

Effect of Home-Based Vocational Skill Training to Improve Self-Esteem among Transgenders with Low Self-Esteem

Dr. Punitha .P ¹; Varshini .B ²

¹Department of Occupational Therapy, Assistant professor, Saveetha College of Occupational Therapy

²Occupational Therapist, Saveetha College of Occupational Therapy, Saveetha Institute of Medical and Technical Sciences, Saveetha Nagar, Thandalam, Chennai, Tamilnadu , India

Abstract

Background: Self-esteem is an individual's subjective judgment of their own self-worth, which includes views of self-respect, confidence, and positive or negative self-image. Home-based vocational skill training consists of structured programs designed to provide relevant and marketable skills that may be learned and utilized at home. These programs provide technical knowledge and hands-on training in a variety of trades or topics, encouraging individuals to advance their livelihoods or seek entrepreneurial opportunities. This strategy flourishes in an economic environment which acknowledges human worth and believes in every individual's capacity to advocate for their own well-being through occupation. This project intends to improve self-esteem through home-based vocational skill training among transgenders with low self-esteem. **Objective:** The study aims to determine the Effect of Home-based Vocational skill training to improve self-esteem among transgenders with low self-esteem. **Materials and Methods:** This was a quasi-experimental study, conducted in Chennai, India, that included thirty transgender participants with low self-esteem, who were divided into two groups: a control group (n=15) and an experimental group (n=15). Participants were aged between 20 and 35 years. The participants in the experimental group received home-based vocational skill training for 45 minutes in each session (3 sessions per week) for about 3 months. They received training for approximately 36 sessions. Meanwhile, the participants in the control group received their conventional occupational therapy for the same duration. The pre-test and post-test scores of the transgenders in both the groups were assessed using Rosenberg's self-esteem scale. Data analysis was analyzed using the Mann-Whitney U test and Wilcoxon signed-rank test. **Results:** The results indicated statistically significant differences between the control and experimental groups (p-value < 0.05). Specifically, the experimental group exhibited a more substantial improvement in self-esteem compared to the control group. The Rosenberg Self-Esteem Scale scores revealed that the control group's mean score was 13.13, whereas the experimental group's mean score was 19.07, with a p-value of 0.00*, following the 12-week training program. **Conclusion:** From this study, it was concluded that the Home-Based Vocational Skill Training was effective to improve self-esteem among transgenders with low self-esteem.

Key words: Home-based Vocational skill training, Self-esteem, Transgenders.

Introduction:

Self-esteem is an individual's overall positive evaluation of self, encompassing self-respect and a sense of worthiness. Self-esteem pertains to individual beliefs concerning their skills, abilities, and social interactions. Additionally, it is characterized as a comprehensive gauge of self-assessment, encompassing cognitive evaluations of overall self-worth and emotional responses tied to these overarching evaluations.¹ Self-esteem can encompass an individual's perception of their overall self or extend to specific facets, such as their feelings regarding social standing, racial or ethnic identity, physical attributes, athletic abilities, as well as their performance in academic or professional settings.² Self-esteem is defined as a realistic and appreciative evaluation of oneself. "Realistic" denotes an accurate and honest assessment, while "Appreciative" reflects positive feelings and self-acceptance.³ Self-esteem has two separate dimensions: competence and worth. Building upon these elements, self-esteem is "the experience of being capable of meeting life challenges and being worthy of happiness".⁴ Self-esteem is regarded as a relatively stable trait encompassing both motivational and cognitive dimensions.⁵ Self-esteem is a crucial indicator of performance, with the potential to predict both current and future behavior and responses.⁶

The affective model of self-esteem development posits that: (a) self-esteem emerges early in life in response to relational and contingent influences, and (b) once established, individuals with high self-esteem are able to nurture, protect, and rejuvenate their sense of self-worth.⁷ The development of self-esteem entails a protracted journey, intricately linked with the construction of self-image and self-awareness.⁸ Self-esteem can vary significantly, spanning from extremely positive to extremely negative.⁹ Individuals with elevated self-esteem typically exhibit traits such as the ability to positively influence others, resilience in facing novel situations, a high threshold of frustration, willingness to shoulder responsibilities, accurate assessment of situations, expression of self-regard. Individuals grappling with low self-esteem commonly experience feelings of worthlessness, inferiority, and emotional volatility, which can result in overall dissatisfaction with life. Furthermore, those with low self-esteem often exhibit a pervasive negative outlook towards various aspects, encompassing interpersonal relationships and personal situations. Low self-esteem in individuals associated with depression, aggression, reduced capacity to navigate challenges and diminished overall well-being. It is regarded as an experiential manifestation of social rejection.¹⁰ Low self-esteem is a detrimental condition that prevents individuals from recognizing their full potential. Individuals with low self-esteem tend to take fewer risks compared to those with high self-esteem. This behavior is attributable to the fact that individuals with low self-esteem often lack the self-protective resources necessary to defend against threats to their self-worth.¹¹

India is estimated to have between 500,000 and 700,000 transgender individuals, whose gender identity or gender expression differs from the sex assigned to them at birth.¹² Many transgender individuals in India are predominantly engaged in informal sectors such as sex work and street begging, while a fortunate minority secure low-wage positions at LGBTQ+ Non-Governmental Organizations or service-oriented establishments. The primary challenges confronting the transgender community include discrimination, unemployment, inadequate educational resources, homelessness, and limited access to healthcare facilities. Employment opportunities for transgender individuals remain restricted, with many facing transphobia, violence, or discrimination in workplace settings, accessing public accommodations, and obtaining healthcare services.¹³

Social isolation, including rejection by family and social networks, can significantly affect the mental and physical well-being of transgender individuals.¹⁴ Societal restrictions can impede transgender individuals' ability to pursue occupations that align with their gender identity, thereby hindering their gender affirmation.¹⁵ Perpetrators of hostility and discrimination against transgender individuals encompass a wide array of individuals and entities, including their own parents and siblings, friends, neighbors, community members, school and college authorities, employers, landlords, healthcare providers, clients, and many others.¹⁶

Vocational training entails specialized educational programs which offer people with the practical skills and knowledge required for employment in specific trades, crafts, or professions. This kind of training emphasizes procedural competence over theoretical or declarative understanding, ensuring that learners are proficient for their chosen employment choices. Home-based vocational skill training integrates an understanding of aesthetic perspective and psychology, facilitating clients to nurture internal self-awareness through participation in vocational activities in their own homes. This strategy flourishes in a social climate that values individual worth and believes in everyone's capacity to advocate for their own well-being through work. Vocational training based on Occupational Therapy principles, emphasizes hand jewelry, embroidery, knitting, crocheting, tailoring, quilling, weaving, and other crafts. These ventures have demonstrated significant improvements, enabling individuals to sustain themselves economically.¹⁷

Occupational therapy focuses on promoting well-being and independence through purposeful activities that help individuals maintain their sense of identity. It also provides support to those with decreased functional abilities due to psychological issues, giving them a renewed sense of purpose and helping them navigate challenges positively. Occupational therapists offer financial rewards to encourage engagement in tasks and provide meaning to activities. They work with individuals and communities to enhance

daily activities, either by modifying tasks or creating a suitable environment for better outcomes.¹⁸ Home-based vocational skill training, facilitated by occupational therapists, helps individuals with depression, isolation, and low self-esteem regain independence. This training process supports individuals in becoming self-sufficient once again.

Materials and Methods:

The study was ethically approved by the Institution Scientific Review Board of Saveetha College of Occupational Therapy (SCOT/ ISRB/ 045/ 2023) and was conducted at the Inba Ignatius Trans Shelter in Chennai, India. A quasi-experimental quantitative study design was used and the study involved 30 transgender participants with low self-esteem, aged 20 to 35 years. Participants were divided into an experimental group and a control group, with 15 individuals in each group. The experimental group received home-based vocational skill training consisting of 45-minute sessions, held three times per week, over a period of approximately 3 months, totaling around 36 sessions. The control group received conventional occupational therapy for the same duration. Self-esteem levels for both groups were measured using Rosenberg's Self-Esteem Scale through pre-test and post-test assessments.

Participants:

The study involved thirty transgender individuals with low self-esteem, selected according to the inclusion criteria. Self-esteem was assessed using a 10-item subset of the Rosenberg Self-Esteem Scale. Participants were considered vulnerable to low self-esteem if they scored below 15 on the Rosenberg self-esteem scale. Individuals with psychiatric disorders and those aged below 20 or above 35 were excluded from the study.

Instrument:

The Rosenberg Self-Esteem Scale is a 10-item, Likert-type, self-report scale originally designed to collect information on people's feelings of self-esteem and self-worth. The scale assesses state self-esteem by prompting respondents to reflect on their current emotional state. It includes five positively worded items and five negatively worded items. The scale provides a brief, accurate and meaningful way to measure global self-esteem. To score the items, assign a value to each of the 10 items as follows: 1) For items 1, 2, 4, 6, 7: Strongly Agree = 3, Agree = 2, Disagree = 1, and Strongly Disagree = 0. 2) For items 3, 5, 8, 9, 10 (which are reversed in valence): Strongly Agree = 0, Agree = 1, Disagree = 2, and Strongly Disagree = 3. The scale ranges from 0 - 30, with 30 indicating the highest score possible, with scores between 15 and 25 indicating a normal range. Scores below 15 suggest the presence of low self-esteem. The original sample used to develop the scale in the 1960s included 5,024 high school juniors and seniors from ten randomly selected

schools in New York State, and the scale was scored as a Guttman scale.¹⁹ The scale demonstrates high reliability, with test-retest correlations generally ranging from 0.82 to 0.88, and Cronbach's alpha values ranging from 0.77 to 0.88 across various samples. The internal consistency was 0.77, and the minimum Coefficient of Reproducibility was 0.90.²⁰

Procedure:

Followed by, Ethical approval from the Institutional Scientific Review Board of Saveetha College of Occupational Therapy, informed consent was obtained from all participants as well as from the relevant center. The procedure was thoroughly explained to each participant. A total of 30 transgender individuals with low self-esteem were recruited and randomly assigned to either the control group (n=15) or the experimental group (n=15). Both groups participated in 45-minute sessions three times a week for a duration of 12 weeks. Pre-test data was collected using the Rosenberg Self-Esteem Scale. Each session commenced with five minutes of warm-up exercises. The control group received conventional occupational therapy interventions, which included role play, relaxation techniques such as deep breathing and meditation, as well as group activities. Additionally, the control group engaged in recreational activities and art journaling, encompassing drawings, paintings, collages, written reflections, and life skills training in areas such as communication, problem-solving, and social skills.

The experimental group underwent a 45-minute intervention consisting of home-based vocational skill training. Each session included a variety of activities designed to enhance self-esteem among transgender individuals, such as bead jewelry and bracelet making, candle production, hand soap creation, woolen bag crafting, silk thread bangles, woolen pouches, wall hangings, basket weaving, key hanger creation, yarn balloon lamps, positive quote displays, nature frames, desktop organizers, filigree earrings with polymer clay, embroidered handkerchiefs, plaster of Paris flower pots, fabric marigold flower door hangings, woolen door hangings, and pearl door hangings. After completing 36 sessions, post-test data was collected using the Rosenberg Self-Esteem Scale.

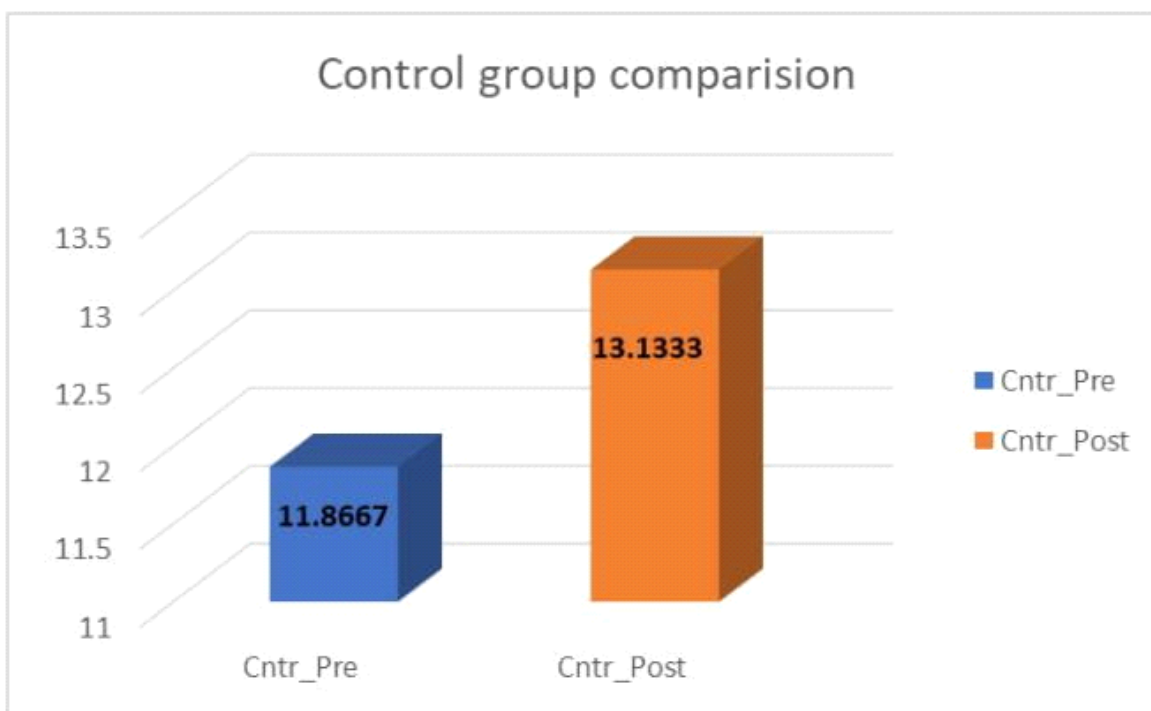
Results and Statistical analysis:

The statistical analysis was done with the help of IBM SPSS version 23.0. Since the samples belonged to sample size (30), non-parametric method was used to test the statistical difference between pre-test and post-test scores of control group and experimental group. Wilcoxon signed-rank test and Mann Whitney U test were analyzed in finding the hypothesis being tested identifies whether there exists statistically significant difference in consideration of the treatment given. An alpha level of $P = 0.05$ was measured to be statistically significant.

Table 1: Statistical analysis of pre- test and post- test in control group

Test	Mean	SD	N	Z value	p value
Cntr_Pre	11.8667	1.0601	15	-3.578	0.00*
Cntr_Post	13.1333	0.83381	15		

* Significant at 5% alpha level

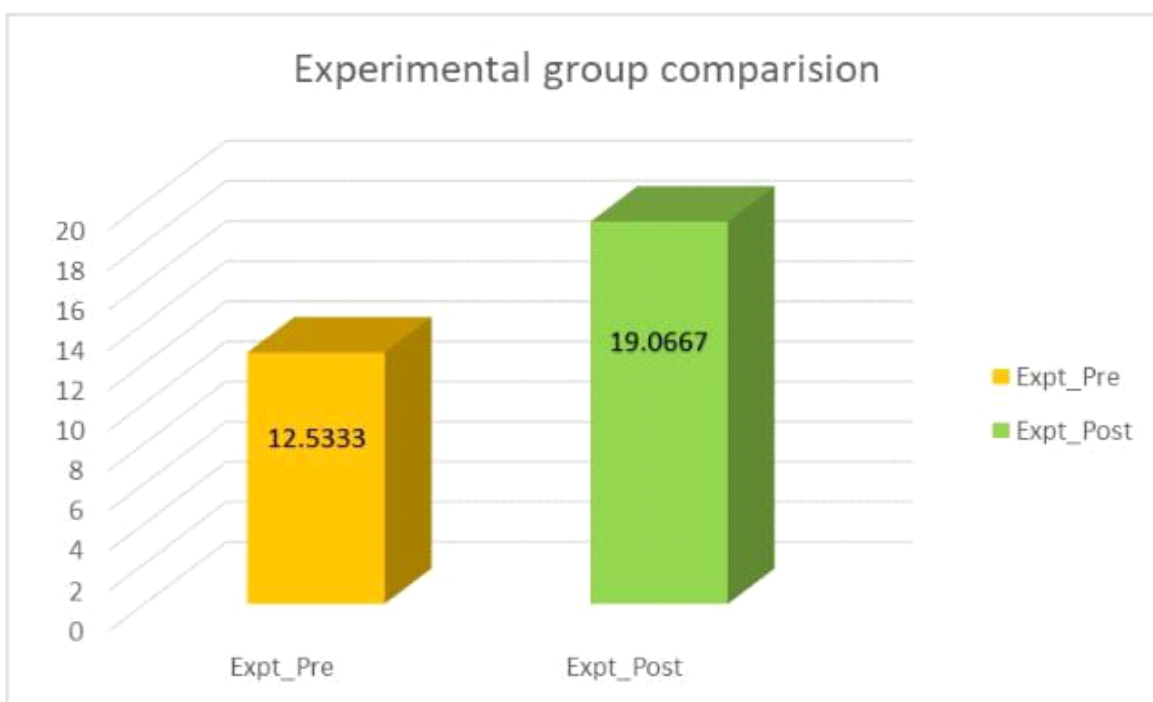
Figure 1: Comparison between pre-test and post-test of the control group

Data from Table 1 and Figure 1 display the statistical analysis of pretest and post-test results for the control group. With a p-value of 0.00, which is less than 0.05, the results show a statistically significant improvement in the control group's Rosenberg Self-Esteem scores, indicating that conventional occupational therapy significantly enhanced self-esteem.

Table 2: Statistical analysis of pre- test and post- test in experimental group

Test	Mean	SD	N	Z value	p value
Expt_Pre	12.5333	1.24595	15	-3.473	0.001*
Expt_Post	19.0667	1.38701	15		

* Significant at 5% alpha level

Figure 2: Comparison between pre-test and post-test of the experimental group

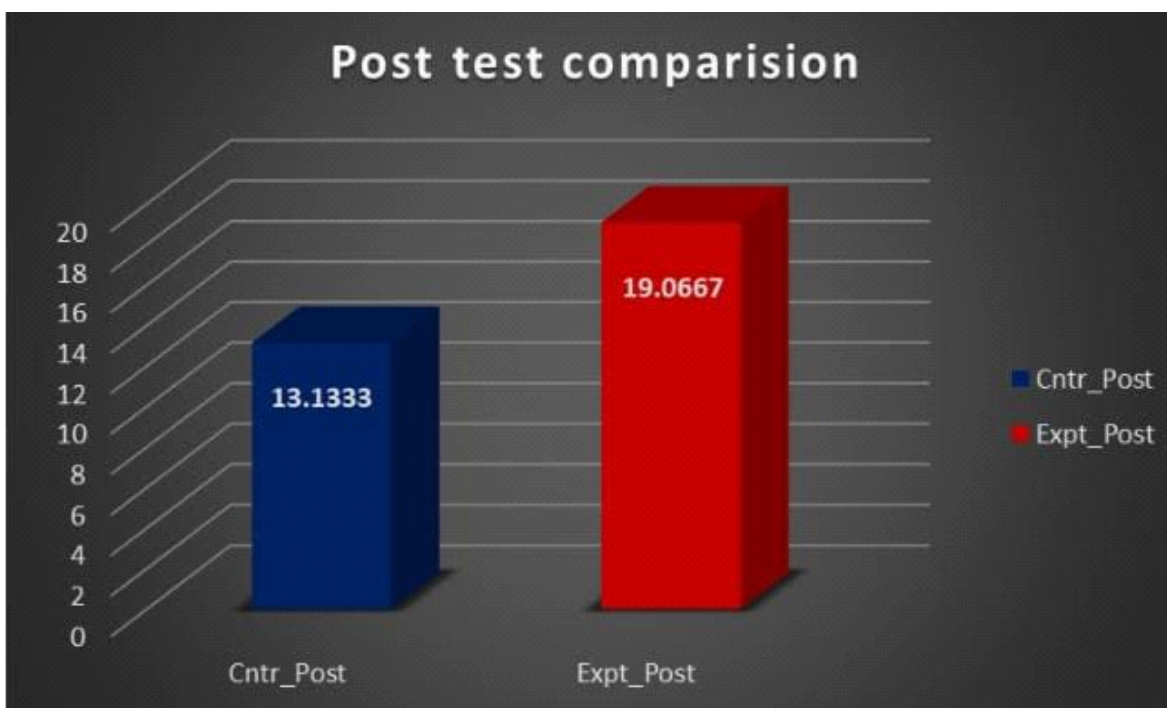
Data from Table 2 and Figure 2 present the statistical analysis of pretest and post-test results for the experimental group. The p-value of 0.001, which is less than 0.05, indicates a highly significant improvement in the experimental group's Rosenberg Self-Esteem scores. This suggests that home-based vocational skill training significantly enhanced self-esteem in the experimental group.

Table 3: Statistical analysis between the post- test scores of the control and experimental group

Group	Mean	SD	N	Z value	p value
Cntr_Post	13.1333	0.83381	15	-4.645	0.00*
Expt_Post	19.0667	1.38701	15		

*Significant at 5% alpha level

Figure 3: Comparison between post-test of control and experimental group



Data from Table 3 and Figure 3 compare the post-test scores of the control and experimental groups. With a p-value of 0.00, which is below 0.05, there is a highly significant difference in post-test scores between the Experimental and Control group. This indicates that home-based vocational skill training led to greater improvement in the experimental group compared to the control group.

Discussion:

The study aimed to determine the effect of Home-Based Vocational Skill Training on improving self-esteem among transgender individuals with low self-esteem, aged 20-35, over a 3-month period. They were randomly assigned to an experimental group or a

control group, with 15 participants in each. Both groups were assessed using the Rosenberg's Self-Esteem Scale. The experimental group received home-based vocational skill training (3 sessions per week, 45 minutes each), while the control group received conventional occupational therapy. Post-intervention evaluations were conducted, and results were analyzed. Table 1 and Figure 1 present the statistical analysis of pretest and post test results for the control group on the Rosenberg Self-Esteem Scale. The significant improvement observed, with a p-value of 0.00*, indicates the effectiveness of conventional occupational therapy in enhancing self-esteem among transgender individuals. These findings align with a study evaluating mindfulness training's impact on social adjustment, self-esteem, and hope in transgender individuals. This study involved 14 participants from a Tehran Municipality social support center, who were randomly assigned to an experimental group receiving eight mindfulness sessions or a control group. The mindfulness training significantly improved social adjustment, self-esteem, and hope in the experimental group.²¹

Table 2 and Figure 2 shows the statistical analysis of the pretest and posttest of Rosenberg self-esteem scale of the experimental group. Since p value of 0.001* is less than 0.05, there is highly significant improvement between the pre and post-test of the experimental group. This indicates that Home-based vocational skill training improved self-esteem among transgenders with low self-esteem. This study aligns with existing research on vocational training for farm women, which found that participants who attended multiple Krishi Vigyan Kendra sessions and launched candle-making ventures experienced substantial income gains.²²

Table 3 and Figure 3 present the post-test statistical analysis comparing the control and experimental groups. The significant difference, with a p-value of 0.00*, demonstrates that Home-Based Vocational Skill Training significantly outperforms conventional occupational therapy. This finding aligns with existing research on women's empowerment through vocational training, which suggests that economically disadvantaged women favor income-generating programs, highlighting the need for policies to improve women's access to wage employment opportunities.²³

Limitations:

However, this study has few limitations: it was conducted with a small sample size and over a relatively short duration. Future researches should address these limitations by employing a larger sample size and extending the duration of the study, and should consider investigating the phenomena in different contexts.

Conclusion:

As per results, obtained from this study showed a highly significant improvement in the experimental group, suggesting home-based vocational training can improve self-esteem among transgenders with low self-esteem.

Conflict of Interest:

The authors have no potential conflicts of interest to disclose.

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