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A qualitative exploration of stressors and coping strategies of transmen during the global crisis

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Abstract

Introduction: The lockdown protocols with various restrictions were put in effect to stop the proliferation of coronavirus. It brought many challenges in the life of the mass community, but the challenges faced by transmen during the lockdown were unique and, in some cases, more challenging due to the high level of marginalization, ignorance, and lack of basic support for them even in normal times. This further led to the poor psychological and physical health of these individuals. The present paper aims to understand the subjective ordeal of transmen, the stressors they faced at the time of lockdown and the coping strategies opted to deal with the stressors.

Method: Semi-structured interviews were conducted with 15 transmen of the age range 21 to 30 years residing in India. The interviews were conducted after the end of the pandemic during and after phase 4 of unlock in India when the restriction on movement was removed. The interviews were later analyzed using Thematic analysis.

Result: The analysis shows several physical, psychological, and social stressors emerged during the pandemic including emotional and physical violence from unaccepting parents, unavailability of supportive organizations, inaccessibility of medical assistance and hormone treatment, suicidal ideation due to free time, feelings of isolation and use of wrong pronouns all affecting the mental health severely. To deal with these stressors, transmen adopted various strategies that include, cognitive appraisal, emotional support from friends, and self-help thought.

Conclusion: These findings are discussed within the Indian context during the pandemic. The findings of the present work will help transmen in suggesting the ways of dealing with the stressors at uncertain times.

Keywords: Coping Strategies, COVID-19, Coronavirus, Lockdown, Stressors, Transmen

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Introduction

Lockdown-imposed rules, such as stay-at-home orders and social distancing, effectively minimized widespread fatalities but had a negative impact on the mental health of many marginalized communities, one of which is the group of transmen. Transmen, individuals who identify as male but were Assigned Female at Birth (AFAB) (Cromwell, 1999), face unique and specific challenges, including mistreatment in healthcare settings (Taylor, 2013) and humiliation for not exhibiting feminine traits (Conegatti, 2020). The emergence of lockdown created a new set of stressors among them which needs to be explored along with the effective coping strategies used by them.

Minority stress model and Transgender individuals

The model was developed to emphasize the condition of gay men (Meyer, 1995) but later expanded to understand the stressors of transgender individuals as well (Hendricks & Testa, 2012). According to the model, minorities often face various distal stressors including many external factors, and proximal stressors including various internal factors, which collectively result in excessive stress. This heightened stress negatively affects their physical and mental health through various pathways (Tan et al., 2020; Meyer, 2003). Transgender individuals having a minority status face various proximal and distal stressors throughout their life span.

They face a wide spectrum of distal stressors due to their non-conformation of gender norms at normal times. Transgender children usually do not get assistance from the family due to the incongruent gender identity from the beginning. Lack of support from family and significant others along with emotional abuse (Higa et al., 2014) and physical abuse (Nuttbrock et al., 2010) leads to lowered self-esteem, a state of conflict and confusion in the person (Hiestand & Levitt, 2005). Parental rejection is one of the most common and serious issues for the mental health of transgender individuals (Pariseau et al., 2019) even in normal times. Along with a lack of support from family, going to school often leads to peer victimization and bullying due to the socially unacceptable gender identity (Daley et al., 2008). It further makes the person insecure and apathetic (Hodges & Perry, 1999). On an everyday basis also, people use the wrong gender pronouns for transgender people and call them by their dead names again increasing the level of stress (Matsuno & Budge, 2017).

Such a condition of lack of support and insensitivity towards their feelings leads to feelings of inferiority leading to proximal stressors like transphobia creating a state of hatred towards their own transgender identity (Nadal, 2017), lowered self-confidence and confusion (Hiestand & Levitt, 2005). Those who had not disclosed their gender identity to their parents had to hide their real selves which further affected their mental health adding to their existing proximal stressors (Green et al., 2020). They also face multiple stressors including loneliness (Fernández-Rouco et al., 2019), discrimination in healthcare centers (Bradford et al., 2013, Kaur & Singh, 2024), violence from an intimate partner (Ard

& Makadon, 2011), stigmatization, oppression, bullying (Eisenberg et al., 2019; Singh, Kaur & Mittal, 2023; Verma, Bharti & Singh, 2018, Verma et al, 2023), etc.

Transgender individuals during the Pandemic

The aforementioned studies show that the transgender population experiences several problems in their everyday life during normal times. The lockdown further multiplied their problems. The need for belongingness is one crucial component for the well-being of a person but during the lockdown, staying at home led to bounded movement and the need to stay at home with parents, and sometimes unsupportive parents, further affected the well-being (Fish et al., 2020). One-third of LGBTQ people who had disclosed their gender identity, faced rejection from their parents making them highly vulnerable at the time of lockdown (Salerno et al., 2020). The lockdown also led to the closing down of all institutions including LGBT supportive organization which provides social support to transmen further creating problems for them. Along with the social need, one very important need of a transgender individual is the need for medical assistance for their acceptability in society but the declaration of transition-related surgery as a “routine priority” delayed the surgery also increased the vulnerability of transgender individuals and enhanced the fear of abuse and stigmatization (Mackinnon & Bremshey, 2020).

Moreover, during normal situations, to reduce stress, these people move out for transgender support groups. These groups provide a sense of affiliation and worthiness (Hines, 2007). But during the phase of lockdown, the transgender person has to stay at home with invalidating family members. Not only that, the support groups that provide a feeling of belongingness were closed during the pandemic aggravating gender dysphoria. The transgender individuals were having online social support that may have helped them emotionally but the severity of the situation in a toxic home or lack of basic needs led to no improvement in their condition. This gender dysphoria can be reduced by medical treatments and hormone therapy but these services were also short due to the situation of the international emergency of COVID-19 intensifying the prior complications.

Transgender individuals in India

For years, census data collection in India did not recognize transgender individuals. However, in the 2011 Census, they were categorized as “Others” under the gender category (Mal et al., 2023). On 15th April 2014, they were officially recognized as the ‘third gender’ in India having equal rights. The Union Cabinet also approved the Transgender Persons (Protection of Rights) Bill 2016 in Parliament aimed to provide equal rights in society.

Despite efforts made to provide them recognition in Indian society, transgender individuals face a lot of problems due to their marginalized status. They go through severe discrimination and harassment, unjust treatment, including verbal abuse,

physical and sexual violence, wrongful arrests, denial of access to ancestral property, restricted access to services and educational institutions, and victimization in different settings such as family, schools, workplaces and various public spaces (Vasant, 2021; Das, 2019; Pandey, 2018; Ganju & Saggurti, 2017; Chettiar, 2015).

Specifically for transmen, the current level of public awareness in India is quite limited, particularly when compared to the increasing awareness of transgender women (Chakrapani et al., 2022). Additionally, there is a scarcity of articles specifically addressing the physical and mental health of transgender men.

Rationale of the study

Although the existing literature assessing the stressors of transgender people at the time of the COVID-19 lockdown is present, the dearth of in-depth qualitative data from the transmen population residing in the Indian collectivistic culture was evident. Further, a scarcity of literature focusing on the coping strategies of transmen at the time of lockdown was also found. Transmen include a population that is ridiculed in healthcare services, feel physical inadequacy, and humiliated for crossing their line of femininity (Conegatti, 2020). Thus, the present study explores these factors among transmen at the time of lockdown focusing on the ideographic approach. This study can further facilitate in suggesting the ways found helpful in dealing with such a sudden global crisis for the management of their mental health in future times.

Methods

Study design

In-depth semi-structured interviews were conducted after the lockdown, during and after phase 4 of unlock when there was no restriction on movement (Goel et al., 2021) to better understand the subjective experiences of transmen during the lockdown. To better understand the intricate details of their narratives individually of what stressors they faced and which coping strategy was found effective to deal with the stressors, the study utilized a qualitative approach to research.

Participants

The interviews were conducted with 15 transgender individuals who were recruited using the snowball sampling method. The participants' ages ranged between 21 years to 30 years. All the transgender individuals were self-identified transmen who agreed to participate in the present study. The demographic details of informants are presented in Table 1. The following inclusion and exclusion criteria were used to select the participants for the present study.

Inclusion Criteria for the Participants

- The age range of participants must lie between 21 to 30 years of age.
- The person must identify as a transman.
- The transition-related surgery must not be completed till lockdown.
- The person must know Hindi or English language.

Exclusion Criteria for the Participants

- The person who identifies as another group of transgender community than transman.
- The person with some physical or psychological illness.

Tab. 1. Demographic characteristics of the participants

Variable	Variable Level	N	%
Employment status (Before Lockdown)	Employed	10	66.67
	Unemployed	05	33.34
Transition-related surgery status	Not Started	13	86.67
	In-process	02	13.34
Family type	Joint	04	26.67
	Nuclear	11	73.34
Socio-economic status	Middle class	14	93.34
	Higher class	01	6.67
Hormone therapy status	Taking Hormone therapy	15	100
	Not Taking Hormone therapy	00	00
Association with a supportive organization	Associated	12	80
	Not associated	03	20

Procedure

The participants were contacted at the scheduled time and explained the purpose of the study. They were encouraged to ask anything they were doubtful about. Proper rapport was then established with assurance of the confidentiality of their response. It was instructed that the researcher would ask some questions to better understand the problems they faced at the time of lockdown. They were free to respond to the questions the way they liked and if they wanted to skip some questions, they could ask for it. Permission to record the audio of the conversation was taken beforehand. Then, the interview was started.

Interview

The first author developed an in-depth interview guide based on her extensive observations while collaborating with transmen in India. The guide was shared with the second, third, and fourth authors and was approved before using it on the participants. The sequence of questions was flexible. Further questions were also added where required with appropriate probing. Some of the questions asked were: "What was the impact of lockdown on you?", "Have you seen any change in the pattern of behavior of your parents towards yourself at the time of lockdown?", "Was there any impact of this lockdown on your transition-related surgeries?", "Was your hormone therapy affected by the lockdown?", "Does social distancing affect the type of relationship you share with other transgender people?", "During free time, what were the thoughts in your mind at the time of

lockdown?”, “Has the lockdown affected your gender dysphoria?”, “Any other problems that you faced during lockdown?”, “At the time of any crisis during lockdown, what do you do?”, “What leads to the reduction of these negative thoughts?”, “What gives you relief at the time of any problem that emerged during lockdown?”

The interviews were taken in Hindi language considering the comfort of the participants. Jotting down important points was done to avoid important thoughts during the interview. The time duration of the interview was between 25 minutes to 45 minutes.

Data Analysis

After the conduction of the interview of all the participants, the transcription verbatim-wise was done properly. All the conversations were first translated into English language proceeded to proofreading to validate the transcripts. Analytical memos were also included in the transcript of data. The thematic analysis was done using the 6-step framework given by Braun and Clarke (2006). The researcher got familiarized with the data in the first stage. In the second stage, initial codes were generated and themes were generated from those codes in the third stage. After the generation of themes, they were reviewed thoroughly in the fourth stage. The reviewed themes were defined operationally in the fifth stage. Finally, in the last stage, the themes were written.

Results

Table 2 shows the major themes and sub-themes indicating the stressors and coping strategies of transmen at the time of lockdown.

Stressors

The first category of the study focuses on the stressors faced by transmen during the lockdown. Stressors refer to the various sources of strain related to gender-minority experiences that transmen face during the lockdown.

The first theme under the category of stressors includes physical stressors. Physical stressors encompass the bodily challenges and hardships experienced by transmen due to the lockdown. Various sub-themes under the theme of physical stressors are provided.

Sub-theme 1: Unavailability of testosterone-shots

Testosterone therapy helps in the suppression of the release of estrogen (Trans Care, 2006). Most of the transmen take testosterone therapy in the form of injection (also known as t-shots) to bring the bodily changes. The other modes of inducing hormones for transmen, including creams, gels, and patches under the skin are unaffordable even in normal times (Majumder & Sanyal, 2016). The only affordable option of t-shots was also unavailable during lockdown. Participant 13 reported,

“I started taking t-shots just before a few months of lockdown. It was unavailable during lockdown. I was very happy because my voice was changing and I started sounding like a boy after taking these injections. But during Covid-19, I was very tense, how would I get them? How the changes will appear in my body like a male.”

Participant 15 explained the trauma he faced due to the unavailability of t-shots. He said,

“We have to take hormones every month. It was not available at the beginning of lockdown creating a tense situation for me. Later, I got it somehow, but no doctor was ready to inject it during lockdown. I never wanted to miss any dose at all as I knew that if

Tab. 2. Themes and subthemes indicating the stressors and coping strategies of transmen at the time of Lockdown

Category	Themes	Description	Sub-themes
Stressors		Stressors refer to the various sources of strain related to gender-minority experiences that transmen face during the lockdown.	
	Physical Stressors	These are challenges that affect the state of the body of the transmen.	-Unavailability of testosterone-shots -Delay in transition-related surgery -Lack of basic requirements. -Increased family violence
	Social Stressors	These are induced externally and result either from interaction with other people or lack of interaction with people.	-Unavailability of a supportive organization -Emotional abuse by significant others. -Feeling isolated
	Psychological Stressors	These are stressors that are generated by individuals' minds. These are personal and unique to an individual experiencing them and are internal sources of stressors.	-Use of the wrong pronoun -Fear of unavailability of doctor -Self-doubt about gender identity due to free time -Suicidal ideation
Coping Strategies		It refers to the various ways that are used to handle both internal and external sources of stress during the lockdown and found effective for transmen.	
	Appraisal-focused strategy	These are directed toward challenging one's assumptions and modifying the way of thinking.	-Comparing self with others
	Problem-focused strategy	Directed towards reducing or eliminating stressors	-Took financial help from friends -Organized online programs to earn money -Family support
	Emotion-focused strategy	These are directed toward reducing or preventing emotional reactions caused by the stressor.	-Talking to similar others -Religious acts - Avoidance of stressors

I missed any dose, the desired changes would reverse. So, I tried to do it by myself. When I did that, bleeding started, I was so afraid at that moment."

Most of the transmen reported spending a lot of time to get the injection and the thoughts of delay in desirable changes, and thus a delay in their acceptability in society was intensifying the stress level.

Sub-theme 2: Delay in transition-related surgery

Transition-related surgery mainly consists of Sex Reassignment Surgery. It includes chest surgeries, genital surgeries, and other surgeries for a transman (Selvaggi & Bellringer, 2011). These are important in the life of transmen to make them socially acceptable and comfortable in their body. Participant 11, emphasizing the importance of these surgeries in his life, said,

"We killed all our dreams to get this surgery done which got delayed. All we want is happiness which will come only when people around us accept us. They believe in binary gender norms which we have to accept to be a part of this society. This surgery is really important in our life."

Participant 1 reported his problem due to a delay in surgery,

"Everything was delayed due to the lockdown. My parents agreed to this surgery so I wanted to get it done as soon as possible. Everything was organized in my life but lockdown disturbed everything."

The impact of these disruptions during the lockdown was profound, given the significant role these processes play in their lives.

Sub-theme 3: Lack of basic requirements

Many transmen came out in front of their parents just before lockdown to be their authentic selves. When found unacceptable, they run away from their home. At such a time, when they were not well settled in a new place, lockdown happened and that created a situation of scarcity of basic resources. Participant 3 reported,

"I ran away from my home in Assam to Delhi 2 months before lockdown because my brother was not accepting my gender identity. He used to beat me and abuse my parents for my gender identity. I was trying to get settled there but when lockdown happened, I had nothing to eat, no place to stay. I neither had money. I spend 3 days without food,"

Participant 14 also stated,

"I was not staying with my family as they do not want me like this. I lost my job too. I had to pay rent. I had no food for a few days. I was asking my friends to give me food. I was ashamed of my situation."

Most of the participants reported that transgender identity keeps them away from family and thus away from the support that anyone of their age gets.

Sub-theme 4: Increased family violence

Violence begins with the coming out process and continues throughout life and affects mental health adversely (Stotzer,

2009). On normal days, transmen may stay away from such abusive home environments, but at the time of lockdown, they had to stay with unaccepting people. This created higher chances of physical violence. Participant 2 reported,

"He (Father) used to beat me with slippers and abuse my mother for my gender identity. I don't want my mother to suffer because of me. I did not know what I should do. I did not want to stay at the same place where he lives."

Participant 3 stated,

"When my brother got to know that I am a transgender, he started beating me. He always abuses my parents. He said that "she is of no use. How can she convert her gender? I will not give her the property of this house. She has to be like a girl. She is a girl."

It is evident from the statement of the participant that the chances of physical violence increased during lockdown and such an abusive environment always creates trauma due to their gender identity.

Other than the physical stressors, transmen faced many social stressors which refers to the challenges stemming from interactions or lack of interaction with others or from societal expectations and norms. Major sub-themes under this theme are listed below.

Sub-theme 5: Unavailability of a supportive organization

Due to the imposed rule to stay at home during lockdown, all the institutes were closed including the supportive organizations for transgender which caused stress for them. Participant 14 stated,

"The organization where I used to go earlier, gave us awareness about my transgender rights. I used to share my feelings and my problems with them. I felt very good at that time but I was not able to contact any of them during lockdown because my mother gets very upset when she hears me talking to transgender groups."

Human is a social animal and always need someone to share their feelings. At the time of lockdown, the only group which supported transmen was unavailable for them which create stress.

The next theme includes psychological stressors which refers to those that originate from an individual's thoughts and perceptions. They are personal and specific to each individual, representing internal sources of stress. Sub-themes under this category are listed below.

Sub-theme 6: Emotional abuse by significant others

Emotional abuse includes verbal behavior that is repetitive and aims to hurt the person (Keashly & Harvey, 2005). Most of the transmen reported an increase in emotional abuse from family and relatives. Participant 2 expressed,

"My father never left a chance to pull me down during lockdown. If anything happened, he used to blame my transgender identity. He hated me. He belittled me every time I was around him. During lockdown, I had to stay around him as we lived in the same house. How can I hide from him and avoid his harsh words? He also asked for rent. He said that if you are staying here, you have to give me money for this. From where will I get money to pay him during lockdown? I was giving tuition to a girl and was earning but what to do in lockdown."

A severe level of verbal abuse was observed from the narrative of Participant 3,

“My mother wanted me to get married to a boy in lockdown. She forced me to wear girl’s clothes. I also tried to do so but I started hating myself a little more when I saw myself in those clothes. Those were humiliating moments of my life. I will never wear such clothes ever.”

It is evident from the responses of most of the participants that they were intimidated and belittled more in the lockdown than in the normal days. The abuse ranged from making fun of the person and his identity to forcing him to do tasks that increased the dysphoria.

Sub-theme 7: Feeling isolated

Most of the transmen, whose identity is either not revealed or is not accepted in the family felt alone at home during lockdown. The lockdown kept them away from transgender communities which gives them a sense of belongingness making them feel alone. Participant 10 stated,

“I was suffering from a fever for 10 days. No one came to see if I was okay or not. When I had a fever, I was in a very bad situation. I was able to walk only with some support but no one looked after me when I needed them the most. I was all alone.”

Participant 3 reported ignorance by his family members stating that,

“My brother ignored me all the time because I am like this. I was staying in that house just for my mother and father. But no one loved me. They never talked to me even when I was sad or when I needed emotional support.”

Sub-theme 8: Use of wrong pronouns

The use of correct pronouns helps in the reduction of stress among transgender individuals (Brown et al., 2020). They feel supported when correct names are used. The rule to stay at home left the person with no other options than staying at a place where their identity is disrespected by wrong pronouns. Participant 9 reported,

“My siblings called me didi (sister). I wanted them to call me bhaiya (brother) but they never did so. It used to hurt sometimes. Why no one at my home understands me. Staying away from home is so much better for me. At least the people use correct pronouns for me.”

It is evident from the narratives of the many participants that the use of wrong pronouns creates tension during the lockdown.

Sub-theme 9: Fear of unavailability of doctor

Those who went through the first stage of surgery were afraid of the emergence of any complications during the lockdown. The lockdown caused the unavailability of many services including doctors which created stress. Participant 4 reported,

“I got my surgery done just before 2 months of lockdown. I was really very afraid that if any problem emerged during lockdown, what I do? Doctors take online sessions but what if I needed the

assistance immediately and will not be able to go to my doctor, what will happen to me.”

Participant 9 said,

“My surgery was done in a different town. This facility of transition-related surgery was not available at my place. I used to think all day that if I needed something, the people around me would not be able to understand what is my problem and how to deal with it.”

It is evident from the statements that people spent most of the money they had into surgeries so they didn’t want anything to go wrong. They reported that the treatment is all they dreamt of in their life and the fear of anything wrong happening with medical assistance will be a huge source of stress for them.

Sub-theme 10: Self-doubt about gender identity due to free time

Free time for a longer duration attracts every type of thought including negative ones. Transmen have self-doubt about their identity and the free time led to more such thoughts which affected their mental health. Participant 1 reported,

“When I got free time in lockdown, I used to think if I should tell my family about my gender identity or not. Once told, I cannot reverse my actions. I also thought that if I started my surgery, and people in society knew, would they accept my family? If my family is not accepted, then what? At such times, these thoughts disturb a lot, and conflict of ideas start.”

These thoughts increased due to transgender identity during lockdown. They had these thoughts earlier too but lockdown increased it.

Sub-theme 11: Suicidal ideation

The rate of thought of suicide and self-harm behavior is very high among the transgender population (Lefevor et al., 2019). Participant 3 reported,

“During lockdown, I was stuck in Delhi and thought that I should die. I cannot live this life. I was not able to do my transition surgery. Everything looked dark at that time. I was thinking of suicide again and again. I wanted to start my career but being a transgender with a physical disability, it becomes way tougher to survive. Dying seems easy”

Participant 6 while explaining his condition, said,

“There was a time during lockdown, I thought that I should commit suicide. Nothing is right. Everyone’s life will get back to normal but I have to live like this forever. I was tense about my relationship with my partner. I used to think how much she would wait for me. So, it’s better to end the story of my life.”

Chances of suicidal thoughts increased at the time of lockdown due to transgender identity.

Coping strategies

The next category for the study is coping strategies. These refer to the various ways that are used to handle both internal and external sources of stress during the lockdown found effective

for transmen. The first theme under the category is appraisal-focus strategy which refers to techniques of questioning personal beliefs and adjusting one's thought patterns according to the situation. Various sub-themes under this category are listed below.

Sub-theme 1: Comparing self with others

When the situation cannot be controlled, the person tries to change the perspective towards the problem to lessen the stress. One of these is to see the resources which are available to self for which many people are longing. Participant 4 reported,

"When I talked to my friends who are transgender people and listened to their problems, I used to think that my situation was better than theirs. They were not able to get food during lockdown. At least I was able to get food."

Also, watching and comparing self with similar other people who are leading a happy life gives hope to have the same for oneself. Participant 12 believed this and said,

"My morale got boosted when I heard about others. If they can fight with so much scarcity, I obviously can. They didn't have a single support system. I have one of the greatest support systems in my family. I was thankful for everything I had."

Many participants worked on thoughts to reduce mental burden which helped them in dealing with stress.

The next theme under the category of coping strategies included problem-focused coping which refers to the techniques used by transmen to directly tackle the problem and eliminate the issue. The sub-themes under this theme are provided below.

Sub-theme 2: Took financial help from friends

To deal with the scarcity of resources and family support, transmen took help from friends. Participant 3 reported,

"I took help from my transgender friends in Delhi during lockdown. They were the only support I had. They provided food as well as a place to live during this lockdown. Otherwise, I was dead in that situation when no facility was provided."

Many participants reported gratitude for having such supportive people even during the crisis phase.

Sub-theme 3: Organized online programs to earn money

The lockdown left people with limited resources which are essential for survival. Many of them worked on online programs under the rules of lockdown. Participant 2 reported,

"I used to organize online tournaments during lockdown to earn money as my parents did not give anything. So, I have to take care of food and all."

Participants reported finding online ways for their basic survival in case of lack of family support.

The next theme is the use of emotion-coping strategies which refers to the techniques used to reduce the emotional burden caused by stressors to the transmen during the lockdown. Major sub-themes under the given theme are listed below.

Sub-theme 4: Family support

Support from family is a rare thing for them. It helps in providing a better quality of life (Simons et al., 2013) and reduction of stress (Weinhardt et al., 2019). Participant 4 stated,

"If your parents are with you, you don't need anything else. My neighbours made fun of me. If my parents were not supportive, I would have committed suicide. At least my parents were supporting me. Why should I die because of insignificant others? Even if I would have died, they will taunt my parents that your child was problematic from the beginning."

Those who had had the support of family reported lesser stressors than those who had no emotional support from family.

Sub-theme 5: Talking to similar others

Social support is crucial for building self-confidence. At the time of lockdown, some of the participants said that just sharing problems with someone reduces it. Participant 1 reported,

"Whenever I was tense, I scrolled Facebook to find people who were like me and talk to them. Understood their problems, and told them about my situation. One of my friends who is also a transgender supported me a lot in lockdown. We shared our problems. One of my other transwoman friends, who is also an activist, helped me deal with the problem. I got both, moral and emotional support from her."

It is evident from the narratives of the participants that just talking to people gave relief to the participants and worked as a coping mechanism.

Sub-theme 6: Religious acts

At the time of crisis, many increased their religious activity to have peace of mind. Participant 1 reported,

"When you have nothing, then you start thinking of God. People suggested I should start praying so I started this during lockdown. I started being religious. I felt so much relief. I used to read Hanuman Chalisa (devotional hymn) and it worked for me. It helped me to calm down in tough times."

It is evident from the statements of the participants that religious activity also helped them in dealing with the stress.

Sub-theme 7: Avoidance of stressors

This included strategies that are aimed towards the avoidance of stressors (Kariv & Heiman, 2005). Many people who were not able to deal with the stressors directly distract themselves from the problem to something else. For the avoidance of problems, participants went for different ways of entertainment. As Participant 1 reported,

"Whenever I got free or when I found myself surrounded by negative thoughts, I started watching movies or web series. Then rather than thinking of my problem, I started thinking about how this person killed this one in the thriller movie I was watching."

Participant 2 reported, that reading books helped in the avoidance of stressors. He also opted to smoke more to avoid

the emerging problem. On the other hand, Participant 3 reported that he does more physical activity when he is stressed.

While participant 2 reported,

“I feel good when I read books. I had a book. I felt surrounded by positivity when I read novels and found myself away from my problems.”

It is evident from the statements that when dealing with the task itself was not possible, the person tried to manage the emotions. In doing so, people tried to avoid the stressful thoughts resulting from that situation.

Discussion

Transgender people faced higher number of problems during the pandemic than cisgender people according to research (Bowleg, 2020). To understand the specificity of problems faced by transmen in India who are not recognized well and ignored (Chakrapani et al., 2022; Bhattacharya, 2014) in Indian society, the study was undertaken. It further highlighted the coping strategies found effective for them while dealing with the emergent stressors.

Transmen faced several physical stressors out of which one predominant stressor was the pernicious effect of delay in hormone therapy and transition-related surgery on their mental health due to the huge impact of the physical body on gender dysphoria (Peterson et al., 2017). The lack of access to hormone therapy impacted the physical well-being of transmen with the resumption of menstruation. This exacerbated gender dysphoria and heightened concerns about losing desired physical changes such as facial hair growth and a deepening voice. To address these fears, some resorted to self-administering hormones, which in turn caused additional trauma and distress.

To deal with gender dysphoria, many opt for transition-related surgery (Selvaggi & Bellringer, 2011) which improves physical and mental health (van de Grift et al., 2018). The availability of medical services dealing with such surgeries is very little even during normal times (Miesen et al., 2020) but the situation was worse in lockdown. The elective surgeries were delayed to save the resources for COVID-19 emergency services (Wang et al., 2020). This put the mental health of transmen at an increased risk and increases the duration of stigmatization and violence they face (Mackinnon & Bremshey, 2020). Many participants felt increased distress as their long-awaited surgeries were postponed due to the lockdown.

When a few of them were struggling with gender dysphoria due to a lack of medical services, many transmen were having scarcity of basic resources and struggling for life which was found as another significant stressor among transmen during the pandemic. Those who came out as transmen during lockdown or just before lockdown and got unaccepted by their parents have to leave their homes and fight for the basic amenities. Some also struggled for the same due to loss of job.

The financial crisis forced many transmen to return home and live with parents who did not accept their gender identity, adding to one more physical stressor. Few experienced physical

violence from family members who did not acknowledge their gender identity. Earlier studies have also shown that a large number of transmen experience physical violence at home at some point of time in their life (Bradford et al., 2013) however, it increased during lockdown with chances of polyvictimization (Cohen & Bosk, 2020). Such an abusive home environment created trauma for these transmen (Whittington et al., 2020; Testa et al., 2012).

Other than the physical stressors, transmen also faced many social stressors. When transmen generally experience various stressors, the need for affiliation is fulfilled by supportive organizations (Scandurra et al., 2019; Budge et al., 2018). This sense of belongingness is very crucial for the well-being of a person (Baumeister & Leary, 1995). The idea that “I am not the only one” strengthens the transgender identity of the person and they feel validated (Barr et al., 2016). But at the time of lockdown, they were not able to meet these groups making them more vulnerable to psychological trauma (Salerno et al., 2020).

Not meeting them and being in a toxic home environment led to another social stressor. Emotional abuse in the family was evident during lockdown with a need to show socially acceptable gendered behaviour. Such kind of emotional abuse is prevalent among them in normal times (Ford, 2011) the severity of which increased during the pandemic. Parents, not supporting their transman child and harassing them emotionally was found evident during the pandemic which is found to be a prominent stressor (Ignatavicius, 2013).

The lack of emotional support increased the sense of loneliness among transmen acting as another emotional stressor. Such feeling of being alone affects mental health (Thoits, 1982; Fish et al., 2020) and physical health (Haraux, 1984) negatively.

Transmen also faced many psychological stressors including misgendering affecting them negatively. The use of wrong pronouns which increased during lockdown created emotional tension (Rood et al., 2016; Ellis, 2019). The fear of misgendering is one of them which hampered their well-being. The correct use of pronouns made them feel validated, supported, and less stressed emotionally (Brown et al., 2020) not possible with unaccepting parents. The use of wrong gender pronouns increases the dysphoria of the person (McGlashan & Fitzpatrick, 2018) which increased during lockdown in unsupportive home environments.

Transmen also reported that the availability of free time increased their self-doubt about their gender identity and invited several negative thoughts adding to another psychological stressor. Transmen also were found afraid and stressed due to the probability of unavailability of doctors during the pandemic.

Most of the participants of the present study reported increased suicidal thoughts during lockdown which was found as another significant psychological stressor. Staying at home with unloving parents, being abused physically or verbally, inability to complete transition and get hormone therapy, stigmatization, and bullying increase suicidal ideation (Rabasco & Andover, 2021). The suicide rate with so many issues increase among transgender people than cisgender people (Toomey et al., 2018).

To cope with these challenges, transmen employed various strategies during the lockdown, highlighting a key aspect of the current study. It suggested the effectiveness of emotion-focused and appraisal-focused coping strategies over problem-focused ones, considering the unmanageable nature of the situation. When individuals have no control over the stressor, they tend to evaluate the situation positively rather than focusing on changing the situation itself (Pearlin, 1991). Transmen attempted to alter their perspective on the problem rather than the problem itself. They expressed gratitude and happiness for living better than others when comparing themselves to those with fewer resources. Conversely, when comparing themselves to those with more resources, they hoped for a similar future. Such cognitive approaches helped improve their mental health in a transphobic society where the acceptance of their identity is not universal (Austin & Craig, 2015; Mizock & Mueser, 2014).

Other than having an optimistic approach, some of the transmen started managing the emotions that emerged in the pandemic by praying to God to have peace of mind in the disastrous scenario which is found to be effective in the positive evaluation of self-worth (Harrison et al., 2001) and in finding the meaning of life (Dunn & O'Brien, 2009).

Many other transmen tried to distract themselves from the problem and focus on other dimensions of life. For that, few of them used entertainment like watching movies which helped in the reduction of stress (Glyshaw et al., 1989). Reading books helped to give a positive perspective on life. On the other hand, some did physical activities to keep them busy and distant from anxiety, anger, and fatigue (Thayer, 1987), reduce the negative impact of stress (Salmon, 2001), and improve their well-being (Edward, 2006).

To manage the emotions, many started having conversations with their family. The support from family helped in providing a better quality of life, improved mental health (Weinhardt et al., 2019; Bariola et al., 2015), a lesser amount of distress, and a higher level of life satisfaction (Simons et al., 2013).

But for most transmen, family support seems impossible so to deal with the negative emotions, they contacted their friends and shared their problems during lockdown. The perception of having someone by one's side gives relief (Riggle et al., 2018) and saves them from depression and anxiety (Budge et al., 2013), adding to their well-being. (Weinhardt et al., 2019).

Few transmen went for the removal of the stressor itself rather than the thought of the stressor. So, to deal with the financial crisis, some of them asked for help from friends and many worked in online programs to earn a minimal amount to manage their livelihood. However, this kind of coping strategy was found lesser among the participants.

Thus, it is evident from this study that most of the participants benefitted from emotion-focused and appraisal-focused strategies to better deal with the crisis.

Limitation

We recognize that this research may have certain limitations. The sample size for this study was limited to just 15 participants. Other than that, to keep the data homogeneous,

the interviews of only transmen were taken due to which the problems and coping strategies of transwomen were not taken into consideration. Another study on the issues faced by a wide spectrum of LGBT+ people in the future will better help in getting an enriched understanding of the stressors and coping strategies experienced by various marginalized groups.

Clinical Significance

The present finding suggests the need to prioritize gender-affirmative surgeries even in times of crisis. If not possible, counseling for transmen should be arranged in any available mode for their well-being. Proper therapy will also be required for those having suicidal ideation which was prevalent during the pandemic. Secondly, intervention programs should be developed for parents who are the most important pillar of social support and are generally emotionally absent for transmen so that they can hold up their children with unconditional positive regard irrespective of their gender identity.

Conclusion

Transmen faced several problems which created stress for them including physical stressors, social stressors, and psychological stressors but they dealt with it with the help of different types of coping strategies. Some opted for an appraisal-focused strategy and worked on their thought process while some acted on the stressors themselves and tried to deal with it directly. On the other hand, few of them tried to manage the emotions which are generated due to the imposed lockdown. Considering the qualitative nature of the study, it gives firsthand experience of transmen during the pandemic.

Ethical Approval

All procedures followed in this study were in accordance with the APA's ethical standard and with the Helsinki declaration of 1964 and its later amendments. The participants provided their informed consent to participate in this study.

Data availability statement

The data collected and analyzed during the current study are available from the corresponding author on reasonable request.

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Author Contributions

AS conceptualized the study after the analysis of existing literature and the need to understand the situation of marginalized groups in the emergent pandemic situation. YKA, SJ and TS reviewed the study proposal and approved the study. AS collected and transcribed the interviews from participants. The transcripts were analyzed by AS, YKA, SJ and TS followed by the emergence of some themes and sub-themes of the study. The findings were approved by all the authors. AS wrote first draft of the manuscript. TS and YKA reviewed the draft and

provided suggestions for improvements. AS wrote final draft. All the authors reviewed and approved final manuscript.

Conflict of Interests

We have no known conflict of interest to disclose.

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