



Research Paper

Socio-Economic Inclusion of People with Non-Normative Gender and Sexuality, Especially the Transgender Population

Research Question- Are The Supply Of Social Schemes Enough? Don't They Demand Generation?

Ankita Sen (Student)

Department Of Sociology
Presidency University

Abstract: -

This research paper intends to look into the socio-economic experiences of the people who are gender and sex minorities in India focusing mainly upon the population of transgenders in West Bengal. It tries to study how gender and sexual "difference" can be correlated to economic hardships and lead to restricted livelihood opportunities in the socioeconomic scenario of India, rather West Bengal. I gained to gather a qualitative understanding of the status of economic inclusion of transgenders who are a non-confirming gender group. This paper will gradually examine and talk about certain government poverty alleviation programmes, their capacity to include gender non-confirming people along with the narratives of the intended population. I have used both the primary and secondary methods of data collection to substantiate and prove my statement. I have begun with primary literature review followed by semi-structured and unstructured interviews which was followed by group discussions with a number of transgender individuals. The data from all these three methods have been triangulated for the purpose of assessment. Apart from looking into the qualitative understanding of the status of social and economic inclusion of the non-confirming transgender population, this paper will also examine the barriers and restrictions to these inclusions and also certain strategies that can be adopted to improve them.

Received 14 June, 2021; Revised: 27 June, 2021; Accepted 29 June, 2021 © The author(s) 2021.

Published with open access at www.questjournals.org

I. WHO IS A TRANSGENDER?

On 6th November 2013, the Ministry of Social Justice and Empowerment (MSJE), Government of India, organized the first meeting of the Expert Committee on the issues relating to Transgender (TG) at New Delhi. Shri Anoop Kumar Srivastava is the additional secretary, MSJE and the chairperson of the committee. At the very beginning, there was an urgent requirement regarding a clear definition of the term "Transgender". Ms. Laxmi Narayan Tripathi referred to the international definition for consideration whereas Ms. Laya Medhini was of the opinion that the definition should be comprehensive and legally valid. The committee mutually felt that the proposed definition should take into consideration the context of the Indian Transgender and should be easily understood. Dr. Ketki Ranade stated that in India, the main focus has always been on male to female transgender and proposed that the female to male transgender should also be given equal importance while formulating a concrete definition of the transgender. She also talked about the Cisgender people. The members of the committee unanimously agreed to the proposition that there should be a third category of gender to be called "Transgender". (*Minutes of the first meeting of the Expert Committee on the issues relating to Transgender held on 6th November 2013 in the Conference Room in the Ministry of Social Justice and Empowerment, Shastri Bhawan, New Delhi; Annexure 5; page 26 of 55-27 of 55*)

In the second meeting of the committee, Dr. Ketki Ranade, Assistant Professor, School of Social Work, Tata Institute of Social Sciences, Mumbai, mentioned that in order to define or describe who is a transgender person, it is necessary to establish a basic understanding of what gender is and how and who it is determined by. She explained that gender determines every aspect of our life including our name, clothes, hair length, appearance, behaviour, occupation, mobility and so on. Even the public utilities like toilets, security check at airports and such others are gender specific. In terms of categories of gender, one may use the two categories of

“Cisgender” and “Transgender”. The category of cisgender is commonly referred to as man or woman. When people chose a gender other than the one assigned at birth, they fall under the category of transgender. She also informed that in India, there are several local terminologies and identities in different states that are used to describe transgender people. Some of these may further have specific socio-cultural or religious connotations such as in the case of “Hijras” or “Jogtas”. Dr. Ranade asserted that the term “Trans” spelt with an asterisk (trans*) is an umbrella term used to refer to all non-cis gender identities and expressions and suggested that the term “Trans” be used in the place of the term “Transgender”. Ms. Laya Vasudevan, from the Centre for Legal Aid and Rights, mentioned that transgender people are individuals of any age or sex whose appearance, personal characteristics and behaviour differ from the stereotypes about how men and women are “supposed” to be, or in its broadest sense, transgender encompasses anyone whose identity or behaviour falls outside of stereotypical gender norms. While aspects of biological sex are the same across different cultures, aspects of gender may not be. While explaining the term “Transsexual person”, she mentioned that there is a conflict between one’s physical sex and one’s gender identity as a man or a woman. Female-to-male transsexual (FTM) people are born with female bodies but have a predominantly male gender identity. Male-to-female transsexual (MTF) people are born with male bodies but have a predominant female gender identity. Sunil Mohan from Lesbite mentioned that the application of the concept of transgender should not be restricted to the certain socio-ethnic groups alone but should cover all the categories including the female to male transgender. The additional secretary of MSJE, Shri Anoop Kumar Srivastava suggested that a generic definition of transgender person could be ‘a person who chooses to identify himself/herself with a gender different from the one assigned at birth’. This should include all the categories such as Transman, Transwoman, Gender Queer and Transsexual, irrespective of whether a person belongs to a particular socio-cultural group (such as Kothi, Hijra, Aravani, etc) and whether or not a person has undergone sex reassignment surgery. He also cautioned that while talking about transgender people, one must be able to distinguish between the notion of ‘sexual orientation’ and that of the ‘inner sense of gender identity’ as two different aspects. He also opined that the terms ‘transgender’ and ‘transsexual’ should not be used interchangeably as these convey different connotations. A person should normally be considered as a transgender irrespective of whether he/she has undergone sex reassignment surgery. Unlike Dr. Ketki Ranade, Mr. Srivastava expressed that the term “Trans” may not be used in the place of “Transgender” as it may not be understood by everyone. (*Minutes of the second meeting of the Expert Committee on the issues relating to Transgender community held on 29th November 2013 in the Committee Room ‘A’ of Vigyan Bhawan Annexe, New Delhi; Annexure 6; page 31 of 55-32 Of 55*)

Finally, after two consecutive meetings, the Expert Committee decided that ‘transgender people are individuals of any age or sex whose appearance, personal characteristics, or behaviour differ from stereotypes about how men and women are “supposed” to be’. In its broadest sense, transgender encompasses anyone whose identity or behaviour falls outside of stereotypical gender norms. The contemporary term “transgender” arose in the mid-1990s from the grassroots community of gender-different people. In contemporary usage, transgender has become an umbrella term that is used to describe a wide range of identities and experiences, including but not limited to transsexual people; male and female cross-dressers; inter-sexed individuals; men and women irrespective of their sexual orientation, whose appearance or characteristics are perceived to be gender atypical. In its broadest sense, transgender encompasses anyone whose identity or behaviour falls outside of stereotypical gender norms. That includes people who do not self-identify as transgender but who are perceived as such by others and thus are subject to the same social oppressions and physical violence as those who actually identify with any of these categories. Other current synonyms for transgender include “gender variant”, “gender different” and “gender non-confirming”. (*Expert Committee Report; Introduction- Transgender people and their problems; Who are transgender people; What does transgender mean; page 1*)

II. TRANSGENDER INCLUSION:

Social inclusion is the process of improving the terms based on which individuals and groups take part or participate in the society- improving the ability, opportunity and dignity of those disadvantaged on the basis of their identity. (*wikipedia.com*)

Economic inclusion refers to the equality of opportunity for all the members of the society to participate in the economic life of their country as employers, entrepreneurs, consumers and citizens. (*wikipedia.com*)

Dr. Manmohan Singh, former Prime Minister of India once stated, “...we must keep in mind that growth must not only be rapid, it must be inclusive and sustainable. The benefits of growth must reach the SCs, STs, Minorities and other disadvantaged groups in our society...” (*Twelfth Five Year Plan 2012-17: Faster, More Inclusive & Sustainable Growth, Volume I, Foreword, page vi*)

The genesis of the problems of transgender people in India lie in the stigma and discrimination that they face in the society which ultimately results in their exclusion from the socio-economic-political spectrum. The transgender community is considered to be one of the disadvantaged groups and without their inclusion in

the development efforts, the objective of inclusive growth cannot be fully realised. (*Expert Committee Report, Chapter Five- Inclusive Approach, page 35*)

According to the chairperson of the MSJE Committee, the problems of transgender people can be broadly categorised into two parts:

- (i) Denial of various rights and facilities
- (ii) Social injustice

(*Minutes of the first meeting of the Expert Committee on the issues relating to Transgender held on 6th November 2013 in the Conference Room in the Ministry of Social Justice and Empowerment, Shastri Bhawan, New Delhi; Annexure 5; page 26 of 55-27 Of 55*)

The different facets of inclusiveness are inclusiveness as poverty reduction, inclusiveness as group equality, inclusiveness as regional balance, inclusiveness and inequality, inclusiveness as empowerment, inclusiveness as employment programs. While all these aspects are important, inclusiveness as group equality and inclusiveness through employment programs assume special importance for the community of transgender. Transgender community, being a marginalized group, should be included in any effort to achieve inclusiveness as group equality. (*Expert Committee Report, Chapter Five- Inclusive Approach, page 35*)

Transgender people in India face a variety of issues. These communities perceive that they have been excluded from effectively participating in the social and cultural life; economy; politics and decision-making processes. A primary reason of the exclusion is perceived to be the lack of or ambiguity in the recognition of the gender status of hijras and other transgender people. It is a key barrier that often prevents them from exercising their civil rights in their desired gender. Innumerable number of reports regarding harassment, violence, denial of services, unfair treatment against transgender people in the various sectors of employment, housing and public accommodation are being discussed in local media over the years. (*Expert Committee Report; Introduction- Transgender people and their problems; Who are transgender people; What does transgender mean; page 2*)

In an unstructured interview, a transwoman who is a Hijra by profession stated, “Inclusion? Good joke! Forget about economic inclusion, till date, we do not get proper recognition from the fellow others in public places. It is 2019 but still we are eyed on the roads with suspicion, mockery and hatred. Till date people hold superstitious notions against us. We are harassed, mocked at, taunted, assaulted and insulted in the public and surprisingly the crowd around us enjoys the sight and never protests. Some assume that we are sent by the God himself and consider crossing paths with us holy or a good omen whereas the others curse us upon our faces. How do you expect to receive economic inclusion when one is not socially accepted by the majority? Cholla (practice of collecting money on the streets, traffic signals, toll taxes, railway stations, trains, buses, etc- mostly daily wage); Khajra (sex work) and Badhai (practice of collecting money during weddings, child birth and such other auspicious occasions) are the only ways in which people from our community can earn. I wonder how insensitive and selfish man can be. On the roads they insult us, harass us but during the night, it is these men who come to us intoxicated and pay huge prices of money and demand sex. People who are engaged in this hijra profession have been shooed away from restaurants, shopping malls, movie theatres, temples and many other places of public interest. Why is it so? Are we not human beings? Don't we deserve equal rights as you do? Are we petty cartoons putting up comedy shows that we are always being laughed at? Why are we restricted from entering public toilets meant for women? Why do we have to show our genitalia to prove that gender identity that we outwardly show or believe in? Why are we attacked without any justified reason? Is it just because we do not confirm to the normative gender roles? Economic inclusion will come much later. First, the normative masses need to be sensitized at large to accept us, respect us and therefore include us within the society. Even we are humans and not zombies!”

The problems being faced by the transgender community as articulated in the PIL petition WP (C) No. 400 Of 012 filed by the National Legal Services Authority (NLSA) are that the transgender people are deprived of the fundamental rights available to the other two sexes i.e. male and female, and are not considered as the as the third sex. They are deprived of many of the rights and privileges which other persons enjoy as citizens of India. The transgender are deprived of social and cultural participation, are shunned by the family and the society, have only restricted access to education, health services and public spaces, restricted rights available to citizens such as the right to marry, employment and livelihood opportunities and various human rights such as obtaining passports, identity cards and such others. Some important submissions of NLSA are:

(i) “The transgender community, generally known as ‘Hijras’ in this country, are a section of Indian citizens who are treated by society as unnatural and generally as objects of ridicule and even fear on account of superstition. ... Transgenders are also part of society and have equal rights as are available to other persons. The discrimination based on their class and gender makes the transgender community one of the most disempowered and deprived groups in Indian society.”

(ii) “The problems, faced by the transgender are discrimination, lack of educational facilities, employment, lack of shelter, lack of medical facilities like HIV care and hygiene, depression, hormone pill abuse, tobacco and alcohol abuse and problems relating to marriage, property, electoral rights, adoption. Ministry of Law and

Ministry of Social Justice and State Governments need to recognize the deprivation suffered by transgender people and work on much needed reform”

(iii) Transgender have very limited employment opportunities. Transgender people have no access to bathrooms/toilet and public spaces. The lack of access to bathrooms and public spaces is illustrative of discrimination faced by the transgender in availing each facilities and amenities. They face similar problems in prisons, hospitals and schools.”

(Expert Committee Report; Introduction- Transgender people and their problems; Who are transgender people; What does transgender mean; page 2-3)

The Hon’ble Mr. Justice P. Sathasivam, the Judge of the Supreme Court of India during 2011 had stated thus, “The Constitution provides for the fundamental right to equality and tolerates no discrimination on the grounds of sex, caste, creed or religion. The Constitution also guarantees political rights and other benefits to every citizen. But the third community (Transgender) continues to be ostracized. The Constitution affirms equality in all spheres but the moot question is whether it is being applied.” *(Expert Committee Report; Introduction- Transgender people and their problems; Who are transgender people; What does transgender mean; page 5)*

III. TRANSGENDER IDENTITY:

The transgender population have been fighting for years in order to get socially and legally identified. They had no recognition in the Census, elections and other representations. This issue was finally taken into consideration in the Expert Committee Meeting organised by the Ministry of Social Justice and Empowerment, Government of India.

A crucial issue for consideration is that whether a transgender person should be categorized as male or female depending upon his or her choice, or a separate category of third gender, namely, “Transgender” should be created. In this regard, the authors of the Expert Committee have proposed three options for consideration for gender identity for the transgender population in India. The options are as follows:

Option 1- Legal recognition of gender identity of transgender people as women or men

Option 2- Legal recognition of gender identity of transgender people as a separate gender (‘Third Gender’ or ‘Transgender’)

Option 3- Legal recognition of gender identity of transgender people based on their choice- women, men or a separate gender (‘Third Gender’ or ‘Transgender’)

The Committee considered the pros and cons of each of the above-mentioned options as under:

1. Option 1- Legal recognition of gender identity of transgender people as women or men

Merits-

- (i) Easy to implement
- (ii) Protects the privacy of the transgender

Demerits-

- (i) Does not provide an option to a person who wants to be seen as a transgender
- (ii) Transgender identity remains obscure as the document will not show it; may pose problems in availing specific benefits designed for the transgender person; difficult to obtain the exact number of people who are transgender
- (iii) The Cis women might not feel comfortable with the trans women categorised as ‘women’ and share the benefits which were meant exclusively for the women, such as reservation in the local bodies

2. Option 2- Legal recognition of gender identity of transgender people as a separate gender (‘Third Gender’ or ‘Transgender’)

Merits-

- (i) Creates three distinct categories of ‘male’, ‘female’ and ‘transgender’ with no overlapping which makes it easy to implement

Demerits-

- (i) Takes away the right of a person to choose his or her gender
- (ii) Obscures the chosen gender identity of the transgender person

3. Option 3- Legal recognition of gender identity of transgender people based on their choice- women, men or a separate gender (‘Third Gender’ or ‘Transgender’)

Merits-

- (i) Protects everyone's right to choose one's own gender
- (ii) Easy to implement

Demerits-

- (i) Creates some confusion as certain transgender people will get registered as men or women; the question will be how to take care of them
 - (ii) The total number of people who are transgender cannot be assessed.
- After considering the pros and cons of all the options, the Expert Committee recommended option 3 to be adopted in which a transgender person will have the choice to declare himself or herself as either a man or a woman or a transgender. (*Expert Committee Report, Chapter Four- Transgender Identity, page 31-33*)

In the second meeting of the Expert Committee regarding the issues related to the transgender, Dr. Piyush Saxena of Mumbai informed the Committee regarding the decision of the Election Commission of giving an option to the transgender individual to be identified as the 'other'. It was also discussed in the meeting that being a transgender is essentially a 'Gender Identity Disorder' suffered by the individual. In regard to this issue of gender identity versus gender dysphoria/gender incongruence, Dr. Venkatesh Chakrapani mentioned that in the current DSM 5 (Diagnostic and Statistical Manual- 5th edition of American Psychiatric Association-APA), the previous 'gender identity disorder' category has been replaced by 'gender dysphoria' or 'gender incongruence'. DSM 5 states that being a transgender person by itself does not essentially mean that the person is a psychiatric patient. WHO has planned to replace the term 'disorder' with 'gender incongruence' or other non-stigmatising terms. (*Minutes of the second meeting of the Expert Committee on the issues relating to Transgender community held on 29th November 2013 in the Committee Room 'A' of Vigyan Bhawan Annexe, New Delhi; Annexure 6; page 33 of 55-37 of 55*)

Changes were made in the Aadhaar system where the gender is taken as what is declared by the resident without the requirement of any supporting document and the resident can declare his or her gender as male, female or even transgender. However, it has been pointed out by some members that the instructions were not clear to the officials at the field and many a times, they were either asking for document or proof or were simply recording the gender of the individual by just looking at the clothes that person was wearing. This is a major implementation issue. (*Minutes of the second meeting of the Expert Committee on the issues relating to Transgender community held on 29th November 2013 in the Committee Room 'A' of Vigyan Bhawan Annexe, New Delhi; Annexure 6; page 37 of 55*)

The RGI had followed the third model mentioned in the above portion of this segment during the 2011 census. The Expert Committee recommends that only the nomenclature 'transgender' should be used and nomenclatures like 'other' or 'others' should not be used. (*Expert Committee Report, Chapter Four- Transgender Identity, page 33*)

In the 2011 census, the population of transwomen in India was 4,90,000. This count was considered to be underestimated because of the stigma that discouraged people from talking about their sexual orientation or gender identity. (*Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 3- Legal and policy background; Page 14*)

In a group discussion with around ten to twelve transwomen, almost 90% declared that they feared to express their non-confirming gender identity. Most of them were dressed in male attires but had a different gender identity which they feared to confess. They feared to be judged and taunted by the 'normative' gender population. They did not want to get identified.

IV. TRANSGENDER EDUCATION

The transgender community faces exclusion even in the sphere of education. In the Expert Committee Meeting, Dr. Rajesh Kumar, Department of Distance and Continuing Education, University of Delhi, stated that the participation of the transgender community in mainstream education is extremely low. Majority of the population is uneducated or under-educated. They face high level of stigma apart from physical, sexual and emotional violence, which ultimately leads them to drop out of their studies. Dr. Kumar states that exclusion from the family and society is one of the main hindrances in the access to education for the transgender community. Some of the suggestions put forward by him were as follows: -

- (i) Create more awareness and understanding on the culture, gender and sexuality of the transgender community.
- (ii) The fulfilment of the obligation under the RTE Act is critical for the improvements in the educational conditions of the transgender community. Sensitization towards transgender people at

schools/universities/educational institutions by appropriate authorities with respect to the need of this community and to bring them in the mainstream.

(iii) Review the existing schemes and educational program to assess their suitability to the transgender community.

It was also mentioned in this meeting that since the drop out issue at school is mainly due to gender discrimination, the school uniforms should be made gender neutral. Ms. Priya Babu mentioned about creating Gender Counselling Centres because she felt that one of the reasons for the dropping out of the transgender people is their sexual abuse. Inclusion of provision of scholarship for transgender students was also discussed in this meeting. It was stated that in schools, the teachers should necessarily create a suitable environment for the transgender children. (*Minutes of the second meeting of the Expert Committee on the issues relating to Transgender community held on 29th November 2013 in the Committee Room 'A' of Vigyan Bhawan Annexe, New Delhi; Annexure 6; page 33 of 55-34 of 55*)

A study was conducted on the transgender community under Project Pehchan which is a large scale 18-state sexual and reproductive health and HIV program led by the India HIV/AIDS Alliance and supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria. The findings of this study stated that the average monthly income of MSM and transwomen (n= 550 across six Indian states) was rupees 6,394. Among them, 87% of the respondents (n= 601) were literate but only 10% were graduates. More transwomen and kothis were illiterates than the MSM population (19% against 10%). (*India HIV/AIDS Alliance 2012 as cited in Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 3- Legal and policy background-3.1; Page 15*)

Programmatic and anecdotal evidence provided by NGOs and CBOs and also the information provided by respondents to this study showed that feminine MSM and transgender students faced bullying and sexual violence in schools and colleges often with no redress if they complained to the authorities or their families, leading to many early drop outs. (*Vagneron and Houdart 2013 and Ghosh 2008 as cited in Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 3- Legal and policy background-3.1; Page 15*)

In a personal interview, a transgender adolescent respondent stated, "I never liked going to school after I realised that I identify myself in a different manner. Biologically I might be a male but I identify myself as a woman. I used to hate wearing that typical school uniform. I wanted to tie my hair in braids and wear the saree as the uniform just like the other girls in my class would do. I never really enjoyed playing cricket or football. I always wanted to be a part of the woman's badminton team. One day I came for my classes with kohl in my eyes and a tinge of my mother's lipstick. I will never forget that day. I was not only given the tag of a mentally challenged child but was beaten, kicked and thrown out of my school. I came and reported this incident at home. I thought my parents would understand this situation and cooperate. Things turned worse at home. My father dragged me by the collar of my shirt and threw me outside of the house. At that time, I did not have a single penny in my pocket. I starved for almost 3 days and then started begging for money. Now I stay in a hijra family but I have not been able to complete my education."

The head master of a school in the Howrah district got agitated on being asked in an interview the reason for not allowing transgender children or effeminate male children to study in his school. He sternly replied, "I cannot let few abnormal children destroy the atmosphere and the healthy environment of my school."

V. TRANSGENDER EMPLOYMENT:

The transgender community is a highly marginalized and vulnerable one and is seriously lagging behind on human development indices mainly in the areas of education and employment. Majority of this community is either not educated or less educated due to which they are not able to participate fully in social, cultural, political and economic activities. There are several factors responsible for the low levels of education of this community but the main reasons are exclusion from the family, exclusion from the society, poverty, social stigma, discrimination, insensitive attitude of the teachers, insensitive attitude of the staff, violence and sexual abuse. Moreover, low levels of education either push them to other occupations such as sex work making them more vulnerable to HIV/STI, or force them to take up sub optimal jobs like begging. (*Expert Committee Report, Chapter Eight- Exploring Education and Employment Opportunities for Transgender Persons, page 51-52*)

The interrupted process of education and the process of social exclusion limits the employment and livelihood opportunities for the transgender community. There are several factors responsible for their economic deprivation which are as under:

Access to Employment: Key Barriers:

- Exclusion from Family and the Society
- Stigma and Discrimination at Work Place
- Lack of Knowledge and Training in Vocational Skill Development

- Lack of Opportunities
- Lack of Confidence in Engaging Them by Employees
(*Expert Committee Report, Chapter Eight- Exploring Education and Employment Opportunities for Transgender Persons, page 54-55*)

In the second meeting of the Expert Committee on the issues relating to the transgender community held on 29th November 2013 at New Delhi, Dr Rajesh Kumar from the Department of Distance and Continuing Education, University of Delhi, made a presentation on 'Education and Employment issues' pertaining to the transgender persons. He suggested certain approaches for enhancing the employment opportunities for the transgender persons which are as follows

- Empowerment process has to be broad and should cover the following aspects-
 1. Awareness Generation
 2. Skill and Capacity Building
 3. Employment and Entrepreneurship
- Efforts should be made to register transgender persons in the employment exchange of the central and state governments.
- Create a supportive environment involving community leaders and their Gurus.
(*Minutes of the second meeting of the Expert Committee on the issues relating to Transgender community held on 29th November 2013 in the Committee Room 'A' of Vigyan Bhawan Annexe, New Delhi; Annexure 6; page 33 of 55-34 of 55*)

The Expert Committee also suggested certain other strategies to improve the access to employment for the members belonging to the transgender community. These strategies are as follows:

- Create Opportunities for Information and Counselling
- Establish Helplines for Career Guidance, Promotion and Online Placement Support
- Capacity Building and Entrepreneurship Development
- Liberal Credit Facilities and Other Needed Support for Economic Activities
- Provision of Social Entitlement to the Community
- Vocational Skill Building- This demands the design of customized vocational training programs for the transgender community as per their needs and interest and establish effective linkages with vocational training centres run by private and government agencies.
- Create a Supportive Environment where efforts should be made to sensitize all the concerned stakeholders like government officials in relevant departments, banks, private employers, corporate, community leaders like the Gurus.

(*Expert Committee Report, Chapter Eight- Exploring Education and Employment Opportunities for Transgender Persons, page 55*)

Various Ministries or Departments of the Government of India are implementing a number of schemes which target a variety of beneficiaries. In most of such schemes, special emphasis is given to cover the weaker sections of the society and the other disadvantaged groups. The Expert Committee is of the view these schemes could be effectively utilized for providing benefits to such transgender persons who are eligible under those schemes. One of such schemes is the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA).(*Expert Committee Report, Chapter Six- Convergence Approach, page 38*)

The Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) was a major initiative of the 11th Five Year Plan period. This aims at enhancing the livelihood security of people in rural areas by guaranteeing hundred days of wage employment in a financial year to a rural household whose adult members volunteer to do unskilled manual work. (<http://nrega.nic.in/netnrega/home.aspx>)

The implementing agencies of the MGNREGA may be advised to provide employment opportunities under this Act to such transgender persons who are willing to do unskilled manual work. (*Expert Committee Report, Chapter Six- Convergence Approach, page 38*)

However, within this scheme, there is a conceptual lack of acknowledgement present in family structures and intimate relationships existing within people with non-normative gender and sexuality. The definition of the term "Family" in the MGNREGA is hetero normative and highly bio deterministic. Household refers to the members of the family related to each other by blood, marriage or adoption and who reside together, share meals or hold a common ration card. This definition discards all possibilities of including a self-created Hijra family. (*Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015*)

Another scheme has been named the National Rural Livelihoods Mission (NRLM)- AAJEEVIKA. As per the 12th Five Year Plan Document: Economic Sectors, Volume II, the NRLM will emerge as the centrepiece of India's battle against the rural poverty. The NRLM is to be implemented in a phased manner. It is recommended that the transgender community members should also be considered as a target group under the National Rural Livelihood Mission. Special SHG (Self Help Group) status may be granted to the transgender

community to help ease access to finances, services, etc. Rules or policies may also be relaxed in terms of numbers along with subsidies and loans. (*Expert Committee Report, Chapter Six- Convergence Approach, page 38-39*)

The problem that arises here is that the social inclusion of the transgender community is a big issue which has been mentioned in the earlier portion of this research paper. Under such circumstances where one does not accept a transgender individual within the society, can self help groups run by the transgender community function successfully?

In 2006-07, Solidarity and Action Against The HIV Infection In India (SAATHII) started a partnership with Santi Seva in Bhadrak which is possibly the first exclusive Community Based Organization (CBO) for trans women in Orissa. It has been observed that the close-knit Hijra communities, which require all members of a particular Hijra household to deposit their earnings to the Guru, can be seen as an example of self help and enterprise in the face of extreme stigma. SAATHII states that in providing economic inclusion opportunities to the transgender community, external agents such as the government, donors and NGOs need to respect their traditional choices. In order to acknowledge a particular group as a self-help group, all the members were required to show government identity cards that signifies them as a transgender individual. However, acquiring a government identity card which denotes a person as a transgender individual is a very difficult task unless the person overtly dresses up as a transformed individual. (*Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 5- Community responses to exclusion, 5.1- Community efforts on economic inclusion; Page 25*)

Many Community Based Organizations (CBO) of MSM and Trans women implementing HIV-targeted interventions have experimented with Self Help Groups but they have not lasted. In the experience of certain CBOs, social stigma, difficulties in acquiring banking linkages, scattered geographical location of members that make conveyance and participation uneconomical, and high levels of migration are some of the major factors that seem to militate against a Self-Help Group for MSM and Trans women. (*Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 5- Community responses to exclusion, 5.1- Community efforts on economic inclusion; Page 26*)

In one of the group discussions held at a Hijra household in the Howrah district of West Bengal, upon putting forward the issue of economic inclusion, one of my respondents answered, “Firstly, we are not properly educated and moreover, how can we expect to be included economically when there is no social inclusion? People are disgusted to share the same social place with us and you expect that they will share the same workplace? Infact, we feel that if the economic inclusion of people like us is ever successful, it will not be very pleasant for us. We are very sceptical about the mentality of people. The present scenario is not at all favourable for us. Under these circumstances, the workplaces shall be very traumatic for us and we shall be suffering mental health issues on a daily basis. Therefore, all that we want initially is social inclusion. If that is made possible, slowly and steadily our economic inclusion will also begin.”

When put forward the question of economic inclusion of transgender people, another transgender respondent of mine at Kolkata answered, “In the month of February, I received a call from one of the Multi-National Companies of Kolkata for an interview. I sent my CV where my non-normative gender orientation was clearly mentioned. I had highlighted that I identify myself as a transgender individual. The interview was held at their office at Sector 5. I was dressed in a male attire but had applied make-up over my face. The interview went really well however the panel looked dissatisfied with my attire. They put forward a condition that they would appoint me only if I attend office in formal male attire without any make-up. They clearly mentioned that they cannot appoint any “weird” looking person in their company as that would destroy the healthy work environment. This is the scenario.”

Apart from recognising the limits of identity-based and reservationist economic inclusion approaches, all the stakeholders involved- government, donors, NGOs, CBOs, community leaders- also need to consider the prioritising of social welfare schemes that focus upon skills building especially on the building of vocational skills. (*Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 5- Community responses to exclusion, 5.2- The need for caution in approaches to economic inclusion; Page 27*)

VI. TRANSGENDER HEALTH:

The World Health Organisation has defined “health” as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Transgender people too, like any other people, have the right to enjoy physical and mental health and contribute to their families and society. The Expert Committee focused on what can be done in the public health settings in India and came to the following conclusions:

1. Improving access to and use of general health services for the transgender people

2. Improving access to and use of gender transition- related health services for transgender people
3. Enabling better understanding and enhancing competency among health care providers (HCPs) in dealing with transgender-specific health issues

Fear of discrimination or experience of discrimination faced by male to female transgender people in health care settings have been shown to hinder access to HIV testing, antiretroviral treatment, and sexual health services in public hospitals. Barriers to access and use of these services in the hospitals are identified at individual (self-stigma, poverty), institutional (registration policies) and structural levels (societal stigma). These barriers are inter-related. Many HIV positive male to female transgender lack the money to travel to the antiretroviral treatment centres and hence do not get the medicines.

At the institutional level, some of the stigma and discrimination experiences documented to have occurred in public hospitals include:

1. Lack of hospital policies on whether male to female transgender people can get registered as ‘man’ or ‘woman’ in the outpatient department; and where in which ward (male or female ward) they get admitted.
2. Verbal abuse from the physicians, counsellors, nurses and paramedical workers within the hospital settings.
3. Harassment from the relatives of the co-patients in the out-patient and in-patient departments.

These underscore the need for hospital policies for registration and admission of transgender people, training and sensitization of the health care providers about the transgender people and their health issues, and the need to educate the general public about the transgender people.

At the structural level, societal stigma against people who transgress gender norms, especially against transgender people, is internalised by the HCPs themselves. Male to female transgender people face intersecting stigmas- stigma related to being a transgender person, being a sex worker, and being a person suspected to be at high risk for HIV.

Not all transgender people desire surgery or hormone therapy. Some proportion of transgender people would like to undergo surgery and/or hormonal therapy to align their bodies with their gender identity.

Except in a few government hospitals, sex reassignment surgery and other gender transition- related services are not available for free in tertiary level government hospitals in different parts of the country. Lack of free sex reassignment surgery (SRS) in public hospitals and the prohibitive cost of SRS in private hospitals seem to be the key reason behind why some hijras and other male to female transgender people go to unqualified medical practitioners for surgery- resulting in post-operative complications that could have been avoided had the surgery been provided by qualified medical practitioners in the hospitals.

(Expert Committee Report, Chapter Ten- Access to Healthcare: General Health Services and Gender Transition Services, page 68-70)

In 2006, the National AIDS Control Organisation (NACO) estimated that the country had around 2.35 million MSM and transwomen particularly at risk of HIV infection. *(Halder and Kant, 2011)*. A related medical and psycho-social aspect for transwomen is access to quality and affordable feminisation services. The biggest impediments are lack of legal clarity, expensiveness and availability only in big urban centres. The Pehchan midline study recorded that few transwomen managed to access these services from registered medical practitioners and most depended on quacks or hijra gurus, who adopted medically unreliable methods that led to complications such as urinary tract infections and post-operative trauma. Non-medically guided feminisation processes that involve hormonal therapy can also interfere with antiretroviral therapy for HIV. *(Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India; Pawan Dhall and Paul Boyce; February 2015; Chapter 3- Legal and policy background, 3.1- Socioeconomic Context and ‘Non-normative genders and sexualities’: an assessment; Page 14-16)*

In an interview with a transwoman, ze said, “I am a HIV positive person. Usually, people do not disclose their health status openly but recently I have been open about mine. After being tested positive, I was referred to my nearest antiretroviral treatment centre at Hooghly. The environment is very transphobic. Upon entering the place, I have been judged constantly by every individual. Even the counsellor makes transphobic comments. I have recently found out that it is just not me facing this issue but every transgender HIV positive person visiting the ART centre has to go through the same trauma.”

VII. TRANSGENDER HUMAN RIGHTS:

In 2014, the Indian Supreme Court issued the NALSA judgement which ruled that transgender people should be recognized as a third gender and enjoy all fundamental rights, while also being entitled to specific benefits in education and employment. However, the transgender bill is inadequate on several fronts. Trans activists and allied human rights groups have critiqued the various trans right bills. India’s new law violates the rights of trans people rather than respect and uplift the long-persecuted communities.

The conceptual lack of acknowledgement of a transgender is also present in family structures and intimate relationships within people with non-normative gender and sexualities. The definition of “family” in

the MGNREGS is hetero-normative and bio-deterministic. Household refers to the members of the family related to each other by blood, marriage or adoption and who reside together, share meals or hold a common ration card. This definition discards all possibilities of including a self-created Hijra family.

The government initiative is missing in ensuring protection for children and adolescents with non-normative gender and sexuality. No law or institution ensure family support for such children neither there are any measures to prevent them from dropping out of academics. NGOs state that the Child Welfare Committees are often to deal with cases of runaway gender-variant children or adolescents. They are unable to decide whether to provide them with shelter in the male or female sections and neither are they able to accept gender diversity or transphobia as a reason for a young person to leave home.

VIII. MEASURES THAT CAN BE TAKEN:

The welfare programs of the Government should include:

1. Dealing with social stigma at the family and community levels
2. Decriminalisation and protection from sexual assault
3. Ensuring that children and adolescents with non-normative gender and sexuality remain within the fold of education and adults who missed out on it should have access to non-formal education
4. Ensuring non-discrimination at the workplace
5. Housing and food security support
6. Access to quality and inexpensive physical and mental health services

IX. CONCLUSION

The Indian legal environment allows the government to strengthen social welfare and economic inclusion of people with non-normative gender and sexuality. The Supreme Court NALSA judgement, the Census of India's Inclusion of Transgender persons, the Legal Services Act, The Right of Children to Free and Compulsory Education Act 2009, improves social security access for people with non-normative gender and sexuality. The economic inclusion efforts for people with non-normative gender and sexuality need to focus on not just supply of social schemes but also demand generation.

BIBLIOGRAPHY

- [1]. Ministry of Social Justice and Empowerment, Government of India, Expert Committee Report
- [2]. Livelihood, Exclusion and Opportunity: Socioeconomic welfare among gender and sexuality non-normative people in India, Pawan Dhall and Paul Boyce, February 2015
- [3]. <http://nrega.nic.in/netnrega/home.aspx>
- [4]. www.wikipedia.com
- [5]. "India's Transgender Rights Law Isn't Worth Celebrating" by Kyle Knight