This study examined the psychological profile of effeminate students in comparison with matched-groups of normal male and female students. Lately, there has been an increase in the number of effeminate males in schools, institutions of higher learning and in the wider Malaysian society. As such behavior may be related to later transsexuality and homosexuality, which is against the religious beliefs of all the major religions in Malaysia, this problem is gaining public concern. As a background to the study, an overview of the relevant literature is first presented.

Transsexualism is an identity disorder in which a person prefers to adopt, exhibit, live and be accepted as a member of the opposite sex. They are known by different names in different cross-cultural settings. In Malaysia, although they are popularly known as Mak Nyahs, other terms are also used (e.g., pondan, bapok, darai). Most Malaysians do not accept them, although they are tolerated to an extent. They are usually looked upon as sexual deviants and not recognized as individuals with rights. Most are faced with an identity crisis; they cannot associate themselves with males because they do not feel comfortable with the role of the male gender and at the same time they are unable to play the female role because they lack the true characteristics of females. Normal males are not
attracted to them and society does not recognize them as females. They may identify
themselves as the ‘third gender’, but this is not recognized in Malaysia. In many cases,
they are stigmatized because they are neither males nor females. Therefore, they have
difficulty adjusting and participating in mainstream society. They are viewed as a
significant social problem.

There have only been a handful of studies on transsexuals in Malaysia. This is due to
the stigmatization associated with being Mak Nyahs, and the difficulty of getting
respondents. Usually, the majority of Mak Nyahs are uneducated males and this condition
does not augur well for their livelihood, where most are caught in the sex trade. This trend
is changing, and many cases are now reported within institutions of higher learning.

The study by Khairuddin, Low and Wong (1987) of 73 transsexuals in the Federal
Territory on the lifestyle of Mak Nyahs indicated that they were mostly males. Birth order
had no bearing on being a Mak Nyah. Most had at least a secondary education and were
employed in various jobs, many working as prostitutes. Most started cross-dressing
during their adolescent years at home. Many of their parents had come to accept their
transsexualism. Sisters were more accepting of such behavior than brothers and many had
their first sexual intercourse during adolescence with predominantly male partners. All
had received medication (hormonal pills/injections) in an attempt to enhance their
feminine characteristics. Teh and Khartini’s (2000) findings on a nationwide sample of
507 transsexuals yielded similar results.

The study by Woon (1987) of 50 male transsexuals who sought sex reassignment
operation (SRO) at the University Hospital between 1972–1986 highlighted some of the
problems associated in the diagnosis, treatment and rehabilitation of transsexuals.

In contrast to these studies, which used retrospective methods where adult
transsexuals were asked questions regarding past experiences, Sharifah Muzlia (1997)
compared “feminine” and “masculine” boys with respect to their sexual identity and
emotional disturbance. 35 feminine boys were matched with 35 masculine boys (age
range between 13–19 years) and results showed that feminine boys tend to be involved in
feminine-typed interests since young, had higher risk of developing a feminine gender
identity, showed more homosexual orientation, and reported higher levels of emotional
disturbance than masculine boys. The findings suggested the importance of understanding
this condition and that it might start at an early age. In line with societal values and
expectations, intervention in terms of reorienting their gender identity may be provided if
this is what they want.

Characteristics of males, females and effeminates

It is accepted that there are biological and behavioral differences between males and
females. For example, hormones released during puberty are responsible for the
distinguishing physical features of the sexes. Male hormones generate masculine
secondary sex characteristics and female hormones generate feminine secondary sex
characteristics. While androgens help build muscle mass in males, estrogens aid the
development of soft tissues and fat in females. Males and females also differ mentally.
While males tend to be better at solving analytic problems, females are more articulate and
creative (Halpern, 1992). Males are usually more forceful, dominant, competitive, and self-assured. Females, on the other hand, tend to defer to males and to each other; they empathize, support and cooperate more than challenge and compete. Research also shows that women gossip and spread rumors and shuns potential competitors and such stereotypes are evident early in life (Basow, 1992; Eagly, 1987).

Studies on gender-disturbed boys showed that they exhibit feminine motor behavior in throwing a ball, walking, running and telling a story which leads to their being teased and called sissy by peers. In addition, scape-goating, ridicule and verbal abuse are common (Green, Neuberg, & Finch, 1983; Rekers, Bentler, Rosen, & Lovaas, 1977). As a result, most of these boys suffer from lowered self-esteem, depression, social conflict, and other psychological problems (e.g., Hetrick & Martin, 1987; McIntyre, 1992).

Effeminate males are also aware of their attraction to males. They seldom mention or express attraction to females. Their attraction to individuals of the same sex violates their previous understanding of morality and sexuality, which often cause emotional distress, usually involving depression and anxiety. Effeminate males avoid masculine activities, but prefer girls’ activities.

Many studies on the characteristics of transsexuals clearly show that they are highly dissatisfied with their body image (Lindgren & Pauly, 1975). They often express their desire to be girls, wish that they had been born the opposite gender and feels uncomfortable being boys.

The present study

The present study extends the work of Sharifah Muzlia (1997) by using an older sample of effeminates ranging from 19–24 years of age. During this period of late adolescence and early adulthood, physical and hormonal changes are accompanied by questions regarding one’s gender identity and sexual orientation. It is a period of searching, learning and contemplating on one’s niche in life. One is easily influenced by novel ideas and peers, and susceptible to changes. Because identity may to some extent be rather fluid and not yet fully formed at this stage, this study may provide some insight into various aspects of the self. And, as effeminates are not yet full-blown transsexuals, knowledge of their psychological profile may be helpful in understanding more about their condition. In addition, contrary to past studies, respondents are university students; an elite group and may be very different from other groups of effeminates. They may be more resourceful, capable and are better able to decide for themselves regarding their needs.

In this study, the psychological aspects of effeminate students’ behavior are emphasized. Past studies have usually examined the social or environmental factors in effeminate behavior and have largely ignored the psychological components. These effeminates’ behavior is then compared with matched-groups of normal male and female students. It is hypothesized that there will be differences between effeminates and normal males and females on the chosen psychological measures. To be more specific, because effeminates want to look and be like women, their perception of their body image, gender characteristics, way of thinking will be more similar to the female, rather than male
students. Furthermore, due to the conflict between their sexual and gender identities, they have been shown to report lower self-esteem and to experience worse mental health compared to normal males and females. Therefore, on the basis of previous findings, the following hypotheses are examined.

H1: Effeminates’ perception of their body image will be more similar to female, rather than male students;

H2: Effeminates will be more similar to females, than males in terms of their gender characteristics;

H3: Effeminates’ style of thinking will be more similar to female, rather than male students;

H4: Effeminates’ self-esteem will be lower than those of male and female students; and

H5: Effeminates will experience lower levels of mental health than male and female students.

METHOD

Participants and procedure:

Participants were students of a Malaysian university. Initially, researchers sought the help of an effeminate male student and he was instrumental in distributing the questionnaires to other effeminate males. Altogether 45 effeminate males completed the questionnaire. On the basis of the effeminates’ demographic background (age, place of residence and majors), matched samples of normal males (n=45) and females (n=45) were selected. The age range of the students was between 19–24 years (Mean=21.34 years, SD=1.10 years). The majority of the students, 62.2%, were majoring in one of the Human Science courses (e.g., Psychology, Sociology, Political Sciences or Communication). Of the remainder, 15.5% were doing Economics, 8.9% Islamic Studies, 6.7% Law and 6.7% other courses. Most of the students were from big towns (75.6%) rather than rural areas (24.4%).

The questionnaires were administered in groups to the students in their original version (in this particular university, English is the official language used and most students have a reasonable level of proficiency in the language).

Measures:

Body Image Scale (BIS). Lindgren and Pauly (1975) constructed the Body Image Scale to assess transsexuals’ attitude towards their bodies. This scale was originally intended as an additional tool for clinicians in evaluating a transsexual’s request for sex role reassignment. It was meant to measure whether the gender-disturbed males would feel uncomfortable with their bodies in the process of developing a feminine gender identity. The 26 items were compiled from previous research and were shown to be highly valid and consistently related to gender disturbance.

Participants respond to each item on a five-point scale (1–5) from “very unsatisfied” to “very satisfied”, with higher scores indicating higher satisfaction. Alpha coefficients for the present sample were .69 for effeminates, .92 for females and .97 for males.

Bem Sex Role Inventory (BSRI). The BSRI was developed by Bem (1974) to measure psychological androgyyny. Androgyyny refers to the extent to which a person, regardless of sex, displays masculine or feminine characteristics depending on the situation, rather than behaving in a consistently feminine or masculine manner according to that person’s biological sex. The BSRI identifies four groups of people: those whose scores are high on traditional “masculine” characteristics and low on traditional “feminine” ones; those high on “feminine” and low on “masculine” items; those high on both; and those low on both.

The BSRI has 60 items made up of 20 stereotypically feminine characteristics, 20 masculine ones and 20 filler items. Participants are asked to rate the extent to which each of these items applies to them, using a seven-point scale (1–7) from “never or almost never true” to “always or almost always true”. Three scores
are calculated; a masculinity score, a femininity score, and an androgyny score (the mean score of the masculine items subtracted from the mean score of the feminine items). A high positive score means that the participant is very high on femininity, a high negative score means very high on masculinity, and the closer the score is to zero, the more the androgyny. For the present sample, the internal consistency of the items as measured by Cronbach alphas were .90 for effeminates, .90 for females and .91 for males.

Self-esteem scale. Rosenberg developed this scale in 1965 to measure adolescent’s global feeling of self-worth or self-acceptance (Robinson, Shaver, & Wrightsman, 1991). The scale has ten items with a four-point scale ranging from strongly agree to strongly disagree. Reliability tests indicated high coefficient correlation (reproducibility coefficient=.90, test-retest=.85 over two weeks) and validity tests indicated the same. Since all the items revolve around liking and/or approving of the self, the scale probably measures the self-acceptance aspect of self-esteem more than it does other factors. For the present sample, the internal consistency of the items as measured by Cronbach alphas were .90 for effeminates, .67 for females and .65 for males.

The Brain Wiring Test. This test with 30 items was developed by Pease and Pease (1998) to measure the thinking styles of males and females. Sample items of the test include “Item 1. When it comes to reading a map or street directory you: (a) have difficulty and often ask for help, (b) turn it around to face the direction you’re going, (c) have no difficulty reading maps or street directions; Item 18. A friend has a personal problem and has come to discuss it with you. You: (a) are sympathetic and understanding, (b) say that problems are never as bad as they seem and explain why, (c) give suggestions or rational advice on how to solve the problem”. The authors have provided scoring keys to score these items for males and females and according to these keys, masculine thinking usually scores below 150, while feminine thinking scores higher than 180. Scores between 150–180 show compatibility of thought for both sexes, or having a foot in both sexual camps. These people do not show a bias for either male or female thinking and usually demonstrate flexibility in thought. The authors, however, did not provide any psychometric properties of the test. In the present sample, alpha values for the scale were .94 for effeminates, .72 for females and .65 for males.

General Health Questionnaire. The General Health Questionnaire (GHQ; Goldberg, 1978) is a self-administered screening instrument designed to detect current, diagnosable psychiatric disorders. It identifies two main classes of problem: (a) inability to carry out one’s normal ‘healthy’ functions, and (b) the appearance of new phenomena of a distressing nature. It focuses in breaks in normal functioning rather than on life-long traits; therefore it only covers personality disorders or patterns of adjustment where these are associated with distress. The GHQ is also designed to identify short-term changes in mental health (depression, anxiety, social dysfunction and somatic symptoms). It does not make clinical diagnoses and should not be used to measure long-standing attributes. Although the main version of the GHQ consists of 60 items, several shorter ones are also available (30-, 20-, and 12-item versions).

The 12-item alternative was used in the present study. The measure used a four-point scale for distress symptoms with higher scores indicating higher levels of distress. The scale has been validated and shown to have good psychometric properties (Banks, 1983; Banks, Clegg, Jackson, Kemp, Stafford, & Walls, 1980). Cronbach alpha values for the present sample were .94 for effeminates, .89 for females and .88 for males.

RESULTS

Several one-way analyses of variance (ANOVA) were used to analyze the data. The means and standard deviations of the scales are presented in Table 1. Table 1 also shows the results of the one-way ANOVAs between the groups on the selected measures.

For the Body Image scale, a statistically significant mean difference was found between the groups ($F(2,131)=10.51, p<.05$) with male students having the highest mean, and effeminate males, the lowest. The mean of the effeminates was similar to the females. A post-hoc Scheffe test was carried out to examine all possible pair-wise comparisons between the means. The results showed no difference between effeminate males and females but there was a significant difference between effeminates and males ($t=16.09,$
The result also showed a significant difference between males and females ($t=13.04, p<.05$). Thus, effeminate's perception of their body image is similar to that of the females but not the males.

A statistically significant difference between the groups was also found for the Bem Sex Role Inventory ($F(2,132)=8.77, p<.05$). The males had an average Femininity score of 4.76, a Masculine score of 4.89, and an Androgyny score of –.13; suggesting that these males, although they score higher on masculine characteristics, as expected of males, also score high on androgyny (i.e., they tend to perform well on both traditional masculine and feminine tasks). Females had an average Feminine score of 5.07, a Masculine score of 4.44, and an Androgyny score of .63, implying that these females tend to perform well only on traditionally female sex-typed tasks. Effeminate males, however, had an average Feminine score of 4.95, a Masculinity score of 4.72, and an Androgyny score of .23, suggesting that they are more similar to the females in terms of their characteristics. However, their androgyny score was not as high as that of the females suggesting that they are more androgynous than normal females.

A post-hoc Scheffe test was again carried out to examine for pair-wise differences between the groups. No difference was observed in all the pair-wise comparisons among the three groups.

On the Self-Esteem scale a significant difference between the means of the three

<table>
<thead>
<tr>
<th>Measures</th>
<th>Group</th>
<th>Mean</th>
<th>SD</th>
<th>Minimum score</th>
<th>Maximum score</th>
<th>$F$ values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body Image</td>
<td>Effeminates</td>
<td>84.68</td>
<td>17.57</td>
<td>59</td>
<td>130</td>
<td>10.51*</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>87.73</td>
<td>13.85</td>
<td>60</td>
<td>124</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>100.78</td>
<td>20.80</td>
<td>58</td>
<td>130</td>
<td></td>
</tr>
<tr>
<td>Sex Role Inventory</td>
<td>Effeminates</td>
<td>.23</td>
<td>1.08</td>
<td>–2.00</td>
<td>1.95</td>
<td>8.77*</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>.63</td>
<td>.70</td>
<td>–.40</td>
<td>2.55</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>–.13</td>
<td>.75</td>
<td>–2.10</td>
<td>1.60</td>
<td></td>
</tr>
<tr>
<td>Self-esteem</td>
<td>Effeminates</td>
<td>13.64</td>
<td>5.07</td>
<td>10</td>
<td>34</td>
<td>30.71*</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>19.84</td>
<td>3.96</td>
<td>12</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>20.18</td>
<td>4.25</td>
<td>14</td>
<td>33</td>
<td></td>
</tr>
<tr>
<td>Brain wiring</td>
<td>Effeminates</td>
<td>172.61</td>
<td>62.01</td>
<td>40</td>
<td>300</td>
<td>30.80*</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>171.33</td>
<td>45.76</td>
<td>60</td>
<td>300</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>103.78</td>
<td>29.45</td>
<td>35</td>
<td>160</td>
<td></td>
</tr>
<tr>
<td>GHQ</td>
<td>Effeminates</td>
<td>7.14</td>
<td>4.68</td>
<td>2</td>
<td>32</td>
<td>15.19*</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>12.64</td>
<td>5.54</td>
<td>4</td>
<td>27</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Males</td>
<td>12.96</td>
<td>6.37</td>
<td>0</td>
<td>32</td>
<td></td>
</tr>
</tbody>
</table>

*p<.05
groups was found ($F(2,132)=30.71, p<.05$). The results indicated that effeminate males had the lowest mean compared to female and male students. A post-hoc Scheffe test showed significant differences between effeminates and males ($t=-6.53, p<.05$) as well as between effeminates and females ($t=-6.20, p<.05$). However, no difference was observed between males and females.

The one-way analysis of variance for the Brain Wiring Test showed a significant difference between the three groups of students ($F(2,132)=30.80, p<.05$) with effeminates having the highest mean and male students the lowest. The mean for the female students was very similar to the effeminates. The results of the post-hoc Scheffe test indicated no difference between effeminates and females, but significant differences were observed between effeminates and males ($t=68.84, p<.05$), and between female and male students ($t=67.56, p<.05$). Thus, effeminates seemed to be more similar to females in terms of their thinking style.

Table 2 presents the breakdown of the scores of the three groups. It can be seen that no males score above 160, in line with the prediction that males’ thinking style usually scores below 150 (Pease & Pease, 1998). The range of scores of the females and effeminate males is wider, ranging from 21 to 300, implying that their thinking can be considered both masculine and feminine.

<table>
<thead>
<tr>
<th>Scores</th>
<th>Effeminates</th>
<th>Females</th>
<th>Males</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–20</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>21–40</td>
<td>1</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>41–60</td>
<td>2</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>61–80</td>
<td>3</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>81–100</td>
<td>1</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>101–120</td>
<td>6</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>121–140</td>
<td>5</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>141–160</td>
<td>3</td>
<td>13</td>
<td>0</td>
</tr>
<tr>
<td>161–180</td>
<td>2</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>181–200</td>
<td>9</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>201–220</td>
<td>9</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>221–240</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>241–260</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>261–280</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>281–300</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
A significant difference was found between the three groups on the GHQ ($F(2,132)=15.19, p<.05$), with males having the highest mean followed by females and effemines. The results of the post-hoc Scheffe test indicated significant differences between effemines and males ($t=5.82, p<.05$) and between effemines and females ($t=5.51, p<.05$), but no difference between females and males. Thus, contrary to prediction, effemines had the lowest level of psychological distress.

**Discussion**

The results showed that effeminate students were similar to females in terms of perceptions of body image, thinking, and gender characteristics. However, they are more androgynous than normal female students. As predicted, effemines had the lowest level of self-esteem. However, contrary to prediction, they had the lowest level of psychological distress. Each of these findings is discussed below.

As predicted, effemines had similar scores as the females on the Body Image Scale and these scores were significantly different from the males. Both groups were less satisfied with their body image than the males. Effeminate males on campus are still in the process of developing feminine characteristics and are not yet full-blown transsexuals. At the same time, they cannot expose themselves too much in public because of certain rules and regulations that they have to follow as male students. Thus, although they may want to be like female students, they need to be modest in outlook lest they be caught. Some are taking hormones to make them more like females in physical appearance but they are still seen as categorically males by others. As such, their dissatisfaction with their body image is high because they desire to be like females but they are still perceived as males by others. This then will also affect their self-concept.

Why should normal female students also be dissatisfied with their body image? There are a number of factors to explain for this phenomenon, but the most important is exposure to the media concerning what constitutes femininity and female beauty. Males, on the other hand, are less affected by this concern on body image.

The results from Bem’s Sex Role Inventory showed (i) male students to have the highest androgyny scores, but the negative direction of this scores showed a general trend towards masculinity; (ii) female students had a positively moderate score on “femininity” implying that they are relatively high on feminine characteristics, and (iii) effemines’ androgyny scores tended towards feminine, rather than masculine characteristics. Thus, while effemines are biologically males in their sex, their inclinations are more towards the feminine rather than masculine characteristics. Although their femininity score is not as high as the female students, the trend towards femininity is already there. In addition, the androgyny score indicates that they are more likely than normal female students to demonstrate both masculine and feminine characteristics depending on the situation.

Surprisingly, the results indicate that the normal male students are more androgynous than female students. The females, on the other hand, seem to fit the stereotypical feminine characteristics.
Referring to self-concept as what an individual knows about himself or herself and what he or she thinks about the self (Klein, 1995), effeminate students may be caught in a dilemma regarding their roles. They may be in doubt about their role as men and uncertain what they have to do if they are to be women, although they may want to be like women. Thus they still have a foot in each gender domain. This may also explain why self-concept does not necessarily reflect reality in the sense that a person may be recognized as a man but views himself a woman. In many cases, people’s observations of their own behavior are not entirely objective and therefore, the general tendency is to distort reality in a positive direction such as by behaving in the way wished by the self.

As expected, effeminate students’ thinking style tends towards the feminine, rather than the masculine. The males’ thinking style is significantly different from that of the effeminate and female students. An interesting observation from the frequency analysis showed a number of effeminate males scoring above 180 \((n=22)\), in contrast to the normal males where none had scores exceeding 160. According to Pease and Pease (1998), the higher the score is above 180 for a man, the greater the chance that he will be gay.

As predicted, effeminate students had the lowest level of self-esteem. This finding is consistent with past studies (e.g., Hetrick & Martin, 1987) and is to be expected considering their dissatisfaction with their body image and uncertainty with self. However, the finding that they had the lowest level of mental health is contrary to prediction. Considering their low satisfaction scores on the Body Image scale, which is reflected in their low self-esteem scores, it was expected that they would have reported high, rather than low distress. Several possible explanations for this discrepancy are offered. These effeminate students know that this study is measuring their perceptions to certain behaviors, so they may not be telling the truth. Another possibility is that effeminate students receive a lot of support from each other. These students normally tend to stay and do things together as well as be with each other more than normal students. This is so because normal students do not want to associate much with them. In doing so, this togetherness provides a sense of belongingness that tends to protect them from adverse interactions with others. This cohesiveness also helps them when they are faced with problems, either academic or personal ones. Most normal students on campus do not have such a close-knit group of friends who are there for them all the time. Such close support has been shown in past studies to buffer and protect people in adverse conditions (e.g., Cohen & Syme, 1985; Cohen & Wills, 1985). A similar process may be happening in effeminate students.

Although this latter finding is contrary to the prediction made, after considering their lifestyle on campus, the environment is seen to protect and cocoon them from others. While students in general have a negative perception towards effeminate students, they are mostly tolerated and left on their own. Being on their own has given them the freedom to do, as they like without much interruptions from others. The campus then, has become a safe haven for them.

The implications of these findings to the society need to be considered. In Malaysia, as mentioned earlier, all religious groups condemn transsexuality and homosexuality. As these conditions do not mushroom overnight in individuals, but may initially start as
effeminate behavior, the present study was carried out with the aim of examining whether there are differences between effemimates and normal males and females aged from 19 to 24 years. The results showed that these effeminate students were more similar to females than males in a number of characteristics. Although they reported low levels of self-esteem, they had better mental health scores than normal students. This latter point is important because it implies that the well-being of these students is good despite having low self-esteem and being dissatisfied with some aspects of themselves. Thus, they may be inclined to continue with this behavior. And, as they are well educated, they may not have as much difficulty in getting jobs as opposed to those with lesser means.

It is difficult to be fully objective in this situation. On the one hand, as researchers, we seek to understand this phenomenon (its nature, how it starts, how it affects and implicates upon the individual, the immediate family members and others, etc.), but on the other hand, having seen that these individuals are quite satisfied with their condition, should we impose our values and standards on them and force them to change? As mentioned earlier, because these individuals are educated, they will be able to fend for themselves and know their constitutional rights as individuals in society. At the same time, having a supportive network group is also beneficial. Thus, although it will be difficult for the general Malaysian public to accept them due to religious and traditional values of society, the findings of the present study suggest that effemimates are here to stay. Of course, counseling and other forms of rehabilitation techniques will only be offered to those who request for them.

The findings of this study cannot be generalized to other groups of effemimates due to the nature of the sample. As university students, these effemimates are an elite group and they may be very different from the other groups of effemimates studied before. Thus, more studies should be carried out not only on males of this age group who are university students, but also those who fail to enter institutions of higher learning. In addition, other age groups need also be considered, including those younger ones still in schools and older ones in society to compare their psychological profiles. Although the psychological profile of effemimates is more similar to females, there are also differences.

REFERENCES


*(Manuscript received April 18, 2003; Revision accepted October 17, 2003)*