

Perceptions of Senior Highschool Students on Sex Change

RESEARCH ARTICLE

Cheryl A. Langit¹, Rhoda Marie A. Carbonel², Jaleh V. Gacayan³

¹Senior High School,
University of Baguio, Baguio City,
Philippines
cheryllangit@e.ubaguio.edu
0000-0001-9809-0419

²School of Teacher Education and Liberal
Arts, University of Baguio, Baguio City,
Philippines
rhodacarbonel@e.ubaguio.edu

³School of Natural Sciences,
University of Baguio, Baguio City,
Philippines
jlhgacayan@e.ubaguio.edu

Abstract

With the advent of gender equality worldwide, more and more people are now coming to terms with expressing their identities – be it heterosexual or homosexual. It is no longer taboo to 'come out,' rather what is encouraged is the expression of the real self. As such, young people's perceptions are essential because they voice out their thoughts on seemingly controversial topics. This study aimed to determine the views of the Senior High School students about themselves as to their gender identity, to know factors that influenced such perception, and to know their thoughts about sex change. The study intends to make the academic community a safe space for young people who belong to the LGBT++ community. The qualitative descriptive research design was primarily used in the study. It involved thirty Grade 12 Senior High School Students of the University of Baguio who were asked to answer an open-ended questionnaire. The researchers found out that the factors of acceptance, attraction to the same or opposite sex, biology, culture, and environment influenced how these young people perceived their gender. Moreover, in terms of their views on sex change, answers were clustered into three – those who agree that sex change is a choice of an individual; those who disagree that sex change is primarily against their respective religions, and those who are still undecided because they neither agree nor disagree with the idea of individuals undergoing sex change. In conclusion, it was found that gender identity is attributed to the respondents' various upbringing and social exposure. Young people are more open and accepting of the idea that individuals have various preferences for developing and expressing their gender identities.

Keywords: gender identity, sex change, young people's views, qualitative descriptive research

Corresponding Author: Cheryl A. Langit
cheryllangit@e.ubaguio.edu
Senior High School
University of Baguio
Philippines

Received Date: July 7, 2025

Accepted Date: September 8, 2025



INTRODUCTION

Perceptions of Senior High School students on sex change have become an important area of inquiry as discussions on gender identity and gender diversity continue to gain prominence in contemporary society. Adolescence is a critical stage of identity formation during which young people develop their understanding of themselves, including their gender identity, beliefs, and attitudes toward issues related to sex and gender. As educational institutions strive to create inclusive and respectful learning environments, understanding students' perceptions of sex change is essential for

developing responsive guidance, counseling, and educational programs.

Although gender identity and sexual diversity have received increasing attention worldwide, limited evidence exists regarding how Filipino Senior High School students perceive sex change and the factors that shape these perceptions. In the University of Baguio, there is little documented information on students' views regarding gender identity and sex change despite the growing diversity within the student population. This gap highlights the need to explore students' perspectives to provide evidence that can support inclusive school

policies, student services, and educational interventions.

Accordingly, this study examined the perceptions of Grade 12 Senior High School students regarding their gender identity, identified the factors influencing these perceptions, and explored their views toward sex change. The findings are expected to contribute to a better understanding of students' perspectives and provide useful information for educators, guidance counselors, and school administrators in promoting a supportive and inclusive academic environment.

Literature Review

Arriving at a healthy sense of self has led young people to explore the process of having a sex change. In the medical profession, this is commonly known as gender reassignment or genital reconstruction surgery. It is a procedure that involves changing the physical structure of the genitalia to match a person's gender identity. Traditionally, the procedure was initially done for those who were psychologically diagnosed as persons with gender dysphoria. The Diagnostic and Statistical Manual or DSMV defines gender dysphoria as a condition that involves a conflict between a person's physical or assigned gender and the gender with which he/she/they identify. People with gender dysphoria may be very uncomfortable with the gender they were assigned, sometimes described as being uncomfortable with their body (particularly developments during puberty) or being uncomfortable with the expected roles of their assigned gender (American Psychiatric Association, 2016, par.1). Strictly speaking, it is a procedure that should be done after a series of psychotherapy sessions that help prepare an individual to transition from the previous identity adequately.

The first sex reassignment surgery happened in 1962, involving both surgery and hormone replacement. The patient was known as George Jorgensen, who believed himself to be trapped in a man's body. The road to his sex reassignment surgery was long and tedious, but this did not matter much to him because at that time, he was truly intent on correcting Mother Nature's error by stating that "Nature made a mistake which I have had corrected, and now I am your daughter" (Hadjimatheou, 2012). The sex reassignment surgery proceeded in a very quiet manner, given that the 1960s were a time that was not as liberal compared to the current period.

Nowadays, it is no longer a taboo topic, yet society is still divided in terms of its societal implications.

In the international sphere, specifically in the United States of America, Business Insider (2017) reports that about 3,250 surgeries were conducted in 2016, accounting for a 20% increase compared to the previous years. This implies that more individuals have opted to undergo the procedure. Yet it also means that people have been gaining more access to this kind of service – a gender-inclusive healthcare service for people who identify as transgender. In Asia, the service providers are China, India, Japan, Australia, and Thailand. These countries have provided access to sex change procedures: USA, Canada, Germany, France, UK, Italy, Spain, Serbia, Brazil, Mexico, South Africa, and Saudi Arabia. Of these Asian countries, Thailand has emerged as the second leading country worldwide, providing a market for sex reassignment surgery. Health care in the region is cheaper than its Western counterparts; thus, clients opt to travel to Thailand and have the procedure done (Ugalmugale & Swain, 2018).

Nationally, the Philippines is still in the process of growth – in its understanding of gender identity and in terms of the services offered related to sex reassignment surgery. Currently, there is a shortage of data in the country on sex reassignment procedures. A quick scan of internet sources reveals that while accredited clinics offer sex reassignment surgery procedures, there is no official record of how many have undergone the procedure. In a conservative country like the Philippines, the subject of homosexuality usually creates tension among families as some have remained traditional in their views.

Nationally, in a United Nations Development Program Report (UNDP, 2018), the results revealed that the concept of men wearing women's clothing dates back to the 16th to 17th Century. These men were also recognized as *babaylan* (the term given to women healers) and were symbolically accorded the same rights as the women healers despite being biologically male. Terms such as "*bayot or bakla*" (to name a few) were not derogatory in nature as we have come to know the words, but rather these were labels denoting acceptance and recognition that indeed in Philippine society, there existed a group of individuals who were neither

identified as male nor female. Currently, laws in the Philippines exclude sections that pertain to the lesbian, gay, bisexual, transsexual (LGBT++) community. But significantly, the country boasts of a significant milestone when it saw the election of a transgender politician who got elected into office – Congresswoman Geraldine Roman, which is perhaps an affirmation that the Philippines is starting to move progressively towards pursuing the rights of individuals regardless of gender identity.

Theoretical/Conceptual Framework

This study is anchored on the view that gender identity is a person's deeply felt internal experience of gender, which may or may not correspond with the sex assigned at birth (World Health Organization [WHO], 2021). Gender identity is distinct from gender expression and sexual orientation; therefore, a student's clothing, mannerisms, interests, or sexual orientation should not automatically be interpreted as evidence of a particular gender identity. The term *sex change* in the title may be retained for consistency with the approved study title; however, the study may use the more current and inclusive terms *gender transition* or *gender-affirming transition* when referring to social, legal, medical, or surgical changes. Not all transgender or gender-diverse individuals desire or undergo medical treatment or surgery (American College of Obstetricians and Gynecologists, 2021; American Psychological Association, n.d.).

The first theoretical basis of the study is Social Cognitive Theory, which explains that personal factors, behavior, and the social environment interact continuously in shaping an individual's beliefs and self-concept (Bandura, 1986). Applied to this study, Senior High School students' perceptions of their own gender identity may be influenced by their personal experiences, observations, self-reflection, and interactions with significant people and institutions. Family members, peers, teachers, school policies, religious communities, media, and online networks may provide gender-related information, expectations, approval, rejection, or opportunities for exploration. Thus, students' perceptions may develop through the reciprocal interaction of personal feelings and beliefs, observed gender roles, social feedback, and the broader environment in which they live and study. This theory

directly supports the first objective by examining how students understand the factors they believe have influenced their perceived gender identity.

The second theoretical basis is Gender Schema Theory, which proposes that individuals organize information about gender through cognitive structures or schemas learned from society and applied to their self-concepts (Bem, 1981). Gender schemas may be formed through cultural expectations, family socialization, language, religious teachings, school practices, media representations, and peer interactions. These schemas can shape how students interpret gender-related behaviors, roles, bodies, and identities. At the same time, students may accept, negotiate, revise, or reject the gender categories presented to them. In this framework, perceptions of gender identity are not treated as the result of one isolated influence; rather, they are understood as an ongoing process in which students interpret their experiences in relation to prevailing gender expectations. Research on adolescent gender identity likewise recognizes the possible contribution of psychosocial, biological, familial, and developmental factors, while emphasizing that these factors interact in complex ways (Steensma et al., 2013).

The study is also informed by Social Identity Theory, which explains that individuals develop part of their self-concept from the social groups and categories with which they identify (Tajfel & Turner, 1979). Senior High School students may evaluate gender categories through their perceived membership in, similarity to, or difference from particular groups. Their views may be influenced by the acceptance, status, stereotypes, and discrimination associated with gender identities in their families, peer groups, schools, and communities. The theory is relevant to the second objective because students' views toward sex change or gender transition may reflect their understanding of social belonging, group norms, equality, personal freedom, morality, and perceived threats to established gender categories. Consequently, favorable, unfavorable, ambivalent, or conditional views may be shaped not only by individual beliefs but also by the social meanings attached to gender identities.

To further explain possible differences in students' views, the framework incorporates the Minority Stress

Model. This model holds that stigma, prejudice, discrimination, rejection, concealment, and internalized negative beliefs may create stress for sexual and gender minorities (Meyer, 2003). Although the present study focuses on students' perceptions and views rather than on mental-health outcomes, the model helps explain how social attitudes and institutional conditions may influence their interpretations of gender transition. Students who perceive gender-diverse people as facing discrimination may express concern about safety, family rejection, bullying, or social acceptance, whereas students exposed to affirming environments may demonstrate greater openness and support. The model therefore provides a lens for examining how social stigma and support systems may be reflected in students' views toward sex change.

Conceptually, the framework assumes that the contextual factors experienced by Senior High School students such as family influence, peer relationships, school environment, religious and cultural beliefs, media exposure, knowledge, biological or developmental experiences, and personal reflection serve as major sources of information through which students understand gender. These factors interact with personal processes, including self-awareness, gender-role interpretation, perceived similarity or difference from social groups, and evaluation of social acceptance. The interaction of these elements leads to students' perceived gender identity and informs their views toward sex change or gender transition. The framework does not assume that any single factor determines a student's gender identity or opinion; instead, it recognizes that perceptions are personal, socially situated, and shaped by multiple interacting influences.

In relation to the research objectives, the first outcome of the framework is the students' perceptions of themselves and the factors they believe influenced their perceived gender identity. These factors may be organized into personal, interpersonal, social, cultural, institutional, media-related, and developmental dimensions. The second outcome is their views toward sex change, operationalized as their attitudes, beliefs, concerns, acceptance, reservations, perceived benefits or risks, and judgments regarding social, legal, medical, or surgical gender transition. The proposed relationship may be expressed as: social and personal factors,

interpretation of gender-related experiences, perceived gender identity and views toward gender transition, with the school and community context serving as an important environment that may strengthen, modify, or challenge students' perceptions.

Accordingly, the framework guides the study in describing, not determining, the relationship between students' experiences and their perceptions. It recognizes that gender identity should not be reduced to outward appearance or sexual orientation, and that gender transition is not a single procedure but may involve social, legal, medical, surgical, or no transition at all. This conceptualization supports an ethical and non-stigmatizing investigation of Senior High School students' views while allowing the participants to describe their experiences and beliefs in their own words.

Significance of the Study

The findings of this study will provide information to the school supervisors and guidance counselors to improve the school's student services, such as counseling to help students realize their true gender identity and provide proper guidance that may apply to them. The findings could help a teacher improve teaching methodologies, classroom management, and other related school programs appropriate for all types of gender. Further, it will provide insights to the members of the community or society on the reality of sex change within the context of what is perceived or believed by homosexuals.

Objectives of the Study

The study intends to determine the views of Senior High School students about themselves as to their gender identity, know which influenced such perception, and know their thoughts about sex change. Specifically, it seeks to answer the following specific problems:

1. What are the perceptions of Senior High School students about themselves as to factors that influenced their perceived gender identity?
2. What are their views toward sex change?

METHODOLOGY

The researchers employed the qualitative method, specifically the descriptive approach, to know the

students' perceptions of their gender identity, which influenced their views and perceptions on sex change.

Study Design

The researchers employed the qualitative method, specifically the descriptive approach, to know the students' perceptions of their gender identity, which influenced their views and perceptions on sex change.

Sample/Population of the Study

The respondents were the Grade 12 Senior High School Students from the academic tracks: STEM, ABM, and HUMMS of the University of Baguio High School enrolled during the AY 2019-2020. The students were randomly selected, and they voluntarily participated in the study. The students were 18 years old at data gathering, and they were asked to sign a consent form. The research objectives were discussed with them, and the other important sections of the consent form related to voluntary participation and withdrawal. Students who were below 18 were not included in the study.

Data Gathering Tools

The questionnaire constructed by the researchers to gather the data was subjected to validation through the RDC. The approved questionnaire was distributed to 30 Senior High School students, 10 for each Academic Track, 15 males and 15 females. Since this is an exploratory study, the researchers used quota sampling since the responses from these students would be the initial baseline. The responses would then be the basis for converting the questions into qualitative questions for the study's second phase.

Data Gathering Procedures

The questionnaires were administered in the classrooms of the Senior High from October to November 2019. The help of subject teachers was enlisted, and a few minutes of the class hour was devoted to answering the questionnaire. General instructions were given to the respondents, and clarifications related to the data gathering tool were also provided by the researcher assigned to do the data gathering. The results of this study shall be shared in a research colloquium to be hosted by the RDC.

Treatment of Data

The data gathered from the respondents through the

open-ended questionnaire were analyzed using thematic analysis, which is an appropriate method for qualitative descriptive research. After the completed questionnaires were collected, the researchers carefully read and reviewed each response to become familiar with the data. Meaningful statements relevant to the research objectives were identified and assigned initial codes. Similar codes were then grouped into categories and organized into broader themes that represented the participants' perceptions of their gender identity and their views on sex change. The analysis followed the thematic analysis process consisting of familiarization with the data, generation of initial codes, searching for themes, reviewing and refining themes, defining and naming themes, and producing the final report. The identified themes were presented using descriptive narratives and were supported by representative verbatim responses from the participants to illustrate each emerging theme. Since the study was qualitative in nature, no descriptive or inferential statistical analyses, such as computation of means, frequencies, percentages, or tests of significance, were performed. Instead, the credibility of the findings was established through systematic coding, categorization, and interpretation of the participants' responses in relation to the research objectives.

Ethical Considerations

Prior to data collection, permission to conduct the study was obtained from the appropriate school authorities and the Research and Development Center. Participation in the study was entirely voluntary. Only Grade 12 Senior High School students who were 18 years of age and willing to participate were included in the study. Before completing the questionnaire, each participant was informed of the purpose of the research, the procedures involved, the voluntary nature of participation, and their right to decline participation or withdraw from the study at any time without penalty. Written informed consent was obtained from all participants before data collection. To ensure anonymity, participants were not required to disclose personally identifiable information in their responses. Individual identities were protected through the use of generalized respondent labels during data analysis and presentation of findings. All information provided by the participants was treated with strict confidentiality and was used solely for research purposes. The

completed questionnaires and research records were accessible only to the researchers and were securely handled throughout the conduct of the study. Risk to participants was considered minimal because the study involved only the completion of an open-ended questionnaire. Nevertheless, participants were informed that they could skip any question they found uncomfortable or discontinue participation without any adverse consequences. The researchers likewise ensured that the questions were presented respectfully and that the collection, storage, and analysis of data did not expose participants to psychological, social, or academic harm. Participants were selected using fair and non-discriminatory procedures based on the established inclusion criteria of being Grade 12 Senior High School students enrolled during the study period, at least 18 years old, and willing to provide informed consent. No participant was excluded based on sex, gender identity, religion, ethnicity, or other personal characteristics beyond the justified eligibility criteria. Upon completion, the findings will be disseminated through an institutional research colloquium, faculty meetings, and presentations to the Center for Counseling and Student Development. These results are intended to provide actionable insights for school administrators, guidance counselors, and educators to cultivate more inclusive student programs and support systems.

RESULTS AND DISCUSSION

Factors Influencing Senior High School Students' Perception of their Gender Identity

Several clustered themes emerged from the responses regarding the factors that influence a person's perceived gender identity. The findings suggest that identity formation is a dynamic process shaped by the interaction among a person's environment, biological makeup, and personal agency. Specifically, the analysis yielded the following categories: acceptance, sexual attraction, biological factors, cultural influences, and environmental factors. A few respondents also noted that they are still in the process of self-discovery.

Acceptance. The Cass Model of Gay/Lesbian Identity Development (California State University, 2011) presupposes that there are stages that LGBTQ

individuals go through when undergoing identity formation. Some can progress through the five stages, but some only manifest behaviors specific to several or only one stage. Cass lists the following stages: Identity Confusion, Identity Comparison, Identity Tolerance, Identity Acceptance, Identity Pride and Identity Synthesis to help explain what individuals go through. The findings indicate that the LGBTQ are at the stage of Identity Acceptance. This stage is characterized by their selective disclosure of their identity to those who matter to them. Revealing themselves to people who are supportive encourages them more to explore their identity. It is a gradual process of coming out and expressing overt behaviors congruent with the newfound identity. Moreover, individuals at this stage are exploring their homosexual identity in terms of attraction to the same sex and coming to terms with their perceived and chosen identity, such as what was mentioned by one student (i.e., *the important thing is I love who I am*).

Whether from a heterosexual or homosexual point of view, identity formation can also be viewed from the Humanist Perspective. Carl Rogers explains that individuals have the capacity for self-directed change. Thus, if it is a homosexual identity that is chosen, the individual intentionally directs their behavior to that chosen identity (Lumen Learning, 2018). This intentionality is essential because of the element of a person's control over how they ultimately present themselves in public. Thus, any gender identity chosen by an individual can be expressed in terms of actions, modes of dressing, and demeanor (Ghosh, 2020).

Rogers further theorizes that the self is divided into the ideal self and the real self. The former refers to the self that one aspires to, while the latter is the actual self that a person is conscious of and the roles that go with it. Incongruence happens between the real self and the ideal self when there is a discrepancy between one's perceived identity and the identity that one aspires for. Based on the responses, whether their orientation is homosexual or heterosexual, there is unity in the chosen identities, meaning they accept who they are regardless of their biological make-up. A positive evaluation of one's identity reflects acceptance. Individuals experience congruence when their thoughts about their real self and ideal self are very similar—in other words,

when the self-concept is accurate. High unity leads to a greater sense of self-worth and a healthy, productive life. Parents can help their children achieve this by giving them unconditional positive regard or unconditional love (Lumen Learning, 2018, par. 2). Based on the given responses, the real self and the ideal self of the individuals reflect unity because they have already arrived at an acceptance of who they are in terms of their gender identity, and these were reflected in words like “*I have come to accept my identity and I love who I am.*” These statements reflect individuals who have come to terms with who they are. There is an acknowledgement that one is comfortable in the chosen identity. They demonstrate an internalized willingness to embrace their chosen identity, and there is an absence of self-doubt about it. However, a striking response from the respondents is the recognition that arriving at their chosen identities has also not been an easy journey, i.e., *it has not been easy to accept it with [sic] myself.* This further emphasizes the Cass Model that an individual goes through various stages of LGBTQ identity development. In their quest for self-discovery, they encounter various struggles that would either strengthen their resolve to push through and reveal their chosen identity, or to take their time to slowly reveal themselves.

Sexual attraction to the same or opposite sex. This theme relates to sexual orientation and refers to the idea that one is attracted to persons of the same or opposite sex. Sexual orientation is the emotional, romantic, or sexual attraction that a person feels toward another person (Teens Health, 2020). This means that individuals experience feelings of liking and are drawn to specific persons around them and it is generally classified into four categories. *Heterosexual attraction* is present when biologically born males and females are attracted to members of the opposite sex. *Homosexual attraction* is present when individuals are physically and romantically linked to persons of the same sex. *Bisexual orientation* refers to romantic attraction felt by an individual towards persons of the same and opposite sex. In contrast, *asexual orientation* refers to individuals who are not interested in sex but still experience emotional closeness to people around them. From the responses gathered from the heterosexual males and females, an affirmation of their identity is related to their attraction to people of the opposite sex. They believe

that since they were born male or female, being attracted to the opposite sex solidifies their identity as biologically born males and females. They recognize and have been raised to believe that since they are biologically born males and females, their attraction is towards the opposite sex.

On the other hand, the respondent who identifies as LGBT recognizes that they are romantically attracted to the same sex and a community of like-minded persons who share the same experience. In the Philippines, the LGBT community rose to political prominence during the 1990s. The report of the United Nations Development Programme (UNDP) and the United States Agency for International Development (USAID) country report also highlighted that socially, there is an emerging trend of acceptance among young people now; however, what needs to be looked into is whether this growing acceptance is still traditionally aligned with stereotypes (UNDP, USAID, 2014). There must be a community supportive of the LGBT experience, and this is what is being mentioned by the respondents of this research. Supportive environments result in better outcomes for members of the LGBT community. It gives them the freedom to express themselves fully, without the threat of judgment or ridicule.

Biological Factor. Sex is a biological category that seeks to make a principled distinction between those members of a sexually reproducing species, such as our own, who usually produce eggs (females) or sperm (males) (Hodson et al., 2019). An individual's biological sex is determined by chromosomal genetics, which establishes how the body will develop throughout the various stages of physical development. As the body develops through puberty, the emergence of primary and secondary sex characteristics provides internal physiological feedback that typically reinforces a person's psychological alignment with being male or female. Ultimately, this biological baseline creates a foundation of psychological congruence, allowing individuals to integrate their physical reality with their internalized gender identity.

The respondents who are heterosexual accept that they were born as male or female and are comfortable with their born gender; one even said that *he was born that way*. Mayer and McHugh's study (2016) entitled

Sexuality and Gender: Findings from the Biological, Psychological, and Social Sciences stated that while some claim that sexual orientation is a choice, others say that sexual orientation is a fixed feature of one's nature, that one is "born that way." For instance, one respondent affirms that since he was born biologically male, he has no plans of changing his gender (i.e. *The fact that I was born as a male, also I don't want to change my gender*)

One of the respondents mentioned that in high school, *she was able to comprehend the idea*, referring to her exposure to members of the LGBTQ. Despite her exposure to classmates (whom she identifies as third sex), her gender identity has not changed (i.e., she continues to be female and straight). According to current scientific understanding, individuals are usually aware of their sexual orientation between middle childhood and early adolescence (American Psychological Association, 2008). "Everyone, man and woman, should acknowledge and accept his sexual identity" (Holy See, n.d.), and Spence (1985) viewed gender identity as a fundamental sense of acceptance of and belonging to one's gender. A respondent's outward actions complement his male identity by mentioning that *I am [a] biological born male and having a girlfriend of mine is one factor of my identity*. For this person, engaging in a relationship is an affirmation of his identity as a male at birth. It is worth noting that although the respondents identified as heterosexual, they remained open and accepting of LGBTQ individuals within their social environment.

Social Factor. Children are assigned gender from birth and are socialized to conform to certain gender roles based on their biological sex. Children born into families are raised to behave in ways that are *expected* of their biological make-up. Thus, the social gender role in that environment is in adherence to cultural norms for feminine and masculine behavior. "Sex" refers to physical or physiological differences between males, females, and intersex persons, including their primary and secondary sex characteristics. "Gender," on the other hand, refers to social or cultural distinctions associated with a given sex (Paris et al., 2021). It is often impossible to disentangle the effects of the environment from the effects of genetics on the developing child. This statement is especially true in the arena of gender identity and sexual orientation, which appear to be

affected by both factors. (Lee & Houk, 2005).

The bisexual and gay respondents believe that their environment plays a role in their sexuality. Among the environments mentioned by the respondents were their family members, school friends, their communities, and media. The study entitled "Impact of Environment upon Gender Identity and Sexual Orientation: A Lesson for Parents of Children with Intersex or Gender Confusion" mentioned that indicators of homosexual orientation in boys include such contra sexual characteristics as an interest in dolls, cross-dressing, preference for friendships with girls/women rather than boys/men - all behaviors commonly regarded as 'sissy' and indicative of sexual interest in other boys. There appears to be a direct relationship between the number of these factors present and the likelihood of adult homosexual orientation. (Lee & Houk, 2005). For instance, one respondent (who identified as gay) mentioned that *"I think that I couldn't fit in as a male nor as a female. I'm too feminine to be a boy and too masculine to be a girl. I think I'm just in a neutral between those two sexes."*

Other studies have shown that children's upbringing and social environments also impact their developing gender identities. Children who are taught that certain traits or activities are appropriate or inappropriate for them to engage in because they are girls or boys tend to internalize and be influenced by these teachings later in life. As one of the respondents mentioned, *"whatever my family, relatives, or mass media portray as how a female should act, that is also how I should be, and I didn't find anything wrong with that"*. Children raised watching their parents adhering to strict gender-stereotyped roles are, in general, more likely to take on those roles themselves as adults than are peers whose parents provided less stereotyped, more androgynous models for behaving. (MentalHelp.net, n.d). Some students also show that children who develop a heterosexual preference experience a physical-gender-consistent gender identity, meaning that they are boys who feel comfortable being boys or girls who feel comfortable being girls.

Many straight male or female respondents believe that they were raised as male or female by their parents/family, thus growing up as straight male or female (i.e., *I have always paid closer attention to*

people of the same sex as mine and acted or wanted to be like them). Most people assigned a gender at birth end up accepting that gender assignment. In most cases, the initial gender assignment is bolstered by a childhood of pink or blue, dresses or pants, and dolls or trucks (Erickson-Schroth, 2015). Numerous scholars have written about the "social construction" of identities such as race and gender. This is the idea that our identities are created through the repetition of expectations and beliefs (Blakemore J, Berenbaum S, and Liben, L., 2008). This social construction of gender is seen in the experience of one respondent who mentioned that through his constant exposure to mostly female friends, he considered himself as one of them (i.e., *also I've got a lot of friends when I was a kid because they are all girls. I always have these feelings that I'm also one of them*).

Lee and Houke's (2005) study discussed that while some adult homosexual men recall having a predominance of feminine behaviors during childhood, others lack these behavioral characteristics. Such diversity in childhood behavioral patterns among adult male homosexuals suggests that gender role behavior and sexual orientation are inconsistently, but undeniably, linked. The study by Cook mentioned that the influence of social environment on biological males raised as females appears to have little or no effect upon their eventual development as heterosexual (gynephilic) adults (Cook, 2021). Furthermore, the study mentioned that it had been alleged that young people might be recruited or seduced by homosexuals. This might lead them into a homosexual lifestyle when they would otherwise have grown up as heterosexual. There have been various proposals that homosexuality results from problems in relationships with parents, especially the parents of the same sex, during childhood. These generally arise from a psychoanalytic tradition, based upon theories that are often not amenable to scientific testing. The study also stated that there appears to be no difference in sexual orientation between children raised by heterosexual and non-heterosexual parents in samples of families that were not systematically ascertained.

In one study in which families were systematically screened, there were small to moderate differences in the extent to which children of non-heterosexual parents

self-identified as heterosexual. The difference reached statistical significance for children raised by lesbian mothers but not those raised by gay fathers. This study has been extremely controversial and is beset with methodological problems. In any case, the cross-sectional design does not allow inference to be made about causal relationships. (Haight, 2008). Research confirms that LGBTQ adults were more likely to have expressed atypical gender preferences as children, and these differences may well explain why such children were preferentially singled out for abuse (House of Bishops Group on Issues in Human Sexuality, 2003).

Views of Senior High School Students Towards Sex Change

Sex change or sex reassignment surgery is a change in a person's physical sexual characteristics to those of the opposite sex, often achieved by surgery (Collins English Dictionary, 2012). From the medical definition, sex change is modifying biological sex characteristics by surgery and hormone treatment to approximate the opposite sex. (The American Heritage Stedman's Medical Dictionary, 2002). Three overriding perspectives that were drawn from the respondents would be in terms of their agreement towards sex change, are against sex change, and others who remain undecided about it.

Students' Agreement towards Sex Change. The male respondents agree that it is an individual's choice to undergo sex change. According to Gender Affirmation Surgery and Compassionate Care for Individuals with Gender Dysphoria, some people will choose to complete their transition with genital gender affirmation surgery or "bottom surgery" – a surgical procedure (or procedures) by which the genital organs are altered to physically resemble and function like those that are associated with their identified gender. The reassignment surgery is a physical affirmation that highlights the chosen identity. This again echoes that consistency in thought, behavior, and physical changes contributes to a sense of congruence for the individual.

Moreover, the respondents reflect non-interference in the choices of those who want to undergo the procedure of sex change, as affirmed in their statements like "*it's their life; I don't really care*". They do not impose their

own views on others, and neither do they want to interfere with the lives of those who choose to undergo the procedure. But significantly, there appears to be a condition mentioned by one of the respondents, “*as long as they are not harming other people*”.

One of the respondents mentioned that sex change is “*a path to gender liberty and empowerment. It is a form of freedom – expressing oneself truthfully*”. According to Lev (2004). To achieve full body modification, full surgery is required for patient satisfaction. Body modification is perceived as an integral part of achieving an identity as a member of the opposite gender. Across the various genders, a notable consensus would be the belief that individuals have the absolute freedom to choose what they do to achieve happiness.

Students against Sex Change. Most respondents stated that changing one's sex or undergoing gender reassignment surgery is against their religion or Christianity (*i.e., I am against sex change because it is taught to me that female and male are the only sexes that God made*). Generally, their disagreement stems from their religious upbringing. In the Philippines, 92% of the population are Christians; 81% are Roman Catholics and 11% are members of numerous Christian groups, with the largest being Protestants. Among Filipino Americans, 65% are Roman Catholics. Catholicism has a major influence on Filipinos' conservative views on social issues surrounding sex, where the majority view homosexuality, sex and pregnancy outside marriage, and cohabitation as sinful. (De Irala et al., 2009; Delgado-Infante & Ofreneo, 2014; Gipson et al., 2012).

According to Scripture, when God created human beings, He created them “male and female” and blessed their marital union (Genesis 1:26–28; 2:20–25). Later authors of Scripture interpreted this twofold act of creation and blessing to entail moral norms such as the mutual cultivation of intimacy between husband and wife and the prohibition of sexual immorality and divorce (c.f., Matthew 19:4–9; Mark 10:5–12; 1 Corinthians 7:12–20; Hebrews 13:4). The prophet Moses, Jesus the Messiah, and the apostle Paul are united in common witness to the goodness of humanity's biological complementarity and the moral norms that should govern male-female sexual behavior.

These objections or disagreements stem from religious teachings that have become deeply ingrained.

As mentioned by one of the respondents, “*I think it's very strange for someone to want to have a sex change, though. Imagine that the person wanting to have such a sex change would be in a very unstable place(mentally) and should not be allowed to do something that they would probably regret in later life*”. From this perspective then, the decision to undergo sex-change is framed from the idea that it is a psychiatric disorder (*unstable place, mentally*), a symptom of confusion (*A proof that a person is still confused about who and what he/she is*) and discontentment (*...because changing what you already have is like being not contented*) rather than a valid identity.

According to Dr. Ryan T. Anderson, Sex “reassignment” doesn't work. It's impossible to “reassign” someone's sex physically, and attempting to do so doesn't produce good outcomes psychosocially. And as stated in his book, “When Harry Became Sally: Responding to the Transgender Moment,” the medical evidence suggests that sex reassignment does not adequately address the psychosocial difficulties faced by people who identify as transgender. Societal stigma still poses a realistic challenge. For instance, the statement: “*I am just stating that the LGBTQ should know their place in the world*” would suggest that accepting sex change can threaten the established patriarchal order of things. Thus, even when the procedures are successful technically and cosmetically, and even in cultures that are relatively “trans-friendly,” transitioners still face poor outcomes.

Neutral Views towards Sex Change. The undecided or neutral perspective about sex change is not merely a lack of apathy or respect but rather a middle ground, as observed by the respondents, and which comes from a subjective personal matter. For instance, a respondent stated that “*my view towards sex change is that we need to respect them even though there are a lot of people who want [sic] to change their sex, their sex identity. It is good to change sex identity, but also, we need to manage it*”. Management can be in the form of ongoing assistance, follow-up medical care, and counseling to address common issues like depression and anxiety.

Responses that are currently available in the Philippines to those who have already transitioned physically.

According to one of the respondents, *“no law restricts everyone from doing it, but the decision or the norm of the society that dictates what’s good and which is not”*. This indicates that neutral students recognize sex change as a legally protected freedom, even if they acknowledge that the broader culture has not yet fully embraced it as a social norm. In the Philippines, though, laws related to LGBTQ rights and responsibilities have yet to be passed. Furthermore, for neutral respondents, it is not an imposition of moral judgement but truth from the perspective of the individual who desires to go through sex change.

The neutral responses also indicate that students are aware of social conditions in the country faced by those belonging to the LGBTQ community. As one respondent mentioned: *“it’s a very uncommon thing that makes everyone think that it’s unnecessary or considered a bad thing”*. This neutrality comes from observations about how individuals have been treated, but at the same time those belonging to the neutral stance do not necessarily validate or condemn those who choose to undergo sex change and complete their transition. This is supportive of Main's (2017) assertions related to generational differences that Millennials and GenZ are more liberal and open-minded, resulting in a more tolerant stance of individual differences.

CONCLUSION AND RECOMMENDATION

The study found that Senior High School students have diverse perceptions of their gender identity and varying views regarding sex change, with these perceptions being influenced by factors such as acceptance, attraction to the same or opposite sex, biological influences, and social experiences shaped by their upbringing and exposure to different environments. The findings further revealed that students' views on sex change range from disagreement to neutrality or indecision and acceptance, indicating a spectrum of perspectives on the issue.

Overall, the results suggest that contemporary Senior High School students are generally more pen to understanding and accepting diverse gender identities

and perspectives on sex change than previous generations, reflecting a growing awareness of gender diversity. In light of these findings, future researchers are encouraged to conduct quantitative or mixed-methods studies to further examine the factors influencing students' gender identity and views on sex change. The findings may also serve as baseline information for the Center for Counselling and Development and the Office of Student Affairs in developing programs and services that promote student well-being and inclusivity.

Furthermore, the University is encouraged to strengthen initiatives that foster respect and acceptance of individuals with diverse gender identities and sexual orientations through awareness campaigns, educational programs, and the promotion of respectful and inclusive language, thereby cultivating a supportive, inclusive, and equitable school community.

Acknowledgement

The researchers would like to express their sincere gratitude to everyone who contributed to the completion of this study. The researchers also extend their appreciation to the school administration, faculty members, and the respondents who willingly shared their time, perspectives, and honest responses, which served as an essential foundation for this research. Above all. The researchers are grateful to everyone, in one way or another, who contributed to the successful completion of this research.

Declaration of Generative AI use in the Writing Process

During the preparation of this manuscript, the authors utilized AI-assisted tools, including ChatGPT, Gemini Notebook, Perplexity and Qwen, primarily to assist in refining sentence structure, grammar and clarity. All AI-generated content was carefully reviewed, edited and validated by the authors to ensure its accuracy, relevance, and alignment with the objectives of the study. The authors assume full responsibility for the accuracy, originality, ethical integrity, and overall content of the final manuscript.

References

- American College of Obstetricians and Gynecologists. (2021). *Health care for transgender and gender diverse individuals* (Committee Opinion No. 823). <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2021/03/health-care-for-transgender-and-gender-diverse-individuals>
- American Psychiatric Association (2016). *What is gender dysphoria?* <https://www.psychiatry.org/patients-families/gender-dysphoria/what-is-gender-dysmorphia>

- American Psychological Association. (n.d.). *Answers to your questions about transgender people, gender identity, and gender expression*. <https://www.apa.org/topics/lgbtq/trans-gender-people-gender-identity-gender-expression>
- American Psychological Association. 2008. *Answers to your questions: For a better understanding of sexual orientation and homosexuality*. <http://www.apa.org/topics-sexuality/orientation.aspx>
- Anderson, R. T. (2019). *When Harry became Sally: Responding to the Transgender Moment*. Encounter Books.
- Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Prentice-Hall.
- Bem, S. L. (1981). Gender schema theory: A cognitive account of sex typing. *Psychological Review*, 88(4), 354-364. <https://doi.org/10.1037/0033-295X.88.4.354>
- Blakemore, J. E. O., Berenbaum S. A., & Liben L. S. (2008). *Gender development*. Psychology Press. <https://doi.org/10.4324/9780203889756>
- California State University (2011). *Cass's model of sexual orientation identity formation*. <https://www.csudh.edu/Assets/csudh-sites/safe-space/docs/handout-models.pdf>
- Cook, C. C. H. (2021) The causes of human sexual orientation, *Theology & Sexuality*, 27(1), 1-19, <https://doi.org/10.1080/13558358.2020.181854>
- Collins English Dictionary* (12th ed.). (2012). Harper Collins Publisher.
- Delgado-Infante, M. L., & Ofreneo, M. A. P. (2014). Maintaining a “good girl” position: Young Filipina women constructing sexual agency in first sex within Catholicism. *Feminism & Psychology*, 24(3), 390-407. <https://doi.org/10.1177/095935351430715>
- De Irala, J., Osorio, A., del Burgo, C. L., Belen, V. A., de Guzman, F. O., del Carmen Calatrava, M., & Torralba, A. N. (2009). Relationships, love, and sexuality: What the Filipino teen think and feel. *BMC Public Health*, 9, Article 282. <https://doi.org/10.1186/1471-2458-9-282>
- Erickson-Schroth, L. (2015). Psychological and Biological Influences on Gender Roles. *Neuroscience in the 21st century*. 1–22. https://doi.org/10.1007/978-1-4614-6434-1_159-1
- Ghosh, S. (2020). *Gender identity*. Medscape. <https://emedicine.medscape.com/article/917990-overview>
- Gipson, J. D., Gultiano, S. A., Avila, J. L., & Hindin, M. J. (2012). Old ideals and new realities: The changing context of adolescent partnerships in Cebu, Philippines. *Culture of Health & Sex*, 14, 613-627. <https://doi.org/10.1080/13691058.2012.684222>
- Hadjimatheou, C. (2012, November 30). Christine Jorgensen: 60 years of sex change ops. *BBC News*. <https://www.bbc.com/news/magazine-20544095>
- Haught, J. F. (2008). God and evolution. In P. Clayton & Z. Simpson (Eds), *The Oxford handbook of religion and science*. 697–712. Oxford University Press.
- Hodson, N, Earp, B. Townley, L & Bewley, S. (2019). Editorial: Defining and Regulating the Boundaries of Sex and Sexuality. *Medical Law Review*, 27(4), 541-552. <https://doi.org/10.1093/medlaw/fwz034f>
- Holy See. n.d. *Catechism of the Catholic Church*. Vatican: http://www.vatican.va/archive/ENG0015/_P84.HTM
- House of Bishops Group on Issues in Human Sexuality. (2003). *Some issues in human sexuality: A guide to the debate*. Church House Publishing.
- Human Rights Education Associates (2003). *Sexual orientation and human rights*. <https://hrlibrary.umn.edu/edumat/studyguides/sexualorientation.html>
- King James Bible*. (2017). King James Bible Online. <https://www.kingjamesbibleonline.org/>
- Lee, P. A., & Houk, C. P. (2005). Impact of environment upon gender identity and sexual orientation: A lesson for parents of children with intersex or gender confusion. *Pediatric Endocrinology and Metabolism*, 18(7), 625-629. <https://doi.org/10.1515/jpem.2005.18.7.625>
- Lev, A. I. (2004). *Transgender emergence: Therapeutic guidelines for working with gender-variant people and their families*. Routledge. <https://doi.org/10.4324/9780203047781>
- Lumen Learning (2018). *Introduction to gender and sexuality*. <https://courses.lumenlearning.com/boundless-psychology/chapter/introduction-to-gender-and-sexuality/>
- Main, D. (2017). Who are the millennials? *Live Science*. <https://www.livescience.com/38061-millennials-generation-y.html>
- Mayer, L. S. & McHugh, P. R. (2016). *Sexuality and Gender: Findings from the biological, psychological, and social sciences*. *The New Atlantis*, 50, 10- 143. <https://www.thenewatlantis.com/publications/introduction-sexuality-and-gender>
- MentalHelp.net (n.d). *Factors Influencing Gender Identity*. <https://www.mentalhelp.net/sexuality/gender-identity/>
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations. Conceptual issues and research evidence. *Psychological Bulletin*, 129(5), 674-697. <https://doi.org/10.1037/0033-295X.129.5.674>
- Paris, J., Ricardo, A., Raymond J., & Johnson, E. (2021). Development of gender identity. In *Child growth and development*. LibreTexts. [https://socialsci.libretexts.org/Bookshelves/Early_Childhood_Education/Book%3A_Child_Growth_and_Development_\(Paris_Ricardo_Rymond_and_Johnson\)/15%3A_Adolescence_-_Social_Emotional_Development/15.04%3A_Development_of_Gender_Identity](https://socialsci.libretexts.org/Bookshelves/Early_Childhood_Education/Book%3A_Child_Growth_and_Development_(Paris_Ricardo_Rymond_and_Johnson)/15%3A_Adolescence_-_Social_Emotional_Development/15.04%3A_Development_of_Gender_Identity)
- Planned Parenthood Care (n.d). *Transgender identities*. <https://www.plannedparenthood.org/learn/gender-identity/transgender>
- Spence, J. T. (1985). Gender identity and implications for concepts of masculinity and femininity. In T. B. Sonderegger (Ed.), *Nebraska symposium on motivation: Psychology and gender*, 32. 59–96. University of Nebraska Press.
- Tajfel, H., & Turner, J. C. (1979). An integrative theory of intergroup conflict.
- Teens Health (2020). *Sexual attraction and orientation*. <https://kidshealth.org/en/teens/sexual-orientation.html>
- The American Heritage Stedman's medical dictionary*. (2002). Houghton Mifflin.
- Ugalmugale, S., & Swain, R. (2018). *Sex reassignment surgery market size by gender transition*. <https://www.gminsights.com/industry-analysis/sex-reassignment-surgery-market>
- United Nations Development Programme, & United States Agency for International Development. (2014). *Being LGBT in Asia: The Philippines country report*. UNDP; USAID. https://www.undp.org/sites/g/files/zskgke326/files/publications/Philippines%20Report_Final.pdf
- World Health Organization. (2021, May 24). Gender and health. <https://www.who.int/news-room/questions-and-answers/item/gender-and-health>