

Increasing Concern About Violence Against Transgendered Individuals

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Section I: A Comprehensive View of Transphobic Violence

Gender is not simply defined as male or female anymore. There is a growing awareness of a third gender category, comprised of individuals that identify as transgendered. A transgendered person is someone that does not look or act like society believes a woman or a man should. This may include someone who does not feel that they identify with the gender they were born with; for example, when a biological woman feels they are actually a man stuck inside of a woman's body. Some of these individuals may have surgery to transition to another type of body. Transgendered individuals may also feel they identify as both a man and a woman, or as neither ("What Is 'Transgender'?"). Many people that identify as such are victims of abuse due to anti-transgender hatred or prejudice, referred to as transphobia. Some are even killed because of who they are ("Transgender Day"). Lately, there has been increasing concern about the violence experienced by transgendered individuals. Transgendered people have been treated violently for decades in nearly every region of the world, with many instances causing mental anguish, physical harm, and even death; while some individuals that hold radical feminist and fundamentalist religious beliefs can justify such harmful actions, the world at large is emphasizing the need to eliminate the violence and advocate for human rights for all people.

In the 1920s and 30s, psychologist Carl Yung suggested that every male has some femininity in his unconscious, and every female subconsciously houses some masculinity. Then in 1942, Dr. Harry Klinefelter developed the diagnosis for Klinefelter's Syndrome, a condition caused by a chromosome nondisjunction in males, which he suggested sometimes resulted in transgenderism ("Transgender: A History"). In this respect, transgenderism was a seemingly natural phenomenon, justified by medical authorities, so some considered violence against a person from this population unwarranted; it would have been like killing someone for having

cancer. However, some were convinced that transgenderism was a sign of a severe mental illness, and allowed the sub-human stereotype that was associated with the mentally unstable to guide their barbaric behavior. In Germany during World War II, Hitler considered transgendered people to have an incurable illness, and ordered the Nazis to abuse and often murder them (“Transgender People and Mental Health”).

Although WWII marked a time of ruthless transgender mistreatment, it was also a time of medical advancement that later benefited transgendered people. Hormonal injections were discovered and cosmetic surgery techniques were perfected, greatly improving the process of sex reassignment surgery. This procedure modifies one's sexual organs and allows individuals to transition to a different sex (“A Brief History”).

Following these surgical advancements came some high profile cases that brought transgenderism into public awareness. In 1952 Christine Jorgensen was the first American to undergo sex reassignment surgery, which she traveled to Copenhagen to receive. The media attention her story acquired prompted transgendered individuals around the world to publicize their own personal stories. In addition, sex reassignment clinics began popping up from Mexico to Morocco (“A Brief History”).

Although people were becoming more aware of transgenderism and sex reassignment surgery was more prevalent, skepticism amongst the public prevailed. Eventually the supposed abnormality of the condition was confirmed in 1980 when the American Psychological Association (APA) officially recognized transgenderism as a mental disorder (“Transgender Activism”). Many countries followed suite, classifying it as an issue of mental health around the world. This diagnostic label seemed to confirm that these people were “freaks”, further encouraging transphobic discrimination and abuse. Although there are people and organizations

raising awareness and working toward transgender rights, transphobia persists and violence against this gender minority remains an all too common occurrence.

Only recently have authorities begun to record and report transphobic based murders, so the long-term history of the trend is hard to quantify. However, the Gay-Straight Alliance Network has published a list of transgendered individuals whose murders have been reported by family and friends. The dates of these assassinations range from the early 1970s to those of the 21st century. Individuals have reportedly been killed in a multitude of countries including Argentina, New Zealand, and Malaysia (“Remembering Our Dead”). Many governmental agencies and Non Governmental Organizations (NGOs) now track human rights violations so the number of transgender murders can be better assessed at this time. “Transrespect Versus Transphobia Worldwide”, a research project administered by the NGO Transgender Europe, found that transgendered individuals are currently being murdered throughout every major region of the world. From the beginning of 2008 through the last day of 2011, 816 transgendered people were killed worldwide because of their gender identity, a number that only accounts for the reported cases, which are predicted to be dramatically lower than the actual figure. Dr. Carsten Balzer, lead researcher of the “Transrespect” research project, estimates that a transgendered individual is killed every 3 days around the world (Balzer).

With more reports of transgender violence comes an increasing concern about this mistreatment. Due to this concern, in 2011 the United Nations passed the first resolution in which it specifically recognized the human rights violations commonly occurring against gender non-conforming individuals and reclaimed human rights for all, including people that identify as transgender (“Historic Decision”). Another organization expressing interest in transgender rights is Global Action for Trans* Equality (GATE), an international organization that fights against

the violence and discrimination that has been long endured by transgendered people (“About GATE”). These movements and organizations are important because they demonstrate how widespread the concern is. They are setting global standards for the support of social justice and sending global messages about the mistreatment of the transgendered population and how it is so detrimental. These types of influences have the ability to increase concern and change behavior.

Although transphobia produces violence worldwide, its prevalence is most alarming in Central and South America, a region in which 643 transgendered people have been murdered in 21 countries since 2008. These incidents comprise more than three-quarters of the murders of transgendered people worldwide since this date. 325 of these cases have been reported in Brazil, 60 in Mexico and 59 in Colombia (“March 2012”). Further evidence of the problem can be found in interviews carried out with 302 transgendered people in Argentina in 2006. 86% of those interviewed attested to being mistreated by the police, and over 90% reported experiencing abuse due to their gender identity. Those interviewed reported 420 deaths of friends in the transgender community, a majority of them living only short lives. Nearly 40% of these deaths were a result of murder, suicide, or drug overdoses (Valente); these are lives lost as a result of transphobic actions or individuals attempting to cope with transphobia. It is evident that the transphobic attitude of many people promotes violence from those outside of the transgender community as well as self-injurious behavior amongst transgendered individuals, both leading all too often to death.

Additionally, 59 transgendered people in 13 Asian countries have reportedly been killed since 2008, with 12 deaths in Pakistan, 10 in India, and 10 in the Philippines (“March 2012”). Just a couple of months ago in April 2012, a middle-aged transgendered woman was found murdered in India, with evidence of strangulation and burns (“Transgender Found Murdered”).

Nepal is another Asian country in which transgendered people are targeted and abused (Kidd & Witten 45). Although fewer murders are reported in this country, the violence that transgendered individuals experience in Nepal is still scarring and unjust. Police in Nepal intentionally seek out, arrest, and detain transgendered individuals for reasons of being a “public nuisance”. While in custody, they are cruelly mistreated and abused (45). This could be a reason for the lack of reported violence, as the police and authorities are sometimes the ones responsible for the abuse. In these situations, transgendered individuals are left feeling hopeless because the people that are supposed to protect and respect them are abusing them instead. This encourages even more violence, as the police are modeling this type of behavior to the public.

Furthermore, Europe has reported 53 murders resulting in the death of a transgendered person since 2008, nearly half of them in Turkey and 14 in Italy (“March 2012”). In 2007 a transgendered man in Spain was killed after 9 months of torture and found with severe signs of malnutrition, open wounds, and facial disfiguration (De Benito). In June 2011, a woman was murdered in Turkey by her brother because she was “engaged in transvestism” (Balzer & Hutta). These incidents are important because they prove that transphobia has no limits or boundaries. The attacks are tortuous and inhumane and people are even subjected to such brutal violence by their own family members.

Violence due to issues of gender identity is present even in regions that are leading the human rights movement for transgendered people, such as Britain. A 51-year-old transgendered woman living in Liverpool reported frequent abuse and episodes in which neighbors and police officers would beat her. She also recalled traumatic incidents in which bricks were thrown through her house windows and her vehicle was set on fire (Kidd & Witten 46). This implies that transgendered people, regardless of where they live, can never let their guards down. Even in

places that promote equality and acceptance, gender non-conformists cannot feel completely safe. If nothing else, this could cause paranoia and anxiety, as they are constantly anticipating abuse. In worst-case scenarios, these fears become realities.

Individuals and institutions have varying views about gender non-conformity. Some feminists advocate for the rights of transgendered individuals because they understand what it is like to be a minority struggling for gender equality. They recognize and appreciate the progression of women's rights, but feel empathetic as society aims to disempower another group (Newitz). However, there are some radical feminists that take a different approach, tacitly supporting the violence directed toward transgendered individuals. Some strongly oppose the idea of transgenderism and see it as a continuation of male domination (Jeffreys). Janice Raymond is one of the individuals responsible for publicizing this perspective in her book, *The Transsexual Empire*. She suggests that male-to-female transgendered people help to maintain the patriarchal structure of society and that female-to-male transgendered individuals are nonexistent, in that they are actually confused lesbians ("Janice G. Raymond"). Individuals that subscribe to these beliefs are less likely to tolerate transgenderism and may even blame transgendered people for some of the downfalls of society. This could create a hatred that could easily result in acts of violence against the gender minority.

Raymond's drastic outlook may have been impacted by her strong Catholic upbringing ("Janice G. Raymond"). Many individuals with very fundamentalist religious backgrounds believe that gender is assigned at birth, gender identity is adjustable and can be changed through prayer, and that God disapproves of sexual reconstruction. These individuals also tend to fight against attempts to protect transgendered people from violent crimes fueled by transphobia ("Transgender Persons and Transexuals"). In the case of Christians or Jews, they may find ways

to support these beliefs from statements straight from the Old Testament. For example, Deuteronomy 22:5 reads, “A woman shall not wear anything that pertains to a man, nor shall a man put on a woman's garment; for whoever does these things is an abomination to the LORD your God” (“Religion, Spirituality”). This could easily be interpreted as God strongly opposing any person’s attempt to look or act in ways contradictory to their biologically assigned sex.

However, the Bible is somewhat contradictory when it comes to this topic. Eunuchs, biological men who are later castrated (a group that fits into the transgender description in that they are transitioning out of the gender assigned to them at birth), are discussed in the New Testament. Matthew 19:12 states, “For there are some eunuchs, who were so born from their mother's womb: and there are some eunuchs, who were made eunuchs by men: and there are eunuchs who have made themselves eunuchs for the Kingdom of Heaven's sake. He that is able to receive it, let him receive it.” Many Christians have interpreted this message as God recognizing and accepting that there are numerous ways that a person’s gender identity can change, and that one can receive the “Kingdom of Heaven” regardless of if or how they have changed (“Religion, Spirituality”).

Other religions also offer opinions about transgenderism. Many Muslims oppose transgenderism because the Koran specifically condemns individuals that do not adhere to their gender roles. This sacred book states, “The Messenger of God, peace be upon him, cursed female-impersonators who are males, and the male-impersonators who are women (61:773)” (Polat et al. 391). In contrast, there are many Jewish transgendered individuals that feel liberated by the words of the Torah, the Jewish holy book. Individuals often find comfort in its messages, as many of them are seen as promoting acceptance of change and transformation (Lum). It is evident that the Old Testament is understood in various ways; however, people have recently

been interpreting its content from the perspective of transgendered individuals (Lum), making it more relatable to the gender minority and the issues they contend with. These many variations point out that there are religious debates that make coming to terms with a conclusive opinion about gender diversity very difficult. Beliefs vary between and amongst religions in a way that further complicates the topic.

Regardless of opposing views involving the acceptance, inclusion, and protection of transgendered people, their needs for basic human rights are becoming more globally recognized. The United Nations has acknowledged that people are often mistreated if they do not conform to typical gender identities, something that is often perceived as dangerous by gender conformists (“The Protection of Lesbians”). The UN asked for all governments to instate laws protecting gender minorities and to eliminate any rulings that result in transgender violence and discrimination (“UN Calls for Protection”). The UN has also been getting involved with global organizations that fight against transphobic violence. GATE, a group previously discussed, has established a relationship with the United Nations. They compile and distribute publications about issues pertaining to transgender equality and visit various regions of the world in an attempt to create an international system of trans activists. The organization is led by individuals from India, Chile, South Africa, Venezuela, Germany, Belgium, and the United States (“About GATE”). Hopefully the ideas of acceptance being promoted in the political realm can overrule any religious confusion and encourage greater transgender tolerance.

Unfortunately, it is clear that violence against transgendered individuals is a prominent global concern. Although awareness of the gender minority is growing, that does not mean these individuals are seen and accepted. Although more organizations are working toward gender

equality, that does not mean the physical and emotional consequences of past discrimination and abuse have disappeared. There is definitely progress being made, but a lot of work still ahead.

Section II: A Multitude of Responses from Mental Health Professionals

Gender Identity Disorders entered the realm of psychological diagnoses in 1980, when they first appeared in the DSM-III (Zucker). DSM is short for the Diagnostic and Statistical Manual of Mental Disorders and it is composed of all of the conditions and criteria that mental health professionals need to diagnosis a client (“Gender Identity Disorder”). It is utilized in the United States and internationally (“Frequently Asked”), keeping criteria consistent and diagnoses universal. The definitions have developed, but in the DSM-IV, the most recent edition, the term Gender Identity Disorder (GID) encompasses all of those that identify with the opposite gender and find functioning in accordance with their biological sex to be extremely distressing (“Gender Identity Disorder”). Many people believe transgenderism should not be a mental disorder and may resent the mental health profession for holding such a perspective. However, the intentions of the field at large are good. Psychologists in areas that aim to promote human rights are able to therapeutically support transgendered individuals that are struggling with the detrimental effects of transphobic violence, conduct research to attempt to better understand and assist the transgendered community and the consequences of abuse, and support and promote acceptance and rights for all people. Mental health professionals in countries that don’t support gender diversity are not always able to practice similarly.

There is a definite distinction between sex and gender; however, I find that many people confuse the two. This may be in part because the DSM originally had them grouped together (Zucker). Initially, an individual was diagnosed with GID if they had a desire to change their sex

for 2 years or more (“DSM-IV”). However, one’s sex refers to the biological sexual and reproductive organs one is born with, while gender refers to socially established expectations of how a man or a woman should act or appear (“Answers to your Questions”). An individual can identify with a different gender but still wish to remain the same sex. Likewise, I have noted confusion between sexual orientation (or sexuality) and gender identity. Sexual orientation relates to whom an individual is sexually or physically attracted to while gender identity pertains to whether a person mentally or emotionally associates oneself as a male, female, or something else (“Answers to your Questions”). Since so many people are ill informed, mental health professionals have a lot of work to do if they wish to help educate the general public. The violent acts aimed toward transgendered individuals keep counselors very busy, as they help these people to cope; however, the abuse could possibly be prevented, as it may be fueled by misinformation and inaccurate stereotypes.

The very fact that gender non-conformity is categorized as a disorder may cause violent attacks against this minority. The European Court of Human Rights, which serves to defend the civil rights of people all across Europe (“Profile: European Court”), has expressed concern about transgenderism being a diagnosable condition (“Transgendered Persons’ Rights” 8). The court believes this stigmatizes the gender minority, but transgendered individuals throughout the continent fear that they will have difficulty accessing health care without the diagnosis. Mental health professionals in European countries are attempting to provide care for transgendered individuals without diagnosing them (8). I believe counseling these individuals as so-called “normal” members of the population as opposed to individuals with a clinical problem will help lessen the alienation of transgendered people. It could help integrate them into society, which in turn may eliminate some of the discrimination and abuse they endure.

Studies have shown that transphobia can have devastating effects on transgendered individuals. Although most of the psychological research has been done in the United States, the results are significant and worth exploration because they have helped other psychologists around the world recognize the extent of the problem. In some studies, it has been found that approximately 66% of the transgendered population has had suicidal thoughts, with such ideations in only 6% to 12% of the general population (“According to Study”). Also, out of 515 transgendered individuals surveyed in San Francisco, almost two-thirds of male-to-female (MTF) and over one-half of female-to-male (FTM) respondents met clinical criteria for depression (Bockting, Knudson & Goldberg 25). Therefore, we can see that there are a multitude of psychological difficulties that develop due to transphobic violence. It is extremely beneficial that mental health professionals are studying this population and collecting these types of data so that therapists in the field are able to recognize the risks associated with the gender minority and work to help them. Therapists diagnose and treat these conditions in an effort to help transgendered individuals to feel comfortable in the body they are in and enable them to live happy and healthy lives.

Psychologists in the United States are able to devote so much time and attention to transgendered individuals because it is a country that is committed to honoring the human rights of all people through the constitution and legal precedent. In fact, The American Psychological Association (APA) was the world’s first psychological association (APA President), and has designated an entire committee to the concerns of lesbian, gay, bisexual, and transgendered (LGBT) individuals. Amongst many other things, it is responsible for supporting the initiation of objective research about LGBT issues, studying the results of LGBT stereotypes and social assumptions, and creating material to educate psychologists on the problems surrounding the

LGBT community and how to deal with them (“Committee on Lesbian”). The fact that the country and the profession are so committed to transgender justice enable mental health professionals to feel supported in their work with the population. This encourages therapists to take on a multitude of transgendered clients, who so desperately need help coping with hate violence and transphobic abuse.

Since the formation of the APA in 1892 (“APA President”), many other countries have developed psychology associations that are influencing and inspiring the growth of human rights. Professional organizations around the world are also instating policies and encouraging practices that support and protect gender minorities. For instance, the Psychological Association of the Philippines (PAP) has instituted a policy that refuses any form of discrimination against LGBT Filipinos because it damages mental health. Ethically, Filipino psychologists are required to identify the “unique worth” of all people and value the diversity amongst the population (“Policy Statements”). Additionally, the Hong Kong Psychology Society has developed a position paper for mental health professionals working with LGBT individuals, which includes many points, all leading to the fact that psychologists should work toward a society that supports equal opportunity for all (“Position Paper”). Here we can see that psychologists in countries that aim to promote civil rights are working to remove as much bias as possible from their practices in order to provide transgendered clients with the respect, understanding, and empathy necessary to effectively ease any troubled individual.

However, not everyone is fortunate enough to feel so supported in their efforts to protect human rights. In fact, some people are beaten and even slaughtered for such attempts. Agnés Torres Hernández, a transgender activist in Mexico, was just murdered in March. She is remembered for making significant strides toward the acceptance of transgendered individuals,

progression that is obviously not yet fully welcomed in the country. Another transphobic murder was reported in Mexico that same month (Steiner). In areas such as this where transphobic violence is aimed at both transgendered individuals and those that work to support them, mental health professionals are not able to practice as freely or effectively. For instance, I was unable to find any sources documenting mental health professionals in Mexico working with the transgendered population, which in itself proves their reluctance to take on transgendered clients, or at least to publicize it. The multitude of hate crimes targeted at transgendered people compromises the safety of therapists working with them and restricts both their willingness and ability to try to help those within the gender minority.

Psychologists are impacted by this trend in other ways too; in many countries psychologists are required to analyze transgendered individuals that are interested in sex reassignment surgery in order to provide a medical clearance. However, such an assignment is becoming less likely for psychologists in Canada because not as many Canadians feel compelled to undergo sex reassignment surgery. This may be because surgery is no longer required in order for people to legally change their gender; one can now change the gender on their birth certificate without physically altering their body and with much less psychological consultation (“Changing Your Sex”). Since transgendered people in Canada are able to live as their preferred gender without being medically diagnosed, they may be able to avoid the discrimination caused by being associated with having a mental illness.

However, Canadian psychologists are not left without purpose. Some transgendered people need additional support in the realm of addictions, as they resort to substance use as a way to deal with transphobia. In a survey distributed amongst transgendered people in British Colombia, 12% stated that they thought they would currently benefit from addiction services,

16% said they should have taken advantage of addiction services in the past, and 8% thought they would need it in the future (Bockting et al. 34). The Transgender Health Program in Vancouver suggests that some transgendered individuals use drugs or alcohol as a way to manage or temporarily eliminate the memories of abuse or assault or to cope with current violence (34). Mental health professionals in such areas provide addiction treatment to help their clients better manage their lives and particularly the struggles and abuse they may suffer as transgendered individuals.

The violence and abuse that many transgendered people endure is psychologically distressing in many ways. It causes depression, suicidality, substance abuse, and more. Thanks to the information collected through much dedicated research, mental health professionals recognize the severity of these consequences; however, how they are able to respond often relies upon their location. In some areas, they are able to work freely and effectively with many transgendered people to help them cope with the discrimination and abuse they encounter. The psychology field in many countries is becoming increasingly concerned about the ill effects of transphobic violence and is dedicated to helping all people feel safe and protected in the life they lead. In other areas, strides towards transgender support and acceptance are being aggressively opposed and it is more difficult for psychologists to safely take on transgendered clients in these places. The world at large is on the right track, but still has a great distance to travel.

Section III: Transphobia in Turkey

As many countries around the world are recognizing the dangerous effects of transphobia, they are instituting or amending laws to promote the rights and well-being of transgendered individuals. Although Turkey is attempting to make similar changes, the concept

of gender identity equality is not readily embraced, as it conflicts with the ideals of the country's founding father and the principles upon which the current society is built. Unfortunately, transgendered individuals in Turkey still face violence, prejudice, and oppression daily (Polat et al. 384). In a country where the historical, political, religious, and social standards cause such violent stigmatization, mental health professionals work to support and console transgendered victims through therapy and safely integrate the transgender community into the rest of society by studying the gender minority and publishing their research.

Mustafa Kemal Ataturk founded the Republic of Turkey in 1923 and was its first president. He instated reforms that created a new citizenship identity called Turkishness, which was intended to create a “unified, indivisible, and homogenized nation”. Under this ideology, referred to as Kemalism, variations in sexuality are unacceptable. The Kemalist view of citizenship is restricted to heterosexual men and women, as they are the only ones able to keep the nationality thriving by creating more Turkish children (Ataman 131). Arguments about the proper way to be a “Turkish citizen” are still disputed in courtrooms and police stations today. Unfortunately, because most of the public is unable to distinguish between homosexuality and transgenderism, transgendered individuals are often labeled as deviants, which in turn subjects them to a great deal of violence (Öktem). It is advisable for transgendered individuals in this country to seek professional help to learn how to accept themselves and recognize the realities of their role in society, however humiliating or harmful it may be. Some of the Turkish policies in place make it extremely difficult for people to conceal the mismatch of their internal and external gender identities, so transgendered individuals must learn how to manage the public’s reactions.

Attention is called to one’s gender identity often in Turkey, as all citizens have identity cards that they are required to present whenever asked. One’s biological sex is signified with a

pink card for women and a blue card for men (Polat et al. 392). This often puts transgendered individuals in risky and harmful situations. If one's appearance does not match the gender revealed on the identity card, they may very well be subjected to violence or verbal abuse when presenting their cards to authority figures (392). Thus, psychologists throughout the country are studying how people respond physically, verbally, and emotionally when they discover transgenderism, so as to better understand how to prevent such negative and abusive reactions. In addition, the results of these studies allow them to prepare their transgendered clients about what to expect and help them to compose a plan on how to handle the reactions of others.

Unfortunately, the discovery of a gender non-conformist often prompts prejudice and cruelty because conformity is what leads to social acceptance in Turkey (Yuksel et al. 279). Sex reassignment surgery allows individuals to meet social standards by aligning their physical and mental gender identities; it was first permitted in Turkey in 1988 (279). Yuksel and her colleagues, writing in the *Archives of Sexual Behavior*, explain that in order to obtain the surgery, a medical certificate was required, which indicated that the procedure was necessary. However, there were no specifications about who must sign off on the certificate, meaning any physician could grant approval of the surgery on the basis of their own individual standards. Regardless, some surgeons required that individuals be evaluated by a mental health professional and diagnosed with “transsexualism” prior to the procedure. These psychiatric evaluations took numerous counseling sessions, as the diagnosis required a thorough interview and understanding of an individuals’ sexual and gender identity history (280). This is an important role for therapists, because if they permit the surgery, they are enabling people to align their psychological and physiological genders, allowing them to feel safer in a society that values homogeneity.

However, the qualifications for sex reassignment surgery in Turkey have recently been changed. Now, the courts must give permission for the procedure, and in order to do that they require the individual in question to get a psychological examination, not simply the signature of any physician (Can et al. 82). Although a psychological evaluation is now required, the Turkish legislation is less involved than that of other countries, leaving out many other psychological components. For instance, The Harry Benjamin International Gender Dysphoria Association (HBIGDA) advises that individuals be evaluated by at least two psychologists and that they are analyzed during a one-year “cross-living test”, in which they are assessed in how they manage as their desired gender sexually, socially, and legally (82). Skipping this experimentation may actually lead to more postoperative work for mental health professionals, as they may need to provide individual therapy to help transgendered clients cope with unanticipated changes after the surgery. Individual therapy as a pre-operative measure is used to educate them on the physical and psychological changes they can expect to endure (Yuksel et al. 280). Without these therapy sessions, the transition could be very evident and awkward, causing even greater attention to their gender diversity and leading to more physical and verbal abuse.

Diversity in Turkey should be better received than it actually is, since Turkey has been a candidate for inclusion in the European Union since 1999. Before it can be further considered, the Accession Partnership document states that Turkey must prove that they support human rights and respect the ideals of democracy (“Which Are The Priorities”). The government has attempted to instate changes to the Turkish Civil Code that will adhere to the EU standards, one of the first steps being the permission of sex reassignment. However, the Turkish Constitution states that in order to be approved for the procedure, an individual must first be single and eliminate their reproductive potential, pressuring individuals to divorce and undergo sterilization

(Ataman 132). This forces transgendered individuals to choose between aligning their sex and gender and creating a family. This could be a mentally and emotionally scarring decision to make, requiring psychological assistance to weigh out the options or to cope with the results. Individuals have noted the distress caused by such “freedoms” and see it as a lack of commitment to the human rights promised and suspect that country officials are only inching toward equality due to EU pressure (“Turkey Country Profile”).

The lack of progression in the realm of human rights is evident in some Turkish cities. Some individuals in Turkey have attempted to “cleanse” residential areas of gender non-conformists because they believe ridding the area of transgendered individuals that disturb the peace will result in city beautification and rent generation. People have violently beaten their transgendered neighbors as the rest of the community turned a blind eye and policemen ignored the assaults. Authorities even mark transgendered people as “fair game”, offering no assistance when they are victimized (Öktem). Although transgendered individuals may feel ignored and unprotected by state officials, luckily there are individuals in the mental health profession that work hard to help them.

Sahika Yüksel has devoted years of effort to support and protect the transgendered population. She is a psychiatrist that works in the Department of Psychiatry at Istanbul University (“7th International”). She serves on the Consultative Board for the Kaos GL Association, an organization that fights for the rights of the LGBT community. It works to ensure that LGBT individuals are able to establish safe and satisfying “individual, social, and cultural lives” (“Purpose”). The board is composed of individuals who have done useful research on gender identity and transphobic issues and therefore support the values and principles of the Kaos GL Association by contributing to the progression of human rights (“7th International”).

Yüksel and others like her are publicizing research in an effort to educate people on the facts of transgenderism and reveal the devastating effects of transphobic violence in hopes of changing public attitudes and behavior.

There are multiple reasons why so many Turkish citizens have a negative attitude toward transgenderism. One is that an astounding 99.8% of religious Turkish individuals practice Islam (“Turkey”), a religion that is skeptical of gender non-conformity. Some versions of Islam view heterosexuality as the only acceptable sexuality (Polat et al. 391). This implies a relationship between a man and a woman; all other combinations or identities could be considered a sin (391). If people subscribe to these ideas it makes it difficult for them to accept a transgendered person. The religion also makes it difficult to transgendered people themselves to comfortably practice it. It is an Islamic custom that men and women have different ways of praying. They pray in separate locations and they are expected to perform different physical movements during worship. Even dress is different as, in some parts of the world, Muslim women are required to wear headdresses (Yuksel et al. 287). Some transgendered people feel forced to give up religious practices altogether in an effort to avoid offsetting the traditions and calling attention to their gender deviance (287). The prevalence and power of Islam in Turkey might help explain the extent of transphobia in Turkey. Additionally, it helps to depict the role of mental health professionals in Turkey, who are needed to mend families and comfort individuals. Therapy is used to help both the family and the individual work through the ambivalence, fear, and frustration caused by the conflict between Islamic beliefs and a seemingly immoral gender identity.

However, approximately half of the population is secular and does not identify as Islamic (“Secularism” vii). Although these people are less likely to be influenced by religious beliefs,

they may have adopted a transphobic attitude for different reasons. In a recent study published in the *International Journal of Psychiatric Medicine*, the families of 39 transgendered individuals in Turkey were questioned, and nearly one-third said they were not educated or ill-informed about the possible variations in gender identity. The uninformed people reasoned that they were ignorant because transgenderism is seen as a humiliating and inappropriate topic of conversation and individuals are strongly urged to hide it from the public. It was predicted that those that were misinformed “learned” about transgendered people through the Turkish media. However, the image the media creates is overwhelming negative, as transgendered people are often presented as “prostitutes or low class entertainers” (Polat et al. 392). The media repeatedly shows individuals in this minority population being disrespected and abused (392), behaviors that are in turn mirrored in society.

The results of the Polat study show that Turkish society is sending negative messages about transgendered people, which are making it difficult for them to be accepted by their families and communities. Consequently, psychologists were prompted to offer family therapy sessions in Turkey to promote greater respect and inclusion of the gender minority. Family therapy aids acceptance and transforms attitudes by informing families of what transgenderism is and teaching them how to establish a family support system. The sessions help families to see that, regardless of societal standards, having a transgendered family member does not create a misfit family (Yuksel et al. 289). These results are also valuable because they reveal some of the causes of transphobia in Turkey. Recognizing that the discrimination of transgendered individuals may be due to a culturally composed negative image or a lack of education about the topic pinpoints an area that mental health workers could address in order to prevent transphobia and its accompanying abuse.

Mental health professionals in Turkey contribute invaluable research to the field and offer essential services to members of the transgendered community. However, I believe in the future they will maximize their potential by finding an effective way to educate the public about transgenderism. As individuals learn the truth about the topic, greater understanding will promote greater acceptance and respect. This will in turn improve human rights in Turkey and encourage EU accession. I am convinced in the future of mental health workers as educators in Turkey because their impacts will align with EU standards. This will create a favorable outcome in the eyes of the government, who will therefore support them and provide funds to make it happen. Throughout the rest of the world, I predict that as the fight for human rights continues, the profession will evolve so that it values the prevention of transphobic violence as much as it values the treatment of its detrimental effects. In this respect, I believe that mental health professionals will be educating the public about gender diversity and establishing greater acceptance and respect around the world.

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