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RESEARCH ARTICLE



Transgender people in Indonesia: how do they overcome their personal adjustment toward stress?

Ellya Susilowati^a, Mochamad Soelton^b, Husmiati Yusuf^c, Adi Fahrudin^d, Kus Hanna Rahmi^d, and M. Rezaul Islam

^aDepartment of Social Protection and Empowerment, Bandung Polytechnic of Social Welfare, Bandung, Indonesia; ^bFaculty of Psychology, Mercu Buana University Jakarta, West Jakarta, Indonesia; ^cResearch Center for Welfare, Village, and Connection, National Research and Innovation Agency, Indone , Jakarta, Indonesia; ^dFaculty of Psychology, Universitas Bhayangkara Jakarta Raya, Jakarta, Indonesia; ^eInstitute of Social Welfare and Research, University of Dhaka, Dhaka, Bangladesh

ABSTRACT

The rapid demographic and lifestyle changes in recent years have had a significant impact on human personality, leading to the emergence of a large population of transgend 22 people who face unique challenges in their personal lives. This research aimed to analyze the impact of anxiety and self-esteem on personal adjustment to stress among transgender people in Jakarta, Indonesia, using data collected from 158 transgender participants through a quantitative survey questionnaire. Partial Least Squares (PLS) v61e used for sample determination. The findings revealed that anxiety had a positive and significant effect on personal adjustment, while self-esteem had a lesser effect. Personal adjustment, in turn, has a negative but significant effect on stress. The results suggested that anxiety toward personal adjustment is a critical factor contributing to stress among transgender people, with a coefficient of 4.223, while self-esteem has a coefficient of 1.033, and personal adjustment has a coefficient of 3.516. These findings highlighted the importance of addressing anxiety and personal adjustment in managing stress among transgender people.

KEYWORDS

Transgender people; selfesteem; anxiety; personal adjustment; stress; indonesia

Introduction

Transgender people are a marginalized population that faces unique stressors and challenges in their daily lives. They are often the subject of controversy and ridicule in society, despite the chall despite they face in their lives. They frequently experience discrimination, harassment, and violence, which can have negative effects on their mental health and well-being. As a result, it is crucial to identify strategies that can help transgender people navigate these stressful situations and improve their adjustment. Research has shown that anxiety and self-esteem play significant roles in personal adjustment for transgender people (Ramli & Soelton, 2019). Additionally, gender affirmation treatments and include hormone therapy and surgery, has been found to positively impact mental health out loss for transgender people (Aldridge et al., 2021; Amand et al., 2011; Baker et al., 2021). However, more research is needed to explore effective personal adjustment strategies for transgender people.

Operario et al. (2014) reported that stigma was independently associat 76 with greater levels of unprotected anal intercourse and illicit drug use among the HIV-related health risk behaviors of transgender women. Data on the population of transgender people in Indonesia is not currently available (Asia Pacific Transgender Network, 2023). Despite this limited data, the prevalence of HIV

CONTACT M. Rezaul Islam rezauldu@gmail.com Institute of Social Welfare and Research, University of Dhaka, Dhaka 1205, Bangladesh

among transgender people, particularly Transpuan, in Indonesia is alarmingly high with rates of 24.8% nationally and 34% in the most affected province, Jakarta. In comparison, the general adult population (aged 15–49 years) has a prevaler 63 rate of only 0.4%. This disparity can be attributed to discrimination of their gender identity and sexual orientation, as well as their involvement in high 64 k employment such as sex work. The lack of healthcare professionals who are knowledgeable and understanding of the specific needs of transgender people across the country further compounds the issue (Aditama et al., 2021).

According to Ramli and Soelton (2019), demographic changes brought about by generational shifts and globalization have had a significant impact on population growth and class ges. Globalization has led to economic disparities and the movement of genders. Globalization is described as the gradual elimination of economic borders and an increase in international exchange and transnational interaction. It has brought about changes in various aspects of life, including sexuality and transgender issues, and deeply affects social, cultural, economic, and political regulations of sexuality. However, these broader themes are associated with complex issues that require separate exploration. Gender identity develops separately from sexual orientation and external genitalia and varies between individuals. Neuroanatomic differences between genders develop early on a sexual are reinforced by behavioral and endocrine changes during childhood and adolescence (Delahunt et al., 2018).

It is important to study this issue as man 32 ansgender people face unique stressors and experience discrimination and harassment. They are more likely to suffer from mental health issues such as depression, anxiety, substance abuse, and suicidal thoughts. The reason for these negative health outcomes can be attributed to minority stressors as discrimination and victimization (Clary et al., 2023). They have a higher risk of suicide. While there is a growing body of research on the mental health of transgender people, there is still a lack of understanding 29 out the personal adjustment strategies that transgender people use to navigate stressful situations. This study aims to fill this gap by examining the impact of personal adjustment strategies on stress levels among transgender people in Jakarta.

The importance of understanding the mental health of transgender people and their personal adjustment trategies cannot be overstated. They are a vulnerable population that faces significant challenges in terms of mental health social support, and access to healthcare. Research has shown that transgender people experience higher rates of the epression, anxiety, and suicide than the general population (Bockting et al., 2016; H. A. James et al., 2020; Reisner et al., 2015). On the other hand, understanding the personal adjustment strategies that transgender people use to navigate stressful situations is critical for developing effective interventions and support services.

This study focuses on Jakarta, the most populous proving in Indonesia, and uses data from the Jakarta Provincial AID 2 Commission's study on transgender people's quality of life in 2015. Based on the previous research, the purpose of this research is to explore further and understand the later life of the transgender people. This research explores how to solve the issues faced by transgender people and prevent the desperate action they might encounter such as committing suicide. How to solve the issue of their later life when they find out that they were infected by AIDS syndrome? Even if they are described as a third gender or a transition gender and classified as sometimes abandoned but they have the right to lead their life and be taken care of as normal human beings.

The study was undertaken in response to the heightened prevalence of suicide among elderly transgender individuals, as reported by Utama (2017) and Liem et al. (2022). By identifying effective personal adjustment strategies, healthcare professionals, therapists, and other support providers can help transgender people build resilience and cope with the unique challenges they face. This study builds on previous research on the mental health of transgender people and provides valuable insights into the personal adjustment strategies that transgender people use to navigate stressful situations. The findings of this study have important implications for palthcare providers and policymakers, as they can help inform the development of interventions and policies aimed at improving the mental health and well-being of transgender people. Much research has brought up the issue of trans sexuality and how they behave and lead their life after the process of transgender and becoming trans people. Yet,



this research is to further understand and study how they can behave from the research variables to deal with when they encounter the tough situation and depression of their being not accepted in the environment. Twenty respondents were involved in the pilot study for the main research. Following the preliminary investigation with these 20 participants, the research variables were delineated as follows: self-esteem and anxiety served as the independent variables, personal adjustment as the intervening variable, and stress as the dependent variable.

Literature review

This study conceives several concepts such as transgender, anxiety, self-esteem, personal adjustment, and stress. A plethora of resources 🛛 ist that provides a clear and comprehensive explanation of what it means to be a transgender person. Transgender people do not it with the sex they were assigned at birth based on physical characteristics. This includes binary (male-to-female or female 73 male) and non-binary individuals. The term "transgender" is used as an umbrella term for those whose gender identity or expression differs from what is typically associated with the sex they were assigned at birth, according to the National Center for Transgender Equality (2021), the World Health Organization (2021), and the American Psychological Association (2021).

The Asia Pacific Transgender Network (APTN) (undated) utilized the terr 59 "transgender" and "trans" interchangeably in their country (Indonesia) report, employing these as urangella terms to encompass the diverse spectrum of gender identities and expressions. This includes individuals who identify with a gender different from that assigned to them at birth and may express their gender identity in ways that deviate from societal expectations. Trans persons often align their identity with local, social, cultural, religious, or spiritual definitions. The report highlights that individuals within this community face lower levels of education, which, in turn, constrains their employment opportunities.

Anxiety is a subjective experience of mental tension caused by difficulties, pressure, conflict, or threat. It is a normal reaction to a very stressful situation, characterized by negative affect and physical tension, according to Ghufron and Risnawita (2012). Factors causing anxiety include negative experiences in the past and irrational thoughts, as noted by Adler and Rodman (2009). Studies have shown that anxiety can affect negotiation outcomes negatively (Robbins & Judge, 2015). For transgender people, anxiety can result from their gender identity or expression, leading to excessive worry or fear. On the other hand, stress is the to dealing with a certain situation, which can be positive or negative. According to Christyanti et al. (2012), stress is a result of an individual's assessment of their resources to deal with environmental demands. Wangsa (2010) identifies two types of stress: eustress, which is a healthy and positive response to stress, and distress, which is an unhealthy and negative response. Although stress is often discussed negatively, it can also have positive effects, such as increasing performance. Robbins and Judge (2015) note that in response to stress, the body relgses stress hormones to cope, and the heart rate and breathing accelerate.

Self-esteem refers to an individual's subjective sense of worth, encompassing cognitive, emotional, and behavioral components. It is a fundamental human need that is linked to better 49 ental and physical health, academic achievement, and satisfying relationships. High self-esteem is associated with resilient, while low self-esteem is associated with depression, anxiety, and other psychological problems. Self-esteem can be influenced by various factors, including cultural and social norms, parenting styles, and life experiences. Understanding the various components and influences of selfesteem can 🔀 develop interventions to improve mental health and overall life satisfaction (Baumeister et al., 2003; Orth et al., 2008, 2010; Trzesniewski et al., 2006). Self-esteem affects one's social behavior, as it is influenced by their assessment and knowledge and their evaluation of the problem faced. Sarwono and Eko (2009) classified this evaluation as self-esteem.

On the other hand, personal adjustment is a psychological process that helps individuals overcome challenges in their daily life and cope with social pressure (Weiten & Lloyd, 2006). Schneider (1998) identified four elements of personal adjustment: adaptation, conformity, mastery, and individual variation. These elements highlight an individual's ability to adapt to challenges, conform to social norms, master skills to handle problems efficiently and show individual variations in behavior and responses. The adjustment process is a lifelong psychological process that individuals undergo to meet their physical, psychological, and social needs (Christyanti et al., 2012).

The transgender population in Indonesia has been increasing, with estimates of 800,000 in 2010 and 3 million in 2012 (Utama, 2017). The population of transgender is mainly located in the six regional areas in Jakarta and the average hotspot population where most of the transgender people are gathered. The highest location of the transgender hotspot is in the East of Jakarta with a total of 465 transgender people (Table 1). According to Figure 1, the highest percentage, 67%, is in parlor accommodations in North Jakarta, followed by 54% in rented houses in East Jakarta, 47% in boarding houses in South Jakarta, 38% in boarding houses in Central Jakarta, and 34% in rented houses in South Jakarta.

Several authors, including Peletz (2006), Mallon (2009), Hegarty (2017), and Faye (2021), have identified various social and psychological issues among transgender individuals in Indonesia. These issues encompass unstable emotions, susceptibility to conflict, and experiences of social and gender deprivation. The process of individuals changing gender is a long and gradual process that may

Table 1. Transgender people mapping result in jakarta.

District/ City	Total Hotspot	Total Population Estimation	Total Observation Result Population	Average of Total Per-Hotspot Population	Mobility Correction Applied	Total Corrected Mobility Population	Mapping Result Decision
Central Jakarta	13	191	160	14	0.85	161	161
North Jakarta	63	367	244	6	0.5	184	184
West Jakarta	32	294	239	9	0.69	202	202
South Jakarta	36	275	253	8	0.7	192	192
East Jakarta	71	645	434	9	0.72	465	465
Thousand Islands	2	2	2	1	1	2	2
Total	217	1774	1332	8	-	1206	1206

Note: DKI Jakarta Social Service (2021).

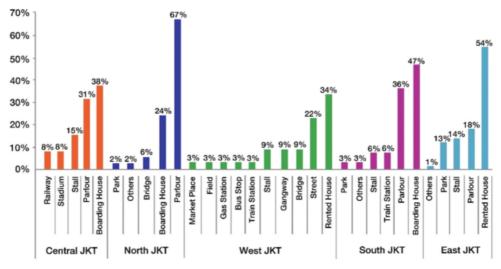


Figure 1. Jakarta transgender hotspot. Note: DKI Jakarta Social Service (2021).



encounter a lot of experiences and behaviors from their environment that cause ambiguity of identity and gender (Ekasari, 2011; Yudiyanto, 2016).

Transgender people face a range of stressors, from discrimination and stigma to social rejection and challenges in accessing gender-affirming healthcare. These factors contribute to anxiety, taking forms such as generalized or social anxiety, often linked to experiences like gender dysphoria, coming out, or transitioning. It's crucial to note that anxiety isn't inherently tied to being transgender but rather arises from external factors and societal pressures.

Self-esteem for transgender people involves subjective evaluations of their worth, value, and confidence regarding gender identity or expression. Soelton et al. (2019) categorize self-esteem as high, moderate, or low based on responses to the environment. Influenced by societal attitudes, discrimination, and the coming-out process, self-esteem significantly impacts well-being. Overcoming challenges to self-esteem requires positive affirmation, self-care, community support, and fostering a healthy self-identity in alignment with gender expression. In navigating self-esteem challenges, transgender people seek acceptance, grapple with societal norms, and encounter difficulties in accessing gender-affirming healthcare. Positive self-esteem is integral for mental health, fostering self-acceptance, resilience, and a strong sense of worth. Recognizing the internal and external factors shaping self-esteem is vital in supporting the well-being of transgender people.

Personal adjustment encompasses the dynamic process of adapting to challenges related to gender identity and expression. It includes psychological, emotional, and behavioral adjustments in personal lives, relationships 67 nd social environments. Varied among people, personal adjustment reflects different levels of comfort with gender identity and expression. Stress among transgender people manifests as psychological, emotional, and physiological responses to unique experiences and societal pressures. Significant stressors include discrimination, limited healthcare access, legal recognition difficulties, and societal norms (Hackimer et al., 2021). Stress negatively impacts mental, emotional, and physical well-being, necessitating comprehensive support systems for transgender people.

Research methods and data

In an effort to ensure the authenticity and cultural sensitivity of our study, we deliberately adopted a community-centered methodology, engaging transgender people as active collaborators rather than passive survey subjects. Acknowledging the systemic and structural challenges faced by the transgender community in Indonesia, we sought to elevate their voices and insights by enlisting the support of transgender volunteers during the face-to-face interview process. These volunteers, drawn from the very community under study, played a pivotal role in enhancing communication, fostering trust, and creating an inclusive environment conducive to open and honest responses. This participatory approach not only aligns with ethical considerations but also strengthens the validity and relevance of our findings by incorporating the nuanced perspectives of those intimately familiar with the experiences of transgender people in Jakarta.

The research methodology employed the Partial Least Squares (PLS)¹ method, a statistically advanced approach previously utilized by reputable researchers (Haenlein & Kaplan, 2004; Marcoulides et al., 2009; Willaby et al., 2015). Collaborating closely with transgender volunteers, we sought to delve into the intricate dynamics between anxiety, self-esteem, personal adjustment, and stress within the transgender community.

We initiated a pilot study involving 20 respondents. Subsequently, to ensure a comprehensive and inclusive survey, we conducted face-to-face interviews with 158 respondents across 30 different hotspots in Jakarta. A structured questionnaire was administered via face-to-face interviews to collect quantitative data. The sample size of 158 was selected for several reasons. While some previous studies, like Marsinun et al. (2020) with 208 participants and Syahputra et al. (2019) with 304 participants, considered larger samples, our choice was adequate for detecting meaningful relationships between the variables of interest. This size was practical, considering available resources, data collection feasibility, and logistical challenges. Additionally, it aimed to capture a representative sample of the transgender population, and it was deemed appropriate to unveil unique characteristics aligning with the study's specific research questions and objectives.

The recruitment of 158 respondents for this study involved a targeted outreach approach within the transgender community in Jakarta veraging community networks and support, we collaborated with local transgender leaders who played a crucial role in facilitating contact with potential participants. Through various community events, support groups, and safe spaces, we communicated the objectives of the study and obtained voluntary participation. This inclusive and community-engaged recruitment strategy aimed to ensure a diverse and representative sample of transgender individuals in Jakarta, contributing to the richness and validity of the study's findings. This intentional engagement aimed to explore how anxiety and self-esteem impact personal adjustment to stress within the transgender community. By actively involving individuals with lived experiences, our methodology aim to capture a holistic understanding of the factors influencing mental health.

To ensure the validity and reliability of our measurements within the PLS method, we meticulously conducted a battery of tests, including the Goodness of Fit (GoF) test, loading factor analysis, and hypothesis testing through bootstrapping. The loading factor analysis indicated that most indicator values are valid, with loading factors consistently above 0.70. Hypothesis testing using bootstrapping provided robust evidence for the significance and direction of the relationships within the proposed model. The collaborative nature of our data collection, supported by transgender volunteers, adds an extra layer of ethical rigor to the study.

The Goodness of 12 (GoF) Model was employed to calculate the R-Square (R2). According to Chin (1998), an R square value of 0.67 indicates a strong correlation, 0.33 indicates a moderate correlation, and 0.19 indicate a weak correlation. Additionally, we assessed the predictive value relevance (Q squared), where a value of 0.02 is licates small relevance, 0.15 indicates medium relevance, and 0.35 indicates large relevance. To test the Goodness of Fit Structural models on the inner model, predictive relevance (Q2) was utilized, with a Q-Square value greater than 0 indicating that the model has predictive relevance. In the analysis of the measurement model, we tested the validity and reliability of each dimeration and indicator used to measure the variables, including discriminant validity, square root value 47 Average Variance Extracted (AVE) above 0.5, loading factor above 0.5, and composite reliability (Cronbach's Alpha) above 0.70 (Nunnally & Bernstein, 1994).

The study was approved by the ethical committee. Prior to interviews, verbal consent was individually obtained from every participant, and explicit permission was sought from transgender leaders within the local community. This not only ensured compliance with ethical standards but also underscored our commitment to transparency, participant well-being, and community involvement.

Our research methodology goes beyond conventional approaches by actively involving transgender people as co-creators and leveraging the support of volunteers from the community. This methodological refinement, grounded in community engagement and ethical considerations, not only contributes to the study of our findings but also sets a precedent for inclusive and collaborative research practices in the study of mental health among transgender populations in Jakarta, Indonesia.



Table 2 displays the outcomes of the Goodness of Fit (GoF) analysis, encompassing four variables: self-esteem, anxiety, personal adjustment, and stress. Within this context, the Average Variance Extracted (AVE) denotes the average extracted variance. Concurrently, Composite Reliability assesses internal

Table 2. The Goodness of the Fit Model (GoF).

Variable	AVE	Composite Reliability	Cronbach's Alpha	R Square	Q Square
Self-Esteem	0.775	0.932	0.902	-	0.520
Anxiety	0.804	0.942	0.918	_	0.446
Personal Adjustment	0.738	0.894	0.822	0.509	0.508
Stress	0.620	0.803	0.699	0.057	0.129



consistency, while Cronbach's Alpha functions as a reliability indicator. R Square represents the amount of variance in the dependent variable that is explained by the independent variables. Q Square represents the amount of variances in the dependent variable that is predicted by the model. According to Table 2, all variables in the model noet the discriminant validity criteria, as the AVE values are above 0.5. The composite reliability and Cronbach's alpha values for each variable are also above 0.7, indicating that they are reliable. The R square value for personal adjustment is 0.509, which means that 50.9% of the variance in personal adjustment is explained by the independent variables. The Q square value for personal adjustment is 0.508, indicating that the model can predict 50.8% of the variance in personal adjustment. The Q square value for stress is low, at 0.129, indicating that the model is not as effective at predicting stress as it is at predicting personal adjustment.

Table 3 presents the loading factors of the PLS model for each variable and dimension. The loading factors represent the strength and direction of the relationship between the variables and their underlying dimensions. The dimensions are represented by the acronym for each variable (SE for Self-Esteem, AN for Anxiety, PA for Personal Adjustment, and ST for Stress), followed by the number of the indicator (e.g. SE1, SE2, etc.). The Loading Factor (λ) values range from 0 to 1, with higher values indicating a stronger relationship between the variable and the underlying dimension. All loading fac yalues in this table are considered valid, as they are ab yz the threshold of 0.7.

Table 4 shows the results of hypothesis testing, which aims to test the relationship between variables in the proposed model. The table shows the original sample value, $\gamma\beta$ (the standardized regression coefficient), and T-statistics for each hypothesis.

The first hypothesis, Anxiety → Personal Adjustment, has an ortganal sample value of 0.583, a γβ value of 0.138, and a T-statistic of 4.223. The positive γβ value indicates that there is a positive relationship between anxiety and personal adjustment, and the T-statistic indicates that this relationship is significant.

The second hypothesis, Self-Esteem → Personal Adjustment, has an original sample value of 0.147, a $\gamma\beta$ value of 0.142, and a T-statistic of 1.033. The positive $\gamma\beta$ value indicates that there is a positive

Table 3 Loading Factors

Variable	Dimension	Loading Factor (λ)	13 mark
Self-Esteem	SE1	0.628	Valid
	SE2	0.925	Valid
	SE3	0.893	Valid
	SE4	0.722	Valid
	SE5	0.758	Valid
	SE6	0.827	Valid
Anxiety	AN1	0.903	Valid
	AN2	0.824	Valid
	AN3	0.552	Valid
	AN4	0.896	Valid
	AN5	0.902	Valid
Personal Adjustment	PA1	0.882	Valid
	PA2	0.894	Valid
	PA3	0.766	Valid
Stress	ST1	0.571	Valid
	ST2	0.646	Valid
	ST3	0.622	Valid
	ST4	0.575	Valid

Table 4. Result of hypothesis testing.

Hypothesis	Original Sample	γβ	T-Statistics	Remark
Anxiety → Personal Adjustment	0.583	0.138	4.223	Positive – Significant
Self-Esteem → Personal Adjustment	0.147	0.142	1.033	Positive – Insignificant
Personal Adjustment → Stress	-0.238	0.068	3.516	Negative – Significant

relationship between self-esteem and personal adjustment, but the T-statistic suggests that this relationship is not significant.

The third hypothesis, Personal Adjustment \rightarrow Stress, has an original same value of -0.238, a $\gamma\beta$ value of 0.068, and a T-statistic of 3.516. The negative $\gamma\beta$ value indicates that there is a negative relationship between personal adjustment and stress, and the T-statistic indicates that this relationship is significant.

The summary statement of these results shows that the hypothesis "Anxiety -> Personal Adjustment" has a positive and significant relationship, supported by a high T-statistics value (4.223). The hypothesis "Self-Esteem -> Personal Adjustment" has a positive but insignificant relationship, with a T-statistics value of 1.033. The hypothesis "Personal Adjustment -> Stress" a negative and significant relationship, supported by a high T-statistics value (3.516). Therefore, based on these results, it can be concluded that anxiety has a positive effect on personal adjustment, personal adjustment harms stress, but self-esteem does not have a significant effect on personal adjustment.

The results of the research indicate that self-esteem has a positive effect on personal adjustment means that if the transgender people have higher self-esteem then it will affect a higher personal adjustment as well (Figure 2). The transgender people's high self-esteem will rise when they were accepted by the social environment and also social support, which means that the transgender people will easily adjust their behavior and self-esteem based on this positive response from their environment. The results of this research also indicate that anxiety hurts personal adjustment. This means that when the transgender people encounter higher anxiety, then it will cause transgender people will need

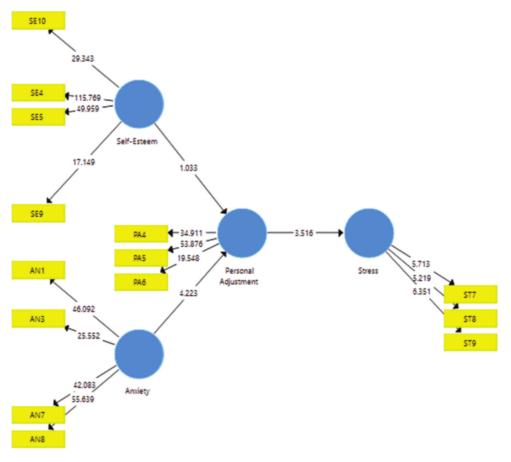


Figure 2. Bootstrapping.



a higher attempt at personal adjustment. There are a few factors that support the positive correlation between anxiety and personal adjustment.

Discussion

The primary aim of this study was to investigate how anxiety and self-esteem affect personal adjustment to stress among transgender communities residing in Jakarta, Indonesia. A quantitative survey questionnaire was administered to 158 particip from transgender people, and the data obtained were analyzed using Partial Least Squares (PLS). Limitations of the study include the use of self-report measures, which may be subject to response bias, and the cross-sectional design, which precludes causal inferences. This research may not encompass all the variables and issues that could arise in discussions about transgender people 58 ture studies should consider using multi-method approaches and lag itudinal designs to confirm the findings of this study. The results of the analysis indicated high values of AVE, composite reliability, 22 d Cronbach's alpha. The R-square values indicated that the model explained a substantial amount of the variance in the dependent variable. The discriminant validity of the variables was also confirmed by the AVE values, which were greater than 0.5. The loading factors of the indicators sowed that all of them were valid, with most of them having a loading factor greater than 0.7. This indicates that the items used to measure the latent variables were appropriate and that they were able to capture the constructs they were intended to measure.

The hypothesis testing results revealed that anxiety was positively and significantly related to personal adjustment. Thin inding is consistent with previous research that has shown that anxiety can affect an individual's ability to adapt to different situations and cope with stressors (Reser & Swim, 2011; Washington, 2009). The positive relationship between anxiety and personal adjustment suggests that interventions that aim to reduce anxiety levels may improve their ability to adjust later on. However, the results also showed that self-esteem was positively but insignificantly related to personal adjustment. Rothbaum et al. (2022) found that self-efficacy and [17] l-being scores are higher among transgender people. This finding is inconsistent with some previous 24 dies that have found a significant relationship between self-esteem and adjustment (e.g., Orth et al., 2010). One possible explanation for this inconsistency is that the sample used in our study was comprised of 30 hot 68 ts in Jakarta, which may have different experiences and challenges than the general population. Further research is needed to explore this relationship.

The results showed that personal adjustment was negatively and significantly related to stress. This finding is consistent with previous research that has shown that individuals who are better able to adjust to new and challenging situations may experience less stress (Hayes & Weathington, 2007; Maddux & Lewis, 1995). This suggests that interventions that aim to improve pers al adjustment skills among transgender people may help them better manage stress. In terms of the relationship between anxiety and personal 🚮 stment, our study found a positive and significant relationship between these variables, which is consistent with previous research (e.g., Summerfeldt et al., 2006; Vasile, 2018). This suggests that individuals with higher levels of anxiety may have lower levels of personal adjustment, which may manifest as difficulty adapting to new situations or coping with stressors.

On the other hand, our study did not find a significant relation 75 between self-esteem and personal adjustment, which is inconsistent with some previous studies (e.g., Orth et al., 2010) that have reported a positive relationship between these variables. Cultural diff conces or the specific measures used in our study may have contributed to this discrepancy. Further research is needed [62] larify the nature of the relationship between self-esteem and personal adjustment. Finally our study found a negative and significant relationship between personal adjustment and stress, which is consistent with previous research (e.g., Lazarus & Folkman, 1984; Willems et al., 2021). This suggests that individuals who have higher levels personal adjustment may be better able to manage and cope with stressors, potentially reducing the negative impact of stress on their mental and physical health.

To consider the above analysis, we can indicate that the present study provides new insights into the relationship between self-esteem, anxiety, personal adjustment, and stress among college students. The findings suggest that anxiety and personal adjustment may play important roles in determining how well college students adapt to their new envirogent and manage stress. These findings may have important implications for the development of intergotions aimed at improving the well-being of college students. Overall, our study provides further support for the importance of college students. Overall, our study provides further support for the importance of sonal adjustment in predicting mental health outcomes, particularly anxiety, and stress. However, further research is needed to explore the complex relationships between these variables and to identify potential mediators and moderators of these effects.

Conclusions and policy implications

The outcome of the hypothesis testing indicates that anxiety plays a more significant role in influencing personal adjustment as an intervening variable, compared to self-esteem, among transgender people. The findings supporting this conclusion lie in the observed patterns where anxiety levels had a more pronounced impact on personal adjustment than self-esteem, highlighting the complexity of mental health dynamics 65 thin this community. However, it is essential to address a potential misunderstanding about sex, gender identity, and gender expression in the interpretation of these results.

We emphasize the need for inclusive care for transgender people, challenging societal exclusion. They should be treated on par with other community members, fostering an environment that enhances their self-esteem and allows the development of positive values based on their unique capabilities. By recognizing and developing the potential within the transgender community, they can contribute meaningfully to society, leading normal lives without the burden of rejection. Building self-esteem becomes a crucial aspect of this process, enabling individuals to manage anxiety, adjust effectively, and control self-esteems.

Our research aimed to shed light on the underlying issues contributing to the high incidence of suicide among transgender people in Jakarta, Indonesia. Utilizing four variables to explore the primary causes, our findings reveal that transgender people face challenging decisions during the transformation of their sexual identity, encounter social disparities, and often grapple with acceptance. However, we acknowledge that our study did not thoroughly investigate or discuss suicide directly. To strengthen the conclusions, future research should delve deeper into the specific factors contributing to suicide risks among transgender individuals in Jakarta.

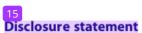
While transgender people manage to cope with these challenges through resilience and self-esteem, others struggle, leading to increased stress levels. The inability to cope with stress may escalate into depression, potentially resulting in suicidal tendencies. This research suggests that such issues may extend beyond Jakarta to other cities in Indonesia, warranting a broader analysis of the global impact on transgender people. It is crucial to acknowledge that transgender individuals are often forced to confront and accept rejection, contributing to heightened social stress. This reality underscores the systemic and societal issues at play. This holistic approach advocates for the well-being of transgender people, emphasizing societal inclusion and fostering an environment people retheir potential is acknowledged and cultivated. It acknowledges the need for interventions that address the root causes of stress, rather than placing the burden solely on the marginalized group to manage the consequences of social rejection.

This study holds significant relevance to 10 field of social work as it unravels the intricate nexus between anxiety, personal adjustment, and the alarming 10 s of suicide among transgender people in Jakarta, Indonesia. The findings underscore the pivotal role of social work in addressing the mental health challenges faced by this community. Social work policies could be instrumental in advocating for inclusive practices that ensure the well-being of transgender people, emphasizing societal acceptance and combating exclusionary attitudes. Practical implications for social work practice involve the development of targeted interventions, support systems, and mental health services tailored to the

unique needs of transgender people. By integrating these insights into social work policy and practice, the profession can actively contribute to fostering a more inclusive society that nurtures the mental health and well-being of transgender people, ultimately curbing the distressing rates of suicide within this community.

Note

1. PLS regression is a multivariate technique addressing multicollinearity, effectively modeling relationships between sets of variables through simultaneous decomposition and an iterative process, widely used for predictive modeling across diverse fields.



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M. Rezaul Islam (i) http://orcid.org/0000-0002-2217-7507

Author contributions

The research was a collaborative effort among all authors, with ES, MS, and HY leading the planning, structuring, literature review, drafting, revision, and thorough review of the manuscript. AF, KHR, and MRI made significant contributions by improving the draft copy and further revising and enhancing the manuscript. Ultimately, all authors carefully reviewed and gave their approval for the final version of the manuscript.

Ethical clearance

Prior data collection, the researchers submitted an 35 ics application to the Research Ethics Committee at the Bandung Polytechnic of Social Welfare. This step was taken to ensure that the research would be conducted in an ethical manner and would not violate any ethical printiples or guidelines. As a part of this process, informed consent forms were provided to all potential participants in the study, and only those who were willing to participate and had provided their consent were included.

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