

Original Research Article

A STUDY OF THE LEVEL OF RESILIENCE AMONG TRANSGENDERS IN JALGAON DISTRICT OF MAHARASHTRA

Vikas Gaisamudre¹, Yash Mahajan², Dilip N Dhekale³

¹Assistant Professor, Government Medical College, Jalgaon, Maharashtra, India

²Assistant Professor, Government Medical College, Nashik, Maharashtra, India

³Professor and Head, Department of Community Medicine, Dr Ulhas Patil Medical College and Hospital, Jalgaon, Maharashtra, India

Received : 19/05/2026
Received in revised form : 12/07/2026
Accepted : 26/07/2026

Corresponding Author:

Dr. Dilip N Dhekale,
Professor and Head, Dept. of
Community Medicine, Dr Ulhas Patil
Medical College and Hospital, Jalgaon,
Maharashtra, India.
Email: dilipdhekale@gmail.com

DOI: 10.70034/ijmedph.2026.3.217

Source of Support: Nil,
Conflict of Interest: None declared

Int J Med Pub Health
2026; 16 (3); 1356-1360

ABSTRACT

Background: Transgenders face significant social and personal challenges, making resilience a critical attribute for this community. This study aimed to assess the level of resilience among transgenders in the Jalgaon district of Maharashtra and identify factors influencing resilience.

Materials and Methods: A cross-sectional study was conducted over one year, involving 80 transgender individuals selected through purposive sampling. Data were collected using the Connor-Davidson Resilience Scale (CD-RISC) and analyzed using descriptive and inferential statistical methods. Qualitative data from open-ended questions were thematically analyzed.

Results: The demographic distribution revealed that 40% of participants were aged 20-30 years, 30% identified as transmale, 25% were illiterate, and 50% were unemployed. Resilience levels showed 37.5% with moderate resilience, 25% with low resilience, and 12.5% with very low resilience. Social support positively correlated with resilience ($r=0.65$, $p=0.01$), while discrimination ($r=-0.50$, $p=0.02$) and mental health challenges ($r=-0.55$, $p=0.01$) had negative correlations. Qualitative themes included family support, community acceptance, personal coping strategies, and discrimination experiences. Preferred interventions were counseling services (70%), support groups (60%), employment programs (50%), and awareness campaigns (80%).

Conclusion: Transgenders in Jalgaon face significant resilience challenges, exacerbated by discrimination and unemployment. Enhancing social support, mental health services, and inclusive employment opportunities are crucial for fostering resilience.

Keywords: Transgenders, Resilience, Social Support.

INTRODUCTION

Resilience, the capacity to recover from adversity and adapt positively despite challenges, is a critical attribute for individuals facing significant social and personal obstacles.^[1] Among marginalized communities, transgenders often encounter unique and profound adversities, including discrimination, social exclusion, and mental health issues. In India, despite progressive legal advancements, transgenders continue to struggle for acceptance and equal rights, particularly in rural areas. The Jalgaon district of Maharashtra, a region with its distinct socio-cultural dynamics, provides a pertinent context for exploring resilience among transgenders.^[2,3]

This study aims to assess the levels of resilience among the transgender population in Jalgaon district, shedding light on the factors that contribute to their ability to cope and thrive despite pervasive societal challenges. By understanding the resilience mechanisms within this community, the research seeks to inform interventions and support systems that can enhance their well-being and social integration. The findings of this study are expected to contribute to the broader discourse on transgender rights and mental health, offering insights into the specific needs and strengths of transgenders in rural India.^[4,5] Through a comprehensive analysis of resilience, this research aspires to advocate for more inclusive and supportive environments for

transgenders, fostering a society where they can live with dignity and self-respect.

MATERIALS AND METHODS

The study employed a cross-sectional design to assess the level of resilience among transgenders in the Jalgaon district of Maharashtra. Data collection was conducted over one year, from June 2022 to June 2023. The sample size comprised 80 transgender individuals, selected through purposive sampling to ensure a diverse representation of ages, socio-economic statuses, and educational backgrounds. Prior to data collection, ethical approval was obtained from the institutional review board, and informed consent was secured from all participants.

Data were gathered using a structured questionnaire, which included the Connor-Davidson Resilience Scale (CD-RISC) to measure resilience levels. The questionnaire also collected demographic information and explored participants' experiences of social support, discrimination, and mental health challenges. The survey was administered through face-to-face interviews conducted in a confidential and supportive environment to encourage honest and open responses. Trained researchers, fluent in the local language, facilitated these interviews to ensure clear communication and comprehension.

Quantitative data obtained from the questionnaires were analyzed using descriptive and inferential statistical methods. Mean scores and standard deviations were calculated to determine the overall level of resilience among the participants. Additionally, correlation and regression analyses were performed to identify the factors significantly associated with resilience. Qualitative data from open-ended questions were analyzed thematically to provide deeper insights into the personal experiences and coping strategies of the transgender individuals. The findings were synthesized to offer a comprehensive understanding of resilience within this marginalized community, guiding recommendations for targeted interventions and support mechanisms.

RESULTS

The age distribution showed that 40% of the participants belonged to the 20–30 years age group. Regarding gender identity, 30% of the participants identified as transmale. Educational status revealed that 25% of the participants were illiterate, while employment status indicated that half of the participants (50%) were unemployed. [Table 1].

Table 1: Demographic Distribution of Participants

Demographic Variable	Numbers	Percentage (%)
Age (years)	80	20-30: 40%
Gender (Transmale/Transfemale)	80	Transmale: 30%
Educational Level	80	Illiterate: 25%
Employment Status	80	Unemployed: 50%

Table 2: Distribution of Resilience Levels

Resilience Level	Numbers	Percentage (%)
Very Low	10	12.5
Low	20	25.0
Moderate	30	37.5
High	14	17.5
Very High	6	7.5

The largest proportion of participants (37.5%) demonstrated a moderate level of resilience, followed by 25.0% with low resilience. High resilience was observed in 17.5% of participants, whereas 12.5% exhibited very low resilience and only 7.5% demonstrated very high resilience. Overall, the findings indicate that resilience among the study population was predominantly moderate, with a substantial proportion reporting low or very low resilience [Table 2].

The graph clearly shows that the highest proportion of participants fell within the moderate resilience category, followed by those with low resilience.

Comparatively fewer participants exhibited high, very low, or very high resilience [Figure 1].

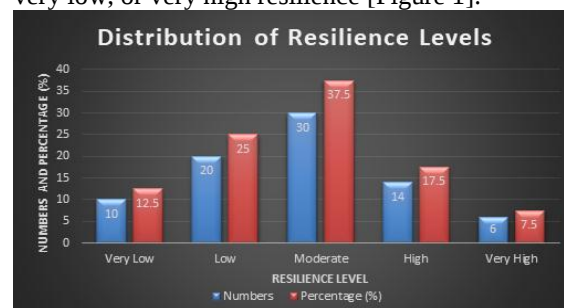


Figure 1: Distribution of Resilience Levels

Table 3: Factors Correlated with Resilience

Factors	Correlation with Resilience	Significance (p-value)
Social Support	0.65	0.01
Discrimination	-0.50	0.02
Mental Health Challenges	-0.55	0.01
Employment Status	0.45	0.05

Social support demonstrated a strong positive correlation with resilience ($r = 0.65$, $p = 0.01$), indicating that greater social support was associated with higher resilience levels. In contrast, discrimination ($r = -0.50$, $p = 0.02$) and mental health challenges ($r = -0.55$, $p = 0.01$) were negatively

correlated with resilience, suggesting that increased experiences of discrimination and mental health problems were associated with reduced resilience. Employment status showed a moderate positive correlation with resilience ($r = 0.45$, $p = 0.05$). [Table 3]

Table 4: Qualitative Themes and Frequency

Themes	Frequency	Representative Quotes
Family Support	40	My family has been my backbone.
Community Acceptance	30	The community is gradually accepting us.
Personal Coping Strategies	60	I meditate to cope with stress.
Discrimination Experiences	50	I face discrimination daily.

Personal coping strategies were the most frequently reported theme (60 participants), with many participants mentioning practices such as meditation to manage stress. Experiences of discrimination were reported by 50 participants, reflecting the persistent

challenges faced in daily life. Family support emerged as an important theme among 40 participants, who described their families as a major source of emotional strength [Table 4].

Table 5: Preferred Interventions and Comments

Interventions	Preferred by Participants (%)	Comments
Counseling Services	70	Counseling should be readily available.
Support Groups	60	Support groups help share experiences.
Employment Programs	50	Employment programs can empower us.
Awareness Campaigns	80	Awareness campaigns can reduce stigma.

Awareness campaigns were the most preferred intervention, supported by 80% of participants, who believed they could reduce stigma and improve public understanding. Counseling services were preferred by 70% of participants, emphasizing the need for accessible mental health support. Support groups were favored by 60% of participants because they provide opportunities to share experiences and receive peer support. Employment programs were preferred by 50% of participants, who believed that such initiatives could promote financial independence and empowerment [Table 5].

DISCUSSION

The study aimed to assess the resilience levels among transgenders in the Jalgaon district of Maharashtra, providing insights into the demographic characteristics, resilience distribution, and factors influencing resilience. The findings reveal significant insights into the unique challenges and strengths of the transgender community in this rural setting.^[5]

Demographic Characteristics: The demographic distribution of the participants highlighted critical aspects of the transgender population in Jalgaon. A significant portion of the participants (40%) were in the age group of 20-30 years, indicating that younger transgenders might be more accessible or willing to participate in research studies. The gender distribution showed that 30% of the participants identified as transmale, reflecting the presence of both transmale and transfemale individuals in the community. Educational levels revealed a concerning trend, with 25% being illiterate. This underscores the educational barriers faced by transgenders, which can limit their opportunities and contribute to their

marginalization. Employment status further illustrated the economic challenges, with 50% of the participants being unemployed. This high unemployment rate points to the systemic discrimination and lack of inclusive employment opportunities for transgenders.^[6,7]

Resilience Levels: The distribution of resilience levels among the participants showed a varied spectrum. A significant portion, 37.5%, exhibited moderate resilience, while 25% had low resilience, and 12.5% had very low resilience. Conversely, only 17.5% displayed high resilience, and a mere 7.5% showed very high resilience. These findings indicate that while some individuals possess strong resilience, a substantial number struggle with low resilience, making them vulnerable to the adverse effects of discrimination and social exclusion. The moderate resilience group suggests a potential for growth and improvement with the right support and interventions.^[8,9]

Factors Influencing Resilience: The correlation analysis provided valuable insights into the factors influencing resilience. Social support emerged as a significant positive correlate ($r=0.65$, $p=0.01$), emphasizing the crucial role of supportive relationships in enhancing resilience. This finding aligns with existing literature, which suggests that social support acts as a buffer against stress and promotes psychological well-being. On the contrary, discrimination ($r=-0.50$, $p=0.02$) and mental health challenges ($r=-0.55$, $p=0.01$) were negatively correlated with resilience, highlighting the detrimental impact of these factors. Discrimination, in particular, is a pervasive issue that undermines the self-esteem and mental health of transgenders, making it a critical area for intervention.

Employment status also showed a positive correlation ($r=0.45$, $p=0.05$), suggesting that economic stability and meaningful employment contribute to higher resilience levels.^[9]

Qualitative Insights: The qualitative data enriched the quantitative findings by providing deeper insights into the personal experiences and coping strategies of the participants. Themes such as family support, community acceptance, personal coping strategies, and discrimination experiences were prominent. Family support was frequently mentioned, with participants describing their families as their backbone. This highlights the importance of familial acceptance and support in fostering resilience. Community acceptance was another crucial theme, with participants noting gradual improvements in societal attitudes. However, the prevalence of discrimination experiences indicates that significant work remains to be done in creating a fully inclusive environment.

Personal coping strategies, such as meditation and other self-care practices, were commonly cited by participants as vital tools for managing stress and adversity. These strategies reflect the inner strengths and resourcefulness of transgenders in coping with their challenges. The detailed representative quotes provided a human dimension to the statistical data, illustrating the lived experiences of the participants.

Preferred Interventions: The preferred interventions identified by the participants offer practical guidance for policy and program development. Counseling services were highly preferred (70%), indicating a strong need for accessible mental health support. Counseling can provide transgenders with the necessary tools to navigate their challenges and enhance their resilience. Support groups were also favored (60%), highlighting the value of peer support and shared experiences in building community and fostering resilience.

Employment programs were preferred by 50% of the participants, underscoring the importance of economic empowerment in improving the quality of life for transgenders. Providing inclusive employment opportunities and vocational training can help reduce the high unemployment rates observed in the study. Lastly, awareness campaigns were the most preferred intervention (80%), reflecting the participants' desire for broader societal change. Raising awareness and educating the public about transgender issues can help reduce stigma and discrimination, creating a more inclusive society.

Limitations: The study is based on respondents from Jalgaon city in North Maharashtra, India and cannot be generalised to the entire transgender community across India or other regions. The unique social and cultural factors of this region may influence the findings.

The study involved only 80 participants, which is a relatively small sample size. This makes it difficult to generalise the findings to the larger transgender population in India.

The respondents were recruited through an NGO that works with sexual minorities. As a result, the participants may already have access to some form of support, potentially skewing the results. Transgender individuals not associated with such NGOs may have different resilience levels or challenges.

The study specifically focuses on male-to-female transgender persons, excluding other transgender identities such as female-to-male individuals or non-binary persons. This limits the scope of the findings. The study provides a snapshot of resilience at a single point in time. Longitudinal studies would provide better insights into how resilience develops or declines over time among transgender individuals. The study uses the Connor-Davidson Resilience Scale, which may not fully capture the culturally specific resilience factors relevant to the transgender community in India.

Although some qualitative insights are mentioned, the study lacks a deep qualitative exploration of the personal experiences of the transgender individuals that could shed more light on their resilience strategies. These limitations suggest that more comprehensive studies, with broader and more diverse samples, are needed to fully understand the resilience of transgender persons in different Indian contexts.

CONCLUSION

The study's findings underscore the multifaceted nature of resilience among transgenders in the Jalgaon district. While some individuals exhibit strong resilience, a substantial number face significant challenges, including low resilience, discrimination, and unemployment. Social support, employment, and mental health interventions are crucial in enhancing resilience levels. The qualitative insights and preferred interventions provide a comprehensive understanding of the needs and strengths of the transgender community. These findings can inform targeted policies and programs aimed at promoting resilience and well-being among transgenders, ultimately contributing to a more inclusive and supportive society.

By addressing the identified factors and implementing the preferred interventions, stakeholders can create a more enabling environment for transgenders, helping them to thrive and lead fulfilling lives. Future research should continue to explore the dynamic interplay of factors influencing resilience and expand the sample size to include more diverse transgender populations across different regions. The study highlights the potential utility of using the internet for gender-identity research and outreach, especially for transgender individuals who often seek community and support online. Additionally, it suggests that online platforms can be beneficial for mental health interventions for this stigmatized population. Based on the evidence presented, investing in transgender health research

can significantly contribute to reducing gender disparities and advancing gender equity in India. It also endeavours to concentrate on improving gender-sensitive healthcare and evaluating the implementation of legislation to improve standards of care to ensure the nation's commitment to accomplishing the sustainable development target by 2030.

REFERENCES

1. Chavada VK, R P, Kurushev J. Level of Resilience Among Transgenders in Selected Areas of Puducherry, India: An Exploratory Research. *Cureus*. 2021 Sep 30;13(9):e18413.
2. Fuller KA, Riggs DW. Intimate relationship strengths and challenges amongst a sample of transgender people living in the United States. *Sexual and Relationship Therapy*. 2021;36(4):399-412.
3. Gallagher NM, Bodenhausen GV. Gender essentialism and the mental representation of transgender women and men: A multimethod investigation of stereotype content. *Cognition*. 2021;217:104887.
4. Goldin S. Characteristics and needs of the trans* community in Israel with an emphasis on health and welfare issues: A national research summary report. Tel-Aviv District Health Bureau; 2020.
5. Lee H, Tomita KK, Habarth JM, Operario D, Yi H, Choo S, et al. Internalized transphobia and mental health among transgender adults: A nationwide cross-sectional survey in South Korea. *Int J Transgender Health*. 2020;21(2):182-193.
6. Lindley L, Bauerband L, Galupo MP. Using a comprehensive proximal stress model to predict resilience among transgender individuals. *Current Psychology*. 2022;41(3):1234-1245.
7. George Institute for Global Health. Mental health and wellbeing of transgenders in India - Understanding how resilience is built. George Institute for Global Health; 2021.
8. Matsuno E, Israel T. The Transgender Resilience Intervention Model: A community-based intervention to develop transgender resilience. *Sexual and Gender Minority Health*. 2018;15(3):205-215.
9. Kessler RC, Andrews G, Colpe LJ, Hiripi E, Mroczek DK, Normand SL, et al. Short screening scales to monitor population prevalences and trends in non-specific psychological distress. *Psychological Medicine*. 2002;32(6):959-976.