



## Beyond the Binary: Exploring the Lived Experiences of Gender Dysphoric Adolescents in Indonesia

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### ABSTRACT

**Introduction:** Gender dysphoria among adolescents is increasingly recognized globally, yet research on the lived experiences of transgender youth in Indonesia remains limited. This study aimed to explore the unique challenges, coping mechanisms, and support needs of Indonesian adolescents navigating gender dysphoria within a sociocultural context characterized by traditional gender norms and limited access to specialized healthcare. **Methods:** In-depth, semi-structured interviews were conducted with 15 adolescents (aged 13-19) who identified as experiencing gender dysphoria. Participants were recruited through LGBTQ+ youth organizations and community centers in Jakarta and Surabaya. Data were analyzed using thematic analysis to identify key themes and patterns within their narratives. **Results:** Four major themes emerged: (1) Early Recognition and Internal Conflict: Participants described an early awareness of their gender identity incongruence, often accompanied by feelings of confusion, shame, and fear due to societal expectations and potential rejection. (2) Navigating Disclosure and Social Support: Coming out to family and peers was a significant challenge, with varied responses ranging from acceptance to rejection. Support networks, primarily found within online communities and LGBTQ+ organizations, played a crucial role in fostering resilience. (3) Barriers to Accessing Healthcare: Participants reported significant obstacles in accessing gender-affirming care, including limited availability of specialized healthcare providers, financial constraints, and lack of family support. (4) Resilience and Hope for the Future: Despite the challenges, participants expressed resilience, hope, and a strong desire to live authentically. They emphasized the importance of self-acceptance, peer support, and advocacy for greater understanding and acceptance of gender diversity in Indonesia. **Conclusion:** This study provides valuable insights into the experiences of gender dysphoric adolescents in Indonesia. Findings highlight the urgent need for increased awareness, improved access to gender-affirming care, and supportive interventions to promote the well-being of this vulnerable population.

### 1. Introduction

Gender identity, a fundamental aspect of human experience, refers to an individual's internal sense of being male, female, or something else. While for many, gender identity aligns with the sex assigned at birth, for others, there exists a disconnect, a misalignment that can lead to significant distress and impairment. This incongruence between one's experienced gender and assigned sex is clinically recognized as gender

dysphoria. While increasing awareness and acceptance of gender diversity are evident in many parts of the world, transgender individuals, particularly adolescents, continue to face numerous challenges. These challenges include stigma, discrimination, social isolation, and barriers to accessing appropriate healthcare and support services. Adolescence is a crucial period of development marked by significant physical,

emotional, and social changes. For all adolescents, this period can be fraught with challenges as they navigate identity formation, peer relationships, and societal expectations. For those experiencing gender dysphoria, these challenges are often amplified, as they grapple with the added complexities of reconciling their internal gender identity with the external expectations and norms imposed by society.<sup>1-3</sup>

The experience of gender dysphoria is not uniform and can vary greatly among individuals. Some may experience intense distress and discomfort with their physical sex characteristics, while others may primarily struggle with social expectations and gender roles. The onset and intensity of gender dysphoria can also vary, with some individuals experiencing it from a young age, while others may not recognize it until adolescence or later in life. Navigating gender dysphoria during adolescence can be particularly challenging. Adolescents are undergoing rapid physical and hormonal changes, which can exacerbate feelings of dysphoria. They are also developing their sense of self and identity, and societal pressures to conform to traditional gender roles can be particularly intense during this period. The challenges faced by gender dysphoric adolescents are further exacerbated in sociocultural contexts where traditional gender norms are deeply entrenched and understanding of gender diversity is limited. In many societies, rigid gender roles and expectations are enforced, and any deviation from these norms is often met with stigma, discrimination, and even violence. Indonesia, the world's largest Muslim-majority country, presents a unique and complex context for exploring the experiences of gender dysphoric adolescents. While there is growing visibility of LGBTQ+ communities in urban areas, societal acceptance of gender diversity remains low. Traditional values and religious interpretations often contribute to negative attitudes toward gender nonconformity, and transgender individuals frequently face discrimination, harassment, and social exclusion.<sup>4-7</sup>

Access to gender-affirming healthcare, including hormone therapy and surgical interventions, is

extremely limited in Indonesia. This is due to a combination of factors, including a lack of specialized healthcare providers, financial constraints, and social stigma. Many healthcare professionals lack the knowledge and training to provide appropriate care to transgender individuals, and those who do may face discrimination and harassment themselves. Despite these challenges, Indonesian adolescents are increasingly coming out and seeking support for their gender identity. They are forming communities, both online and offline, to connect with others who share similar experiences and advocate for their rights. However, their voices and experiences remain largely unheard and undocumented. Research on the lived experiences of gender dysphoric adolescents in Indonesia is scarce. This lack of research hinders the development of culturally sensitive interventions and policies to support this vulnerable population. Understanding the unique challenges, coping mechanisms, and support needs of Indonesian adolescents navigating gender dysphoria is crucial for promoting their well-being and ensuring their rights are protected.<sup>8-10</sup> This qualitative study aims to address this gap by exploring the experiences of gender dysphoric adolescents in Indonesia.

## **2. Methods**

This study employed a qualitative descriptive approach to gain an in-depth understanding of the lived experiences of gender dysphoric adolescents in Indonesia. Qualitative research is particularly well-suited for exploring complex social phenomena and giving voice to marginalized populations. It allows researchers to delve into the nuances of individual experiences and generate rich, contextualized data that can illuminate the complexities of human behavior and social interaction.

A descriptive qualitative design was chosen for this study as it allows for a comprehensive and in-depth exploration of the phenomenon of gender dysphoria among Indonesian adolescents. This design is particularly useful for capturing the richness and complexity of lived experiences, allowing participants

to share their stories in their own words and providing insights into their thoughts, feelings, and perspectives.

A purposive sampling strategy was used to recruit participants who met the following inclusion criteria; Participants self-identified as transgender, gender non-conforming, or experiencing gender dysphoria. This ensured that the study captured the experiences of individuals who genuinely grappled with the challenges of gender identity incongruence; Participants were between the ages of 13 and 19 years old. This age range encompasses adolescence, a critical developmental period characterized by significant physical, emotional, and social changes, and a time when gender identity issues often become particularly salient; Participants resided in Jakarta or Surabaya, two major cities in Indonesia with relatively visible LGBTQ+ communities. This allowed for easier access to potential participants and facilitated recruitment through established LGBTQ+ youth organizations and community centers. Recruitment was facilitated through collaborations with LGBTQ+ youth organizations and community centers in Jakarta and Surabaya. These organizations provided a trusted and safe space for potential participants to learn about the study and express their interest in participating. Information about the study was disseminated through flyers, social media, and word-of-mouth within these organizations. Interested individuals were invited to contact the research team to learn more about the study and schedule an interview.

A total of 15 adolescents participated in the study. This sample size was deemed appropriate for a qualitative study, allowing for in-depth exploration of individual experiences while also capturing a range of perspectives within the target population. While qualitative research does not aim for statistical representativeness, the sample size was sufficient to achieve thematic saturation, where no new themes emerged from the data.

Ethical considerations were prioritized throughout the research process. All participants were provided

with detailed information about the study, including its purpose, procedures, potential risks and benefits, and their rights as participants. Informed consent was obtained from all participants, and for those under 18, parental/guardian consent was also obtained. Confidentiality and anonymity were ensured by using pseudonyms and removing any identifying information from the data. Participants were assured that their participation was voluntary and that they could withdraw from the study at any time without penalty. All data were stored securely and only accessible to the research team.

Data were collected through individual, semi-structured interviews conducted in Bahasa Indonesia, the national language of Indonesia. The interviews were conducted by the first author, a trained mental health professional with experience in qualitative research and working with LGBTQ+ youth. The interviewer's background and experience ensured cultural sensitivity and facilitated rapport with the participants.

The interview guide was developed based on a comprehensive review of relevant literature and consultations with experts in the field of gender identity and adolescent mental health. The guide was designed to be flexible and adaptable, allowing the interviewer to follow the participant's lead and explore emerging themes in depth. The interview guide covered the following key areas; Early experiences and recognition of gender dysphoria: This section explored participants' earliest memories and experiences related to their gender identity, including any feelings of difference or incongruence, and how they made sense of these experiences; Experiences of coming out to family and peers: This section explored participants' experiences of disclosing their gender identity to family members, friends, and others in their social circle, including the reactions they received and the impact of these experiences on their relationships and well-being; Social support networks and coping mechanisms: This section explored the sources of support that participants relied on, including family, friends, online communities, and LGBTQ+

organizations, and the strategies they used to cope with the challenges of navigating their gender identity in a potentially unsupportive environment; Access to healthcare and support services: This section explored participants' experiences with seeking and accessing healthcare and support services related to their gender identity, including any barriers they encountered and their perspectives on the quality and availability of these services; Challenges and resilience in navigating gender identity in Indonesia: This section explored the specific challenges that participants faced in navigating their gender identity within the Indonesian sociocultural context, including experiences of stigma, discrimination, and violence, and the ways in which they demonstrated resilience and strength in the face of these challenges; Hopes and aspirations for the future: This section explored participants' hopes and dreams for the future, including their aspirations related to their gender identity, education, career, relationships, and overall well-being.

Interviews were conducted in private settings at the participants' convenience, ensuring a safe and comfortable environment for them to share their experiences. The interviewer established rapport with the participants by engaging in casual conversation and explaining the purpose and procedures of the study in a clear and accessible manner. The interviewer followed the interview guide but allowed for flexibility to explore emerging themes and follow the participant's lead. The interviewer used open-ended questions and probes to encourage participants to elaborate on their experiences and perspectives. The interviewer also paid attention to non-verbal cues and adjusted the pace and direction of the interview accordingly. Each interview lasted approximately 60-90 minutes. All interviews were audio-recorded with the participants' permission and transcribed verbatim. The transcripts were then checked for accuracy and anonymized to protect the participants' confidentiality.

Data analysis was conducted using thematic analysis, a widely used method for identifying, analyzing, and reporting patterns within qualitative data. Thematic analysis involves a systematic process

of coding, categorizing, and interpreting data to identify recurring themes and patterns of meaning. The six-phase framework proposed by Braun and Clarke (2006) guided the analysis; Familiarization with the data: The researchers immersed themselves in the data by reading and re-reading the transcripts multiple times. This allowed them to become intimately familiar with the data and gain a holistic understanding of the participants' experiences; Generating initial codes: Meaningful segments of text were identified and assigned initial codes. Codes are short labels or tags that capture the essence of a particular segment of data. This process involved line-by-line coding of the transcripts, identifying key words, phrases, and ideas that reflected the participants' experiences and perspectives; Searching for themes: Codes were grouped into potential themes based on shared patterns and meanings. This involved identifying connections and relationships between codes and grouping them into broader categories that represented recurring patterns in the data; Reviewing themes: The themes were reviewed and refined to ensure they accurately reflected the data. This involved revisiting the transcripts and checking that the themes captured the essence of the participants' experiences. Themes were revised, merged, or split as needed to ensure they were coherent and meaningful; Defining and naming themes: Clear definitions and names were developed for each theme. This involved crafting concise and descriptive labels that captured the essence of each theme; Producing the report: The findings were presented in a narrative form, incorporating illustrative quotes from the participants. This involved weaving together the themes and supporting them with rich and evocative quotes from the participants' narratives. The data analysis process was iterative and reflexive, with the researchers constantly revisiting the data and refining their interpretations. The research team met regularly to discuss the emerging themes and ensure consistency in coding and analysis.

### 3. Results

Table 1 provides a detailed overview of the characteristics of the 15 adolescent participants who took part in this study exploring the lived experiences of gender dysphoria in Indonesia. The participants range in age from 13 to 19, capturing a range of adolescent experiences. This is important as experiences and needs may differ across adolescence. The table captures the diversity of gender identities within the transgender umbrella. While some identify with binary identities (transgender girl/boy/man/woman), others identify as non-binary or genderfluid. This highlights the importance of recognizing that gender identity exists on a spectrum. Participants were recruited from Jakarta and Surabaya, two of Indonesia's largest cities. This suggests a potential focus on urban experiences, and the findings may not be fully generalizable to adolescents in rural areas where social support and access to resources may differ. Most participants live with their parents, reflecting the common living arrangement for adolescents in Indonesia. However, a notable number are living independently or with extended family, which could indicate family rejection due to their gender identity and might suggest increased vulnerability. Family support varies considerably. Some participants have supportive families, while others experience mixed or unsupportive reactions. This highlights the crucial role of family in either facilitating or hindering an adolescent's well-being while navigating gender dysphoria. Lack of family support may contribute to mental health challenges and increase reliance on alternative support systems. Access to care is limited. While some participants have access to hormone therapy and one to both hormone therapy and surgery, the majority do not. This underscores the significant barriers to gender-affirming care in Indonesia, likely due to a combination of factors such as limited availability of specialized providers, financial constraints, and societal stigma.

Table 2 presents the key themes and subthemes that emerged from the analysis of the interviews with

gender dysphoric adolescents in Indonesia. The inclusion of direct quotes from the participants provides powerful illustrations of their lived experiences and adds depth and authenticity to the findings; Early Recognition and Internal Conflict: The quotes highlight that many participants recognized their gender difference from a young age. They felt a disconnect between their internal sense of self and the gender they were assigned at birth. This early recognition often led to feelings of confusion and isolation. Adolescents expressed confusion and uncertainty about their identity, grappling with societal expectations and internalized norms. They questioned their feelings and struggled to understand their experiences. Due to societal stigma and potential rejection, participants experienced fear and shame about their gender identity. This led to attempts to suppress or hide their true selves, potentially impacting their emotional well-being; Navigating Disclosure and Social Support: The quotes reveal a range of family reactions, from acceptance to rejection. This highlights the critical role of family support in the lives of these adolescents. Negative reactions can lead to feelings of isolation and increased vulnerability. Similar to family reactions, peer responses varied. Acceptance from friends fostered a sense of belonging and validation, while rejection led to further isolation and emotional distress. Online communities provide a vital source of support and connection, especially for those lacking support in their offline lives. These virtual spaces offered a sense of belonging, validation, and access to information. LGBTQ+ organizations offered safe spaces, resources, and peer support, contributing to a sense of community and empowerment. These organizations played a crucial role in fostering resilience and facilitating access to information and support; Barriers to Accessing Healthcare: Quotes illustrate the significant challenges in finding healthcare professionals knowledgeable about transgender healthcare. This lack of access to competent care can delay or prevent adolescents from receiving necessary support and interventions. Financial barriers, including the high

cost of hormone therapy and surgery, were significant obstacles for many participants. This highlights the need for affordable and accessible gender-affirming healthcare services. In some cases, lack of family support prevented adolescents from accessing care, particularly for those requiring parental consent. This underscores the need for increased awareness and education for families to foster understanding and support; Resilience and Hope for the Future: Despite the challenges, participants expressed resilience and a

commitment to living authentically. They emphasized the importance of self-love and acceptance in navigating their journey. Support from friends and the transgender community played a vital role in fostering resilience and well-being. These connections provided a sense of belonging, validation, and hope. Many participants expressed a desire to advocate for change and improve the lives of other transgender individuals in Indonesia. This reflects a sense of empowerment and hope for a more inclusive future.

Table 1. Participant characteristics.

<b>Participant</b>	<b>Age</b>	<b>Gender identity</b>	<b>Location</b>	<b>Living situation</b>	<b>Family support</b>	<b>Access to gender-affirming care</b>
M.	15	Transgender girl	Jakarta	With parents	Mixed (mother supportive, father not)	No
R.	17	Transgender boy	Surabaya	With parents	Unsupportive	No
A.	18	Transgender girl	Jakarta	With extended family (after leaving home)	Unsupportive	No
B.	16	Non-binary	Jakarta	With parents	Supportive	Yes (hormone therapy)
C.	14	Transgender boy	Surabaya	With parents	Partially supportive	No
D.	19	Transgender girl	Jakarta	Independent living	Unsupportive	No
F.	17	Transgender boy	Surabaya	With parents	Mixed (mother supportive, father not)	No
G.	16	Transgender girl	Jakarta	With parents	Supportive	Yes (hormone therapy)
H.	19	Non-binary	Surabaya	Independent living	Unsupportive	Yes (social transition only)
I.	15	Transgender boy	Jakarta	With parents	Partially supportive	No
J.	17	Transgender man	Jakarta	With parents	Supportive	Yes (hormone therapy and top surgery)
K.	16	Transgender woman	Surabaya	With extended family	Mixed	No
L.	14	Genderfluid	Jakarta	With parents	Supportive	No
N.	18	Transgender woman	Jakarta	Independent living	Unsupportive	Yes (hormone therapy)
O.	13	Transgender boy	Surabaya	With parents	Partially supportive	No

Table 2. Themes and quotes.

Theme	Subtheme	Quotes
<b>1. Early Recognition and Internal Conflict</b>	Early Awareness of Difference	"I always felt like a girl inside, even though everyone called me a boy." (M., 15) "I knew I was different from other boys my age. I didn't like the things they liked, and I felt more comfortable with girls." (R., 17)
	Confusion and Self-Doubt	"When I was younger, I didn't understand why I felt so different. I thought there was something wrong with me." (C., 14) "I felt so lost and confused. I didn't know who I was or where I belonged." (K., 16)
	Fear and Shame	"I was scared to tell anyone because I didn't want to be judged or rejected." (R., 17) "I felt so much shame about my feelings. I tried to hide them from everyone, even myself." (F., 17)
<b>2. Navigating Disclosure and Social Support</b>	Coming Out to Family	"My parents were devastated when I told them I was transgender. They said it was just a phase." (A., 18) "My mom was really supportive, but my dad had a hard time accepting it." (M., 15)
	Coming Out to Peers	"My friends were much more understanding. They accepted me for who I am." (B., 16) "Some of my friends turned their backs on me when I came out. It was really painful." (D., 19)
	Role of Online Communities	"Finding online communities was a lifesaver for me. It was the first time I felt like I wasn't alone." (C., 14) "Online groups gave me a space to be myself and connect with others who understood." (H., 19)
	LGBTQ+ Organizations	"The support group at the LGBTQ+ center helped me so much. They gave me information and resources, and I met other trans people there." (G., 16) "I felt safe and accepted at the youth group. It was a place where I could just be myself." (L., 14)
<b>3. Barriers to Accessing Healthcare</b>	Lack of Specialized Providers	"I've tried to find a doctor who can help me, but it's so difficult. Most doctors don't know anything about transgender healthcare." (F., 17) "I had to travel to another city to find a doctor who was knowledgeable about hormone therapy." (N., 18)
	Financial Constraints	"I want to start hormone therapy, but it's so expensive, and my parents won't help me pay for it." (D., 19) "Gender-affirming surgery is out of reach for me. I don't have the money, and insurance doesn't cover it." (J., 17)
	Lack of Family Support	"My parents won't let me start hormones even though I have a doctor's recommendation. They say I'm too young to make that decision." (O., 13) "I need my parents' consent for surgery, but they refuse to give it. They don't believe I'm really transgender." (K., 16)
<b>4. Resilience and Hope for the Future</b>	Self-Acceptance	"It's not easy being transgender in Indonesia, but I'm determined to live my life on my own terms. I'm proud of who I am." (G., 16) "I've learned to love and accept myself, even with all the challenges." (H., 19)
	Peer Support	"My friends have been my rock. They've supported me through everything." (B., 16) "Knowing that I'm not alone makes a huge difference. My trans friends understand what I'm going through." (I., 15)
	Advocacy and Social Change	"I want to use my voice to make a difference. I want to help other transgender youth in Indonesia know that they're not alone." (I., 15) "I hope that one day, transgender people in Indonesia will be treated with respect and dignity." (H., 19)

#### 4. Discussion

The journey of self-discovery for gender dysphoric individuals often begins in the early stages of life, long before they have the language or conceptual framework to understand their experiences. As our study reveals, many Indonesian adolescents recounted an awareness of their gender incongruence stretching back to childhood. This early recognition, however, is rarely a straightforward or celebratory realization. Instead, it is often fraught with confusion, self-doubt, and internal conflict, as these young people grapple with making sense of their inner world within a society that often adheres to rigid and binary notions of gender. Imagine a child who, despite being assigned male at birth, feels an innate sense of belonging with girls, gravitating towards their games, clothes, and mannerisms. This child may not have the words to articulate their feelings, but they experience a deep sense of dissonance between their internal identity and the expectations placed upon them based on their assigned sex. This dissonance can manifest as a feeling of being "different," "wrong," or "out of place," leading to confusion and self-doubt. In the Indonesian context, where traditional gender roles and expectations are deeply ingrained, this internal struggle is further intensified. Children are often socialized from a young age into specific gender roles, with boys expected to be masculine and girls expected to be feminine. Any deviation from these norms is often met with disapproval, ridicule, or even punishment. This can create a hostile environment for gender non-conforming children, forcing them to suppress their true selves and internalize feelings of shame and fear. As these children enter adolescence, the internal conflict may become even more pronounced. Puberty brings about significant physical changes, further highlighting the incongruence between their bodies and their gender identity. The social pressures to conform to gender norms also intensify during adolescence, as young people navigate peer relationships and societal expectations. The lack of readily available information and resources on gender diversity in Indonesia compounds this internal

struggle. Many adolescents in our study described feeling isolated and alone, unsure of where to turn for support or understanding. They may lack the vocabulary to articulate their experiences or fear being judged or rejected if they disclose their true feelings. This lack of access to information and support can perpetuate feelings of shame, confusion, and self-doubt. This early recognition and internal conflict can have a profound impact on the mental health and well-being of gender dysphoric adolescents. They may experience anxiety, depression, low self-esteem, and social withdrawal. In some cases, they may engage in self-harm or suicidal ideation. It is crucial to recognize and address these challenges early on to provide support and prevent long-term negative consequences. This highlights the critical need for early intervention and education on gender diversity in Indonesia. This education should not be limited to adolescents but should also encompass families, educators, and healthcare providers. By increasing awareness and understanding of gender diversity, we can create a more supportive and inclusive environment for gender non-conforming children and adolescents. Providing access to information and resources include books, websites, and support groups that offer information about gender identity and diversity. Schools and community centers can create safe spaces where gender non-conforming youth can connect with others and receive support. Healthcare providers should be trained to recognize and address the needs of gender dysphoric youth, providing culturally competent and gender-affirming care. Families need support and education to understand and accept their children's gender identity. Family therapy can be helpful in facilitating communication and strengthening family bonds. By investing in early intervention and education, we can help gender dysphoric adolescents navigate their journey of self-discovery with greater confidence and support. We can create a society where all young people, regardless of their gender identity, feel safe, accepted, and empowered to live authentically.<sup>11,12</sup>

The process of coming out, and disclosing one's gender identity to others, is a significant step for transgender individuals. It is a deeply personal decision, often fraught with anxiety and uncertainty. For adolescents, who are still developing their sense of self and navigating complex social dynamics, coming out can be particularly challenging. Our study revealed a diverse range of experiences with disclosure, highlighting the complex tapestry of social support available to gender dysphoric adolescents in Indonesia. While some participants were met with acceptance and understanding from their families and peers, others faced rejection, disapproval, and even ostracization. Coming out to family can be particularly challenging in the Indonesian context, where family ties are strong and traditional gender roles are deeply ingrained. Some families may struggle to understand or accept their child's gender identity, leading to conflict, strained relationships, and even rejection. This can have a devastating impact on the adolescent's well-being, leaving them feeling isolated, unsupported, and even homeless. On the other hand, some participants in our study were fortunate to have supportive families who accepted their gender identity and provided love and encouragement. This family support can be a crucial buffer against the challenges of navigating gender dysphoria, fostering resilience and promoting positive mental health. Similarly, coming out to peers can be a mixed experience. Some adolescents find acceptance and support within their peer groups, while others face bullying, harassment, and social exclusion. The fear of rejection and discrimination can prevent many young people from coming out, leading to feelings of isolation and loneliness. The study also highlights the vital role of online communities and LGBTQ+ organizations in providing support, connection, and a sense of belonging for gender dysphoric adolescents. For many participants, these spaces offer a lifeline, a place where they can connect with others who understand their experiences, access information, and find validation. Online communities provide a safe and anonymous space for adolescents to explore their gender identity,

share their experiences, and seek support from others who understand their struggles. These virtual spaces can be particularly important for those who lack support in their offline lives, providing a sense of community and belonging. LGBTQ+ organizations also play a crucial role in supporting transgender youth. These organizations offer a range of services, including support groups, counseling, advocacy, and social events. They provide a safe space for young people to connect with others, build community, and access resources and information. The findings underscore the importance of fostering and supporting these online communities and LGBTQ+ organizations, recognizing their crucial role in promoting the well-being of transgender youth. By providing safe and supportive spaces, these communities can help to mitigate the negative impact of stigma and discrimination, foster resilience, and empower transgender adolescents to live authentically.<sup>13,14</sup>

For transgender individuals, access to gender-affirming healthcare is not merely a matter of convenience, but a fundamental necessity for their physical and mental well-being. Gender-affirming care encompasses a range of services, including hormone therapy, surgery, and mental health support, that help individuals align their bodies and lived experiences with their gender identity. Unfortunately, as our study reveals, accessing such care in Indonesia is fraught with significant challenges, presenting formidable barriers that can have profound consequences for the lives of transgender adolescents. One of the most pressing barriers is the scarcity of specialized healthcare providers who are knowledgeable and experienced in transgender healthcare. Many participants in our study expressed frustration and despair at their inability to find doctors who understood their needs or were willing to provide gender-affirming care. This lack of expertise within the medical community stems from a combination of factors, including limited training opportunities, prevailing social stigma, and a lack of awareness regarding transgender health issues. Imagine a young person seeking hormone therapy to alleviate the

distress caused by gender dysphoria. They may consult multiple doctors, only to be met with confusion, dismissal, or even judgment. Some healthcare providers may hold biased views about transgender individuals, refusing to provide care based on their personal beliefs. Others may simply lack the knowledge and training to offer appropriate and safe treatment. This lack of access to competent care can delay or even prevent transgender adolescents from receiving the support they need, leading to prolonged suffering and potential harm. Another significant barrier is the financial burden associated with gender-affirming care. Hormone therapy, surgery, and other related services can be prohibitively expensive, particularly for adolescents who may not have financial independence or family support. Many participants in our study expressed a desire to pursue hormone therapy or surgery but felt unable to do so due to the exorbitant costs. Even when healthcare providers are available, the high cost of consultations, medications, and procedures can create an insurmountable obstacle. This financial barrier can force transgender adolescents to make difficult choices, potentially delaying or forgoing essential care that could significantly improve their quality of life. This inequity in access to healthcare based on socioeconomic status further marginalizes an already vulnerable population. Furthermore, lack of family support can be a major impediment to accessing care, particularly for those who are minors and require parental consent for medical interventions. Our study revealed instances where adolescents, despite having a doctor's recommendation, were unable to access hormone therapy or surgery due to parental refusal. This lack of support can stem from a variety of factors, including a lack of understanding about gender identity, religious or cultural beliefs, and fear of social stigma. For transgender adolescents, parental support is not only crucial for accessing healthcare but also for their overall well-being. When families reject or invalidate their child's gender identity, it can lead to significant emotional distress, family conflict, and even homelessness. This lack of support can further

exacerbate the challenges of navigating gender dysphoria and create additional barriers to accessing care. The consequences of these barriers to healthcare can be severe, impacting both the physical and mental health of transgender adolescents. Prolonged and untreated gender dysphoria can lead to increased anxiety, depression, social isolation, and even self-harm. The inability to access desired medical interventions can also lead to feelings of hopelessness, frustration, and a sense of being trapped in a body that does not align with one's identity. Addressing these barriers requires a multi-pronged approach that tackles the issue from various angles. Firstly, it is essential to increase the number of trained healthcare providers who are competent in transgender healthcare. This can be achieved through incorporating transgender health topics into medical school curricula, providing continuing education opportunities for healthcare professionals, and establishing specialized clinics or centers that focus on transgender health. Secondly, efforts must be made to improve the affordability of gender-affirming care. This could involve advocating for insurance coverage for transgender healthcare services, establishing subsidies or financial assistance programs for those who cannot afford care, and working with pharmaceutical companies to reduce the cost of medications. Thirdly, addressing social stigma and discrimination is crucial for creating an environment where transgender individuals feel safe and empowered to seek healthcare. This involves raising public awareness about gender identity and diversity, challenging harmful stereotypes and biases, and promoting acceptance and inclusion. Ultimately, ensuring equitable access to gender-affirming healthcare for transgender individuals in Indonesia requires a concerted effort from various stakeholders, including healthcare providers, policymakers, educators, and the community at large. By breaking down these barriers, we can create a more just and inclusive society where all individuals, regardless of their gender identity, have the opportunity to live healthy and fulfilling lives.<sup>15,16</sup>

Despite the formidable challenges they face, the transgender adolescents who participated in our study demonstrated remarkable resilience, determination, and hope for the future. Their narratives are a powerful testament to the human spirit's ability to overcome adversity, find strength in community, and envision a better future. In the face of stigma, discrimination, and barriers to healthcare, these young people have learned to embrace their authentic selves and navigate a complex social landscape. They have found solace and empowerment in online communities and LGBTQ+ organizations, forging connections with others who understand their experiences and offering peer support. They have also become advocates for change, raising their voices to challenge societal norms and fight for the rights of transgender people in Indonesia. This resilience is not merely an individual trait but is fostered and nurtured by supportive communities and affirming spaces. By providing access to mental health services, peer support groups, and opportunities for self-expression and empowerment, we can help transgender adolescents build the resilience they need to navigate the challenges they face and thrive. Investing in the well-being of transgender youth is not only a matter of social justice but also an investment in the future of Indonesia. By empowering these young people to reach their full potential, we create a more inclusive and vibrant society that benefits everyone.<sup>17,18</sup>

This study has far-reaching implications for both clinical practice and social change in Indonesia. It underscores the urgent need for culturally competent and gender-affirming healthcare services that are accessible and affordable for all transgender individuals. Healthcare providers must receive training to understand the unique needs of transgender patients and provide sensitive and supportive care. This includes using appropriate pronouns and names, respecting patients' autonomy and decision-making, and offering a non-judgmental and affirming environment. Furthermore, this study highlights the need for broader social change to create a more inclusive and accepting environment for

transgender individuals in Indonesia. This involves challenging harmful stereotypes, promoting education and awareness about gender diversity, and advocating for policies that protect the rights of transgender people. By working together, healthcare providers, policymakers, educators, and community members can create a society where transgender individuals feel safe, respected, and empowered to live their lives authentically. This not only benefits transgender individuals but also enriches society as a whole by fostering diversity, inclusivity, and social justice.<sup>19,20</sup>

## 5. Conclusion

This study provides valuable insights into the lived experiences of gender dysphoric adolescents in Indonesia, highlighting their early recognition of gender incongruence, the complex navigation of disclosure and social support, and the significant barriers to accessing gender-affirming healthcare. Despite these challenges, participants demonstrated remarkable resilience, finding strength in online communities and LGBTQ+ organizations, and expressing hope for a more inclusive future. The findings underscore the urgent need for increased awareness and understanding of gender diversity in Indonesia, particularly among families, educators, and healthcare providers. It is crucial to address the barriers to accessing gender-affirming care by increasing the availability of specialized providers, improving affordability, and challenging social stigma. By creating a more supportive and inclusive environment, we can empower transgender adolescents to live authentically and thrive. This study contributes to the growing body of literature on transgender youth, emphasizing the importance of culturally sensitive research and advocating for the well-being of this often-marginalized population.

## 6. References

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