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Trans Joy: A Transgender Perspective on Positive Psychology

By

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Submitted to Scripps College in partial fulfillment of the Degree of Bachelor of Arts

Professor Catalino
Professor Mesinas

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Abstract

There is a variety of research showing that transgender people report less well-being than their cisgender peers, higher stress and increased likelihood of suicide attempts. There are models to explain this minority stress; however, they focus on sexual minorities and lack information about gender minorities. Positive psychology is a field that focuses on increasing well-being and changing small parts of daily life to increase well-being. One method is gratitude interventions; weekly reflection on what you are thankful for. Also, social support is a potential moderator of the relationship between positive psychology exercises and well-being. There is very little research on minority populations in positive psychology. This study seeks to remedy the gap in the literature by investigating the impact of gratitude interventions with transgender adults. The proposed procedure is that transgender adults will participate in either a gratitude intervention or a journaling control condition for a period of 8 weeks. Their well-being would be measured before and after the intervention, in addition to a measurement of social support prior to the intervention period. The expected results are that participation in gratitude interventions will lead to greater well-being. It is also expected that social support will moderate the relationship between gratitude interventions and well-being. These results would be in line with previous findings. This is important research to consider in order to benefit the mental health of transgender individuals and contribute to the further representation of minorities in positive psychology.

Trans Joy: A Transgender Perspective on Positive Psychology

In July of 2022 CNN reviewed this year's record-breaking number of laws restricting the rights of Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) people in America (Krishnakumar, 2022). They reviewed data from the ACLU showing that transgender (trans) and nonbinary youth have been particularly affected. More than two dozen bills across 21 states have been introduced which aim to restrict gender affirming care for transgender youth (Krishnakumar, 2022). There are also movements to exclude trans youth from same gender sports and to exclude LGBTQ+ topics from the classroom; democrats and transgender activists are fighting against these laws. Being singled out by legislation can be a very alienating experience and may have negative impacts on trans mental health which exacerbates pre-existing conditions.

Research on transgender youth shows that they have high rates of mental health issues and suicide attempts (The Trevor Project, 2021). However, this research also shows that youth whose pronouns are respected and who are able to legally change their name are less likely to commit suicide. There is very little research on the well-being of transgender people in America and across the world. How can the lives of trans people improve while the focus remains only on the negative?

The following research attempts to explore more about the positive ways to increase transgender well-being using methods of positive psychology. The proposed study aims to expand on existing literature in order to include a transgender perspective on positive psychology, specifically gratitude interventions. The questions of interest in this study are as follows. Are gratitude interventions effective for transgender individuals? How does social support impact the effectiveness of gratitude interventions for transgender individuals?

Transgender Mental Health

There is a variety of research that shows how transgender people are impacted by mental health issues. One survey of transgender people from Australia and New Zealand exposed how transgender people experienced lower rates of general health and higher rates of depression compared to the general population (Pitts et al., 2009). In this same study, respondents who experienced greater discrimination displayed higher levels of depression. Research on transgender adults from Oregon who were enrolled in Medicaid showed that the ability to change their gender in medical records was associated with a lower probability of experiencing mental health conditions (Yee et al., 2022). Also, a survey of transgender women in Arizona and California showed that social stigmas and fear surrounding how trans identity will affect one's life also have a negative impact on mental health (Sánchez & Vilain, 2009). In addition, Bouman et al. (2016) compared survey data from transgender participants with age and gender matched cisgender participants in the UK and found that levels of psychopathology, body dissatisfaction, and interpersonal problems were greater for trans than for cisgender participants; additionally, trans participants had lower levels of self-esteem. They pointed to self-esteem and interpersonal problems as primary predictors of well-being amongst transgender adults in treatment. There is an assortment of factors that lead to lower well-being amongst the transgender population as compared to their cisgender peers.

In contrast, having a supportive family or social environment could be beneficial to the mental health of trans people (Johnson et al., 2020, Pardue-Bourgeois et al., 2022 and Roberts & Christens, 2021). Johnson et al. (2020) performed qualitative research with trans adolescents from New York and San Francisco exploring specific parental behaviors that impact transgender well-being. They discussed several parental supportive behaviors including use of proper

pronouns and names, self-educating about trans issues, advocating for fair treatment of their children, and assisting their children with medical transition. Adolescents who experienced these supportive parental factors felt they had a positive influence on their well-being and made it easier to manage depressive symptoms (Johnson et al., 2020).

The benefits of familial support extend beyond adolescence as well. Roberts & Christens (2021) conducted a highly diverse study of adult LGBT individuals in the United States and Puerto Rico. They found that family support had a direct positive effect on well-being across all racial and ethnic groups. In addition, Pardue-Bourgeois et al. (2022) studied various social support systems and how they impacted suicidal ideation amongst transgender individuals. They found that trans people with supportive families were less likely to report suicidal ideation in the last year. An online survey of transgender adults from all across the United States also found an inverse relationship between both social and medical gender affirmation with symptoms of depression and anxiety (Hughto et al., 2020). Another impact on well-being and stress is social interaction like collective action and sociopolitical involvement (Breslow, 2015; Roberts & Christens, 2021).

Transgender mental health generally benefits from having a supportive social environment, from supportive family to inclusive friends. As the following section will explain, interpersonal support might also be a factor that impacts the successfulness of positive psychology interventions. Considering this, investigating the benefits of social support is one of the goals of the present research.

Positive Psychology

The field of psychology is often focused on pathology and fixing the problems caused by mental illness. When positive psychology emerged at the turn of the century it expanded the field

to address new areas with focus on subjective well-being and increased thriving (Seligman & Csikszentmihalyi, 2000). Since then, there has been a great deal of development in a variety of positive psychology research areas. Particularly interesting to the current study is the development of positive psychology interventions.

Since the beginning of positive psychology, research has been done to understand what makes people happy and how to increase people's happiness through interventions. Research by Sonja Lyubomirsky and colleagues has shown that intentional engagement with day-to-day positive psychology activities is more effective than attempting to increase someone's set point of happiness or their general life circumstances. The set point of happiness is the general range of how happy someone is and is determined by genetics, which by definition cannot be changed. General life circumstances are also relatively stable and therefore difficult to influence. This leaves intentional interventions and adjustments to daily life as the most effective way to impact well-being (Lyubomirsky et al., 2005).

Gratitude is one such intervention that has been found to have the ability to increase well-being (Armenta et al., 2017, Seligman et al., 2005, and Watkins et al., 2015). Gratitude is a state in which one acknowledges that they have experienced a positive outcome from an external source (Emmons & McCullough, 2003 as cited in Armenta et al., 2017). One example of a gratitude intervention is writing and delivering letters to someone you're grateful for (Seligman et al., 2005). Watkins et al. (2015) used a method where participants were asked to list 3 good things that happened in the past two days and why they were grateful for them. Research has also shown that the effects of gratitude interventions can last longer than the intervention itself (Seligman et al., 2005; Watkins et al., 2015).

Lyubomirsky and Layous (2013) propose a model to explain how positive activities might work to increase well-being. They showed how features of the positive activities and features of the person engaged in the interventions influence the effectiveness of these activities at increasing well-being. One feature of activities that they specified was the timing and dosage of the activity. Although it varies person to person and depends on the activity at hand, a few studies pointed the researchers to say that weekly interventions might be most beneficial, so the activities are not overdone or underdone. One feature of the participants that can influence the effect of positive psychology interventions is motivation; people who are motivated to pursue happiness benefit more from interventions they chose to participate in. Lyubomirsky and Layous (2013) also include social support as a personal feature; people who perceive support from their environment will likely benefit more from positive activities. This finding was recently supported by Regan, Radošić, and Lyubomirsky's (2022) review of the connection between social support and well-being.

Social support might be a moderating factor in the effectiveness of positive psychology interventions. Wood et al. (2008) completed a longitudinal study on the relationship between gratitude, social support, stress and depression. They found support for a direct model where gratitude led to high levels of perceived social support in addition to decreases in stress and depression. Deichert et al. (2021) experimentally investigated if the effectiveness of social support on psychological well-being during stress was increased by gratitude. Their participants first completed a writing activity (gratitude or neutral control) and then had a short period of time to prepare for a stressful speech task (with or without a supportive lab assistant). Their results showed that social support was related to decreased stress levels during the speech task. In addition, gratitude strengthened the benefits of social support in this task. It is clear that both

gratitude and social support can impact well-being in a variety of ways. However, the existing literature can not easily generalize to all populations; both of these studies were done in western cultures with predominantly white, undergraduate students.

As with many fields of study, positive psychology lacks representation from the minority community of LGBTQ+ individuals (Job & Williams, 2020; Vaughan & Rodriguez, 2014). The present proposed study will focus on the experience of specifically transgender individuals. For the purposes of the proposed research, transgender is an all-encompassing term for anyone who does not identify with the gender they were assigned at birth, including nonbinary individuals.

Minority Stress

In 2003 Ilan H. Meyer introduced the minority stress model for Lesbian, Gay, and Bisexual (LGB) populations as a conceptual framework for understanding prior pathology of LGB individuals, future directions for research, and possibilities of public policy change (Meyer, 2013). Minority stress can occur at different levels, for example interpersonal experiences of discrimination or structural levels of prejudice, but it can also occur individually with the experience of internalized stigma (Mayer, 2003 as cited in Jobs & Williams, 2020). In later research expanding on the minority stress model and including more information on how stigma might directly connect to the mental health issues experienced by LGB minorities, Hatzenbuehler (2009) established the psychological mediation framework. This framework postulates mediating factors between experience of stigma related stress and later psychopathology. These mediating factors include emotion dysregulation, social/interpersonal problems, and cognitive processes. However, both of these theoretical works lack representation from gender diverse individuals and focus solely on sexual minorities.

Chaudoir et al. (2017) investigated a variety of interventions intended to assist with coping with minority stress. They did a search of the psycINFO database finding intervention-based research done with populations of sexual minorities. They identified 44 interventions for reducing sexual minority stress. The researchers coded for whether the intervention reduced stressors, increased coping skills, or both. The interventions were also coded as targeting the structural, interpersonal, or individual level. Online interventions and writing exercises were a part of the ten studies identified that focused on increasing coping skills. Chaudoir et al. (2017) discuss how further research into the impact of gender, race, and age on the use of interventions is necessary because there is little research done on intersecting identities. Although they did a thorough examination of the literature that exists on sexual minorities, the researchers did not include any perspective on the effectiveness of implementing these interventions.

In a similarly comprehensive meta-analysis, Job and Williams (2020) brought together the minority stress model and the psychological mediation framework to examine positive psychology interventions. They specifically looked at how positive psychology interventions might be used in both sexual and gender minority groups. They analyzed 130 peer reviewed online positive psychology intervention articles; only six reported on sexual minorities while a total of four reported on transgender status. As expected, sexual and gender minority representation is relatively nonexistent in positive psychology intervention literature (Job & Williams, 2020; Vaughan & Rodriguez, 2014). Job and Williams' (2020) systematic review of positive psychology interventions revealed that interventions including strengths such as love, optimism, and spirituality often had larger effect sizes. There were also medium effects in studies on gratitude, self-compassion, and positive affect. Based on the factors of the psychological

mediation framework, they categorized their recommendations for further research into interventions focused on cognitive, social, and coping resources. They emphasized gratitude as a possible area to include in future research because of its categorization under the positive psychology virtue of Transcendence.

The study at hand seeks to remedy the lack of transgender participation in positive psychology literature. It is proposed that through experimental study of participation in gratitude specific positive psychology intervention with transgender individuals, there will be a positive change in well-being. In addition, social support will be investigated as a moderator of the relationship between gratitude interventions and well-being.

Proposed Method

Participants

According to prior literature (Job & Williams, 2020; Seligman et al., 2005), positive psychology interventions including gratitude have a medium effect size. This study will use an analysis of covariance (ANCOVA) with two predictor variables: social support as a continuous predictor and participation in the gratitude intervention as a categorical between participants variable. Cohen's (1992) specifications for sample sizes needed for various research designs did not provide information for an ANCOVA. However, it can be extrapolated from the similar 2 x 2 ANOVA test that to produce a power of .80 with an $\alpha = .05$ and a medium effect size, a sample of 132 transgender adults would be needed for the present study. It is likely there will be some attrition given that this study takes place over multiple weeks, therefore the goal is to recruit at least 165 participants which can account for 25% attrition.

The population of interest in this study is transgender adults. To recruit participants for this study there will be outreach asking LGBTQ+ organizations throughout the United States to

advertise the study. Participants will also be encouraged to share and recommend the study to other transgender friends. As compensation for their involvement in the study, each participant will be given \$5 at the start of the study and upon completion they will be entered into a raffle to win a \$50 gift card.

Approximately 0.52% of U.S. adults identify as transgender and the racial/ethnic demographics of transgender individuals is roughly the same as the general U.S. population (Herman, 2020). Therefore, the expected racial demographics of the participants in the proposed study will be predominantly White, followed by Latinx individuals, and there will be fewer Black and Asian participants. The proposed study requires participants to be 18 years or older. Research has found that transgender people have a lower mean age than cisgender people (Herman, 2020). Subsequently, the expected age distribution of the participants in this proposed study will be slightly younger than the average U.S. population.

Procedure

The entire proposed study will be conducted online. The participants will first be prompted to complete a consent form prior to continued involvement in the study. After consent there will be the baseline measure of well-being and the measure of social support. Next, they will complete information about their demographics and receive the initial \$5 compensation. At this point the participants will also be provided with trans specific mental health resources that can be used at any time such as national and local hotlines. Subsequently, half of the participants will be randomly selected to participate in the gratitude intervention. Participants will receive email reminders weekly for 8 weeks and will complete the gratitude intervention or the journaling control activity. Then, all participants will repeat the well-being survey. Finally, there will be a debriefing via email in which the participants are informed of all goals of the study, and

they will also be entered into the raffle for extra compensation. As a part of the debriefing participants will again be provided with mental health and trans specific resources.

Materials

The materials of this study will include measures of well-being and social support. There will also be a positive psychology intervention focused on gratitude. A complete version of all scales measuring well-being can be found in Appendix A. The complete scale measure for social support is provided in Appendix B.

Well-Being

It is important that well-being is measured not only by a lack of depression but also by signs of positive functioning. There is a wide variety of research done on well-being and it has been disputed which measures are best (Ryff et al., 2020; VanderWeele et al., 2020a). It is agreed that cultural and socioeconomic differences can impact the effectiveness of measurements of well-being and that the best practice is to use multiple scales whenever possible to include an extensive measurement of all parts of well-being (Ryff et al., 2020; VanderWeele et al., 2020b). In the proposed study, scales using a more hedonic approach to well-being will be used instead of eudemonic; in order to ensure the dependent variable of well-being is fully separate from the variable of social support. Eudemonic well-being generally includes support as a part of well-being in addition to focusing on self-realization or fulfillment. A hedonic approach to well-being focuses on increasing the positive and decreasing negative emotional states. The present study will use the same scales as Lyubomirsky et al. (2011); a modified version of the Positive Activation and Negative Activation Scale (PANAS; Watson et al., 1988), the Satisfaction With Life Scale (SWLS; Diener et al., 1985), and the Subjective Happiness Scale

(SHS; Lyubomirsky & Lepper, 1999). All these scales have strong face validity and internal consistency.

Affect. Lyubomirsky et al. (2011) used a subset of the original PANAS including only items focused on positive and negative mood rather than active adjectives. The 6 items, 3 pleasant (content, happy, and pleased) and 3 unpleasant (miserable, unhappy, and troubled) were measured on the original 5-point Likert scale (1=very slightly or not at all, 5=extremely) and participants indicated the degree to which they experienced these emotions in the past week. For their study these measures had good internal consistency (Lyubomirsky et al., 2011).

Life Satisfaction. The Satisfaction With Life Scale is 5 items rated on a 7-point Likert scale (1= strongly disagree, 7= strongly agree). Participants rate their responses to the following statements “In most ways my life is close to my ideal,” “The conditions of my life are excellent,” “I am satisfied with my life,” “So far I have gotten the important things I want in life,” and “If I could live my life over, I would change almost nothing.” (Diener, et al., 1985). The SWLS is also established as having strong internal consistency and test-retest reliability (Lyubomirsky et al., 2011).

Happiness. The Subjective Happiness Scale evaluates participants' current level of happiness with 4 items rated on 7-point Likert scales. Evaluations are made on participants' general happiness, happiness related to peers, and their characteristics of happiness. This measurement has also been found to have high internal consistency (Lyubomirsky et al., 2011).

Social Support

In previous studies single item self-report questions were used to assess participants' levels of social support (Pardue-Bourgeois et al., 2022; Roberts & Christens, 2021). In order to include more aspects of social support, this study will use a subscale from the Comprehensive

Inventory of Thriving (CIT). The CIT is a self-report measure with 54 items across 7 dimensions of well-being and it is recommended by VanderWeele et al. (2020a) for measuring overall well-being. In the present study, only the three questions from the subscale of support will be used. The following statements will be rated on a 5-point Likert scale (1= strongly disagree, 5= strongly agree) “There are people I can depend on to help me,” “There are people who give me support and encouragement,” and “There are people who appreciate me as a person.” (Su et al., 2014).

Gratitude Intervention

Adapted from Lyubomirsky et al. (2011) and Seligman et al. (2005), participants in the gratitude condition will complete a 15-minute activity once a week in which they write a narrative about one person they are grateful for. They will receive an email at the start of the week with instructions, “Spend 15 minutes writing about one individual you are grateful for. Describe specifically why you are grateful to this individual, how they have affected your life, and how you will remember what they have done.” Participants in the control condition will be given instructions to “Spend 15 minutes writing about what you did in the last week.” In order to ensure that all participants are actively involved in the study, 24 hours after the initial email there will be a reminder email that participants must respond to indicating that they completed the activity. Any participants who fail to respond to this email can then be eliminated from the data analysis process.

Ethical Considerations

Although there are possible risks in any psychological study, there are many benefits to the research proposed here. The main benefit to the participants of this study is that they will likely experience an increase in well-being due to the gratitude interventions. There will also be a

large benefit to scholarly knowledge and society at large by including transgender perspectives on positive psychology interventions.

The participants of the study should not experience greater than minimal risk because they will not be required to partake in any tasks that might cause harm. The participation in the study is truly voluntary because there is no coercion via excess monetary compensation and all participants will be recruited through outreach methods. This study does not involve deception and the main possible risk to participants is exposure of their transgender identity. Although the proposed study does not primarily target a protected or vulnerable population, it is likely that many participants will fall into the category of vulnerable populations. In addition, this study involves the disclosure of participants' gender identity and sex assigned at birth which might cause discomfort. These are necessary risks in order to complete the research and expand positive psychology interventions to broader populations.

In order to minimize these risks, participant data will be kept confidential on the online platform used for communication throughout the study and data will be stored in password protected computer software accessible only to the researchers. In addition, as a part of the consent form participants will be informed of the security measures in place to protect their data. Finally, when debriefing participants, information on trans specific resources will be provided as support for participants.

Overall, the benefits of the proposed study will outweigh potential risks to participants. The potential risks are minimal, and this study will contribute a great deal to the positive psychology literature. The proposed study will also benefit participants by providing ways for transgender individuals to increase their well-being.

Anticipated Results

This proposed study hypothesizes that participants in the gratitude intervention will experience a greater increase in well-being than participants in the control condition. The second hypothesis states that social support will moderate the relationship between the intervention and change in well-being such that those who have high social support will benefit more from the gratitude intervention than those who have lower support.

The dependent variable of well-being is continuous and will be measured with three self-report scales. These scales will be averaged into a composite score after appropriate reverse coding has been accounted for. The predictor variable of social support is also continuous and will be a composite score of the social support subsection of the CIT. Participation in the gratitude intervention condition is a dichotomous independent variable. Although the main predictor will be well-being, gender and race/ethnicity are two additional variables that will be controlled for in the analysis. To analyze the collected data, an ANCOVA statistical test will be performed. A main effect will be calculated for well-being and an interaction will be used to understand social support as a moderator.

Positive psychology exercises such as the gratitude intervention in this proposed study have shown to improve well-being over time (Lyubomirsky et al., 2011, Lyubomirsky & Layous, 2013, and Seligman et al., 2005). Lyubomirsky et al. (2011) measured well-being of participants who completed several positive psychology activities including gratitude and they found that participants who self-selected to be in happiness interventions had significant increases in well-being after a gratitude intervention. Lyubomirsky and Layous (2013) also argue for the role of social support as a moderator of the relationship between positive activities and well-being.

Based on this previous literature, the proposed study at hand should find results that will support the hypotheses.

Scholarly Merit and Broader Impact

The proposed research is likely to advance knowledge and understanding in the field of positive psychology by including gender diversity in the participant pool and extending research into minority communities. Previous studies have found that positive psychology interventions can lead to greater well-being and that gratitude exercises are effective at causing lasting change in well-being (Lyubomirsky et al., 2011; Seligman et al., 2005). The study at hand is important because it takes this prior research and extends it into the minority community of transgender individuals. This study is highly worth the time of researchers because it will contribute to increasing the diversity of people represented in the field of positive psychology.

This is important scholarly research to be done at this time because there is a continual hatred and harm done to transgender people. In the United States, it is dangerous to be a transgender person, your rights are restricted and you're at higher risk for mental health issues (Krishnakumar, 2022; The Trevor Project, 2020). The proposed research seeks to understand ways to increase positive life outcomes for transgender people instead of pathologizing transgender individuals.

Beyond the scholarly implications of this study, the research at hand has the ability to benefit individual transgender lives. Positive representation of transgender individuals is lacking in psychology research (Jobs & Willams, 2020) as well as in media. This study has the potential to increase trans gender well-being but also to provide the world with a more positive view on transgender lives and increase general well-being. This research can be used to help understand the minority community of transgender individuals and can be applied to therapeutic techniques

for transgender individuals. Gratitude interventions are also an easily accessible technique to implement in one's own life without guidance from an expert.

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Appendix A Well-Being Scales

Positive and Negative Affect Schedule PANAS (Watson, Clark, & Tellegen, 1988, adapted by
Lyubomirsky et al., 2011)

This scale consists of a number of words that describe different feelings and emotions. Read each item and then mark the appropriate answer in the space next to that word. Indicate to what extent you have felt this way during the past week. Use the following scale to record your answers.

1=very slightly or not at all 2=a little 3=moderately 4=quite a bit 5=extremely

_____ happy	_____ unhappy
_____ content	_____ pleased
_____ miserable	_____ troubled

Satisfaction With Life Scale (Diener et al., 1985)

Below are five statements that you may agree or disagree with. Using the 1 - 7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

7 - Strongly agree

6 - Agree

5 - Slightly agree

4 - Neither agree nor disagree

3 - Slightly disagree

2 - Disagree

1 - Strongly disagree

_____ In most ways my life is close to my ideal.
 _____ The conditions of my life are excellent.
 _____ I am satisfied with my life.
 _____ So far I have gotten the important things I want in life.
 _____ If I could live my life over, I would change almost nothing.

Subjective Happiness Scale (SHS; Lyubomirsky & Lepper, 1999)

For each of the following statements and/or questions, please circle the point on the scale that you feel is most appropriate in describing you.

1. In general, I consider myself:

1	2	3	4	5	6	7
not a very happy person						a very happy person

2. Compared with most of my peers, I consider myself:

1	2	3	4	5	6	7
less happy						more happy

3. Some people are generally very happy. They enjoy life regardless of what is going on, getting the most out of everything. To what extent does this characterization describe you?

1	2	3	4	5	6	7
not at all						a great deal

4. Some people are generally not very happy. Although they are not depressed, they never seem as happy as they might be. To what extent does this characterization describe you?

1	2	3	4	5	6	7
not at all						a great deal

Appendix B
Social Support Scale

Comprehensive Inventory of Thriving (adapted from Su et al., 2014)

Please indicate your agreement or disagreement with each of the following statements using the scale below.

- 1 Strongly Disagree
- 2 Disagree
- 3 Neither Agree nor Disagree
- 4 Agree
- 5 Strongly Agree

- 1. There are people I can depend on to help me
- 2. There are people who give me support and encouragement
- 3. There are people who appreciate me as a person