Psychological factors of gender dysphoria in adolescents: A systematic review

Factores psicológicos de la disforia de género en adolescentes: Una revisión sistemática

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SUMMARY

The objective of this research work was to analyze the psychological factors that are present in gender dysphoria in adolescents, due to the importance of approaching psychological clinical practice through intervention strategies.

Method: A systematic review was carried out through digital searches in scientific databases such as ProQuest, Elservier, and PubMed, by structuring a bibliometric type design, the collection of information was based on three crossings in the three databases. selected, including the primary studies and extracting the data to later be interpreted.

Results: Psychological alterations are presented due to the dissonance of sex and gender identity, finding symptomatology associated with depression, anxiety, and structuring of suicidal ideation.

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Conclusions: *It was identified that the research reports* indicate that there is psychological discomfort and deterioration in the social functioning of relationships.

Keywords: Dysphoria, intervention, hormones, incongruity, sex.

RESUMEN

El objetivo de este trabajo investigativo consistió en analizar los factores psicológicos que se encuentran presentes en la disforia de género en adolescentes, debido a la importancia de abordaje en la práctica clínica psicológica mediante las estrategias de intervención.

Método: Se realizó una revisión sistemática a través de búsquedas digitales en bases de datos científicas como ProQuest, Elservier y PubMed, mediante la estructuración de un diseño de tipo bibliométrico, la recopilación de la información se basó en tres cruces en las tres bases de datos seleccionadas, incluyendo los estudios primarios y realizando la extracción de los datos para posteriormente ser interpretados.

Resultados: Se presentan alteraciones psicológicas debido a la disonancia de sexo y la identidad de género, encontrándose sintomatología asociada a la depresión, ansiedad y estructuración de ideación suicida.

Conclusiones: Se identificó que los reportes las investigaciones indican que se presenta malestar psicológico y deterioro en el funcionamiento social de las relaciones.

Palabras clave: Disforia, intervención, hormonas, incongruencia, sexo.

INTRODUCTION

To refer to gender dysphoria, it is necessary to understand the human being as a subject of law, which needs to be recognized and valued socially. In the adolescent population, there is a discrepancy between the established sex and the preference that is felt or expressed (1). It is also necessary to take into account the time of manifestation, the characteristics present, where they stand out, and aspects such as; pretending to belong to the other sex, cross-dressing tendencies in men, or wearing visible masculine attire in women (2). Likewise, interaction with people of the opposite sex and participation in games and social activities that do not correspond to their role, to the point of observing affectations in interpersonal, school, and family relationships. It is also possible, that the appearance of clinical discomfort, as well as, the convictions marked by detaching from the culturally assigned patterns for each sex (3).

Now, adolescence is considered the phase, where physical changes reflected in their body are evident. (4). It should be noted that these, too, show alterations of an emotional nature and in their capacity for acceptance. Which can trigger states of vulnerability and the presence of disorders when feeling misunderstood by their reality. For this reason, the present study aims to analyse the psychological factors that affect the presence of gender dysphoria in the adolescent population through a systematic review (5).

It should be noted that the theme mentioned throughout history has focused on pathology with a biological tendency, supported by medication, interested in maintaining the alignment of sex and socially established patterns. In addition, for its treatment, the participation of expert professionals required, who are involved during the proposed phases, which can be hormonal, psychological, and surgical (6). However, gender dysphoria can arise in varying degrees and intensities according to each subject and life cycle. Also, a high number of reported cases may present at an early age, showing intense discomfort (1). However, during the 20th century, this population began to become visible, through experiences and claim processes, where respect for the dignity of the other was promoted, through gender struggles

and the right to individual freedom, to finally decide on his own body (7).

Meanwhile, as support for the present study, the postmodern paradigm is considered, interested in the relationship between the individual and the world. In that order, it refers to the construction of reality from a new vision of the person and the world (8). Along the same lines, social constructionism focuses its theory on self-knowledge and what surrounds us. It is based on the relationships of human beings and communication and language processes. This is considered a movement based on the discussion of relational politics and ethics, where the importance of social relations as a space for building the world is emphasized. In this sense, the social origin of the behaviors that we manifest, of how we live our sexualities and our bodies is considered (9).

On the other hand, in this population, episodes of stress may arise, caused by personal and social conflict, triggering mental health effects. the above can be correlated with low self-esteem, anxiety, stress, depression, and avoidance when requiring support (10). In the same way, discrimination can cause a state of victimization, accompanied by emotional suffering and affectations in adequate integral functioning (8).

Research question

What associated psychological factors influence gender dysphoria in the adolescent population reported in the scientific literature?

METHOD

The methodology used in this article is a quantitative approach, of a bibliometric type associated with the scientific production carried out in the last five years in the indexed journals (11). The Boolean equations that perform the search for information with precision were used, taking into account the study variables in which the contributions were analyzed through three categories of analysis (12): Hormonization therapy and cognitive alterations; acceptance of gender identity and psychological disorders.

The sample unit is made up of 39 investigations of which, taken from primary and secondary sources, having as observation window the last five years in a period from 2018 to 2022.

The PRISMA 2020 method was used (13) where the aspects related to the intervention aspects are evaluated, taking into account medical or social aspects, being the one used in the systematic reviews that are constantly updating the scientific advances in the subject of study.

Inclusion criteria

For the inclusion of the selected data, it was taken into account that they were published in the last five years (14), additionally that the studies complied with the variables studied and adjusted to the categories of analysis which are: Hormonization therapy and cognitive alterations; acceptance of gender identity and psychological symptoms focused on the population with gender dysphoria.

Exclusion criteria

The investigations that were not in the observation window, and those that included the medical-surgical elements within the variables, were excluded because they did not correspond to the selected variables (15).

Search strategies

In the first place, the information search was carried out in the selected databases taking into account the last five years of publications, and contemplating the scientific production in Spanish and English (16). The publications were included that, within the contributions, analysis, keywords, and title, taking into account that the information on the psychological factors associated with gender dysphoria was specified (Table 1).

Information was searched in three ProQuest, Elservier, and PubMed databases, using the search equations (Table 2) using Boolean operators that served to subsequently select the information.

Table 1 Information search terms

"Psychological factors" and "dysphoria" or = "gender" or "adolescents" not = "adults" "Job stress" and "identity" or = "gender or disorder" not = "Disease" "assignment" and "sex" or = "depression" or "irritability" not = "discrimination and "hormonal therapy" and "masculinization" or "feminization" "adolescents" and "sexual preference" or "gender stereotypes" or "Psychological factors" and "dysphoria" or = "gender" or "adolescents" not = "adults" "Job stress" and "identity" or = "gender or disorder" not = "Disease" "assignment" and "sex" or = "depression" or "irritability" not = "discrimination and "hormonal therapy" and "masculinization" or "feminization" and "adolescents" and "sexual preference" or "gender stereotypes"

Table 2
Search equations

Databases	Search equations in databases
ProQuest	"Psychological factors" and "dysphoria" or = "gender" or "adolescents" Not = "adults" "Job stress" and "identity" or = "gender or disorder" not = "Disease" "assignment" and "sex" or = "depression" or "irritability" not = "hormonal workplace accident" Psychological factors" and "dysphoria" or = "gender" or "adolescents" not = "adults" "Job stress" and "identity" or = "gender or disorder" not = "Disease"
Elservier	"identity" or = "gender or disorder" Not = "Disease" "assignment" and "sex" or = "depression" or "irritability assignment" and "sex" Or = "depression" or "irritability" not = "discrimination and "hormonal therapy" and "masculinization" or "feminization" "adolescents" and "sexual preference" or "gender stereotypes"
PubMed	Psychological factors" and "dysphoria" Or = "gender" or "adolescents "assignment" and "sex" or = "depression" or "irritability" not = "discrimination and "hormone therapy" "Disease" "assignment" and "sex" or = "depression" "irritability" not = "discrimination and "hormonal therapy" and "masculinization" or "feminization" "adolescents

Data collection process

The research analysed was selected following the guidelines of the PRISMA 2020 guide (17) in which the study variables were taken into account, work was done on the registration of information, taking

into account the categories of analysis psychological factors and gender dysphoria in adolescents. Specifying the study population in which the interest is focused, the registration of the information was carried out in a documentary matrix that facilitated the compilation of the information (Table 3).

Table 3
Crossing of search terms in the databases

Crosses/ databases	ProQuest	Elservier	PubMed	Total	
"Psychological factors" and "Gender dysphoria" or "Adolescents"	1 986	144	2 108	4 238	
"Gender disorder" and "identity" or = "assignment or preference"	370	3 495	231	4 096	
"Psychological factors" and "Hormonal therapy" Or "dysphoria gender"	70	2 872	285	3 227	
Total	2 426	6 511	2 624	11 561	

Selection of studies

The selection of the articles was carried out taking into account the observation window of the last five years, taking into account the fulfilment of the variables studied, later the studies that were

duplicates or that did not meet the criteria were eliminated, additionally, it was had taking into account the publications that were available in full text, eliminating abstracts and research notes (18) (Table 4).

Table 4

Process of identification, elimination, and selection of articles

Equation	Databases	Unfiltered	No access	Reviews/ incomplete/ duplicates	do not comply Criteria	Selection
"Psychological factors" and "Gender dysphoria" or "Adolescents"	ProQuest Ebsco Elservier	7 035	6 294	4 347	4 215	fifteen
"Gender disorder" and "identity" or = "assignment or preference"	ProQuest Ebsco Elservier	3 873	3 297	2 765	2 453	eleven
"Psychological factors" and "Hormonal therapy" Or "dysphoria gender"	ProQuest Elservier Ebsco	653	953	3 865	3 762	8
Total		11 561	10 544	10 977	10 430	3.4

Data extraction

The data extraction was carried out, taking into account the authors, the year of publication, selected databases, taking into account the filters, and the articles that were found in full text and eliminating those that did not meet the criteria (19).

RESULTS

The results were obtained from the crossing of data from three Boolean equations where the

search was carried out in the selected databases, obtaining a total of 11 561 results. For the crosses in ProQuest, 2426 were obtained, likewise in Elsevier 6511 investigations were found, and later in PubMed 2624. In relation to the documents against which access was not had, a total of 10 544 articles were identified, in the following filter identified the documentation that was incomplete or that in turn was duplicated in the other databases. In the analysis of compliance with the criteria, 10 430 investigations were obtained, finally, the selection of the studies resulted in 39 references that were used for processing the information. Given the obtaining of the results, these are presented in Table 5.

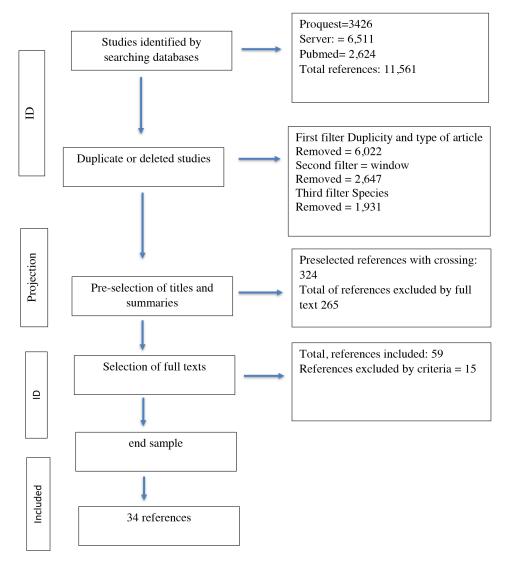


Figure 1. Flowchart of the study selection process.

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Table 5. Results obtained.

Hermone therapy and cognitive in its treatment exposed in its treatment of gender depends and conneceration and conneceration between the provided gender identity and analysed. 2 Psychological disorders cological incide of pathers in time minours coological incide of pathers in the minour cooling and the pathers of administration of the cological incide of pathers in time minour cooling and the pathers of administration of the cological incide of adolescence in the connection of the cological incide of adolescence in the connection of the cological incide of adolescence in the cological incide of adolescence incide of adolescence in the cological incidence in part of adolescence in the cological incidence in the cological incidence in part of adolescence in the cological incidence in the cological incidence in the cological incidence in part	Š	VARIABLE/KEYWORD MATCHES	TITLE	DOI	CONTRIBUTIONS	DATABASE	AUTHORS	YEAR
Psychological disorders Gender dysphoria in trans minors: ecological nicite Gender dysphoria in trans minors: andrel 2020.06.002 Acceptance of gender identity Sevigender ratio of adolescents with gender Gender dysphoria in the Gender Identity Treatment Unit of Asturias Gender dysphoria in the Gender Identity Treatment Gender dysphoria, persistence and Goll: 10.1016/j.androl.2020. Hormone therapy and cognitive Hormone therapy and cognitive The "best interest" of the transsexual minor The "best interest" of the transsexual minor Hormone therapy and cognitive The "best interest" of the transsexual minor The "best interest" of the transsexual minor The "best interest" of the transsexual minor Gender dysphoria. An Overview Gender Dysphoria: An Overview Psychological disorders Sex reassignment treatment in transsexual Hormonal sex tens signment treatment in propole Typ334(psychotherna2017. Hormonal sex tens signment treatment in propole Typ34(bolorg/10.1016/S1698-031X(07)) Hormonal sex tens signment treatment in propole Suicidal idealon and suicide attempt in people Typ34(bolorg/10.1016/S1698-031X(07)) Typ34(bolorgy)	-		Gender dysphoria in children and controversies in its treatment: two different conceptions about gender identity	10.5294/pebi.2020.24.1.5	Gender dysphoria, approach in children, ways of understanding, raising awareness, and providing importance of gender identity are analysed.	ProQuest	(20)	2020
Acceptance of gender identity dysphoria in the Gender Identity Treatment 03.003 Unit of Asturias Unit of Asturias Gender Identity Treatment 03.001 Unit of Asturias Gender dysphoria/gender incongruence: DOI: 10.1016/j.androl.2020. alterations. Hormone therapy and cognitive alteration and detransition in transgender 03.001 Unit 04.001 Gender dysphoria/gender incongruence: DOI: 10.1016/j.anpedi.2020. desistance and detransition and detransition, persistence and 03.011 Unit 04.001 Gender dysphoria/gender incongruence: DOI: 10.1016/j.anpedi.2020. dispute dispute and cognitive alterations and cognitive alterations and cognitive alterations from the of Madrid during adolescence during adolescence derations and cognitive alterations and cognitive alterations and cognitive alterations and cognitive alterations during adolescence during adolescence during adolescence during adolescence during adolescence at the Hospital de Sin José female (MTF) case at the Hospital de Sin José female (MTF) case at the Hospital de Sin José Hupps://doi.org/10.1016/j.rmu. 2016.001 patients alterations and cognitive de Sin José female (MTF) case at the Hospital de Sin José female disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/S1098-0.31X(07) our experience in 236 cases attempt in people DOI: 10.1016/j.psphotphema.2017. Adolescence DOI: 10.1016/j.psphotphema.2017. Adolescence DOI: 10.1016/j.psphotphema.2017. Adolescence DOI: 10.1016/j.psphotphema.2017. Adolescence DOI: 10.1016/j.psphotphema.2017.	71		Gender dysphoria in trans minors: ecological niche Gender dysphoria in trans minors: ecological niche	https://doi.org/10.1016/j. androl.2020.06.002	Minors require attention processes in help centers fundamentally during the period of childhood, in adolescence.	Elservier	(21)	2021
Hormone therapy and cognitive desistence and detransition, persistence and desistence and standard desistence and standard desistence and des	ю		Sex/gender ratio of adolescents with gender dysphoria in the Gender Identity Treatment Unit of Asturias	DOI: 10.1016/j.androl.2020. 03.003	It is possible to determine a transformation of the sex/ gender ratio, and an increase in the demands on trans men in the period of adolescence.	Elservier	(22)	2021
Hormone therapy and cognitive altera- Astudy on transsexuality at the Forensic Medical Clinic of Madrid Clinic of Madrid Hormone therapy and cognitive Gender dysphoria, presentation of a male-to- alterations Gender Dysphoria: An Overview Bychological disorders Cender Dysphoria: An Overview Hormone therapy and cognitive Gender Dysphoria: An Overview Bychological disorders Sex reassignment treatment in transsexual Hormone therapy and cognitive Hormone therapy and cognitive Gender Dysphoria: An Overview Applications Hormone therapy and cognitive Bychological disorders Sex reassignment treatment in transsexual Hormone therapy and cognitive Hormone therapy a	4		Gender dysphoria/gender incongruence: transition and detransition, persistence and desistance	DOI: 10.1016/j.endinu.2020. 03.011	Transsexuality is the motivation to live and have acceptance as a subject of the opposite sex, hormonally intervening their body to the desired gender.	Elservier	(23)	2020
Hormone therapy and cog-nitive altenary and cognitive altenary and cognitive altenary and cognitive altenary and cognitive altenations Hormone therapy and cognitive The "best interest" of the transsexual minor alterations Hormone therapy and cognitive The "best interest" of the transsexual minor alterations Hormone therapy and cognitive during adolescence during adolescence female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José Bychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/j.rmu. Psychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/j.rmu. Psychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/S1698-031X(07) alterations Hormone therapy and cognitive Hormonal sex reas-signment treatment in Spain: DOI: 10.1016/S1698-031X(07) alterations Bychological disorders Suicidal ideation and suicide attempt in people DOI: 10.1016/j.reper.2016.11.008 A1059-1 A1059-1 A1059-1 A1059-1 A1050-1 A1050-	ν			DOI: 10.1016/j.anpedi.2020. 01.019	The psychosocial status of subjects in pediatric endocrine care due to gender incongruence and the impact of cross-hormonal intervention are highlighted.	Elservier	(24)	2020
Hormone therapy and cognitive The "best interest" of the transsexual minor alterations Hormone therapy and cognitive Hormone therapy and cognitive Hormone therapy and cognitive Auring adolescence Hormone therapy and cognitive Gender dysphoria. presentation of a male-to- female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) Psychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/S0025-patients Hormone therapy and cognitive Our experience in 236 cases Byschological disorders Suicidal ideation and suicide attempt in people A38 Suicidal ideation and suicide attempt in people A38	9		A study on transsexuality at the Forensic Medical Clinic of Madrid	DOI: 10.1016/j.remle.2018.04.001	Comparison of cases of transsexuality, the appearance of the transsexual sensation, and the approach with the transsexual intervention.	PubMed	(25)	2018
Hormone therapy and cognitive Psychomedical care in gender identity dysphoria alterations alterations Hormone therapy and cognitive Gender dysphoria, presentation of a male-to-female (MTF) case at the Hospital de San José female (MTF) case at the Hosp	<i>L</i>	7 Hormone therapy and cognitive alterations	The "best interest" of the transsexual minor	https://doi.org/10.1016/j.bioet. 2018.02.001	When children present with gender dysphoria, they intervene with their parents, they recommend intervention in crossed hormones or surgical intervention.	Elservier	(26)	2018
Hormone therapy and cognitive female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José female (MTF) case at the Hospital de San José Psychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/j.rmu. Bychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/S0025-patients Hormone therapy and cognitive Hormonal sex reas-signment treatment in Spain: DOI: 10.1016/S1698-031X(07) our experience in 236 cases Suicidal ideation and suicide attempt in people DOI: 10.7334/psychothema2017. with gender dysphoria	00		Psychomedical care in gender identity dysphoria during adolescence	DOI: 10.1016/j.rpsm.2015.04.002	DIG can be the conse-quence of a disturbed interaction between genetic factors, the constitution of the CNS, and the operation of sexual hormones; the hormonal process reduces anxiety and depression.	Elservier	(27)	2018
Psychological disorders Gender Dysphoria: An Overview https://doi.org/10.1016/j.rmu. Psychological disorders Sex reassignment treatment in transsexual https://doi.org/10.1016/S0025-patients Hormone therapy and cognitive Hormonal sex reas-signment treatment in Spain: DOI: 10.1016/S1698-031X(07) our experience in 236 cases Suicidal ideation and suicide attempt in people DOI: 10.7334/psychothema2017. with gender dysphoria Bychological disorders DOI: 10.7334/psychothema2017.	6	Mormone therapy and cognitive alterations	Gender dysphoria, presentation of a male-to-female (MTF) case at the Hospital de San José	DOI: 10.1016/j.reper.2016.11.008	Analysis of the evolution of transsexuality or (TIG) where intervention and evaluation by psychiatry are carried out, endocrinology initiates hormonal therapy for sex change.	Elservier	(28)	2018
Psychological disorders Sex reassignment treatment in transexual https://doi.org/10.1016/S0025-patients Hormone therapy and cognitive Hormonal sex reas-signment treatment in Spain: DOI: 10.1016/S1698-031X(07) our experience in 236 cases Psychological disorders Suicidal ideation and suicide attempt in people DOI: 10.7334/psychothema2017. with gender dysphoria	10) Psychological disorders	Gender Dysphoria: An Overview	https://doi.org/10.1016/j.rmu. 2014.06.001	Gender dysphoria is a common diagnosis in the professional and social area, a review of the meaning of transsexuality is elaborated, and more and more treatments are requested for this.	Elservier	(29)	2018
Hormone therapy and cognitive Hormonal sex reas-signment treatment in Spain: DOI: 10.1016/S1698-031X(07) alterations 74059-1 Psychological disorders Suicidal ideation and suicide attempt in people DOI: 10.7334/psychothema2017.	11		Sex reassignment treatment in transsexual patients	https://doi.org/10.1016/S0025-7753(00)71691-5	Transsexualism is a disorder based on the rejection of anatomical sex, it presents a feeling of rejection.	Elservier	(30)	2020
Psychological disorders Suicidal ideation and suicide attempt in people DOI: 10.7334/psychothema2017. with gender dysphoria	12		Hormonal sex reas-signment treatment in Spain: our experience in 236 cases	DOI: 10.1016/S1698-031X(07) 74059-1	It is evident that the demand for sex reassignment treatment (psychological, hormonal, and surgical) has increased.	Elservier	(31)	2018
and suicidal behavior than the general population.	13	Psychological disorders	Suicidal ideation and suicide attempt in people with gender dysphoria	DOI: 10.7334/psychothema2017. 438	Little research on suicidal behavior in people with gender dysphoria, a higher risk of death by suicide and suicidal behavior than the general population.	Elservier	(32)	2018

Table 5. Results obtained. (continue from page S748).

Š	VARIABLE/KEYWORD MATCHES	TITLE	DOI	CONTRIBUTIONS	DATABASE	AUTHORS	YEAR
41	14 Psychological disorders	Body dysmorphic disorder and gender dysphoria. therapeutic implications.	https://doi.org/10.34810/ PsicosomPsiquiatrum0205	Body dysmorphia is excessive distress due to imaginary imperfections in physical appearance. Gender dysphoria is the incongruity felt between the gender assigned at birth.	PubMed	(33)	2018
15	Acceptance of gender identity	Satisfaction with life and psychological wellbeing in people with Gender Dysphoria.	https://dialnet.unirioja.es/servlet/ articulo?codigo=5430517	The study was conducted to investigate the psychological wellbeing and satisfaction with life in individuals diagnosed with Gender Dysphoria (GD).	PubMed	(34)	2018
16	16 Homone therapy and cognitive alterations	Live in the wrong body. About a case	https://doi.org/10.34810/ PsicosomPsiquiatrnum0106	The inclusive criteria of hormonal treatment and surgical operation that reassigns sex in gender dysphoria are highlighted.	PubMed	(35)	2018
17	Acceptance of gender identity	Gender dysphoria: care reality in child and adolescent psychiatry.	https://doi.org/10.34810/ PsicosomPsiquiatrnum0702	It is about specifying the situation of the health care demand for children and adolescents with GD, personal particularities, and families' perspectives on care.	PubMed	(36)	2018
18	: Acceptance of gender identity	Video games and gender dysphoria: case study evidence	10.51698/aloma.2016.34.2.59-66	Video games have helped people with GD or other identity disorders, they are a practical way of managing and accepting gender identity problems.	PubMed	(37)	2020
19	19 Psychological disorders	Male-to-female gender dysphoria: gender- specific differences in resting-state networks.	10,1002/b463,691	This study suggests a starting point when proceeding with research designed to clarify whether the brains of people with GD are more equivalent to their assigned or de-sired gender.	ProQuest	(38)	2018
20	Acceptance of gender identity	Navigating in the dark: Meta-synthesis of subjective experiences of gender dysphoria amongst transgender and gender non- conforming youth	https://doi.org/10.1016/j. socscimed.2021.114094	The subjective experiences of transgender and gender non-conforming youth express feelings of rejection towards themselves	ProQuest	(39)	2021
21	Homone therapy and cognitive alterations	Evidence for a Change in the Sex Ratio of Children Referred for Gender Dysphoria: Data from the Center of Expertise on Gender Dysphoria in Amsterdam (1988–2016)	10.1080/0092623X.2018.1437580	The transition from man to woman is one of the most requested interventions, considering that there are two specialized clinics, one in Toronto and the other in Amsterdam, presenting a higher prevalence of hormonal interventions	ProQuest	(40)	2018
22	Accep-tance of gender identity	Re Imogen: the role of the Family Court of Australia in disputes over gender dysphoria treatment	DOI:10.1007/s40592-021-00138- 0	By petition to the Australian Family Court, there is a debate about the autonomy of a parent or a doctor of a minor diagnosed with gender dysphoria, and the ability to accept or not the proposed treatment.	ProQuest	Î.	2021
23	23 Ac-ceptance of gender identity	Gender corrective surgery promoting mental health in people with gender dysphoria is not supported by the data presented in the article	DOI:10.1176/appi.ajp.2020. 1911170	It cannot be established whether the decrease in mental health is directly related to surgery in relation to gender dysphoria, however, the scientific background shows that surgical procedures are beneficial for mental health in people with gender dysphoria.	ProQuest	(42)	2020
24	24 Psychological disorders	Gender Dysphoria, Mental Health, and Poor Sleep Quality Among Transgender and Gender Non-Conforming Individuals: A Qualitative Study in New York City	DOI:10.1093/sleep/zsz067.690	Sexual minority populations (lesbian, gay, and bisexual) experience inadequate sleep patterns, which impacts their mental health.	PubMed	(64)	2019
25	Acceptance of gender identity	One hundred twelve cases of 46, XY DSD patients after initial gender assignment: a shorterm survey of genderrole and gender dysphoria	DOI:10.1186/s13023-021-02039-	There is concern among parents and doctors about gender assignment, however, there is still no uniform pattern of care in cases of dysphoria and gender role.	ProQuest	(44)	2021

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Table 5. Results obtained. (continue from page S749).

N° VARIABLE/KEYWORD MATCHES	TITLE	DOI	CONTRIBUTIONS	DATABASE	AUTHORS	YEAR
26 Psychological disorders	Psychiatric disorders in individuals diag-nosed with gender dysphoria. A systematic review	doi:10.1111/pcn.12947.	An increase in the population with gender dysphoria, who present high levels of emotional stress; Recognizing this type of diagnosis makes it possible to contribute to the development of public policy in mental health.	PubMed	(45)	2020
27 Psychological disorders	Risk factors for psychological function-ing in German adolescents with gender dysphoria: poor peer relations and general family	doi: 10.1007/s00787-019-01308-6	Adolescents with gender dysphoria frequent social andemotional difficulties and psychological problems constitute a risk fac-tor in this population.	Elservier	(46)	2019
28 Psychological disorders	"Certain Parts of My Body Don't Belong to Me": Trans Individuals Descriptions of Body-Specific Gender Dysphoria	DOI:10.1007/s13178-019- 00423-y	Gender dysphoria from the medical point of view is identified as body dissatisfaction, which is perceived as a negative experience in relation to one's body and appearance.	Elservier	(47)	2020
29 Hormonaltherapy and cognitive alterations.	Gender dysphoria in adolescence: current perspectives	doi: 10.2147/AHMT.S135432. eCollection 2018.	Rising numbers against gender dysphoria in adolescents seeking treatment at gender identity services	РирМед	(48)	2018
30 Hormonaltherapy and cognitive alterations.	Paranoia in patients with gender dysphoria A clinical exploration	DOI:10.4103/psychiatry. IndianJPsychiatry_433_18	Gender identity disorder such as unhappiness with the assigned gender and the desire to be the oppo- site gender, the desire to seek a surgical procedure for sex reassignment is identified. The profiles of the Multiphasic Personality Inventory were evaluated	PubMed	(49)	2018
31 Homone therapy and cognitive alterations	Quality of Life, Suicidal Attempt and Satisfaction in Gender Dysphoria Individuals Undergone Sex Reassignment Surgery	https://www.annalsofrscb. ro/index.php/journal/article/ view/6308	Gender dysphona is characterized by dissatisfaction between anatomical appearance and gender identity. In this sense, sex reassignment surgery generates high levels of satisfaction and adecrease in suicide attempts.	Elservier	(50)	2021
32 Homone therapy and cognitive alterations	Investigation of Axis 1Psychiatric Disorders in Patients with Gender Dysphoria along with Gender Reassignment Surgery: A Descriptive Cross-sectional Study in Iran	https://www.annalsofrscb. ro/index.php/journal/article/ view/6309/4796	Transsexual people intend to modify their gender role from childhood, where they experience a dichotomy, and become transgender in adulthood, which has an impact on mental health.	ProQuest	(51)	2021
33 Homone therapy and cognitive alterations	Gender dysphoria in adolescents: can adolescents or parents give valid consent to puberty blockers?	http://dx.doi.org/10.1136/ medethics-2020-106999	Minors who present a variety of gender and the incidence of the family should not allow hormonal treatment, known as 'blockers', which prevent the development of puber-ty for a period of time.	Elservier	(52)	2020
34 Homone therapy and cognitive alterations	Children and adolescents with gender dysphoria in Israel: increasing rates of referral and fertility preservation	DOI:https://doi.org/10.4158/EP- 2019-0418	The preservation of fertility in Israeli children and adolescents with gender dysphoria together with the need for medical care and the high degree of protection of their fertility given the culture in which they are immersed	PubMed	(53)	2020

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Categories Analysis

Hormone therapy and cognitive alterations

Clinical evidence in the process of hormonalization towards the feminine or masculine of individuals present some cognitive alterations associated with learning, thinking, language, disorientation, and confusion (54). The inadequate functioning of mental health is mainly related to the biological and psychosocial bases that prevent them from facing the internalization of both positive and negative emotions (55). Having repercussions in a search for a hormonal therapy that in many cases does not have the accompaniment of health professionals, but is referred by people who have had similar experiences, and through word of mouth, the information is conveyed, generating elements that are harmful to overall health (56).

Acceptance of gender identity

An important aspect in the formation of the self-concept is the process of acceptance, in the face of which they usually find rejection from family and friends, as well as hostile and demeaning behaviors in which self-esteem is compromised (57). Therefore, they manifest negative feelings, which affect the way they internalize thoughts. On the contrary, when the adolescent has a support network, acceptance is carried out fluidly and accompanied by family members who lay the foundations for the free development of the personality in the different areas of adjustment and functioning of life (58).

Psychological disorders

People with gender dysphoria do not present pathologies properly described, but they do show clinical indicators, associated with symptoms that alter cognitive, emotional, and social functioning (59), this is because in the stage of adolescence changes are generated in psychophysiological development that affects behavior, however, the anguish and psychological discomfort generated through dissonance in which they do not identify with the assigned biological sex, but they express well-being by having a

gender identity(60). It is worth mentioning that at this stage of the life cycle where there is a marked rejection and thus present symptoms of anxious and depressive symptoms, structuring of suicidal ideation, as well as irritability and aggressiveness that prevent them from adequate cognitive functioning (61).

DISCUSSION

Historical evolution has involved an important journey in the study of the different edges that make up the personal structure, mention has been made especially of all the factors that influence the human characteristics that constitute the human being (4). Sexuality has not been excluded from scientific interest, since the different variables that have modified it are the ones that have currently allowed the inclusion of concepts that were never contemplated for being within pathological categories or contrary to the nature of gender; without leaving aside, course, the legal framework that allows these people to be recognized as subjects of law (4,5).

Within the different investigations carried out in relation to gender dysphoria, a series of inconsistencies and little acceptance were found between the biological sex with which one is born and the identification that is constituted over time (36). Therefore, this generates a difficulty at the symptomatic level such as discomforts that produce changes in the subject's ability to adapt, in addition to this it can constitute some disorders related to anxiety, and irritability, among other cognitive affectations (8).

People who go through gender dysphoria at a certain point in the development process come to experience at some point the desire to transform their bodies to achieve real coherence to their gender identity. Regarding the adaptation to their needs, there are fundamental aspects in the development of psychological and emotional disorders that manage to reduce or increase cognitive and behavioral difficulties (38). On the other hand, it is important to point out that gender dysphoria can appear in childhood, generating changes in the child's behavior. It maintains that the intervention that is elaborated on children through different perspectives can allow an ability

to understand gender. The gender identity that is constituted, however, has been very complex when the variables between sex-gender in the subject and the awareness of gender identity are articulated (51).

It is emphasized that the treatment assigned to the diagnosis of gender dysphoria is hormone therapy and surgical interventions to reassign sex (53). In general, all human beings can from childhood to adulthood possibility of being able to experience a dichotomy related to transgender conversion. Likewise, it is pointed out that transsexual people have the intention of modifying their sexual characteristics through surgeries and aesthetic procedures that lead them to adopt changes in their behavior and their cognitive sphere, this produces an indestructible change in the gender role (3). Likewise, it is stated that sex reassignment has a positive impact, in this way, it allows individuals to obtain well-being and quality of life, thanks to this high levels of satisfaction are reflected, although many times emotional states related to depression may appear due to not having sex biologically, mood swings can appear in most cases and even cause suicidal ideation (60).

In the same way, it is evident that some male subjects who have an identification with the female gender, feel comfortable managing female skills and thus being able to obtain public documents as female subjects, trying to seek recognition that allows them to live in any scenario. like women (62). It is pointed out that other subjects have difficulties related to the way of seeing the world, fractures that are associated with states of social and family stress, accompanied by little acceptance of behaviors outside the gender discourse (54).

At present, science is trying to provide solutions to the different problems related to gender dysphoria, for this reason, there are cognitive behavioral therapeutic accompaniments and hormone management therapies, these therapies have had a good acceptance and a great impact, but on the other hand, the difficulties at the level of acceptance and elaboration of gender changes generate cognitive problems on maladaptive schemes that directly affect the subject who is going through these situations (33).

CONCLUSIONS

It can be concluded that one of the problems that are most prevalent in people with gender dysphoria is initially anxiety, which manifests itself with constant fear at the social level where they can become victims of people who are on stage, for this sometimes has a series of anguish in relation to the social because they do not want to be discriminated against or violated, at a certain moment, this can become a paranoid element of being constantly persecuted, all these anxieties and anguish also generate eating disorders due to the desire for image and body care to improve physical appearance, leading to thus to physical decompensation due to the lack of nutrients and abuse of physical training.

Other disorders that may occur in this process are sleep disturbances due to difficulty falling asleep or suffering from constant sleep during the day, clinical problems that appear due to discrimination and acceptance of others. On the other hand, People with gender dysphoria tend to struggle to be accepted as a subject opposite to the sex with which they were born or biologically assigned; for this reason they are always with the desire to be able to make significant changes to their body, this through hormonal interventions or specialized surgeries, seeking with this to have greater coherence with the felt and desired gender.

Other difficulties that appear are depressive crises, mood disorders, and post-traumatic stress. Due to all the problems of self-acceptance and that of others, for this reason, the risk of alcohol and drug consumption is always latent to reduce the sensation of emotional pain, we also find reckless behavior when they enter a crisis due to their self-acceptance problems, another of the difficulties that fractures and affects subjects suffering from gender dysphoria is related to the acceptance of family, friends, co-workers, and the context in general. Another difficulty is being used in intimidation and not being able to achieve the goals and desires due to the different prejudices that many people still have in relation to this topic.

All these rejections at the family and social level lead to damage to people's self-concept,

thus highlighting problems with the management of emotions and the ability to adapt socially. the latter is one of the triggers so that suicidal ideations can be generated.

This is due to the feeling of shame, not being accepted, and being exposed to physical and psychological abuse from others, they are forced to face difficulties such as stress generated by society. The degree of acceptance is related to the conflict about their sexual orientation. The environment and the family establish how people will present themselves and represent themselves within the family and in other places of social interaction.

REFERENCES

- Brecht A, Bos S, Ries L, Winter SM, Calvano C. Assessment of psychological distress and peer relations among trans adolescents — an examination of the use of gender norms and parent-child congruence of the ysr-r/ cbcl-r among a treatment-seeking sample. Children. 2021;8(10):2-17.
- Thompson L, Sarovic D, Wilson P, Sämfjord A, Gillberg C. APRISMA systematic review of adolescent gender dysphoria literature: 2) mental health. Plos Global Public Health. 2022;3:1-47.
- Van der Miesen AIR, Steensma TD, de Vries ALC, Bos H, Popma A. Psychological Functioning in Transgender Adolescents Before and After Gender-Affirmative Care Compared With Cisgender General Population Peers. J Adolescent Health. 2020;66(6):699-704.
- Zucker KJ. Adolescents with Gender Dysphoria: Reflections on Some Contemporary Clinical and Research Issues Adolescents with Gender Dysphoria: Reflections on Some Contemporary Clinical and Research Issues. Arch Sex Behavior. 2019:2008-2013.
- Graaf NM De, Huisman B, Cohenkettenis PT, Twist J, Carmichael P, Kreukels BPC, et al. Psychological functioning in non-binar y identifying adolescents and adults psychological functioning in non-binary identifying adolescents and adults. J Sex Marital Ther. 2021:1-13.
- 6. Bechard M, Vanderlaan DP, Wood H, Wasserman L, Zucker KJ, Bechard M, et al. Psychosocial and psychological vulnerability in adolescents with gender dysphoria: A "proof of Principle" Study psychosocial and psychological vulnerability in adolescents with gender dysphoria: A "proof of principle" Study. J Sex Marital Ther. 2017;43(7):678-688.

- de Graaf NM, Cohen-Kettenis PT, Carmichael P, de Vries ALC, Dhondt K, Laridaen J, et al. Psychological functioning in adolescents referred to specialist gender identity clinics across Europe: a clinical comparison study between four clinics. Eur Child Adolescent Psychiatry. 2018;27(7):909-919.
- Claahsen van der Grinten H, Verhaak C, Steensma T, Middelberg T, Roeffen J, Klink D. Gender incongruence and gender dysphoria in childhood and adolescence—current insights in diagnostics, management, and follow-up. Eur J Pediatr. 2021;180(5):1349-1357.
- Kozlowska K, McClure G, Chudleigh C, Maguire AM, Gessler D, Scher S, et al. Australian children and adolescents with gender dysphoria: Clinical presentations and challenges experienced by a multidisciplinary team and gender service. Hum Syst Ther Cult Attach. 2021;1(1):70-95.
- Evans M. Freedom to think: the need for thorough assessment and treatment of gender dysphoric children. BJPsych Bull. 2021;45(5):285-290.
- 11. Moreno B, Muñoz M, Cuellar J, Domancic S, Villanueva J. Systematic Reviews: Definition and basic notions. Rev clinical periodontics, Implantol and Oral Rehabil. 2018;11(3):184-186.
- Salcido M, Vargas A, Medina N, Ramirez F, García M, Briseño A, et al. Systematic review: the highest level of evidence. Ortho-tips. 2021;17(4):217-221.
- Page M, McKenzie J, Bossuyt P. PRISMA 2020 statement: An updated guide to the publication of systematic reviews. Rev Esp Cardiol. 2021;74(9):790-799.
- 14. Tawfik GM, Agus K, Dila S, Yousif M, Mohamed F. A step by step guide for conducting a systematic review and meta-analysis with simulation data. Tawfik al Trop Med Heal. 2019;6:1-9.
- Lame G. Systematic literature reviews: An introduction. Proc Int Conf Eng Des ICED. 2019;1633-1642.
- Mueller M, Addario MD, Egger M, Cevallos M, Dekkers O, Mugglin C, et al. Methods to systematically review and meta-analyze observational studies: a systematic scoping review of recommendations. BMC Med Res Methodol. 2018:1-18.
- 17. Grijalva P, Cornejo G, Gómez R, Real K, Fernandez A. Collaborative tools for systematic reviews. Rev Espac. 2019;40(5):1-9.
- Hutton B, Catalá-López F, Moher D. The extension of the PRISMA statement for systematic reviews incorporating network meta-analyses: PRISMA-NMA. Med Clin (Barc). 2016;(xx):10-14.
- Cajal B, Jiménez R, Gervilla E, Montaño JJ. Doing a systematic review in health sciences. Clin Health. 2020;31:77-83.

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- Cox P, Carrasco M. Gender dysphoria in children and controversies in its treatment: Two different conceptions of gender identity. Pers and Bioethics. 2020;24(1):57-76.
- Fernández Rodríguez M, Guerra Mora P, Revuelta Fernández AI, Villaverde González A, Concha González V. Gender dysphoria in trans minors: ecological niche. Rev Int Andrology. 2022;20(1):41-48
- 22. Fernández M, Guerra P, Revuelta A, Villaverde A. Sex/gender ratio of adolescents with gender dysphoria in the gender identity treatment unit of Asturias. Rev Int Andrology. 2020:0-5.
- 23. Fernandez AB. Gender dysphoria/gender incongruity: transition and detransition, persistence and desistance. Endocrinol Diab Nutr. 2020;67(9):559-561.
- López D, Pérez O, Cuellar I, Pedreira J, Campos L, Cuesta M, et al. Psychosocial evaluation in transgender adolescents. A Pediatrics. 2020;93(1):41-48.
- Marote R, Pera F, Perea B, Sánchez J. Study of transsexuality from the forensic medical clinic of Madrid. Rev esp med Leg. 2018;4(44):150-157.
- 26. López J. The "best interest" of the transsexual minor. Bioeth Update. 2018;4(2):103-118.
- Sánchez Lorenzo I, Mora Mesa JJ, Oviedo de Lúcas O. Psychomedical care in gender identity dysphoria during adolescence. Rev Psiquiatr Salud Ment. 2017;10(2):96-103.
- Bañol S, Briceño D, Cuervo A, Parra S, Rofríguez A, Rokas M. Gender dysphoria, a male-to-female (MTF) case report at the San José Hospital. Report Med Cir. 2018;25(4):232-234.
- Capetillo N, Jalil S, Motilla K. Gender dysphoria: An overview. Med Univ. 2018;17(66):53-58.
- Pavón I, Monereo S, Alameda C. Sex reassignment treatment in transsexual patients. Med Clin (Barc). 2020:783-788.
- Loureda L. Descriptive study of the Spanish population with gender inconsistency attending gender identity units. University of Coruna. 2021.
- 32. García-vega E, Camero A, Fernández M, Villaverde A. Suicidal ideation and suicide attempts in persons with gender dysphoria. Psychotheme. 2018;30(3):283-288.
- 33. Fernández-Rodríguez M, Benito Nogueiro S, Martínez Menéndez N, Guerra-Mora P. Body Dysmorphic Disorder and gender dysphoria. therapeutic implications. Singlatana Psychosom Psychiatr. 2018;2(1):34-41.
- Rabito M, Rodríguez J. Life satisfaction and psychological well-being in people with gender dysphoria. Spanish records Psychiatr. 2018;44(2):47-54.

- 35. Hernández R, Gómez S, Noval C, Rybak E, Gallardo L, Sevillano I, et al. "Living in a wrong body." About a case. siglantana Psychosomatics and Psychiatr. 2018;(1):60-69.
- 36. Gordo R, García X, Diaz D, Gándara J. Gender Dysphoria: the Reality of Care in Child and Adolescent Psychiatry. Psychosom Psychiatr. 2018:9-19.
- 37. Cabañes E, Rubio M. Videogames: A laboratory for the construction of sexual and gender identity. Subterranean Edges Topogr. 2020;231-241.
- 38. Clemens B, Junger J, Pauly K, Neulen J, Neuschaefer-Rube C, Frölich D, et al. Male-to-female gender dysphoria: Gender-specific differences in resting-state networks. Brain Behav. 2018;7(5):1–10.
- 39. Schei-Jessen R, Hebold I, Stänicke E. Navigating in the dark: Meta-synthesis of subjective experiences of gender dysphoria amongst transgender and gender non-conforming youth. Modern Pathology. 2021;33:2520–33.
- de Graaf NM, Carmichael P, Steensma TD, Zucker KJ. Evidence for a Change in the Sex Ratio of Children Referred for Gender Dysphoria: Data From the Gender Identity Development Service in London (2000–2017). J Sex Med. 2018;15(10):1381-1383.
- 41. Dimopoulos G, Taylor-Sands M. Re Imogen: the role of the Family Court of Australia in disputes over gender dysphoria treatment. Monash Bioeth Rev. 2021:42-66.
- Wold A. Gender-Corrective Surgery Promoting Mental Health in Persons With Gender Dysphoria Not Supported by Data Presented in Article. Am J Psychiatry. 2020:727-734.
- 43. Hernandez H, Reisner S, Schrimshaw E. Gender Dysphoria, Mental Health, and Poor Sleep Quality Among Transgender and Gender Non-Conforming Individuals: A Qualitative Study in New York City. Soc Behav Sci Greco-Persian. 2019;54(11):1682.
- 44. Hou L, Zhao M, Fan L, Cao B, Chen J, Cui Y, et al. One hundred twelve cases of 46, XY DSD patients after initial gender assignment: A short-term survey of gender role and gender dysphoria. Orphanet J Rare Dis. 2021;17(1):416-422.
- 45. de Freitas LD, Léda-Rêgo G, Bezerra-Filho S, Miranda-Scippa Â. psychiatric disorders in individuals diagnosed with gender dysphoria: Asystematic review. Psychiatry Clin Neurosci. 2020;74(2):99-104.
- Levitan N, Barkman C, Richter-Appelt H. Risk factors for psychological functioning in German adolescents With gender dysphoria: Poor peer relations and general family. Eur Child Adolescent Psychiatry. 2019;28(1):1487-1498.
- 47. Pulice-Farrow L, Cusack C, Galupo M. "Certain Parts of My Body Don't Belong to Me": Trans Individuals'

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- Descriptions of Body-Specific Gender Dysphoria. Sex Res Soc Policy. 2020;17:654-667.
- 48. Kaltiala-Heino R, Bergman H, Työläjärvi M, Frisén L. gender dysphoria in adolescence: current perspectives. Adolescent Heal Med. 2018;9(2):31-41.
- Karia S, Alure A, Dave T, Shah N, Sousa A De. Paranoia in patients with gender dysphoria: A clinical exploration. Indian J Psychiatry. 2018;59(4):2017-2018.
- Meybodi SS, Meybodi AM. Quality of Life, Suicidal Attempt and Satisfaction in Gender Dysphoria Individuals Undergone Sex Reassignment Surgery. Ann RSCB. 2021;25(6):4608-4614.
- 51. Meybod SS, Meybodi AM. Investigation of Axis 1Psychiatric Disorders in Patients with Gender Dysphoria along with Gender Reassignment Surgery: A Descriptive Cross-sectional Study in Iran. Ann RSCB. 2021;25(6):4615-4621.
- 52. Giordano S, Garland F, Holm S. Gender dysphoria in adolescents: Can adolescents or parents give valid consent to puberty blockers? J Med Ethics. 2020;47(5):324-328.
- Segev-Becker A, Israeli G, Elkon-Tamir E, Perl L, Sekler O, Amir H, et al. Children and adolescents with gender dysphoria in Israel: Increasing referral and fertility preservation rates. Endocr Pract. 2020;26(4):423-428.
- 54. Karalexi MA, Georgakis MK, Dimitriou NG, Vichos T, Katsimpris A, Petridou ET, et al. Genderaffirming hormone treatment and cognitive function in transgender young adults: a systematic review and meta-analysis. Psychoneuroendocrinology. 2020;119:104721.

- 55. Adu-Nti F, Gao X, Wu JM, Li J, Iqbal J, Ahmad R, et al. Osthole Ameliorates Estrogen Deficiency-Induced Cognitive Impairment in Female Mice. Front Pharmacol. 2021;12:1-16.
- van Heesewijk JO, Dreijerink KMA, Wiepjes CM, Kok AAL, van Schoor NM, Huisman M, et al. Long-Term gender-affirming hormone therapy and cognitive functioning in older transgender women compared with cisgender women and men. J Sex Med. 2021;18(8):1434-1443.
- 57. Sánchez-Fuentes MDM, de Araújo LF, Parra-Barrera SM, Fontes ÉRS, de Oliveira Santos JV, Moyano N. Transphobia and gender identity: Social representations of trans women from brazil and colombia. Cienc e Saude Coletiva. 2021;26(11):5793-5804.
- 58. Fairbairn C, Gheera M, Pyper D, Loft P. Gender Recognition and the Rights of Transgender People. House of commons. Commons Library Briefing, 2020. Avalaible: https://researchbriefings.files.parliament.uk/documents/CBP-8969/CBP-8969.pdf
- Patrick KL. Transgender identity and mental health in adolescence: a scoping review. Preprint. 2020:1-56.
- De Vries ALC, Doreleijers TAH, Steensma TD, Cohen-Kettenis PT. Psychiatric comorbidity in gender dysphoric adolescents. J Child Psychol Psychiatry Allied Discip. 2011;52(11):1195-1202.
- 61. Byne W, Karasic DH, Coleman E, Eyler AE, Kidd JD, Meyer-Bahlburg HFL, et al. Gender Dysphoria in Adults: An Overview and Primer for Psychiatrists. Focus (Madison). 2020;18(3):336-350.
- Nieves-Lugo K, Barnett A, Pinho V, Rueda-Saenz M, Zea M. Mental health of lesbian, gay, bisexual, and transgender people in Colombia. Am Phycol Assoc. 2019:99-111.