Gender Expression as a Protective Factor from Harassment and Violence

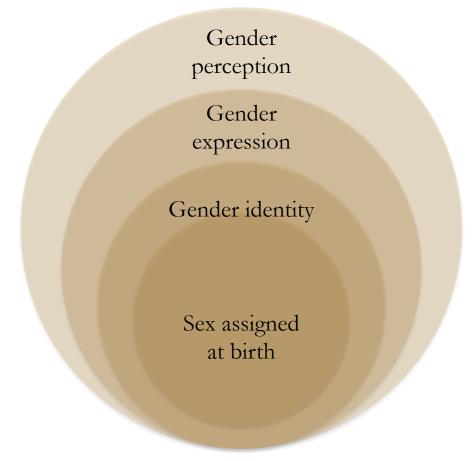
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Purpose:

To assess incongruencies between gender identity and gender expression in the psychiatric patient living in a hostile environment.



Background:

Sex is a classification system based on anatomical characteristics typically known as male, female, or intersex and is assigned at birth. Gender identity is each person's internal sense of their gender (not outwardly visible) which may be man, woman, both, fluid, or none of the above. Gender expression is how an individual publicly expresses themselves; this includes behaviors, clothing, makeup, voice, pronouns, etc. Gender perceptions are the social and cultural perceptions of the gender spectrum which are usually classified as either "masculine" or feminine"; this varies from location to location.¹ A study conducted across 10 states in the US in 2017 found an overall increase in self-reported violence, substance use, suicide risk, and sexual risk in gender-nonconforming high school students.² Additionally, gender non-conforming adults are likely to experience workplace harassment, hate crimes, and the aforementioned health risk behaviors.³

Case Presentation:

A 22-year-old self-identifying woman, assigned male at birth with diagnoses of bipolar II disorder and gender dysphoria presented to the state psychiatric hospital for competency restoration after being found IST-restorable following public indecency and felonious assault charges

History of Present Illness:

- Hypomanic episodes and h/o severe depressive episodes
- Reported non-adherence to lithium or Abilify prior to arrest
- Per mother, began to play with dolls and wear women's clothing around age 10
- Came out as gay at age 15, and started identifying as a woman at age 17
- Noted they began to identify as a gay man during their time in jail as well as in the state psychiatric hospital due to the male predominance; also stated they did not "present" as a woman due to an inability to receive gender-affirming care and thus did not want to identify as a woman yet
- Reported feelings of social anxiety due to large groups of male patients and isolated themself

Past Psychiatric History:

- History of bipolar II disorder and gender dysphoria
- 5 prior psychiatric hospitalizations all due to gender dysphoria
- Past medications included lithium carbonate, Abilify, and Depakote

Past Medical/Surgical History:

• Asthma, otherwise non-contributory

Family History:

• Mother has a h/o anxiety and depression; father has a h/o substance use disorder

Psychosocial History:

- Born in Fayette Co, OH with one older paternal half-sister
- Dropped out of high school in grade 10
- H/o significant cannabis and alcohol use; intermittent tobacco, cocaine, meth, and heroin use
- Patient reports significant emotional and physical abuse from father

Diagnosis:

Vitals:

• T: 98.3, HR: 72, BP: 111/68, RR: 14, O2 sat 98% on RA

Physical Exam:

• Gen: slender individual dressed in jeans and a tie-dye shirt with a buzzcut and winged eyeliner

Mental Status Exam:

• Euthymic affect, normal speech, no flight of ideas, no evidence of responding to internal stimuli **Laboratory Findings:**

• CBC, CMP, HbA1c, TSH and lithium level all within normal limits

Diagnoses: Bipolar II disorder and gender dysphoria

Intervention:

- Continued on lithium carbonate and Abilify for bipolar II disorder
- Hydroxyzine, muscle relaxation and deep breathing exercises for situational anxiety
- Contacted nursing management to transfer patient to a unit with more women

Conclusion:

This case highlights the importance of understanding gender terms as well as situations in which gender non-conforming individuals may express themselves differently due to protection. In this patient with a history of bipolar II disorder, evaluators may have found this incongruence between gender identity and gender expression to be a delusion. However, given the history of abuse experienced by a male perpetrator as well as his feelings of social anxiety around male patients, the incongruence proved to be protective.

Future Directions:

More research to be conducted regarding violence against gender-nonconforming individuals in prison and jail settings

Literature Cited:

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