Unraveling Transphobia: Role of Socio-Emotional Factors

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ABSTRACT

This study investigates the socio-emotional determinants of transphobia among young adults aged 18 to 22, focusing on the roles of peer influence and alexithymia. Despite increasing visibility and legal recognition of transgender individuals, transphobia remains pervasive, particularly within cultures governed by rigid binary gender norms. Drawing from cognitive, discursive, and socio-cultural frameworks, this research explores how emotional regulation deficits and social conformity mechanisms contribute to discriminatory attitudes. A sample of 101 university students participated in the study using standardized tools: the Genderism and Transphobia Scale (Hill & Willoughby, 2005), the Peer Pressure Questionnaire–Revised (Saini & Singh, 2010), and the Perth Alexithymia Questionnaire (Preece et al., 2018). Correlational and regression analyses revealed that peer influence significantly correlates with and predicts transphobic attitudes, while alexithymia, though positively associated, did not emerge as a statistically significant predictor. The combined model explained 7.1% of the variance in transphobia. These findings underscore the critical role of social environments in shaping prejudice and highlight the need for educational interventions that address peer group norms and promote emotional literacy. The study contributes to a deeper understanding of how socio-emotional mechanisms interact to perpetuate stigma against gender-diverse populations and calls for further interdisciplinary research to inform inclusive policies and psychosocial interventions.

Keywords: Transphobia, Alexithymia, Peer Pressure

INTRODUCTION

Defining gender in contemporary society has become an increasingly complex and multifaceted task, given the evolving cultural, social, and psychological understandings of identity and expression. Traditionally, gender has been viewed as a set of socially constructed roles and expectations assigned to individuals based on their perceived biological sex-typically categorized as male, female, or, more recently acknowledged, transgender or non-binary identities (West &Zimmerman, 1987; Butler, 2004). While the terms “sex” and “gender” are often mistakenly used interchangeably, they represent distinct concepts: sex refers to the biological attributes assigned at birth such as chromosomes and reproductive anatomy, whereas gender encompasses a broader sociocultural framework of identity, roles, behaviors, and expectations that individuals internalize and express throughout their lives (Bittner & Goodyear, 2017; WHO, 2021). Individuals whose gender identity aligns with their assigned sex at birth are known as cisgender, whereas those who do not conform to these normative alignments are identified as transgender—a diverse category that includes subgroups represented within the broader LGBTQ+ spectrum, such as non-binary, genderqueer, and gender fluid individuals (APA, 2015; Bettcher, 2007). These identities, though socially marginalized, are gaining increasing visibility and recognition, amid persistent societal resistance and prejudice in various cultural contexts. These acts of exclusion and hostility are manifestations of transphobia—a deeply ingrained set of beliefs and attitudes rooted in binary gender norms and cultural ideologies that reject gender variance as legitimate or natural (Serano, 2007; Bandini &Maggi, 2014. In the Indian context, although progressive legal steps have been taken—such as the decriminalization of Section 377 of the Indian Penal Code and the enactment of the Transgender Persons

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(Protection of Rights) Act, 2019—transgender individuals continue to face widespread discrimination, inadequate representation, and limited access to basic human rights (Michelraj, 2015; Behera, 2022). This paradox between legal recognition and social acceptance underscores the need to explore the psychological and sociocultural underpinnings of transphobia, particularly as they manifest in young adults navigating identity, belonging, and emotional development.

The presence of non-binary individuals in Indian society dates back to the Vedic period, where they were recognized as Tritiya-Prakriti or the third sex, alongside male and female identities (Svestasvatara Upanishad). They held a respected status and were referred to by various names such as napunsaka, shiv-shakthis, hijras, and kothis. Families provided them with essential support, and no Vedic law penalized their orientation. They were seen as sexually neutral and believed to bring prosperity to society (Vasumathi & Geetanjali, 2018). In medieval India, transgender individuals continued to enjoy dignity, often serving in royal courts as advisors, generals, and administrators, contributing significantly to governance and stability (Michelraj, 2015). However, during British colonial rule, their status declined drastically. Initially, some Indian states supported them with land, food, and income, but colonial authorities viewed them with suspicion. By the late 19th century, laws like the Criminal Tribes Act of 1871 criminalized hijras, associating them with public nuisance and deviance. This led to widespread stigma and the denial of their civil rights (Michelraj, 2015). Although the Act was repealed in 1952, deep-rooted stereotypes and legal discrimination persisted. Trans individuals often faced harassment under vague laws related to obscenity, begging, and public nuisance (Section 294 of the Indian Penal Code), reinforcing their marginalization in post-independence India**.**

Transphobia

Transphobia is derived from two components—"Trans," referring to individuals whose gender identity does not align with the societal norms associated with their assigned sex at birth, and "Phobia," denoting an irrational fear or aversion. Together, transphobia encompasses a wide spectrum of negative emotional, cognitive, and behavioral responses—including fear, hatred, prejudice, discrimination, and rejection—toward transgender and gender non-conforming individuals (Serano, 2007; Bandini & Maggi, 2014). It reflects not just personal biases but broader systems of power and social norms that stigmatize any deviation from the binary concept of gender (Bettcher, 2007; Norton & Herek, 2013). Transphobia can manifest in subtle ways, such as exclusion or lack of representation, as well as overt acts of violence, ridicule, and legal discrimination (Flores et al., 2021; Grant et al., 2011).

Theoretical Framework for Transphobia

Cognitive approach: internal dispositions and belief systems

Cognitive approaches to transphobia emerge primarily from the discipline of psychology and posit that the discriminatory behavior is a consequence of internal cognitive structures- attitudes, beliefs and prejudices – harbored by individuals. Early definitions of transphobia, such as the one by Hill & Willoughby (2005), describe it as an emotional disgust toward individuals who do not conform to society's gender expectations. However, scholars have critiqued the term for its implied association with irrational fear and pathology, advocating instead for terms like Trans prejudice and Trans stigma. These terms conceptualize negative attitudes not as illness but as learned belief systems that delegitimize transgender identities in relation to a heteronormative ideal (King et al., 2009).

Discursive Approaches: language, power and the social construction of gender

Discursive approaches, emerging from disciplines such as sociology, gender studies, and philosophy, shift the focus from individual cognition to the construction of meaning in society. These perspectives explore how language, power and social practices generate and reinforce binary gender norms and, by extension, the marginalization of those who transgress them. Three interrelated categories define this approach- i. Production of gender meanings (influenced heavily by Judith Butler's (2002) theory of gender performativity, gender is seen not as an innate characteristic but as an identity produced through repeated social practices. Language plays a central role here- not merely reflecting but actively constituting social reality), ii. Predominance of

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gender norms (this examines how certain gender meanings become dominant through institutional power), iii. Effects of dominant gender meanings (these include "othering" and "unintelligibility". Othering renders trans people as deviant or abnormal, while unintelligibility suggests that trans identities fall outside of what society considers recognizable or real).

The Discursive Psychology Perspective: Bridging the divide

To overcome the limitations of both cognitive individualism and discursive determinism, we adopt a discursive psychology (DP) perspective. DP reconceptualizes attitudes—not as static mental objects—but as discursive practices embedded in interaction and shaped by context.

Key tenets of discursive psychology include:-

- Attitudes as constructed in discourse: The meaning of "trans people" is not fixed but co-constructed in social interaction.
- Common-sense dilemmas: DP recognizes that individuals draw on conflicting cultural repertoires. Someone may endorse equality in one context but express transphobic views in another, reflecting broader ideological tensions rather than personal inconsistency.
- Discourse as ideological: Language not only communicates but enacts power relations.

By analyzing how people construct, reproduce, or resist norms around gender in real-life interactions, DP enables a more dynamic understanding of transphobia as an ongoing, contested process rather than a fixed attribute.

The Socio-cultural Approach

The Socio-functional threat approach, proposed by Cottrell and Neuberg (2005), offers a multidimensional framework for understanding prejudice. This model identifies how specific perceived threats from out groups elicit distinct emotional reactions and motivate behaviors. Applied to transphobia, it provides insight into why different transgender subgroups are perceived differently and targeted with varied forms of discrimination. According to the framework, out groups may pose threats such as contamination (health or moral), obstacles (to social coordination or values), safety risks, or an inability to reciprocate within society. Transgender individuals, particularly trans-women, are often stereotyped as posing threats to traditional values and public safety. These stereotypes are reinforced through political narratives (e.g., bathroom bills) that portray trans-individuals as dangerous or morally corrupt. Trans-men and non-binary individuals disrupt binary gender norms, leading to discomfort and anger in some observers. However, the emotional responses toward these subgroups vary, partly due to lower public familiarity and distinct perceived threats.

Peer Influence

The concept of peer influence originates from sociological and psychological observations that individuals often mirror the behaviors and attitudes of those around them—especially those within their age cohort. This concept gained academic traction in the mid-20th century through the sociological construct of homophily, introduced by Lazarsfeld and Merton (1954), which describes the tendency for individuals to associate with others who are similar in background, interests, or values. As children grow, they begin to form friendships based on shared interests, values, and behaviors, creating environments where peer dynamics become powerful shapers of personal development. Peer influence, therefore, refers to the social pressure or modeling that occurs within peer relationships, leading individuals to adopt behaviors, values, or attitudes prevalent in their social group. Peer influence becomes especially potent during adolescence due to the developmental shifts that increase the salience of peer relationships over familial ones. During this stage, individuals begin to value autonomy and social validation, often seeking acceptance and status within their peer groups. This need for belonging makes them more susceptible to adopting the norms and behaviors of their peers, whether beneficial or harmful.

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According to Laursen and Veenstra (2021), peer influence is defined as "instances where one person affects, or is affected by, one or multiple others who are similar in age." Prinstein and Dodge (2008) describe peer influence as "remarkably potent," noting its effects across a broad array of behaviors including internalizing symptoms (like depression), externalizing behaviors (like aggression), academic performance, substance use, and even physical health habits. Notably, these influences are not merely anecdotal; they are consistently observed in longitudinal and experimental research designs.

Theoretical framework for Peer Influence

Multiple theoretical models have been developed to explain how and why peer influence occurs. Each framework offers a unique lens for understanding the mechanisms behind peer effects, especially during adolescence.

Social Learning Theory (Bandura, 1971)

This theory posits that individuals learn by observing and imitating others, especially when those behaviors are reinforced or rewarded. In peer groups, behaviors that receive approval—such as being rebellious, athletic, or academically successful—are more likely to be adopted by observers. Adolescents often model the behaviors of peers who hold higher social status; as such individuals are seen as aspirational figures. Social reinforcement, such as praise, acceptance, or increased popularity, strengthens the likelihood of imitation. This theory helps explain behaviors ranging from substance use to volunteering.

Social Identity and Self-Categorization Theories

These theories argue that people derive their self-concept from their group affiliations. During adolescence, individuals are especially sensitive to the norms and expectations of their peer groups, and they may change their behaviors to align with group standards in order to maintain a positive self-image and sense of belonging. Abrams and Hogg (1990) suggest that conformity to peer behavior provides social validation and reinforces group identity. This internal motivation to "fit in" explains why adolescents may adopt even risky or deviant behaviors if such actions are valued within their peer context.

Influence-Compatibility Model (Laursen & Veenstra, 2021)

This model integrates developmental and social compatibility perspectives to explain why peer influence is particularly potent during adolescence. It proposes that the function of peer influence is to increase similarity within peer groups, promoting cohesion and reducing conflict. Adolescents, aware of the social risks of nonconformity—such as exclusion or ridicule—are motivated to align with their peers to maintain harmony and avoid being marginalized. This process is especially critical in early to mid-adolescence, a period marked by identity exploration, school transitions, and heightened emotional sensitivity to peer feedback.

Selection and Socialization Framework (Kandel, 1978)

Kandel's model distinguishes between selection effects—where individuals choose peers with similar behaviors or interests—and socialization effects—where individuals become more like their peers over time due to interaction. This dual-process model has been validated in studies on everything from academic performance to substance use. Selection and socialization together help explain the emergence of homophily in peer networks, where individuals in the same group tend to behave similarly due to both initial compatibility and subsequent influence.

Developmental Neuroscience Perspectives

Recent studies in developmental neuroscience have found that adolescents experience heightened sensitivity to social rewards and punishments due to the rapid development of brain regions involved in emotion regulation and social processing. For example, the limbic system, which processes reward and social stimuli, matures faster than the prefrontal cortex, which governs decision-making and impulse control (Chein et al., 2011). This

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imbalance makes adolescents more responsive to peer approval and more prone to risk-taking in social contexts. These findings support the idea that peer presence can dramatically alter adolescent decision-making.

Ecological Systems Theory (Bronfenbrenner,1979)

This theory posits that development is influenced by multiple levels of environmental systems, from immediate family and peers (microsystem) to broader cultural values (macrosystem). Peer influence is understood within this model as a proximal process—one of the key drivers of development within an individual's immediate environment. Changes in school structure, such as transitions to middle school, often reduce adult supervision and increase peer interactions, thereby magnifying the influence of peers on behavior.

To conclude, Peer influence is a powerful, multifaceted force that plays a central role in shaping the developmental trajectories of children and adolescents. Rooted in ancient philosophical ideas and developed through decades of empirical research, it encompasses both the selection of peers and the dynamic process of behavioral adaptation.

Alexithymia

The study of human emotion has long fascinated researchers across psychology, neuroscience, psychiatry, and philosophy. Emotions not only inform how individuals perceive and interact with the world but also guide adaptive responses and decision-making processes in complex social environments. A significant body of research has now focused on a specific emotional processing deficit termed "alexithymia," which refers to an individual’s difficulty in identifying, understanding, and verbally expressing emotions. The term "alexithymia" is derived from the Greek roots: “a” (lack), “lexis” (word), and “thymos” (emotion), meaning "no words for emotions." This term was first introduced by psychiatrist Peter Sifneos in the early 1970s, who observed that many psychosomatic patients exhibited impoverished emotional awareness and had difficulty expressing their feelings verbally (Sifneos, 1973). These patients also demonstrated an externally-oriented thinking style, often focusing on factual or material aspects of life while neglecting inner experiences. Nemiah, Freyberger, and Sifneos (1976) elaborated on the original concept and outlined four core features of alexithymia: (1) difficulty in identifying feelings and distinguishing them from bodily sensations; (2) difficulty describing feelings to others; (3) limited imaginative processes, evidenced by a scarcity of fantasies; and (4) an externally-oriented cognitive style that avoids introspection. These defining characteristics laid the foundation for the development of reliable psychometric measures, most notably the Toronto Alexithymia Scale (TAS-20) developed by Bagby, Parker, and Taylor (1994), which identifies three primary factors: Difficulty Identifying Feelings (DIF), Difficulty Describing Feelings (DDF), and Externally-Oriented Thinking (EOT).

Theoretical framework for Alexithymia

Several theoretical models have been proposed to explain the development, maintenance, and manifestations of alexithymia. These include psychodynamic theories, trait and developmental models, emotion regulation perspectives, neurobiological frameworks, and computational neuroscience models.

Psychodynamic and Developmental Theories

The psychodynamic perspective posits that alexithymia may arise from early childhood trauma or emotional neglect, leading to the repression or avoidance of emotional experiences (Krystal, 1988). Emotional development is viewed as a product of secure attachment and emotional mirroring by caregivers, and disruptions in these processes may hinder the child's ability to identify and verbalize emotions. Longitudinal studies have demonstrated that adverse childhood experiences, including abuse, neglect, and family dysfunction, are associated with elevated alexithymia in adulthood (Aust et al., 2013; Bermond et al., 2008).

Trait and Dimensional Perspective

Modern psychological theories view alexithymia as a stable personality trait rather than a transient state. This conceptualization allows for the study of alexithymia in both clinical and non-clinical populations. Trait alexithymia is considered to have moderate heritability and stable expression over time, though environmental

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factors such as trauma and socialization play significant roles in its development. It shares conceptual overlap with other personality traits such as neuroticism and low openness to experience (Taylor et al., 1997).

Emotion Regulation Deficit Model

Another perspective views alexithymia as a core deficit in emotional regulation—the process by which individuals monitor, evaluate, and modify their emotional reactions. Preece et al. (2017) conceptualized alexithymia as a breakdown in two key stages of emotion regulation: (1) attention to emotional stimuli and (2) appraisal of emotional meaning. Individuals high in alexithymia often fail to effectively engage with or label their emotions, which impedes adaptive coping and increases vulnerability to mood disorders, addictive behaviors, and interpersonal conflicts (Barrett et al., 2001; Swart et al., 2009).

Neurobiological Models

Neuroscientific research has greatly enhanced our understanding of alexithymia by identifying the neural circuits implicated in emotional processing and awareness. Structural and functional imaging studies indicate that alexithymia is associated with hypoactivity and volume reductions in the anterior insula (aINS), anterior cingulate cortex (ACC), and prefrontal cortex (PFC)—regions crucial for interoception, emotional awareness, and cognitive regulation (Bird et al., 2010; van der Velde et al., 2013; Hogeveen et al., 2019).

Computational Neuroscience Models

More recently, computational models have offered mechanistic explanations of alexithymia through the lens of neurocomputational processes. Smith et al. (2019) proposed that alexithymia may result from impaired generative models of emotional awareness, including biased prior expectations, poor emotion concept acquisition, and reduced emotional metacognition. These models integrate Bayesian frameworks with emotion processing, positing that the brain's failure to accurately infer internal emotional states underlies the cognitive-affective disruptions seen in alexithymia.

In conclusion, alexithymia is a multifaceted construct with profound theoretical and clinical significance. As research continues to evolve, particularly with advancements in neuroimaging and computational modeling, a more integrated and nuanced understanding of alexithymia is emerging—one that has the potential to inform clinical interventions, diagnostic assessments, and therapeutic approaches across a wide range of psychiatric and neurological domains.

REVIEW OF LITERATURE

The present study seeks to systematically examine existing scholarly work to contextualize the relationship between peer influence, alexithymia, and transphobia, thereby providing a foundation for the subsequent review of literature.

Transphobia

The study by Cabrera et al. (2021) investigates the underlying psychological and social factors associated with transphobia and gender bashing among adolescents and emerging adults. The authors examine variables such as social reputation, family socialization styles, Big Five personality traits, and aggressiveness, using a sample of 479 adolescents. Their findings show that while transphobia is largely associated with affective and personality-related variables—especially low agreeableness and openness to experience—gender bashing is more socially influenced, especially by the desire to gain peer approval. The study also notes that males report significantly higher levels of transphobia and gender bashing than females.

Costa and Davies (2012) explore Portuguese adolescents' attitudes toward transgender individuals, lesbians, and gay men, and how these attitudes correlate with gender role beliefs. With a sample of 188 high school students, the study reveals that negative attitudes toward transgender individuals are significantly associated with homophobia and traditional gender roles. Males were found to exhibit more negative attitudes, particularly toward gay men, compared to females. Adolescents who endorse traditional gender roles tend to

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hold more prejudicial views against sexual minorities. The findings emphasize the intersection of gender identity, gender expression, and sexual orientation in shaping adolescents' perceptions and prejudices, calling for inclusive education and greater awareness to address these issues early in development.

The research conducted by Shafiee-Kandjani et al. (2025) in Iran focuses on the relationship between personality traits and transphobia among university students. Utilizing the Big Five personality model and the Genderism and Transphobia Scale, the study analyzes data from 418 medical and non-medical students. The results indicate that agreeableness and openness to experience are negatively associated with transphobic attitudes, while neuroticism shows a positive association. Conscientiousness and extraversion, however, do not significantly predict transphobia. The study suggests that individual personality traits can influence discriminatory attitudes, especially among future healthcare professionals.

Uluboy and Husnu (2022) investigate transphobia, homophobia, and gender ideology among Turkish-speaking young adults in Northern Cyprus. The study, which includes 148 participants, examines the role of gender, intergroup contact, ambivalent sexism, and social dominance orientation as predictors of transphobic attitudes. The results demonstrate that hostile sexism and homophobia are strong predictors of transphobia, while intergroup contact with transgender individuals significantly reduces prejudicial attitudes. Males reported more negative attitudes than females, and the study highlights how traditional gender roles and anxiety about masculinity may underlie transphobia among men.

Esteban Mora et al. (2022) focus on the relationships between attitudes toward transsexuality, empathy, and bullying among Spanish university students. With a sample of 247 students, the study finds an inverse relationship between empathy and transphobia, suggesting that higher empathy levels are associated with more positive attitudes toward transgender individuals. The study also establishes that negative attitudes and gender-based bullying are interconnected and stem from societal labeling and rigid stereotypes about gender identity. The authors stress the importance of early educational interventions that foster empathy and inclusiveness to prevent discrimination and bullying.

Peer Influence

The study by Hjerm, Eger, and Danell (2018) investigates how peer attitudes influence the development of prejudice during adolescence using a five-wave longitudinal panel from Sweden. The authors argue that adolescence is a crucial period for attitudinal formation, with peer groups playing a significant role. Through mixed multilevel modeling, the study finds that adolescents' prejudice levels are shaped over time by the average attitudes of their nominated peers. These findings support the relevance of group norm theory and social identity development theory, suggesting that peer networks are more than just sources of interpersonal interaction; they act as influential environments that facilitate or mitigate prejudice through shared norms and social positioning.

Elizabeth Paluck’s (2011) field experiment examines how peer-led interventions can reduce prejudice within high school social networks. The intervention trained selected students (Peer Trainers) to model and promote anti-prejudice behavior over five months, after which their social networks were surveyed for changes. The study finds that treatment Peer Trainers were more likely to be seen as confronting prejudice, and their behavior—though not consistently their attitudes—spread to close friends and acquaintances, demonstrating a measurable network effect. Peer Trainers influenced behavior more than attitudes, and particularly among those who shared a close relationship.

The systematic review conducted by Read, Sargeant, and Wright (2021) synthesizes findings from 15 studies to identify the beliefs influencing children and young people’s (CYP) attitudes toward the transgender population. The review highlights three main belief systems—heteronormativity, conservatism, and gender essentialism—as significant contributors to transprejudice among youth. It also reveals consistent gender differences, with males typically exhibiting higher levels of transprejudice than females. The authors emphasize that many young people still hold binary and essentialist views of gender, which are at odds with the lived experiences of transgender individuals. The studies reviewed also suggest that personal contact with transgender individuals and inclusive education can reduce prejudice. However, mechanisms behind these

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belief-attitude links remain largely theoretical, indicating a need for further qualitative exploration. The authors advocate for interventions that challenge rigid gender norms and promote inclusivity, particularly in educational settings where transprejudice is common.

Ugwu, Ramadie, Ajele, and Idemudia (2024) explored the complex interplay between childhood adversity, peer influence, personality traits, and bullying perpetration among South African adolescents. Using structural equation modeling on a sample of 769 high school students, the study demonstrated that childhood adversity was a significant predictor of bullying perpetration, both directly and indirectly via peer influence.

Doehne, Grundherr, and Schäfer (2018) conducted two studies that examined how peer influence affects bullying behavior and how moral competence can serve as a buffer. Using a cross-lagged panel design, they found that adolescents with low moral competence were more susceptible to peer influence and likely to imitate pro-bullying peers, while those with high moral competence resisted such influence. This highlights moral competence as an "autonomy-enhancing" trait that can shield adolescents from conforming to harmful peer norms. The study is vital in understanding the mechanisms through which peer environments shape bullying behavior and offers insights into preventive strategies focused on moral education.

Alexithymia

Lyvers et al. (2020) explore the intricate relationship between self-compassion, alexithymia, empathy, and negative mood among young Australian adults. The study reveals that higher levels of alexithymia—a personality trait characterized by difficulties in identifying and articulating emotions—are negatively correlated with self-compassion and empathy, and positively linked to depression, anxiety, and stress. Importantly, self-judgment, one subcomponent of self-compassion, was a significant predictor of emotional distress. The study suggests that fostering self-compassion could serve as a buffer against emotional and psychological challenges in individuals with high alexithymia. The authors also note that self-compassion might be more influential than mindfulness in promoting mental well-being, making it a potentially powerful target in therapeutic interventions. The findings highlight the interdependence of emotional awareness, self-regulation, and compassion in promoting resilience and psychological health.

Önal's (2023) dissertation investigates how empathy and alexithymia impact the expression of subtle and blatant prejudices among young German men. The study finds a significant negative correlation between empathy and both types of prejudice, with the effect of empathy on reducing prejudice diminishing at higher levels of alexithymia. The work situates these findings within a psychodynamic framework, proposing that emotional awareness and interpersonal sensitivity are foundational to reducing prejudice. It calls for further research into the underlying psychological mechanisms and encourages the inclusion of more diverse populations to better understand how emotional traits influence prejudice expression across different social contexts.

Frisch (2013) presents a novel approach to prejudice reduction by examining how training in emotional recognition—both of self and others—impacts prejudice and discrimination. In an experimental design, participants underwent various training programs and were then observed for behavioral indicators of discrimination. The results indicate that while emotional recognition training did not reduce self-reported prejudice, it significantly decreased discriminatory behaviors, especially in participants with low alexithymia. The study underscores the importance of emotional intelligence, particularly the ability to recognize emotions, as a tool for behavior regulation in intergroup contexts.

Birtel et al. (2023) conduct a series of three studies to explore the role of alexithymia in shaping intergroup prejudice and the mediating effect of empathy. The research spans diverse groups—LGBT+ individuals, Asian British people, and immigrants—across the UK and Italy. The authors find that the externally oriented thinking component of alexithymia (EOT), which reflects avoidance of emotional processing, is consistently associated with lower dispositional and intergroup empathy, and consequently, higher levels of prejudice. Both cognitive (perspective taking) and affective (empathic concern) empathy were found to mediate the alexithymia-prejudice link, suggesting that deficits in emotional processing hinder empathic responses and foster negative intergroup attitudes.

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Guzzo et al. (2013) examined the interplay between bullying victimization, post-traumatic stress symptoms, and alexithymia among adolescents aged 16–17. The study found that experiences of being bullied were significantly associated with PTSD symptoms, and this relationship was mediated by alexithymia. Adolescents with difficulty identifying and describing feelings, and those with externally-oriented thinking, were more likely to manifest PTSD symptoms following victimization.

Levantini, Camodeca, and Iannello (2023) investigated the joint effects of bullying involvement and alexithymia on somatic complaints in preadolescents. Their findings revealed that both bullying perpetration and victimization were associated with increased somatic complaints, mediated indirectly by alexithymia. Notably, the direct relationship between victimization and somatic symptoms was significant, while outsider behavior was not significantly linked.

Cerqueira and Almeida (2023) explored the relationship between adverse childhood experiences (ACEs), alexithymia, and empathy in adulthood. Their results showed a significant positive correlation between ACEs—especially emotional abuse and neglect—and alexithymic traits, including difficulty identifying and expressing emotions. The study confirmed that ACEs are predictive of higher alexithymia scores and lower empathic concern.

Collectively, these studies outline a critical need to address the research gaps in the variables under study. Limited research has been documented in the past to study peer influences and alexithymia as predictors of Transphobia. The chapter also reviewed that while Transphobia and Peer influences are correlated in some studies, there are less or no studies done on Transphobia and Alexithymia. Therefore, the current study aims to fill this research gap.

Objectives

1. To investigate Peer Influence and Alexithymia in shaping Transphobic attitudes
2. To evaluate the predictive power of Alexithymia and Peer Influences to explain Transphobia

Hypotheses

1. Alexithymia will correlate positively with Transphobia
2. Peer Pressure will correlate positively with Transphobia
3. Alexithymia and Peer pressure will independently and collectively predict Transphobia

METHOD

Sample

The total sample of 101 participants (29 males and 72 females) was collected from Punjabi University, Patiala. All the participants were aged between 18-22 years of age. T

Sampling technique

Purposive sampling

Description of the Tools

For the purpose of the current study the data was collected using self-administered questionnaires and inventories.

The Genderism and Transphobia Scale (Hill and Willoughby, 2005)

It is used to measure the attitudes and behaviors of binary individuals towards the non-binary individuals i.e. the Transgenders. The scale contains 32 items with a 7 point Likert scale, ranging from ‘7’ indicating ‘Strongly Disagree’ to ‘1’ indicating ‘Strongly Agree’. The scores can range from 32 to 224. The internal consistency (Coefficient Alpha) for all the 32 items is quite high (0.94) (Hill & Willoughby, 2005).

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The Peer Pressure Questionnaire- Revised (Saini & Singh, 2010)

This scale is used to quantify the influence of his/her peers in their day-to-day lives. The questionnaire contains 29 items with a 5 point Likert Scale, '1' indicating 'Strongly Agree' and '5' indicating 'Strongly Disagree'. Scores >72 means higher levels of peer influence, scores between 56-72 means moderate levels of peer influence and score 55 indicates low levels of peer influence on an individual. The scores can range from 29 to 145.

The Perth Alexithymia Questionnaire (Preece et.al.2018)

It is a 24 item self-report administration of Alexithymia. It has a 7 point Likert scale with '1' indicating 'Strongly Disagree' and '7' indicating 'Strongly Agree'. The internal consistency (Cronbach Alpha) of the total scale is 0.96. Higher scores signify higher levels of alexithymia. The range of scores can be 24 to 168.

Design

For the ongoing study, quantitative research design has been employed. Regression analysis and Correlational design is used in order to understand the objectives.

Procedure

For the current study, age group of 18-22 years of age was taken to understand the role of socio-emotional factors in understanding transphobia. The sample was selected using the convenience sampling, a type of non-probability sampling. For this, informed consent was taken from the participants. Their demographic details such as name, age, gender, educational qualification, family type, socio-economic status, parent's education and occupation were taken. Instructions regarding the three tests were given and doubts regarding any specific word or phrase were cleared. After the data collection, the scores of all the participants were analysed using the SPSS 28 (Statistical package for social sciences Version 28).

RESULTS

In the current investigation, the findings of the statistical analyses conducted to understand the role of socio-emotional factors on transphobia has been presented. The result is presented in three sections: descriptive statistics, correlation analysis and regression analysis.

Descriptive Statistics

The means and standard deviations of the three variables: Transphobia, Peer Influence and Alexithymia have been organized.

Summary table 01 showing the N (101), Mean, Standard Deviation of the scores on Transphobia, Peer influence and Alexithymia

	Mean	Std.Deviation	N
Transphobia	104.0891	29.65303	101
Peer Influence	65.0495	13.91429	101
Alexithymia	98.6832	23.44651	101

The mean value of Transphobia was 104.089 (SD=29.65), while the mean Peer Influence score was 65.91 (SD=13.91, and the mean Alexithymia score was 98.68 (SD=23.45).

Correlation Analysis

Pearson's correlation coefficients have been used to explore the relationships among Transphobia, Peer Influence and Alexithymia.

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SUMMARY TABLE 02 showing the correlations among the variables Transphobia, Peer influence and Alexithymia and the *p-values (one-tailed)*

Variable	TP	PI	AT
TP	1.000	.263	.126
PI	.263	1.000	.359
AT	.126	.359	1.000

***TP**- Transphobia; **PI**- Peer Influence; **AT**-Alexithymia*

p-values (one-tailed)

Variable	TP	PI	AT
TP	-	.004	.104
PI	.004	-	.000
AT	.104	.000	-

There was a statistically significant positive correlation between Transphobia and Peer Influence (r = 0.263, p = 0.004), indicating that higher levels of Peer Influence are associated with greater Transphobia. A significant positive correlation was also found between Peer influence and Alexithymia (r = 0.359. p <0.001). However, the correlation between Transphobia and Alexithymia was not statistically significant (r = 0.126, p = 0.104).

Regression Analysis

Multiple regression analysis was conducted to determine whether Peer Influences and Alexithymia predict Transphobia.

SUMMARY TABLE 03 showing the Regression model summary for the predictors – Peer influence and Alexithymia

Model	R	R^2	Adj. R^2	SE of estimate	R^2	F change	df1	Df2	Sig. F change
1	.266	.071	.052	28.88	.071	3.718	2	98	.028

Note: SE = Standard Error; Predictors: PI, AT

The values of R and R^2 were 0.266 and 0.071 respectively. The regression model explains 7.1% of variance.

Regression Coefficients

SUMMARY TABLE 04 showing the Coefficients of Regression of variables Transphobia, Peer influence and alexithymia

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		.000
1. (Constant)	64.855	15.867		4.087	.018
Peer Influence	.534	.222	.250	2.399	.729
Alexithymia	.046	.132	.036	.347	.729

a. Dependent Variable: Transphobia

Peer Influence was a significant predictor of Transphobia (B = 0.534, p = 0.018), suggesting that as influence of the peers increases, the level of Transphobia also increases. In contrast, Alexithymia was not a significant predictor (B = 0.046, p = 0.729), indicating that emotional expression and awareness difficulties do not significantly contribute to Transphobia in the current study.

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DISCUSSION

The findings of the study were evaluated in alignment with the three hypotheses. First, the hypothesis that alexithymia will correlate positively with transphobia was not supported significantly, as the correlation between alexithymia and transphobia was positive but statistically insignificant ($r = .126$, $p = .104$). This non-significant result suggests that while emotional processing difficulties may play a role in prejudiced attitudes, they might not be the most salient contributors within this sample. Although existing studies such as those by Lyvers et al. (2020) and Birtel et al. (2023) have established a link between emotional deficits and prejudicial attitudes, this study did not find a strong correlation, possibly due to sample-specific emotional literacy or lack of variance in emotional awareness within the group. Nonetheless, theoretical perspectives suggest that alexithymia impairs emotional awareness and regulation, which can reduce empathic concern for marginalized groups. The emotion regulation deficit model (Preece et al., 2017) and neurobiological findings (Bird et al., 2010) indicate that alexithymia involves hypoactivity in brain regions such as the anterior insula and prefrontal cortex, crucial for recognizing and verbalizing emotional states. Psychodynamic theory, particularly from Krystal (1988), further explains alexithymia as a consequence of unresolved early developmental trauma and emotional neglect, which disrupts the capacity for emotional introspection. Developmental models highlight the role of secure attachment and parental mirroring in building emotional competence, suggesting that disruptions in these processes can manifest as emotional detachment and prejudice in later life. Although the effect was not statistically significant here, the theoretical underpinnings remain robust: emotional deficits may limit an individual's capacity to resonate with the lived experiences of gender-diverse individuals, thereby indirectly sustaining transphobic attitudes.

The second hypothesis, peer pressure will correlate positively with transphobia, was supported by the data ($r = .263$, $p = .004$), suggesting that peer influence plays a significant role in shaping transphobic attitudes. This supports the Social Learning Theory (Bandura, 1971), which posits that behaviors and attitudes are modeled based on reinforcement within social environments. Additionally, the Social Identity Theory (Abrams & Hogg, 1990) and Ecological Systems Theory (Bronfenbrenner, 1979) underscore how peer group norms and immediate social contexts act as key drivers of conformity and prejudice. The Influence-Compatibility Model (Laursen & Veenstra, 2021) provides further nuance by suggesting that adolescents conform to peer norms to maintain social harmony and reduce conflict. These findings align with Hjerm et al. (2018) and Paluck (2011), where peer networks not only shape, but also sustain, prejudicial norms. From a discursive psychology (DP) lens, peer conversations and collective language use create and normalize discriminatory discourse, positioning trans-individuals as deviant or "other." Therefore, peer dynamics serve not only as transmitters of behavior but also as co-constructors of ideological narratives about gender conformity.

The third hypothesis, alexithymia and peer pressure will independently and collectively predict transphobia, received partial support. The regression analysis showed that the overall model was statistically significant ($F = 3.718$, $p = .028$), but only peer influence emerged as a significant predictor ($\beta = .250$, $p = .018$), while alexithymia did not ($\beta = .036$, $p = .729$). The combined R^2 value of 0.071 indicates that the model explains only 7.1% of the variance in transphobia, suggesting that other unmeasured variables may also contribute meaningfully. Integrating the socio-functional threat approach (Cottrell & Neuberg, 2005), it becomes clear that perceived social threats—such as the disruption of traditional gender norms—evoke negative emotional responses like disgust or fear, particularly in environments dominated by conservative peer ideologies. This could explain why peer influence, more than internal emotional deficits, significantly drives discriminatory behavior. Trans-individuals may be viewed as symbolic threats to group cohesion, and peer norms function as mechanisms for reinforcing perceived in-group superiority. From a discursive approach, the study aligns with Judith Butler's (2004) theory of gender performativity, which argues that gender is constructed through repeated social performances, and deviations from these performances are marginalized through linguistic and behavioral means.

CONCLUSION

This study highlights the critical role of peer influence in shaping transphobic attitudes and underlines the potential but complex relationship of alexithymia with prejudice. The findings offer valuable insights for educators, psychologists, and policymakers seeking to foster inclusive, emotionally aware environments for

gender-diverse individuals. Though limited in scope, the research lays the groundwork for future interdisciplinary inquiry and intervention development aimed at dismantling transphobia through both social and emotional pathways.

IMPLICATIONS OF THE STUDY

The findings highlight the important role of peer norms in shaping attitudes, suggesting that interventions focused on group norms and positive peer modeling could be effective in reducing transphobia among youth. Although alexithymia did not show statistical significance in the present study, existing literature continues to support its association with empathy and prejudice, indicating that emotional literacy remains a valuable area for educational intervention. Therefore, educational programs should incorporate peer-led discussions, empathy training, and emotional regulation skill-building to promote more inclusive and understanding attitudes.

LIMITATIONS

The study had certain limitations that should be acknowledged. First, the use of self-report questionnaires may have led to socially desirable responses, potentially affecting the accuracy of the data. Additionally, the higher proportion of female participants in the sample may have influenced or skewed the findings. Furthermore, the model explained only a modest portion of the variance, suggesting that other important variables influencing the outcomes were not included in the study.

SUGGESTIONS FOR FUTURE RESEARCH

For the future research, qualitative methods such as interviews must be included to capture deeper emotional and cultural underpinnings. Other variables such as authoritarianism, cultural values, intergroup contact**,** and media influence must be examined. The future studies must expand to diverse geographic and socio-economic populations to enhance representativeness.

REFERENCES

1. Abrams, D., & Hogg, M. A. (1990). Social identification, self-categorization and social influence. *European review of social psychology*, 1(1), 195-228.
2. Allport, G. W. (1954). The nature of prejudice. Addison-Wesley.
3. American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. https://www.apa.org/practice/guidelines/transgender.pdf
4. Ansara, Y. G., & Hegarty, P. (2014). Methodologies of misgendering: Recommendations for reducing cisgenderism in psychological research. *Feminism & Psychology*, 24(2), 259–270. https://doi.org/10.1177/0959353514526217
5. Aust, S., Härtwig, E. A., Heuser, I., & Bajbouj, M. (2013). The role of early emotional neglect in alexithymia. *Psychological trauma: theory, research, practice, and policy*, 5(3), 225.
6. Bagby, R. M., Parker, J. D., & Taylor, G. J. (1994). The Alexithymia Scale: Development of a new self-report method. *Psychiatry Research*, 43(2), 85–102. https://doi.org/10.1016/0165-1781(94)90005-1.
7. Bandini, E., & Maggi, M. (2014). Transphobia. In G. Corona, E. A. Jannini, & M. Maggi (Eds.), Emotional, physical and sexual abuse: Impact in children and social minorities (pp. 49–59). Springer International Publishing/Springer Nature. https://doi.org/10.1007/978-3-319-06787-2_4
8. Bandura, A. (1971). Vicarious and self-reinforcement processes. *The nature of reinforcement*, 228278
9. Barrett, L. F., Lane, R. D., Sechrest, L., & Schwartz, G. E. (2001). Clustering of emotional experience: A self-report study of alexithymia. *Journal of Personality and Social Psychology*, 81(3), 1130–1141. https://doi.org/10.1037/0022-3514.81.3.1130.
10. Behera, M. C. (2022). Transgender in India: Inclusion and social justice. Routledge India.
11. Bermond, B., Sijtsma, K., van der Horst, F., & Kooiman, C. (2008). The construction and validation of the Bermond-Vorst Alexithymia Questionnaire. *Personality and Individual Differences*, 44(5), 1011–1022. https://doi.org/10.1016/j.paid.2007.11.007.

12. Bettcher, T. M. (2007). Evil deceivers and make-believers: On transphobic violence and the politics of illusion. *Hypatia*, 22(3), 43–65. https://doi.org/10.1111/j.1527-2001.2007.tb01090.x
13. Bird, G., Leighton, J., Press, C., & Heyes, C. (2010). The role of alexithymia in empathy: A neuroimaging study of the neural bases of empathy. *Cerebral Cortex*, 20(5), 1305–1313. https://doi.org/10.1093/cercor/bhp189
14. Birtel, M. D., Di Bernardo, G. A., Hobson, H., Collins-Quirk, A., & Vezzali, L. (2023). Avoiding affect in intergroup relations: The roles of dispositional and intergroup empathy in the relationship between alexithymia and prejudice. *Journal of Applied Social Psychology*, 53(1), 1–16. https://doi.org/10.1111/jasp.12942
15. Butler, J. (2002). Gender trouble (2nd ed.). Routledge.
16. Butler, J. (2004). Undoing gender. Routledge.
17. Bronfenbrenner, U. (1979). The ecology of human development: Experiments by nature and design. Harvard university press.
18. Cabrera, C., Dueñas, J.-M., Cosi, S., & Morales-Vives, F. (2022). Transphobia and Gender Bashing in Adolescence and Emerging Adulthood: The Role of Individual Differences and Psychosocial Variables. *Psychological Reports*, 125(3), 1648-1666. https://doi.org/10.1177/00332941211002130
19. Cerqueira, A., & Almeida, T. C. (2023). Adverse childhood experiences: relationship with empathy and alexithymia. *Journal of Child & Adolescent Trauma*, 16(3), 559-568.
20. Chein, J., Albert, D., O'Brien, L., Uckert, K., & Steinberg, L. (2011). Peers increase adolescent risk taking by enhancing activity in the brain's reward circuitry.
21. Costa, P. A., & Davies, M. (2012). Portuguese Adolescents' Attitudes Toward Sexual Minorities: Transphobia, Homophobia, and Gender Role Beliefs. *Journal of Homosexuality*, 59(10), 1424–1442. https://doi.org/10.1080/00918369.2012.724944
22. Cottrell, C. A., & Neuberg, S. L. (2005). Different emotional reactions to different groups: A sociofunctional threat-based approach to "prejudice." *Journal of Personality and Social Psychology*, 88(5), 770–789. https://doi.org/10.1037/0022-3514.88.5.770
23. Doehne, M., von Grundherr, M., & Schäfer, M. (2018). Peer influence in bullying: The autonomy-enhancing effect of moral competence. *Aggressive behavior*, 44(6), 591-600.
24. Esteban Mora, J., Morales Rodríguez, F. M., & Martínez Ramón, J. P. (2022). Attitudes toward Transsexuality, Empathy, and Bullying in Young Population. *International Journal of Environmental Research and Public Health*, 19(7), 3849. https://doi.org/10.3390/ijerph19073849
25. Flores, A. R., Herman, J. L., & Mallory, C. (2021). The impact of transphobia on mental health outcomes among transgender individuals. *The Williams Institute*. https://williamsinstitute.law.ucla.edu/publications/
26. Frisch, L. (2013). The impact of emotional recognition on prejudice and discrimination (Honors thesis). University of Michigan, Ann Arbor
27. Giletta, M., Choukas-Bradley, S., Maes, M., Linthicum, K. P., Card, N. A., & Prinstein, M. J. (2021). A meta-analysis of longitudinal peer influence effects in childhood and adolescence. *Psychological Bulletin*, 147(7), 719.
28. Grant, J. M., Mottet, L. A., Tanis, J., Herman, J. L., Harrison, J., & Keisling, M. (2011). Injustice at every turn: A report of the National Transgender Discrimination Survey. National Center for Transgender Equality and the National Gay and Lesbian Task Force. https://transequality.org/sites/default/files/docs/resources/NTDS_Report.pdf
29. Guzzo, G., Pace, U., Lo Cascio, V., Craparo, G., & Schimmenti, A. (2014). Bullying victimization, post-traumatic symptoms, and the mediating role of alexithymia. *Child Indicators Research*, 7, 141-153.
30. Hendricks, M. L., & Testa, R. J. (2012). A conceptual framework for clinical work with transgender and gender nonconforming clients: An adaptation of the Minority Stress Model. *Professional Psychology: Research and Practice*, 43(5), 460–467. https://doi.org/10.1037/a0029597
31. Herek, G. M. (2007). Confronting sexual stigma and prejudice: Theory and practice. *Journal of Social Issues*, 63(4), 905–925. https://doi.org/10.1111/j.1540-4560.2007.00544.x.
32. Hill, M. S. (2002). The Genderism and Transphobia Scale: Development and validation of a new scale to measure gender and transgender prejudice. *Sex Roles*, 46(11-12), 453-470.

33. Hjerm, M., Eger, M. A., & Danell, R. (2018). Peer attitudes and the development of prejudice in adolescence. *Socius: Sociological Research for a Dynamic World*, 4, 4111. https://doi.org/10.1177/2378023118774111
34. Hogeveen, J., Grafman, J., & Kable, J. W. (2019). Acquired alexithymia following damage to the anterior insula. *Neuropsychologia*, 129, 1–8. https://doi.org/10.1016/j.neuropsychologia.2019.03.010
35. Kandel, D. B. (1978). Homophily, selection, and socialization in adolescent friendships. *American Journal of Sociology*, 84(2), 427–436. https://doi.org/10.1086/226792
36. King, E. B., Reilly, C., & Hebl, M. R. (2009). The best of times, the worst of times: Exploring dual perspectives of "coming out" in the workplace. *Group & Organization Management*, 34(5), 566–593. https://doi.org/10.1177/1059601109340382
37. Krystal, H. (1988). Alexithymia and the affective dimensions of the self. *Psychiatric Clinics of North America*, 11(3), 437–447. https://doi.org/10.1016/S0193-953X(18)30132-9
38. Laursen, B., & Veenstra, R. (2021). Toward understanding peer influence in childhood and adolescence: The Influence-Compatibility Model. *Perspectives on Psychological Science*, 16(3), 647–660. https://doi.org/10.1177/1745691620966792
39. Lazarsfeld, P. F., & Merton, R. K. (1954). *Friendship as a social process: A substantive and methodological analysis*. In M. Berger, T. Abel, & C. H. Page (Eds.), Freedom and control in modern society (pp. 18–66). Van Nostrand.
40. Levantini, V., Camodeca, M., & Iannello, N. M. (2023). The contribution of bullying involvement and alexithymia to somatic complaints in preadolescents. *Children*, 10(5), 905.
41. Lombardi, E. L., Wilchins, R. A., Priesing, D., & Malouf, D. (2002). Gender violence: Transgender experiences with violence and discrimination. *Journal of Homosexuality*, 42(1), 89–101. https://doi.org/10.1300/J082v42n01_05
42. Lyvers, M., Makin, C., & Thorberg, F. A. (2020). Self-compassion in relation to alexithymia, empathy, and negative mood. *Personality and Individual Differences*, 168, 110295. . https://doi.org/10.1007/s12671-020-01379-6
43. Michelraj.M.(2015).Historical Evolution of Transgender Community in India. *Asian Review of Social Sciences*.4(1),17-19.
44. Nemiah, J. C., Freyberger, H. J., & Sifneos, P. E. (1976). Alexithymia: A review of the literature. *Psychosomatic Medicine*, 38(5), 553–577. https://doi.org/10.1097/00006842-197609000-00001
45. Norton, A. T., & Herek, G. M. (2013). Heterosexuals' attitudes toward transgender people: Findings from a national probability sample of U.S. adults. *Sex Roles*, 68(11–12), 738–753. https://doi.org/10.1007/s11199-011-0110-6
46. Önal, A. (2023). Empathy and alexithymia and their effect on subtle and blatant prejudices (Doctoral dissertation). Charité – Universitätsmedizin Berlin.
47. Paluck, E. L. (2011). Peer pressure against prejudice: A high school field experiment examining social network change. *Journal of Experimental Social Psychology*, 47(2), 350–358. https://doi.org/10.1016/j.jesp.2010.11.003
48. Parker, J. D., Taylor, G. J., & Bagby, R. M. (2008). The 20-item Toronto Alexithymia Scale: I. Item selection and cross-validation of the factor structure. *Journal of Psychosomatic Research*, 55(3), 231–239. https://doi.org/10.1016/S0022-3999(02)00467-8
49. Pettigrew, T. F. (1998). Intergroup contact theory. *Annual Review of Psychology*, 49(1), 65–85. https://doi.org/10.1146/annurev.psych.49.1.65
50. Preece, D., Becerra, R., Allan, A., Robinson, K., & Dandy, J. (2017). Establishing the theoretical components of alexithymia via factor analysis: Introduction and validation of the attention-appraisal model of alexithymia. *Personality and individual differences*, 119, 341-352.
51. Preece, D., Becerra, R., Robinson, K., Dandy, J., & Allan, A. (2018). The psychometric assessment of alexithymia: Development and validation of the Perth Alexithymia Questionnaire. *Personality and Individual Differences*, 132, 32-44.
52. Prinstein, M. J., & Dodge, K. A. (Eds.). (2008). Understanding peer influence in children and adolescents. Guilford Press.
53. Read, J., Sargeant, C., & Wright, S. (2020). What beliefs influence children and young people's attitudes towards the transgender population. *Educational & Child Psychology*, 37(1), 11-36.

54. Serano, J. (2007). Whipping girl: A transsexual women on sexism and the scapegoating of feminity. Seal press.
55. Shafiee-Kandjani, A. R., Shalchi, B., Raeisnia, A., Tajlil, S., & Davtalab-Esmaeili, E. (2025). The association between personality traits and transphobia among university students: a cross-sectional study in northwestern Iran. *BMC psychiatry*, 25(1), 80.
56. Sifneos, P. E. (1973). The prevalence of 'alexithymic' characteristics in psychosomatic patients. *Psychotherapy and Psychosomatics*,22(2), 255–262. https://doi.org/10.1159/000286529
57. Singh, S., & Saini, S. (2010). Manual of Peer Pressure. Prasad Psycho Corporation, New Delhi
58. Smith, R., Lane, R. D., & Schwartz, G. E. (2019). Alexithymia: Implications of the three-process model and a single case study illustration. *Consciousness and Cognition*, 68, 33–46. https://doi.org/10.1016/j.concog.2018.12.001
59. Svestasvatara Upanishad. (n.d.). In The Upanishads. (Original work translated by various scholars).
60. Swart, M., Kortekaas, R., & Aleman, A. (2009). Dealing with feelings: Characterization of trait alexithymia on emotion regulation strategies and cognitive-emotional processing. *PLoS ONE*, 4(6), e5751. https://doi.org/10.1371/journal.pone.0005751
61. Taylor, G. J., & Taylor, H. L. (1997). Alexithymia. In M. McCallum & W. E. Piper (Eds.), Psychological mindedness: A contemporary understanding (pp. 77–104). Lawrence Erlbaum Associates.
62. Taylor, G. J., & Bagby, R. M. (2004). The development of the Toronto Alexithymia Scale. In J. A. Parker, G. J. Taylor, & R. M. Bagby (Eds.), The handbook of alexithymia: Theories, methods, and applications (pp. 51–69). Cambridge University Press.
63. Tebbe, E. N., & Moradi, B. (2012). Anti-transgender prejudice: A structural equation model of associated constructs. *Journal of Counseling Psychology*, 59(2), 251–261. https://doi.org/10.1037/a0026990
64. Ugwu, L. E., Ramadie, K. J., Ajele, W. K., & Idemudia, E. S. (2024). Childhood adversity and peer influence in adolescent bullying perpetration. *Scientific Reports*, 14(1), 30959.
65. Uluboy, Z., & Husnu, S. (2020). Turkish Speaking Young Adults Attitudes Toward Transgender Individuals: Transphobia, Homophobia and Gender Ideology. *Journal of Homosexuality*, 69(1), 101–119. https://doi.org/10.1080/00918369.2020.1813510
66. van der Velde, J., Servaas, M. N., Goerlich, K. S., Bruggeman, R., Horton, P., Costafreda, S. G., & Aleman, A. (2013). Neural correlates of alexithymia: A meta-analysis of emotion processing studies. *Neuroscience and Biobehavioral Reviews*, 37(8), 1774–1785. https://doi.org/10.1016/j.neubiorev.2013.07
67. Vasumatha.T and Geetanjali.M.(2018).Transgender identity as hidden in Vedic literature and society. *International Journal of Humanities and Social Sciences Invention*,7(1),62-65.
68. West, C., & Zimmerman, D. H. (1987). Doing gender. *Gender & Society*, 1(2), 125–151. https://doi.org/10.1177/0891243287001002002
69. World Health Organization. (2021). Closing the leadership gap: Gender equity and leadership in the global health and care workforce. https://www.who.int/publications/i/item/9789240025905