and abilities that I have. Nobody seems to invite me outside the school, I do not know!

(Edy Sahlan, 11 years old)

DISCUSSIONS

The GID in the context of this small scale study is relatively unique to be studied. The notion of GID can be seen in both medical and sociological traditions. Both traditions have their own way of explaining the phenomenon as it is related to human existence. From the medical side, it is genetic that determine the degree of femininity or masculinity among individual. The genetic factor, which is hereditary, seems to be the only view that they hold. The sociological as well as cultural perspective has seen the issue from their angle and view that the GID is something nurtured and learned through the social environment.

In relation to personal, emotional and physical development of the students, we anticipate that the students with GID will appear in many schools regardless of their geographical location. It is ubiquitous. Therefore, necessary plan of action should be taken in solving the problems. Although the medical world has provided us with many drugs solution, it is still depending on individual whether to undergo the treatment or not. The use of hormone is said to be one of the best solution. However, if the consumption does not confined to the original sex, the use of it will lead to vain. It is also similar when the individual that is born with penis but undergo sex operation and becoming transsexual. It will not solve the problem although we have benefited through the invention and invasion in medical field. Therefore, the individuals with GID should be properly been guided so that they are guided according to social norms and values and not due to emotional string.

From the sociological perspective, we have found the issues highlighted in this paper are related to the socialization. Thus, the process of socialization occurs through social interaction with the socializing agencies. The existing literatures show that socialization is the main cause of GID among children where parents play their own part in growing up their children. The finding of this small scale study has proven that parents and friends in schools have triggered the GID inclination at the very early age. Therefore, the family institution must be informed about their role in nurturing the children attitudes according to the approved and standard code of social behaviours. We have witnessed that the way they responded, behaved and participated in their daily activities is the product of learning process from their family and schools.

Finally, we identified at least two limitations in this study. First, this study only limits to the the GID inclination among primary school students. Therefore the findings do not represent the whole scenario of GID issues. Second limitation is related to the sample. The sample chosen in this study is confined to those children in school.

RECOMMENDATIONS

The GID issue in school should be handled wisely. It was due to the fact that different individual experiences different living orientation in their life. Therefore, GID inclined students must be seen as a unique entity that needed special attention in schools. Now, we would love to suggest a proper plan of action at three levels. First and foremost, at the ministerial level (Ministry of education), the proper plan of action which is suitable in assisting the students with GID should be introduced. This could be realized through the counselling unit that established in every school. Additionally, the school administrator should support them by reducing the gap between them and the GID inclined students. They should take care of these students welfare although they are not a normal as we expected. At the individual level, those who involved directly engaged with the GID friends should take this opportunity to embrace their friend's limitation by helping them. This is to strengthen the bond between the GID inclined students and the rest of the society either on the field or in their daily lives regardless of their ethnicities, religion and gender orientation.

SUMMARY

To sum up, the existing literature of GID has shown from both medical and socio-cultural point of view. It serves as a foundation that guides me to this small scale study. We had employed a case study for this paper and the findings have shown that the GID solution in school is still related to the socializing process of a child. Apart from it, school has supported them greatly and teachers in particular have played their essential role in assisting students with the GID inclination. In solving the issue, the proper plan of action should be formulated at the ministerial, school and individual levels consciousness.

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