

## SOCIAL FACTORS INFLUENCING THE FORMATION OF GENDER IDENTITY DISORDER AND ITS IMPACT ON ISLAMIC LAW

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### Abstract

*The advancements in science and technology today have introduced various methods to fulfil human satisfaction, even if they contradict Islamic values and local cultural norms. Discussions about gender identity and gender, which are becoming increasingly widespread, reveal many individuals advocating for and recognizing their status in society, especially transgender individuals. Therefore, this study will discuss the factors contributing to the development of Gender Identity Disorder within them and its implications for Islamic law. To achieve this objective, this study adopts a qualitative approach, applying content analysis methods to past studies, and utilizes thematic analysis methods. The study results indicate four factors that contribute to the development of Gender Identity Disorder in an individual: life experiences, parental desires, peer influences, and the influence of new media. Consequently, various stigmas and discrimination are imposed upon them. Islam clearly prohibits acts that contradict and alter Allah's creation. Thus, positive support and assistance from society are necessary to prevent these individuals from feeling marginalized. They need the best recovery treatment to restore them to their fitrah.*

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## INTRODUCTION

In the past, societal norms rigidly defined an individual's gender roles, aligning them strictly with their biological sex. However, unbeknownst to many, the progress and advancements of the contemporary world have significantly impacted the development of gender identities within the gender spectrum. Gender Identity Disorder (GID), now known as Gender Dysphoria (GD), constitutes a complex and vital aspect of human identity and self-perception. It refers to the distress experienced by individuals whose

gender identity does not align with the gender assigned to them at birth. This issue has been a fiercely debated subject for years. Scholars and experts have engaged in extensive discussions and debates about GD, aiming to unravel and address the problems faced by GD patients. Those classified as GD patients are often transgender individuals, individuals with a strong internal desire to live in a gender contrary to their birth-assigned gender in terms of characteristics and appearance (Sharifuddin, Ramli & Rosli, 2023). Thus, this article aims to discuss the factors contributing to the development of Gender Identity Disorder within them and its implications for Islamic law.

## **METHODOLOGY**

The methodology of the study is crucial to ensure that the research conducted utilizes the most appropriate and effective methods to address the research issues. This study is grounded in a literature review theme using a qualitative research approach. The qualitative method necessitates careful observation to obtain high-quality information based on a small sample size. A case study design is suitable for this research study. This is because the data obtained from this case study method will be collected and formulated into a statement as the study's result. Data collection is performed through documentation obtained from theses, scholarly articles, encyclopaedias, and books. The acquired data consist of facts and perceptions, which are then analysed according to the research requirements. The data is analysed inductively, organized by themes, and presented in tables and diagrams. Content analysis is a method involving the process of reading and examining scholarly materials for the researcher to use as fundamental sources in obtaining data or information for this study. Relevant identified references are sifted, classified, analysed, and briefly reviewed.

## **GENDER AND GENDER IDENTITY DISORDER**

Identity is characterized as the traits that define an individual by the National Language and Literature Bureau. It is a crucial characteristic of a person's existence because it is the sense within them that seeks both similarity with a group of people and differentiation from others (Nasir & Hussain, 2014). An individual might possess various types of identities, such as ethnic, religious, or national identities (Kroger, 2007). On the other hand, sex or gender is determined by biological and physiological characteristics that differentiate between male and female (Hermawati, 2007; Ramli, 2012; Marini, 1990; Newman, 2021; Newman, 2002). In the binary gender category, there are two types: male and female. Male gender is identified by the presence of the reproductive organ, the penis, while the female gender has the reproductive organ, the vagina. The number of X and Y chromosomes in the body also determines an individual's gender (Eckert & McConnell-Ginet, 2013; Thompson et al., 2022).

Meanwhile, the term "gender" is a social construct that pertains to how society distinguishes between men and women in terms of behaviours, psychology, roles, and social attributes (WHO, Manoek et al., 2014; Siann, 2013; and Pryzgoda & Chrisler, 2000). An individual's gender and their masculine or feminine qualities are closely intertwined (Ismail, 2015). It signifies a person's inclination towards ideas, traits, and identities associated with masculinity or femininity. For example, men exhibit traits linked to masculine gender such as strength, courage, and logic, and these are considered societal standards for boys, guiding them in adopting a lifestyle that maintains the naturally created masculine attributes. On the other hand, girls are often taught to play with dolls, which helps establish a feminine social framework. Women possess feminine traits, including gentleness and politeness.

According to Ramli (2022), the gender spectrum is continuously evolving over time and exhibits various variations. This development proves that society is increasingly accepting the fact that not everyone fits strictly within the binary categories; there is a category known as non-binary. According to Ahmed (2018), the non-binary category represents an intermediate state between male and female or encompasses both. There are also individuals who choose not to be identified as male or female (Oxford Learner's Dictionaries). The emergence of this group can be evidenced by the existence of several terms used by them to describe this population (Ramanathan & Bhavanani, 2018). Starting with just LGBT representing genders that diverged from the binary gender system, until the emergence of other acronyms nowadays like LGBTQ, LGBTQ+, LGBTQI, LGBTQI+, LGBTQIA, LGBTQIA+, LGBTQ2S+, LGBTQIAPK, LGBTQQIP2SAA, LGBTQQICAPF2K+, LGBTQQICAPGNGFNBA,

and so on, example like cisgender, queer, intersex, androgynous, questioning, pansexual, two-spirit, asexual, gender nonconforming, and others (Sharifuddin & Ramli, 2023).

The Gender Identity Disorder (GID) has been listed in all authoritative manuals used in diagnosing individuals experiencing mental health disorders, namely the Diagnostic and Statistical Manual of Mental Disorders (DSM). DSM III defines GID as a discomfort and incongruence with one's assigned gender at birth (APA, 1980). Individuals with GID will experience extreme distress related to a strong identification with a gender different from their assigned one (McKittrick, 2007). The key feature of this disorder is the mismatch between anatomical sex and gender identity. Gender Dysphoria (GD) is a new term replacing Gender Identity Disorder in DSM V (2013). Controversy arose as some LGBT movements opposed the views of psychiatrists and mental health professionals labeling variations in gender expression as mental disorders. The change in terminology aims to remove 'disorder' and 'disturbance' from the old term, focusing on dysphoria to shift attention to the aspect of care rather than gender identity itself (Zucker et al., 2013). This new focus emphasizes that the diagnosis involves not only identity issues but also significant distress or discomfort resulting from this incongruence. This discomfort is accompanied by mental health issues such as anxiety, depression, irritability, feelings of powerlessness, and a strong desire to live as a gender different from the assigned one (Dhejne et al., 2016). Additionally, changing the name and diagnosis serves as an alternative to prevent discrimination against this group.

There are two phases of Gender Identity Disorder/Gender Dysphoria (GID/GD) that have been studied: the childhood-onset phase and the adolescence/adulthood phase (Zucker, Lawrence & Kreukels, 2016). However, not all children and adolescents with GID/GD continue to experience identity disorder until adulthood (Holt, Skagerberg & Dunsford, 2016). This is because the trajectory of GID/GD in childhood differs from that in adolescence. Those experiencing GID/GD during adolescence are more likely to persist into adulthood (de Vries et al., 2011). Some primary criteria for childhood GID/GD in DSM-III - DSM-V include:

- i. Desire to live as the opposite gender
- ii. Discomfort with the gender assigned
- iii. Desire for the physical characteristics of the opposite gender
- iv. Discomfort with their own anatomical sex
- v. Preference for cross-gender roles in play or fantasy
- vi. Social, school, or other important area functioning significantly impaired

For adolescent and adult GID/GD in DSM-III and DSM-III-R, it was diagnosed under Transsexualism 302.5x and 302.50. However, there was an addition in DSM-III, namely Atypical Gender Identity Disorder (302.85), which is the code for gender identity disorder for residual categories that do not fit the criteria for Gender Identity Disorder. Additionally, in DSM-III-R, there were two more additions: Gender Identity Disorder of Adolescence or Adulthood, Nontranssexual Type (GIDAANT) under code 302.85, and Gender Identity Disorder Not Otherwise Specified under code 302.85. The primary criteria for adolescent and adult Transsexualism, GID/GD in DSM-III - DSM-V include:

- i. Cross-gender identification
- ii. Desire to live as the opposite gender
- iii. Feelings of incongruence with the sex assigned at birth
- iv. Discomfort with the gender assigned
- v. Desire for the physical characteristics of the opposite gender
- vi. Discomfort with their own anatomical sex
- vii. Desire to eliminate their own sexual characteristics
- viii. Significant impairment in social, school, or other important areas of functioning

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## **SOCIAL FACTORS INFLUENCING GENDER IDENTITY FORMATION DISORDERS**

Social factors play a significant role in shaping the development of gender identity disorders in individuals. There are four factors that influence gender identity formation: life experiences, parents, peers, and other social media and systems contribute to an individual's gender concept development (Bussey, 2011; Baqutayan et al., 2021; Mishra et al., 2016). The first factor involves those who have been exposed to deviant activities since childhood (Ahmad & Nawi, 2015). This includes being victims of rape, forced oral sex, or exposure to explicit images and videos. Such experiences impact social learning in the development of homosexual behavior resulting from serious traumas like these (Byrd & Stony, 2001). The second factor is parental desires regarding a child's gender (maternal wish), influencing an individual's identity formation (Baqutayan et al., 2021; Yusof & Timmiati, 2011; Green, 1974). A child's character is typically shaped starting from the family, namely the mother and father (Steinberg, 1990). If parents strongly desire a male child but give birth to a female, they may raise the child as a boy, giving them a male name, dressing them in boys' clothing, and praising masculine traits. The effect of molding their child in this manner, as described above, has led to gender confusion among these children.

Peer influence factors also affect gender identity formation. Peers with similar identities also significantly influence the shaping of gender identity. Individuals are easily influenced by peers who share similar personalities and engage in behaviors typical of their gender group. According to Kornienko et al. (2016), in early childhood, children form ideas about the gender group they belong to, generally either male or female. However, as they mature, their understanding of gender becomes broader, and teenagers typically choose peers who share similarities in behavior, attitudes, and identities (Morrow, 2004; Akers et al., 1998; Hogue & Steinberg, 1995). Othman et al. (2021) suggest that as individuals enter adolescence, they become more susceptible to influence and are eager to explore new experiences. This further underscores the impact of peers on an individual's gender development. Additionally, teenagers experiencing family conflicts tend to view peers as substitutes for parents (Zakaria, Jafri & Salleh, 2020; Schumm, 2010). Due to family conflicts, whether originating within the family or due to feelings of isolation, teenagers are easily influenced by peers due to the lack of love and attention from parents and other family members (Abdullah & Akhir, 2019).

Mass media and technology play a significant role in influencing the development of an individual's gender identity today. Mass media and technology also play a crucial role in shaping an individual's gender identity in today's world. New media platforms contribute to human identity disorders, such as websites, internet-based television, web-based news, and social media networks like YouTube, Facebook, Instagram, Twitter, TikTok, and others, including video sharing (Othman et al., 2021; Craig & McInroy, 2014). Adolescents may use new media to explore new identities, behaviors, and lifestyles that may not be accessible offline (Pascoe, 2011; Hillier & Harrison, 2007). This is because we know mass media can quickly and efficiently disseminate news or knowledge, leading to the widespread dissemination of these gender disorders worldwide without boundaries. For example, easily accessible websites include transgender dating, TG shopping, Human Rights Watch, and many more. Furthermore, the flood of social influencers from the transgender community on social media serves as a driving force for gender identity disorders within individuals (Sharifuddin et al., 2020). This is because social influencers today are increasingly bold in presenting themselves to the public with identities contrasting their original gender, becoming one of the causes of gender identity formation in individuals who admire them. Moreover, various non-governmental organizations (NGOs) have been established to provide moral support to individuals experiencing gender disorders, such as the National Center For Transgender Equality, Center of Excellence for Transgender Health, National LGBT Health Education Center, Pink Triangle, and many more. They use Human Rights policies to advocate for the rights of individuals with gender identity disorders. With the support of these organizations, individuals feel more motivated to continue expressing their non-conforming identities, disregarding religious perspectives on this matter.

## **CHALLENGES FACED BY TRANSGENDER INDIVIDUALS**

Transgender individuals face a multitude of challenges in their lives, often related to societal discrimination, lack of understanding, and limited legal protections. Some of the challenges include

social stigma, discrimination, mental health, physical safety, access to healthcare, employment issues and many more. Transgender individuals often become victims due to social pressures from the surrounding community stemming from the disparity between their original gender identity and the identity they identify with. Some of them are treated or labeled as a gender different from their true identity, leading to feelings of humiliation due to societal stigma against them. They also face various forms of persecution, including attacks, extortion, and violations of personal rights by authorities. Various extreme forms of violence committed against them often go unreported or undocumented by the media or authorities, such as being beaten to death with blunt objects, being thrown out of buildings, drowning in water tanks, being stabbed, strangled, and so on. Hate crimes and violence against transgender individuals are unfortunately common, leading to concerns about personal safety. They also vulnerable to bullying and harassment, including mockery, name-calling, hitting, kicking, tripping, spitting, and being physically harmed with weapons.

Transgender individuals often encounter social stigma and prejudice, leading to marginalization and exclusion from various aspects of society. The negative perception and lack of acceptance from society regarding their identity and appearance have further complicated their lives. They frequently face workplace discrimination, leading to higher rates of unemployment and economic instability. In fact, some of them end up homeless due to financial difficulties (James et al, 2016). They are forced to resort to jobs as sex workers, such as prostitutes and entertainers in clubs, to sustain their daily lives, including housing and the high costs associated with funding their gender transition products such as hormones and clothing (Jennings Mayo-Wilson et al., 2020). Reports indicate that between 50% and 60% of transgender women end up in the sex industry due to their failure to secure suitable employment because of such discrimination (Free Malaysia Today, 2017).

Moreover, they often face challenges in accessing appropriate healthcare, including gender affirming treatments and surgeries. They are also discriminated against in terms of healthcare access and are unable to receive treatment for HIV due to fear of arrest by authorities in some countries if they openly seek treatment at healthcare centers. This is because engaging in cross-gender behavior or dressing is considered a criminal offense and can lead to arrest and punishment (Forbes, 2020). HIV infections among transgender individuals are often attributed to their involvement in sex work, unprotected sex, sex while intoxicated, frequent changes in sexual partners, and engaging in sexual activities with HIV-positive individuals (Becasen et al., 2019). Alongside the issues plaguing the transgender community related to job discrimination, healthcare, and societal stigma, many organizations have stepped forward to address their problems and prevent them from falling into the trap of social ills to sustain their livelihoods. Various government bodies and non-governmental organizations (NGOs) have come forward to provide services to assist this minority community, such as the Family Health Development Association of Penang (FHDA), which primarily offers services related to health and reproductive aspects. Their approach to the transgender community is not to encourage the continuation of these practices in the country but rather to focus on providing advice regarding the implications and potential side effects that may occur if they take medications or hormones that do not align with their individual identity. The Ministry of Health Malaysia does not discriminate against this group; in fact, they also provide HIV and AIDS prevention and treatment programs through the National Strategic Plan to End AIDS 2016 to 2030. Hence, we can see that the involvement of these entities indicates that various concerted efforts are being made to provide assistance, with the hope that this community becomes aware of the dangers they might face if they neglect healthcare due to the transgender culture they practice.

## **ISLAMIC LAW REGARDING GENDER IDENTITY DISORDER**

However, it must be emphasized that the assistance provided is not a symbolic endorsement of their deviant behavior but rather a method to guide them back to the right path. This is because their actions clearly contradict the principles of Islam. We can look back at human history where no Samawi religion or culture recognized this ambiguous gender. Lessons can be drawn from the story of the people of the Prophet Lut, who faced severe consequences for engaging in actions contrary to Islamic teachings. The Prophet Muhammad (peace be upon him) took various measures to prevent the prevalence of such behavior, such as restricting interactions, segregating, and banishing those involved.

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*From Ummu Salamah, it is narrated that the Prophet Muhammad (peace be upon him) was in her house. Inside the house, there was a mukhannath (effeminate man). This mukhannath said to Abdullah bin Abi Umayyah, Ummu Salamah's brother, "If Allah opens the land of Taif for you tomorrow, I will show you Ghaylan's daughter. She presents herself facing with four and turns her back with eight." The Prophet Muhammad (peace be upon him) said, "Do not bring this (person) upon you" (Sahih al-Bukhari: 2535).*

As is known, the actions and behaviors of this group are contrary to Islamic teachings. This is because they engage in deviant behavior, altering their genitals and sexual characteristics to fulfill their sexual orientation and gender identity. Prohibitions against such actions are mentioned in the noble Quran, the words of Allah (SWT):

*"I will certainly mislead them and delude them with empty hopes. Also, I will order them and they will slit the ears of cattle and alter Allah's creation." And whoever takes Satan as a guardian instead of Allah has certainly suffered a tremendous loss" (4:119)*

Additionally, the Prophet Muhammad (peace be upon him) also condemned actions that imitate the appearance of the opposite gender. Altering one's appearance and body in this manner is against Islamic law, regardless of whether the individual is male or female. Such actions fall under the categories of taghyir (changing Allah's creation) and tasyabbuh (imitating the opposite gender) (Hamdan et al., 2015). As stated in the hadith of the Prophet Muhammad (peace be upon him):

*From Ibn Abbas: "The Prophet (peace be upon him) cursed men who imitate women and women who imitate men." (Sahih al-Bukhari: 5547)*

*From Abdullah bin Mas'ud: "Allah curses those who practice tattooing and those who get themselves tattooed, those who remove their face hairs, and those who create a space between their teeth artificially to look beautiful, such people as change what Allah has created." (Sahih Muslim: 2125)*

Looking at the legal provisions in Malaysia for the transgender community, it remains unclear because there is no specific law formulated comprehensively to efficiently address this issue, whether for Muslims or non-Muslims (Malib & Mustafa, 2014). The legal provisions concerning this group are related to offenses of men behaving or dressing like women and women behaving or dressing like men. The penalty for these offenses is a maximum fine of RM1,000.00 and/or imprisonment for up to 6 months (Abd. Hamid et al., 2015). Here, it can be observed that the fine imposed is very low and does not pose a significant challenge for them to pay. This is because, besides having their own businesses, they are also supported by various non-governmental organizations that are always behind this community, ready to provide any necessary assistance.

## CONCLUSION

Based on this study, the researcher found that it has a positive impact, including understanding the background related to Gender Identity Disorder, factors, and challenges faced by the transgender community with GID. Through this study, authorities can formulate effective intervention measures to assist and treat those diagnosed with GID. This is because Allah SWT strictly prohibits actions that imitate the opposite gender, which contradicts one's birth gender, as well as matters involving altering Allah's creation. Additionally, there is a need to ensure that the Islamic community is more aware and knowledgeable about this issue in our country. Immediate action needs to be taken in line with Islamic principles because this issue is not a small one. It clearly indicates the numerous evils that may arise if this issue is not addressed, such as same-sex relationships, same-sex marriages being allowed, and gender fraud. It is recommended that authorities share relevant information about this phenomenon to prevent it from spreading to future generations. Additionally, there should be a focus on strengthening religious understanding within each individual in Malaysia.

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## **CONFLICT OF INTEREST**

The authors affirm that there is no conflict of interest in this article.

## **AUTHOR CONTRIBUTION**

All authors jointly contributed to the development of this paper. All authors also contributed to reviewing and refining the paper, providing intellectual and methodological input, and ensuring its academic rigor and clarity. All authors read and approved the final version of the manuscript for publication.

## **AI GENERATIVE DECLARATION**

The author declares that generative AI tools were not used in the creation of this article, except for text paraphrasing and cross-checking references. The author assumes full responsibility for the accuracy, integrity, and final content of this work.

## **RESEARCH ETHICS STATEMENT**

The author(s) declare that this study did not involve any human biological samples or data, or animal subjects. Consequently, formal ethics committee approval and informed consent were not required for this research.

## **DATA AVAILABILITY STATEMENT**

The data supporting the findings of this study are available from the corresponding author upon reasonable request, subject to institutional and ethical requirements.

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