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The Impact of Social Support on Psychological Distress among Khawajasira Community: The Mediated Effect of Self-Efficacy

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Abstract: Khawajasira is a general terminology used typically in Pakistan that refers to the people who are transgender, hermaphrodite, inter-sexed, eunuch, transvestites, homosexual or bisexual (Brettell & Sagen, 1997). The current study examines the impact of Social Support and Self-efficacy in producing Psychological distress among Khawajasiras. A sample of total two hundred Khawajasiras (N=200) was drawn from the KhawajaSira community living in Southern Punjab. Urdu versions of Psychological Distress Scale K10 by Kessler (2010), General Self-Efficacy Scale (2003) and a 3 item self-created questionnaire were used to measure Psychological distress, Self-efficacy and Social support respectively. To measure reliability of all three scales, reliability analysis was performed. Analysis of data through SPSS suggested significant positive association among Self-efficacy and Social support; Social support and Self-efficacy significantly negatively associated with Psychological distress. Moreover, Social support significantly predicted the Psychological distress in Khawajasiras even after controlling the demographic variables. In KhawajaSira community, association between Social support and Psychological Distress was mediated by Self-efficacy. Suggestions for future research and implications of the study were also discussed.

Keywords: *Psychological Distress, Self-Efficacy, Social Support, Transgender, Khawajasira*

1. Introduction

Khawajasiras were neither considered male nor female, but formally considered as third gender in Pakistan, India and Bangladesh. This term is frequently promoted by transgender social associates themselves and by social workers that may recognize the individual as a transgender, transsexual or a cross-dresser (Pasquesoone, 2014) There are many point of views regarding Khawajasiras in various cultures. Many nations supposed that they possess super-natural powers and sanctifications of God, in contrast some cultures recognized them neither male nor female.Meanwhile not tagged as deviants by possessing reputable positions (Bartlett, Vasey, & Bukowski, 2000).It is claimed that the Khawajasira community in Pakistan has faced several levels of legal, institutional and social discrimination. While, the Constitution of Pakistan protects all citizens by safeguarding their rights, dignity and status; these rights are not translated into laws and protection mechanisms at the state level with respect to vulnerable groups and specifically the Khawajasira community (Aurat Foundation, 2016). The circumstances are more aggravate due to the absence of reverence and reception for these clusters making them societal recluses and grudging them of their fundamental privileges and exposing them to a lot of discrimination, aggravation and violence merely based on their sexual characteristics and distinctiveness. Khawajasira has been a victim of social intolerance in many communities as well as in Pakistani community. Khawajasira which are left out on the streets by her family, who is taunted and ridiculed at every turn, whose sight causes people to turn their gaze, whose pain our world remains indifferent to and whose cries for help, affection and understanding are left unanswered. An entire community of people has been denied their human status for years, only because the society continues to cling to valves based on ignorance (Akhuwat, 2016).

Research suggests that adolescents and adults from sexual minorities develop anxiety, depression, substance abuse, and suicidality at rates that are boosted in contrast with those in the general community (Cochran, Mays, & Sullivan, 2003). Accordingly, psychosocial distress may represent the diverse rates of depression, hopelessness, and current suicidality as seen among gay, lesbian, and cross-sexual young people and their hetero peers. Studies in the US and Netherlands indicates a critical relationship among stigma, prejudice, discrimination and poor psychological well-being (Sandfort, Graaf, Bijl, & Schnabel, 2001).Similarly, growing up gay, lesbian, indiscriminate, or sex nonconforming broods are at risk for certain psychological wellness issues, a large portion of which are altogether corresponded with disgrace and biasness (Adelson, 2012). Bariola, et al. (2015) identified that age, poor family support and being victimized are associated with high psychological distress while, being connected with LGBT peers and high income were associated with high

resilience.A sample of 1093 (N=1093) Transgenders in US in order to examine the connection between mental health and minority stress. Their study found that 44.1% of the total sample having severe clinical depression, 33.2% having anxiety whereas 27.5% were having somatization. They found the positive relationship between psychological distress and social stigma. Further, Social support had a moderating effect on that relationship.

Moreover, there are no known grassroots activism among lesbian, gay, bisexual and transgender (Khawajasira) communities in Pakistan (International Gay and Lesbian Human Rights Commission, 2008). Lack of activism, silences around sexualities and deeply closeted society in Pakistan makes it difficult to accurately assess the living conditions of Transgender and Human Rights situation among LGBT community. Furthermore, in Pakistan, the topic of Khawajasiras did not discussed due to the controversial nature of the topic and typical mind set of the people. Almost all population do not accept them as a part of their society. So, in Pakistan, Khawajasiras faced severe rejection most of the time. One study on transgenderism stated thatalmost1 out of fifty children are identified with tendency to behave like Khawajasiras. Transgenderism affected two percent of population in Pakistan (Akhtar, 2016). In our community, most of the time families identified Khawajasiras. Society most of the time mistakenly assumed them as pre-homosexuals; so, families behave aggressively with Khawajasiras. Families tend to strictly warn the transgender child to change his attitude, which he cannot comply thus ultimately results in abandonment of transgender children by their loved ones.

2. Methodology

Table 1: Demographic Descriptive of Sample (N = 200)

Variables	***f (%)***
Age	
Below 18 years	18 (9%)
18 to 25 years	82 (41%)
26 to 30 years	36 (18%)
31 to 35 years	35 (17.5%)
36 to 40 years	23 (11.5%)
Above 40 years	6 (3%)
Education	
Under Primary	101 (50.5%)
Primary to Middle	68 (34%)
Middle to Matric	31 (15.5%)
Matric or Above	
Working Duration in the Field	
Less than 2 years	49 (24.5%)
2 to 5 years	62 (31%)
6 to 8 years	64 (32%)
More than 8 years	25 (12.5%)
Monthly Income	
Rs. 5000 or less	18 (9%)
Rs. 5100 to 8000	85 (42.5%)
Rs. 8001 to 10000	51 (25.5%)
More than Rs. 10000	46 (23%)

The present research is a quantitative study based on cross sectional survey design. Sample size consists of two hundred (N=200) Khawajasiras from district Bahawalnagar. The researcher was intended to check the effect of Social Support[1] on Psychological distress among Khawajasiras. Furthermore, the impact of Social

[1]*Social support i.e. from biological family, Khawajasira community and society in general.*

Support on Self-Efficacy among Khawajasiras was also explored. Urdu version of Kessler Psychological Distress Scale (K10) originally developed by R.C. Kessler in 1992 translated by Ghafoor, Sitwat, and Kausar (2010) was used to examine the level of Psychological Distress. Urdu version of General Self-Efficacy Scale (GSE) primarily constructed by Ralf Schwarzer and Matthias Jerusalem in 1995 translated by Tabassum, Rehman, Schwarzer and Jerusalem (2003) was used in the current study to determine self-efficacy level. Questions were added to access the social support after the measurement of reliability that was proved significant. Demographic variables; age, education, duration of work in the field and monthly income were added. The scales were used with the permissions of both, original authors and translators.

3. Results

Table 2: Descriptive of Variables and Alpha Reliability Coefficient of Scales (N=200)

Scales	K	M(SD)	α
Psychological Distress Scale	10	29.41 (12.43)	.96
Self-Efficacy Scale	10	23.13 (9.16)	.96
Social Support	3	7.72 (1.82)	.61

Note: M = Mean; SD = Standard Deviation; α = Alpha Reliability; K = Number of Items

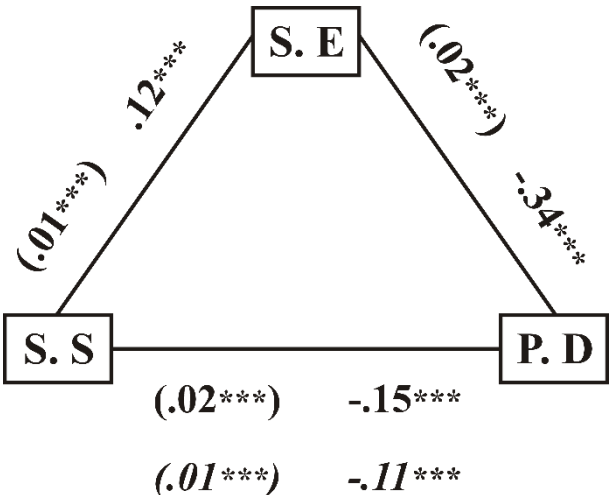


Figure 1: Mediation Analysis for the Sample regarding Social Support through Hierarchical Regression

Note: Italicized values= second analysis, P. D= Psychological Distress, S. E= Self-Efficacy, S. S= Social Support. Control Variables = Age, Working Duration in the Field, Education, Monthly Income.
**** = P<.001*

A variable is considered a mediator when its presence lessens the significant relationship between two other variables (Baron and Kenny,1986). In the current model, in first step covariates of the study was controlled to roll out the confounding. In first step of the analysis in hierarchical regression control variables predict significantly psychological distress in the sample ΔR^2 =.90; F=358.47, p<.001; Category β=-.89, p<.001; working duration in the field β= -.10, p<.001. Social support significantly predicted 2% variance in psychological distress (β=.15, p<.001). Social support significantly predicted 1% variance in self-efficacy (β=–.12, p<.001). Furthermore, self-efficacy significantly predicted 2% variance psychological distress (β= -.34, p<.001). When self-efficacy was controlled, the effect of social support on psychological distress was reduced for the sample (β= -.11, p<.001). Sobel's test revealed that self-efficacy significantly reduced the association between social support and psychological distress (z= -3.27, p<.001). Thus, self-efficacy significantly partially mediated the relationship between social support and psychological distress in the sample.

Summary of findings

- The reliability of total scales ranges from .61 to .96.
- Social support explained 2% variance in Psychological distress after controlling the covariates and it was significant.
- Social support explained 1% variance in Self-efficacy and it was significant.
- Self-efficacy explained 2% variance in Psychological distress and it was significant.
- Self-efficacy partially mediates the relationship between Social support and Psychological distress.

4. Conclusion

Fiori, McIlvane, Brown and Antonucci (2006) conducted study on association among quantity and quality of Social relation and depressive symptomology. They also find the possible mediating role of Social and general efficacy.Their results proved that depressive symptoms were influenced by social relations and Self-efficacy provides a mechanism through which social relations affect symptoms of depression. Wright and Perry (2006) reported in a study that Psychological distress is correlated with sexual identity distress, less drug abuse and less usage of alcohol. In youth, severity of sexual identity distress reduced when they have strong support network. Domínguez-Fuentes, Hombrados-Mendieta and GarcÍa-Leiva(2012) analysed the social support data and life satisfaction in a sample of 220 (N=220) gays. Their findings proved that friends are big source of Social support. In family situation, sister gives more support and in turn life-satisfaction increased. So, they conclude that life satisfaction is affected by Social support.Data analysis proved that Social Support has a significant impact on both, Psychological Distress and Self-Efficacy. Khawajasiras that had high Social Support were high in Self-Efficacy and low in Psychological Distress. These findings of the study are similar to the previous researches e.g. Bariola, et al.(2015) and Bockting, Miner, Rebecca, Hamilton and Coleman(2013).Wang, Cai, Qian and Peng(2014) conducted a study to find the role of Social support in association between Stress and Depression. They found that high Stress is associated with high Depression and with low Social support in undergraduates. Those undergraduates who reported low Stress were also low on Depression but high on Social support. So, study results proved that Social support moderate relationship of Stress and Depression in undergraduates. Undergraduates with high Social support were less affected by Stress and their Depression level was also low.

Previous studies showd that social support and self-efficacy are positively corelated with each other. Nwoke, Onuigbo and Odo(2017) showed that social support negatively predicted inpatient caregivers' reported stress. Gender significantly predicted stress among the inpatients' caregivers. Findings of the current study were also consistant with these researches. Social support negatively correlated with Psychological distress and positively correlated with Self-efficacy.Wanga, Qub and Xuc(2015)conducted a study on women psychiatrists (N=140) to check the association between Social support and Self-efficacy. They found that female psychiatrists of different ages or with different qualifications experience significant differences in total Social support, Objective support and utilization of support.Objective, Subjective and Utilization of Support have positive associations with Self-efficacy in female psychiatrists. There were significant differences regarding total Social support, Objective support and Subjective support in female psychiatrists with different education level.Conclusively the findings suggested that in Khawajasiras, there is significant positive association between Social support and Self-efficacy. Psychological distress is significantly negatively related with Social support and Self-efficacy. Social support significantly predicted the Psychological distress in Khawajasiras even after controlling the demographic variables. In Khawajasiras, association between Social support and Psychological distress was mediated by Self-efficacy.

Suggestions

- Future research could investigate the factors contributing in Psychological distress among Khawajasiras.
- Government and other Non-Governmental Organizations should rigorously start community awareness campaign and programs to minimize gender related stigma and maximize Social support.
- The Khawajasira associations should work effectively on ground basis to bring them in mainstream.

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