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# **Preface**

The transgender community have always faced a lot of problems such as fear, shame, social discrimination, depression, suicidal tendencies, and social stigma. The trauma and suffering faced by them was terrible, pusheding some to the extreme of attempting suicide. Many others migrated to other states for survival. The Hon'ble Supreme Court vide Judgment dated 15<sup>th</sup> April, 2014 has recognized transgender people for the purpose of safeguarding their rights. The judgment also directed the Union and State Governments to grant legal recognition of their gender identity, to treat them as socially and educationally backward classes and to extend all kinds of reservation in cases of admission in educational institutions and for public appointments. Union and State Governments were also directed to operate separate HIV Surveillance Centers, since transgenders face several sexual health issues.

Even before the supreme court judgment, the Kerala government had taken initiatives for the welfare of transgender people, through consultations with NGOs working in this field. As a part of these consultations, the idea of TG Survey and TG policy was mooted. The government entrusted Sangama—a human rights organization for sexual minorities, sex workers and people living with HIV—to carry out the TG survey. The survey was primarily focused on

- studying the socioeconomic and psychological status of the transgender people in the state.
- understanding the problems faced by them in detail.
- formulating welfare measures for the benefit of transgender people.
- framing TG policy covering the areas of health, education, employment, pension schemes, housing, protection from harassment and abuse.
- devising public awareness drives to change misconceptions about transgender people among general public, remove stigma and to integrate TG community with the mainstream.

The community members who had been already identified through earlier work of Sangama conducted the survey. They were initially trained through a series of intensive workshops, where they were made aware about the intricacies of sex, sexuality and gender and various other theoretical aspects in this regard. They were consulted at various stages of preparation of the questionnaire to ensure that the questions are fair and that the set of questions will be enough to bring out the issues, status and problems of transgender people. The questions were modified and more questions were added as per their suggestions.

On August 12<sup>th</sup> 2014, a meeting was held regarding the TG Survey. It was attended by the Director, Deputy Director, and the Law Officer of the Social Justice Department. Sangama and

Sexual and gender Minorities Forum Kerala (SMFK) was represented by Guru Kiran, Rajesh Umadevi, Sonu Niranjan, Seethal Syam, Saju, Ameer Hassan, Shiji and Anil A. In the meeting, the terms and conditions of the agreement between Sangama and the Social Justice Department regarding TG Survey was finalised.

The first task was to prepare the questionnaire. The initial version of the questionnaire contained 54 questions in 6 sections. A consent form, personal details form and a form for data collection were there along with the questions. It was a difficult task to prepare the questionnaire in Malayalam, as appropriate words were not available to express gender and sexuality issues. We decided to use certain English words over the alternative of loanwords borrowed from Sanskrit, which the community members would find more difficult to understand. We had to rewrite the Malayalam version of the consent form many times to properly convey the meaning while ensuring that it is precise and readable.

The first state level consultation meeting on the TG survey was held at AMOS Centre, Kottayam from 28<sup>th</sup> August to 30<sup>th</sup> August, 2014 with 75 community members from the 14 districts of Kerala as a participants. The importance of TG survey was outlined and each and every question in the questionnaire for the survey was explained. The discussion also included topics on gender, sex, sexuality and human rights. The facilitators explained the topics to all participants in Malayalam with examples and relevant stories from Kerala.

The training for Field Investigators and Supervisors of TG Survey Kerala was conducted on October 14<sup>th</sup>&15<sup>th</sup> at AMOS Centre Kottayam. The questionnaire was discussed to get the opinion of the community. This helped to modify the questions accordingly. Detailed sessions were conducted on ethics, transgender issues, sex, gender and sexuality. The objectives of the session were to develop an understanding of:

- The terms 'identity', 'gender' and 'sexuality'.
- Different types of sexuality.
- Stigma and discrimination.
- Power and gender-based violence

The facilitator started the session with an exercise called Body Mapping. The facilitator gauged the participant's knowledge on the terms and concepts and explained the terms sex, gender, sexuality etc.

It was understood from discussions with experts that digitization of the survey is a major work and a lot of funds and time will be required. Hence it was planned to get support from volunteers. A meeting was held on October 21<sup>st</sup> with the Programme officer and Volunteer Secretary of National Service Scheme (NSS), College of Engineering Trivandrum seeking support for digitization of TG Survey forms. They agreed to do the digitization free of cost. The association with the premier technical institute of the state was appreciated by the office bearers of Sangama.

Series of meetings were held with the faculty of the Department of Statistics and Department of Sociology, University of Kerala, Dr. J. Devika, Centre for Development Studies, Trivandrum and Gita Gopal, gender consultant to Govt. of Kerala, to ensure that the questions were framed from a rights-based perspective and that they

- are statistically rigorous so as to get proper answers
- do not create lack of clarity
- enable easy compilation
- are rendered with apt words

Many of the questions were reframed by looking into possible answers. This was to make sure that we can arrive at better inference and conclusions, once we compile the survey results. Consultation meetings were held separately with Dr. J. Devika and Smt. Maithri Prasad of Centre for Development Studies, Thiruvananthapuram November 27<sup>th</sup>, regarding the various social aspects that have to be taken care of in the TG Survey questionnaire. The questions were reviewed critically and meticulously.

On November 25<sup>th</sup>, a training programme primarily focusing on discussing the intricacies of each question in the TG survey questionnaire with the community leaders was held at Sangama Office, Ernakulam. SMFK leaders participated in the programme. The questionnaire was read and each question was analyzed to see

- how it will be received by the community
- whether it will affect the feelings of the person interviewed
- whether the questions are sufficient to bring out the issues, problems and situations of the community
- whether it is convenient for the interviewer to interpret the question and get proper answers and
- whether ambiguity is felt while reading any question.

The TG survey questionnaire, now with 94 questions, was approved by the community leaders in the meeting. A meeting of the Regional coordinators and district supervisors was organized on December 23<sup>rd</sup> in Thiruvananthapuram. The meeting with community leaders was primarily to fix the logistics of the survey. The distribution of survey forms for various districts was finalized in the meeting. This included number forms to be given in each district (after assessing the TG population in each district) and the persons to be entrusted with the survey in each district. The duties and responsibilities of regional coordinators and district supervisors were formulated in the meeting.

It is for the first time in India that a State Government has conducted a survey of this kind. The main highlight of the survey is that the person to person interview was done by the community members. Moreover, the community members were an integral part in every aspect of the survey starting from the preparation of the questionnaire. The questionnaire was finalized after a series of rigorous review and modifications of the questions, involving people from diverse backgrounds, experts from various disciplines, social activists, community members and Sangama officials. It took a concerted effort of more than 4 months for this process. This was done with a lot of care, considering the facts that, i) it is for the first time that such a survey is being done in India as a state govt. initiative and ii) that this may be taken as a model in other states. The trainings as a part of the preparation for the survey among community members brought about clarity on sex, sexuality, gender and transgender issues through the discussion among themselves and with the experts. The whole process empowered the community and has resulted in the emergence of community leaders. The survey and the subsequent *State policy for transgenders in Kerala 2015* has played a pivotal role in the transgender rights movement in Kerala.

Anil Arjunan State Co-ordinator Kerala State Transgender Survey 2014

# Trans lives Matter: Experiences of Transgenders in Kerala

# **1** Introduction

The Supreme Court of India vide Judgment dated 15<sup>th</sup> April, 2014 has recognized the right of transgenders (TGs) to be treated as the third gender apart from the existing binary genders to safeguard their constitutional rights, including the right to self-identify as male, female or third gender.<sup>1</sup> The judgment also directed the Centre and State Governments to grant legal recognition of their gender identity, to treat them as socially and educationally backward classes and to extend reservations in educational institutions and for public appointments to them.<sup>2</sup>

Section 377 of the Indian Penal Code, was enacted by the British colonial regime in 1860 to criminalise 'carnal intercourse against the order of nature'. It was rooted in the Judeo-Christian religious morality that abhorred non-procreative sex. The danger of section 377 lies in the fact that it permeates different social settings including the medical establishment, media, family and the state. Violence gains a semblance of legal acceptability. Section 377 expresses the deep societal bias towards sexual minorities and provided legitimacy for the harassment of sexual minorities, which includes transgenders. In the year 2009, the Delhi High Court passed a landmark judgment holding Section 377 as violative of Articles 21, 14 and 15 of the Constitution, insofar as it criminalised consensual, private sexual acts of adults. However, this was short lived as the Supreme Court of India over ruled the Delhi High Court's judgement and reinstated section 377 of the IPC in 2013.

The state of Kerala became the first state in India to develop and disseminate a state policy for transgenders on 12<sup>th</sup> November 2015 (See Box 1). Further it intends to frame specific policies in the areas of health, education, employment, protection from abuse and harassment, and housing and pension schemes for transgenders, while extending benefits of existing schemes to them.

The Department of Social Justice, Government of Kerala commissioned Sangama to conduct a seminal study to assess the needs of transgenders in Kerala. The Transgender Policy issued by the government of Kerala has been written on the basis of the findings from this study with 3,618 transgenders across, as well as the judgment passed by the Supreme Court in 2014.

# Box 1: Purpose of State Policy for Transgenders in Kerala

The genesis of the problems of transgenders in India lies in the stigma and discrimination they face in society, resulting in their exclusion from socio-economic and political spectrum. They are one amongst the marginalized sections of society. Transgenders have unique needs, which are disregarded and ignored by society. In view of the systemic injustices that prevent this minority community from realizing equal rights, they are forced to live as second-class citizens in their own countries. To rectify this situation, the State Government issues this policy, to enforce the constitutional rights of transgenders, taking into account the Supreme Court judgment (2014) and the findings of the Kerala State Transgenders Survey.

Transgenders tend to be excluded and stigmatized from society as they do not conform to expected societal gender roles. In fact until the recent census in 2011 they were even

<sup>&</sup>lt;sup>1</sup> NALSA v. Union of India, 2014

<sup>&</sup>lt;sup>2</sup> ibid

omitted entirely from household surveys. Due to this invisibility, there is a lack of understanding about transgenders' issues which this study aims to address.

This report is pivotal because of its scale (3,618 respondents) and due to its participatory nature as it was conducted by the transgender community itself. One advantage of transgenders conducting the survey the reach is far greater and they are more likely to be honest with their responses thus increasing the validity of the findings. One disadvantage is that the surveyors were not trained researchers which resulted in some limitations further explained in the methodology section.

The scope of this study is to document the experiences of transgenders in the areas of social inclusion, economic inclusion, access to services, gender identity, and the violence they face in public and private spaces in the state of Kerala. Further it aims to understand the socioeconomic and psychological status of the transgenders in the state and to create a transgender census in Kerala. The study's findings were intended to design public awareness drives to change misconceptions about transgenders, to remove stigma and to mainstream the transgender community. This could form the basis for state led interventions to benefit transgenders in the state of Kerala and also help formulate policies at state and national levels.

### 2 Literature Review

For the first time in the history of India, the census of 2011 listed transgenders as the third gender separately, and arrived at a national count of 490,000. Transgender activists however, estimate actual figure to be six to seven times higher<sup>3</sup>. **Box 2** provides the official definition of

#### Box 2: Definition of Transgender

As per the report of the expert committee set up by the Ministry of Social Justice and Empowerment of the Govt. of India, *transgender persons are* persons whose own sense of gender does not match with the gender assigned to them at birth. They will include trans-men & trans-women (whether or not they have undergone sex reassignment surgery or hormonal treatment or laser therapy, etc.), gender queers and a number of socio cultural identities, such as *kinnars, hijras, aravanis, jogtas*, etc.

Source - <u>http://socialjustice.nic.in/pdf/chapter1.pdf</u> (p.9)

transgenders in India. Majority of transgenders do not come forward with their "gender identity" for fear of social stigma attached to it and hence it is near impossible to get an accurate figure of number of transgenders. Respondents in the current study in Kerala, in fact, further question the usage of the term third gender, the construct of which itself has a patriarchal basis of hierarchy assigned to each gender.

Legal issues for transgenders include the lack of legal recognition of their gender identity, difficulties in child adoption, lack of defined inheritance laws, employment discrimination, and lack of proper access to public and private health benefits (UNDP 2010). Lack of legal recognition and proper identification affects transgenders adversely in forming associations, accessing benefits like ration cards (food-price subsidy), opening bank accounts, and obtaining driving licenses.

The Supreme Court Judgment of 15<sup>th</sup> April, 2014 emphasised the right to freedom of speech

and expression, which includes one's right to express his/her self-identified gender, and that the state is bound to protect and recognize the rights entitled to the transgender community<sup>4</sup>. **Box 3** lists the articles of the Constitution of

<sup>3</sup> Nagarajan, 2014

# Box 3: Constitutional Provisions on Equality,

**Discrimination, Privacy and Dignity** The constitutional provisions in India mandate Justice - social, economic, and political; liberty of thought, expression, belief, faith and worship and equality of status – to all its citizens. Articles 14, 15 and 21 of the constitution respectively provide for the right to equality, prohibit discrimination on the ground of religion, race, caste, sex or place of birth, ensures right to privacy and personal dignity to all the citizens.

<sup>4</sup> NALSA v. Union of India, 2014

India which transgender persons are entitled to. This includes the right to equality, equal protection and dignity to prohibit discrimination on the ground of gender identity.

The issues faced by the transgender community are manifold. In India, they are often denied access to key social goods, such as education, employment, health care, housing, and social security pensions.<sup>5</sup> Most transgenders have been told that they are abnormal. They are restricted from social and cultural participation. The discrimination starts at home as families are not able to accept that their child is different from others. It gets amplified in public spaces like hotels, restaurants, buses, airports and government offices where transgenders are verbally harassed or disrespected.<sup>6</sup> They face abuse from police, and antisocial elements who find them an easy target for extortion.

Sexual violence against transgenders has been reported by multiple studies. Growing up, they are prone to child abuse and sexual assault. They are subject to harassment, sexual advances and rape.<sup>7</sup> Many have experienced domestic abuse and had to move away from family or friends<sup>8</sup>

Exclusion is strongly experienced by transgenders in health and education sectors. In schools, many transgenders drop out. Despite literacy rates being comparable with others, severe harassment and lack of specific provisions or reservations for them in education, result in transgenders being unable to access higher education.

Transgenders also face health issues which the healthcare system is not geared towards. Discrimination against them includes their being addressed, registered and placed in wards with genders that they do not identify with. They face verbal harassment by co-patients and hospital staff, many of whom are not sensitive to or trained on providing treatment to transgenders.<sup>9</sup>

Transgenders have limited employment opportunities as most employers prefer male or female genders.<sup>10</sup> They cannot even apply for most jobs. Employers deny employment to even qualified and skilled transgender people. The lack of livelihood options is a primary reason for a significant proportion of transgenders to choose or continue to be in sex work - with its associated HIV and health-related risks.

Transgender communities especially youth, face great challenges in coming to terms with one's own gender identity (UNDP, 2010), resulting in depression or development of suicidal

tendencies. Triggers for mental health issues include societal stigma, lack of social support, positive HIV status, and violence-related stress.

The participation of transgenders in the political processes of India is negligible because of unclear rules and archaic systems. Transgender people now have the option to vote as a man, woman or 'other'. *"If trans people are a minority with almost no rights in this country, trans-men are a minority within that minority."* 

Source: Round Table 2014 citing a letter written by trans-men to Ministry of Social Justice and Empowerment

Over a year after the Supreme Court's landmark judgment on ensuring transgender rights, one group in the transgender community i.e. trans-men, continue to be left out. Trans-men

<sup>&</sup>lt;sup>5</sup> Ministry of Social Justice and Empowerment, 2014

<sup>&</sup>lt;sup>6</sup> Grant et al., 2011

<sup>&</sup>lt;sup>7</sup> ibid

<sup>&</sup>lt;sup>8</sup> ibid

<sup>9</sup> United Nations Development Programme, 2010

<sup>&</sup>lt;sup>10</sup> Ministry of Social Justice and Empowerment, 2014

have very low visibility and lack support systems even within the transgender community.<sup>11</sup> In a patriarchal and trans-phobic society it is even more difficult for trans-men to survive. Being born as female, they are guarded behind closed doors for years with their movements being restricted. They are physically attacked, verbally abused, among others for not conforming to the societal accepted gender norms. They are teased in schools and colleges, which forces them to drop out of educational institutions. They struggle for jobs, housing, and health facilities, among others.

# 3 Methodology

Sangama's research methodology utilized a quantitative data questionnaire to capture an understanding of broader social issues faced by the transgender community in Kerala, India. The questionnaire was administered from January to February, 2015 in Malayalam by transgender community leaders. The use of the community was an instrumental element in the research design.

Table 1:Demographics of Transgenders in Kerala $(N = 3619)$										
Age										
N/%	16-20	21-30	31-40		41-50		51 >			NR*
Ν	114	1634	1305		301	1		45		220
%	3.2	45.2	36.1		8.3			1.1		6.1
Category										
N/%	General	OBC	Scheduled Caste		Scheo	Scheduled tribe			Other	NR
Ν	626	1595	1155		4		4	6		233
%	17.3	44.1	31.9		0.1		0.1	0.2		6.4
			Gender							
N/%	Christian	Hindu	Muslim		Female to	Female to Male M		Male to Female		NR
Ν	647	2368	558		8			3603		8
%	17.9	65.4	15.4		0.2			99.6		0.2
Monthly Income										
N/%	Below 3000	3000- 5000	5000-10000		10000-25000		Over 25,000		NR	
Ν	1217	745	1007			248			4	398
%	33.6	20.6	27.8			6.9			0.1	11

\*No Response (NR)

#### Geographic locations

The survey was administered in all districts of Kerala: Alappuzha, Ernakulam, Idukki, Kannur, Kasaragod, Kollam, Kottayam, Kozhikode, Malappuram, Palakkad, Pathanamthitta, Thiruvananthapuram, Thrissur and Wayanad.

#### Sample

Table 1 describes the broad characteristics of survey respondents in the sample. The sample composed of 3,618 individuals from a variety of caste and religious backgrounds. Hindus constitute the majority at 65%, Muslims 15% and Christians 18% of the sample.

<sup>&</sup>lt;sup>11</sup> Deb, 2015

However, according to census data Hindus constitute 55%, Muslims 27% and Christians 18% of the population in Kerala. Hence the sample is not exactly representative of the population's distribution by religion across Kerala.

The sample consisted of Other Backward Classes (OBC) (44%), Scheduled Castes (32%) with an extremely limited representation of scheduled tribes (below 1%). Most transgenders (80%) fall into the Below Poverty Line (BPL) category, whereas in Kerala only 12% of the population is below the poverty line<sup>12</sup>.

#### **Community Participation**

Due to high social stigma attached to being a transgendered individual it is difficult to reach out to the population. Therefore, Sangama took the support of Sexual Minorities Forum-Kerala, to coordinate the survey at the field level and ensure participation of transgender community members in every stage of the data collection process. Meetings were held with community leaders who gave their inputs to modify the questionnaire to bring out the issues, status and problems of transgenders. These community members were extensively trained as field investigators in quantitative data collection methods to accurately capture data. Once trained, the field investigators went out into their respective communities and surveyed other transgender individuals who would then refer them to other transgenders. This sampling method is referred to as chain-referral.

Experts from the University of Kerala were consulted to ensure the social and statistical validity of the questionnaire before it was administered. It is believed that by employing this methodology research efforts were able to capture issues, status and problems of transgenders in Kerala. The questionnaire was approved by the ethics committee. The methodology was thus designed to ensure maintenance of confidentiality by obtaining informed consent and by changing the names in the report.

#### Limitations

The study is limited in that the sampling method might exclude a segment of the transgender population. The chain-referral methodology allows truthful answers from respondents, but field investigators only work within their social networks. A sub-group from any category might not be reached because referrals to them would not exist.

Another limitation of the study is that a vast majority of respondents are male to female transgenders, thus female to male transgenders are underrepresented. Possible explanations for the disparity is male to female transgenders are more visible within the community and are easier for community based organizations to identify and work with. To correct this bias separate focus group discussions (FGDs) were conducted with trans women and trans men.

The geographical reach is also a limitation because it does not cover the entire state of Kerala. The districts with lower response rates included Wayanad, Idduki, Malappuram and Alappuzha, because of the difficult terrain and lack of mobilized groups in these areas.

The 2011 census shows a higher proportion of Muslims (27%) and a lower proportion of Hindus (55%) in comparison to the sample (at 15% and 65% respectively). This could be due to the lower representation of respondents from districts like Malappuram and Wayanad where the Muslim population is higher at 70% and 29% respectively. The scheduled caste (32%) and scheduled tribe (0.1%) populations in the sample are not proportionately represented as per the 2011 census (9% and 1% respectively).

<sup>&</sup>lt;sup>12</sup> Planning Commission, Government of India, 2012

Low response rates from respondents also limited the quality of the data. This may be a result of two factors. The first being the discomfort that transgenders may have experienced with a government-led official study. The second was the possible use of the community for outreach and data collection. If trained researchers were used this may have resulted in more detailed responses.

# 4 Findings

This section presents the findings of the study, focusing on various issues of transgenders including those concerning their identity, social and economic exclusion, and difficulties they face in accessing public services.

# 5 Gender Identity and Gender Expression

"Gender identity" refers to a person's internal, deeply felt sense of being either man or woman, or something other or in between. Because gender identity is internal and personally defined, it is not visible to others. In contrast, a person's "gender expression" is external and socially perceived. Gender expression refers to all of the external characteristics and behaviors that are socially defined as either masculine or feminine, such as dress, mannerisms, speech patterns and social interactions.<sup>13.</sup> The Supreme Court judgement<sup>14</sup> gives an individual the agency and right to self-identify their own gender. The

Ministry of Social Justice recommends that transgenders should be declared as the third gender, and a transgender should have the choice to be classified as 'man', 'woman' or 'transgender'.<sup>15</sup> The majority of the sample was trans women (99.6%). When asked about their preferred gender status in official documents, of the 532 respondents the majority (86%) wanted to be identified as trans women and only 14% said they wanted to be identified as female with no respondents mentioning the third gender as their official status.

We don't like this 'third gender' term. We prefer to be called transgenders. Gender is a self-identity. Physically I am male, mentally I am female, my trans identity is female but I am not a female, I am male. So I am a transgender and not male or female. I like to be called transgender. After surgery, I will be a woman.

FGD with transgenders from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015

One crucial aspect of identity is whether people choose to change their body as per their chosen gender. Towards being accepted and not judged and a part of society, most transgender people seek to bring their bodies more into alignment with their preferred gender identity. To achieve this, they take prescribed hormones by doctors and some even go through surgery. However, many transgender people, choose not to go through medical procedures to change their body structure, and are content with simply dressing like the opposite gender.<sup>16</sup>

A second aspect of identity is the way people choose to dress. Cross-dressers are people who have an urge to dress and act like their opposite gender. Any individual should have the freedom to cross dress<sup>17</sup>. Of the 71 respondents on cross dressing, 61 transgenders (86%) in Kerala said they would like the freedom to cross dress.

Identity related issues of physical changes and cross dressing in India, even while desired, are not actively sought after as many transgenders are not open about their identity with

<sup>&</sup>lt;sup>13</sup> Ministry of Social Justice and Empowerment, 2014

 $<sup>^{\</sup>rm 14}$  This judgement is in line with the Argentinian Gender Identity law, 2012

<sup>&</sup>lt;sup>15</sup> Ministry of Social Justice and Empowerment, 2014

<sup>&</sup>lt;sup>16</sup> Kids health, 2014

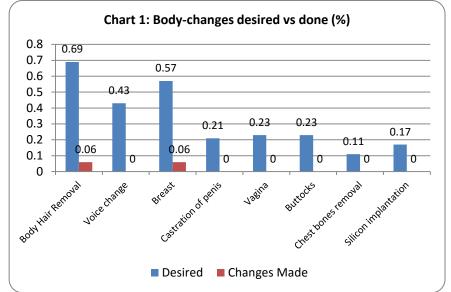
<sup>&</sup>lt;sup>17</sup> Lynne, 2005

their families<sup>18</sup>. Thus any overt expression of their transgender identity could be seen as a threat to their status at home or even the status of their families within society. Second, physical changes through surgery were seen by many as unaffordable. Finally, transgenders were also scared of health complications that may arise post-surgery.

#### **Body structure**

It is possible for a transgender person to be completely comfortable with his or her body and to not to experience gender dysphoria.<sup>19</sup> Very few respondents (20%) were willing to discuss whether they were satisfied with or wanted to change their body structure. Of these, nearly  $57\%^{20}$  said that they would like to change their bodies.

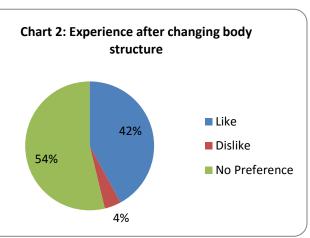
Findings indicate that although the desire among transgenders to change their bodies to align it with their preferred gender is very high, in practice, there are very few transgenders who altered their bodies through medicine or surgery (Chart 1). For trans-women. facial and body hair being the most powerful indicators of maleness, this creates physical and psychological distress



for those who want to be seen as female. Hence, it came as no surprise when nearly 69%<sup>21</sup> of transgenders who responded said that the first change they would make to their body was the removal of body hair. Approximately 57% of respondents said that they wanted surgery to enhance their breasts and 21%

wanted penis castration.

Most transgenders (89%) of the 630 who responded had not changed their bodies. Of these, 36 respondents reported changes such as hair removal (6%) and surgery for breasts (6%). Almost none had reported castration. The reasons for not aggressively pursuing changes to their bodies are high costs involved as well as a fear of such surgeries not meeting their expectations. They are not very convinced about the abilities



<sup>&</sup>lt;sup>18</sup> FGD with transgenders from Kerala, 30th December 2015

<sup>&</sup>lt;sup>19</sup>NHS Choices, 2014. As per NHS, UK, gender dysphoria is a condition where a person experiences discomfort or distress because there is a mismatch between their biological sex and gender identity.

<sup>&</sup>lt;sup>20</sup> n = 705

<sup>&</sup>lt;sup>21</sup> n = 432

of doctors to undertake such surgeries to their satisfaction. When asked how they felt after making the desired changes on their bodies, 42%<sup>22</sup> said that they were very pleased while over half were indifferent (Chart 2).

Most transgenders did not have the support, either financial or moral, to change their physical appearance. Only 18% of 517 respondents who answered this question reported receiving support for body changes. Of the 469 who responded, 11% said that financial support to pay for changes in their body structure came from their partners, while 4% financed themselves.

No one here has had any changes done to their body yet. We can't afford it. We must find where we can get free surgery

Nanda, transgender FGD with transgenders from Kerala, *Sangama, Bangalore, 30<sup>th</sup> December, 2015* 

# 6 Experiences and Issues of Trans-men

While transgender is a very popularly used expression, when used, it most often refers to trans-women (MTF). However, in reality the term transgender also includes Female To Males (FTMs, also known as trans-men). Transmen face further discrimination because the sex assigned to them at birth is female and in a patriarchal society it becomes even more difficult to express their gender identity.

Trans-men, being in a minority among transgenders, have less support in the form of organizations and visibility, therefore skewing the focus of rights for transgenders heavily towards trans women. Government and NGOs focus also less on trans-men and more on trans women and MSMs (males who have sex with males) as their interventions center mainly around HIV prevention and treatment.

*Experience in educational institutions:* Trans men, like trans women, also face harassment in the form of verbal and sexual abuse from peers and teachers which lead to high drop out rates. Often they dislike dressing like a girl and when they do dress according to their preference, they are ridiculed.

I discontinued my education in 2nd PUC. I studied in a women's college and had cut my hair short and wore pant and shirt. Derogatory comments were hurled at me every day. One girl's parents complained about me saying that this was a women's college, not for boys. The Principal told me and my mother that I must come to college dressed as a girl. The Principal spoke badly to me and after that talk, my teachers and fellow students also started treating me with disrespect. I want to study because I like it. But due to this situation I had to drop out.

A trans-man from Kerala, FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015

Health Issues of trans men: With regard to both trans women and trans men, the healthcare sector is steeped in ignorance about sexual minorities and their issues. Consequently many transgenders either avoid going to hospitals for treatment or often come away without getting

treated as a result of the harassment they are subjected to. For trans-men, the process of transitioning their bodies is difficult because of lack of credible information and support. At times, it takes years for them to get a certificate from a psychiatrist which certifies them for hormone replacement therapy.

A friend of mine went to the hospital because he got a rash on his hand. He openly declared to the doctor that he was a transman. But the doctor called the nurse and asked her to check him. He objected saying that he had openly declared his gender. The doctor insisted. So he fought and came away without being medicated for his rash.

A trans-man from Kerala, FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015

<sup>&</sup>lt;sup>22</sup> n=145

Sex reassignment surgeries for this group are also complex and doctors are ill equipped to handle either surgeries or psycho-social issues related to trans men. As doctors lack awareness and sensitivity, they often experiment with surgeries, which lead to distrust and dissatisfaction. Some doctors are supportive while others are openly judgmental about gender identities. This in turn makes it difficult for transgenders to be honest about their

The order of surgery usually is first breast removal, then removal of ovaries and uterus and finally penis re-construction surgery. I did surgery and removed my breasts but I am not happy with the results. The reason is that the doctor made many mistakes. I trust doctors and look at them like they were God. They need more awareness because when doing surgery on trans persons, doctors experiment. They do not do the operation the same way on everyone – they do the same operation in different ways on different people. It is an experiment for them, they are playing. My doctor said that he would do penis construction surgery but I do not trust him anymore. The breast surgery was not to my satisfaction so who knows what he will do with this surgery.

A trans-man from Kerala, FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015

issues. Distrust further deepens due to variation in costs charged by doctors for the same service. According to one trans man, "The cost for surgery varies between Rs. 75,000 and Rs. 3 lakh. There is no guideline for this."<sup>23</sup>

Discrimination at the work place: According to trans-men, it is very difficult for them to get mainstream jobs. When interviewing for jobs, trans-men are told by the organisations that the way they look (they usually have short hair and wear masculine attire) is unacceptable and that if they wanted the job, they would have to conform by being more feminine. A large number of them are relegated to menial and temporary jobs.

Discussions with trans men revealed the types of problems they encounter on the job. Many

For trans men, mainstream jobs are usually in NGOs and CBOs. Even though they feel like men, they do not show or admit it because they need the job. I have a friend who is a trans man and he works in an office but has not told anyone about his feelings. So based on his appearance, he is usually the subject of verbal abuse from colleagues in the office. People express their opinion on whether he is a man or a woman. They also face sexual harassment at work.

FGD with trans men from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015

trans men face derogatory comments from the public or co-workers. Arjun (name changed), a trans-man, spoke about the period before he had started taking hormones, "My boss knew that I was a female. But when customers came into the shop, they would point at me and ask, 'is that a he or a she?' This made me feel very bad and so I left the job."<sup>24</sup> Others reported incidents of sexual harassment from employers. As a consequence trans men, like trans women are often forced to hide their identity in the workplace. There is level of physical familiarity that exists among men that trans men fear as this may reveal their identity.

Where toilets are concerned, it is a good idea to have a transgender toilet in public places. However, this too can raise problems. If people are seen entering a transgenders' toilet, people will still stare and ask why they are using a transgenders' toilet. So, all transgenders may not necessarily use such a toilet. There should be a common toilet for men and women.

A trans-man from Kerala, FGD, Sangama, Bangalore, 30<sup>th</sup> December 2015 Public facilities: Trans men are very uncomfortable using public facilities like restrooms as they can neither use the men's toilet (since they have not had a penis reconstruction surgery), nor the female toilets because they look like men. As they fear their gender can get revealed, many trans men avoid toilets which in turn leads to health issues.

<sup>&</sup>lt;sup>4</sup> FGD with trans men from Kerala, 30th December, 2015, Bangalore

*Violence*: Trans men are more likely to be victims of physical and sexual violence from family members as well as outsiders. They say that the only way to deal with violence at home is to leave home. Nevertheless, this exposes them to the risk of physical violence outside. Lack of specific laws allows the police and goons to fearlessly engage in violence and harassment of gender minorities. Sonal Giani, Advocacy Manager at Humsafar Trust, said in an email interview, "When this [violence] is reported to the nearby constable or police, they do not take the violation seriously."<sup>25</sup> Further approaching the police is often not an option as the police themselves are viewed as perpetrators of violence by transgenders.

*Preferred Gender Identity:* Most trans-men were against state policies of referring to transgenders as a 'third gender'. They considered themselves men and wanted their legal documents to reflect their genders as male.

There is a process involved in changing the gender of a person in legal documents. The first step is to change the person's name by filing an affidavit. The other important document necessary is the gender certificate which is given by a psychiatrist. Finally, a trans-man needs to submit documents pertaining to their sex change surgery. "Getting documents with our preferred gender is generally very difficult. But today, more people are aware about issues so there is more support and understanding"<sup>26</sup>. Siddhanth, a trans-man said, "When you are transitioning and have to change your documents, you have to go out and tell people that I am a female who is becoming a male. This is very stressful because people don't understand. There is lack of knowledge and trans men are scared about coming out. I feel acceptance will come through knowledge. If you educate people about what you are, I am sure there will be a change in the society."<sup>27</sup>

<sup>&</sup>lt;sup>25</sup> Sitlhou, 2015

<sup>&</sup>lt;sup>26</sup> FGD with trans-men from Kerala, December 30th, 2015

<sup>&</sup>lt;sup>27</sup> Deb, 2015

#### Spare us your sympathy!

Zoom into playgrounds on a Sunday morning and you will find it swarming with youngsters playing cricket or football. Arjun (name changed) too goes out to play cricket and feels nostalgia for the days when he played in the national women's cricket team. Arjun was born a female, to a very poor single parent family. Life had dealt him a hand full of setbacks, including being born a female, when he felt like a male. Arjun recalls a time when he was very young and his mother wanted to buy him some new clothes. He showed his mother a picture of a little boy and girl in a photograph, pointed at the boy, and said he wanted clothes like that. At the time, he clearly did not understand why he felt unlike other girls his age, but he clearly did. He hated wearing the frocks his mother bought him. He went through his schooling in an all-girls school, and, though a good student, he was unhappy being in a female environment all the time. He joined the school cricket team when he was in the eighth standard and excelled at the sport, representing the school at state level tournaments.

By the time he entered pre-university in a women's college, Arjun had cut his hair short and only wore pants and shirts. He says that he even used to receive love letters from girls who were in love with him. But life continued to be unkind. When he reached pre-university, some parents complained to the principal about him saying that this was a girl's institution and he was a boy. The principal summoned Arjun's mother and told her that he must conform and be more feminine in his behavior and the clothes he wore. News of this reprimand spread like wild fire through the college. As a result, Arjun became the victim of cruel comments from his peers and insensitive treatment from his teachers. Arjun said, "I want to study because I like it. But due to this situation I had to drop out. All trans-men drop out due to similar problems".

Arjun's mother had been diagnosed with a kidney ailment and he needed to care for her. His mother understood that her child was different .She worried about him and wanted him to comply with the rules of society, by marrying a man, so that he would be safe and not alone. But for Arjun, this was not an option. He recounts a story of a friend, who was someone just like himself – a man trapped in a woman's body. This friend's family decided that if she married a man, she would be cured of her 'illness'. The family forced her into a marriage against her wishes, and her husband raped her every night. This resulted in her getting pregnant and having a son. Arjun says that today, this friend has left her marriage and lives separately with her son. She feels and dresses like a man but has to 'act' as a mother to her child.

Arjun feverishly searched for work in Kerala but in vain. Everyone would ask if he was a boy or a girl because he wore a pant and shirt. "I felt like a boy but I am a female. Then they would say that if I wanted a job, I should come dressed like a girl in a salwar. But I don't like that"! Living in Kerala was hard because people knew him.

In 2004, Arjun attended the World Social Forum in Mumbai. Arjun said that this was the first time that he met so many people who were just like he was. At the Forum he met a trans-woman called Femilia who was a huge influence in his life. Arjun and Femilia ended up in a relationship which lasted for six months. Femilia introduced him to Sangama, an organization that helps transgenders, where he joined as an office assistant. In 2004, with great apprehension and fear of being discriminated against, Arjun took the decision to move to Bangalore. Today he is the training officer at Sangama for 33 districts.

Arjun wanted to join a gym, but he was apprehensive about the perception of others there. However he gathered the courage and spoke to the gym instructor who was initially taken aback but was very supportive. He promised to keep his gender identity private and encouraged Arjun to use the gym.

There is a view shared by Arjun and others like him, as to why people like him are scared to come out and declare their gender identities as trans-men. "We live in a patriarchal society and therefore, being female renders us powerless and inferior. We, who are born female, are invisible. So as trans-men, we are minorities among the minorities". Arjun further endorses this point of view by saying that even though the government has come out with policies for transgenders, they only see the MTF transgenders. "We, who are FTM, are invisible in their eyes and they lack knowledge about us."

Arjun has gone through hormonal therapy and now has a beard and looks completely male. He has also gone through breast removal surgery, but says that he is unhappy with the job done by the doctor. "The reason is that the doctor made many mistakes. I trust doctors and look at them like they were God. They need more awareness because when doing surgery on trans persons, doctors experiment".

For change and acceptance of trans people to happen, Arjun says that the family must accept those in the household who are trangenders and therefore different. If this happens, the trans person will get an education and then a good job. Society will observe this and start changing. He also says that the transgender community must unite and should come out and demand their rights. "If we come out into mainstream society and get jobs, people will see us and give us more chances".

Arjun is the epitome of positivity and high energy in the face of every adversity that life has thrown at him. He refuses to give up on people's ignorance and lack of understanding around those like himself. He smiles disarmingly when he says, "If someone ties your hands and legs and puts you in a box, how long would you be able to stay in it?" With a never say die attitude, maybe, Arjun is the role model that the transgender community is searching for.

# 7 Violence and abuse against transgenders

The United Nations Human Rights Council has expressed "grave concern at acts of violence and discrimination, in all regions of the world, committed against individuals because of their sexual orientation and gender identity"<sup>28</sup>. Transgenders often face acts of violence and discrimination for not conforming to traditional societal norms in both the public and private spheres<sup>29</sup>.

More than forty percent of survey respondents reported to have been physically abused within the past six months, while 39%<sup>30</sup> encountered less than five violent incidents. The study examines violence and discrimination in the following spaces: interactions with the police, health centres, public spaces (e.g. markets and parks), schools/colleges and workplaces. Table 2 provides the frequencies of these acts of violence and discrimination faced in each space.

Reports of violence and discrimination by the police in the transgender community are not specific to Kerala, India. A comprehensive study completed in the United States revealed that one-fifth (22%) of transgenders are harassed by the police<sup>31</sup>. In comparison only 12%<sup>32</sup> transgenders in Kerala reported facing abuse by the police, which mainly comes in the form of intimidation (36%), vulgar comments (29%) and mental harassment (19%). In addition, 10% reported physical assault and 7% reported sexual assault by police. A member of the police might reveal the identity of a transgender in a public space, like the local market. Acts such as these and those more violent in nature perpetrated by the police are underreported (4%) out of fear of harassment. The net outcome is that a transgender's personal safety is at stake because of abuse from a wide range of quarters, the lack of safe redressal mechanisms and under-reporting due to the risk of police harassment<sup>33</sup>.

Table 2: Acts of Abuse Faced by Transgenders										
	Police		Workplace		Health centre		School/ college		Public places	
Acts of abuse	Yes	n	Yes	n	Yes	n	Yes	n	Yes	n
Vulgar comments	206	704	63	695	50	712	111	691	115	685
Intimidating	251	704	57	695	31	710	64	697	92	685
Mental harassment	134	704	97	695	72	712	152	697	137	685
Physical violence	69	704	34	695	36	714	74	697	52	685
Sexual violence	49	704	33	695	17	714	101	697	42	685
Insults	41	704	108	695	74	714	139	697	137	685
Discrimination	90	704	81	695	90	714	124	697	120	685

Physical and mental abuse by anti-social elements (*gundas*) in public spaces is a common experience for many transgenders. The study corroborates this with 31% reporting abuse from *gundas* in public spaces.

- <sup>31</sup> Grant, et al., 2011
- <sup>32</sup> n=297
- <sup>33</sup> ibid

<sup>&</sup>lt;sup>28</sup> United Nations Development Programme (UNDP), 2013

<sup>&</sup>lt;sup>29</sup> Ibid

<sup>&</sup>lt;sup>30</sup> n = 3,448

Sexual violence against transgenders is very common especially by male family members like brothers, uncle and father. School teachers and private tutors are also perpetrators of sexual violence.

FGD with transgenders from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015

I was in a relationship for seven years. When my partner's family members found out about our relationship, they came and beat me up so badly that I had to be hospitalized. I suffered from deep depression and did not want to live.

FGD with transgenders from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015 A total of 39% of transgenders reported experiencing violence. Muslims face higher incidence of violence (49%), as compared to Christians (35%) and Hindus (41%)

High rates of abuse within transgender relationships are common. It has been established that in the United Kingdom 16% of transgenders have experienced violence at the hands of their partners<sup>34</sup>. A startling figure established by this survey is that 41% of respondents are abused by their partners. Muslims (45% and 10%) face more violence in the home (from partners and relatives respectively) compared to Christians

(43% and 5%) and Hindus (40% and 5%). They also face a higher rate of violence from

friends (17%) compared to Christians (6%) and Hindus (4%). Among Muslims, high rates of sexual violence were reported (52%)<sup>35</sup>.

On the other hand in public spaces the reverse is true with Muslims experiencing comparatively less violence from *gundas* and police. This is primarily because they lead a secluded life within the family, with limited exposure to public places unlike Hindu and Christian transgenders. A total of 133 There have been instances when the public and the police have physically come and attacked me and my boyfriend while we were chatting in a public place. People have touched my body, and my boyfriend was beaten up when he expressed his displeasure. He was also abused by people for being with me, a Hijra. In another instance, at a function in Calicut, someone came and touched my buttocks. There are laws against women or men being physically touched or accosted, but there is no such law for transgenders.

Sheetal, transgender from Kerala FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015

transgenders have reported being forced to have sexual intercourse against their will in the past year and of these, 65 (49%) have been sexually abused by their partner.

In the workplace and medical systems, transgenders reported experiencing psychological harassment and discrimination, more prominently than physical or sexual violence. Psychological harassment can include derogatory comments and persistent teasing while discrimination can refer to denial of a job or promotion. On the other hand, physical and sexual violence is experienced more in encounters with the police, school/colleges and public spaces.

While these findings have formed the basis for the Kerala state policy on transgenders, policies alone do not stop violence and discrimination. Advocacy and awareness building can establish the necessary structure for redressal mechanisms such as crisis management centres, helplines and social welfare boards.

<sup>34</sup> McNeil et al., 2012

<sup>&</sup>lt;sup>35</sup> n = 691

## 8 Social Exclusion

Social exclusion describes the lack of ability of individuals to participate in economic, social,

political and cultural activities at a normatively acceptable level.<sup>36</sup> Social exclusion occurs when a certain section of people are discriminated against on the basis of ethnicity, religion, caste, gender, among others and are pushed to the fringe of society.

#### Education

Kerala is the most literate state in India with a literacy level of over 93.91% in comparison to the national literate rate of 74% as per 2011 census. This is reflected in the literacy level of transgenders with their overall literacy level at 93%. However, a more detailed analysis shows that 59% of the I love doing drama/stage shows and dance. A teacher in my school told me that I was not allowed to do female dances on stage because I was a boy. I told the school principal that I wanted an opportunity to act on stage. He said that I must do it because I had the talent. My principal and class teacher supported me. When I returned to my class, my classmates told me that I was a male not female and hence I must stop acting like a female because I was giving all boys a bad name. There was no support from them and hence I thought that if I was facing so much harassment and discrimination in PU College, how much more will I face in my higher studies? I had no option but to discontinue my education.

Nanda, transgender *from Kerala*, *FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015* 

transgender students drop out before completing the 10<sup>th</sup> Standard and 72% by the time of 12<sup>th</sup> standard due to discrimination. At higher levels, transgenders constitute only 6% of all graduates, according to survey findings, which is lower than the national average of 8% as per census 2011. Regular verbal harassment and insults including teasing about appearance, gait, and behaviour is one of the major factors in creating a dissuasive environment in educational institutions leading to drop outs.<sup>37</sup> However nearly half attributed dropping out to a negative home environment.

Discrimination of transgenders becomes more pronounced over time in the education arena. Of the 640 who responded, around 13% reported discontinuing their studies because of the violence and discrimination. The study also reveals sexual assault and gang rape of a

I discontinued my studies in 2nd PUC. I studied in a women's college and had cut my hair short and wore trousers and shirt and faced comments every day. Also, the parents of some girl students complained about me saying that this was a women's college and not for boys. The Principal called me and my mother and said that I was a girl and that I must come to college dressed as a girl. The Principal spoke very badly to me and after that talk, all my teachers and the students started treating me with disrespect. I want to study because I like it. But due to this situation I had to drop out. All trans-men face similar problems and drop out of their education.

FGD with trans men from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015 s sexual assault and gang rape of a transgender student by fellow students in school. The principal attributed this to the feminine behaviour and appearance of the transgender, rather than addressing the issue with perpetrators.<sup>38</sup>

The lack of transgenders' participation in job oriented education limits their ability to be gainfully employed. 72% of the respondents have not received any job oriented education with only 9% have received ITI & poly-technical education and 13% receiving some form of professional dance training. Several

<sup>&</sup>lt;sup>36</sup> Indicators of social exclusion and inclusion: a critical and comparative analysis of the literature by Labonté, Ronald N. ; Hadi, Abdullahel ; Kauffmann, Xaxier E. ; Canadian Electronic Library (Firm) ; Population Health Improvement Research Network, 2012

<sup>&</sup>lt;sup>37</sup> FGD with transgenders from Kerala, 30th December 2015

<sup>&</sup>lt;sup>38</sup> FGD with transgenders from Kerala, 30th December 2015

transgenders have their own culture of performing arts including dances and have sometimes employed dance as a means of earning their living.

Though education is an essential right of transgenders like any other citizen, educational institutions have failed to provide safe and supportive learning and educational environment to continue their studies without harassment, intimidation, bullying and discrimination on account of their gender identity.

#### Health

The right to health is a basic human right. The World Health Organisation (WHO) has defined health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."<sup>39</sup> Transgenders face institutional and societal barriers accessing healthcare facilities, which have a negative bearing on their health. They are deprived of access to healthcare due to stigma and discrimination at the health care settings and transphobia, among others.

One key barrier to access is that health services are not designed to accommodate the needs of transgender people. They require that healthcare providers are empathetic to them, and are sensitized to their health issues. Further, they require separate wards and facilities at hospitals. According to a detailed study on transgenders' mental health in UK, over 50% of transgenders mentioned that healthcare professionals did not know enough about the type of trans healthcare to be provided to them. Lack of any guidelines for physicians and other health care professionals on approach to primary care for transgender patients are major hindrances that transgenders face.<sup>40</sup>

This is corroborated by this study which is replete with examples of discrimination of transgenders in hospitals, even by doctors. In many cases, they are not recognized in the system and in the hospital records their gender is mentioned as decided by the staff. Transgenders also experience discrimination in the form of verbal harassment, comments on their appearance, and humiliation of their family members for having accompanied them to the hospital. There have been instances of refusal of care by the hospital staff to transgenders. In one such instance, the staff refused to admit the transgender for treatment as they were under the belief that all transgenders are HIV positive by default. It was only after they tested the blood samples for HIV and found the report negative that they commenced the treatment. Many transgenders reportedly, avoid going to hospitals for treatment, due to the embarrassment and shame they are put through.<sup>41</sup>

The study findings indicate that 78% of respondents<sup>42</sup> experienced health related problems. However, 45% of those who responded<sup>43</sup> prefer to go for treatment only when necessary. This points out to a systemic malaise which discourages transgenders from going to health centres and hence the preference for self-medication.

This is not to generalize the entire healthcare system as anti-transgenders. There are examples of doctors who have addressed the health issues of transgenders in the right manner. However, it is clear that there is an overall lack of trained and sensitive health care providers who can help create a better environment for transgenders<sup>44</sup>. Some of them are supportive while others are openly judgmental about their gender identities. The most

<sup>&</sup>lt;sup>39</sup> World Health Organization, 1948

<sup>&</sup>lt;sup>40</sup> McNeil et al.,2012

<sup>&</sup>lt;sup>41</sup> FGD with transgenders from Kerala, 30th December 2015

<sup>&</sup>lt;sup>42</sup> n=718

<sup>&</sup>lt;sup>43</sup> n=671

<sup>&</sup>lt;sup>44</sup> UNDP (2010) p.8

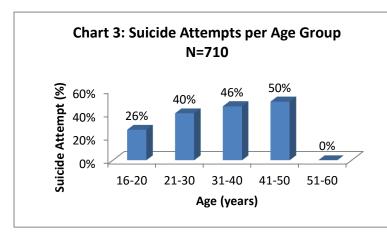
important aspect is that medical care should focus on the health problem rather than focus on gender identity of the patient and be sensitive to the issues of transgenders.<sup>45</sup>

Some transgenders undergo surgery and hormonal therapy in order to physically align themselves to their preferred gender. In the survey less than 1% of respondents had undergone hormone treatment while 2% underwent treatment through

Between 18 years and 24 years there is a lot of confusion and feelings of isolation. This could lead to suicide. Questions like why am I born like this? I am alone. What sin have I committed, go through all trans persons minds.

FGD with transgenders from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015

medicines or surgery. However, transgenders face issues due to the lack of expertise of doctors in conducting such surgeries. Sex reassignment surgeries are complex and doctors are not equipped to handle either surgeries or related psycho-social issues. The results of many such interventions are far from satisfactory and cause mental agony and distrust of doctors among transgenders.



Transgenders often have mental health issues due to the conflict of identity and lack of acceptance in society which leads to feelings of isolation. It is a known fact that globally, transgenders have high rates of suicide as compared to the general population. In the United Kingdom, 35% of transgenders have attempted to commit suicide (McNeil et al., 2012). While the national average in suicide rate in India

was 11.2%, Kerala is a state with the highest rate of suicides at 24% in 2012. Among survey participants who responded on this subject, 46% mentioned that they have thought of committing suicide in the past one year and 40% have actually attempted to commit suicide.

Suicidal tendencies are observed to be lowest among young adolescents in the age group of 16 to 20. There is a steady increase in the rate of suicidal attempts with age. Surya Vinod, a transgender, says "Some of us have forcibly been married to girls by their parents in Kerala. They have no alternative other than to commit suicide." <sup>46</sup> Absence of any support mechanism could be a factor responsible for high suicide rate.

I am born to a large Muslim family with two older brothers. But I feel all alone because of the alienation I face due to my gender identity. Since I was a child I faced discrimination. I had to drop out of school due to this. I am helpless which is why I am forced to do manual labour. I go to work and come home. But if I fall sick, there is no one to support me.

FGD with transgenders from Kerala, Sangama, Bangalore, 30<sup>th</sup> December, 2015

<sup>&</sup>lt;sup>45</sup> American Medical Students Association, http://www.amsa.org/advocacy/action-committees/gendersexuality/transgender-health

<sup>&</sup>lt;sup>46</sup> J Binduraj, India Today, 2013

#### Social interaction: Integration with family, friends and community

Social interaction is a major factor in determining relationships and acceptability of transgenders in the society. Social relations between transgenders and their families, relatives and friends are complex in nature.

More than two thirds (69%) of those who	Five years ago I came on TV with my
responded hide their sexuality from their	partner. Then my family got to know
family members. A higher proportion of	about my gender identity. They said that I
Muslim transgenders (85%) hide their	must live like a man or leave. My brother
sexuality from their family compared to	came to hit me. I immediately went and
Hindus (66%) and Christians (67%)	complained to the police. The police
respectively. Close to two-thirds of the	arrived at my house and warned my father
respondents feel that there is a risk of a	and brother. They said that it was my
negative reaction from others if their	right to live in my house, as a man or a
sexuality is revealed. Out of those who	woman or any gender.
responded 26% said that people would shun	Sheetal, a trans-woman from Kerala,
them if they come to know of their	FGD, Sangama, Bangalore, 30 <sup>th</sup>
sexuality <sup>47</sup> .	December, 2015

Another problem is that society thinks that being a transgender means being a sex worker. This is untrue. Society looks at us like sex workers. In my experience, when men have looked at me in a sexual way, I have explained that I am a transgender and NOT a sex worker. Then they have scolded me saying that if I was not a sex worker, what is the point of going around like a woman?

FGD with trans women from Kerala, Sandama. Bandalore. 30<sup>th</sup> December. 2015 Findings show that nearly 37% of respondents<sup>48</sup> have been denied family property rights because of their gender identity. The remaining respondents have retained their property rights which could be linked to their families not knowing their real gender identity. About 50% of the transgenders<sup>49</sup> have at some point been financially exploited by family members or partner. Only 38% of respondents are happy with the way their parents treat them<sup>50</sup>.

Recently in my Masjid the maulvis said that they would not allow me to enter to pray. In my family too I am facing many problems. They do not take me to family functions because of my feminine characteristics. They tell other people that I am dead.

Danya, transgender from Kerala, FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015

## 9 Economic Exclusion

Economic inclusion refers to participation of people in economic activities through the labour market, as also their capacity to purchase goods and services by generating incomes. For the purpose of this study, economic exclusion is limited to areas of employment and livelihoods.

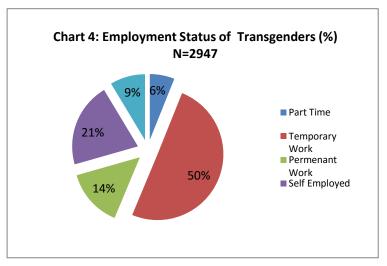
<sup>48</sup> n = 553

<sup>49</sup> n = 570

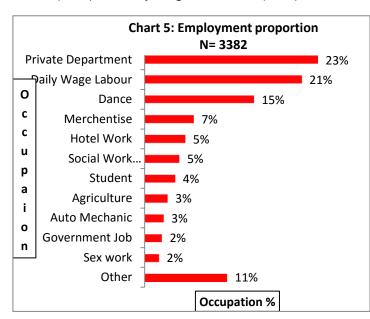
<sup>50</sup> n = 597

<sup>&</sup>lt;sup>47</sup> n = 647

The universal declaration of human rights asserts the right of individuals to work in a job of their choice and to receive equal pay for equal work, without discrimination. Transgenders are often denied this basic human right and tend to be concentrated in low paid temporary jobs. Findings show that only 14% of respondents have permanent work, half are temporarily employed while 6% of respondents work part-time (See Chart 4).



According to the Planning Commission<sup>51</sup> for 2009-10, the poverty line of Kerala is limited to a monthly per capita of 775.3 INR for rural areas and 830.7 INR for urban areas which translates to 9,303.6 INR and 9,968.4 INR respectively, annually. The study therefore categorized those below 10,000 INR as poor.



In terms of employment, over half the transgenders are employed in jobs in the private sector (23%), as daily wage labourers (21%), and dancers (15%). See Chart 5.

Within these three categories it was found that 98% of daily wage labourers, 94% of private sector workers and 89% of dancers earn less than 10,000 INR per month.

Transgenders are underrepresented in higher paid jobs such as the government jobs (2%), business (1%), and teaching (2%). Of the 65 employed in government 57% earn above 10,000 INR.

Close to two thirds (61%) of transgenders earn less than 5,000 INR while 92% of all transgenders earn less than 10,000 INR. Of those earning under 10,000 INR,

60% are concentrated in the private sector, as daily wage labourers and dancers. Looking at the distribution across castes, SCs and STs tend to be concentrated in the three low-paying sectors mentioned above.

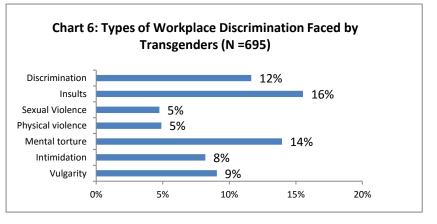
Studies conducted with transgenders show that, "*in order to avoid discriminatory actions and workplace abuse, many study respondents reported having 'delayed my gender transition' (57%) or 'hid my gender or*  I worked in a shop called Moti Silks, and the owner said to me that it would be better to close the shop and go home than to be seen with people like me. He said 'we don't want people like you working for us'.

Danya, transgender *FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015*  *gender transition' (71%)*".<sup>52</sup> Similarly, 75% of respondents<sup>53</sup> in Kerala have not revealed their transgender status at their workplace for fear that they may be denied jobs and promotions.

The current study shows that 10% of transgenders feel that they have been denied of employment because of their sexuality<sup>54</sup>. This is lower than the figures reported by other studies where "44% of survey respondents reported they did not get a job they applied for

because of being transgender or gender non-conforming".<sup>55</sup>

Grant et al. (2011) report that forty-seven percent (47%) of respondents experienced an adverse job action—they did not get a job, were denied a promotion or were fired because they are transgender or gender non-conforming. Similarly, McNeil et al. report that 52% of participants experienced problems with



work due to being transgender including harassment or discrimination. The present survey shows that of the 695 transgenders who responded, several face insults (16%), mental harassment (14%), or discrimination (12%) at work. However of those who face these forms of exclusion, the majority (98%) reported not complaining about it. (See Chart 6). Financial exclusion is also apparent from the fact that only 13% of transgenders reported having bank accounts.

## **10 Access to Services**

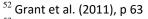
Having official identification documents is extremely important in the lives of transgenders, as it gives them legitimacy. It demonstrates their gender (man, woman or transgender), thereby protecting them from embarrassment, harassment and discrimination. In times of emergencies, inconsistencies between how a person looks and the gender mentioned in their documents could make them targets for unjust attention and abuse. Having these documents makes it easier for them to access schemes and entitlements.

#### Identification documents

Identity cards that recognize the preferred gender of respondents provides state legitimacy to the identity of transgenders. When asked whether their identity cards reflected their preferred identity, of the 681 who responded, 23% said they had identity cards which

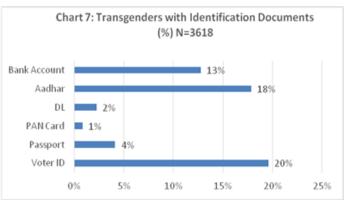
mentioned their preferred gender, most of which were in their voter identity cards.

In the survey conducted in Kerala with transgenders, only 20% reported having some form of identification. Of these, most reported having their names on ration cards. (See Chart 7).



<sup>53</sup> 2439 of 3246 respondents

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<sup>55</sup> Grant et al. (2011), p 54
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<sup>&</sup>lt;sup>54</sup> 58 of 605 respondents

There are issues in terms of the system continuing to operate within a binary norm of male and female. There is no provision of the third gender in all identity documents. There are instances where there is provision of the third gender but the authorities are not sensitive enough to let transgenders express their chosen gender. This translates into insensitive behaviour which in turn causes public embarrassment and personal humiliation to the transgenders.

When I went to get my Aadhar Card, they said that there was no gender option for transgenders and the only options were male and female. They told me to go to another center. I called Sheetal about this. She came and pointed out to the authorities that the form they had was old. They then downloaded the updated form which had the gender option for transgenders. When they came home for verification, I requested them to put my gender down as transgender. But I got my ID card with my gender stated as 'female'. I had to go back 1000 times before it was changed to 'other'. There is no awareness among government officials despite government policies around transgenders. When my friends who are also transgenders, needed to get their ID cards, I went with them to the authorities to help them get it.

Nanda, transgender FGD, Sangama, Bangalore, 30<sup>th</sup> December, 2015

#### Treatment Meted out at Public facilities

According to a report by the Ministry of Social Justice and Empowerment, GOI, because they are discriminated against, transgenders are not able to access basic facilities like educational, employment, medical and HIV care. They also face problems relating to marriage, property, electoral rights. They face persistent challenges in accessing public services like hospitals, parks, and toilets. The relevant Ministries need to work towards improving/changing laws towards allowing transgenders to live a life of dignity. Around 7% of transgenders surveyed in Kerala said that they received respect only sometimes, in public facilities. Of these, about 143 (23%) of the transgenders feel that they are never treated properly.

#### **Issues at the Health Centre**

In terms of different types of abuse faced by transgenders (because of their sexuality), at health centers, most respondents in the survey done in Kerala said that they had not faced any abuse. In comparison, in the Report of the National Transgender Discrimination Survey, 24% of the transgender surveyed were denied equal treatment at doctor's office or hospitals and 37% were harassed or disrespected. In mental health clinics, 11% of the respondents said that they had been denied equal treatment and 12% of them were harassed.<sup>56</sup> Accessing healthcare services, for common ailments, is traumatic for transgender people because they do not fit traditional gender roles. However, when asked if they had complained about the abuse and discrimination they faced, only 5% of the transgenders surveyed answered in the affirmative.

#### **Issues at Public Spaces**

In public places, transgenders admitted to having experienced insults and mental torture (20%). Around 18% of the respondents claimed to have been discriminated against in public spaces and 17% of them were on the receiving end of vulgarity. No one made any complaints to the authorities about this. The National Transgender Discrimination Survey found that 53% of respondents reported being verbally harassed or disrespected in a public

<sup>&</sup>lt;sup>56</sup> Grant, et al., 2011

space. The same report found that 22% of transgenders were denied equal treatment by a government agency or official (Grant, et al., 2011).

Before the Supreme Court ruling members of the transgender community were forced to identify themselves as either male or female in their identification documents. The landmark ruling of 15 April 2014 not only introduces the third gender recognition, but also stipulates that transgender people have access to the same rights to social welfare schemes as other minority groups in the country.

Laxmi Narayan Tripathi, says, "It will take a lot of effort on our part. We are championing having education on transgender issues as part of the education system so that young minds are made aware of transgender issues from an early age. The governments of respective countries should acknowledge transgender people and implement legislation to facilitate acceptance of transgender people—just as we are."

### **11 Recommendations**

The survey results provide a broad picture of the status and issues faced by the transgender community in the state of Kerala. It provides valuable evidence of how transgender persons in the state experience bias-motivated discrimination, stigmatization, violence and harassment in different areas of life, including employment, education, healthcare, housing and public services. This is strongly linked to their gender identity which does not allow them to conform to traditional social norms.

The transgenders are marginalized due to being engaged in low paying, low skilled occupations leading to poverty and further discrimination. One possible reason for this economic exclusion emerging from this study seem to be their low levels of education, high drop-out rates and reduced access to vocational skills. Another cause of their exclusion could be their gender identity which prevents them from getting jobs or promotions.

The study finds that the amount of violence experienced by transgenders was very high, in the home through partner violence and outside the home in schools and from the police, and *gundas.* Thus for transgenders there is no forum to address violence. Mental harassment and discrimination was more prominent than physical violence in public spaces such as the workplace and public service provision agencies.

The recommendations that emerge from this study include:

- Ensure Access to Health Care: To ensure that transgenders can access healthcare without discrimination, hospitals should adopt a policy that eases the registration and admission processes for transgenders and healthcare providers should be sensitised on the issues of transgenders. They should be provided healthcare through the Rashtriya Swasthya Bima Yojana. Further separate HIV sero-surveillance Centers need to be established as per the Supreme Court judgement and Sex Reassignment Surgery (SRS) be made available for free or at nominal rates at public hospitals. Transgenders must simultaneously be educated on options for gender transition and health facilities that they are eligible for.
- Ensure Access to Education: Because transgenders experience harassment and discrimination within schools, many drop out and even fewer go on for further studies. To ensure equal access to education, educational institutions should adopt a policy that address issues of gender non-conforming and transgender students as well as establish mechanisms to identify and address any form of discrimination or harassment. These mechanisms could include awareness-raising for all stakeholders, establishment of anti-

discrimination policies and cells, counselling for transgenders as well as capacity building for teachers, counsellors and other service providers.

- **Reduce economic vulnerability:** Reservations for transgenders in education and public appointments could go a long way in reducing their penury by providing them with opportunities to obtain better skills and consequently better paid jobs. Given the low rates of employment, self-employment grants should be made available to transgenders. To overcome bias, mistreatment and discrimination at the workplace, anti-discrimination and harassment policies that are-trans-inclusive should be adopted.
- **Right to Equality:** In order to safeguard equality of all members of society which include transgenders, as enshrined in the very first of the fundamental rights of the Indian Constitution, all government departments and public authorities should extend non-discriminatory treatment to transgenders.
- **Ensure Access to Services:** Transgenders should be provided barrier-free access to public spaces and services such as transport, health, education and social security, and be included as their preferred gender in all documentation related to public facilities. The provision of certain services such as free legal aid to transgenders seeking redressal against discrimination and violence, setting up of a transgender helpline and crisis management center and separate toilet facilities would be beneficial.
- **Right to a Life Free of Violence:** For transgenders to live with dignity and not experience violence, criminal action should be taken against any perpetuators of violence. These could include partners of transgenders, persons of authority such as the police, doctors who undertake any kinds of unethical conversion therapy. Laws dealing with violence could be made transgender inclusive. Due to the current lack of mechanisms to address violence a Transgender Justice Board with state Minister for Social Justice as its chairperson could serve this purpose along with other forms of discrimination.

"Stop violence against us in all areas of society – police, family, education institutions and hospitals"

Danya, transgender

"I want the right to expression, education, equality and the freedom to express my gender. The government must repeal Supreme Court judgment IPC 377".

Sheetal. transgender

"Do not discriminate against us and give us gender equality. We must have the right to a dignified life with equal opportunities given to us as human beings." Fizal, transgender

*"Give us gender equality and the freedom to express our gender."* 

Kavya, transgender

"We do not want your sympathy. We are also human so don't treat us differently"

Sonu, transgender