

***SOCIAL EXCLUSION OF GENDER AND SEXUAL MINORITY GROUPS:  
INSIGHTS FROM KOLKATA METROPOLITAN AREA***

*A thesis submitted to the  
Department of Geography, Faculty Council of Science of Jadavpur University*

*For the Degree of  
Doctor of Philosophy (Science)*

*By  
Jayita Mukharji  
Index No. 178/16/Geo./25*



*Department of Geography  
Jadavpur University  
Kolkata  
2023*

**CERTIFICATE FROM THE SUPERVISOR**

This is to certify that the thesis entitled “**Social Exclusion of Gender and Sexual Minority Groups: Insights from Kolkata Metropolitan Area**” Submitted by Smt. Jayita Mukharji who got her name registered on 04/11/2016 for the award of Ph. D. (Science) Degree of Jadavpur University, is absolutely based upon her own work under the supervision of Dr. Kaniska Sarkar and that neither this thesis nor any part of it has been submitted for either any degree / diploma or any other academic award anywhere before.

*Kaniska Sarkar.*

.....  
**DR. K. SARKAR**  
Deputy Registrar (Addl.)  
Jadavpur University  
Kolkata-700032

29.05.2023.

.....  
**(Signature of the Supervisor date with official seal)**

## **PREFACE**

I was born and brought up in a joint family where I always used to interact with my different family members and neighbours. So since my childhood, I love to interact with other people in order to know them. My favourite subject is population Geography. I have always loved to study and learn about people and their various problems and the ways to overcome those difficulties. In the course of my study, I have managed to diagnose the real social problems of gender and sexual minority people. They are very much neglected in the society because of their gender identity and sexual orientation. Their marginalization in society I also find revolting because they face lots of man-made obstacles in their day-to-day life. Therefore, I decided to take up this matter actively and also wanted to raise my voice against their social exclusion. I decided to conduct this research to identify and analyze the reasons for their social exclusion and suggest policies for achieving a better and inclusive society. During this research work I have gained personal experience of the multiple problems encountered everyday by the gender and sexual minority groups. Last, but not the least, I am happy to express my gratitude to the respondents who belong to that minority group for helping me in this research.

# ACKNOWLEDGEMENTS

*First, I would like to express my sincere gratitude to my supervisor Dr. Kaniska Sarkar, Deputy Registrar of Jadavpur University, for the continuous support of my Ph.D. study and related research work, for his patience, motivation and immense knowledge. His guidance helped me a lot in all the time of research and writing of this thesis. According to me, he is the best mentor and advisor for my Ph.D. study. I am really grateful to him for his enormous support.*

*In addition to my supervisor, I would like to thank Professor Lakshmi Sivaramakrishnan, Assistant Professor Dr. Debajit Datta and Assistant Professor Dr. Arijit Majumder of the Department of Geography, Jadavpur University for their valuable suggestions and support.*

*I would like to express my deepest gratitude to Professor Sanmoy Karmakar, HoD, Department of Pharmaceutical Technology, Jadavpur University, Dr. Ketousetuo Kuotsu and Dr. Nilanjan Ghosh (Department of Pharmaceutical Technology) and Former Professor Sadhan Kumar Ghosh (the Mechanical Engineering Department) of Jadavpur University for their valuable suggestions.*

*I am also thankful to the Director of Advance Planning Unit, KMDA and the Deputy Director of Statutory Planning Unit, KMDA, the Deputy Director, Member Secretary and all the staffs of West Bengal Transgender Persons Development Board, Janganana Bhawan, Kolkata for providing me all the necessary resources for my study.*

*I would also like to express my deepest gratitude to all the NGOs within my study area that are working for gender and sexual minority groups for providing me necessary information for my study.*

*I would also like to say thanks to my fellow researchers Dr. Suman Chatterjee, Dr. Udita Mukherjee, Dicky Doma Sherpa and Nirupama Dutta for the stimulating discussion, for the time we were working together and for all the fun we have had.*

*I am pleased to extend my thanks to Mr. Pratik Majumder, Mr. Babulal Das, Mrs. Karuna Chakraborty, Mrs. Anita Ghosh, Mr. Ananda Kumar Saha, Mr. Salil Pramanik, Radio JU 90.8 Mhz and all the office staffs for their co-operation.*

*Last but not the least; I would like to thank my all family members: my parents, my husband and my little daughter for their continuous support and motivation in my life. This work would never be possible without their blessings, best wishes and sacrifices. I am very much grateful to all these people who are directly and indirectly helped in my study.*

*Jayita Mukharji.*  
Jayita Mukharji

## *Dedicated to*

*My respected father Lt. Ardhendu Sekhar Mukharji,  
Mother Santa Mukhopadhyay, husband Souvik Mallick and  
my beloved Daughter Souroja Mallick*

## CONTENTS

Chapter	Content	Page No.
	<b>Abstract</b>	<b>xxi-xxviii</b>
<b>Chapter-I</b>	<b>Introduction</b>	<b>1-28</b>
1.1	Statement of Problem and Triggering Factors of the Study	1
1.2	Target Group of the Research	3
1.3	Literature Review	4
1.4	Demographic Features of the Target Groups	12
1.5	Research Gap	14
1.6	Research Questions	15
1.7	Objectives of the Study	15
1.8	Period of the Study	16
1.9	The Study Area	17
1.10	Research Methodology	21
1.11	Significance of the Study	27
1.12	Limitations of the Study	27
<b>Chapter-II</b>	<b>Historical Background</b>	<b>29-52</b>
2.1	Non Binary People and Their Historical Background in India	29
2.2	Beyond India	40
<b>Chapter-III</b>	<b>Body, Mind, Nature and Transformation</b>	<b>53-84</b>
3.1	Gender and Gender Identity	53
3.2	Sex and Assigned Sex at Birth	56
3.3	Gender Expression	58
3.4	Sexual Orientation	59
3.5	Classification of Gender and Sexual Minority People	62
3.6	Different Country and Different Names of Transgender People	72
3.7	Sex Reassignment Surgery	73
3.8	Hormone Replacement Therapy (HRT)	82
3.9	Mind Matters--It Has No Rules	82

<b>Chapter</b>	<b>Content</b>	<b>Page No.</b>
<b>Chapter IV</b>	<b>Socio-economic Condition</b>	<b>85-126</b>
4.1	Education	85
4.2	Religion	86
4.3	Marital and Relationship Status	87
4.4	Residing Pattern	88
4.5	Family Acceptance and Behavior	90
4.6	Their Condition after Leaving Home	95
4.7	Their Importance in Their Families	96
4.8	Coming Back Home	97
4.9	Working and Non Working Population	98
4.10	Physical Health Condition	101
4.11	Neighbor's Attitude	103
4.12	Marginalization within Family	104
4.13	Their Comfort Zone	105
4.14	Having Children	107
4.15	Hijra – A Distinct Cultural Group	110
4.16	Societal Condition and Exclusion of Gender and Sexual Minority People	125
<b>Chapter - V</b>	<b>Different Problems</b>	<b>127-183</b>
5.1	Facing Problem at Home	128
5.2	Problems Face in Educational Institutions	134
5.3	Lack of Employment	142
5.4	Harassment in Workplaces	144
5.5	Harassment in Public Transport	147
5.6	Facing Problems in Healthcare System	149
5.7	Problem in Legal Issues	154
5.8	Problems of Getting Identity Cards	158
5.9	Political Problems	161
5.10	Social Exclusion and Marginalization	162
5.11	Mental Depression and Dissatisfaction in Life	166

<b>Chapter</b>	<b>Content</b>	<b>Page No.</b>
5.12	Chi- Square Test to prove their harassment, torture and social exclusion	175
<b>Chapter –VI</b>	<b>Rights, Laws, Movements and Steps towards Inclusion</b>	<b>184-215</b>
6.1	Section 377 in IPC	184
6.2	Criminal Tribes Act, 1871	185
6.3	Journey from Exclusion to Inclusion	185
6.4	Role of the Court	193
6.5	Their Struggle and Companion	196
6.6	Changing Scenario- towards Inclusion	202
6.7	Different Inclusive Steps of Society and People Awareness	206
<b>Chapter-VII</b>	<b>Concluding Suggestions and Future Action Plan</b>	<b>216-227</b>
7.1	Major Findings	216
7.2	Concluding Suggestions	218
7.3	Future Action Plan	223
<b>GLOSSARY</b>		<b>228-244</b>
<b>BIBLIOGRAPHY</b>		<b>245-257</b>
<b>APPENDICES</b>		<b>258-357</b>
Appendix-1	Primary Data	258-289
Appendix-2	Secondary Data Collected from Census Office	290
Appendix-3	Bills, Acts and Rules	291-321
Appendix-4	Summary of Cases related to gender and sexual minority groups	322-335
Appendix-5	Questionnaire	336-353
Appendix-6	Resource Persons	354-355
Appendix-7	Important Offices and NGOs	356
Appendix-8	Webliography	357



## LIST OF TABLES

<b>Table No.</b>	<b>Content of the Table</b>	<b>Page No.</b>
Table no. 1.1	Present Composition of KMA	19
Table no. 1.2	Population and Area of Kolkata Metropolitan Area	19
Table no. 5.1	After Disclosure of Gender Identity – They Become the Victims of Domestic Violence	175
Table no. 5.2	After Disclosure of Sexual Orientation – They Become the Victims of Domestic Violence	176
Table no. 5.3	Face Bullying in Educational Institution	177
Table no. 5.4	Face Harassment in Public Vehicle	178
Table no. 5.5	Face Harassment in Workplace	179
Table no. 5.6	Bad Behavior of Health Service Providers	180
Table no. 5.7	Feel Marginalized in the Society	181

## LIST OF FIGURES

Figure No.	Heading of the Figure	Page No.
Figure no. 1.1	Category Wise Number of the Respondents	23
Figure no. 3.1	Gender Identity of the Respondents	54
Figure no. 3.2	Category Wise Gender Identity of the Respondents	55
Figure no. 3.3	The Percentage of Understanding Gender Identity among the Respondents	55
Figure no. 3.4	Age Wise Understanding of Gender Identity among the Respondents	56
Figure no. 3.5	Assigned Sex at Birth of the Respondents	57
Figure no. 3.6	Category Wise Assigned Sex at Birth of the Respondents	58
Figure no. 3.7	Physical Appearance of the Respondents	59
Figure no. 3.8	Sexual Orientation of the Respondents	60
Figure no. 3.9	Understanding Sexual Orientation among the Respondents	61
Figure no. 3.10	Age of the Respondents for Understanding Sexual Orientation	62
Figure no. 3.11	Percentage of the Respondents Who Have Gone through SRS	66
Figure no. 3.12	Percentage of the Respondents Who Think about SRS	73
Figure no. 3.13	MTF and FTM Surgeries among the Respondents	76
Figure no. 3.14	Different Types of MTF Surgeries Taken by the Respondents	77
Figure no. 3.15	Different Types of FTM Surgeries Taken by the Respondents	79
Figure no. 3.16	Percentage of the Respondents and Their Satisfaction Level about the Result of SRS	80
Figure no. 3.17	Eagerness for Further Modifications of Their Body through SRS in Future	81
Figure no. 3.18	Eagerness of Doing Different Kind of Surgeries in Future among the Respondents	81
Figure no. 3.19	Percentage of the Respondents Taking Hormone Replacement Therapy	82
Figure no. 4.1	Educational Qualification of the Respondents	86
Figure no. 4.2	Religion of the Respondents	86
Figure no. 4.3	Marital Status of the Respondents	87

<b>Figure No.</b>	<b>Heading of the Figure</b>	<b>Page No.</b>
Figure no. 4.4	Residing Pattern of the Respondents	89
Figure no. 4.5	Disclosure of Gender Identity of the Respondents	91
Figure no. 4.6	Percentage of the Respondents who Receive Torture after Disclosing Gender Identity	91
Figure no. 4.7	Disclosure of Sexual Orientation among the Respondents	93
Figure no. 4.8	Percentage of the Respondents who Getting Tortured after Disclose Their Sexual Orientation	93
Figure no. 4.9	The Percentage of Respondents Who leave Home after Getting Tortured	94
Figure no. 4.10	Living Places of the Respondents after Living Home	96
Figure no. 4.11	Respondents Who Are Requested for Coming Back Home	97
Figure no. 4.12	The Percentage of Respondents Who Coming Back Home after Getting Requested	97
Figure no. 4.13	Working Population among the Respondents	98
Figure no. 4.14	Different Types of Non Working Population among the Respondents	98
Figure no. 4.15	Different Professions of the Respondents	99
Figure no. 4.16	Monthly Income of the Respondents	100
Figure no. 4.17	Condition of Physical Health of the Respondents	101
Figure no. 4.18	Percentage of HIV Testing among the Respondents	102
Figure no. 4.19	When the Respondents Have Been Tested HIV Last	103
Figure no. 4.20	Avoiding Tendency of Neighbors towards the Respondents	104
Figure no. 4.21	Feeling Marginalized within Family	105
Figure no. 4.22	If Feeling Marginalized within Family, With Whom the Respondents Feel Better	106
Figure no. 4.23	Percentage of the Respondents Who Feel Free to Talk with Non-binary People	106
Figure no. 4.24	Who Have Children among the Respondents	107
Figure no. 4.25	Who have Biological Children among the Respondents	108
Figure no. 4.26	The Percentage of Respondents Who have Children from Different Sources	109

<b>Figure No.</b>	<b>Heading of the Figure</b>	<b>Page No.</b>
Figure no. 4.27	The Percentage of Respondents Who Engage in Hijra Profession	112
Figure no. 4.28	Educational Qualification among the Hijra Respondents	116
Figure no. 4.29	Category Wise Percentage of the Respondents Who Engage in Hijra Profession	117
Figure no. 4.30	Different Types of Hijra Occupations	122
Figure no. 4.31	Societal Conditions of the Respondents for Living Safely & Peacefully	125
Figure no. 5.1	Different Types of Tortures Received by the Respondents after Disclosing Gender Identity	129
Figure no. 5.2	Respondents First Disclose Their Sexual Orientation to Whom	130
Figure no. 5.3	Number of Respondents who Received Different Types of Tortures after Disclosing Their Sexual Orientation	131
Figure no. 5.4	Different Gender and Sexual Minority People Receiving Torture for Disclosing Sexual Orientation	132
Figure no. 5.5	Respondents Get Support from Their Families	133
Figure no. 5.6	If They Get Support from Their Families, from When They Get Support	134
Figure no. 5.7	Respondents Experienced Bullying in Their Educational Institutions	135
Figure no. 5.8	Different Gender and Sexual Minority People Face bullying in Their Educational Institutions	136
Figure no. 5.9	Usage of Unisex Uniform in School	137
Figure no. 5.10	Presence of Anti-Bullying Policy in School	137
Figure no. 5.11	Presence of Trans-Friendly Toilet in School	138
Figure no. 5.12	Respondents getting any Information about gender and Sexual Minority People	139
Figure no. 5.13	Respondents Get any Help from their Teachers Regarding Gender and Sexual Minority People	139
Figure no. 5.14	Presence of trans-friendly counselors in School	140
Figure no. 5.15	Attitude of Schools towards GSM People	141
Figure no. 5.16	Facing Obstacle in Study and Employment of the Respondents	142

<b>Figure No.</b>	<b>Heading of the Figure</b>	<b>Page No.</b>
Figure no. 5.17	Different Occupations of Hijras	143
Figure no. 5.18	Percentage of Respondents Who Engage in Sex Work	144
Figure no. 5.19	Respondents Experienced Harassment in Their Workplaces	145
Figure no. 5.20	Different Gender and Sexual Minority People Experienced Harassment at Their Workplaces	146
Figure no. 5.21	Facing Different Types of Harassments in Workplaces	147
Figure no. 5.22	Facing Harassments in Public Vehicles	148
Figure no. 5.23	Facing Harassment in Public Vehicles among Different Gender and Sexual Minority Respondents	149
Figure no. 5.24	Knowledge of Different Health Service Providers about Gender and Sexual Minority People	149
Figure no. 5.25	Behavior of Health Service Providers towards Gender and Sexual Minority People	150
Figure no. 5.26	Use of Protection against HIV & STDs among the Respondents	153
Figure no. 5.27	What Kind of Protections They Use	153
Figure no. 5.28	Percentage of the Respondents Who Tried to Amend Their Documents	159
Figure no. 5.29	Which Documents They Want to Amend	160
Figure no. 5.30	The Percentage of Respondents Who Have Successfully Amended Their Documents	160
Figure no. 5.31	Which Documents They Successfully Amended	161
Figure no. 5.32	Behavior of Neighbors towards the Respondents	162
Figure no. 5.33	Respondent's Feeling in Different Occasions	163
Figure no. 5.34	Changing Behavior over Time after Hearing Respondent's Gender Identities & Sexual Orientations	164
Figure no. 5.35	Feeling Socially Marginalized	165
Figure no. 5.36	Satisfaction Level about Life among the Respondents	166
Figure no. 5.37	Addicted to Smoking and Drinking and Taking Drugs among the Respondents	167
Figure no. 5.38	Different Types of Addictions among the Respondents	168
Figure no. 5.39	How the Respondents Handle Different Situations in Their Workplaces	169

<b>Figure No.</b>	<b>Heading of the Figure</b>	<b>Page No.</b>
Figure no. 5.40	Think about Suicide among the Respondents	170
Figure no. 5.41	Suffering from Mental Health Diseases among the Respondents	171
Figure no. 5.42	Different Types of Mental Health Diseases They Are Suffering from	172
Figure no. 5.43	Ever Go to any Psychologists or Psychiatrists	173
Figure no. 6.1	Percentage of the Respondents Who Are Associated with NGOs	196
Figure no. 6.2	Respondents Associated with Different NGOs	198
Figure no. 6.3	Percentage of the Respondents Who Are Engaged in Trans Activism	206

## LIST OF MAPS

Map No.	Heading of the Map	Page No
Map no. 1.a	Map Showing The State Wise Distribution of ‘Other’ Population in India (2011)	13
Map no. 1.b	Map of the Study Area (Kolkata Metropolitan Area)	20
Map no 1.c	Administrative Boundary of Kolkata Metropolitan Area (KMA)	21
Map no. 4.a	Residences of Hijra People (Respondents) in KMA	119
Map no. 4.b	Buffer Zones of 1 km and 3 km from Different Hijra Ghars and Different Temples and Mosques Falling Within Each Zone in KMA	121
Map no. 5.a	Different Hospitals and Counseling Centers Where SRS and Counseling Therapy Are Available for Gender and Sexual Minority people in KMA	174
Map no. 6.a	Government and Non-Government Organization Who Work for Gender and Sexual Minority Groups in KMA	199
Map no. 6.b	Meeting Places of Gender and Sexual Minority Groups (Respondents) in KMA	201
Map no. 6.c	Comparison between Availability of Different Basic Amenities and Location of Residences of Hijra People (Respondents) in KMA	203
Map no. 6.d	Comparison between Availability of Entertainment Services and Location of Residences of Hijra People (Respondents) in KMA	204

## **LIST OF PHOTOGRAPHS**

<b>Photograph No.</b>	<b>Content of Photographs</b>	<b>Page No.</b>
Photograph No. 4.i:	Taking Interview of a Hijra Person	113
Photograph No. 6.i:	Rainbow Pride Parade in Kolkata	205
Photograph No. 6.ii:	Rainbow Pride Parade in Kolkata	205



## **LIST OF PICTURES**

<b>Picture No.</b>	<b>Title of Pictures</b>	<b>Page No.</b>
Picture no. 3.a.	Karyotype of a person with Klinefelter Syndrome	69
Picture no. 3.b.	Karyotype of a person with Turner Syndrome	70

## **LIST OF MODELS**

<b>Model No.</b>	<b>Models</b>	<b>Page No.</b>
Model no. 6.A:	Support for Marginalized Individuals for Livelihood and Enterprise (SMILE)	192
Model no. 7.A:	Action Plan	224
Model no. 7.B:	Implementation of Action Plan	226

## LIST OF PAPER CUTTINGS

Paper cutting No.	Content of Paper Cuttings	Page No.
No. 5.a:	Transgender people do not get a bed in hospital	151
No. 6.a:	Central Government opposes homosexual marriage	187
No. 6.b:	Separate toilet for transgender people	207
No. 6.c:	Crossing obstacles, this is the time for fulfilling dreams	207
No. 6.d:	See through the lens of camera	208
No. 6.e:	Yuva CPM has opened its door for transgender people	208
No. 6.f:	Training for the hijra people in how to use VVPAT	209
No. 6.g:	Changing the way of thinking	209
No. 6.h:	Pandel of Durga Puja is decorated with the stories of hijra	210
No. 6.i:	Police rescued a transgender person	210
No. 6.j:	High Court stands by third gender people	211
No. 6.k:	Rules and regulations have been changed for transgender people	211
No. 6.l:	No application of ration card of third gender people has been cancelled	212
No. 6.m:	Transgender person will sit in the UGC NET examination	212
No. 6.n:	Vaccination of Community people	213
No. 6.o:	Vaccination of transgender people in Jadavpur	213
No. 6.p:	Include the option 'third gender' in the examination form of Lok Sabha Ayog, Assam	214
No. 6.q:	In Delhi metro	214
No. 6.r:	Third gender candidates have been given job opportunities for the posts of sub-inspector of police	214
No. 6.s:	A transgender person got selected as a judge of Lok Adalat	215

## ACRONYM

A. D.	:	Anno Domini
ABVA	:	Aids Bhedbhav Virodhi Andolan
AIDS	:	Acquired Immune Deficiency Syndrome
B	:	Bisexual
BCE	:	Before the Christian era
BDO	:	Block Development Officer
BMC	:	Bidhannagar Municipal Corporation
Cis	:	Cisgender
CMC	:	Chandannagar Municipal Corporation
CPM	:	Communist Party of India (Marxist)
CSHT	:	Cross Sectional Hormone Therapy
CTA	:	Criminal Tribes Act
CWSN	:	Children with Special Needs
DM	:	District Magistrate
DSM III	:	The 3rd edition of the Diagnostic and Statistical Manual of Mental Disorders from the American Psychiatric Association
DYFI	:	Democratic Youth Federation of India
Fig	:	Figure
FTM	:	Female to Male
G	:	Gay
GAC	:	Gender Affirmative Care
GI	:	Gender Identity
GLBT	:	Gay Lesbian Bisexual Transgender
GRS	:	Gender Reassignment Surgery
GSM	:	Gender and Sexual Minority
HIV	:	Human Immunodeficiency Virus
HMC	:	Howrah Municipal Corporation
HRT	:	Hormone Replacement Therapy
I. Q.	:	Intelligence Quotient
I	:	Intersex
IGNOU	:	The Indira Gandhi National Open University
K	:	Kothi

KMA	:	Kolkata Metropolitan Area
KMC	:	Kolkata Municipal Corporation
KMC	:	Kolkata Municipal Corporation
KMDA	:	Kolkata Metropolitan Development Authority
L	:	Lesbian
LGB	:	Lesbian Gay Bisexual
LGBTIQ	:	Lesbian, Gay, Bisexual, Transgender, Intersex and Queer
LGBTIQK	:	Lesbian Gay Bisexual Transgender Intersex Queer and Kothi
LLB	:	Bachelor of Laws (Latin: Legum Baccalaureus)
MCI	:	Medical Council of India
MGNREGA	:	The Mahatma Gandhi National Rural Employment Gurantee Act
MSM	:	Men Who Have Sex with Men
MTF	:	Male to Female
N	:	Total number of respondents
NALSA	:	The National Legal Services Authority
NET	:	National Eligibility Test
NGO	:	Non-governmental organization
ORGI	:	Office of the Registrar General & Census Commissioner, India
P. S.	:	Police Station
PEP	:	Post-exposure prophylaxis
PhD	:	Doctor of Philosophy
PIL	:	Public Interest Litigation
POCSO	:	Protection of Children from Sexual Offences
PrEP	:	Pre-exposure Prophylaxis
Q	:	Queer
RTE	:	Right to Education
S. S.K.M.	:	Seth Sukhlal Karnani Memorial Hospital
SBI	:	State Bank of India
SFI	:	Students' Federation of India
SMILE	:	Support for Marginalized Individuals for Livelihood and Enterprise
SO	:	Sexual Orientation
SOC -7	:	Standard of Care version 7
SOC	:	Standard of Care
SRS	:	Sex Reassignment Surgery

T : Transgender  
Trans : Transgender  
UGC : The University Grants Commission  
VVPAT : Voter Verified Paper Audit Trail  
WPATH : World Professional Association for Transgender Health

# ABSTRACT

## **Title- Social Exclusion of Gender and Sexual Minority Groups: Insights from Kolkata Metropolitan Area**

The concept of gender and sexual minority people is not new. And those who are aware of this concept do not see them favourably and pretend not to know them. None of them, however, can deny their presence in the society. These gender and sexual minority groups of people are generally termed as non-binary people. Since they are not many in number compared to mainstream, heterosexual binary people, they find themselves on the same page. Not only that, they are marginalized in the society, and sometimes it is found that those people are also not accepted by their parents. They are actually very much excluded from the society. For that reason, this study has been done to show their presence and position in our society and to describe their marginalization and exclusion.

In the census of 2011 these people are included for the first time. According to the census of 2011, the total number of 'other' group of population in India is 487803 and the number of 'other' population in West Bengal is 30349. It is found that their number is negligible compared to the total population because according to the census, the number of total population in India is 1210854977. So they are in a minority on the basis of number and for that reason no one wants to hear of them and their problems. The term 'other' has been used in the 2011 census to designate all non binary people, especially transgender and hijra population. But each and every categorization of these gender and sexual minority people is not present in the census.

During the survey it has been found that they are in most of the cases harassed, neglected and marginalized in different public and private domains, especially at home, educational institutions, work places, in public vehicles, etc. They become traumatized and marginalized. They become helpless also. Not only that, it is very unfortunate that some parents also hand over their intersex children to the hijra community soon after their birth and some of these people are driven out of their homes because of their gender identity and sexual orientation. These people often face severe domestic violence. Some have to tolerate this and some cannot and try to run away from this terrible situation by hook or by crook and finding no other way some of them even commit suicide. Many of them have a proneness to this

tendency. So, it is very much true that they are socially excluded and marginalized and harassed in different ways. Statistical analyses have been done to establish the fact of their harassment and other problems in the society.

The main objectives of this research are to classify gender and sexual minority groups of people in detail, examine their existence in the society in the past, describe their present status and situation in the society, their social exclusion and marginalization, its causes and consequences, analyze the different hindrances troubling their lives which they are facing in their day to day lives. The relevant remedial suggestions are also mentioned as action plans for social development.

Kolkata Metropolitan Area (KMA) has been selected as the study area because it is the largest urban agglomeration in Eastern India and it extends over 1875.95 square kilometer and KMC is the heart of the KMA. Urbanization plays a very important role in this KMA. So, lots of different kinds of people come here to live, study and work. Here different kinds of people reside and a diversified population with a pluralistic culture is seen in this area. The number of different NGOs that works for gender and sexual minority people is greater here than in the other areas. Those people who are driven out from their homes for their gender identity and sexual orientation come to different NGOs located in the KMA area and take shelter with them. Besides these, those people also fall under the gender and sexual minority groups who don't openly come out. In most of the cases they also come to these NGOs to find likeminded people and to express their feelings. It has also been found that they don't hesitate to share their life experience and talk about it fearlessly and without hesitation. Besides these, most of the gender and sexual minority people in the KMA engage in trans-activism because they know only too well the hindrances of their lives and what they can do for their well being. For all these reasons, this KMA area has been selected as the study area.

The total period of the study has been divided into three phases: the first phase includes formulation of research problem and selecting the target group of the study, extensive literature survey and finding research gaps and formulation of research questions. Besides, the first phase of this study also includes the selection of the aims and objectives of the study, selecting the study area and the types of research which suit best this study and lastly it includes determination of sampling techniques and sample size and preparation of questionnaire. Then comes the second phase of the study and it starts with the collection of different types of primary and secondary data. Actually this phase is very much important for



this study because the total study has been conducted with the help of primary data as there is no secondary data of gender and sexual minority group of people available at the micro level. Primary data of this study is collected mainly through questionnaire from different persons who fall under these categories and from different NGOs who work for them. Besides, the secondary data is also collected from government offices, i.e. KMDA (Kolkata Metropolitan Development Authority), Janaganana Bhawan, Directorate of Census Operations, West Bengal and West Bengal Transgender Persons Development Board. The next and third phase begins with data analyses which are collected from different primary and secondary sources. Statistical techniques are used for cartographical presentation and suitable softwares are used for mapping and data analysis for scientific presentation.

For conducting this study in detail, the descriptive type of research has been selected because this study mainly describes thoroughly the classifications of the gender and sexual minority groups of people, their socio-economic conditions, their needs and problems and the different acts, rules and regulations and their protest actions to achieve mainstream inclusion and this type of research includes surveys and different kinds of fact-finding enquiries. As the target group is a hard-to-reach group, sampling method of the snow ball type has been used. As this study is mainly dependent on primary data, collection of primary data and survey techniques are very important for this study and primary data has been collected through different methods, such as observation, personal interview, telephonic interview and mailing questionnaire. Among these, personal interview plays a very important role in this study. One to one interview, group interview, structured, unstructured and group interviews are different types of personal interview which play a very important role in this study in the collection of primary data for this study.

In this study, seven categories of people have been identified in the KMA area among gender and sexual minority groups. There are, admittedly, lots of variations and lots of terminologies. But mainly seven types of people are seen in the study area and they are LGBTIQK. The full form of this abbreviation is lesbian (L), gay (G), bisexual (B), transgender (T), intersex (I), queer (Q) and kothi (K) and these categories of people are counted as respondents who disclose their gender identity and sexual orientation to the researcher.

After a long fight transgender and hijra people get a very important verdict from the Supreme Court. This is called NALSA Judgment and transgender and hijra people are recognized as

‘third gender’ from the day 15<sup>th</sup> April, 2014. In this way a lots of changes have been made in the laws and orders in India and in this way their acceptance to the society and their opportunities have increased and are getting at least a little bit. That’s why, the study period is taken from 2014 to 2022 because in 2014 they got an important verdict from the Supreme Court that the transgender and hijra people are called as third gender and they are defined as socially and economically backward classes. So the 2014 is a landmark year for the third gender people. And as a result, these people have improved in their lives, they have overcome various problems, and their lives have changed, so their socio economic conditions and different problems in their daily lives, from 2014 to 2022 have been taken as the study period.

With a view to thoroughly studying the whole matter, the entire thesis has been divided into seven chapters. The first chapter is the introductory chapter of this study. Statement of the problem is very much important for preparing the ground. In this chapter the statement of the problem has been stated in detail which makes it clear that the society always thinks that only the binary heterosexual people exist in this society and there is no presence of non-binary and non- heterosexual people. So these non-binary and non-heterosexual people are always discriminated against and neglected in the society. This is the main problem. The target group of this study has also been described here in details and it comprises gender and sexual minority groups of people. Literature survey is a very important part of this chapter. Lots of books and journals which have been studied during the total research period have been thoroughly discussed here. Demographic features of the target group are also discussed here. But the presence of these groups of people is not clearly defined and depicted in the census. But the Census of 2011 is very exceptional because it includes these people. However, here all non-binary people are described as 'other'. Besides these, research gaps also have been discussed here. Different research questions and objectives of this study have also been discussed here in minute details. And the main objective of this study is to discuss their socio economic conditions, their social exclusion, the different reasons lying behind their social exclusion and finally explore and suggest different ways for their inclusive development. These are the main objectives of the study. The study covers the period from 2014 to 2022. The KMA (Kolkata metropolitan Area) was chosen as the study area for this study and the reasons behind this selection are also discussed here in detail. Then methodologies of this research have been discussed broadly in this chapter. Sampling size and sampling techniques are two very important factors in discussing research methodology. Since the target group is hard to reach, here snow ball sampling method has been used and the total sample size is 302.

Besides these, processes of collection of primary data have been discussed in elaborate details. And lastly, the significance of the study has been described here in this chapter. Some limitations are naturally encountered in this study which is a normal phenomenon in research projects. These limitations are also mentioned here.

It is very much true that the presence of the gender and sexual minority groups of people in the society is nothing new. They have a strong historical background. These historical backgrounds have been studied and described in detail in the second chapter of this thesis. Their presence in the epochs of the Ramayana and the Mahabharata have been discussed thoroughly. Even in the Vedic period the presence of third gender people is noticed. The status of the Hijras in Indian society before and after independence is also dealt with in this chapter. These third gender and non-binary people exist not only in India but also in different parts of the world like Africa, America, China, Japan, Greece, Italy and France. There are various examples in different parts of the world. All this overwhelming evidence is dealt with in the second chapter to show that they have always been a part of human society everywhere in this world.

In the third chapter, gender, sex and sexual orientation have been discussed in detail and the classification of human beings on the basis of these three criteria, namely, gender, sex and sexual orientation has also been elaborately elucidated. Gender identity is a very important issue for these non-binary people as well as the determining of the age at which they first begin to perceive their special gender identity. Therefore, the respondents' gender identity and the age at which they first realized that identity are discussed in great detail in this chapter. Assigned sex at birth, gender expression and Gender Dysphoria have also been discussed here. The relation between body and mind experienced by the non-binary respondents and their physical transformation have also been discussed in detail. Different classifications and definitions related to these people, such as cisgender, transgender, transsexual, kothi, tom boy, two-spirit, gender variant, genderqueer, agender, gender neutral, bigender, trigender, pangender, transvestite, intersex, hermaphrodite, different syndromes of intersex people and different names of the third gender or transgender people in different countries have been mentioned in detail. Sex Reassignment Surgery or SRS takes a very important place of this chapter. Different types of SRS and the percentage of the respondents who have recourse to these procedures for changing their sex/body have been analyzed here. Hormone Replacement Therapy is also explained here and its utility discussed. But for all human beings, the mind is king as the saying goes. Many of these people undergo surgery or

hormone therapy to achieve a match between body and mind. So how the mind and surroundings help them change or contribute to the change is also presented here. Besides, some very important and relevant cases have been analyzed in this chapter.

Their socio-economic conditions have been discussed thoroughly in the fourth chapter of this thesis. The reasons behind their present socio-economic conditions are also surveyed in this chapter. Respondents' educational qualifications and the different obstacles faced by them, their religion, marital status and patterns of residing have been thoroughly discussed. Here it can be seen that these non-binary people are not easily accepted socially. In most cases, they are kicked out of their homes or confined to one room; so often they cannot stay at home and are forced to live in different places. It is also abundantly clear that they suffer domestic violence in different ways at home, so their life is not like that of other people in society and their condition is described with empathy in this chapter. Besides, their work pattern, their livelihood, sources of livelihood, their income, how they lead their life, their health conditions are also elaborately described in this chapter. HIV infection is a very important issue for these people, so the levels of HIV infection noticed among the respondents have been described here. These people are liked neither by their own family, nor by their neighbours. Thus they are virtually ostracized by the rest of society. The various problems arising from this virtual ostracism which trouble their life are taken into account at length in this chapter. Further, their relationships are not very simple or normal like those of mainstream society, the rate of biological children born to them is lower than comparable rates in the other segments of society. This is also discussed here. Hijra people have been discussed in this chapter in detail. Here especially their previous lives, reasons behind their choosing this profession, their educational qualification, their social customs and different rituals, social hierarchy, their classifications on the basis of their professions and their residing places within the study area have been discussed here in minute detail.

The fifth chapter mainly describes the details of the problems they are facing in their day to day lives. The field survey unveils their different problems in details and those problems have been classified into ten categories. These are problems at home, problems in educational institutions, problems caused by lack of livelihood, workplace harassment, problems in public transport, problems in health care system, legal problems, administrative problems, mental depression and other problems. It is very obvious that the respondents face torture and persecution in their homes once their gender identity and sexual orientation are disclosed. This chapter also describes the details of the types of torture they face and

mentions the percentage of respondents who experience such torture and persecution. Apart from this, the problems faced by them at different educational institutions where these people are victims of bullying, the schools that do not help them much and the resultant increase in their dropout rates are described in detail in this chapter. The lack of livelihood is a special problem for them. Why they join the hijra profession, why they mostly take to begging and choose that as their profession are described thoroughly in this chapter. Besides, it is mentioned here that some of these people are also involved in prostitution. Since they are considerably different from the mainstream people, they have to be introduced in different ways in workplaces and these ways are very well described here. It is also true that non-binary people face various challenges in hospitals and healthcare centers due to lack of awareness of health service providers about non binary people. It is necessary to mention that the people of gender and sexual minority groups go to jail; problems arise regarding which cell they will be kept in as there is no proper rule pertaining to these issues. Due to these various problems they suffer mental depression; they contract various bad habits and experience dissatisfaction in their lives. As a result, suicidal tendencies and rough behavior are seen among them. All this is a result of the difficult situations they have to go through in their day-to-day lives. There are other problems, too. They cannot use public restrooms in ways that match their gender identity and they face various problems in the banking sector also. Besides, they naturally consider themselves unwanted in public gatherings on various occasions which is not at all desirable and so their social exclusion is revealed in different ways in this chapter. The ways in which the respondents are tortured and harassed in their day-to-day lives are very clearly demonstrated through the chi-square test in this chapter. And in each case it has been found that null hypothesis is rejected and the alternative hypothesis is accepted.

Their constitutional rights, different laws related to these and movements of gender and sexual minority people have been discussed in the sixth chapter to elaborate the contemporary issues and future planning. Apart from the government, people from different walks of life in the society also take different initiatives for their inclusion in the mainstream of the society and their thoughts and viewpoints have also changed a lot.

The last chapter of this thesis presents the concluding suggestions for improving the present situation of gender and sexual minority people. It has been seen in this study that these people are excluded from the mainstream society and it is an incontestable fact. In various areas such as education, health, their places of residence, shelter, livelihood, administration, banking,

law enforcement, police, etc. the difficulties they are facing in their daily lives and the measures that can be taken to prevent these and to build an inclusive society instead of social exclusion are presented here in details. But it is very true that it is not possible to change the society with only some suggestions, it needs implementation of the program briefly indicated here. And keeping this implementation in mind, two models have been mentioned in this chapter which are considered as future action plans and if these two models are formed, it will be possible to create social inclusion by avoiding social exclusion to a large extent in the future. The models will show the possible social steps to make an avenue for mainstreaming these minority groups.

Jayita Mukherji

# **Chapter-I**

## **Introduction**

# **Chapter – I**

## **Introduction**

Nature does not endow all things with equal characteristics and equal patterns. Nature makes variations in its all creations. Some creations are very beautiful and some are ugly. Some are big and some are small. In this way, based on color, smell, and size, physical characteristics are different. Man is the greatest creature on earth. Similarly, variations are also seen in human beings. Many variations are seen among human beings based on class, caste, race, language, gender, age, health, sex, education, monthly income, etc. Here mainly the differences among human beings on the basis of gender and sex are taken into account for discussion in this thesis. Gender and sexual minority groups of people and their different issues are the main topics of this thesis. Usually, people in the majority are higher in number and get many more opportunities than minority people, because minority people are fewer in number.

### **1.1 Statement of Problem and Triggering Factors of the Study:**

Most people know that gender is of two types- male and female and they attract each other. It means they are heterosexual. Again the general belief in our society in which people tend to find comfort is that all people fall under the category of the gender binary and all people are heterosexual. But it is not true because gender depends on one's mind. The meanings of 'gender' and 'sex' are different from each other and besides the people of gender binary group; non-binary people are also present in our society. Their presence in our society is not new; they existed in our society in the past also.

#### **1.1.1 Gender, Sex, and Gender Identity:**

The word 'gender' is a widely used term. But the proper meaning or essence of the word 'gender' is not always correctly understood. Most people in our society think that gender is only a grammatical word, which is used in English only. But if we look at our society, then it is seen that common people generally know that gender is of two types, male and female. This is called gender binary and people think that the two words 'sex' and 'gender' have the same meaning. But actually, this is not true. These two words have different meanings and definitions. Actually 'gender' is used to refer to socially constructed roles and cultural representations and 'sex' is defined as the biological status of a person as either male or female based on anatomical characteristics (Newman, 2002). So, it is seen that 'sex' and



'gender' are different words and 'gender' is very closely related to the term 'gender identity'. Gender identity is a person's intrinsic sense of self as male, female, somewhere in between, or neither (Barz & Owen, 2015).

### **1.1.2 Classification of Human Beings on the Basis of Gender and Sex:**

Most people think that based on gender men and women are classified into two categories, i.e. male and female. But actually, on the basis of gender there are two types of people- 'cisgender' and 'transgender'. Those with gender identity matching their assigned sex at birth are called 'cisgender' and those with gender identity not matching their assigned sex are called 'transgender'. Transgender people's gender identity does not match their assigned sex at birth (Barz & Owen, 2015). Actually, transgender people fall into the non-binary group. 'Transgender' is an umbrella term under which all non-binary people can be included. But transgender people are in the minority because, in the case of the numerically vast majority, their gender identity does match their assigned sex at birth. Most people identify their gender within binary – as man or woman (Richards et al., 2016). Transgender people are also classified into two categories, i.e. transgender males and transgender females. Besides these, many terms are included under the non-binary groups, i.e. transsexual, genderqueer, agender, genderless, etc.

On the other hand, based on sex, people are classified into generally two categories, male and female. But there is another classification also. Intersex people do not fall into the category of male and female. They are neither male nor female based on internal and external genitalia. Intersex is the condition whereby an individual is born with biological features that are simultaneously perceived as male and female (Harper, 2020). They are called 'hermaphrodites' because their gonads, genital morphology, and sexuality simultaneously show both male and female characteristics (ovaries and testes) or in which both types of gonadal tissue exist in a single gonad (known as an ovariostestis) (Sha et al., 2017).

### **1.1.3 Classification of Sexual Orientation:**

When a child grows up, they feel different types of feeling towards others – physical, emotional, psychological, and emotional. These feelings describe their sexual orientation (Barz & Owen, 2015). Based on sexual orientation, people are divided into two categories, homosexual, heterosexual, and bisexual. Heterosexual people are those who feel attraction to their opposite gender and homosexual people are those who feel attraction to the same gender of people. According to "Humjinsi- A Resource Book on Lesbian, Gay and Bisexual Rights

in India", homosexual means relationships between people of the same sex (Fernandez, 1999). Homosexual people are of two types, lesbian and gay. The word 'Lesbian' refers to homosexual women. The word 'lesbian' is used for women with their sexual identity or sexual behavior, regardless of sexual orientation, or as an adjective to characterize or associate nouns with female homosexuality or same-sex attraction (Solarz, 1999). The word 'gay' denotes homosexual male people and these lesbian and gay people present a contrast to the term 'straight' (Sell & Weinrich, 1995). And the term 'bisexual' denotes those people who feel attraction to both males and females simultaneously.

#### **1.1.4 Gender and Sexual Minority People:**

From the aforesaid discussion, it is seen that there is a large spectrum based on gender identity. There is a whole range of identities to be found on the "gender spectrum" (Barz & Owen, 2015). Those gender identities which do not fall in the category of the gender binary, i. e. male and female, are referred to as gender minority people. Transgender, genderqueer, agender, transsexual, pangender, bi-gender-- all these types of people are included in the category of gender minority people because they are fewer in number than gender binary groups of people. Actually, the term 'transgender' is an umbrella term (Forsyth & Copes, 2014). It includes all gender minority groups of people excluding cisgender people and the sexual minority people are those who are other than heterosexual people. So, all kinds of homosexual and bisexual people are included in the sexual minority groups.

#### **1.2 Target Group of the Research:**

The main target group of this study is gender and sexual minority groups of people. Gender and sexual minority groups of people include LGBTIQ and Eunuch people who are the main target group of the study. The term LGBTIQ is an acronym that stands for Lesbian, Gay, Bisexual, Transgender, Intersex, and Queer. Here, 'L' stands for Lesbian, 'G' stands for Gay, 'B' stands for Bisexual, 'T' stands for Transgender, 'I' stands for Intersex and 'Q' stands for Queer.

Besides these terms, there is another term, 'Eunuch'. They are also gender and sexual minority groups of people. The term 'Eunuch' is popularly known as 'Hijra' in South-Asian countries. According to Serena Nanda, the hijras are a religious community of men who dress and act like women and whose culture centers on the worship of Bahuchara Mata (Nanda, 1998). Hijras are androphilic (sexually attracted to adult men), typically sexually receptive, transgender, sometimes castrated, and live in fictive kinship networks that are hierarchically

organized (Stief, 2017). Besides all of these people, some other terminologies are also there. Those are pangender, gender nonconforming, gender fluid, genderless, agender, bigender, transsexual, pansexual, etc. which are generally included under the term 'transgender' and 'queer'. 'Transgender' is an umbrella term that includes all people of the non-binary or genderqueer group (Craig & Lacroix, 2011).

### **1.3 Literature Review:**

Since these people belong to a minority group, they are somewhat kept in the same room. So compared to other subjects, the work on them has been less. Also, the work that has been done on them in different countries at different times is conveniently highlighted.

- “Transgender Liberation - A Movement Whose Time Has Come” (Feinberg, 2006b) is a living document of transgender persons, cross-dressers, and gender non-conforming people. It is a chapter of the famous book “ The Transgender Studies Reader”. It is also to be noted that the history of gender identity, gender nonconformity, transvestism, and transsexuality has been thoroughly discussed here.
- “Transgender Nation” (MacKenzie, 1994) is also a very popular book in this field, which says a lot about gender and sexual minority people. Transgenderism and transsexualism are beautifully explained in this book. The gender movement has also been explained here in a lucid manner. According to Mackenzie, "every day we do gender. The way we look, the way we act, dress, talk, walk, wear our hair, think about ourselves, communicate with others and desire comprise our gender schema". Gender is a ritual that is performed every day by everyone. Those who don't want to follow these rituals are labeled as mentally ill. But the truth is that they are not mentally ill as the monogamous society promotes them to be. This book exclusively deals with the coming out of various transgender and transsexual people through a TV show. At that time in 1992 that TV show was very popular among Americans. Through this show, various transgender and transsexual groups came out in front of others and shared their life experience with all. This book is divided into five chapters. Various aspects of the lives of gender minority people (Sex Reassignment Surgery in the early days, treatment of transgender people, cross dressing, gender movement, etc.) are described in detail here.
- There are gender and sexual minority people in different countries. The behavior towards them and laws relating to them vary from country to country. Leslie

Feinberg in her book “Transgender Warriors - Making History from Joan of Arc to RuPaul” describes thoroughly the life history and the struggle of Joan of Arc (Feinberg, 1996). She was a warrior and a cross-dresser and is considered a heroine in France. She led the French resistance during the Hundred Years’ War against England. It is said that she met the fugitive King Charles VII of France and asked him for troops to restore the country’s independence. All information about her later life is available in this book. For that reason this book is a very important document for cross dressers and transgender persons.

- “Queer Studies: A Lesbian, Gay, Bisexual, and Transgender Anthology” (Beemyn & Eliason, 1996) is a very good book edited by Brett Beemyn and Michele Eliason in the year 1996. This book is divided into two parts. First part describes thoroughly the different issues of gender and sexual identity, transsexuality, their psychiatric confusion, homosexuality, historical sources of bisexual movement, self description etc. The second section describes mainly queer theories. It raises some questions such as-- What is queer theory. Is it lacking? If yes, then where and how? Lesbian feminist stigmatization and coming out are also critically discussed here. Besides, whether coming out is a good decision or not at his or her workplace and how society accepts lesbian, gay, bisexual, transgender and queer people are analyzed in this section.
- “Transgender Care: Recommended Guidelines, Practical Information, and Personal Accounts” (Israel & Tarver, 1997) is a complete guide book for physical and mental health of transgender people. This book consists of twenty three chapters. Each chapter highlights different aspects of the mental and physical health of transgender people and demonstrates how to solve those problems. Actually transgender people often suffer from various psychological problems. So, this book is the complete guideline for dealing with those problems. Here different mental health problems, psychiatric diagnosis, crisis intervention, sexual orientation, basic disclosure tools are clearly explained and described in the first chapter of this book. Then different stages of sex reassignment surgery, pre operative and post operative problems and their solutions are discussed thoroughly. Hormonal regimens of FTM and MTF are described very beautifully. The process of Genital Reassignment Surgery and castration are described here in minute details. People from gender and sexual minority groups are more susceptible to HIV and AIDS. So here various support services for people suffering from HIV and AIDS have been discussed and some interviews of those people are also included here. “Self help is the best help” is the

main motto of life, it is also taught here because these people suffer from high levels of loneliness. So it can definitely be said that this book is a complete guide book for transgender and transsexual people.

- “Trans Liberation Beyond Pink Or Blue” is also a very important milestone in this area (Feinberg, 1998). This book is a collection of speeches of the author who passionately argued for the acceptance of transgender people. Feinberg gave a speech to an audience of 350 male heterosexual cross dressers and their partners at the Texas ‘T’ party. There Feinberg was the only person who wore a suit and tie. In this book, s/he tries to find the similarities in the struggles of lesbian, gay and bisexual people. S/he always raises her voice against inequality.
- “Humjinsi – A Resource Book on Lesbian, Gay And Bisexual Rights in India” (Fernandez, 1999) is also a very important book for sexual minority groups of people. This book thoroughly describes the discrimination against the sexual minority people in our society, different laws which protect them from different types of discrimination, their partnerships and marriages, different strategies for their future, some important case studies and details of different NGOs which work for the sexual minority groups of people. This apart, different news highlights and films and journals are also listed here.
- “Issues In Therapy With Lesbian, Gay, Bisexual And Transgender Clients” (Neal, 2000) is an extremely important and useful book for the gender and sexual minorities and those who are working for them. This book takes the readers inside the world of the problems and discrimination faced by those minority people. This book unfolds step by step the personal and interpersonal dilemmas of those minority people. Expressive therapy, kink therapy and different psychosexual issues have been discussed here in detail.
- Counseling plays a very important role in the life of gender and sexual minority groups of people. So the importance of counseling in their life, various counseling processes, addressing their problems, different ways to get out of their problems, etc. are described in the book “Counseling Lesbian, Gay, Bisexual and Transgender Substance Abusers: Dual Identities” (Finnegan & McNally, 2002). A long time ago, homosexuality was considered a mental disorder. But in the year 1973, the American Psychiatric Association decided that homosexuality would no longer be considered a mental disorder. So, it was removed from the Diagnostic and Statistical Manual of

Mental Disorders (DSM III). Despite this initiative, negligence and discrimination did not go away from their lives. Sexual orientation, different terminologies which are related to them, their treatment, homophobia, bi phobia and trans phobia, counselor's role in their lives, their socialization, different family issues and after all the process of developing a positive lesbian, gay, bisexual and transgender identity are explained thoroughly. It is also a resource book for gender and sexual minority groups of people.

- “Humjinsi – A Resource Book on Lesbian, Gay and Bisexual Rights in India” (Fernandez, 2002) describes graphically the discrimination against LGB people in India, their problems, violence committed against them, their protection from violence, decriminalization, anti – discrimination, domestic partnership, their rights to marriage etc. This book is a living document concerning the sexual minority groups of people.
- Gender variant, gender nonconforming and transgender people, as stated earlier, are very much discriminated against on the basis of their gender expression and sexual orientation. Gender expression is the manner through which one can express one's gender identity. Everyone communicates their gender identity in a manner that is comfortable for them—through clothing, hairstyles, mannerisms, or other outward presentations or behaviors. This communication, whether conscious or subconscious, is called gender expression (Barz & Owen, 2015). These people are very much neglected in our society. They are separated from their families too. So very often, they suffer from mental trauma and for that reason they have to go to psychiatrists very frequently in comparison to others. All these are very well expressed in the book “Transgender Emergence- Therapeutic Guidelines for working with Gender- Variant People and Their families” (Lev, 2004). Here the relationship of medical science and gender variance is described with clarity. Clinical guidelines and therapeutic Standards of Care are also explained here thoroughly. A part of this book deals with the pathological diagnosis of gender. Different therapies which are applicable to transgender people are also discussed here. Besides these, family emergence, family coping with the transgender family member and coping up (for parents) with their transgender children are also described in this book. So, this is a complete guidebook for transgender people and their parents and family members.

- The situation of LGBT people in both the developing and developed countries, different policies for GLBT people in U.S.A., policy development for GLBT people and different issues concerning transgender and bisexual people in public administration have been discussed and analyzed in the book “Handbook of Gay, Lesbian, Bisexual and Transgender Administration and Policy” (Swan, 2004).
- Another notable book is “Encyclopedia of Lesbian, Gay, Bisexual, and Transgender History in America: Actors to gyms” (Stein, 2004). It describes lesbian and gay history for more than 400 years in the United States and it also presents 500 alphabetically arranged entries. The socio economic condition of LGBT people in United States, their gender and sexual identities and culture have been discussed here thoroughly.
- Another important book in which different criminal laws, supportive laws for LGBT people in workplace, discrimination against them on the basis of sexual orientation, public accommodation of these people, their problems and feelings in their work places, the relationships of schools and families with these children, their different health issues have been analyzed thoroughly, is “The Rights of Lesbians, Gay Men, Bisexuals, And Transgender People” (Hunter et al., 2004). This volume is very useful for those people who are facing discrimination or legal uncertainty in their day to day life and it helps readers to navigate the turbulent and constantly changing waters of the laws regarding gender and sexual minority people.
- “Virginia Prince- Pioneer of Transgendering” (Ekins & King, 2005) is the life history of the prince of Virginia, who was a man, but transformed into a woman without any transsexual surgery and she developed a support group for cross dressers throughout the world from 1960. She invented the term ‘transgender’ and she was the founder of Transvestia Magazine.
- “Drag King Dreams” (Feinberg, 2006a) is the life story of a butch lesbian, Max Rabinowitz, and her turnaround. She always feared for her life because that was the time of war in America and nobody accepted the gender and sexual minority people from the core of their heart. She became afraid more and more for her life. Unfortunately an incident happened in her life at that time. Her friend Vickie, a transvestite, was found murdered on her way home at late night. This shattering tragedy, however, helped her find an aim in her life. Then she started uniting all lesbians, gay, cross dressers, gender queer, drag queens together. She became an

activist and for the first time in her life, she had found hope for her future. This story is beautifully told in this book.

- Lori B. Girshick dedicated her life to working for social justice and ending inequalities. She was working for LGBT people in her life. She wanted to abolish the inequalities from society. “Transgender Voices - Beyond Women and Men” (Girshick, 2009) is an extraordinary book authored by her which is written on the basis of 150 interviews of sex and gender diverse people who speak of their lives. Their voices are brought together in this book very beautifully in detail. She describes their coming out, struggle, sexual orientation, relationships, homophobia, impact of bullying on their life, discrimination etc.
- In the book “Stone Butch Blues” (Feinberg, 2010), Leslie Feinberg wonderfully describes the day to day life of a lesbian butch, named Jess Goldberg. It is a work of historical fiction. Her growing up and different difficulties besetting her life are beautifully described in this book. Her complexities and mental dilemmas are also vividly portrayed in this book.
- The book “Life Of A Eunuch” (Saxena, 2011) describes powerfully the psychological and socio economic conditions of eunuch or hijra people. It is an investigative study of the hijra people. Here the writer discusses the definition of hijra people, mythology surrounding them, their livelihood, their socio economic conditions, their life story etc. This book is also a living document on the hijra people in our society.
- Another very much important book on their lives is “Creating a Place For Ourselves - Lesbian, Gay, and Bisexual Community Histories” (Beemyn, 2013), edited by Brett Beemyn. It describes the life of gay people in the United States before Stonewall and gay liberation movement. Large gay communities are seen in New York, San Francisco and Fire Island. It mainly deals with gay population in United States. It is a living document of gay population.
- Another remarkable book on transgender people is “Current Concepts in Transgender Identity” (Denny, 2013). In this book Richard Green explains the historical, mythological and cross- cultural aspects of transsexualism and Ruth Hubbard the relationships between gender and genitals which explain the construction of sex and gender. Holly Boswell beautifully describes the transgender paradigm shift toward free expression. It is also a very important resource book for transgender persons.



Their psychological dilemma and the physical transformation of transsexual persons have been discussed in minute details. Grounded theory approach to cross dressing and sex changing has been discussed thoroughly by Richard Ekins. Transgender behavior and DSM have been also discussed. Sexual orientation, gender dysphoria, hormonal therapy, feminizing genital surgery is also discussed here. This book is dedicated to gender and sexual minority people and it helps to explore different types of gender identity among people.

- Gender and sexual minority people have to face lots of problems and hindrances in their workplaces. A person's talent should be the only effective criterion for getting a job. But unfortunately that is not the case in most cases. Gender and sexual minority people face various difficulties in getting jobs if they disclose their sexual orientation. It is often seen that they are fired from their jobs. All such information is very well explained in this book "Sexual Identity on the Job: Issues and Services" (Ellis & Riggle, 2014).
- Dr. Manobi Bandyopadhyay in her book "A Gift of Goddess Lakshmi" beautifully describes her life, her struggles and hindrances, her emergence in the public domain, study and employment. Dr. Bandyopadhyay has been working as India's first third gender principal in Krishnanagar Women's College at Nadia District in West Bengal since 9<sup>th</sup> June 2015. Hers is a very extraordinary and courageous journey. Her very enthusiastic message to her community is 'Education. If we learn, all our problems will be solved' (Bandyopadhyay & Pandey, 2017).
- Besides all the above mentioned books, there are a number of journals in which gender and sexual minority people have been discussed from different angles. In the journal "Culture, Theory and Critique", an article bears the title "The eunuch archive: Colonial records of non-normative gender and sexuality in India" (Hinchy, 2017). This article discusses CTA (Criminal Tribes Act) and how this act was passed in the British Period and the question how the eunuch community is labeled 'criminal' and 'sexually perverse' has been also described thoroughly. The history of the act 377 and its implementation has also been analyzed here.
- In the journal "Indian Journal of Gender Studies" an important article is "What is in a Name? Khwaja Sara, Hijra and Eunuchs in Pakistan" (Khan, 2016). It discusses the cases of 30 trans community people and examines the historical and contemporary

policies of naming and its consequences in India during British Period and in Pakistan.

- “Conceptualization and measurement of homosexuality in sex surveys: A critical review” (Michaels & Lhomond, 2006) narrates the results of survey on homosexuality. It also describes the history of sex surveys and the contribution of Kinsey, a famous biologist, in sex research.
- “International Review of Psychiatry” is an international journal where a popular article was published under the title “Non-binary or genderqueer genders” (Richards et al., 2016). It discussed different classifications of non binary groups of people. They are marginalized in every society and every aspect of their life. So they have been always suffering from stress and mental stigma. Here in this article different treatment options and their associated risks have been discussed thoroughly.
- “The Sexual Orientation and Gender Presentation of Hijra, Kothi, and Panthi in Mumbai, India” (Stief, 2017) is an another very important article on this minority people. This is a published work on hijra, kothi and panthi in Mumbai and they are defined precisely. Here the definition of sexual orientation has been explained and their culture is also narrated here. The terms transgender, sex-gender congruent, third gender, fa’afafine, kathoey, waria, bakla and muxes have been defined and discussed in details.
- “Definition and Measurement of Sexual Orientation” is an article (Sell & Weinrich, 1995), which was published in the well known journal “Suicide and Life-Threatening Behavior”. Here mainly the term ‘sexual orientation’ is defined and homosexuality is also measured thoroughly. This article also tries to calculate the proportions of homosexual male, drug abusers and persons suffering from HIV.
- “Factors affecting the social exclusion of eunuchs (Hijras) in Pakistan” (Ahmed et al., 2014) is an investigation into the reasons behind the exclusion of the eunuch people in Pakistan. It is a quantitative study where 223 respondents are interviewed and it is seen that there are lots of socio-cultural, economical and political reasons for their social exclusion and marginalization.
- “The paradox of recognition: hijra, third gender and sexual rights in Bangladesh” (Hossain, 2017) is a very important article on the third gender people, specially ‘hijra’ people in Bangladesh. It discusses their gender identity, emasculation process,

spatial location, culture, their sexual desire, their rights as citizens and the question of their recognition.

- “The Indian eunuch: An efficient emotional labour” (Verma et al., 2011), describes vividly the working pattern of Indian eunuchs. Here it is stated that they work emotionally for their survival. They use their emotions both in positive and negative manners. Positive manners are blessings, good wishes, etc. and negative emotions are anger, creating embarrassing situations, creating pressure etc. Their culture and livelihood are also analyzed here.
- “Hijra - The Sex in Between” (Mithani & Burfat, 2003), is a very important article which surveys the definition of eunuch or hijra, their classification, their lifestyle, social or community structure, their livelihood, castration process in detail, their marriages and relationships, their early life and reasons why individuals join this group.
- “IDEA Group Consensus Statement on Medical Management of Adult Gender Incongruent Individuals Seeking Gender Reaffirmation as Female” (Majumder et al., 2020) is a very relevant article on gender incongruence. According to this article gender incongruence means the incongruence between assigned gender and expressed or experienced gender. Gender incongruence and its treatment and different therapies are described and analyzed thoroughly in this article. Here it has been said that it is not a mental disorder and Cross Sectional Hormone Therapy (CSHT) is very useful in these cases. But this type of treatment is unknown to most people.

These apart, lots of books and journals are there which have studied gender and sexual minority groups of people from different angles.

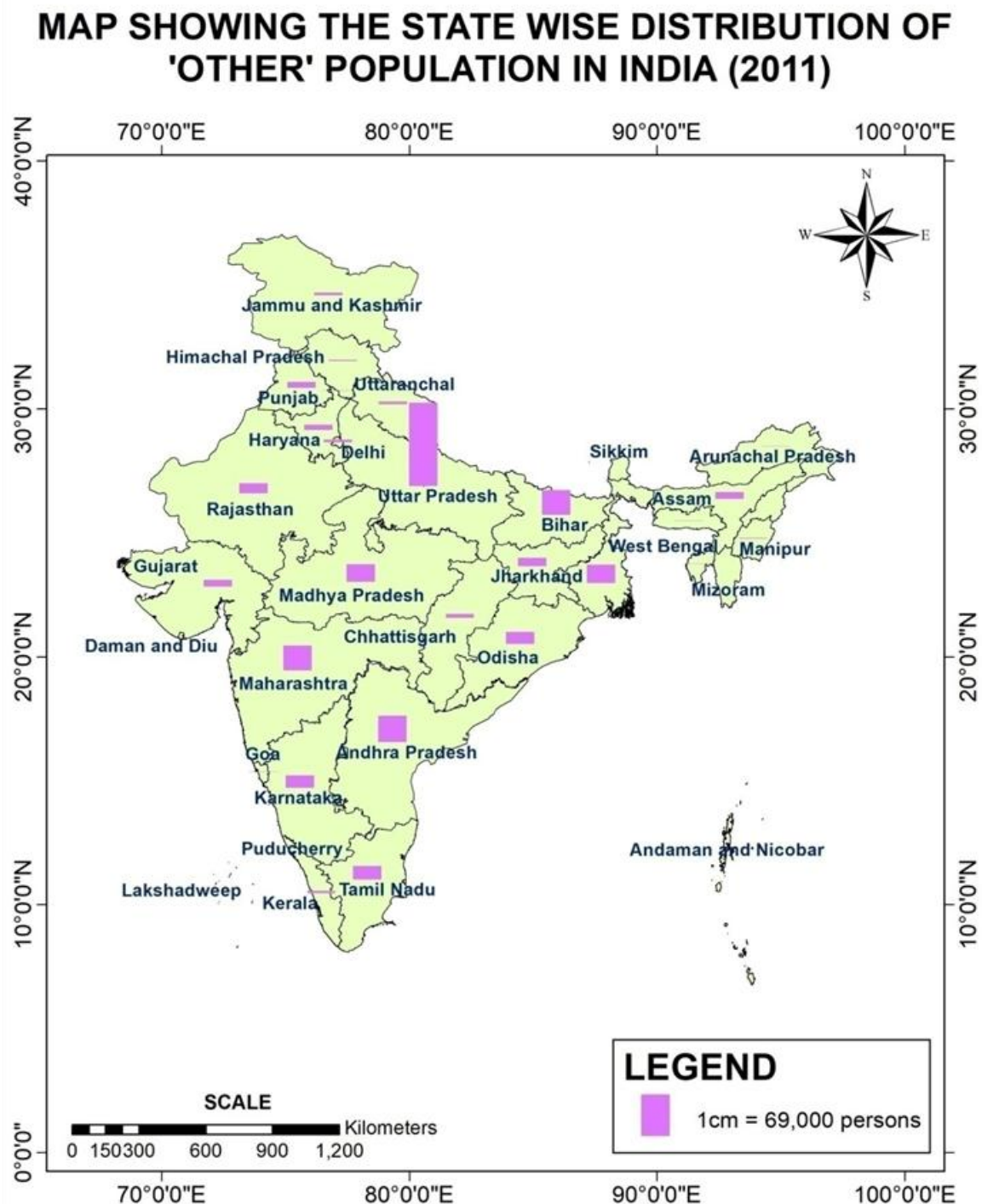
#### **1.4 Demographic Features of the Target Groups:**

From the aforesaid discussion it is already seen that they are not in a majority and fall into minority groups numerically because cisgender and heterosexual people form an overwhelming majority in society. So no one gives any attention to those marginalized people because they are fewer in number. Actually they are not always visible. Haunted by fear they don't want to come out in the open, either.

Because of their numerically minority character, these people are not included properly in the census of India. The census of 2011 is the first attempt to count them and include those minority people in the census of India. But unfortunately, this census could not classify and

record the data of all of the gender and sexual minority people. According to the Directorate of Census Operations, West Bengal, data of only those non-binary people who disclose their gender identity is collected in the census of India, 2011 and it is found only in their website, headed as 'Other'(Census of India, 2011).

Map no. 1.a:



Source: Census of India, 2011 and map prepared by the Researcher.

It is the detailed collection of state wise data of 'other' category people. Here the data relating to total population, literacy rate, SC, ST population of 'other' people has been collected state wise. Besides, their employment status, specially the data of working and non-working 'other' population was also collected. Actually here the word 'other' includes all categories of people who do not fall under the category of male and female. Before the census of 2011, the data of transgender and hijra population was latent in the category of male and female. The number of total 'other' population in India is 487,803. The highest number of 'other' population is seen in Uttar Pradesh (137,465) and the lowest is seen in Lakshadweep (02) (details shown in map no. 1.a). Here, the state-wise break up of the 'other' population is shown with the help of bar diagram in the map below (details shown in map no.1.a). According to census 2011, the highest literacy rate of 'other' population is seen in the state Mizoram (87.14%) and the lowest percentage is seen in Bihar (44.35%). The total literacy rate in India of 'other' population is 56.07%. The highest 'other' SC population is seen in Uttar Pradesh (26,404) and among 35 states, 5 states don't have any SC population. Those states are Arunachal Pradesh, Nagaland, Andaman and Nicobar Island, Dadra and Nagar Haveli and Lakshadweep. West Bengal holds 5<sup>th</sup> position in the number of total population of the 'other' category in India (30,349) (Census of India, 2011).

### **1.5 Research Gap:**

Literature review reveals that most of the literature deals with the different issues faced by the gender and sexual minority people. Some books or journals deal exclusively with the health issues of the gender and sexual minority groups of people while others deal with their mental issues. There are also books and journals dealing with different therapeutic measures for their problems and the difficulties hindering their progress in life.

- a) But there is very little and insufficient data concerning the target groups of this research.
- b) Specially, there is no secondary data on those gender and sexual minority people based on geographical locations.
- c) Though there has been some work based on geographical location, such work as there is does not cover all the gender and sexual minority people. These types of work are mainly based on single categories of gender and sexual minority groups of people. So, the total scenario of gender and sexual minority people in a particular area has not been understood very clearly.

- d) Eunuch people are very much visible among all the gender and sexual minority groups of people. They do not hesitate to disclose their identity in comparison to the other gender and sexual minority groups. Nevertheless the spatial distribution of eunuch people is not dealt with anywhere.
- e) The socio-economic factors involved in choosing their (eunuch) residential area have also not been discussed in any literature
- f) No published data is available for discussing the educational, economic, social, cultural and religious conditions of the gender and sexual minority groups.
- g) Separately a lot of work has been done for these neglected people. But developing or creating a chain or system with the help of different public and private sectors to ensure that they would not be separated from the mainstream society is never talked about.

### **1.6 Research Questions:**

- a. Who are included in gender and sexual minority groups?
- b. Are they new in our society?
- c. Are they part of our mainstream society?
- d. Are they marginalized?
- e. Do they get access to every sector in our society?
- f. Are they harassed in different sectors in our society?
- g. In which way do common people look at them?
- h. Are they well accepted by their family members?
- i. Are they socially excluded from the mainstream of our society?
- j. What are the reasons behind their social exclusion?

### **1.7 Objectives of the Study:**

The main objectives of this research which have already been set forth are discussed below:

- a. To classify gender and sexual minority groups of people in detail within the study area,
- b. To examine the characteristics of different gender and sexual minority groups and to describe their origin, birth, lifestyle, mind and psychological status within the study area,
- c. To find the historical background of gender and sexual minority groups of people,

- d. To find the socio-economic conditions of gender and sexual minority people within the study area, KMA (Kolkata Metropolitan Area),
- e. To find out the spatial distribution of residential areas of the eunuch people within KMA area,
- f. To find the impact of urbanization on the life of gender and sexual minority people or target group of the study,
- g. To describe different rituals, internal system and social hierarchy of the hijra people in the KMA area,
- h. To examine the different problems and hindrances affecting the day to day life of gender and sexual minority people,
- i. To assess the different reasons for their social exclusion from the mainstream of the society and to describe the consequences of their social exclusion,
- j. To discuss different rights, Acts and Laws which try to bring them to the mainstream of the society,
- k. To suggest some remedial measures and to develop a future action plan for their inclusive development.

### **1.8 Period of the Study:**

Gender and sexual minority groups of people are always victims of deprivation. This is not true that they were not existed in the past in our society. They have been and will always be. But very unfortunately, they don't have proper identity in our society. They are not accepted cordially in our society. They are always seen with different eyes. But gradually the condition began to improve. Then a lot of water flowed through the Ganges. After a long fight transgender and hijra people get a very important verdict from the Supreme Court. This is called NALSA Judgment and transgender and hijra people are recognized as 'third gender' from the day 15<sup>th</sup> April, 2014 (*National Legal Ser.Auth vs Union Of India & Ors*, 2014). In this way a lots of changes have been made in the laws and orders in India and in this way their acceptance to the society and their opportunities have increased and are getting at least a little bit. That's why, in this study, the study period extends from 2014 to 2022 because in 2014 they got an important verdict from the Supreme Court that the transgender and hijra people should be called third gender and they are defined as socially and economically backward classes. So 2014 is a landmark year for the third gender people. As a result, these people have improved their lives, they have overcome various problems, and their lives have

changed. So their socio economic conditions and different problems in their daily lives from 2014 to 2022 have been dealt with in the study period.

## **1.9 The Study Area:**

### **1.9.1 Study Area of the Proposed Research:**

Study area can be defined as a geographical space where the research project has been carried out and study area has been selected with a view to ensuring that data and analysis are confined to a specified area. Study area can be divided into two categories on the basis of geographical boundaries (Sen, 2017) -

- a. Site based study area
- b. Geographical unit based study area

The study area of this research work has been selected mainly as geographical unit based study area. Kolkata Metropolitan Area (KMA) has been selected as a study area for conducting this research work named “Social Exclusion of Gender and Sexual Minority Groups: Insights from Kolkata Metropolitan Area”.

### **1.9.2 Reasons behind Selecting the Study Area:**

The reasons behind the selection of this study area are stated below:

- a. The study area of this thesis is Kolkata Metropolitan Area and it is the largest urban agglomeration in eastern India which extends over 1875.95 square kilometres.
- b. It is the third most populous metropolitan area in India, after Delhi and Mumbai. According to the 2011 Census the total population of KMA area is around 17 million.
- c. The demographic primacy of KMA is the result of its vibrant economy which has been continuing for a long period of time in history. KMA consists only 18% of the state’s population, but it contributes 30% of Spatial Development Planning in the state of West Bengal.
- d. Besides these, KMA consists of three-fourths of the organized sector of industries and employment and this KMA area has lots of commercial, educational, financial, health, research and other organizations and enterprises which not only enrich the KMA area, but also enrich the entire state, the eastern region and the country.
- e. The per capita income in KMA is much higher than that of the rest of the State and KMA has created a plethora of opportunities of growth and development in various service sectors and industries in this region.



- f. Urbanization plays a very important role in Kolkata Metropolitan Area. Urbanization leads to urban growth and according to the 2011 census of India, most of the rural villages of the KMA area in the 2001 census were designated as census town in the 2011 census (Bandyopadhyay et al., 2020). Urbanization makes a powerful impact on the socio-economic and cultural patterns and the life-style of different people. In this way the impact of urbanization and modernization can be shown on the socio-economic and cultural pattern and on the lifestyle of gender and sexual minority people within the KMA area.
- g. KMC (Kolkata Municipal Corporation) is the heart of the KMA area. So, here a diversified population is seen. This diversity is seen in occupation, language, education, cultural pattern, economic activities, etc. and it is also expected that the majority of this diversified population of the KMA area are not so conservative on different issues. For that reason, most of the people of gender and sexual minority group can come out and feel free to disclose their gender identity without fear.
- h. In KMA area, there are many ways to earn and that's why lots of people under these gender and sexual minority categories come here and reside.
- i. The concentration of NGOs (Non Government Organization) which are working for the gender and sexual minority people is much more in the KMA area than in the other areas. So those people who are driven out of their homes or expelled from their families because of disclosing their gender identity and sexual orientation have found shelter in accommodations provided by those NGOs.

### **1.9.3 Geographical Location and Administrative Boundary of the Study Area:**

The Kolkata Metropolitan Area extends over six districts situated on either side of the River Hooghly namely Kolkata, Howrah, Hooghly, Nadia, North 24 Parganas and South 24 Parganas. The KMA includes 4 Municipal Corporations, 37 Municipalities and 23 Panchayat Samities. The total population who are residing in the KMA is 15.87 million and the total area is 1876 sqkm (approx.). The area is administered by the Kolkata Metropolitan Development Authority (KMDA). The four Municipal Corporations are Kolkata Municipal Corporation (KMC), Bidhannagar Municipal Corporation (BMC), Howrah Municipal Corporation (HMC) and Chandannagar Municipal Corporation (KMDA, 2022) (details shown in map no. 1.c). The KMA area is situated from 22<sup>0</sup>19'30" North latitude to 23<sup>0</sup>1' North latitude and from 88<sup>0</sup>4' East longitude to 88<sup>0</sup>33' East longitude (details shown in map no. 1.b).

**Table no. 1.1****Present Composition of KMA:**

<b>Name of Districts</b>	<b>No. of Municipal Corporation</b>	<b>No. of Municipality</b>	<b>No. of Panchayat Samities</b>
Kolkata	1	0	0
Howrah	1	1	5
Hooghly	1	10	6
Nadia	0	3	2
North 24 Parganas	1	18	4
South 24 Parganas	0	5	6
<b>Total</b>	<b>4</b>	<b>37</b>	<b>23</b>

Source: (KMDA, 2022).

**Table no. 1.2****Population and Area of Kolkata Metropolitan Area**

<b>District</b>	<b>Total</b>	
	<b>Area (in sqkm)</b>	<b>Population (as per census 2011)</b>
Kolkata	203.52	4555303
Howrah	265.92	2562104
Hooghly	359.51	2022707
Nadia	123.48	284224
North 24 Parganas	462.14	4787942
South 24 Parganas	405.38	1661772
Total Land Area of KMA	1819.95	-
Total River Area	56.00	-
Total KMA	1875.95	15874052

Source: Collected from KMDA.

**Different Municipalities within KMA Area:****1. North 24 Parganas:**

Baranagar, Barasat, Barrackpore, Bhatpara, Dumdum, Garulia, Halisahar, Kamarhati, Kanchrapara, Khardah, Madhyamgram, Naihati, New Barrackpore, North Barrackpore, North Dumdum, Panihati, South Dumdum, Titagarh

**2. South 24 Parganas District:**

Baruipur, Budge Budge, Maheshtala, Pujali, Rajpur Sonarpur

**3. Nadia District:**

Gayespur, Kalyani, Haringhata

**4. Howrah District:**

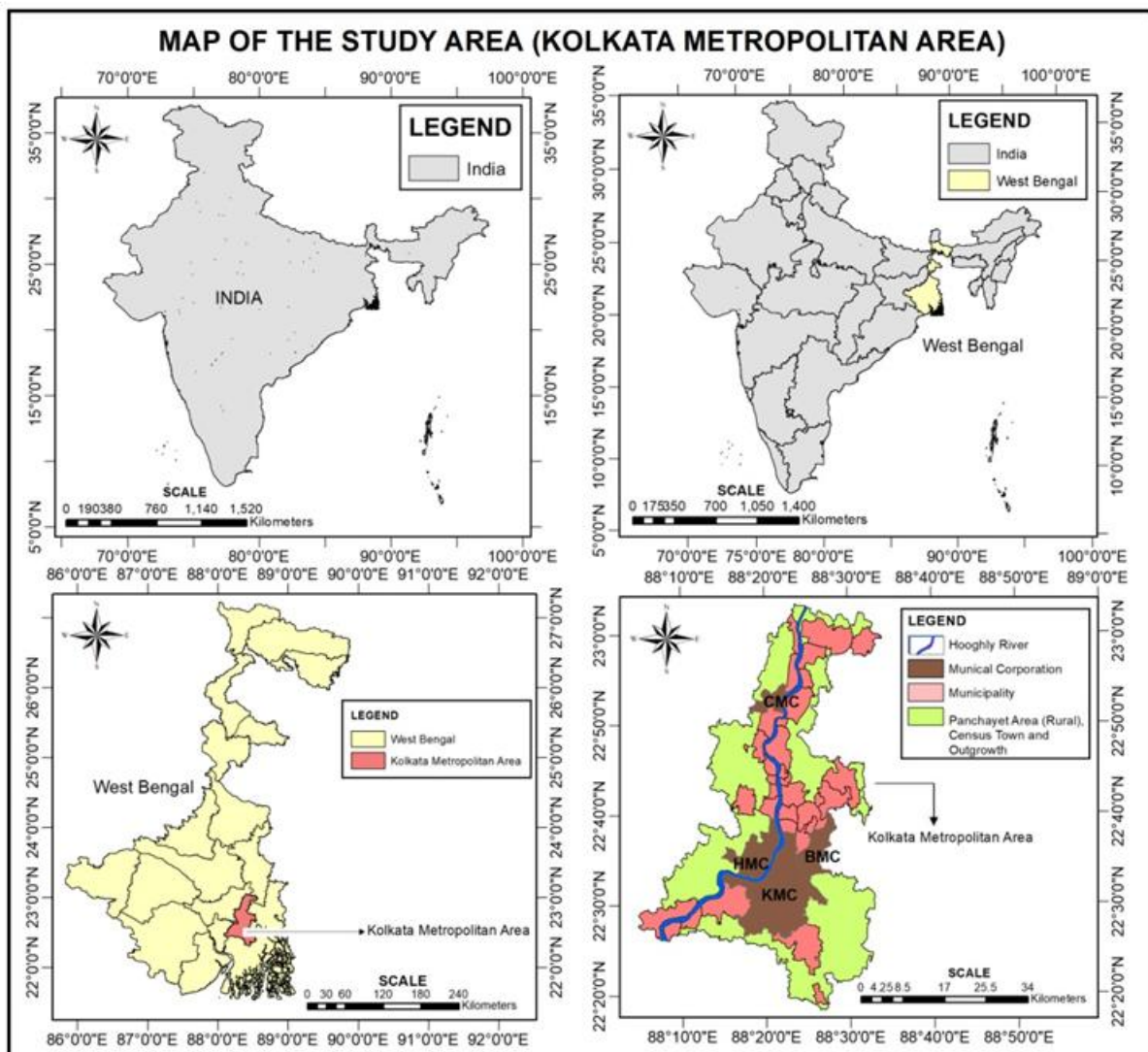
Uluberia

**5. Hooghly District:**

Baidyabati, Bhadreswar, Bansberia, Champadani, Dankuni, Hugli Chinsura, Konnagar, Rishra, Srerampore, Uttarpara Kotrung.

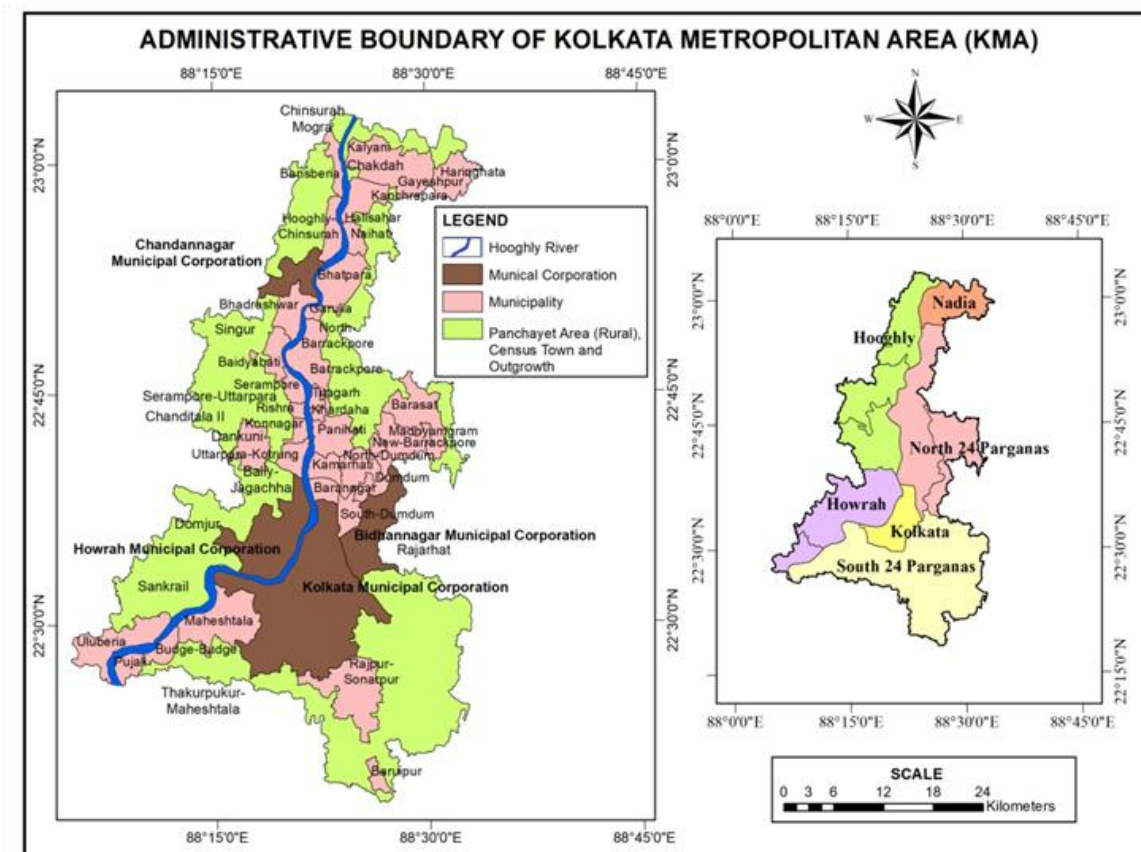
**1.9.4 Map of the Study Area:**

**Map no. 1.b:**



Source: Reproduced from general administrative maps and map of the KMA.

Map no. 1.c:



Source: Collected from KMDA and Prepared by the Researcher.

### 1.10 Research Methodology:

According to C.R. Kothari, 'Research methodology is a way to systematically solve the research problem' (Kothari, 2004). So research methodology is very important for carrying out research. The steps of methodology which have been followed in this study are described below and the total duration of this study is divided into three phases-

- First Phase ( Pre – field work )
- Second Phase ( Field- work )
- Third Phase (Post - field work)

#### 1.10.1 First Phase ( Pre – field work ):

The first phase of this research includes the following steps:

##### i. Formulating the research problem and selecting the target group of the study

A research problem is usually inseparable from a tangible situation in which it exists and the researcher wants to find a solution to the problem. Here the problem of the research is the social exclusion and marginalization of the gender and sexual minority

groups of people. The research problem has already been discussed in the earlier part of this chapter.

**ii. Extensive literature survey**

Literature survey has already been done by the researcher for deriving and locating research gap.

**iii. Deriving the research gap and formulating the background of the study from literature review**

Finding the research gap is very important for formulating research questions. Research gaps have already been pointed out in this chapter.

**iv. Formulating research questions**

Selecting research questions is also very important for finding out the objectives of the study. Research questions have already been prepared in the previous part of this chapter.

**v. Selecting aims and objectives of the study**

From the research gaps and research questions, aims and objectives of the study have already been prepared.

**vi. Selecting study area**

Study area selection is vital in any research. Here the study area is KMA (Kolkata Metropolitan Area) and reasons behind the selection of the study area, location and administrative boundary of the study area and map of the study area have already been discussed in detail in the previous part of this chapter.

**vii. Selecting the type of research which suits best this research study**

Mainly the descriptive type of research has been followed to carry out the present research work because here the historical background of the gender and sexual minority people, their classifications on the basis of different angles, their socio-economic conditions, their culture, different rituals have been described thoroughly. So in this case only the descriptive type answers the needs of this study. And that's why this type of approach has been used for carrying out this research. This type of research includes surveys and different kinds of fact-finding enquiries. Here the researcher does not have any control over the variables and the researcher can only report the facts--what has happened or what is happening. The main purpose of the

descriptive research is the description of the state of affairs as it exists at present (Kothari, 2004).

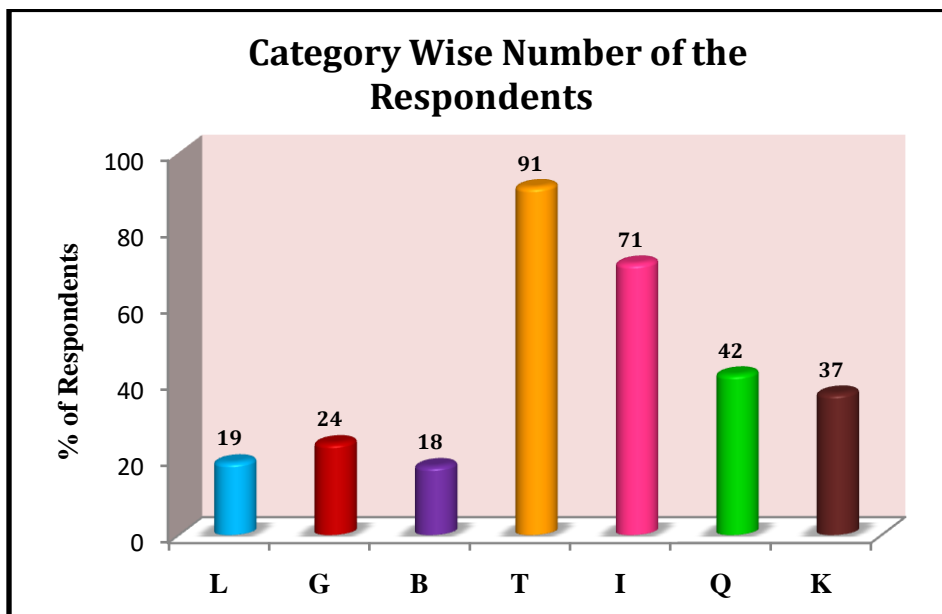
### viii. Sampling techniques have been decided

Here snow ball sampling method has been used because the target group is what is usually called a hard-to-reach group. In this case, existing subjects are asked to nominate other subjects known to them. In this way the sample size visibly tends to increase like a rolling snow ball. This type of sampling method is mainly used in social science. Snow ball sampling method is a kind of non-probability sampling because non-probability sampling is that sampling procedure which does not afford any basis for estimating the probability that each item in the population has of being included in the sample (Kothari, 2004). Here non-probability sampling remarkably suits the needs of the study.

### ix. Selecting Sample Size

Selecting sample size is very important. Here the sample sizes of different categories of gender and sexual minority people (details graphed in fig. no. 1.1) are shown below:

**Figure no. 1.1**



Source: Computed and Prepared by the Researcher<sup>1</sup>.

<sup>1</sup> For details please see Appendix 1.

Total sample size of this study is 302 among whom 19 are lesbians, 24 are gay, 18 are bisexual, 91 are transgender, 71 are intersex, 42 are queer and lastly 37 are kothis (details graphed in fig. no. 1.1). But eunuch people are not separated from this total sample size. Within this sample size of eunuch people are included and this will be discussed in the 4<sup>th</sup> chapter. Among the total sample size, percentage of the transgender people is the highest. Among the total sample size, the transgender people is the highest in ratio with 30.13% , followed by intersex people with 23.51%, queer people with 13.91%, kothi people with 12.26%, gay with 7.94%, lesbian with 6.29%, and lastly by bisexual with a mere 5.96%.

**x. Preparation of questionnaire has been done**

In this study different types of questionnaire play a very important role in collecting primary data. Different types of questionnaire have been used here, i.e. structured questionnaire, unstructured questionnaire etc.

**1.10.2 Second Phase ( Field- work ):**

The collection of different types of primary and secondary data has been included in the second phase of this research. In this case secondary data is unavailable. Mostly state level data has been collected from the census office in Kolkata. This research work mainly depends on primary data. This phase includes the following two stages:

- i. Collection of primary data
- ii. Collection of secondary data

**i. Collection of Primary Data:**

Primary data is raw data or first-hand data which has been collected by the researcher himself or herself in order to reach their research goal. It is original data collected for a specific research goal (Hox & Boeije, 2004). In this research primary data has been collected through the following methods:

**A. By observation:**

With the help of this method the researcher collects different facts and information by observing the current situation and what is happening at present without questioning the target groups of people. This method is mainly expensive and time consuming because the researcher has to go to the locations to observe them. In this study the

observation method plays a very important role in describing different cultures and life styles of the gender and sexual minority people (Kothari, 2004).

**B. Through personal Interview:**

Personal interviews also play a very important role in this study because there is a paucity of data available for the study of gender and sexual minority people. So, collecting primary data is very important to conduct the study and reach the goal. Here the investigator follows a rigid procedure and seeks answers to a set of pre-conceived questions through personal interviews. This method of collecting data is usually carried out in a structured way where output depends upon the ability of the interviewer to a large extent (Kothari, 2004). Preparing a structured questionnaire is of great importance in this case. In this research different types of personal interviews have been used for collecting information about the target group of the study. These types of interviews are as follows:

**a. One to one interview:**

This type of interview is mostly followed in this research to collect primary data through structured, semi structured or unstructured questionnaire depending on the interviewee and the topic of discussion and also the knowledge of the interviewee about the topic.

**b. Group interview:**

When a number of people assemble together for a discussion with the researcher and give their answers to the questions, it is called group interview and this type of interview plays a very important role in this study because it's been observed that eunuch people among the target groups of the study feel comfortable to face interview in a group interview method. Some eunuchs assemble together to give interview to a researcher of this research and uninhibitedly give answers to the structured, semi structured or unstructured questions of the researcher. This type of interview is generally used for analyzing the rituals and habits of eunuch people and the reasons behind their joining the profession of 'hijra'.

**c. Structured Interview:**

Structured interview is always conducted on the basis of predetermined questions (Kothari, 2004) and research work is mainly done by collecting data through this type



of interview because a number of people of the target group want to get the structured questions through their e-mail or whatsapp as they don't have time for long discussion or one to one discussion.

**d. Unstructured interview:**

This type of interview is uncontrolled and unguided and lacks predetermined questions (Kothari, 2004). This type of interview also plays a very useful role in this study because it is very helpful in building up different case studies and eliciting details of information on some particular topic. Here lots of case studies are used to describe the subjects' lifestyle, psychological status, mindset, etc. So this type of interview plays a very important role in this research.

**e. Repeated Interview:**

This type of interview is used when a person is interviewed several times with suitable intervals between the sessions to find out about their changes or developments. This process is also used in this study because changes in body and mind are a very common feature of the target group of the research, especially among transgender and transsexual people. That's why their developing physical and mental changes can be observed with the help of repeated interviews.

**C. Telephonic interview:**

Telephone plays a very important role in this research because members of the target group of the study in most cases do not want to disclose their identity and don't want to come out in front of others, either. So they are comfortable in the discussions conducted through conversations over telephone. They give the answers to different questions on telephone. Besides these, this method is cheaper and faster than other interviewing method and no field staff is required. Besides these, interviewers can explain their requirements more easily through this process (Kothari, 2004).

**D. Mailing questionnaire:**

In this research, most of the educated people within the target group want to get the questionnaire through email before facing one to one interview. They want to know beforehand the pattern of questions which they have to face in a one-to-one interview and in this context it is an important fact relating to this target group that they are not

exactly ready to answer every question concerning their personal life. So, a mailing questionnaire is a very important tool in collecting primary data for this research.

## **ii. Collection of Secondary Data:**

Secondary data is published data which can be reused by the researcher to solve the research problem of the study. Here secondary data is very limited. The secondary data has been collected from Janaganana Bhawan, Salt Lake, Kolkata as well as from the West Bengal Transgender Persons Development Board, Salt Lake.

### **1.10.3 Third Phase (Post – field work):**

Following the collection of primary and secondary data as well as information, this phase of the research work involves processing, analyzing, and summarizing the collected data in a tabular form, then analyzing the facts and converting the tabulated data into statements in the form of a report. The backwardness of the target groups, their social exclusion, reasons behind their marginalization from mainstream society have been discussed thoroughly and some remedial measures have been recommended for the development and socio-economic well-being of gender and sexual minority groups of people a model has been prepared for building a network which will become very beneficial to the people of gender and sexual minority group.

### **1.11 Significance of the Study:**

The overall features of gender and sexual minority people in the KMA area have been brought to public notice as a result of this study, specially their historical background, socio-economic conditions, reasons for their exclusion and marginalization from the mainstream of society, different government policies to generate an inclusive development for them and despite all of this their backwardness in our society have been highlighted by this research. Some remedial measures have been discussed here to pave the way for an inclusive society. Despite the non-availability of any secondary data for the KMA area, this research is a small attempt to show the main features and socio-economic conditions of the gender and sexual minority people in the KMA area.

### **1.12 Limitations of the Study:**

There are some specific limitations of this study:

- a. The sample size of this study includes only the respondents who wanted to give an interview and disclose their identity to the researcher. Those who didn't want to

disclose their identity are excluded from this study.

- b. There is no secondary data for the KMA area separately. That's why primary data is the main source and base of the study.
- c. The study is mainly based on primary data and that's why there is no way to fact-check the information provided by the respondents and the researcher has had to rely on such information.
- d. Among the group of gender and sexual minority people, those who are most found in the society and want to disclose their gender identity and sexual orientation to the researcher, are considered as the respondents of this study and these respondents belong to the categories of L, G, B, T, I, Q, K and Hijra or eunuch.

## **Chapter-II**

# **Historical Background**

## Chapter-II

### Historical Background

It can be safely stated that these terms and terminology are no new coinage and represent very old concepts. Those groups and communities that lie behind these terms and concepts were also present in the Vedic age. Of course the terminologies came later. And the presence of the people of other gender and their sexuality in the early historical period will also be discussed here.

Their presence in our country has a historical background. Their presence dates back to the Vedic period. Nowadays, transgender and hijra people fall into the category of third gender, according to the honorable Supreme Court of India. Their presence is mentioned in the Ramayana which was written by Valmiki. The other Indian epic, the Mahabharata also tells their story. This chapter deals with the historical background of the gender and sexual minority people, especially LGBTIQK and hijra or eunuch people.

#### **2.1. Non Binary People and Their Historical Background in India:**

##### **2.1.1 Transgender People and Their Presence in the Ramayana:**

In the Ramayana<sup>i</sup> it is written that when Rama<sup>ii</sup>, Sita<sup>iii</sup> and Lakshman<sup>iv</sup> went into exile for 14 years, all the people of Ayodhya<sup>v</sup> followed them. But after some time when Lord Rama, Sita and Lakshman reached the outer limit of Ajodhya, Lord Rama asked all their followers to go back home. He requested all men and women to go back home and they finally went into exile for 14 years. But after 14 years, when he returned to Ayodhya, he found that some people were waiting for them. When Lord Rama asked them the reason, they told him most respectfully that he had requested only the males and females to go back home. But they did not fall under those two categories, male and female. They said that they were neither male nor female. For that reason they had not moved from the place where Lord Rama gave his last speech before going to forest. Rama was immensely moved to see their devotion. Rama granted hijras the boon which gave them the power to confer blessings on people on different auspicious occasions like childbirth and wedding (Michelraj, 2015). It is thought that since then the hijras have enjoyed the power of blessing. From this story it is seen that the concept of non binary groups of people was known in the period of the Ramayana also. It is also seen that these groups formed a part of society.

### **2.1.2 In the Mahabharata:**

Now, it is time to talk about the other Indian epic, the Mahabharata<sup>vi</sup>. The concept of the other gender or non binary group of people is also present in this epic. One of the main characters of the Mahabharata is Arjun<sup>vii</sup> and the other character who is very important from our viewpoint is Shikhandi<sup>viii</sup>. The concept of the third gender or transgender or hijra is exemplified by these two important characters. Let us take up Arjun first.

#### **2.1.2.1 Arjun – As Brihannala:**

It is known very well that the five Pandava<sup>ix</sup> brothers with their wife Draupadi lived in various forests as exiles for 12 years. When they had completed the stipulated period of twelve years' exile, they decided to go and live incognito in the palace of king Birat<sup>x</sup> and here they stayed for one year under disguise. It was the period of their anonymity. At that time Arjun had taken the name Brihannala and then he wore bangles to hide the calloused look of his hands. He also wore earrings and braided his hair like a woman and transformed himself into a maid who managed to get employment with queen Sudeshna—king Birat's wife as a dance and music teacher for the young women in the royal palace. Transformed into a handsome hijra he entered the palace and it is said that Arjun lived his life as Brihannala for one year (Mohan, 2021).

From the above it is seen that the concept of Brihannala or hijra was known in the age of Mahabharata also. The aim here is not to recount the story of the Mahabharata. The only aim is to explain the fact that the concept of third gender or hijra people also existed in those days. Today Brihannala means hijra who earns their livelihood by dancing and singing and blessing newborn babies and blessing them. It is always said that a hijra has a power to give blessing which they achieved from Lord Rama. Nowadays too many of us have a faith in the blessings of a hijra. So it has been seen that non binary persons were there in the past as they are present in today's society also. Besides these, there are other groups of people who also love to wear feminine dresses and comb their hair like a woman. But those people are not actually women, they are male. They don't want to change their sex through surgery and they are very much satisfied with their body. People of this kind are called 'Kothi'. Some similarities are seen between Arjun and the 'Kothi-s'. But it is also true that singing and dancing on different auspicious occasions is the basic profession of hijra people and if we look at the age of the Mahabharata, we will find examples like that of Arjun as Brihannala.

Thus there are similarities between the two different ages, the past (the age of the Mahabharata) and the present (21st century).

So, it is true that the concept of non binary groups of people existed in the historic period also. This fact will be discussed thoroughly in the following chapters.

### **2.1.2.2 Shikhandi- an Example of Cross Dressing and Transsexuality:**

Shikhandi was another character of the Mahabharata who embodies the concept of transformation or reassignment of sex and gender which is not a new concept. The appropriate example of this concept is Shikhandi. Let us take a closer look at Shikhandi.

But in her next birth as a daughter of Drupad, she was brought up as a son and nobody could identify her as a female and then she got married as a male person to the daughter of Hiranyabarma<sup>xi</sup>. But she was unable to convert to a male bodied person. However, she later managed to exchange her body parts with Sthunakarna<sup>xii</sup> and finally became a male (Bhattecharjee, n.d.).

The story of Shikhandi or Amba touches upon a number of issues. From this story, we come to know that Shikhandi changed her body parts with Sthulakarna. So, changing of body parts or the concept of transformation was there. And in our own age we have Sex Reassignment Surgery or SRS. Many similarities are there between SRS and changing of body parts between Shikhandi and Sthulakarna. Then the transformation of Shikhandi from previous femininity to his later masculinity through the curse of Kuber has a similarity with transsexuality of the present day. The concept of cross dressing was also there. After birth, Shikhandi always wore male dresses and behaved like a male and nobody could identify him and nowadays this is called cross dressing. Those who love to wear feminine dresses instead of being male, are called 'Koti' and those who love to wear masculine dresses instead of being female, are called 'Butch'. From this discussion it is obvious that the concept of transgender, transsexual, cross dressing, Sex Reassignment Surgery were also known at that time. These are not new concepts. But the terminologies, i.e. transgender, transsexual, sex reassignment surgery etc. are newer than the concepts.

### **2.1.3 Presence of Non Binary People in Indian Mythology:**

It is very much true that there are a lot of evidences of the presence of non-binary people in the Indian mythology and these have been discussed in this chapter in minute details.

### 2.1.3.1 Mohini – Mythological Example of Male to Female Transformation:

‘Mohini’ is a very popular and known name in Mahabharata. She is the only female avatar of ‘Bishnu’ and it is a very good example of transformation of male to female.

- **Mohini and Samudra Manthan:**

The detail descriptions of Mohini is come to know from the Mahabharata where it is said that at the time of the Samudramanathan<sup>xiii</sup> Amrita<sup>xiv</sup> was produced by the churning of the ocean with the help of Devas<sup>xv</sup> and Asuras<sup>xvi</sup>. Then they were quarrelling for the possession of amrita, the nectar of immortality. Then Lord Bishnu intervened. He transformed himself into a very beautiful enchanting woman and took the pot of amrita from Asuras and distributed the amrita among Devas. The enchanting and lascivious form of Mohini, the only female avatar of Bishnu, turned the heads of the Asuras (Bhalla, 2007).

- **Mohini and Ash Demon:**

Mohini, the only female avatar of Lord Vishnu<sup>xvii</sup>, was described in the Bishnupuran<sup>xviii</sup> also. According to the book, ‘Siva to Shankara: decoding the Phallic Symbol’ written by Dr. Devdutt Pattanaik, Mohini was a lascivious and enchanting woman who enchanted Bhashmasura (Pattanaik, 2006). Actually Bhashmasura<sup>xix</sup> pleased lord Shiva by his strict penance and then Lord Shiva gave him the power by which he could turn anyone into ashes by touching their head. Now Bhashmasura was arrogant and wanted to use this power first on Lord Shiva. Then Shiva got scared and prayed Bishnu to save him. Bishnu turned himself into Mohini and went in front of Bhashmasura. Bhashmasura was absolutely charmed by and attracted to Mohini and he proposed her to marry her. She accepted his proposal, but she laid down the condition that he must follow and mimic the movements of her dance. Bhashmasura agreed and at the time of mimicry, he touched his own head and was turned into ashes. In this way Mohini destroyed the Ash Demon.

- **Mohini and Virochana:**

In the Ganesh Purana it is said that the Asura king Virochana<sup>xx</sup> was blessed with a magical crown by the Sun God ‘Surya<sup>xxi</sup>’, and this magical crown protected Virochana from all harm. Then Lord Visnu transformed himself into his female avatar ‘Mohini’ and enchanted the Asura king Virochana and stole his crown. Thus Virochana lost his protective crown and then Lord Vishnu killed him. The whole story is beautifully described in the book ‘The Man who



was a Woman and other Queer Tales from Hindu Lore' written by Devdutt Pattanaik (Pattanaik, 2012).

The aforesaid lore or myth describes beautifully the activity of Mohini, the female avatar or female form of Lord Vishnu. So, transformation of body parts or the whole body is very common in Hindu mythology also. So, in this way, we come to the conclusion that the concept of transgender and transsexual was also known in that remote era. It is narrated in many places that Mohini is not only the female form of Lord Vishnu, but also the revelation of the feminine nature of Vishnu. This fact is mentioned in the sixth chapter of the book "Splitting the Difference – Gender and Myth in Ancient Greece and India" (Doniger, 1999).

- **Born of Ayappa:**

According to the book 'India's Dances – Their History, Technique and Repertoire' written by Reginald Massey, when Shiva<sup>xxii</sup> heard from Narada<sup>xxiii</sup> that Lord Vishnu had transformed himself into Mohini to take the Amrita from the Asura-s, Shiva with Parvati<sup>xxiv</sup> went to Vishnu to see the Mohini form of Vishnu. Thus requested by Shiva, Vishnu transformed himself into his enchanting and lascivious form 'Mohini' and then Shiva could not control himself and ran after her to grab her hand. Shiva was full of lust and grabbed her hand. But Mohini eluded his grasp and ran away. At this moment Shiva's seed fell on earth and the Great Sastha or Ayappa<sup>xxv</sup> was born from Shiva's thigh (Massey, 2004).

The same thing is described beautifully in another book already mentioned, "Splitting the Difference – Gender and Myth in Ancient Greece and India" written by Wendy Doniger. According to these books, homosexual relations were also there in the pre historic era and the concept of Sex Reassignment Surgery or SRS was also known at that time. Actually here we see that Mohini didn't have a womb and for that reason, she couldn't conceive because Mohini was not a cisfemale. On the contrary, she was a transgender or transsexual female and that's why she didn't have a womb and that's why their (Shiva and Vishnu or Mohini) son Ayappa was born from Shiva's thigh. Ayappa is also called Harihara, 'Hari' means Lord Vishnu and 'Hara' means Lord Shiva (Doniger, 1999).

It is rightly said that 'Many Hindu myths involve either transvestism (dressing as someone of the other gender) or transsexuality (transformation into someone of the other sex). But when it comes to mythology at least, it is not always possible or desirable to draw a clean line splitting these two phenomena like the two sides of an androgyne' (Doniger, 1999).

- **Born of Aiyanaar:**

Another deity of Hinduism is Aiyanaar, whose birth is at once related to the union of two same gendered persons. This fact is described thoroughly in the book named ‘The Buddhist Visnu – Religious Transformations, Politics and Culture’ written by John Clifford Holt (Holt, 2004) and the other book is “Hinduism: An Alphabetical Guide” (Dalal, 2014). Actually it is said in different myths that after destroying the Ash demon (Bhashmasura), Lord Shiva wanted to marry the enchanting woman Mohini (the female form of Vishnu). She agreed and they got married. After their marriage, sexual action between the two same gendered persons occurred and Aiyanaar<sup>xxvi</sup> was born (Holt, 2004). Aiyanaar seems to have been worshipped in Srilanka (Holt, 2004). Here also the same sex love and same sex marriage and body or sex transformation were not unknown.

- **Nontak Demon and Mohini:**

In the Ramakien<sup>xxvii</sup> it is seen that Nontak, a demon, misused the divine weapon of Lord Shiva and then Vishnu transformed himself into ‘Mohini’ and attracted him and then attacked him. But after realising this fact Nontak alleged that Vishnu did a wrong thing because at first, he seduced Nontak and then attacked him. In reply Vishnu told him that in a later birth Nontak would be ten headed Ravana and that he himself would be born as Rama and then he would defeat Ravana (Pattanaik, 2012). This story shows that transformation was practiced by the deities also and the concept of transgender and transformation to opposite gender is not a new coinage or new concept.

- **Mohini in Indian Culture:**

“Mohini Attam is named after the seductress supreme of Hindu mythology who appears in several stories. But the original, far from being a mortal woman, was in fact the god Vishnu who had assumed feminine form...” (Massey, 2004). The book says that the dancing style of the enchanting and lascivious woman ‘Mohini’ is known all over the world as ‘Mohini Attam’. It is thought that it is a seductive dance form and for that reason it had been banned and the restrictions were not lifted until 1950.

- **Shiva and Vishnu:**

Vishnu and Lord Shiva are the two main deities of Hindu mythology and they are the creators of the whole world. But when Shiva saw the feminine avatar of Lord Visnu, Mohini, he lost

his divine poise and was irresistibly attracted by her. Shiva ran after her to hold her. But suddenly Lord Shiva came to his senses, became cool and he realised that Mohini was actually the feminine form of Lord Vishnu. According to the book “Splitting the Difference – Gender and Myth in Ancient Greece and India”, written by Wendy Doniger, this is the rare example of homosexual activity in Hindu Mythology (Doniger, 1999).

### **2.1.3.2 Ardhanarisvara: An Example of Gender Variance:**

Lord Shiva is also called ‘Ardhanarisvara’ because in the famous sculptural image of the same name, the right portion represents a full male bodied person and the left side represents the female body. This Ardhanarisvara sculpture represents a half male and half female icon. It is the representation of Lord Shiva with his consort Parvati (Parmeshwaranand, 2004). This ardhanarisvara sculpture may be defined in different manners in modern times. Masculinity and femininity-- both the characteristics are present in this sculpture. So, it may be called the tangible or figured representation of queer or transgender or intersex people. On the basis of this, therefore, it may be stated that the concept of non- binary or gender variance is present in our religion and among deities also. In this area of religion we don’t have any problem of untouchability and arrogance against this concept. But when it comes to the question of social acceptance, we can’t accept them. It is a very painful reality of our society.

### **2.1.3.3 Krishna and Araka:**

Another dangerous demon was Araka and he was very strong. His strength came from his chastity or purity. He never looked at any woman. For destroying him, Krishna transformed himself into a beautiful female and married him and made him break his vows of austerity and chastity. Then after three days, in a battle Krishna killed Araka and revealed himself to the other Gods. Knowing all the facts at the time of his death, Araka accused Krishna of cheating him. Then Krishna said that there were lots of people who were neither male nor female and whatever they told, good or bad, would come true. Their good words would be blessings and bad words a curse. For that reason Krishna as ‘Mohini’ is worshiped by the hijra-s (Tiwari, 2014).

### **2.1.3.4 Aravan and Krishna:**

Aravan is a small character in the Hindu epic Mahabharata. He is the son of Arjun, third Pandava, and the serpent princess Ulupi. To enable the Pandava-s win the Kurukshetra War, Aravan is requested to sacrifice himself. Aravan agrees, but declares that he wants to

experience conjugal joy before death. Then Krishna, to fulfill his desire, becomes a beautiful woman 'Mohini' and marries Aravan. The whole night they make love and the next day Aravan sacrifices himself in the war. Then Mohini embraces her widowhood. Here, the transformation of Krishna has a similarity with transgender and transsexual persons. For that reason Aravan is worshiped by transsexual people in Tamil Nadu. He is worshiped in the Koovagam temple in Villupuram district in Tamil Nadu and on the Chitrapournami Day every year transsexual people from all over India gather here and enact the scenes of the Mahabharata and all the transsexual people adopt widowhood (Somasundaram, 2009).

#### **2.1.3.5 Transformation of Shiva and Related Mythology:**

When Lord Shiva was attracted to 'Mohini', he ran after her to catch her hand. But when he came to his senses, he regained his composure and became ashamed. This is the rare incident of homosexuality in Hindu mythology according to the book 'Splitting the Difference- Gender and Myth in Ancient Greece and India'. This is an example of homosexuality because it is love between two males, Lord Shiva and Lord Vishnu. It may also be regarded as an example of love between a male and a transgender female person (Doniger, 1999). Here Lord Siva is a male and Mohini is a transgender female.

Another transformation of Lord Shiva is into female. According to the sixth chapter named 'Bisexual Transformation' of the book "Splitting the Difference- Gender and Myth in Ancient Greece and India", Shiva was transformed into a complete female, named 'Radha'. When Shiva begged the goddess Kali to rescue the earth from the demons, Kali agreed to become Krishna incarnate and she gave the permission to Shiva to become incarnate as Radha and as Shiva further wished, Radha's husband became impotent after their marriage (Doniger, 1999). Here Shiva totally changed his gender. So, this is the example of transsexuality or transsexual male. It can be stated also that Lord Shiva plays a 'queer' character also because on the one hand, he is the husband of Parvati, a complete woman or an example of cisfemale, and on the other hand, Shiva is also attracted to Mohini, a feminine form of Lord Vishnu. Mohini represents the character of transfemale in reality. It is also an example of bisexuality.

#### **2.1.3.6 Ila:**

Ila is an important mythological character of Hinduism. He is the son of king Kardama. One day prince Ila went hunting and lots of animals were killed by him. But his lust and greed

didn't go away. Roaming in the wild, Ila entered into a forest where Lord Shiva was making love to Parvati. In that forest everything was female including different trees and woods. Indeed, to please Parvati Lord Shiva had taken the form of a female at the time of making love and for removing her shame; Lord Shiva transformed all the thing of the forest into female. When Ila and his followers entered to the forest, they became female and then Ila prayed to Lord Shiva for regaining her masculinity. But Shiva didn't give him this boon. Then Ila appealed to Parvati and was given a boon that his gender would change monthly. Ila would become a female for one month and the next month he would become male. This is a circular way. But Ila would always forget his or her previous memory and believe in his present situation (Doniger, 1999). Ila, as a beautiful woman, married Budha (the god of the planet Mercury). Budha knew all the facts about Ila, but he only took into account the female form of Ila. In the Ramayana version, Ila bears Budha as a son. But in the Mahabharata, Ila is described as both the father and mother of the child. After the birth of the child the curse was gone from him and he changed totally to male and he became the father of several children with his wife (Vanita, 2000a). So it becomes clear that the concept of gender reassignment is an old concept, not a new concept.

#### **2.1.3.7 Samba- an Example of Cross Dressing:**

Samba was the son of Krishna. Samba is worshiped by the transgenders, transsexuals and hijra-s because he dressed up like a female and it is the example of cross dressing. According to the Mausala Parva<sup>xxviii</sup> of the Mahabharata, 36 years after the end of the Kurukshetra War, Dwaraka was peaceful. Then some famous sages, namely, Vishwamitra, Durvasa, Vashista, Narada and other Rishis came to Dwaraka to meet Krishna. Then Samba wore a saree, dressed like a female and met the rishis and the friends of Samba were also there. Then pretending to be a pregnant woman and making fun of the venerable rishis Samba asked them jokingly to tell them the gender of the baby in her womb. The rishis were angry and cursed Samba that he would give birth to an iron mace or club which would destroy the whole race of the Yadavas (Sanyal & Maity, 2018).

#### **2.1.3.8 Bahuchara Mata – an Example of Transwoman in India:**

Bahuchara Mata is one of the main goddesses of hijra and transgender people (Nanda, 1984). There is a mythological story of Bahuchara Mata and there are rituals of castration among the hijra community. A young and very beautiful lady, Bahuchara, was travelling through a forest in Gujarat. Suddenly a gang of thieves attacked the lady. The acute fear of rape

spurred her to cut off her breasts with her dagger and she offered her breasts to the thieves instead of her virginity. Following this heart touching sacrifice of hers she was venerated as a goddess (Selvaraj, 2018).

Another important story about Bahuchara Mata was that king Jetho prayed to her for a son. Then she appeared in front of him in his dream and told him to cut off his male genitals and wear female clothes, worship her and become her servant. King Jetho did all this. Across the centuries Bahuchara Mata is being worshiped by the hijra community and for that reason castration is the most important ritual in becoming a hijra. It is said that every impotent man was ordered by Bahuchara Mata to cut off their genitals and become her worshippers. But those who didn't follow the command were cursed by her to become impotent in seven years (Abbott, 2001).

#### **2.1.3.9 Nirvana- A Popular Rituals among Hijra Community in India:**

The castration process or cutting off of male genital parts or the process of emasculation among hijras is called 'Nirvana' (Kalra, 2012). This process is performed by different untrained persons, who don't have any training. But they totally believe in divine power. Without castration, hijras cannot enter their profession. They believe that after castration they attain 'Nirvana' and through nirvana divinity and also the power of bestowing blessings and they become free from any desire. Hijras think of nirvana as a rebirth and after this process they want to identify themselves as 'she' instead of 'he'. After nirvana, they become 'not men' from 'men'.

In spite of the clear connection of hijra people with Hinduism, they also have an important connection with Islam which plays an important role in their culture and history because the founders of the seven houses of the hijra community are Muslims and the present guru of those seven houses is also a Muslim (Nanda, 1984). For that reason, they comply with the rituals of both the religions, Hinduism and Islam.

#### **2.1.3.10 Agni in Rig Veda- An Example of Same Sex Love:**

Agni means 'fire'. It is the most useful thing in our life. On the other hand, Agni is the second most important deity in the Rig Veda<sup>xxix</sup>, after Indra. In the Rig Veda, Agni is described as the "child of two births" or "the child of two mothers" or sometimes Agni is described as "the child of three mothers". According to Ruth Vanita in her "Introduction Ancient Indian

Materials”, the two mothers of Agni are Heaven and Earth and sometimes the two fire sticks by rubbing which fire is generated are supposed to be the two mothers of Agni. Generally it is thought that the gender of the two fire sticks is feminine and those two sticks are called ‘arani’ in Sanskrit. Rubbing these two sticks generates fire and it is said that it is the symbol of the creation of life from two females (Vanita, 2000b). It is an example of same sex love or homosexuality at the time of Rig Veda. From this it can be seen that homosexuality and the concept of ‘lesbian’ existed in those times also.

#### **2.1.4 Presence of Third Gender in Vedic Period:**

We think that LGBTIQ and Hijra, are new coinages of our modern society. But it is not correct. These social categories were present in the Vedic age also. At that time there were three types of gender, i.e. Pums-prakriti or male, Stri- prakriti or female and Tritiya-prakriti or the third sex. People of the third sex are also called ‘neuter gender’. The people of the neuter gender are also called ‘napumsaka’. According to the book “Tritiya- Prakriti: People of the Third Sex- Understanding Homosexuality, Transgender Identity and Intersex Conditions through Hinduism”, written by Amara Das Wilhelm, napumsaka-s are of five types, children, the elderly, the impotent, the celibate and the third sex. The terms, sandha, kliba, panda, nisarga etc, are included in the category of the third sex. The term ‘sandha’ describes those men who behave like a woman (Wilhelm, 2003) and this has much similarity with the concept of the ‘koti’, a popular term today. ‘Panda’ is an another Sanskrit term, which denotes the men who are impotent with women. ‘Nisarga’ defines that type of men who are born without proper genitals. Nisarga is very similar to the concept of ‘intersex’ people. In the Vedic period, there was the term ‘Svairini’, which denotes homosexual women or Lesbians who earn their own livelihood, refuse heterosexual marriage and they get married to other women. Then comes the term ‘Kliba’, which refers to homosexual men or Gays. Bisexual people are also defined as ‘Kami’ (Wilhelm, 2003).

In this way, we can say that the Vedic period also is not an exceptional case. Those non-binary groups of people or gender variant people were also present at that time.

#### **2.1.5 Position of Hijra People in Mughal Period in India:**

At the time of the Mughal period<sup>xxx</sup>, hijras held a very prestigious position. Actually they were very close to the kings and queens. Because of their trustworthiness and loyalty, they

became the guardians of the harem<sup>xxxii</sup> and also advisors and administrators in different places. They gave useful and pragmatic advice to the kings. They had free access to all places in the palace. They took a very important part in different religious activities and sometimes they became the guardians of Mecca and Madina. Besides, they handled huge amounts of money (Michelraj, 2015). So, they were very close to kings and queens. From this it is amply evident that hijras and other gender variant people were not only present in society but also often stayed very close to the centres of power in Mughal India.

### **2.1.6 Hijra and Third Gender People in the British Period in India:**

Time passes so quickly. The situation of every people changes through time. In this way, hijras do not present an exceptional case. Their position and social respect began to decrease after the Mughal period in India as the British period started unfolding. In this period the people of the third gender lost their former respectable position in society. They were often accused of various crimes in different ways and in different places. The Mughal Empire was destroyed by the British raj in the year 1857. In the British period, hijras were criminalized in different ways and they were considered a separate tribe or caste in different parts of India. Then in 1871 the Criminal Tribes Act was passed. In this act all kinds of hijras were included and it was stated that it was a punishable offence to kidnap a child and castrate them illegally and dress like a woman in public places (Criminal Tribes Act, 1871). The punishment for these activities was up to two years in jail or fine or both (Michelraj, 2015). This was the beginning of the end of the position hitherto enjoyed by at least some of the hijras in society.

The aforesaid discussions and descriptions are all about India. But the concept of LGBTIQ population applies to the whole world, and not only India. This concept is present everywhere in the world. Now this aspect will be discussed at some length.

## **2.2 Beyond India:**

The LGBTIQ and hijra people exist not only in India and Indian myths, but all over the world. The terms may be new, but the concept is very old. Their existence is very prominent in Greek, Roman, Egyptian and other mythologies. It is not true that these kinds of people didn't exist in the historic period. But it is very much true that they are not usually given due attention in our society. They are always discriminated against in different places in different times.



### **2.2.1 Africa- Presence of Non-Binary Deities and Human Being:**

In Africa, especially in Egypt, there was a gender divided society. Eunuchs were also present there. There are numerous myths about gender variant or non binary deities and groups of people. Some mythological evidence and some incidents are being discussed below.

#### **2.2.1.1 Tale of Two Brothers:**

There is a famous story in Egypt which is called the ‘Tale of the Two Brothers’. In this story, Bata, one of the brothers, cuts off his penis and says to his wife ‘I am a woman just like you’. This sentence has a very important message. At that time the concept of castration was also there and it means that Bata actually was a transgender female. The other Coptic tale of transformation of women to men in Egypt is about Hilaria. She was actually a woman, but she always wore dresses like a male. So, it can be said that this was cross dressing to which she was used and later she decided to change her body and reduced her breasts and stopped her menstruation. Thus Hilaria totally changed herself into a boy and gained acceptance among her fellow monks (Wilfong, 2007). This story is about a transgender male and reduction of breasts and stopping the menstruation cycle are the processes of hormone therapy which is part of Sex Reassignment Surgery today.

#### **2.2.1.2 Goddess Mut:**

Dual-sexed hermaphrodite people were also present in ancient Egypt. Some stories of androgynous deities are heard. Among them, the goddess Mut was very important. She falls in the third gender category because of the presence of her penis (El-Shamy, 2005).

#### **2.2.1.3 Confusion about the gender of dead persons:**

According to the book ‘The Egyptian World’, there was great confusion or ambiguity about the gender of dead persons at the time of burial. But it is very difficult to say whether it was the result of carelessness or those were the cases of transgender (Wilfong, 2007).

#### **2.2.1.4 Goddesses Mut and Sekhmet:**

According to the II part (Ancient transgender dynamics and the sacred sphere) of the book ‘Transantiquity – Cross-Dressing and Transgender Dynamics in the Ancient World’ cross-dressing was also practiced by the Pharaohs. Besides these, in Egypt the belief prevailed that weapons were clearly male and for that reason when some goddess had weapons and

displayed warlike behaviour, they were depicted as inherently androgynous. Sekhmet was such a goddess. She has weapon, warlike behaviour with lion's head and erect penis (Simini, 2017). From the story of the goddesses Mut and Sekhmet, it is come to know that their characteristics have similarities with the modern concept of transgender, transsexuality, queer and androgynous people.

#### **2.2.1.5 Musaka and Jok:**

Musaka is a very important deity among the people of Baganda. Musaka is a rainbow serpent who gives abundance and the deity was worshiped by transgender priests, who were born as female, but they all passed through gender metamorphism and acquired male attire and behaviour. So, the priests of deity Musaka actually were transgender males. Another important deity is Jok. According to the book "Queering Creole Spiritual Traditions – Lesbian, Gay, Bisexual and Transgender Participation in African – Inspired Traditions In The Americas", Jok is a gynandrous deity, who is worshiped by androgynous male or male to female persons, who are called Jo apele. Jo apele group of people thought that they were the children of the deity Jok (Conner & Sparks, 2013b).

#### **2.2.1.6 Pharaoh Hatshepsut:**

Another example of transvestism or cross- dressing is Pharaoh Hatshepsut<sup>xxxii</sup> who (1473-1458 BCE) was the fifth pharaoh of the Eighteenth Dynasty of Egypt. She chose to wear male dresses or uniforms and she always wished to present herself as a man. In her transformation phase Hatshepsut was portrayed with a feminine body, short kilt, a false beard, head covering and feminine breast. Thus it is seen that two types of gendered features, i.e. masculine and feminine, were carried by her. This persuades me to think that Hatshepsut was a person, whose features have more similarities with androgynous or queer people (Simini, 2017).

#### **2.2.1.7 The Androgynous Deities:**

According to the Egyptian religion, some male gods had female powers and some female gods had male powers. Numerous deities were there who possessed both male and female characteristics. For example, the god Amon, who was the father of the father and the mother of the mother; the god Aten<sup>xxxiii</sup> was both the father and mother of all things that he made; the god Atum<sup>xxxiv</sup> was called 'He-She'. The goddess Esna had a nature which is described as two-third male and one-third female. All of them were androgynous deities.

Anat was another goddess with androgynous character due to her violent temper. She was a hunter and a cruel warrior whereas hunting and warfare were mainly male practices. She was worshiped as the goddess of war and protector of pharaoh. She was the daughter of god Ra and consort of the god Seth. She protected all from dangerous animals and was described as the 'big cow of Seth' (Simini, 2017).

It has been already seen that numerous deities in West Africa fall in the categories of transgender or androgynous. Among them, Lisa- Maron<sup>xxxv</sup>, Shango<sup>xxxvi</sup> and Yansan<sup>xxxvii</sup> are the most important (Feinberg, 2006c).

Faro is also an androgynous deity and it is believed that he or she splits himself or herself into male – female twins and becomes the parents of the human race. The colour of Faro is white. Another androgynous or transgender deity is Nzambi or Zambi in Bakongo and he or she is believed to be the creator of all lives (Conner & Sparks, 2013b).

#### **2.2.1.8 Mugawe:**

Besides these, many examples of transvestites or cross dressings in religions are scattered in different places. Mugawe is an important example of transvestites. He is a very powerful religious leader of Meru. He wears female clothes and adopts women's hairstyle and sometimes he marries a man (Feinberg, 2006c).

#### **2.2.1.9 Kwayama- Example of Transvestite:**

Besides all of these, the people of the Kwayama tribe generally wear female dresses, do different women's work and marry a man and become his secondary wives. But the other wives of the man are female. This is also a typical and important example of cross dressing or transvestites and one of the best examples of transgender female (Conner & Sparks, 2013b). Faro is worshiped in the Bambara region of West Africa.

#### **2.2.1.10 Evidence of Same Sex Love:**

Besides these, numerous examples are there which serve as evidence of same sex love. In Egypt there was a tomb and its archaeological depictions showed the intimacy of two male bodied persons and the other depictions were of man woman relationships. The intimacy between two males (Niankhkhnun and Khnumhotep) reveals same sex love in ancient Egypt. But there is confusion about their relationship. These two men could be friends, brothers or in

a same sex relationship (Reeder, 2000). So, it may be concluded that same sex love or homosexuality was also there at that time. It is not a new trend.

#### **2.2.1.11 The Story of NneUko Uma Awa:**

This is another story of the practice of cross dressing in Africa. This is the story of NneUko Uma Awa. This is the story of a woman, NneUko Uma Awa, who lived in a village called Akanu, Ohafia and she dressed like a man and married two women. Thus it is an important example of a transgender male and for that reason, she must be called 'He'. He joined various men's societies and got the chance to dance with males in the Ohafia warrior's dance. NneUko was commonly known in his community as a 'dike nwami', which means in Ohafiawas 'heroine', 'warrior woman' and 'brave woman' (McCall, 2000).

#### **2.2.1.12 Vodun Ceremony in Togo:**

GertChesi writes beautifully about the Vodun Ceremony in Togo and transvestites or cross dressers in 'Africa's Secret Power', a photographic journal (1980). He describes the Vodun ceremony in minute details, which was celebrated in Glidji, a small village in Togo, situated near the border of Benin. Here, lots of people gathered to attend the ceremony. Among those people GertChesi noticed two persons who were physically male, but they dressed and knotted their hair like women. They were also dancing in the ceremony. They were transvestites and one of them was Gilbert and according to GertChesi, Gilbert was the worshipper of MamiWata<sup>xxxviii</sup>. Generally the priests of MamiWata were females, but a few men also were worshippers of the god. Those men were called mamissas. Gilbert was one of them. They wore short brocade skirts, white spectacles and their bare upper body and legs were painted with longitudinal patterns of stripes in kaolinein (Conner & Sparks, 2013b). From this fact it becomes clear that cross dressing is a part of some rituals. But it is not confined to Africa only. It has spread all over the world.

#### **2.2.1.13 Practice of Homosexuality:**

Homosexuality was practised from time immemorial in different countries and continents. Africa is one of them where members the Nama tribe of the Khoisan people have long been habituated to homosexuality. This relationship was traditionally formalized in early time by a ceremony where water and coffee was shared by the couple and this bonding was described as "water bond". Here male- male relationship or transgender relationships were seen among the Nuba people of Nilotic Sudan. The term 'Nuba' is used for the transgender partners which

include domere (Tira), korre (Nyima), tubele (Mesakin), londo (Korongo) and tomere (Heiban, Otoro). According to S.F. Nadel, transgender wife and transgender husband lived together and did all household work (Conner & Sparks, 2013a).

## **2.2.2 Greece- Presence of Non-Binary Deities and Human Being:**

### **2.2.2.1 Presence of Bisexual Greek God:**

According to the book ‘Gay Witchcraft- Empowering The Tribe’, the Greek gods Apollo<sup>xxxix</sup> (March, 2014), Hermes, Zeus<sup>xl</sup> and Hercules were bisexual in nature. They all had male and female lovers (Penczak, 2003).

### **2.2.2.2 Dionysos- an Transgender Greek God:**

In the sixteenth chapter of the book ‘The Transgender Studies Reader’ it is stated that the Greek god Dionysos always dressed like a woman. It is another instance of the concept of transgender. So it is obvious that the concept of transgender was present in the Greek mythology also (Feinberg, 2006a).

### **2.2.2.3 Achilles- Geek Example of Cross- Dressing:**

The myths of Achilles are famous in Greece (March, 2014). His story has a similarity to transvestism or cross- dressing in the modern context. Achilles<sup>xli</sup> was a male. But his mother tried to keep him out of the Trojan War<sup>xlii</sup> and for that reason she dressed him as a female and he wasn’t able to join the battle and later he became the lover of the Trojan Prince Troilus<sup>xliii</sup> and later, his comrade Patroclus<sup>xliv</sup>.

### **2.2.2.4 Sappho:**

Today maximum people use the word ‘Lesbian’ and think that it is a new coinage. But the source of this word is very ancient. ‘Lesbian’ is a Greek word and it comes from the Greek island of Lesbos. Lesbos was the home of Sappho, a lesbian poet and musician of Greece and priestess to the goddess Aphrodite<sup>xlv</sup> (March, 2014).

### **2.2.2.5 The Greek Amazons- an Example of Bisexuality:**

In the book ‘gay Witchcraft – Empowering the Tribe’, it is said that women of a special who were known as the Greek Amazons<sup>xlvi</sup>, were great warriors. And considering different historical accounts and archaeological evidences, it may be said that they were bisexual, not

exclusively lesbian. They lived with women and rejected heterosexual marriage and they were skilled in war and hunting. It was said that they worshiped the independent goddess Artemis or Diana with Britomartis and the goddess Athena with her companion Pallas. Those companions of the goddesses were not male, they were also goddesses and they were supposed to be the female lovers or consorts of those goddesses (March, 2014). For that reason, it should be said that same sex love or homosexuality was also known in ancient Greece and this union was blessed by the gods and goddesses.

#### **2.2.2.6 Syrian monks- Similar Meaning to Eunuch:**

Here is another story of Syrian monks who often castrated themselves and were glad to call themselves “saris”—a term which is similar in meaning to “eunuchs”. Those monks thought that after castrating themselves they became sexless like angels and they wanted to be described as eunuchs of the Lord and they wanted to spend their life totally avoiding any contact with the opposite sex. These things are vividly described in the book “Corpus Syriacum Johnsoni”, written by Dale Albert Johnson. Another important character of this book is Anastasia, a female bodied person at the timing of the writing of the story. But she always wanted to become a male and she spent her life as a male. She was considered a eunuch both spiritually and physically. She was living her life as an angel and she was called “the Patrician” (Johnson, 2014). From both the stories it is seen that castration was practiced in ancient Greece and the concepts of eunuch and transgender were also there.

#### **2.2.2.7 Galli priests- an Example of Transvestite and Transgender:**

In ancient Greece and Rome (204 BCE) there was Galli priests who wore feminine clothes and wanted to present themselves as women and they often castrated themselves. These are the features which characterise transgenders even now. They wore heavy makeup and they had long bleached hair. These Galli priests worshiped Cybelle and Attis (Lancellotti, 2002).

#### **2.2.3 Rome:**

The Roman Ceasars were also fond of wearing female clothes and Elagabalus who became the emperor of Rome in 218 A.D., was a bisexual by nature. According to Edward Gifford, war hameh were a kind of female who wore their hair, pierced their noses in male fashion and married women and fought in battles with men. This kind of female was called transvestite (Feinberg, 2006a).

### **2.2.4 America:**

#### **2.2.4.1 Berdache:**

The concepts of transsexuality, sex change, transgender were also present in America. The early Europeans used the term 'Berdache' for Native Americans, who didn't conform to conventional gender and sexual norms. This term was also used for persons who were cross dressers. This term was again used to denote those persons who were anatomically different, who basically didn't conform to the European definitions of male and female. It may be called two- spirit (Brien, 2008). So, here it has been also found that non-binary people was also present among Native Americans also.

#### **2.2.4.2 Story of Wewha:**

Another example of berdache was Wewha. He was born as a man and he was a famous Zuni. All people described him as "she is a man". Wewha was sent to Washington, D.C. for six months to meet President Grover Cleveland and other politicians. But they did not recognize him or her berdache (Feinberg, 2006a).

#### **2.2.4.3 Practice of Cross-Dressing:**

Transgender people are called by different names, i.e. transvestites, transsexuals, cross-dressers, bull- daggers, stone- butches, androgynies, drag king, drag queens, diesel dykes or berdache etc. All these are European colonialist terms. Besides these, cross- dressing was practised in the fourth century A.D. also. This was practiced worldwide. There is the example of Cappadocia in Turkey. According to the book "Transgender Studies Reader", the Bishop of Amasia strongly protested against the custom of the celebration of New Year's Day among men because on that day men usually wore female dresses with long robes, girdles, slippers and wigs (Feinberg, 2006a). So it can be stated that cross dressers, koti, butch were also present at that time.

#### **2.2.4.4 Story of Robert Shurtleff:**

During the American Revolutionary War<sup>xlviii</sup> (1775-1783) some women joined the Continental Army to serve the nation by hiding their female self identity. They cut their hair and wore male dresses and nobody could recognize them as women. At that time, routine medical checkup was not required for joining the army. So they could hide their identity easily and they always changed their names. Sampson was the most important and well known example

of this kind of activity. She had joined the army under the name Robert Shurtleff. Many women at that time served their country as soldiers or male nurses, etc. Some of these names are well known, such as Frances Clalin (Jack Williams), Sarah Pritchard (Samuel “Sammy” Blalock) and Sarah Edmonds (Franklin “Flint” Thompson). All these three women served in the army and wore male dresses and behaved like men and sometimes they indulged in extreme male behavior, i.e. smoking, gambling, drinking, swearing etc. And they could not be identified as females during the war (Cronn-Mills, 2015a). These are examples of cross dressing, also.

### **2.2.5 France:**

Another example of cross dressing is Joan of Arc. She joined the French Army and cut her hair like a boy and wore male clothes (Cronn-Mills, 2015b). Actually hers is a very sad story of brutality. Joan of Arc was burnt at the stake by the Catholic Church because of her male attire in the year 1431. Actually she was a woman, but she always dressed like a man. For that reason she got the brutal punishment at the age of 19 (Feinberg, 2006b).

Queen Christina<sup>xlviii</sup> of Sweden was another example. When she abdicated the throne in the year 1654, she put on men’s clothes and renamed herself as ‘Count Dohna’. It is said that she was an intersex person and she had both masculine and feminine physical characteristics. Henry III<sup>xlix</sup> of France also dressed like Amazons and ordered his representatives to dress like him (Feinberg, 2006b). These are also different example and evidences of cross-dressing and presence of non-binary people.

### **2.2.6 Other Examples:**

Gender variant, transgender and cross dressers are very visible today worldwide; but their presence was very prominent in the early days also. An archaeologists of the Czech Republic discovered five thousand year old remains of a person who perhaps was a gender variant or cross dresser (Cronn-Mills, 2015b).

According to the book “The Transgender Studies Reader”, cross genders and cross dressings are the heart of ancient Noh drama and Kabuki theatre. The concept of transgender persists today in different festivals, i.e. Mummer’s Festival, Mardi Gras and Halloween (Feinberg, 2006a).



From the aforesaid discussion, it can be understood very easily that the existence of these kinds of people who don't fall under the category of gender binary groups in our society is very natural and eternal. They've existed in our society since time immemorial. But even today we can't accept them very easily. They are discriminated against very frequently in our society. Different examples of androgynous deities have been already mentioned above who are worshiped by these people. But this is very unfortunate that people are unable to accept those non binary groups of people from the core of the heart. This is the hypocrisy of the society. People are not capable of giving any love and respect to them and they can't stand with them or by them. In this situation, India is not a separate case. In India numerous androgynous or transgender deities are worshiped. But it is very sad that transgender, homosexual and androgynous people don't enjoy any social respect, don't possess any social standing. They are always neglected in our society and in our country. This work is intended to study these groups of people very minutely. In this first chapter the study gets under way. The presence of the people of various gender variant groups in the world since the historic period has been discussed at some length and in minute details. Their socio-economic conditions, the hostile discrimination suffered by them in our societies, their problems, different movements for their justification, lacunae of our social systems and different remedial measures will be discussed thoroughly in the subsequent chapters.

---

<sup>i</sup> Ramayana is the one of the most well known and popular Indian epics and was written by Valmiki in the Vedic period, near about 1500 BC. Ramayana is older than the Mahabharata. Ramayana thoroughly describes the whole picture of ancient India.

<sup>ii</sup> Rama is the main character of the Ramayana and according to Hindu mythology, Rama is the human form of Lord Visnu and in Ramayana Ram is the eldest son of Dasharatha, king of the Ayodhya. The name of the mother of Ram is Koushalya.

<sup>iii</sup> Sita is the daughter of Bhumi and an adopted daughter of the king Dharmadhaj, the king of Mithila. Sita is also called 'Janaki' as a daughter of the king Janaka and 'Baidehi' as the daughter of the king of Bideha. The other identity of Sita is that she is the wife of Rama.

<sup>iv</sup> Laksman is the son of Dasharatha and his middle wife Sumitra. Lakshman and Shatrughna are the sons of the same mother, Sumitra. They are younger than Ram only by two days. The wife of Lakshman is Urmila, the youngest daughter of king Janak. Lakshman always follows his elder brother Ram and he goes into exile with Ram and Sita.

<sup>v</sup> In northern India, there was a river named Saraju and on the bank of the river Saraju, there was a region named 'Koshal' and in the northern part of Koshal, was the capital of the race 'Ikshaku'. The name of the capital was 'Ayodhya'. Ayodhya was a very beautiful place and due to its geographical location, it was impossible to attack it and that's why the name of this place was 'Ayodhya'. The king of Ayodhya was Dasharatha.

<sup>vi</sup> Mahabharata is the most famous Indian epic and the other is Ramayana. Mahabharata was written in Sanskrit by Vyaasa Deva and this epic describes the Kurukhetra war between Pandava and Kourava.

<sup>vii</sup> Arjun is the third Pandava and he was the son of Kunti and Pandu. But actually, Arjun was conceived in the womb of Kunti with the blessings of Debraj Indra. Actually he was the son of Kunti and Indra. Having observed strict austerity Kunti and Pandu, got Arjun as their son from Indra.

<sup>viii</sup> Shikhandi was the daughter of Drupada, the king of Panchal. But during her previous birth, she was the daughter of the king of Kashi and she was the fiancé of Salwapati (According to the book “Mahabharater Charitaboli”, written by Shri Sukhamaya Bhattacharya.

<sup>ix</sup> Pandava refers mainly to the five sons of Pandu and his two wives, Kunti and Madri.. They were Yudhishtir, Bhim, Arjun, Nakul and Sahadeb.

<sup>x</sup> Birat was the king of the kingdom of Matsya and here, the Pandavas decided to spend the last year of their exile.

<sup>xi</sup> Hiranyabarma was the king of Darshana and the father in law of Shikhandi. As a male, Shikhandi married the daughter of Hiranyabarma.

<sup>xii</sup> According to Mahabharata, Sthunakarna was a wealthy Yaksha and the owner of the lonely forest where Shikhandi went to sacrifice her life and Sthunakarna exchanged his body parts with Shikhandi to make her a male bodied person.

<sup>xiii</sup> Samudramanathan means the churning of oceans. It was done by the Devas and Asuras for producing Amrita with the help of the mountain Mandara and the snake Basuki acting as the churning rope. Details of this story are found in the episode of SamudraManthan in the Mahabharata.

<sup>xiv</sup> Amrita was described as nectar of immortality in the episode of Samudra Manthan in the Mahabharata and this was produced by the churning of oceans.

<sup>xv</sup> Deva was described in the different Hindu epics and Puranas as a heavenly or divine being or deity in Hinduism. Deva is masculine term and the feminine term of Deva is Devi.

<sup>xvi</sup> Asura was mentioned in the different epics and puranas. They were the enemies of and always fought the Devas.

<sup>xvii</sup> Vishnu is one of the principal deities (Brahma, Vishnu and Maheshwara) of Hinduism. He is the supreme power in Vaishnavism. It is said that he lives in Baikuntha and his main weapon is the Sudarshana Chakra.

<sup>xviii</sup> The Vishnu Purana is one of the eighteen Mahapuranas of Hinduism.

<sup>xix</sup> Bhashmasura was a devotee of Lord Shiva, who is described in detail in the Vishnu Purana and he got a power from Shiva to turn anyone into ash by touching one's head.

<sup>xx</sup> According to Indian Mythology, Virochana was the grandson of Hiranyakashipu, the son of Prahlad and the father of Bali

<sup>xxi</sup> ‘Surya’ is a Sanskrit word and it means the ‘Sun’. ‘Surya’ is described as a solar deity in Hinduism.

<sup>xxii</sup> Shiva is one of the main deities in Hinduism and he is called by different names, like Shankara, Mahadeva, Shambhu, etc. and his wife is Parvati. The union of Shiva and his consort Parvati combined in one body is called Ardhanarishvara.

<sup>xxiii</sup> Narada or Narada Muni is a divine sage and famous in Hindu traditions as a travelling musician and storyteller who carries news and enlightening wisdom and he is one of the mind- created children of Brahma.

<sup>xxiv</sup> Parvati is the wife of Lord Shiva and she is the daughter of the mountain king Himalaya and his queen Mena.

<sup>xxv</sup> Ayappa is a Hindu deity, who is popularly known as Sastha or Dharmasastha or Manikandan. He is mainly popular in the South Indian state, Kerala. He is considered to be the son of Lord Shiva and Mohini (Vishnu). His symbols are Bell, Bow and Arrow. In some images, it has been shown that he is riding a tigress and in some

other images he is seen seated upon an elephant. The most popular Ayappan shrine is situated at Sabarimala, Kerala.

<sup>xxvi</sup> Aiyandar is a Hindu deity and is worshiped in South India and Srilanka mainly. But he is primarily worshiped in Tamil Nadu. He is a guardian deity and is depicted as a warrior, either on foot or mounted on a white horse or elephant. He always holds in his hand a sceptre or whip. Sometimes he is called 'a king of demons'.

<sup>xxvii</sup> Ramakien is Thailand's national epic and it describes the glory of Rama and it is the most important epic of Thailand.

<sup>xxviii</sup> MausalaParva is the sixteenth of the eighteen books of the Indian epic Mahabharata. This parva describes the demise of Krishna, destruction of Dwarka, the death of Balaram and the civil war that decimated the whole race of the Yadavas.

<sup>xxix</sup> Veda is the sacred text in Hinduism. There are four Vedas, i.e. Rig Veda, Shyam Veda, Yajur Veda and Atharva Veda. Of these, Rig Veda is the oldest one. It has been transmitted orally. For that reason, the other name of the Veda is 'Shruti'.

<sup>xxx</sup> The Mughal Empire was founded by Babar in India in the year 1526 and the empire was destroyed in the year 1857 by the British Raj. The last emperor of the Mughal dynasty was Bahadur Shah. Akbar was perhaps the greatest emperor of the Mughal period.

<sup>xxxi</sup> Harem refers to the inner part of the palace of an Islamic ruler where his wives lived. This is the most noticeable and important example of polygamy. In the Mughal period, Hijras were the guardians or protectors of the harems of the different Mughal emperors.

<sup>xxxii</sup> Hatshepsut was the daughter and only child of Thutmose I and her husband was Thutmose II and Hatshepsut and Thutmose II had a daughter named Neferure. And after Thutmose III, Hatshepsut took over the royal title and became the fifth pharaoh of the Eighteenth Dynasty of Egypt.

<sup>xxxiii</sup> Aten was the Egyptian god in ancient Egypt and Aten was a sun god.

<sup>xxxiv</sup> Atum is a primeval cosmic god and as a Sun god, he is the creator of all things. In his human form he represents the king of Egypt who wears the Double Crown of Egypt.

<sup>xxxv</sup> Lisa- Maron is worshiped in West Africa and the body of Lisa- Maron is constituted with both male and female body parts

<sup>xxxvi</sup> Shango is a transgender deity, who is worshiped in West Africa and she is described as either male or female

<sup>xxxvii</sup> Yansan is also an androgynous or transvestite deity who is dressed in both the male and female patterns and is worshiped by mainly the Shamans of Brazil. According to the Cambridge Dictionary, Shamans are those persons in certain religions who are thought to have special powers to control or influence good and evil spirits, making it possible for them to discover the cause of illness, bad luck, etc.

<sup>xxxviii</sup> Mamiwata is worshipped in Africa mainly and in some regions of America also. MamiWata is a water deity or water spirit and is usually female, but sometimes male, too. The worshippers of the deity are mainly female. But some transvestites are also the worshipper of the deity.

<sup>xxxix</sup> Apollo is one of the twelve great Olympian gods and figures in Greek and Roman myths. He is the patron of music and the arts and he is the leader of the Muses also. He was the god of prophecy and divination.

<sup>xl</sup> Zeus is an ancient Greek deity. He is known to all as a deity of thunder, lightning, rain and winds. His traditional weapon is the thunderbolt. Zeus is identical with the Roman god Jupiter (Source: Britannica.com/topic/zeus).

<sup>xli</sup> In Greek mythology, Achilles or Achilleus was a hero of the Trojan War, the greatest of all the Greek warriors, and the central character of Homer's Iliad. He was the son of the Nereid Thetis and Peleus, king of Phthia.

<sup>xlii</sup> In Greek mythology, the Trojan War was waged against the city of Troy by the Achaeans after Paris of Troy took Helen from her husband Menelaus, king of Sparta. The war is one of the most important events in Greek mythology.

<sup>xliii</sup> In Greek myths Troilus was a young prince who was one of the sons of King Priam and Hecuba and Troilus was murdered by Achilles.

<sup>xliv</sup> Patroclus and Achilles grew up together and became close friends. Patroclus accompanied Achilles to the Trojan War. He was slain by the Trojan commander Hector.

<sup>xlv</sup> Aphrodite is one of the twelve great Olympian deities and she was the most famous Greek goddess of erotic love and sexual attraction and the giver of beauty also. It is said that she was the daughter of Zeus and Dione. But according to the Hesiod, she rose from the foam of the sea where Uranus' sex organ had fallen after his mutilation by Cronus. Cronus is the son of Uranus and Gaia.

<sup>xlvi</sup> The Amazons were a mythical race of female warriors who maintained their lives by hunting and they were very fond of war. They were mainly located in the east or north- eastern part of Greece. There they lived absolutely far from men. They didn't believe in heterosexual marriage and they generally rejected this type of marriage. They only looked after their daughters and this race became popular in the seventh century BC. It is supposed that the name "Amazon" was derived from their customs, the removal of breast ('maza' means breast and 'Amazon' means 'breastless'). It was said that they removed their right breast to draw bows during the time of battle and their left breast was used to suckle their daughter.

<sup>xlvii</sup> The American Revolutionary War (April 19, 1775- September 3, 1783), was also known as the Revolutionary War or the American War of Independence. This war was initiated by the delegates from thirteen American colonies of British America in Congress against Great Britain and her colonial rule.

<sup>xlviii</sup> Christina was the Queen of Sweden from the year 1632 to 1654. She succeeded her father Gustavus Adolphus and began to rule the Swedish Empire at the age of 19.

<sup>xlix</sup> Henry III was a king of France from 1573 to 1575.

## **Chapter-III**

# **Body, Mind, Nature and Transformation**

## Chapter- III

### Body, Mind, Nature and Transformation

Sex and gender are very much related to body and mind. The concepts of sex and gender are totally independent concepts. These concepts have their own definitions and there are also exceptions to these definitions. Perhaps there are really no rules and exceptions because human beings are not made for rules, rather rules are made for human beings. It is very much true that no two people in the world are identical. There are lots of differences between them. Thus it is clear that in this chapter, gender, gender identity, sex, sexual orientation, gender expression and all other terminologies related to gender identity and sexual orientation will be discussed in detail. Different classifications among gender and sexual minority people are also to be discussed in this chapter.

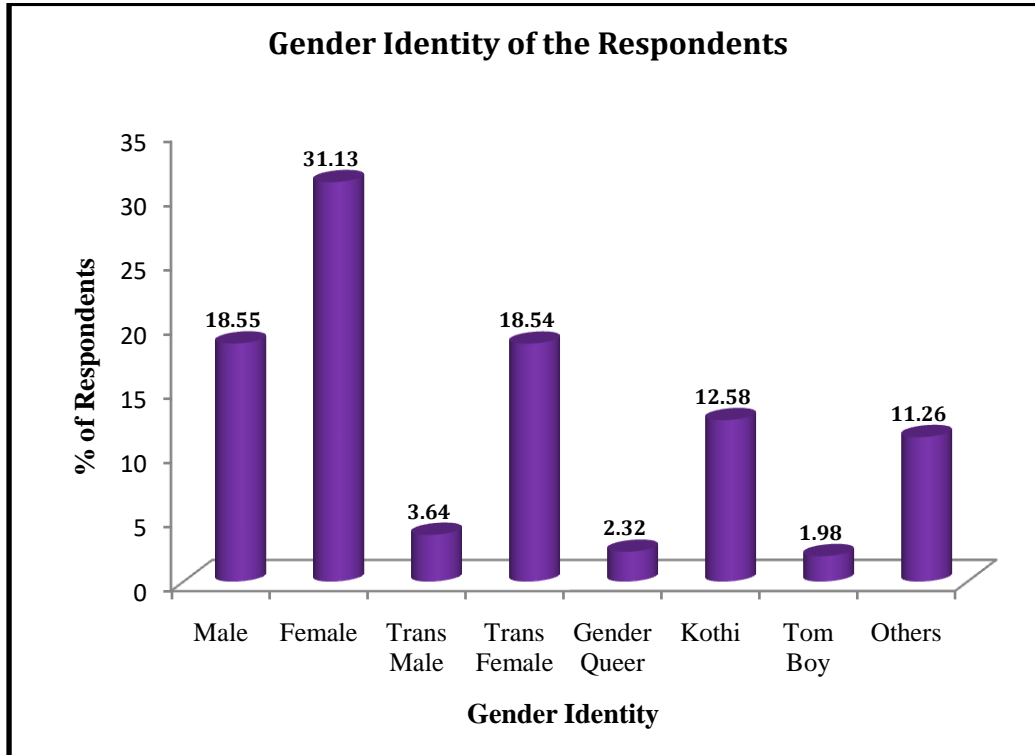
#### 3.1 Gender and Gender Identity:

The internal sense of being male, female or other is called one's gender. Actually, gender is a socially constructed role and in day to day life, everyone practices their gender. Gender is the structure of social relations that centre on the reproductive arena and the set of practices that bring reproductive distinctions between bodies into social processes (Connell, 2009). On the other hand, one's sex depends on their biological organs, specially the genital parts, formation of the chromosomes, activities of the hormones, etc. But one's gender totally depends on and is inextricable from their minds. The term gender is very closely related to the phrase 'gender identity'. Gender identity is a person's intrinsic sense of self as male, female or as an alternate gender (Sanyal & Majumder, 2016). In maximum cases gender identity matches one's assigned sex at birth. These people are called cisgender whose gender identity matches their assigned sex at birth and those people whose gender identity does not match their assigned sex at birth are called transgender (Barz & Owen, 2015). In the word 'Cisgender' 'cis' is a Latin prefix which means 'on the same side'. This prefix is used for those persons whose gender identity matches their sex at birth. In the word 'transgender' 'trans' is a Latin prefix which means 'across or over' and this prefix is used for those persons whose internal sense of self or gender identity does not match their birth sex. They are called transgender (Barz & Owen, 2015).

These category people fall into different gender identities. The study involves 302 respondents with 18.55% male, 31.13% female, 3.64% trans male, 18.54% trans female,

2.32% gender queer, 12.58% kothi, 1.98% tom boy and others with 11.26% (details graphed in fig. 3.1).

**Figure no. 3.1**

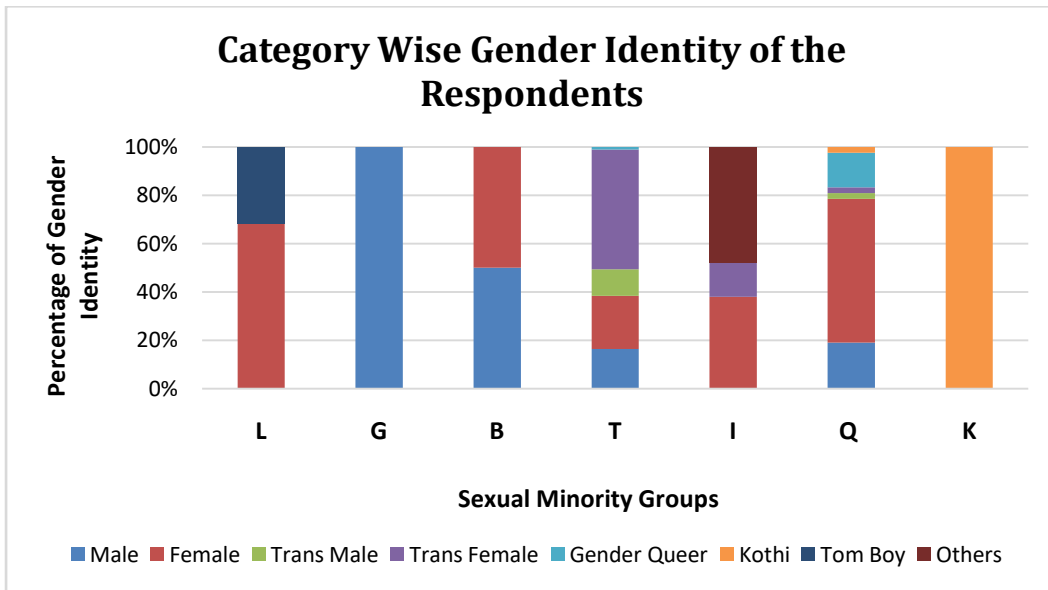


Source: Computed and Prepared by the Researcher<sup>1</sup>.

Among the total 'L' category respondents and which are 19, there are 68.42% female and 31.58% tom boy. The male is the sole category with 100% population among total 24 'G' category respondents. The 'B' category respondents are 18 and that come with equal percentage (50-50) of both male and female gender identity. The 'T' category respondents are 91 and that come with 16.48% male, 21.98% female, 10.98% trans male, 49.46% trans female and 1.1% gender queer. The total 'I' category respondents are 71 and that come with 38.03% female gender identity, 14.08% trans female and others with 47.89%. The 'Q' category respondents are 42 and that come with 19.04% male, 59.53% female, 2.38% trans male, 2.38% trans female, 14.29% gender queer and 2.38% kothi. The 'K' respondents are 37 which are only kothi people with 100% population (details graphed in fig. 3.2).

<sup>1</sup> For details please see Appendix 1.

Figure no. 3.2

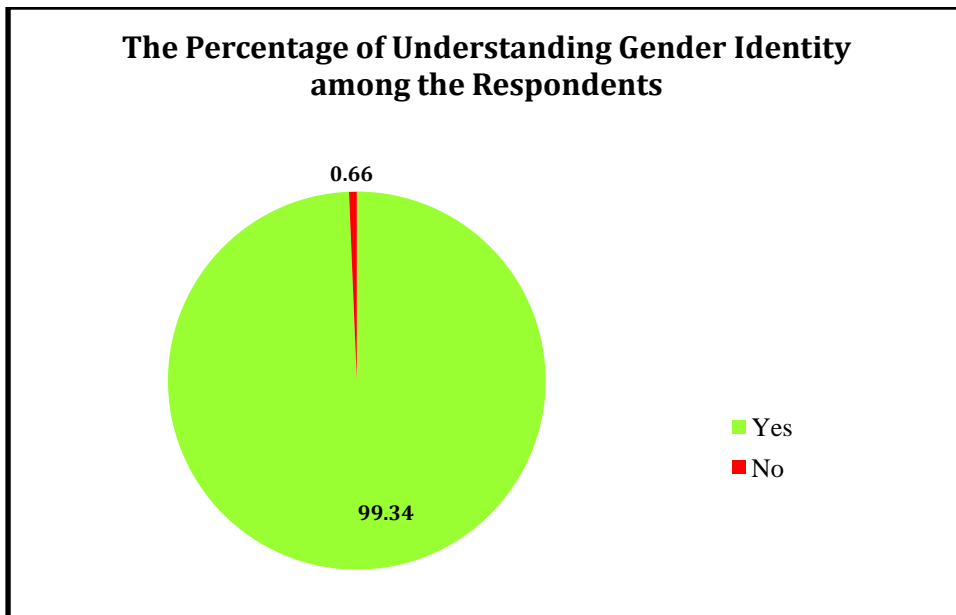


Source: Computed and Prepared by the Researcher<sup>2</sup>.

### 3.1.1 Understanding Gender Identity:

Among the total respondents (N=302) 99.34% understand their gender identity and the rest 0.66% are gender fluid people who are confused about their gender identity (details graphed in fig. 3.3).

Figure no. 3.3



Source: Computed and Prepared by the Researcher<sup>3</sup>.

<sup>2</sup> For details please see Appendix 1.

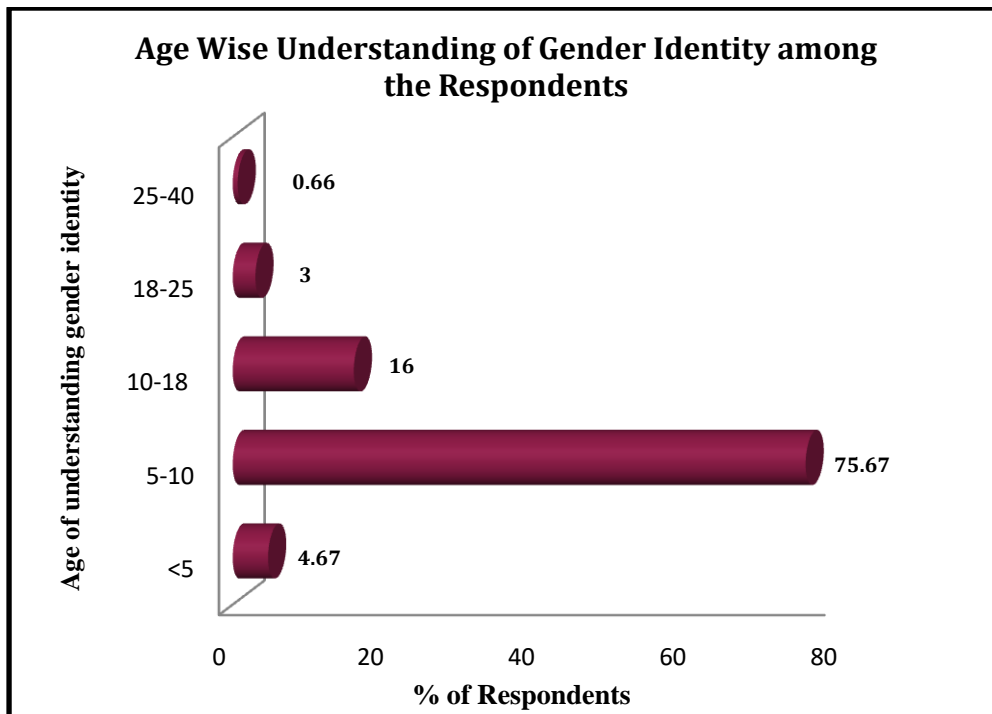
<sup>3</sup> For details please see Appendix 1.



### 3.1.2 Age of understanding Gender Identity:

The gender minority people, especially T, I, Q and K category people, become aware of their gender identity at different ages. Among the total respondents who understand their gender identity, 4.67% understand their gender identity within 5 years of age, 75.67% understand within 5-10 years, 16% understand within 10-18 years, 3% understand within 18-25 years and the rest 0.66% understand within 25-40 years (details graphed in fig. 3.4). From the study, it is observant that the majority of respondents do understand their gender identity within 5-10 years of age.

**Figure no. 3.4**



Source: Computed and Prepared by the Researcher<sup>4</sup>.

### 3.2 Sex and Assigned Sex at Birth:

On the other hand, the definition of sex is also very important. “Sex” refers to the biological and physiological characteristics that define men and women (Barz & Owen, 2015). Actually sex depends on biology and physiology and gender totally depends on the mind.

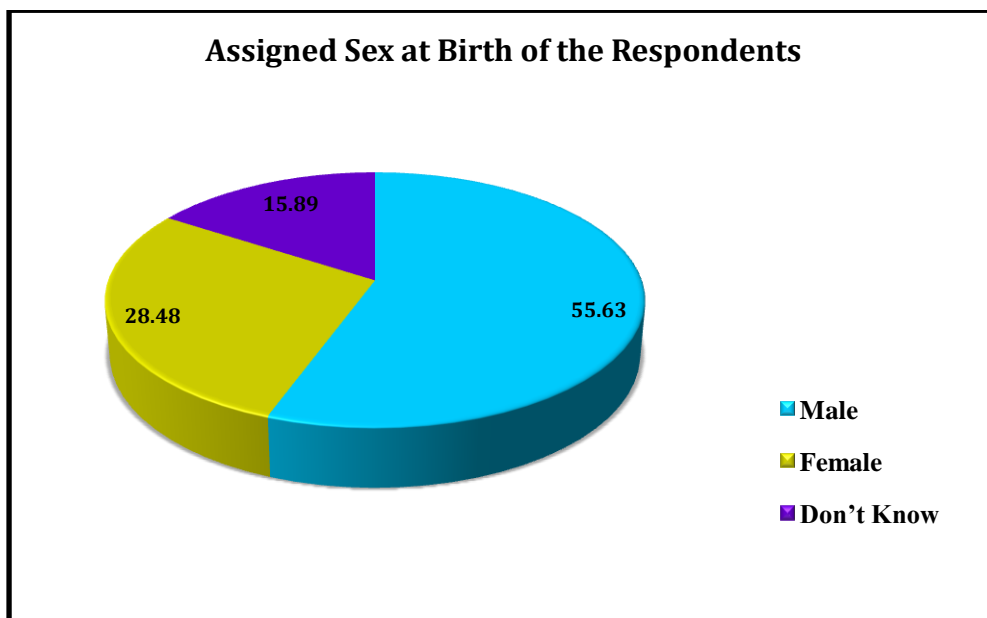
<sup>4</sup> For details please see Appendix 1.

### 3.2.1 Gender and Sex Assignment at Birth:

Gender assignment and sex assignment are crucial factors for all human beings because gender plays a decisive role in child birth with most families wanting a baby boy or baby girl. Nobody wants a child who has any problem in external genitalia or an intersex child. When a child is born, the doctor examines it. Mainly they look at the external sex organs, i.e. the genitals of the baby and accordingly determine its gender as male or female and this is called gender assignment and this assigned gender is recorded in the birth certificate of the baby (Barz & Owen, 2015). So, it is seen that gender assignment at the time of birth is dependent on the external genitalia. But this should not be done. This process is not correct. The external and internal sex organs cannot confirm one's gender. Sometimes gender and sex match each other and sometimes they don't.

Among the total respondents (N=302), 55.63% people are assigned male sex by birth and 28.48% people are assigned female sex by birth. The rest 15.89% people don't know their assigned sex; a majority of this 15.89% are handed over to the hijra people by their parents. Hence they never come to know their assigned birth sex (details graphed in fig. 3.5).

**Figure no. 3.5**



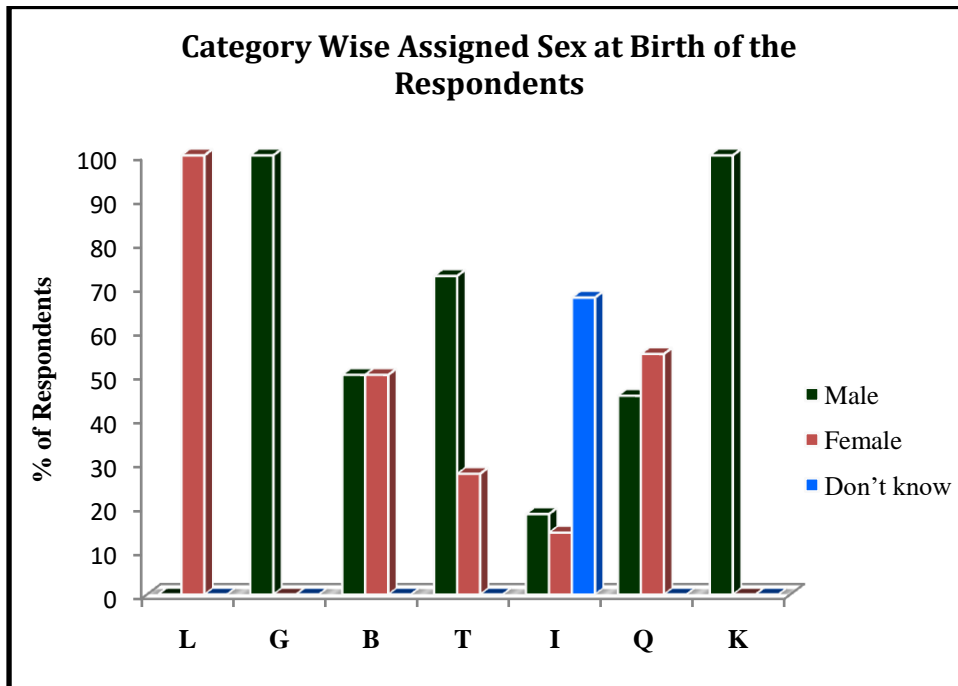
Source: Computed and Prepared by the Researcher<sup>5</sup>.

<sup>5</sup> For details please see Appendix 1.

### 3.2.2 Assigned Sex at Birth of the Respondents:

The 'L' category respondents are all assigned as female sex by birth with 100% population. Likewise, the 'G' category respondents are all assigned as male sex by birth with 100% population. The 'B' category respondents are equally assigned into male and female sex with 50% each. The 'T' category respondents are assigned into 72.53% male sex and 27.47% female sex. Among the 'I' category respondents, there are 18.31% male assigned sex, 14.08% female assigned sex and the rest 67.61% fall into don't know category. The 'Q' category respondents are assigned into 45.24% male sex and 54.76% female sex. Lastly the 'K' category respondents are all assigned as male sex with 100% population (details graphed in fig. 3.6).

**Figure no. 3.6**



Source: Computed and Prepared by the Researcher<sup>6</sup>.

### 3.3 Gender Expression:

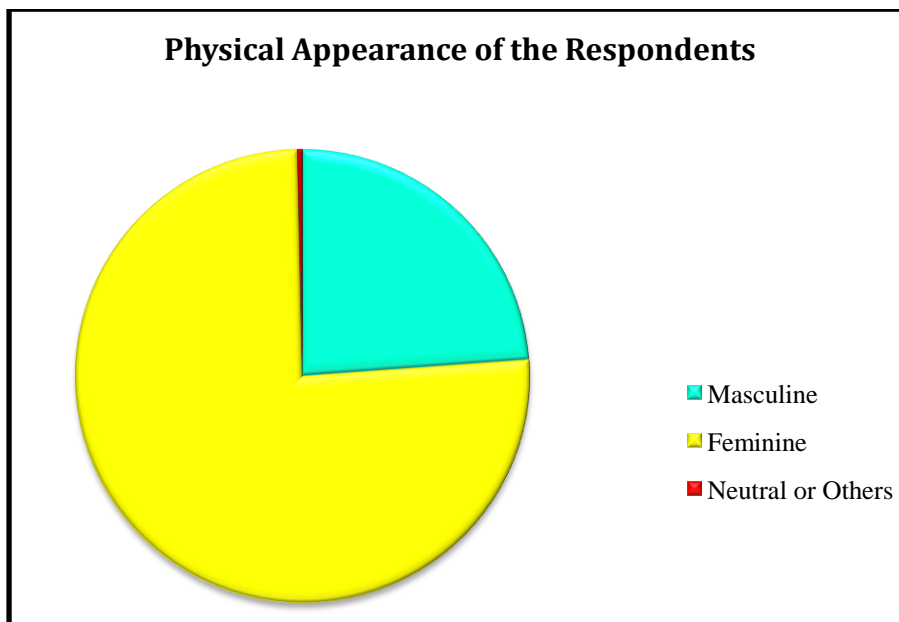
Besides these, the other important phrase is gender expression which signifies the way one expresses one's gender identity; this way of expression is called gender expression. Gender expression refers to one's role behavior as a girl or boy (Becker et al., 2017). According to Barz and Owen, in their famous book "Our trans loved ones", gender expression is the way in

<sup>6</sup> For details please see Appendix 1.

which people communicate or express themselves in front of others. One's hairstyle, clothing, speech pattern, bearing, mannerisms and other outward presentations also represent their gender expression (Barz & Owen, 2015). Generally it is always seen that one's gender identity matches their gender expression. But one's sex assigned at birth does not always match one's gender identity and gender expression. And these differences gave birth to two concepts, i.e. cisgender and transgender. Gender expression and gender identity are mostly labeled as masculine and feminine. But in some cases these classifications are not always valid. The definition of cisgender has been given above. But when gender identity does not match the assigned gender at birth or when a person's gender perception changes naturally with upbringing or owing to different influences, such persons are called transgender and these people always feel uncomfortable and at odds with their birth gender.

Among the total respondents (N=302), 23.85% do appear masculine and 75.83% do appear feminine. The other 0.33% are neither masculine nor feminine (details graphed in fig. 3.7).

**Figure no. 3.7**



Source: Computed and Prepared by the Researcher<sup>7</sup>.

### 3.4 Sexual Orientation:

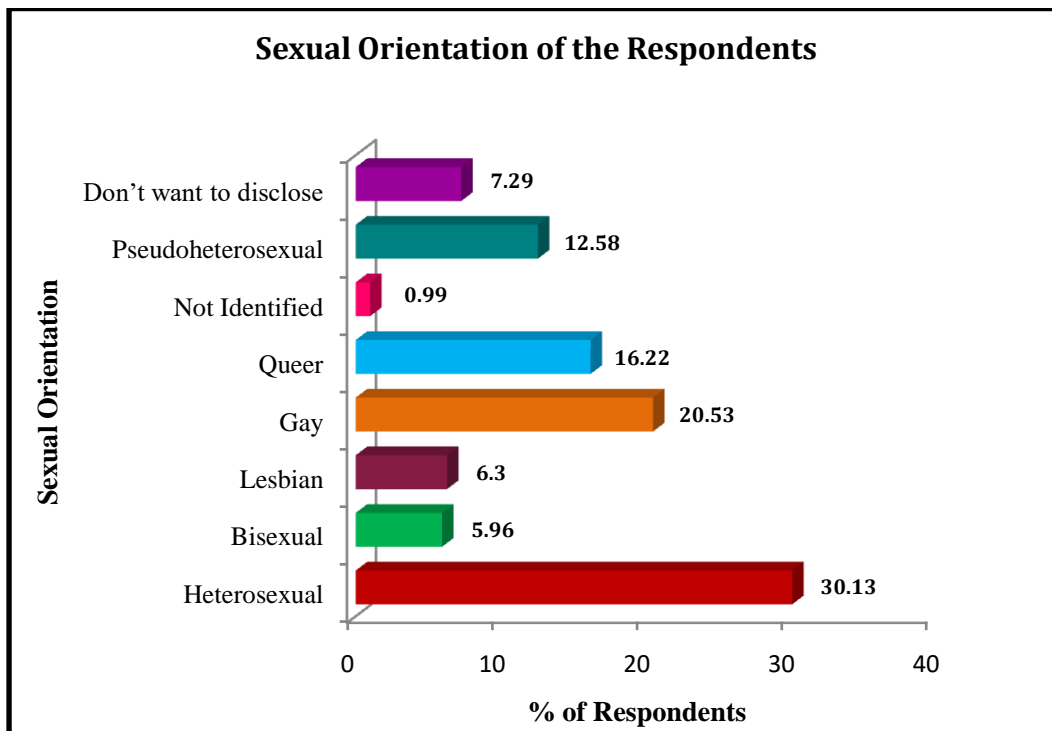
Having explained the different terms concerning gender and sex, we now discuss sexual attraction. Actually sexual attraction does not depend on one's gender and gender identity.

<sup>7</sup> For details please see Appendix 1.

Gender identity is not related to sexual orientation. It will not be fair if it is thought that there is only one way in which sexual attraction operates, namely, male attracts female and female attracts male. Gender identity and sexual orientation--these two factors are totally different from each other. When a child gets older, they feel some physical, mental, emotional, spiritual attraction towards other people and this kind of attraction is called sexual orientation (Barz & Owen, 2015). A biologically female person, whose gender identity and gender expression is masculine, may attract a male person and he may define himself as a gay person. It is very much possible. So transgender people can also be identified as gay, lesbian and bisexual. It is proved that gender identity, gender expression and sexual orientation are totally different from one another and all are independent and distinct.

Among the total respondents (N=302), 30.13% population define their sexual orientation as heterosexual, followed by 5.96% as bisexual, 6.3% as lesbian, 20.53% as gay, 16.22% as queer, 12.58% as pseudo heterosexual. Among the remaining respondents, 0.99% population are not sure about their sexual orientation and 7.29% don't want to disclose it (details graphed in fig. 3.8).

**Figure no. 3.8**



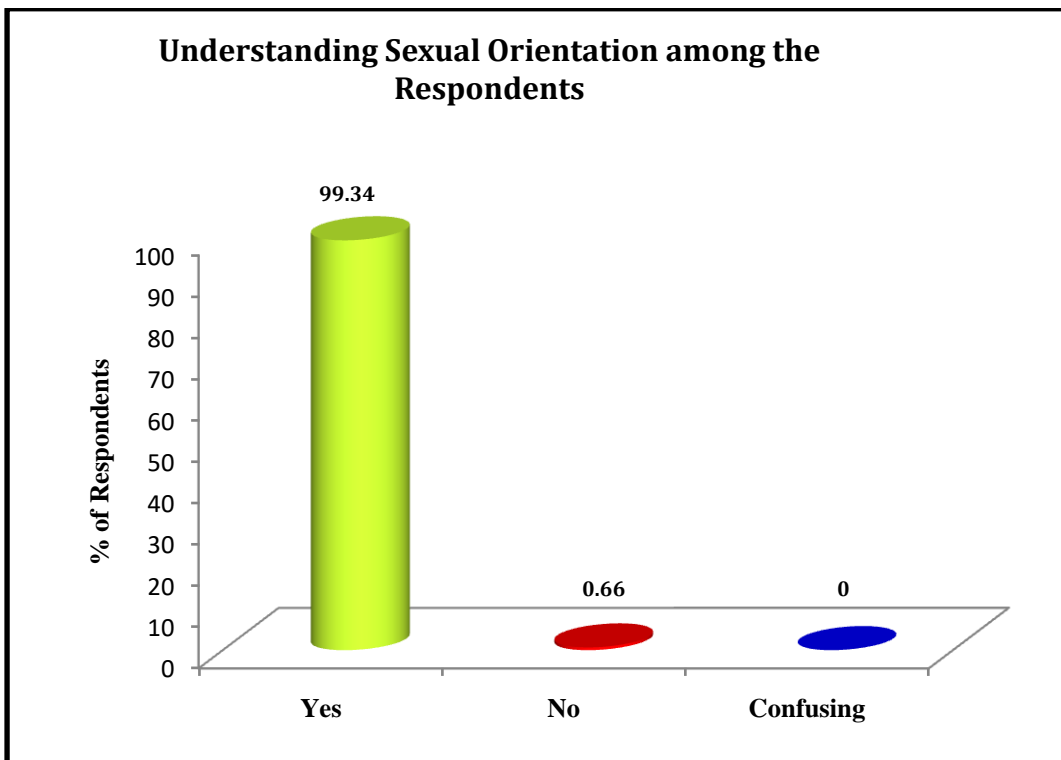
Source: Computed and Prepared by the Researcher<sup>8</sup>.

<sup>8</sup> For details please see Appendix 1.

### 3.4.1 Understanding Sexual Orientation:

After a certain age everyone can understand his or her sexual orientation. But not everyone can understand it, there are very few people who may not understand their sexual orientation properly and they are actually confused about it. Among the total respondents (N=302), 99.34% populations do understand their sexual orientation whereas 0.66% do not understand so (details graphed in fig. 3.9).

**Figure no. 3.9**

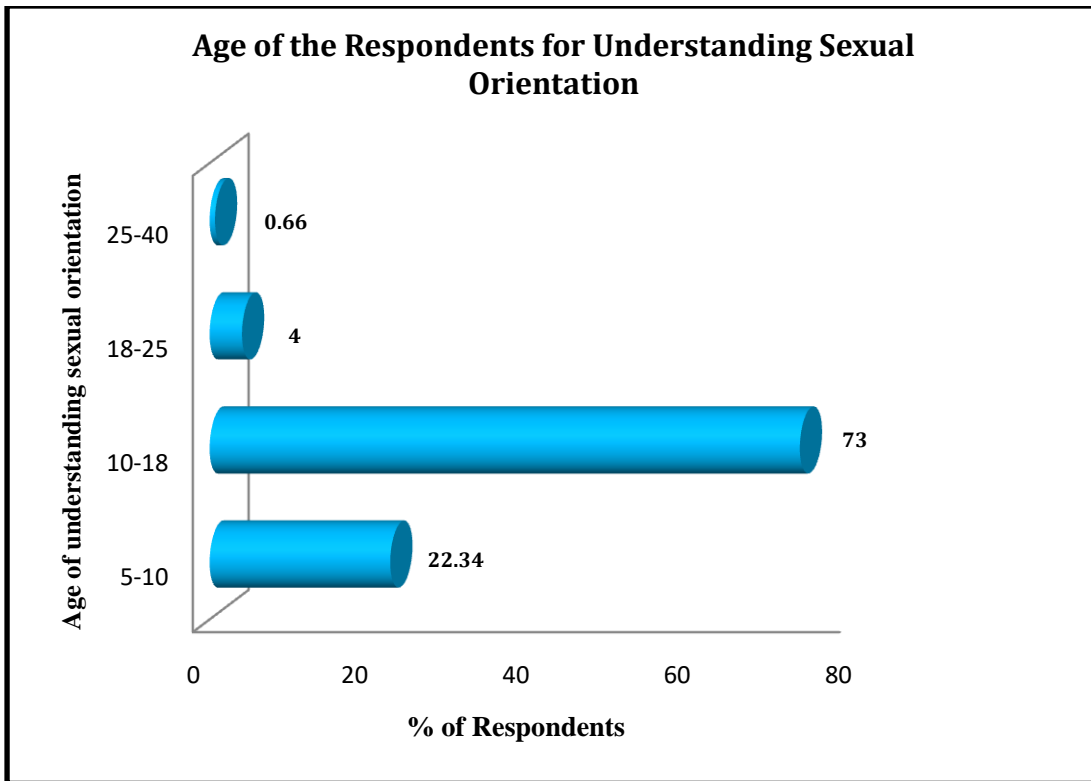


Source: Computed and Prepared by the Researcher<sup>9</sup>.

### 3.4.2 Age of Understanding Sexual Orientation:

Not everyone realizes their sexual orientation at the same age, but different people realize their sexual orientation at different times. Among the total respondents who understand their sexual orientation, different people realize it at different ages. Among the total 300 respondents, 22.34% respondents understand their sexual orientation within 5-10 years of age. The majority 73% realize it within 10-18 years of age. Only 4% become aware of their sexual orientation within 18-25 years and lastly, a mere 0.66% become so at 25-40 years of age (details graphed in fig. 3.10).

<sup>9</sup> For details please see Appendix 1.

**Figure no. 3.10**

Source: Computed and Prepared by the Researcher<sup>10</sup>.

### 3.5 Classification of Gender and Sexual Minority People:

Non-binary people are classified into different categories and their classifications have been thoroughly discussed below.

#### 3.5.1 Classification On the Basis of Gender Identity:

On the basis of gender people can be divided into two categories – cisgender and transgender.

##### 3.5.1.1 Cisgender:

Ordinarily a person's gender identity accords with their natal sex or birth gender. These people are called cisgender. The word 'cisgender' is an adjective which is used for describing a person whose gender identity and gender expression align with the sex assigned at birth. Cisgender replaces the term "non transgender" or "bio man/bio woman" (Cose, 2012). Cisgender people are of two types, i.e. male and female. Generally males have XY chromosome and they have testes and penis as external sex organs and produce sperm

<sup>10</sup> For details please see Appendix 1.

testosterone hormone. Females usually have XX chromosomes and they have vagina, ovary and breasts and produce progesterone (Drets & Shaw, 1971). This hormone is a vital factor in menstruation, pregnancy and embryogenesis of humans and other species. It is generally a female hormone.

### **3.5.1.2 Transgender:**

Another classification is transgender. Some people have difficulties matching their gender identity with their natal sex. These people always feel some discomfort with their natal sex and usually feel comfortable with their opposite sex and their gender identity. They are called transgender. Transgender is an umbrella term which includes all non-binary people (Meier & Labuski, 2013). But there is a controversy as far as transsexual people are concerned because transsexual people are those who also think like their transgender counterparts that they were born in the wrong body. But the difference is that transsexual people can modify their body through hormone therapy and SRS or Sex Reassignment Surgery and after modifications they may be termed as male or female. It means that after modification, those transsexual people should be identified as male or female as per their certificates which they get after their sex reassignment surgery. Then they may come under the gender binary group.

The word 'transgender' is an umbrella term which describes a range of gender-variant identities and communities within the United States in the early 1990s and this term was coined by Virginia Prince (1913-2009), a self-identified heterosexual cross-dresser from Los Angeles who later started her life as a woman in full time (Williams, 2014).

Transgender persons are of two types, transgender male and transgender female. Transgender males or FTM are those persons who are biologically female, but their internal sense of gender is male and their gender expressions are also masculine. The other term is transgender female or MTF. Transgender females are those persons who are biologically male, but their gender identity and gender expressions are feminine (Kenagy, 2005). In this study, 30.13% among the total respondents (N=302) belong to transgender community.

### **3.5.2 Different Types of Non-Binary People on the Basis of Gender Identity:**

Apart from the aforesaid classifications, there are more divisions of gender. These have been discussed in the following manner-



**3.5.2.1 Kothi:**

Kothi is used to indicate those people who are male by birth, but always dress like a female and they don't want to change their sex with the help of Sex Reassignment Surgery (Stief, 2017). Sometimes they drift into a hijra or eunuch community and they often declare that they are not castrated. Among the total respondents (N=302) 12.26% belong to kothi category.

**3.5.2.2 Tom Boy:**

Tom boy is a kind of gender identity who acts and behaves like a boy. But she doesn't want to change their sex permanently with the help of SRS. But they fond of wearing masculine outfits. Actually this term is just opposite of kothi. On the basis of sexual orientation, tom boys are actually lesbian. But their behavior and nature is masculine. While tomboys may indeed dress in ways that are thought to be more masculine, the choice of attire may have more to do with function than form—wearing jeans affords one the freedom to engage in activities that would be made difficult by heels and a skirt (Craig & Lacroix, 2011). It is not true that they always like masculinity, but they dismiss femininity. Tom boy also falls into lesbian category. Among the total lesbian respondents, 31.58% fall into tom boy category.

**3.5.2.3 Two-Spirit:**

The term 'two-spirit' is also an umbrella term which includes those types who are generally gender variant people and many two-spirit individuals have seen themselves as having both male and female spirits within them and their gender expressions also vary from time to time. In this way, their sexual orientations are seen to be changing from time to time. Thus they cannot be described as heterosexual, homosexual or bisexual because their sexual orientation is usually in a state of flux. They experience a variety of gender and sexual orientations among them. This term 'two-spirit' is widely used by some Native Americans and Canadian First Nations (Harrington, 2016).

**3.5.2.4 Gender queer, Gender Variant and Gender Fluid:**

These terms are used for those people who are neither cisgender nor transgender. They fall in between the two categories. Their gender role, gender expression may vary from time to time. They don't confirm their gender identity or they can't. They are also called gender

nonconforming and gender expansive. This is a concept which goes beyond the binary conception (Harrington, 2016).

#### **3.5.2.5 Agender and Gender Neutral:**

This is a concept which describes those people who don't believe in any gender concept. They don't want to be labeled under any gender category. They are called agender or gender neutral or neutrosis (Harrington, 2016). They go beyond the concept of 'boy' and 'girl'. If anyone asks them the question, the answer comes that they are 'none of the above'. They generally prefer gender neutral pronouns such as they or their or them.

#### **3.5.2.6 Bigender, Trigender and Pangender:**

Actually these are the concepts concerning gender nonconforming, gender variant, gender fluid and gender queer categories. When a gender variant person experiences two types of gender identity at once, that person is called bigender. Actually the term 'bigender' is used for those kind of people who is the combination of both male and female gender identities (Blechner, 2015). And when a person experiences three types of gender identity at once, that person is called trigender. In this way, when multiple gender identities or gender expressions are seen within the same person, those persons are called by different names such as mixed gender, pangender, multigender or polygender (Harrington, 2016).

#### **3.5.2.7 Transvestite:**

Transvestites are those persons who prefer to dress like their opposite sex. It doesn't mean that they want to change their body with the help of any surgery. They just prefer to dress like their opposite sex. They do this for their mental satisfaction. It is a kind of clothing choice (Weiss, 2008). Actually this term refers to those persons who want cross-dressing. This is the main difference between transvestites and transsexual people. Transsexual people change their body with the help of SRS.

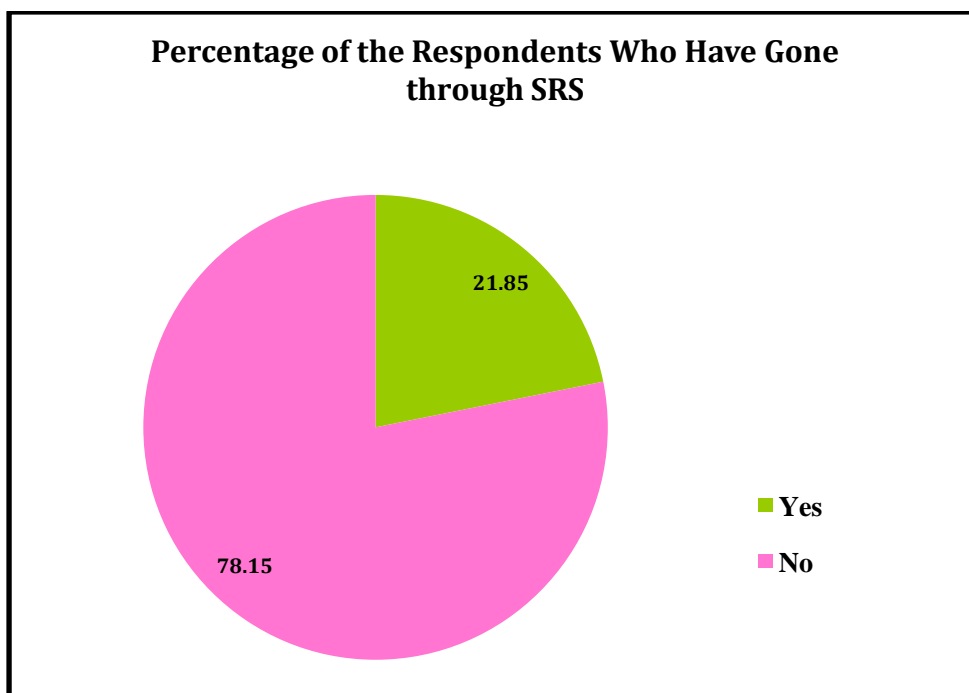
#### **3.5.3 Transsexual:**

There is another important term which is 'transsexual'. The term 'transsexual' is used for those persons who experience asymmetry or inconsistency in gender identity with their birth sex and for that reason they want a permanent solution and are usually keen to go through SRS or Sex reassignment Surgery for attaining the necessary alignment of their body with their desired gender identity. Transsexual persons are also categorized into two categories,

i.e. Trans male or FTM and trans female or MTF (Prunas et al., 2014). When transgender female persons change their sex for achieving their desired gender identities through different medical procedures, i.e. Sex Reassignment Surgery and Hormone Replacement Therapy and convert to female permanently, they are called trans female. On the other hand, when transgender male persons go through the SRS to convert themselves from female to male, they are called trans male. The term “Transsexual” was introduced by David Oliver Cauldwell<sup>11</sup> in 1949 to designate those people who change their physiological sex (Cauldwell, 2006).

Among the total respondents (N=302), 21.85% have gone through SRS whereas remaining 78.15% have not done SRS (details graphed in fig. 3.11). There are some transgender people who are either yet to do SRS or will never do SRS; still they are called transsexual as they call themselves.

**Figure no. 3.11**



Source: Computed and Prepared by the Researcher<sup>11</sup>.

#### **3.5.4 Classification on the Basis of Sex:**

Now it is time to discuss the next classification. The basis of the next classification of human beings is ‘sex’. On the basis of sex, human beings are classified into three categories, i.e.

<sup>11</sup> For details please see Appendix 1.

male, female and intersex person. Male and female persons and their biological characteristics have already been described above. And the other type is intersex.

#### **3.5.4.1 Intersex:**

They are neither clearly male nor female. These persons are called intersex. Their chromosome either doesn't match the binary male female concept (males have XY chromosome and females have XX chromosome) or their external genital parts and internal reproductive systems mismatch gender and sex binary system (Kessler, 1990). In most of the cases, intersex people have mosaics of chromosome, i.e. XXY, XYY, etc. and they have a mixture of underdeveloped male and female reproductive organs (Hughes et al., 2006). In the past these people were called 'hermaphrodite'.

"Hermaphrodite" is a very common term for intersex people. But this is not a new terminology. It is a very old concept. According to Anne Fausto- Sterling<sup>ii</sup>, intersexuality describes those persons whose biological sex is ambiguous and according to him, Adam started his life as a hermaphrodite and Plato also believed that there were three sexes, male, female and hermaphrodite (Jones & Heever, 2021). The word 'hermaphrodite' originated from two Greek words: 'Hermes' and 'Aphrodite'. According to Greek mythology, 'Hermes' is a messenger of the Gods and the patron of music and protects all livestock (Burkert, 1985). And the other word is 'Aphrodite'. According to Greek mythology, 'Aphrodite' is the goddess of beauty and from these two gods 'Hermaphroditus' was born (March, 2014), whose body became half male and half female at the age fifteen (Fausto-Sterling, 1993). From this myth the concept of hermaphrodite derives and comes to the fore. Generally there are two types of hermaphrodites.

- **True Hermaphrodite:**

In the case of human beings, there are two types of hermaphrodite, true hermaphrodite and pseudo hermaphrodite. In most of the cases it has been seen that ovary and testis grow separately in one human body and in other cases ovary and testis form together in one organ. Single or both gonads contain both the tissues and it is called ovo-testis. These are the cases of true hermaphrodites. True hermaphroditism is also known as ovotesticular disorder and it is an intersex condition and it is called disorder of sex development (Matsui et al., 2011).

- **Pseudo Hermephrodite:**

But in the cases of pseudo hermephroditism, gonadal tissue, i.e. ovary or testis, matches the chromosomal structure. It means that one has testis and XY chromosomal structure and on the other hand, others have ovary and XX chromosomal structure. In both these cases there is no resemblance to external genitalia. For example, one who has XX chromosomal structure and ovary may have beard and adult size penis and they don't menstruate. In other cases those with XY chromosomal structure and testis can also have vagina and clitoris (Fausto-Sterling, 2004). All these are examples of intersex conditions.

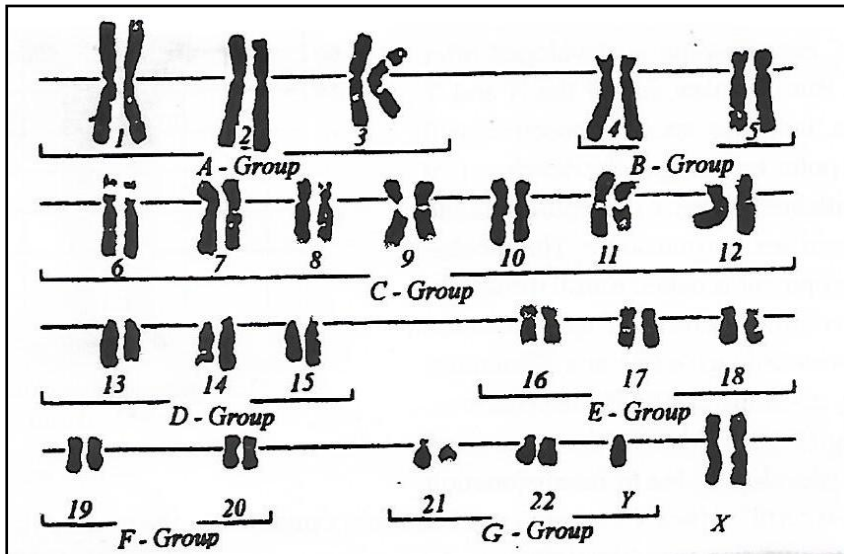
### **3.5.4.2 Chromosomal Disorder among Intersex People:**

This intersex condition is seen in one child out of 2000 (Harrington, 2016). Some chromosomal disorders or intersex conditions of the human body are discussed below:

- **Klinefelter Syndrome:**

This syndrome is a sex chromosome disorder and found only in male bodied persons. It was first discovered by H.F. Klinefelter in the year 1942 (Bojesen & Gravholt, 2007). It occurs 1 in 500 to 1,000 with an extra X chromosome. This syndrome is also called 47, XXY, XXY syndrome or XXY trisomy. A normal male person has XY chromosome. But in the case of klinefelter syndrome, there is an extra X chromosome. Then it becomes XXY. So, Klinefelter syndrome is clinically called as 47, XXY (Kelly, 2013). This syndrome is also called testicular dysgenesis because testes are ill developed or very small in size and may not produce sperm. Female characteristics often develop in such persons. In most of these cases they suffer from mental retardation. In klinefelter syndrome, there is Y chromosome for determining the male body. But the presence of more than one X chromosome shows female features in male bodied persons. So those who suffer from klinefelter syndrome have some female characteristics also. The physical characteristics of a person who has been suffering from these sex chromosomal abnormalities are infertility, small testes, gynecomastia, osteoporosis, motor delay or dysfunction, speech and language difficulties, attention deficit, psychological or behavioral problems etc (Wattendorf & Muenke, 2005).

Picture no. 3.a. Karyotype of a person with Klinefelter Syndrome



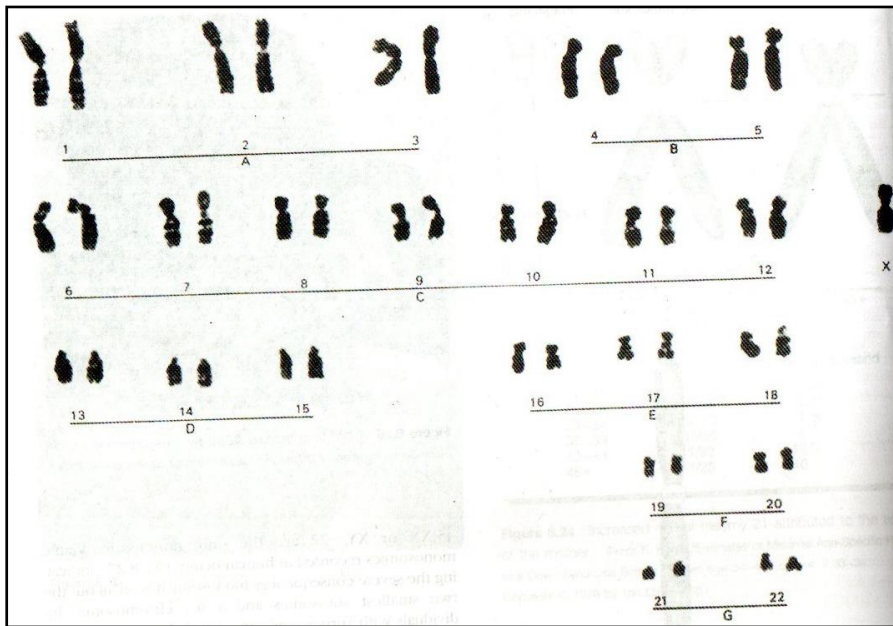
Source: (Chatterjee et al., 2012)

- **Turner Syndrome:**

This syndrome was discovered by Henry H. Turner in 1938. It is found in women only and in one out of 2000 female children. Those who suffer from this syndrome have 45 chromosomes (44A+ X) (de Oliveira et al., 2009) which means they have 22 pairs of autosomes and only one X chromosome.

So in these cases secondary sex characteristics of females do not develop and ovaries are not properly developed, either. For that reason this syndrome is called ovarian dysgenesis. Besides these, they have flat breasts without developed mammary glands, no pubic hair and menstruation cycle does not occur. On the other hand, their I.Q. level is very poor, they suffer from mental retardation and have eyelids with antimongoloid slanting. In most of the cases external genitalia may be normal, but uterus is likely to be ill developed (de Oliveira et al., 2009). It has been said that in these cases only one X chromosome is present. Therefore, female sex organs do not develop properly and female secondary sex characteristics are not found in them. The following picture shows the physical and sexual characteristics of a female who has been suffering from Turner syndrome.

Picture no. 3.b. Karyotype of a person with Turner Syndrome



Source: (Tamarin, 2002)

In this study, there are 23.51% intersex population among total respondents (N=302) and they all have ambiguities in their external genital parts and hence they are put into intersex category.

### 3.5.5 Classification on the Basis of Sexual Orientation:

On the basis of sexual orientation people have been classified mainly into three categories, namely, heterosexual, homosexual and bisexual.

#### 3.5.5.1 Heterosexual:

Heterosexual describes those kinds of people who are sexually attracted to their opposite sex and genders. Usually man-woman relationships fall in this category. The other classification is homosexual. The word homosexual signifies those people who are sexually attracted by persons of the same sex and same gendered people (Ross et al., 1988). It is a romantic relationship between two same gendered persons whereas bisexual means that such a person experiences sexual and emotional attraction for both male and female persons.

#### 3.5.5.2 Homosexual:

Homosexual people fall into two categories, i.e. lesbian and gay. The word 'lesbian' indicates those kinds of women who are emotionally and sexually attracted by another woman and the

word 'gay' describes those kinds of males who are emotionally and sexually attracted by another male. In this study, 14.24% of the total respondents fall into homosexual category. Among the homosexual, 6.29% are lesbian and 7.94% are gay.

### **3.5.5.3 Bisexual:**

In the bisexual category are those persons who are sexually and emotionally attracted by same gendered and same sex people and simultaneously attracted by opposite sex and gendered people as well. So, both male and female can come under this category. One bisexual male can be attracted by both female and male persons simultaneously and similarly one bisexual female can simultaneously be attracted by both male and female. In this study, 5.96% respondents fall into bisexual category.

### **3.5.6 Other Classifications:**

#### **3.5.6.1 Asexuality:**

Besides these main classifications, numerous other classifications are also there. Asexual is a term which applies to those who don't have any sexual orientation and sexual attraction or lack of sexual attraction. Those persons who are not attracted sexually by other persons or do not feel any attraction towards others are called asexual (Bogaert, 2015). It is not certain whether it is a classification of sexual orientation or not. But persons of this type are very rare.

#### **3.5.6.2 Pansexuality:**

Pansexuality implies another classification. Actually gender and sexuality are vital factors in classifying people. Pansexual describes or indicates those kinds of people who are emotionally or sexually attracted by any kind of gender and sex (Rice, 2015). So those people who are of a pansexual orientation are generally called gender blind. This concept implies flexibility. These persons can fall in love with male, female, bigender, trigender, pangender, queer, intersex or agender (Rice, 2015). This term is more inclusive than bisexuality because bisexual people are only attracted by males and females. But pansexual people are gender blind; they are attracted by all binary and non-binary people. For that reason the term 'pan sexuality' is more inclusive than bisexuality.



### **3.5.6.3 Queer:**

Queer people are those who don't want to put themselves in any type of box or category; in other words they don't want to categorize themselves at all. They don't want to categorize themselves on the basis of gender, or on the basis of sex and sexual orientation. Such people do not wear gender specific dress or gender stereotype dress. Sometimes they wear female types of dress and sometimes they wear masculine dresses as well. On the other hand, people who are sexually attracted by different non binary kinds of people without any norms are called queer (Love, 2014). Actually when people declare themselves as queer, they are known as queer. In this study, 13.91% respondents fall into queer category.

Thus the main difference between pansexual and queer people is that pansexual people are attracted to both binary and non-binary types of people and queer people are those who are sexually attracted to only non-binary types.

### **3.6 Different Country and Different Names of Transgender People:**

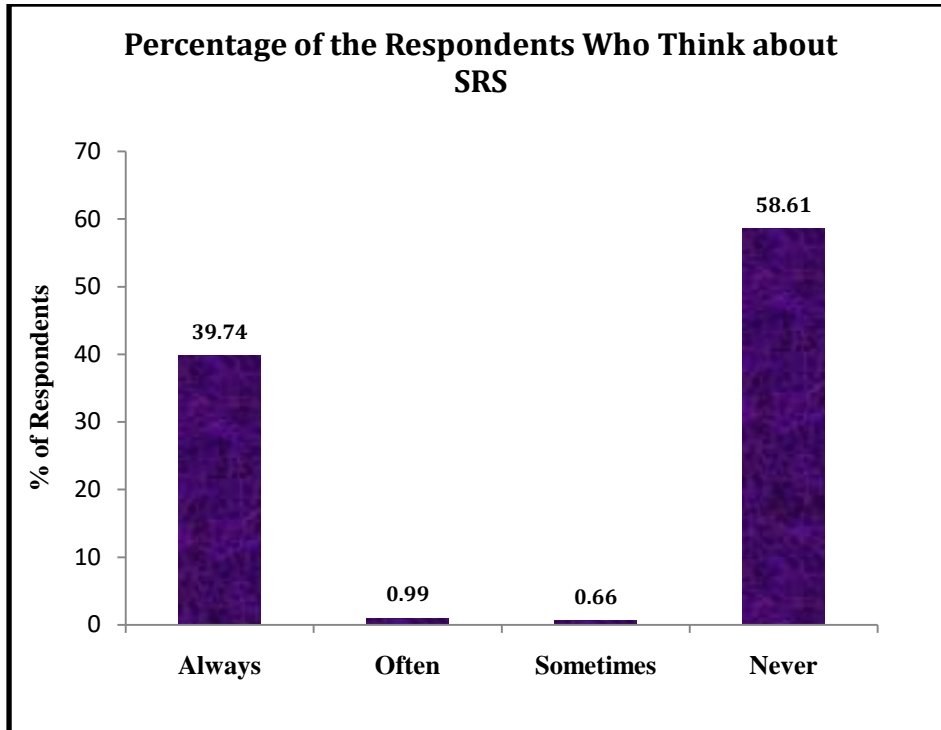
Besides, transgender and other non-binary people are called by different names in different countries. For example, in India, the people who are neither male nor female are called 'hijra'. Hijra is a socio-cultural group of India. They fall in the category of third gender according to an order of the Supreme Court issued on 15th April, 2014 (*National Legal Ser.Auth vs Union Of India & Others*, 2014). Actually hijras are a clearly defined secluded community under active guidance from their gurus and the gurus enjoy enormous power in their everyday life and over every aspect in their life. They don't want to mix with the common people and love to live a secluded life and hold on to their own ethics and values markedly different from those of the other segments of society. In Samoa the third gender people are known as fa'afafine. Fa'afafine is a term generally used in Samoa for non-binary people. They are generally assigned male sex at birth, but they behave like a female. Actually their gender expressions are feminine in most of the cases (Bartlett & Vasey, 2006). In Mexico they are called muxe people. Muxe people are those who are assigned male sex at birth, but behave and dress like a female in Southern Mexico (Mirandé, 2016). According to landmark decisions of 2014, the third gender people have been finally recognized as neutral gender in Australia and Germany and the third gender option is available in birth certificate also (Barz & Owen, 2015).

### 3.7 Sex Reassignment Surgery:

In this study SRS assumes considerable importance because most of the people who constitute the subject of this research are not satisfied with their assigned sex at birth. So, the maximum number of people wants to have recourse to Sex Reassignment Surgery. SRS or Sex Reassignment Surgery is a surgical procedure or procedures by which a transgender person's physiological sex is altered to the desired sex of the transgender person for ensuring resemblance between their gender identity and their physiological sex and it helps to create the desired feminine or masculine appearance (Wroblewski et al., 2013).

Among the total respondents (N=302), 39.74% have always thought about SRS to change their assigned sex to find resemblance with their gender identity. 0.99% have often and 0.66% have sometimes thought about SRS for the same reason. The majority 58.61% have never thought of SRS (details graphed in fig. 3.12). The people who have never thought of SRS are mainly L, G, B and K respondents. Besides there are some transgender people who have never thought of SRS due to their financial and physical condition.

**Figure no. 3.12**



Source: Computed and Prepared by the Researcher<sup>12</sup>.

<sup>12</sup> For details please see Appendix 1.

These medical procedures are also called Gender Reassignment Surgery or GRS. It includes different masculinization and feminization surgeries. This surgery is of two types, F to M (female to male) and M to F (male to female). It is also called Gender Affirmative Surgery and this MTF surgery has been divided into four categories on the basis of Gender Affirmative Care by Sappho (*Good Practice Guide to Gender-Affirmative Care*, 2017)-

### **3.7.1 Surgeries for Male to Female (MTF/M to F) Transgender Persons:**

Male to Female SRS are of different kinds. These are chest surgery, genital surgeries, non breast surgeries and different types of revision surgeries. These are described below in detail-

#### **a. M to F Chest Surgery:**

- **Augmentation Mammoplasty (implants/lipofilling):** This is very popular and common among transgender and transsexual female persons. Those who don't want any surgery in their body avail themselves of this option of augmentation mammoplasty. This surgery is a part of Gender Affirmation Surgery. This is a process of feminization of chest (Miller et al., 2019). This is the highest percentage so far claimed by any of these SRS procedures. Besides transsexual female persons, eunuch or hijra people also sometimes opt for this procedure.

#### **b. MtoF Genital Surgeries Penectomy:**

- **Removal/amputation of Penis:** Removal or amputation of penis is also a very important surgical option for male to female transsexual persons. It is a genital surgery and it is known as penectomy. It is a process involving removal of the penis and it is the first step in vaginoplasty (Cohen et al., 2019).
- **Orchiectomy:** Orchiectomy is a surgical procedure to remove both testicles from a male bodied person. It is one kind of castration. But the difference is that castration is conducted by untrained people in an untrained manner and this has been seen among eunuch or hijra people mainly. But orchiectomy is conducted in a hospital or nursing home by trained doctors and mostly transgender female people go for it. Orchiectomy is a combination of penectomy, orchiectomy, urethral shortening, vulvoplasty, and vaginoplasty (van der Sluis et al., 2020).
- **Vaginoplasty:** It is a reconstructive surgery to create a vagina. It is a most important surgical procedure by which vagina is constructed. It is a surgical procedure of male

to female sex reassignment surgery. There are three steps in this surgery. These are skin grafts, penile-scrotal skin flaps and pedicled small or large bowel segments (Horbach et al., 2015).

**c. M to F Non-Genital, Non-Breast Surgeries :**

This surgery involves a number of surgical procedures such as facial feminization surgery, liposuction, lipofilling, voice surgery, thyroid cartilage reduction, gluteal augmentation, hair reconstruction, and various aesthetic procedures.

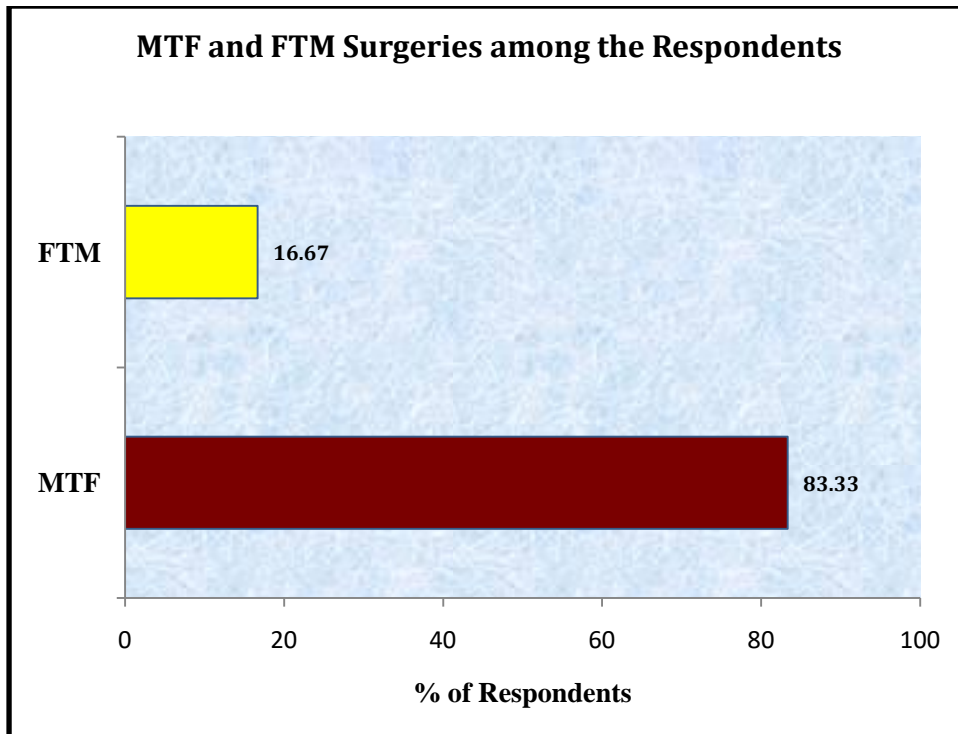
- **Facial Feminization Surgery:** Facial feminization surgery is a set of cosmetic surgical procedures by which male faces are converted to female faces. This process includes brow lift, rhinoplasty, and cheek implantation and lip augmentation. Rhinoplasty is a surgical procedure designed to change the shape of the nose (Dempf & Eckert, 2010). Actually the face contains secondary sex characteristics, i.e. lip, nose, forehead, eyebrows, cheeks, chin, jaw line, etc. So, facial feminization surgery includes all of these and converts a male face into a female face. The following picture shows the conversion of masculine face to a feminine face (Morrison, Vyas, et al., 2016).
- **Reduction Thyrochondroplasty (Tracheal shave):** Thyrochondroplasty is also known as chondrolaryngoplasty or commonly known as tracheal shave. It is a surgical procedure by which thyroid cartilage is reduced by surgery and adam's apple is reduced with the help of chondrolaryngoplasty. It is done in cases of male to female gender affirmation surgery or SRS (Lipschitz et al., 2017). The Adam's apple is a lump of cartilage that surrounds the larynx and tends to grow outward. It is more prominent in males than in females. In most of the cases, the Adam's apple has been reduced in male to female sex reassignment surgery and it is most important in Gender Affirmation Surgery (Deschamps-Braly et al., 2017).
- **Voice Therapy:** Voice therapy is a very important non surgical procedure during the transition period of transgender people. We can detect a person's gender through his or her voice. So voice is a very important part of this therapy. Voice feminization is a process by which a male voice is converted to a female voice (Quinn & Swain, 2018).

**d. Revision Surgeries:**

- **Clitoroplasty:** It is a process of adjusting the size, shape, location or hooding of the neo-clitoris (Boas et al., 2019).
- **Vulvoplasty or Labiaplasty:** It is a process of adjusting the size or shape of the labia minora or majora (Boas et al., 2019).
- **Commisuroplasty:** It is also a surgical process of narrowing the superior aspect of the labia majora (the anterior commissure) (*Good Practice Guide to Gender-Affirmative Care*, 2017).
- **Deepening the neo-vagina:** occasionally the neo-vagina will not be long enough or will contract in size. This is usually the result of inadequate dilating. Therefore, this procedure is often needed (*Good Practice Guide to Gender-Affirmative Care*, 2017).

Among the total respondents, 21.85% have undergone SRS and of this, 83.33% falls into MTF and 16.67% falls into FTM (details graphed in fig. 3.13).

**Figure no. 3.13**

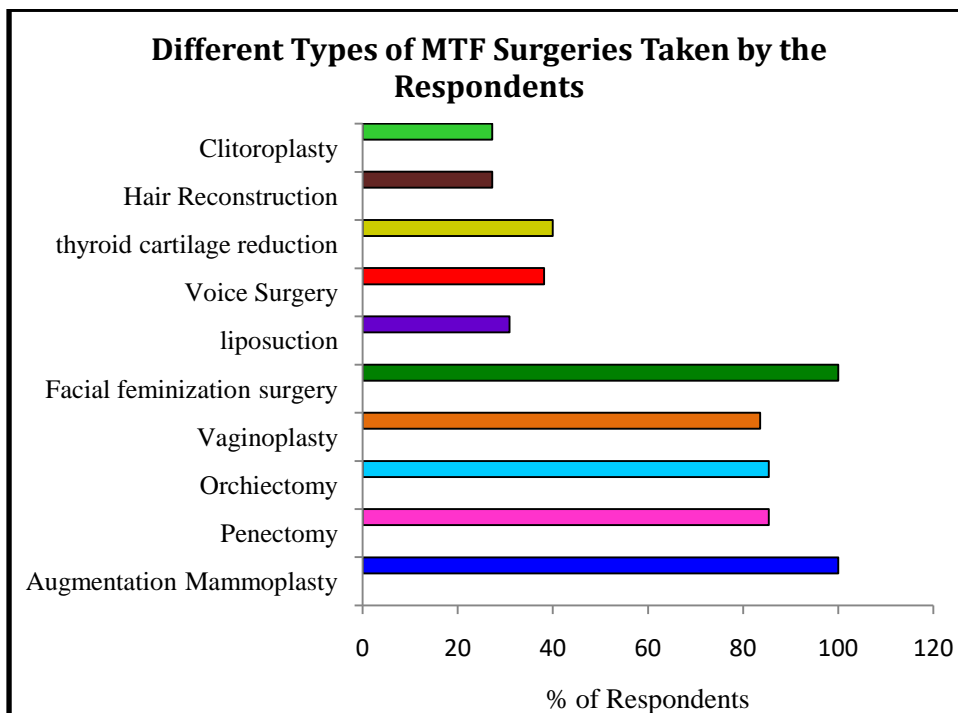


Source: Computed and Prepared by the Researcher<sup>13</sup>.

<sup>13</sup> For details please see Appendix 1.

Among the total 55 MTF respondents, who have already undergone SRS, 100% population have undergone both augmentation mammoplasty and facial feminization surgery. Besides, 85.45% have undergone both penectomy and orchiectomy, 83.63% have undergone vaginoplasty, 30.9% have undergone liposuction, 38.18% have undergone voice surgery, 40% have undergone thyroid cartilage reduction surgery and 27.27% have undergone both hair reconstruction and clitoroplasty (details graphed in fig. 3.14).

**Figure no. 3.14**



Source: Computed and Prepared by the Researcher<sup>14</sup>.

### 3.7.2 Surgeries for Female to Male (FTM/F to M) Transgender Persons:

Generally trans men want to go through this type of surgery. It is not a single surgery but a process of many surgeries.

#### a. F to M Breast or Chest Surgery:

- **Top Surgery or Mastectomy:** It is called top surgery or mastectomy. Top surgery is breast removal surgery for females and it is a very important surgical procedure for female to male transgender people. Generally most of the female to male transgender people are treated with this surgery. This procedure includes the removal of mammary tissue, removal of excess skin, and reduction and proper repositioning of the nipple and

<sup>14</sup> For details please see Appendix 1.

areola complex (Namba et al., 2009). It provides a male contoured chest to a female bodied person. Most of the transgender male persons who don't want to go through any other surgery want to have recourse to mastectomy.

**b. F to M Genital Surgeries:**

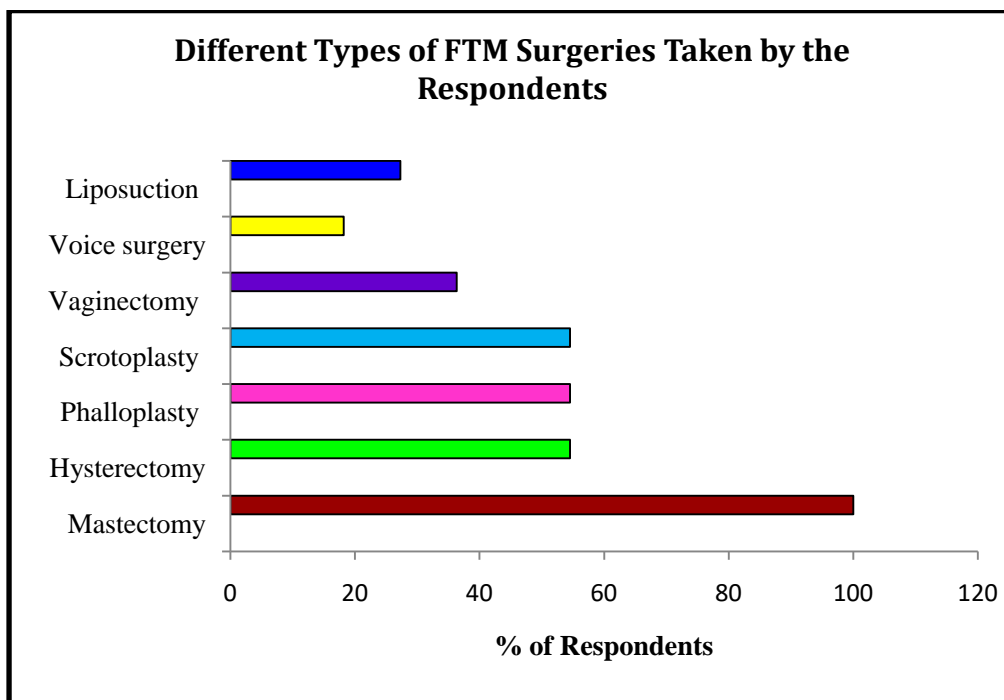
- **Hysterectomy:** Hysterectomy is the procedure for complete or partial removal of uterus, cervix, ovaries and fallopian tubes and other surrounding structures (Weyers et al., 2008). With the help of this surgery, a female bodied person loses their capacity to carry a child in her womb. It is a very important gynaecological surgical procedure for female to male transgender people. This surgery completely stops the menstruation cycle of a female.
- **Phalloplasty:** Phalloplasty is the construction or reconstruction of penis. It is an artificial modification of the penis or artificial reconstruction of penis by surgery (Morrison et al., 2016). It is the most important part of female to male SRS. It is generally used by transgender male persons. The first phalloplasty was performed for the purpose of sex reassignment in the year 1946 on Michael Dillon<sup>iii</sup>, a transman. This operation was performed by Harold Gillies<sup>iv</sup>(Frey et al., 2017).
- **Vaginectomy:** It is a process for the removal of vagina for those transgender male people who want to go through SRS (Ergeneli et al., 1999).
- **Scrotoplasty:** Scrotoplasty is the process to repair or construct the scrotum (Selvaggi et al., 2009). It is also a sex reassignment surgical procedure for female to male transgender persons. This apart, this procedure is also done in different cases, i.e. defect in birth, injury, skin infections etc.
- **Metoidioplasty:** The word 'metoidioplasty' derives from two Greek words, 'meta' and 'oidion'. 'Meta' means 'toward' and 'oidion' means 'male genitalia'(Perovic & Djordjevic, 2003). So, it is a process for the creation of male genitalia. It is another kind of female to male sex reassignment surgery. This surgery is part of gender affirmation surgery. In this process, testosterone replacement therapy gradually increases clitoris. However, the penis is not yet in functional position and cannot produce sperm and they are unable to produce a baby. But here in this study, no instance of a person opting for this FTM genital surgery has been seen. Among the transgender male persons surveyed, it has been seen that no one opted for this surgery for creation of their male genitalia.

**c. F to M Non-genital, Non-Breast Surgeries:**

There are a lot of revision surgeries, liposuction, lipofilling, scar revision etc (*Good Practice Guide to Gender-Affirmative Care*, 2017). These procedures are also very important for transsexual male persons.

Among the total respondents (N=302), 21.85% have gone through SRS of which 16.67% are FTM. Among the total FTM respondents, 100% have undergone mastectomy, 54.54% have undergone all through hysterectomy, phalloplasty, scrotoplasty, 36.36% have undergone vaginectomy, 18.18% have undergone voice surgery and 27.27% have undergone liposuction (details graphed in fig. 3.15).

**Figure no. 3.15**



Source: Computed and Prepared by the Researcher<sup>15</sup>.

But it is also a fact that some people don't want to go through these surgical procedures. The reasons vary. Some feel afraid of surgery and some simply can't afford it. These transgender people use different artificial ways depending on their gender identity. Transgender male persons use binder, puberty blocker, prosthetic penis, etc.

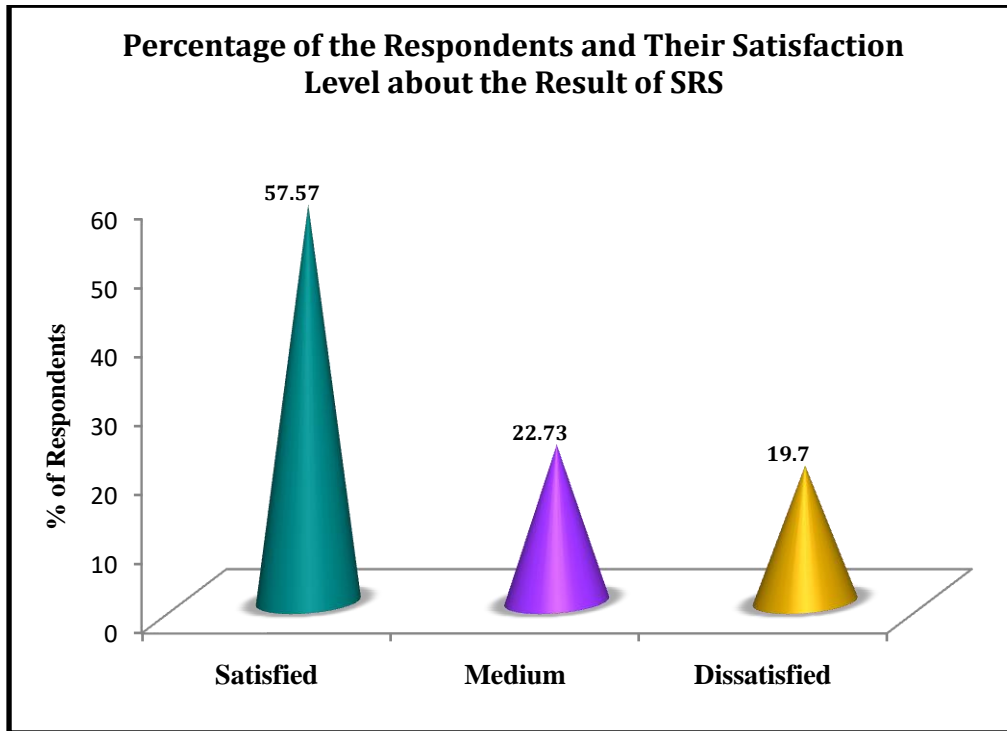
<sup>15</sup> For details please see Appendix 1.



### 3.7.3 Satisfaction about the Result of SRS:

Out of total 66 respondents who have undergone SRS, 57.57% are satisfied with the result, 22.73% are neither satisfied nor dissatisfied and the remaining 19.7% are dissatisfied with the result (details graphed in fig. 3.16).

Figure no. 3.16

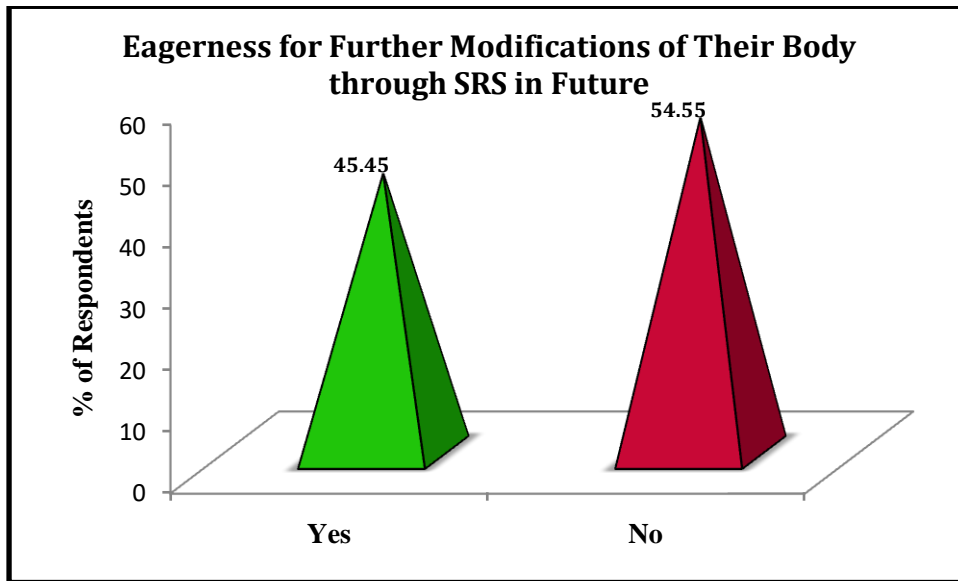


Source: Computed and Prepared by the Researcher<sup>16</sup>.

### 3.7.4 Eagerness for Further Physical Modifications:

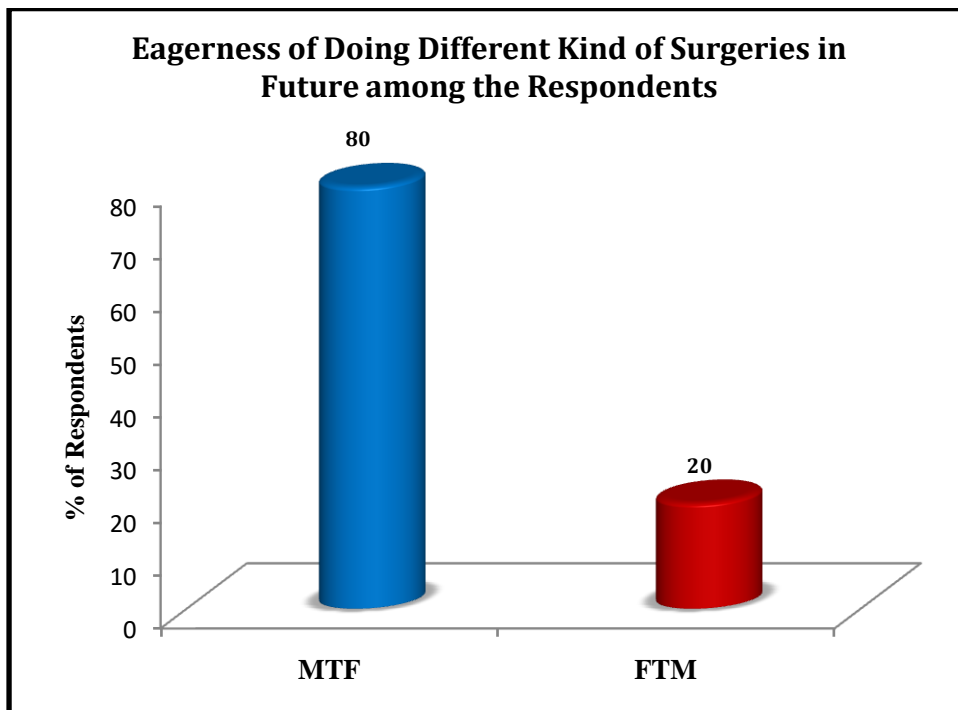
Often it is found that the people who have undergone SRS wish for further physical modifications because they are not satisfied with the result of the previous SRS. Out of total 66 respondents 45.45% are willing to have further SRS because they want further modifications of their body and whereas 54.55% are not willing to have any further SRS (details graphed in fig. 3.17).

<sup>16</sup> For details please see Appendix 1.

**Figure no. 3.17**

Source: Computed and Prepared by the Researcher<sup>17</sup>.

Out of total 30 willing respondents for SRS, 80% opt for MTF and 20% FTM procedure (details graphed in fig. 3.18).

**Figure no. 3.18**

Source: Computed and Prepared by the Researcher<sup>18</sup>.

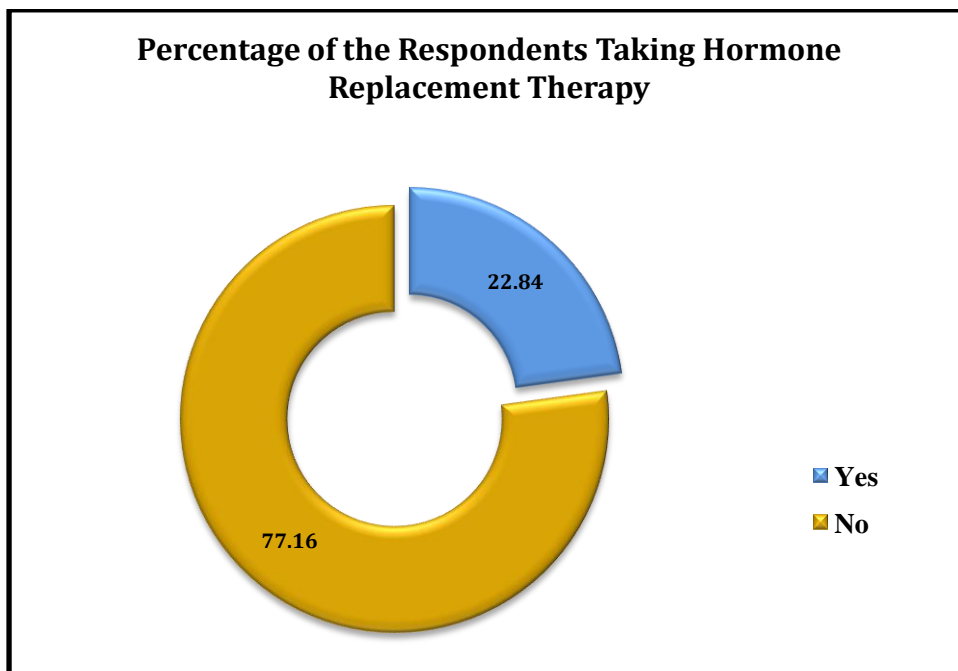
<sup>17</sup> For details please see Appendix 1.

<sup>18</sup> For details please see Appendix 1.

### 3.8 Hormone Replacement Therapy (HRT):

An integral part which precedes SRS or Gender Affirmative Surgery (GRS) is HRT or Hormone Replacement Therapy. This is also called Cross Sectional Hormone Therapy (CSHT). It is a strongly desired medical intervention for gender incongruent individuals. The goal is to change secondary sex characteristics to facilitate gender presentation that is consistent with the desired sex (Majumder et al., 2020). The persons willing to undergo SRS must have undergone HRT earlier. Besides, those who are reluctant to SRS can undergo HRT. Generally transgender, kothi and intersex people opt for HRT. Among the total respondents (N=302), 22.84% have taken HRT whereas 77.16% have not taken HRT (details graphed in fig. 3.19).

**Figure no. 3.19**



Source: Computed and Prepared by the Researcher<sup>19</sup>.

### 3.9 Mind Matters--It Has No Rules:

Generally it is found that the transgender people don't like their assigned gender and they feel much more comfortable with the opposite gender. The lack of comfort and hatred for their birth gender gives rise to Gender Dysphoria. Gender Dysphoria is very common among transgender, transsexual and gender nonconforming people. There are different Standards of

<sup>19</sup> For details please see Appendix 1.

Care (SOC) for the health of transgender, transsexual and gender nonconforming people. These Standards of Care are termed as version 7 (SOC-7) by the World Professional Association for Transgender Health (WPATH). It provides clinical guidance to those people about achieving personal comfort through safe and effective pathways (Dhejne et al., 2016).

Again some people are happy with their assigned sex at birth, but they prefer cross dressing. When a male bodied person wears female outfits and behaves and expresses himself like a female and doesn't want to change their sex with the help of surgery, they are called Kothi. And when a female bodied person wants to wear male outfits and behaves like a male, but doesn't want to undergo surgical procedures, they are called Butch or tom boy. They are actually female bodied persons with male outfits and robust masculine expression.

In most of the cases, the conscious or subconscious mind plays a very important role in the life of gender and sexual minority people. But in rare cases it is seen that the impact of the environment and surroundings affects in a big way the minds of transgender people. It is not exactly proved, but it has been seen in the primary survey that when the parents dress up their child in a cross-dressing fashion, i.e. a baby boy dressed up like a baby girl or a baby girl dressed up like a baby boy and they do it regularly, those children cannot easily give up this practice even after they've grown up. Their mentality has also changed like the way they dress, they've become transgender and they don't accept their present sex or assigned sex at birth. Here we narrate the life history of a girl child named Srijani (name has been changed). Srijani is the elder daughter of her parents and she has a sister. But their mother wanted a son. Then she always dressed up her elder child Srijani like a boy. And her mother always treated her like a boy. Srijani also got used to it and liked it very much and when she grew up, she gradually embraced her boyish nature and behaviour. But when her mother noticed this change, she tried her utmost to change the boyish nature of her daughter but didn't succeed. Now Srijani has changed her name to 'Srijan' (name has been changed) and comes across as a transman. So it is argued that the influence of environment and surroundings has a greater impact on the human mind. Thus there are problems galore and the people of these gender and sexual minority community face a great deal of inequality and discrimination.

There are other problems as well. SRS is the most desirable thing that can happen to transgender people. But it has also been seen that after gender affirmation surgery they face lots of physical problems. And in rare cases they die after surgery.

The other problem is monetary problem and medical insurance doesn't cover the expenses of SRS. So, very few people can afford this costly surgery.

Thus it can't be said that they are much less depressed than the other so called mainstream people. A complex variety of reasons often lies behind their depression. They are not mental patients. Actually they face various extraordinary problems which so called mainstream heterosexual people may not face.

In conclusion it must be said that their body, mind, gender expressions and nature do not always match. For that reason, they are always struggling. Some of them succeed in bringing their gender identity and assigned sex and gender expression to converge on one point. But many fail to do so and they end up struggling all their life and some of them never recover from gender dysphoria. In most of the cases, their actual problems cannot be understood by other people or people in the mainstream don't want to hear them out patiently. So these people are, in these circumstances, identified as or called mental patients or suffer from mental illness. But according to the newly published list of the United Nations, different problems of transgender people have been removed from the lists of mental illness and they are now listed in the sexual health related lists (Majumder et al., 2020). So, it must be said that it is not a mental problem and the problems faced by these people are health related issues. But this change is made only on paper. Even now mainstream society can't accept the gender and sexual minority people. So they don't find any path or direction out of this impasse to live a life blessed with love and respect. There is a long way and miles to go. But hope springs eternal that small drops of water slowly make the ocean.

---

<sup>i</sup> David Oliver Cauldwell was a pioneer sexologist, who coined the term "transsexual" in his essay "Psychopathia Transsexualis", where he described those persons whose gender identity was different from their assigned sex at birth. He also became an Associate Medical Officer in the department of war (Cauldwell, 2013).

<sup>ii</sup> Anne Fausto- Sterling is a Professor of Brown University in the Department of Molecular and Cell Biology and Biochemistry. He wrote the book "Sexing the Body: Gender Politics and the Construction of Sexuality" (Fausto-Sterling, 1993).

<sup>iii</sup> Michael Dillon was a British physician and a trans man. He was the first to undergo the process of phalloplasty.

<sup>iv</sup> Harold Gillies lived in New Zealand and he was the father of modern plastic surgery.

# **Chapter IV**

## **Socio-economic Condition**

## Chapter IV

### Socio-economic Condition

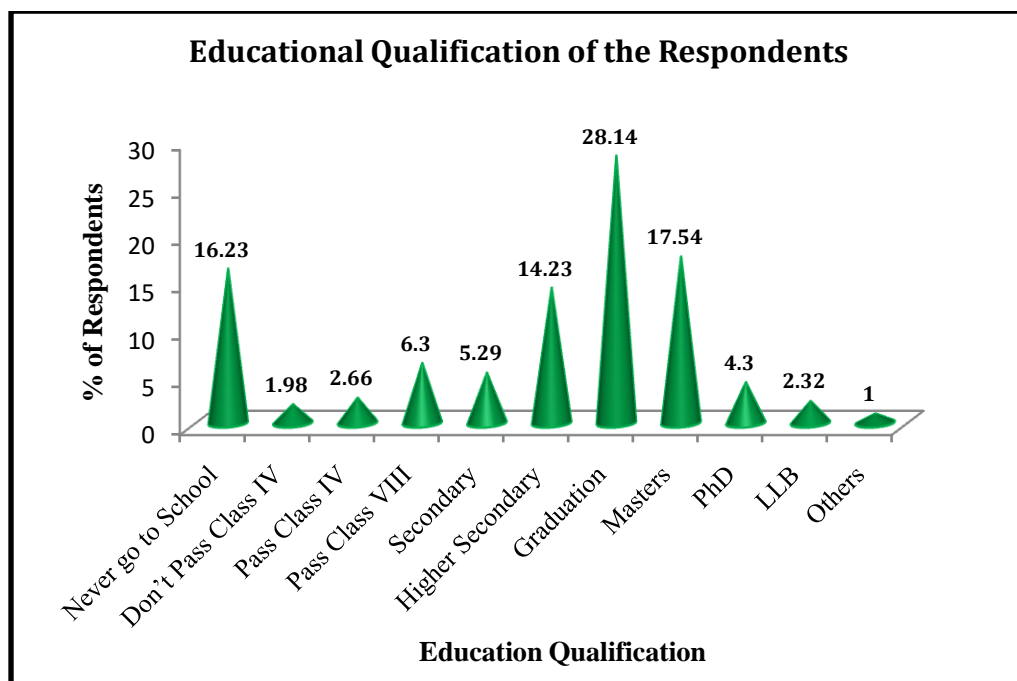
The condition of gender and sexual minority people in our society leaves much to be desired, they are suffering from different problems in our society. To describe and analyze their socio economic conditions, mainly their education, employment, working sectors, monthly income, working pattern, their marital status, who they live with, their coming out of obscurity, their acceptance in their families, their social acceptance will be discussed and analyzed in minute details. Socio- economic conditions of gender and sexual minority people will be thoroughly discussed in this chapter.

#### 4.1 Education:

Food, clothing and shelter are the three basic needs of human beings. But education is also a very important part in everyone's life. Without education no one can move forward. Nowadays education is one of the fundamental rights. Right to Education Act (RTE Act) ensures free and compulsory education for all children in the age group of six to fourteen years. But when it comes to the education of gender and sexual minority groups of people, it is seen that they don't have any right to go to school and continue their education. There are numerous laws and policies to protect them. But the real situation is very different. In reality, they face a lot of problems in their home and educational institution also. So they can't complete their education in most of the cases. Here it is seen from the primary survey that only 2.66% of the total number of interviewed persons (N=302) can complete their primary education, only 6.3% people have passed out class of VIII, 5.29% people have passed the Madhyamik examination, 14.23% people have passed the Higher Secondary Examination and among all the interviewed people, only 28.14% people are graduates. Besides this, it has also been seen that some people among them have completed their higher studies. Those people are very much exceptional because they are facing different types of harassment and difficulties; but they have achieved their dream goal. Among them 17.54 % have completed their masters, 4.3 % got their PhD degree and only 2.32 % have completed their education in the stream of law. Actually they have got LLB degree and only 1 percent people have completed their education in other disciplines. But it is very unfortunate that among the surveyed people, 16.23% people never went to school because they didn't get the opportunity. These people are mainly eunuchs who were handed over to eunuchs soon after birth because of some problems in their external genitalia. So, they did not get any

opportunity to go to school for educating themselves. This apart, some other people are also included in this group who could not complete their primary education. 1.98% people didn't pass class IV (details graphed in fig. 4.1) because they discontinued their study owing to different types of harassment and bullying in their educational institutions and they are facing a lot of difficulties in their homes also.

**Figure no. 4.1**

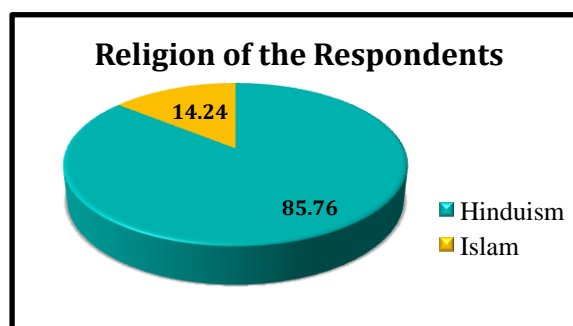


Source: Computed and Prepared by the Researcher<sup>1</sup>.

#### 4.2 Religion:

From this study it is seen that the religion of most respondents who constitute 85.76% is Hinduism. And the rest of the respondents believe in Islam. It does not mean that this gender and sexual minority people, i.e. LGBTIQK, are mostly seen in the Hindu

**Figure no. 4.2**



Source: Computed and Prepared by the Researcher<sup>2</sup>.

<sup>1</sup> For details please see Appendix 1.

<sup>2</sup> For details please see Appendix 1.

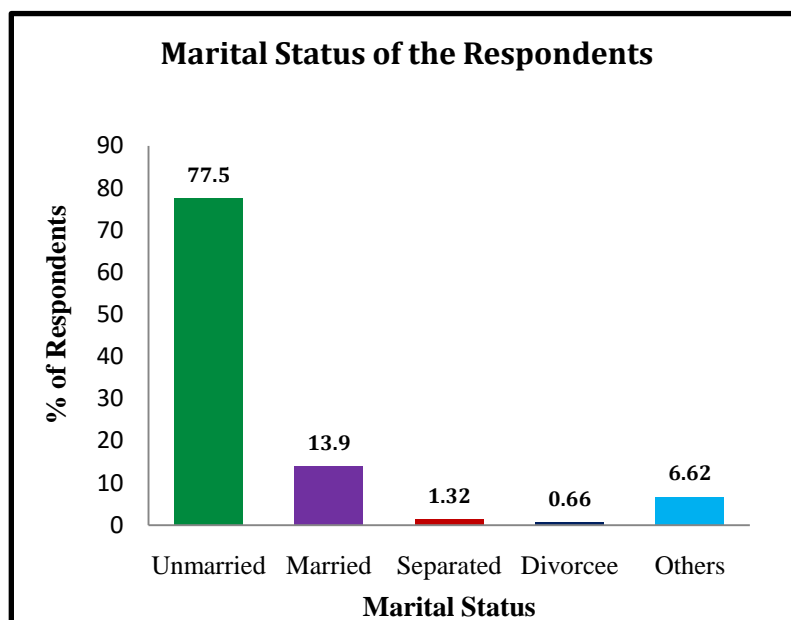


religion. The gender and sexual minority people are found in all religions, but in most of the cases, they do not come out in front of the society. Here in this study, mainly people of the Hindu religion disclose their gender identity and sexual orientation to the society at large and some disclose their gender identity and sexual orientation to the researcher. But only 14.24% respondents belong to the Islam religion (details graphed in fig. 4.2) and they are mainly engaged in 'hijra' occupation.

### 4.3 Marital and Relationship Status:

Marriage is a very important matter in our society. But it is very unfortunate that everybody doesn't have the same opportunity to get married. Gender and sexual minority people fall in this unfortunate group because they don't have the right to marry even now. Exceptional cases are also there. Transsexual people who have already completed

Figure no. 4.3



Source: Computed and Prepared by the Researcher<sup>3</sup>.

their SRS and got their certificate after completion of their surgery get the right to marry. But cruel deprivation lies in the fact that everyone cannot go through this kind of prohibitively expensive and tough surgery. Sometimes the candidate's health does not permit this surgery and often enough lack of money is a formidable obstacle. These apart, there are persons who do not want to change their assigned sex at birth; they are known as kothi and tom boy. So, they also are not eligible for marriage. Thus among all the respondents in this study, only 13.9% are married and 77.5% are unmarried. Another reason for their unmarried status is that no one wants to marry them and accept them socially. So this group of people is very much deprived and discriminated against in our society. Among all the respondents, 1.32% are separated and 0.66% are divorcees (details graphed in fig. 4.3) because everybody spurns

<sup>3</sup> For details please see Appendix 1.

them after knowing their actual gender identity and sexual orientation which fall in the non binary category. Nobody regards them as normal people. And the remaining 6.62% respondents fall in the 'other' category. A member of this category usually lives with a man and thinks that she is married to him. People of this 'other' type are mainly seen in the hijra profession. Sometimes they think that they are married to their Guru Maa and as a token of their married state they wear a nose pin.

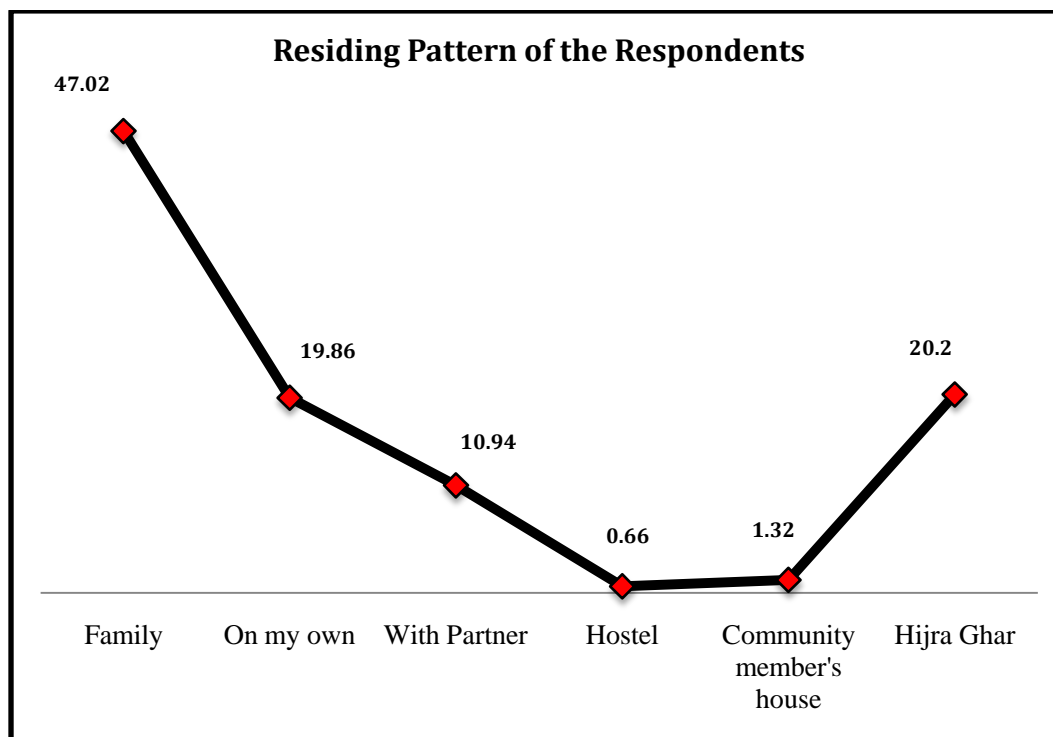
Besides the aforesaid facts, relationships play a very important role in their lives as they do not get any help from home but are neglected and discriminated against in various ways. These groups of people are the common victims of domestic violence and various forms of abuse and neglect from the mainstream society. So relationship is like an open window bringing in fresh air for them. But they can't always disclose the relationships they are in to society or at home though it is a very important thing to them. Since their relationship falls under the non-binary group, society does not accept them very openly, so they prefer to hide their relationship for the most part. Most of the people of these minority groups are seen dating partners because they can't marry their preferred persons. Besides these, some respondents are in polyamorous relationship; actually they are involved in the practice of engaging in multiple relationships, typically sexual, with the consent of all the people involved. They are mainly queer and bisexual persons. Some people are engaged in 'other' type of relationship where mainly hijra people are involved and they sometimes tell that they are in a heterosexual relationship and some of them describe themselves as pseudo heterosexual. Most of the hijra or eunuch people are in a relationship with a man. This is their custom in most of the cases.

#### **4.4 Residing Pattern:**

In most cases, they are subjected to various forms of domestic violence and forced to leave their homes owing to their gender identity and sexual orientation. Most of the respondents have been tortured by their family members. Those who have the ability to leave home and live outside of their home, they do it. Then some people start living alone by renting a house or buying a flat. Here 19.86% people reside by themselves. 10.94% are living separately and living with their partners. Actually among this group living-in relationship is very much common. Since by law they can't marry, they marry socially in their own way and start living together. Besides this, some people of this community reside in the house of other community members because after leaving their home, they can't go anywhere. They stay in the houses

of other community members who give them shelter. According to this study, 1.32% people reside in the houses of the other community members and other 20.2% people live in different hijra ghar-s. Actually that ghar-s are called as 'Daiyar'. This is a local term indicating the place where the 'Guru Maa' of the hijra community lives with their 'Chela-s' or disciples. In most of the cases, when transgender, transsexual, queer, intersex and other non binary people are kicked out from their homes and can't decide where to go and reside, many times hijra ghar and daiyar become their main residing place. Another 0.66% resides in hostels for their study because they constitute the very creamy layer of this gender and sexual minority group and they have progressed a lot in education. Lastly, the remaining 47.02% (details graphed in fig. 4.4) respondents live with their families despite suffering hundreds of atrocities because they don't have any alternative. Some of them don't stay with their families not only because they don't have any other place to live in, but also because their families depend on their earnings. For that reason they don't leave their families despite domestic violence and they never want to leave the family.

**Figure no. 4.4**



Source: Computed and Prepared by the Researcher<sup>4</sup>.

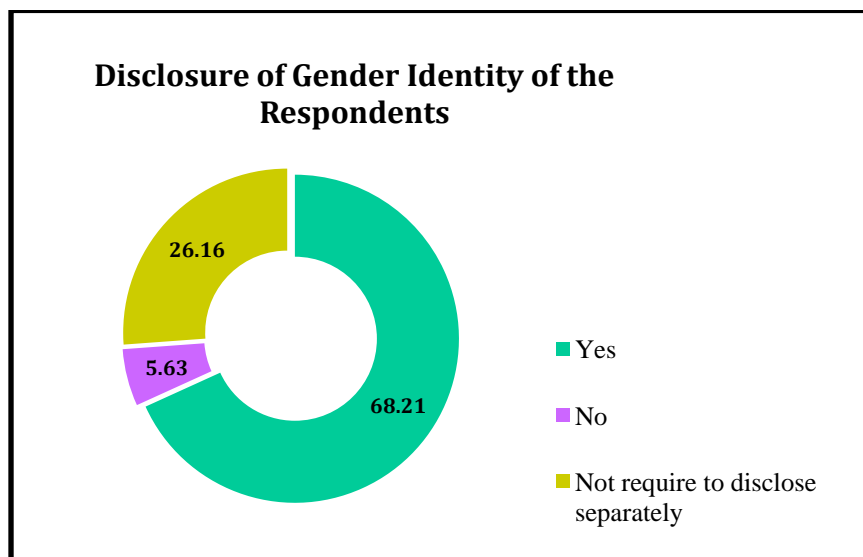
<sup>4</sup> For details please see Appendix 1.

#### **4.5 Family Acceptance and Behavior:**

Home is a part of society. So the thoughts and views of people cannot go far beyond the thoughts and norms of society. Society cannot accept exceptional things easily. Basically everyone follows social norms. People who deviate from social norms are therefore not easily accepted or others are afraid to accept them. In this way, basically, gender and sexual minority people fall somewhat outside the norms of society. Society is afraid to accept the non- binary group of people and leave them as deviant from the society. For that reason, families cannot accept them and are ashamed if children are born whose gender identity does not tally with their assigned sex at birth and who are non- binary and who are not heterosexual. So, the parents of these respondents behave extremely badly towards them.

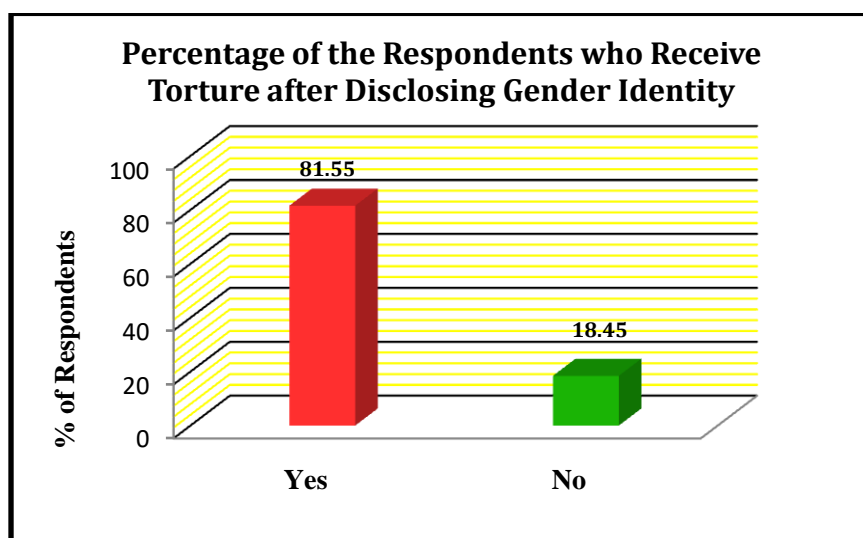
##### **4.5.1 Torture inflicted at home after disclosure of Gender Identity:**

Transgender people often do not want to disclose their gender identity fearing domestic violence. But they are very much visible. So, in maximum cases they are unable to hide their gender identity. Sometimes they have to disclose their gender identity to their close family members or parents and after disclosure the parents and other family members of the respondents cannot accept their gender identity and sexual orientation. Then they resort to different violent activities to change the respondents' gender identity in conformity with their assigned sex at birth. But it is not a matter that can be easily changed, if at all. Then the amount of torture upon the respondents increases day by day. In this study 68.21% people have already disclosed their gender identity, 5.63% respondents do not disclose their gender identity. Actually in most of the cases those disclosing this have been victims of domestic violence and torture. But among the respondents some of them do not require to disclose their gender identity separately. 26.16% people fall in this category who do not require to disclose their gender identity separately (details graphed in fig. 4.5). Lesbian, gay, bisexual and in some cases Queer people are included in this category. They do not need to disclose their gender identity separately because they cannot be seen as different and their gender identity matches with their assigned sex at birth. But their sexual orientation is different from that of binary people which does not come out in the open and they don't look different outwardly.

**Figure no. 4.5**

Source: Computed and Prepared by the Researcher<sup>5</sup>.

Among the respondents disclosing their gender identity, 81.55% people have faced different types of torture and the rest 18.45% people have not experienced anything of this kind (details graphed in fig. 4.6). Of course it goes without saying that sexual minority groups should not be subjected to torture for their gender identity disclosure. Actually 206 people among the 302 respondents disclose their gender identity and among these 206 people, 168 people are (81.55%) victims of domestic violence.

**Figure no. 4.6**

Source: Computed and Prepared by the Researcher<sup>6</sup>.

<sup>5</sup> For details please see Appendix 1.

<sup>6</sup> For details please see Appendix 1.

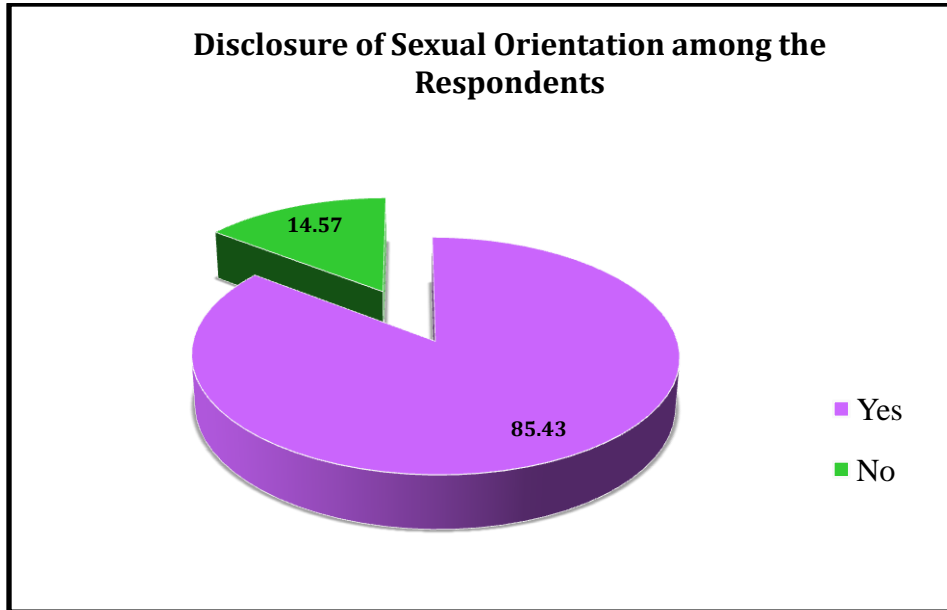
Here is a very important case study and this incident is a horrific example of domestic violence. The person who is the victim in this incident belongs to a gender and sexual minority group. He wants to describe himself as a homosexual queer person. It is the life story of Aniket (name has been changed). In his childhood, his gender expression was feminine and for that reason he was scolded by everyone. He was fond of wearing female outfits. He was fond of wearing his mother's sarees. He faced severe torture at home for these traits. Then he had started thinking of himself as different from everyone. But he found affinities and similarities with hijras from his very childhood. He used to go around with them, eat and drink and do everything with them. Seeing this everyone in the house was very upset with him and the amount of domestic violence was increasing day by day. Unable to bear the violence, this boy left home at the age of 12 and permanently joined a hijra group. He stayed there for several years. He had to discontinue his studies and he received initiation from a guru as hijra. On the basis of sexual orientation, he is a homosexual, gay person. After some years as a hijra, he was requested to go back to his home and his parents. After much thought he returned home to his parents and then again he started and completed his studies. Then he realized that he was not only a homosexual person, but a queer also. Because, on the one hand he was attracted to male persons, on the other hand he was simultaneously attracted to tom boy type female persons. So, he wants to describe himself as a male bodied homosexual queer person. But a strange thing in his behavior is that his gender expression is feminine. But he doesn't disclose it in front of other people because of fears of discrimination. He wears clothes like boys. But he prefers a boy based on his sexual orientation. It is clear that he does not fall under the category of binary group. Gender identity, gender expression and sexual orientation vary widely among the non-binary groups of people. Gender expression, gender identity and sexual orientation are an unambiguous example of this.

#### **4.5.2 Disclosure of Sexual Orientation and Family Acceptance:**

Among the respondents (N=302), 85.43% disclose their sexual orientation and only 14.57% do not disclose their orientation (details graphed in fig. 4.7) and among the total respondents, 77.48% people have been tortured by their family members for their sexual orientation, while only 3.97% respondents have not been tortured and 18.55% people fall in the category of 'not applicable' (details graphed in fig. 4.8) because there are some people who either do not disclose their sexual orientation to their family members or were forced out of their homes at

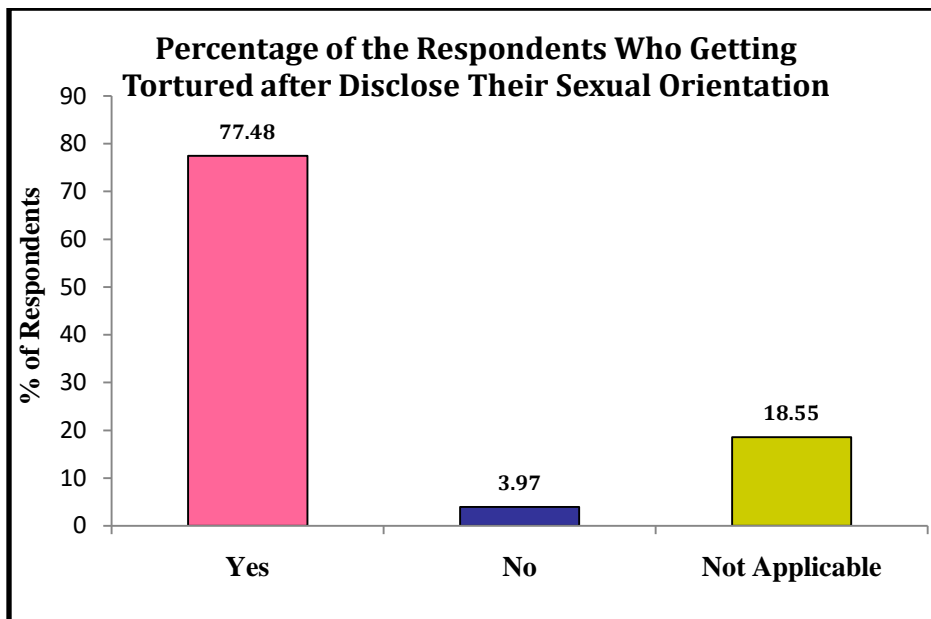
a very young age or handed over to people of the 'hijra' community. For that reason they fall in the category of 'not applicable'. That is, they had no chance of being tortured from home.

**Figure no. 4.7**



Source: Computed and Prepared by the Researcher<sup>7</sup>.

**Figure no. 4.8**



Source: Computed and Prepared by the Researcher<sup>8</sup>.

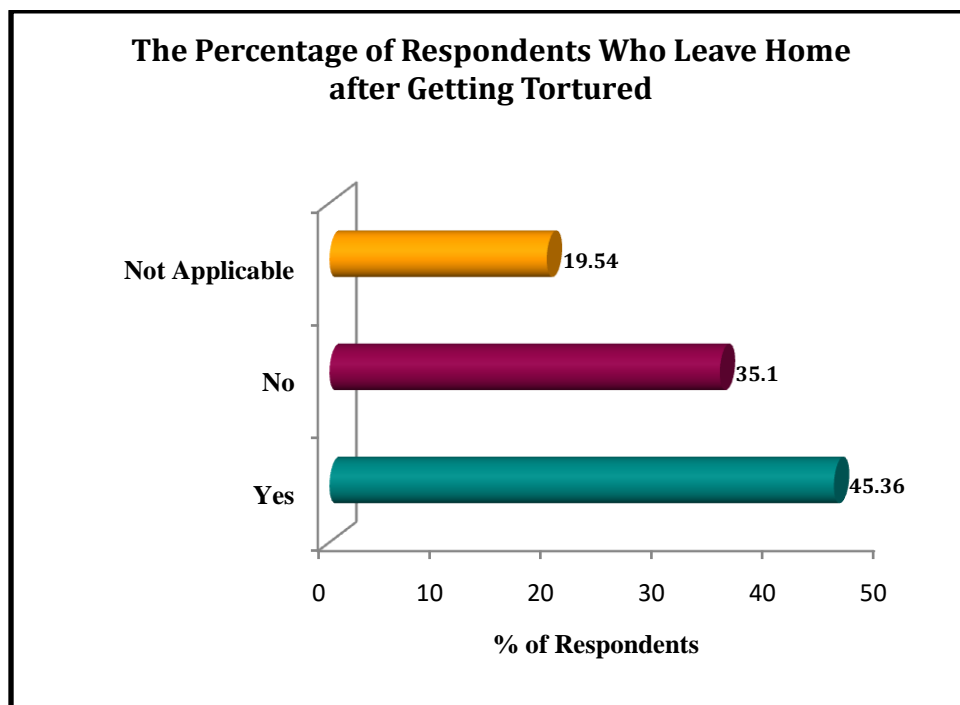
<sup>7</sup> For details please see Appendix 1.

<sup>8</sup> For details please see Appendix 1.

### 4.5.3 Domestic Violence and Being Forced to Leave Home:

The amount of mental and physical torture on these people is increasing day by day. Many times they are forced to leave their homes or they leave on their own because they cannot bear the torture anymore and go and live elsewhere in search of some peace. But there is another problem as in most of the cases no one wants to accept them as tenants. Often they don't even get accommodation on rent in respectable localities. Also, when they want to live with their partner by marrying socially, not legally, they face various problems. So, it appears that socially they are in a very bad way. In this study, from the primary survey it has been seen that 45.36% respondents leave their home after getting tortured and 35.1% respondents do not leave their home in spite of facing a great deal of violence. Besides, some people are there who are not included in either of these categories. 19.54% respondents are in the 'not applicable' category (details graphed in fig. 4.9) because these people either do not disclose their sexual orientation or they do not live with their family as they were handed over to eunuch or hijra people soon after their birth.

**Figure no. 4.9**



Source: Computed and Prepared by the Researcher<sup>9</sup>.

<sup>9</sup> For details please see Appendix 1.



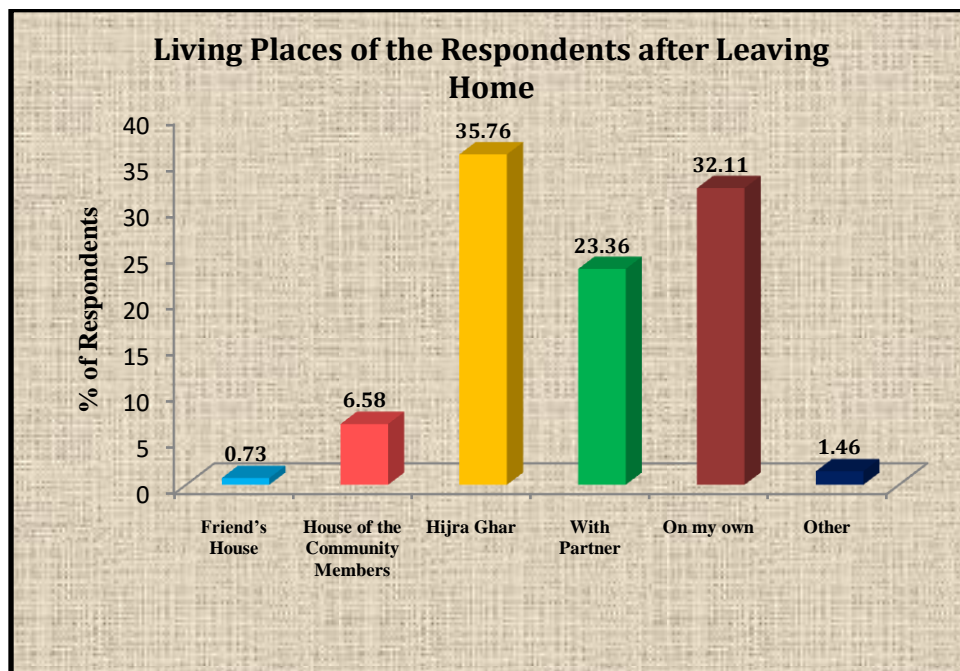
Here is a very important case study that shows how these gender and sexual minority people are forced to leave their homes and live in with their partners. Her name is Keya (name has been changed). She is a biological female. But from her very childhood, she has thought and thinks even now that she is a boy, not a girl. She likes the pronoun 'he' in place of 'she'. He is fond of wearing male outfits. In childhood, his whimsical behavior including dress habits was not generally considered bad, but as he grew older, everyone started feeling uncomfortable as they were unable to accept his behavior. He had to bear a lot of grumbling about this at home. But he couldn't give up his gender identity for all the world. A few more years passed like this. Gradually he gets admitted in college and there he falls in love with a girl who also falls in love with him. This girl feels that Keya is a man. And in that way She begins to love Keya as her boyfriend. But her family doesn't accept this and they mount pressure on her to end the relationship with Keya. Keya's family also doesn't accept this relationship or his boyish attitude and behavior. Keya's family also mounts pressure on Keya to live as a cisfemale. Because of the rigid attitudes of their families, they both leave their families and continue to live together. This typical case acutely illustrates the unbearable situation which compels many people like them to leave their homes and fend for themselves as well as they can.

#### **4.6 Their Condition after Leaving Home:**

After leaving home they usually find themselves in a very bad condition. They cannot understand where they will go in this world. They feel very helpless because they are almost reduced to starving. Then they start looking for people like them who, they expect, will understand their situation and help them in some way. It is seen that they mostly resort to hijras and stay with them. Many also live in the homes of community members, some live with their partners while some somehow manage to rent houses and live alone in their own way. According to this study, 35.76% respondents of those 137 people who leave their home after getting tortured, live in hijra ghar or daiyar, 32.11% live on their own in rented house or buy house or flat, 23.36% respondents live with their partners, 6.58% respondents live in the houses of community members, 0.73% respondents live in their friends' house and the remaining 1.46% live in other different places (details graphed in fig. 4.10), i.e. neighbor's house, shelter home etc. From the entire scenario it is seen that they are very much excluded, indeed ostracized in our society. They are forced to live in this way because their families do not accept them. In this way these gender and sexual minority groups of people become

marginalized in the mainstream society. Therefore in most cases these people are forced to choose the ‘hijra’ profession as their livelihood. They don’t have any other option.

**Figure no. 4.10**

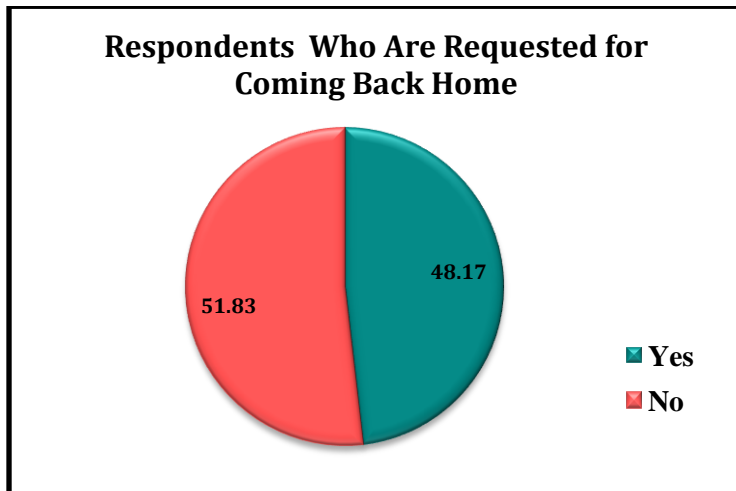


Source: Computed and Prepared by the Researcher<sup>10</sup>.

#### **4.7 Their Importance in Their Families:**

Whether they live with their family or leave their family, in all cases they feel neglected and marginalized. No one loves them. No one wants to understand them. They always feel lonely and helpless. Generally, the family supplies the biggest source of hope and trust for all. But in the case of gender and sexual minority people, families do not act like this. They are always miserable. If they leave their home, no one misses them and the family feels relieved that they are leaving home. These incidents also happen due to the fear exercised by society. In the study, of all respondents 137 people, which is 45.36% left home and among them, 48.17% respondents were requested to return home and the remaining 51.83% respondents were not (details graphed in fig. 4.11). So, not all families are the same and nor are people. Due to their love for their children, some people call them back to their homes and in some cases the family members have to call them back as the family is dependent on that person’s income and not out of love.

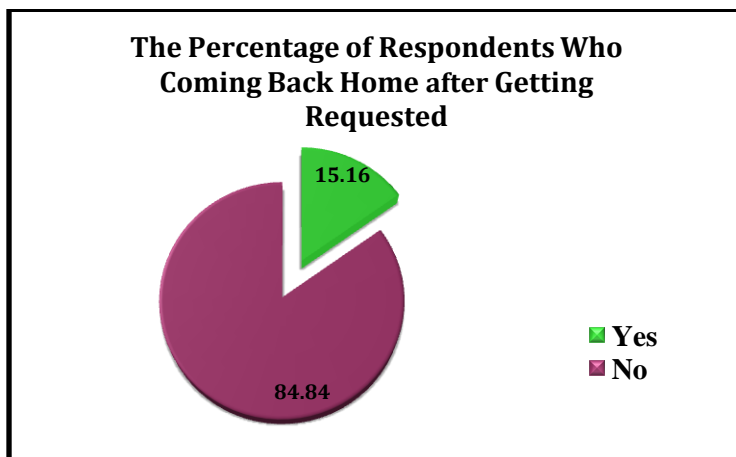
<sup>10</sup> For details please see Appendix 1.

**Figure no. 4.11**

Source: Computed and Prepared by the Researcher<sup>11</sup>.

#### 4.8 Coming Back Home:

Again in some cases it is seen that those who left home do not return despite many requests because they cannot forget the insults received from their families. Sometimes they stay in touch with their families but never think of going back home. They prefer to live apart. In this study, 84.84% respondents do not want to come back home and live with their families. But the rest 15.16% respondents have already come back home and have started to live with their families (details graphed in fig. 4.12). In this case, it can be seen that the mind of their parents and other family members has changed a lot and they have also been able to accept their children.

**Figure no. 4.12**

Source: Computed and Prepared by the Researcher<sup>12</sup>.

<sup>11</sup> For details please see Appendix 1.

<sup>12</sup> For details please see Appendix 1.

## 4.9 Working and Non Working Population:

### 4.9.1 Engaged in Work:

Among all the respondents, 89.74% people are engaged in work while only 10.26% are not (details graphed in fig. 4.13). Those who are not engaged in any work are reading in school, college or university. Among the non working respondents, 41.94% are not doing anything. Actually 13 persons among 31, who are not working, are not doing anything because some of them are married and house wives, some of them were expelled from their home and took shelter in different hijra ghars, but they are still newcomers in this profession which they are yet to enter. They are sheltered till now. Among the aforesaid 10.26% who are not engaged in any work, 6.45% go to school, 35.48% go to college and they not engage in any work other than study and the rest 16.13% are reading in universities (details graphed in fig. 4.14).

Figure no. 4.13

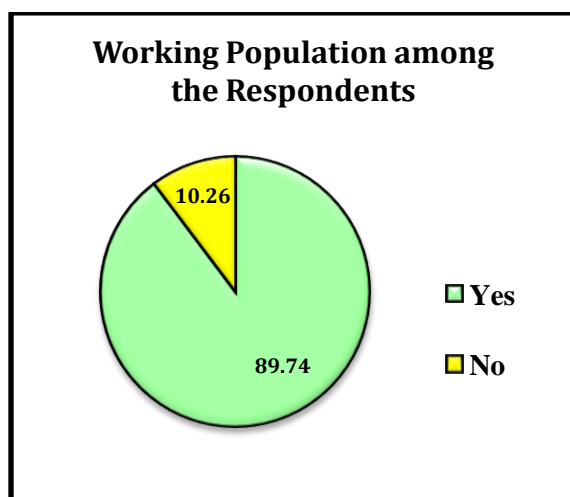
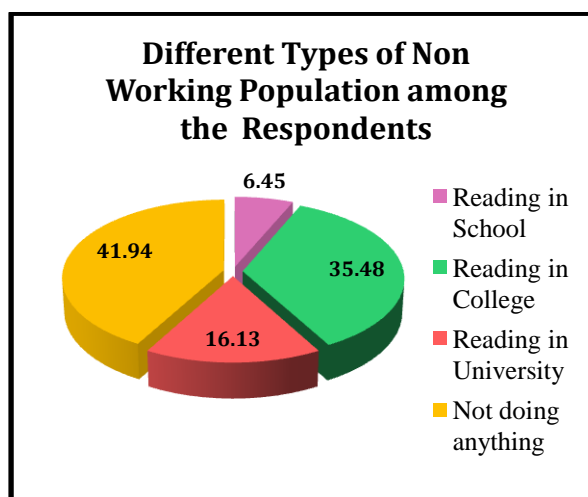


Figure no. 4.14



Source: Computed and Prepared by the Researcher<sup>13</sup>. Source: Computed and Prepared by the Researcher<sup>14</sup>.

### 4.9.2 Livelihood:

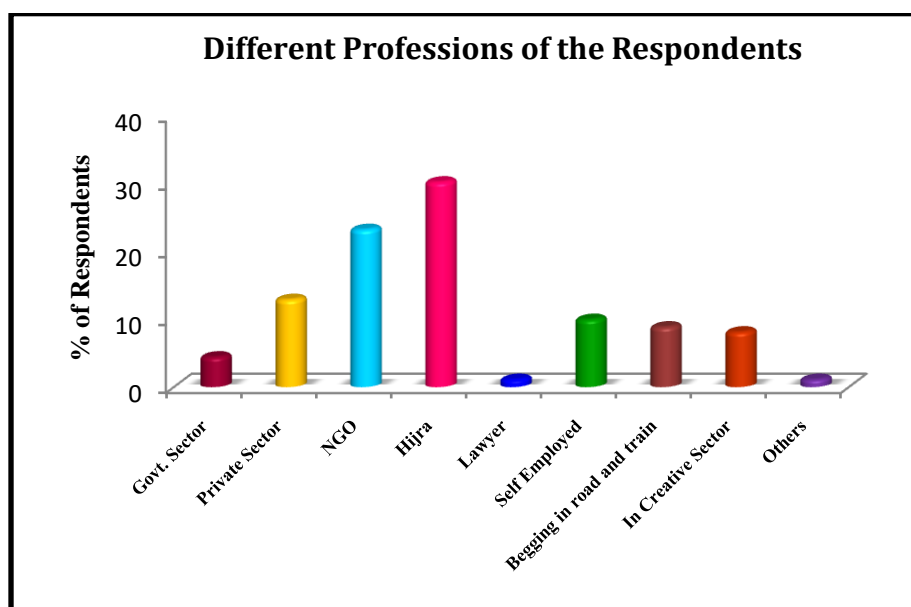
Among them, most respondents are engaged in what's called the 'hijra' occupation. Actually this is the occupation of the eunuch people who go and dance celebrating the arrival of new born babies taking them on their lap and give them blessings. This is called 'Badhai'. Among the respondents 30.25% people are engaged in this occupation. Most intersex, kothi and transgender people take to this profession because in maximum cases they don't have any other option. Besides this, 23.24% respondents are working in different NGOs which work

<sup>13</sup> For details please see Appendix 1.

<sup>14</sup> For details please see Appendix 1.

for gender and sexual minority people because among these minority people, maximum people get help and mental support from those NGOs in every field of their life. Then it is seen that 12.91% are working in different private sector enterprises. But lots of problems, discrimination, avoiding tendency, etc. have been faced by these people in their work places. In spite of that those who don't disclose their gender identity and sexual orientation, face less complications and less discrimination. These people in maximum cases work in the private sector. This apart, 9.97% respondents are self-employed, 8.86% respondents beg in roads and in trains, 8.12% are engaged in creative sectors, 4.43% are engaged in the Government sector and 1.11% are in the profession of law. Some families are very much supportive and give them opportunity to study and for that reason, they can move forward and get better jobs. The aforesaid 4.43% and 1.11% are fallen in this category. And the rest 1.11% respondents are engaged in different types of other occupation (details graphed in fig. 4.15). The bar diagram below shows different types of professions where the respondents are engaged.

**Figure no. 4.15**



Source: Computed and Prepared by the Researcher<sup>15</sup>.

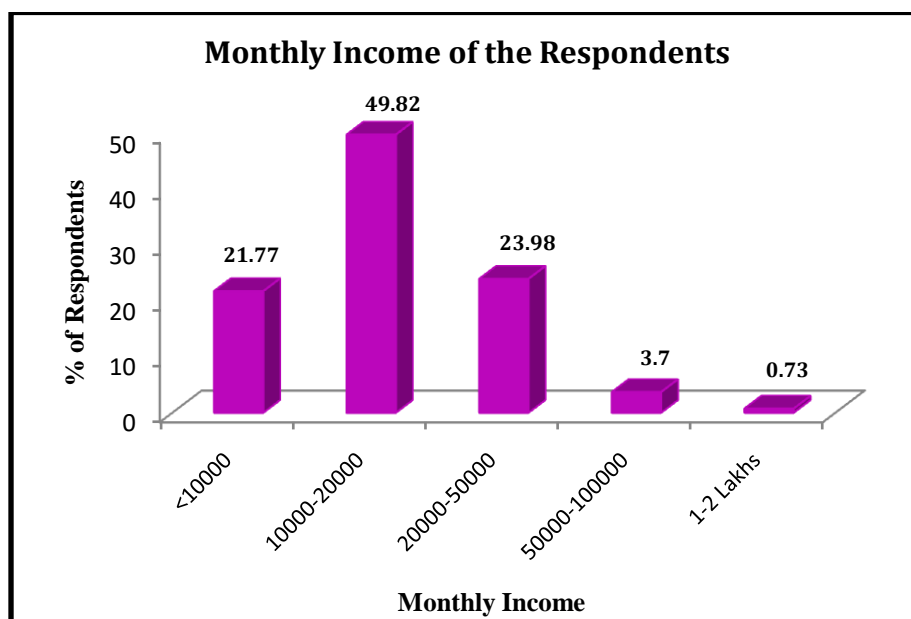
### 4.9.3 Monthly Income:

In the working population, 49.82% respondents fall in the category of the monthly income of Rs10000-20000 because these gender and sexual minority groups of people can't get any job easily. So they work in different NGO-s which are working for them. Most people working as

<sup>15</sup> For details please see Appendix 1.

hijra are in this monthly income group and some people who are working in the private sector are also in this monthly income category. 23.98% respondents are in the category of Rs20000-50000. Most of the government employees, i.e. those working in schools, colleges, administrative sectors, are in this category. Those who are working in valuable or important posts in private sectors, such as owners of the NGOs also fall in this category and Guru Maa of the hijra or eunuch community are also included in this income structure. Then the monthly income of the remaining 21.77% working respondents is not more than Rs10000, they are mainly self-employed, engaged in the private sector and some are working in NGOs. Some hijra people who are engaged in the 'hijra' profession and some transgender and eunuch people begging money in roads and trains are in the category of more than Rs10000 monthly income. 3.7% are in the Rs50000-100000 monthly income category in which mainly some government employees, owners of the NGOs, some Guru Maa are included and the rest 0.73% working respondents fall in the category of Rs100000-200000 monthly income (details graphed in fig. 4.16). Actually the number of this category of people is much less in the gender and sexual minority group because they are very much deprived and discriminated against in every aspect of their lives. So they cannot get proper education and consequently they don't get proper jobs to be able to live properly in the mainstream society.

**Figure no. 4.16**



Source: Computed and Prepared by the Researcher<sup>16</sup>.

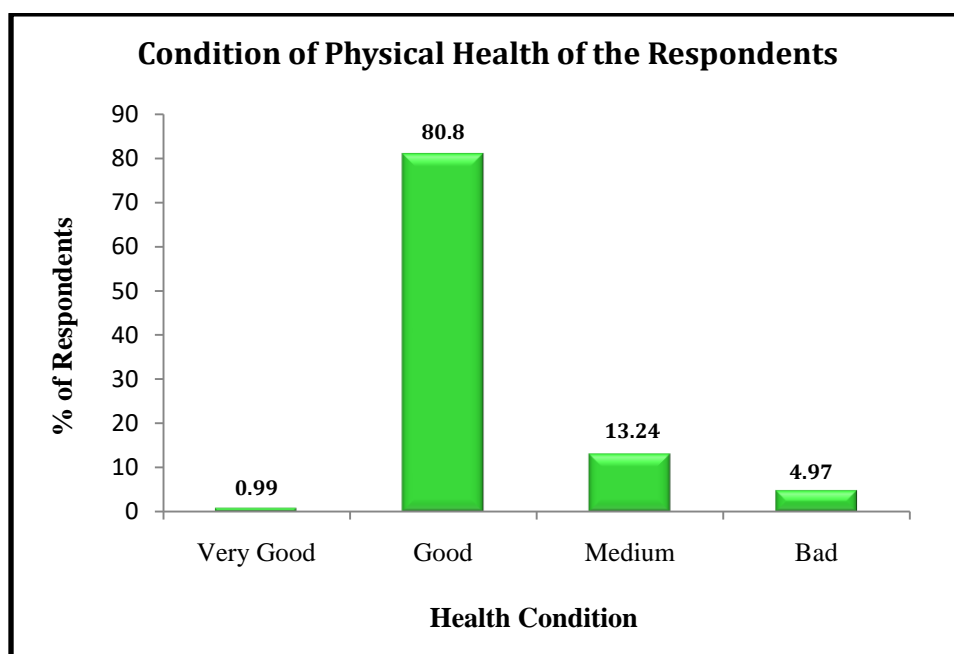
<sup>16</sup> For details please see Appendix 1.

## 4.10 Physical Health Condition:

### 4.10.1 Health Condition:

Among all the respondents (N=302), 80.8% (244 of 302) have said that they have good health. 13.24 % (40 of 302) have medium health condition, 4.97% (15 of 302) have been suffering from bad health condition and lastly 0.99% (3 of 302) has very good health condition (details graphed in fig. 4.17).

**Figure no. 4.17**



Source: Computed and Prepared by the Researcher<sup>17</sup>.

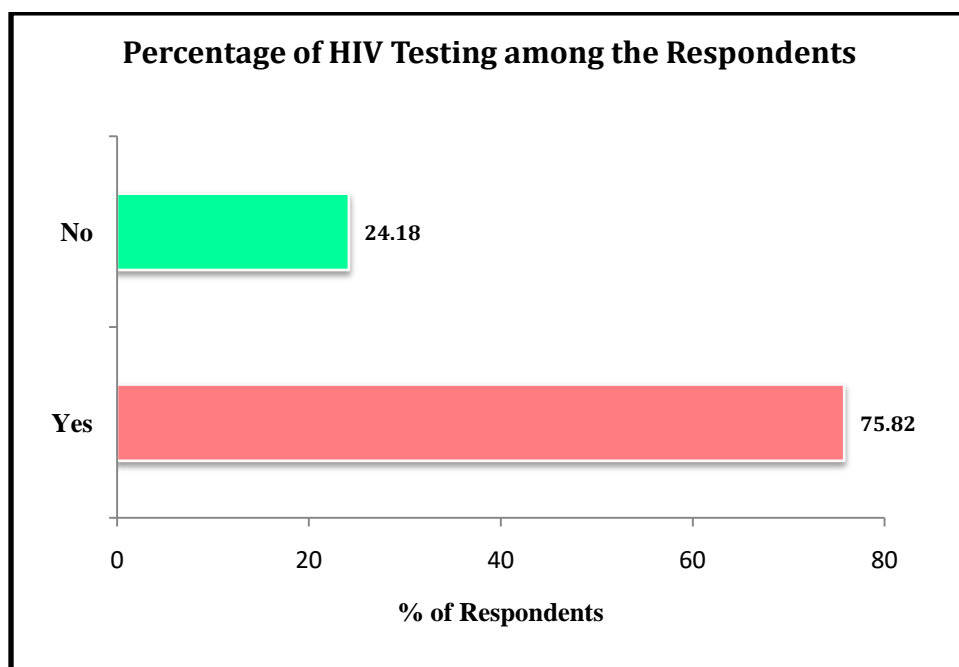
Actually these people go through multiple daily problems, so they don't have much time to think about their physical problems like small fever, cold and cough. Of course, transgender people often pay a lot of money to doctors to achieve harmony between their assigned sex at birth and gender identity by means of medicine or surgery or both. They always try to attain harmony between their body and mind. But it is very difficult and it is a very long journey. But most of the time they don't move backward. It can also be seen that those who are engaged in the hijra profession never go to a doctor. It has been seen in the primary survey that some hijra people said that there is no decay in their body and that they are always fit.

<sup>17</sup> For details please see Appendix 1.

#### 4.10.2 HIV Infection and Awareness among the Respondents:

However, different types of sexually transmitted diseases and HIV can be seen among these gender and sexual minority people. They are much more aware of this because in their life NGO-s plays a very important role. Different NGO-s are working for these minority people, arrange a lot of awareness programs and campaign to make them aware of different sexually transmitted diseases. That NGO-s conduct HIV tests for their members and they also help their members to consult doctors. For that reason it has seen that 75.82% (229 of 302) respondents have been tested for HIV and the remaining 24.18% (73 of 302) have not been tested (details graphed in fig. 4.18). Actually those who have not been tested for HIV are mainly intersex category people and engaged in the hijra occupation. Most of the hijra people surveyed in this study have not been engaged by any NGO. So they are not aware of it.

**Figure no. 4.18**



Source: Computed and Prepared by the Researcher<sup>18</sup>.

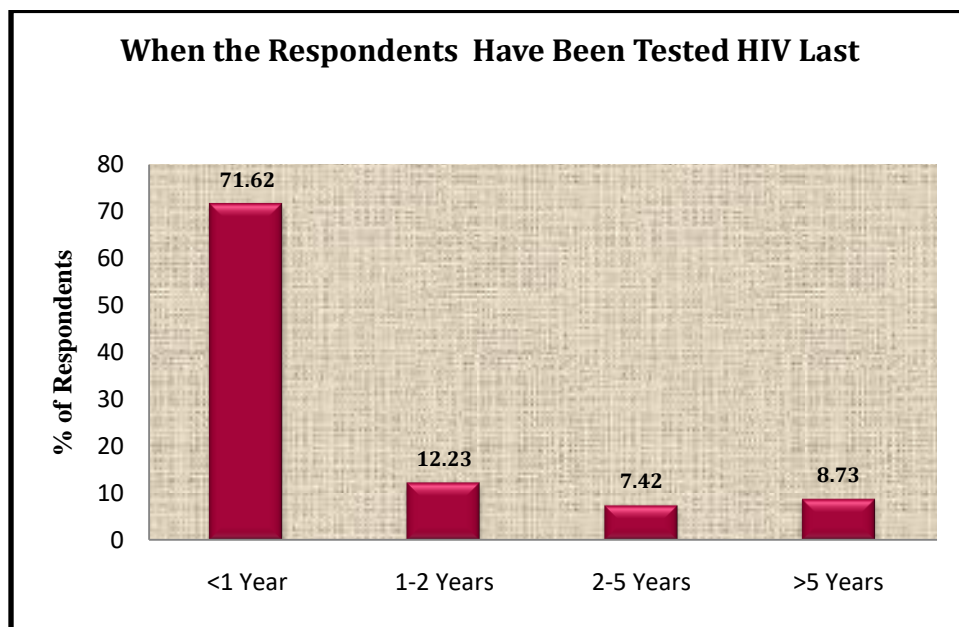
The people of gender and sexual minority groups regularly go through HIV testing with the help of different NGOs. Even if they got tested once in the past, they get tested again and again because their HIV infection rate is very high. Basically, MSM people, men who have sex with men, are at a very high risk of acquiring HIV (McDaid et al., 2016). So, they test regularly and in this study it has been seen that 71.62% (164 of 229) respondents test HIV

<sup>18</sup> For details please see Appendix 1.



within one year and 12.23% (28 out of 229) have tested HIV within one to two years. Then 7.42% respondents (17 of 229) tested for HIV within 2 to 5 years and the remaining 8.73% (20 of 229) respondents 5 years ago (details graphed in fig. 4.19). So, from this data it is seen that not everyone in this gender and sexual minority group is aware of this yet.

**Figure no. 4.19**



Source: Computed and Prepared by the Researcher<sup>19</sup>.

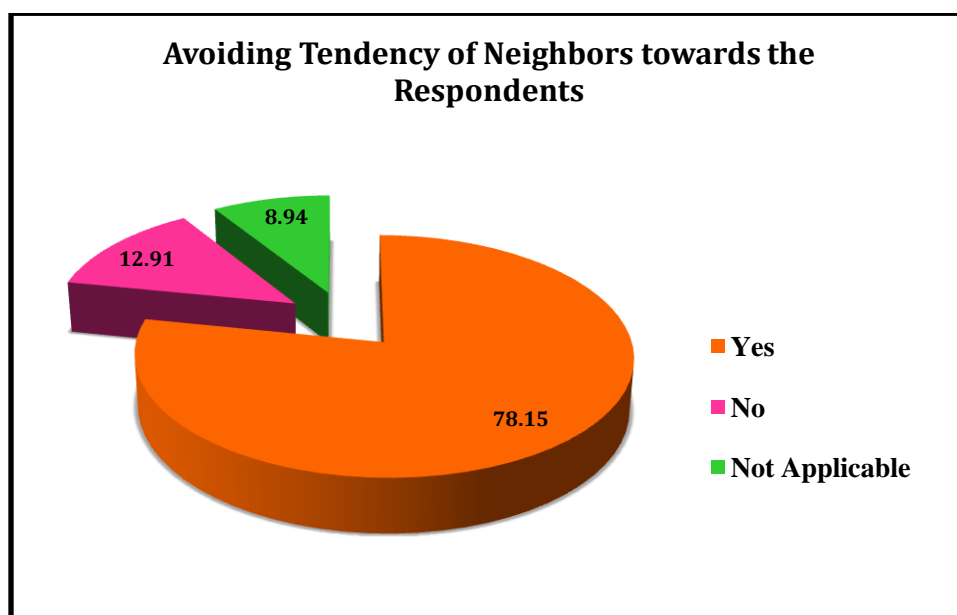
#### **4.11 Neighbor's Attitude:**

The same thing comes up again and again; people love to go along with the flow. Everyone is afraid to go against the flow. When a person does not want to be accepted by his parents, how will his or her neighbor accept him? Neighbors are also a part of society. That's why they hate them and don't want to accept them. Neighbors do not invite these people to their homes on any occasion. They think that their children will become like them by mixing and making friends with those people. But those neighbors cannot understand the fact that mixing with someone doesn't change anyone. This gender identity and sexual orientation are entirely an internal matter of the mind. But in most cases it is not possible to convince the neighbors or they do not convince themselves. So, they in maximum cases avoid those persons who belong to non binary groups and in this study it has been seen that 78.15% respondents were avoided by their neighbors. Only 12.91% respondents are not avoided by their neighbors (details

<sup>19</sup> For details please see Appendix 1.

graphed in fig. 4.20). Maximum eunuch or hijra people fall in this category because they are very well accepted and respected by their neighbors where they live. Actually Hijras are much more accepted among Muslims and they live mainly in Muslim oriented area. The remaining 8.94% respondents fall under the category of ‘not applicable’ because they have not specifically disclosed their gender identity and sexual orientation to anyone, so they are seen by their neighbors as common heterosexual cisgender people. For that reason, it cannot be said that they are avoided by their neighbors because of their gender identity and sexual orientation.

**Figure no. 4.20**



Source: Computed and Prepared by the Researcher<sup>20</sup>.

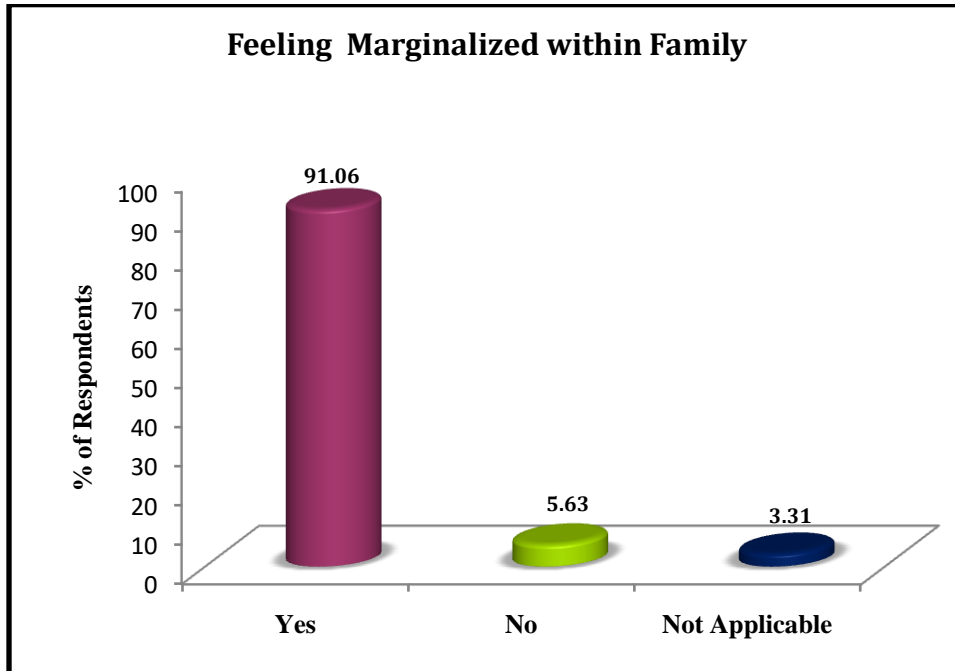
#### 4.12 Marginalization within Family:

It has been seen in most of the cases that they don't have any supportive persons from their family. In most of the cases community members play a very important role in their lives. Community members also give support to them and act as a refuge for them. In most of the cases parents of non binary group of people get ashamed of their children. Here 91.06% parents of the respondents were ashamed of their children's gender identity and sexual orientation and they feel marginalized within their family. This is the life story of most of the gender and sexual minority people. On the other hand, 5.63% respondents do not feel marginalized within their family because either they did not disclose their gender identity and

<sup>20</sup> For details please see Appendix 1.

sexual orientation to their parents or else their parents are so good that they love their children despite accepting everything. The remaining 3.31% respondents fall in the category of not applicable (details graphed in fig. 4.21) because they were basically kicked out from their parents at a very young age and grew up with hijra people and that's why they have nothing to call home. So, there is no question of staying marginalized within their houses.

**Figure no. 4.21**



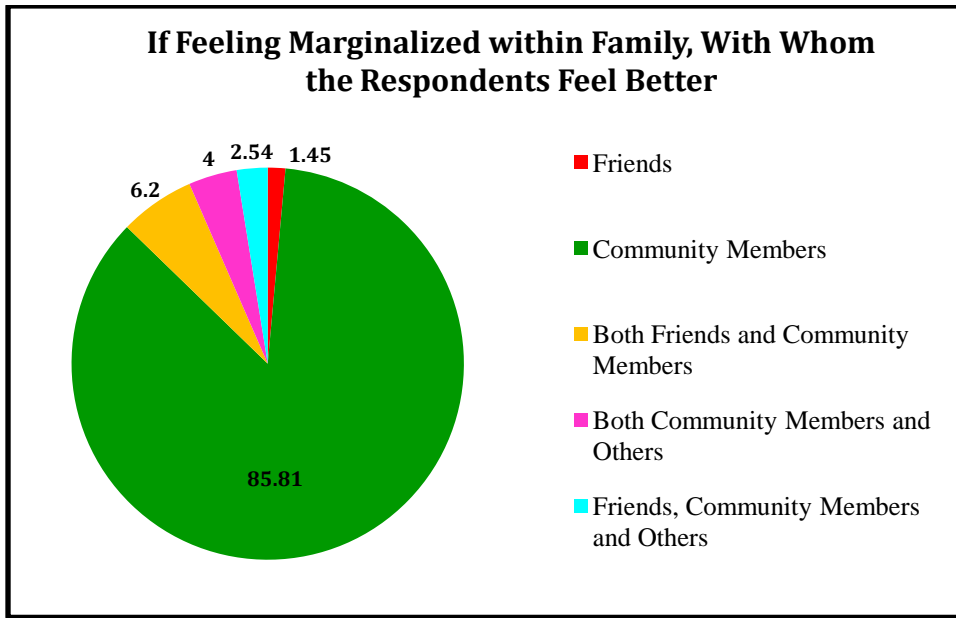
Source: Computed and Prepared by the Researcher<sup>21</sup>.

#### 4.13 Their Comfort Zone:

They feel marginalized within their family and by talking with the community members they find people near their heart and for them the latter fulfill the roles of their parents, sister, brother and friends and all this within the community (85.81%). From the below diagram (details graphed in fig. 4.22), it is seen that they feel better with only their community members because those community members are in the same position as they are.

<sup>21</sup> For details please see Appendix 1.

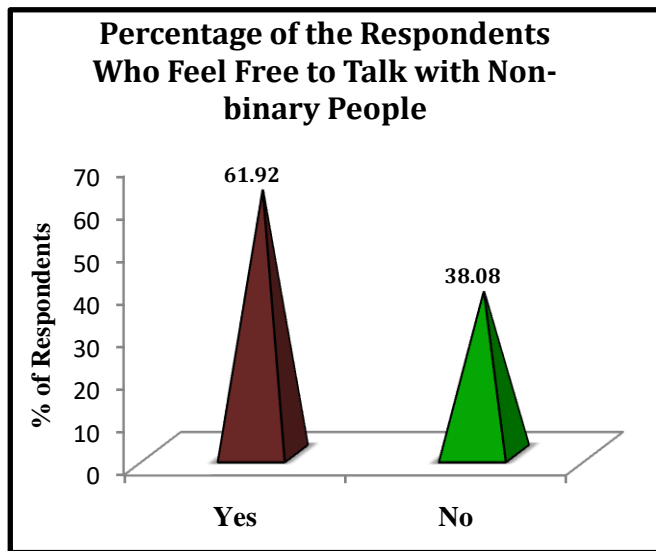
**Figure no. 4.22**



Source: Computed and Prepared by the Researcher<sup>22</sup>.

In maximum cases, it has been seen that those people do not feel free to talk with people of cisgender and binary groups and they feel comfortable with the community members. Among all the respondents, 38.08% don't want to talk freely with cisgender and binary groups of people. Mainly the respondents who have been engaged in the 'hijra' profession and some kothi and transgender people fall in this category. Actually, they mostly have a lot of anger

**Figure no. 4.23**



Source: Computed and Prepared by the Researcher<sup>23</sup>.

towards the people of mainstream society. But 61.92% respondents feel free to talk with other binary groups of people (details graphed in fig. 4.23). Because it has been found that they are

<sup>22</sup> For details please see Appendix 1.

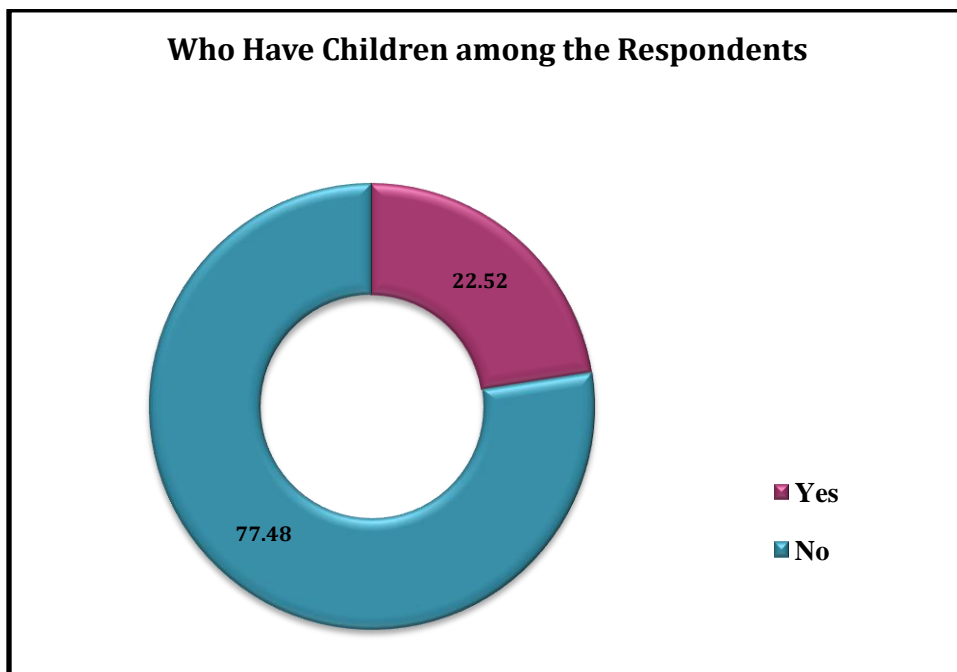
<sup>23</sup> For details please see Appendix 1.

mainly involved in activism and they are in maximum cases are educated, so they don't shy away from talking to others.

#### 4.14 Having Children:

These people are victims of deprivation from all sides and they even cannot marry legally. And people from gender minority groups cannot have children due to their physical health. The people from sexual minority groups also cannot conceive and they also can not marry legally. So, they have hardly any chance of acquiring biological children. But it is seen from this study that some of the respondents have children. 22.52% respondents have children and the rest 77.48% don't have any child (details graphed in fig. 4.24).

**Figure no. 4.24**

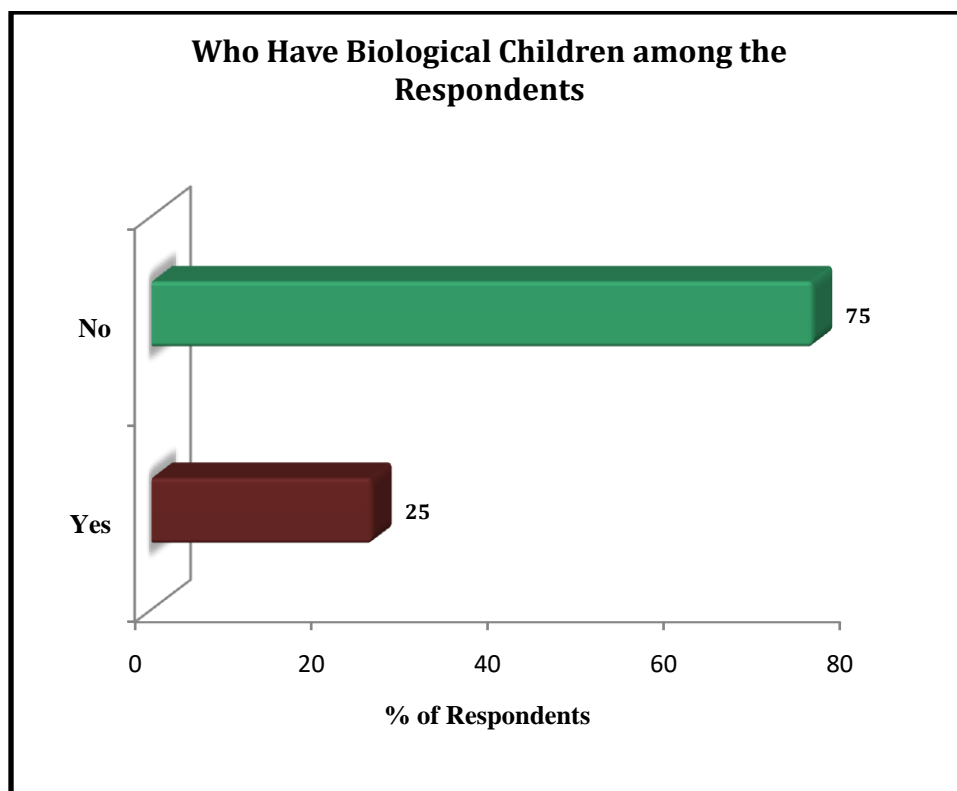


Source: Computed and Prepared by the Researcher<sup>24</sup>.

##### 4.14.1 Biological Children or Not:

But it is the most important question: from where have these children come? Are they their biological children? The answer is 'no'. Actually among those who have children, only 25% respondents have their own biological child and the rest 75% don't have their own biological children (details graphed in fig. 4.25).

<sup>24</sup> For details please see Appendix 1.

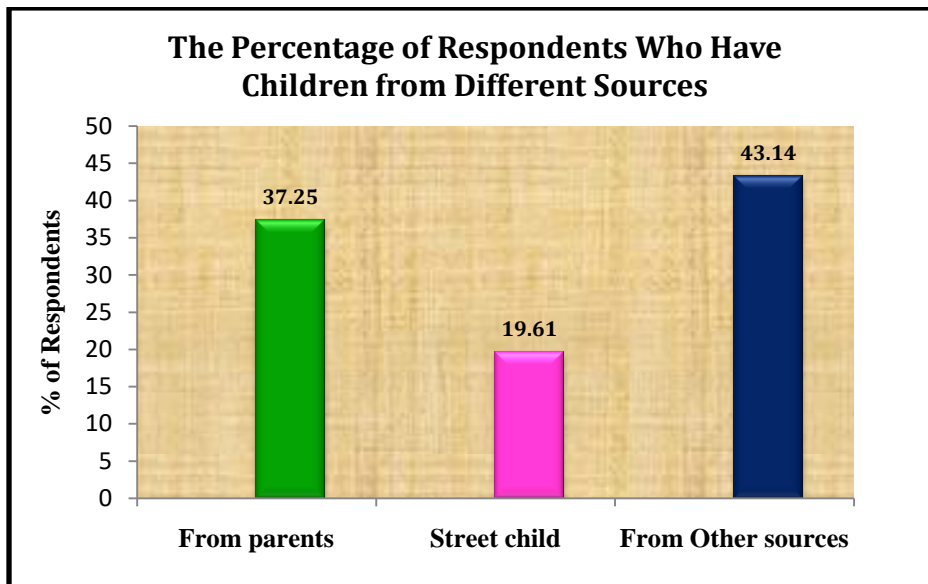
**Figure no. 4.25**

Source: Computed and Prepared by the Researcher<sup>25</sup>.

#### 4.14.2 From Where Do They Come:

Their children are mostly adopted. In different cases it has been seen that many parents give their children away because of their poverty and some of the children are picked up from orphanages and sometimes children abandoned in the streets or other places are taken in and brought up by them because they are fond of children and give them all the love and affection that children need. It has been seen from this study that 37.25% respondents have tested parenthood since the biological parents of those particular children could not nurture their offspring due to sheer poverty. Besides 19.61% respondents have also tested parenthood by adopting street children as their offspring and the remaining 43.14% respondents have received custody of children from some other sources (details graphed in fig. 4.26). Often it is found that the biological parents of the intersex children have voluntarily surrendered the custody of their offspring to hijra people.

<sup>25</sup> For details please see Appendix 1.

**Figure no. 4.26**

Source: Computed and Prepared by the Researcher<sup>26</sup>.

#### 4.14.3 An Exceptional Case Study:

An exceptional case study needs to be mentioned here. Here is the story of a transgender who became mother and father at the same time. There was a girl whose name was Sukanya (name has been changed). He thought herself as a man always. Actually he was a transgender male person. But she could never tell anyone about it at home. But the people of her house could have guessed something from her behavior and clothes. So they quickly arranged her marriage. But Sukanya was not all like this marriage. She objected a lot but no one listened to her. At last she was forced to do this marriage. As Sukanya was physically a girl, so they have a son in this loveless marriage. But she can't adjust to this marriage at all. Once she left the marriage behind and came out by force and her life anew. Sukanya loved a girl in her college life. After coming out of the marriage, she started living with the girl along with her biological son. And since then Sukanya became the father of his son. In this way his male identity survives and he lives anew. This is how a mother becomes the father of his son. This is a very inspirational case study.

So far the socio-economic conditions the people of gender and sexual minority group has been discussed and now is the time to discuss hijras. Their origin, type of work, their socio-economic condition, and all these things are discussed in detail below.

<sup>26</sup> For details please see Appendix 1.

#### **4.15 Hijra – A Distinct Cultural Group:**

Hijra-s are an entirely separate group. However, this group is mainly based on their occupation. Those who take up this profession as an occupation within this LGBT IQK group are called Hijra-s. Questions like who take up this profession, how they come into this profession, how they grew up, their social structure, culture, rituals, are discussed here in detail. But it can be said that not all LGBTIQ people are hijra, but most of the hijra-s belong to this LGBTIQK community.

##### **4.15.1 Their Identity:**

Hijras have a specific place in our Indian society. They are believed to give blessings. They are believed to hold the power of bringing riches and rain (Conner et al., 1997). ‘Hijra’ is an ‘Urdu’ word which denotes eunuch or hermaphrodite person. But now the word ‘hijra’ means a born hermaphrodite who dresses as a female or is born as a male and undergoes a surgical procedure which is known as ‘emasulation’. They are also known as ‘kinnar’ or ‘mukhannis’. The term ‘Ali’ is also used in Tamil Nadu to refer to transvestites, eunuchs, transsexuals and hermaphrodites. Besides these, the term ‘zenanas’ is also used to refer to those persons who are cross dressing male homosexuals (Bockrath, 2003). The term ‘hijra’ is related to a special kind of profession. Those who take to this profession are called hijra. Actually they are effeminate men who are dressed like a woman. Physically they are neither men nor women.

##### **4.15.2 Definition:**

According to West Bengal Transgender Persons Development Board, hijras are a clearly defined secluded community under the active guidance of their gurus in their community, they strictly follow a completely different societal norm and ‘Gurus’ enjoy absolute power over every aspect of their life (Department of Women & Child Development and Social Welfare, n.d.). According to Serena Nanda (Nanda, 1998), the hijras are a religious community of men who dress and act like women and whose culture centers on the worship Bahuchara Mata. Hijra-s are androphilic (sexually attracted to adult men), typically sexually receptive, transgender, sometimes castrated, and live in fictive kinship networks that are hierarchically organized (Stief, 2017). According to Dr. Piyush Saxena (Saxena, 2011), a eunuch is a person whose gender identity does not conform unambiguously to conventional notions of male or female roles and who has a dysfunctional male or female reproductive



system and such a person combines the qualities of each to a varying degree with a predominantly female psychological identity and follows the tenets of a eunuch lifestyle.

#### **4.15.3 How and Why They Enter the Hijra Profession:**

There is a great deal of curiosity about the hijra-s or eunuch people. People of the mainstream society always hate these people, but no one wants to know how they become 'hijra' or 'eunuch' or why they enter this profession. This chapter will seek the answers.

Every human being is born with certain characteristics. This is the law of nature. Every child has his/her different characteristics. Some children are born with various physical disabilities, especially deformities in their genital parts. They are called intersex children. Most parents don't want children of this kind. Then in many cases the parents want to somehow get rid of such children to save their social position. Sometimes the family members or the parents themselves go and dump them in a remote neighborhood or a dustbin or sometimes they handed over their intersex children to the hijra people and implore them to hide the parents' identity from their children. This is very unfortunate. Then those children grow up in the hijra ghar with the help of senior hijras or eunuchs. After becoming adult those children also join the eunuchs' profession and earn money.

Here it must be stated that it is not only intersex people who become hijra or take to the 'hijra' profession. Lots of transgender people also join hijra groups for earning money and live with the community. The definitions and the characteristics of transgender people are already known to us. It is well known that transgender persons are segregated and neglected by their family members, neighbors and other people. So they become stigmatized and face bullying in public places and schools. So, they don't feel free anywhere. Therefore, when they don't know how to survive and are forced to leave their own home, they go to the 'hijra ghar' and find a shelter there. In this way, some transgender people end up in hijra groups.

Besides these, there are also transsexual people in their groups. 'Transsexual' means that they are converted to male or female with the help of Sex Reassignment Surgery. So, it is obvious that they are anxious to join the gender binary groups. But it is very unfortunate that no one accepts them as male or female. People of the mainstream society always deride and malign them. So these transsexual persons feel lonely and estranged. In maximum cases, they are not accepted by their families. When they are turned out of their homes, they go to the hijra community to live with them who are like them in body and mind. In this way, transsexual people join the hijra community.

Besides these, some homosexual people also join this group. Especially gay people sometimes join the hijra community as they are also often ejected from their homes by their families because of their effeminate nature, expression and clothing. So, in order to find a refuge and earn a living they join the eunuchs. They also face bullying and numerous other hindrances in their educational life and search for employment. Actually it's mainstream society which forces them to become hijra or eunuch.

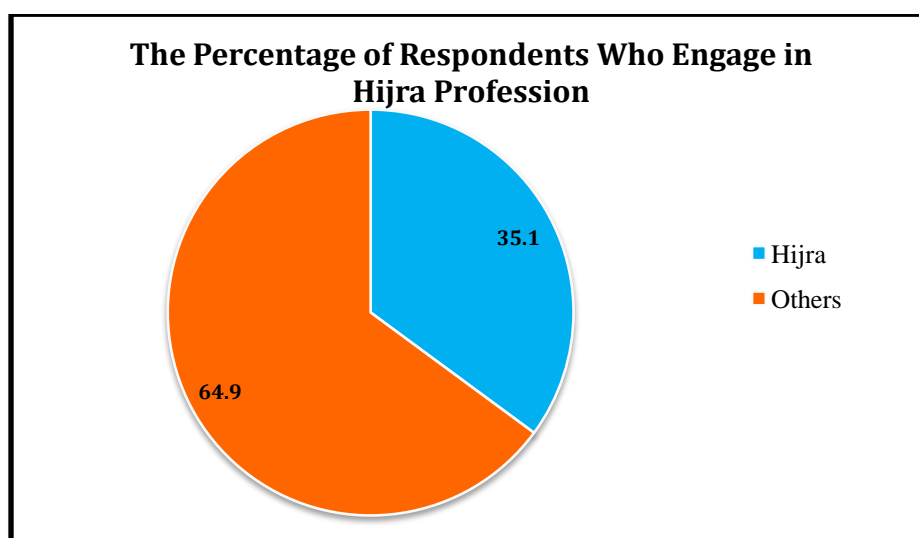
Actually different types of persons are included in the hijra groups. Koti or kothi or effeminate men are the kind of persons who also join this group. Because of their effeminate nature and clothing, they face a lot of problems in our society and therefore they go the community and join with them.

Everybody wants to enjoy their freedom and get respect. But unfortunately the gender and sexual minority groups of people don't get affection and respect from the mainstream of our society. They also want to live with the mainstream society. But the latter don't accept them as human beings. So, they have to live their life as marginalized people in our society and as they have no other options, they are forced to choose the hijra profession as their livelihood.

Many people have such lives. Some of these notable case studies have been discussed here.

Here in this study, it has been found that 35.1% respondents in this gender and sexual minority categories are associated with the hijra profession (details graphed in fig. 4.27). Actually among 302 respondents, only 106 respondents are engaged in this profession.

**Figure no. 4.27**



Source: Computed and Prepared by the Researcher<sup>27</sup>.

<sup>27</sup> For details please see Appendix 1.

#### 4.15.4 Case Study:

In most cases it is seen that these gender and sexual minority people enter sex work or the hijra profession instead of any other profession. The reasons are various but one particular case is very touching. Her life story is discussed here and she is such a person whose life is now being talked about. She was very much uncomfortable with her genitalia from a very young age and couldn't understand if she was a boy or a girl but loved dressing up in sarees and other feminine dresses like other girls. But the parents thought of her as a boy, they wanted the boy to be like boys. But Alkananda (name has been changed) only liked to wear girls' dresses and act like girls, but she was an eyesore to her parents and neighbors. As a result she had no friends and no one spoke to her well at home. Even in school she was subjected to various kinds of bullying and torture, so she was afraid to go to school and she felt alone everywhere. As a result, she gradually sank into depression. In such a situation she could not and did not consider anyone as her own and she regarded everyone as an enemy. She would occasionally see the hijras come to their neighborhood and she gradually distanced herself from the mainstream society and felt a sense of solidarity or emotional friendship with the hijras. Meanwhile, she stopped going to school because of bullying and torture and the incidents of domestic violence increased. Because of all this, one day she leaves home and takes shelter with the hijras among whom she finds the only friends she can feel solidarity with. Then growing up with them and adopting their rituals and feeling a sense of solidarity in their company, she gradually involved herself in the hijra profession. However, while in this profession, she undergoes sex reassignment surgery and becomes completely physically female from male, achieving at last her satisfaction. This is the real reason behind most people entering the hijra profession.

Another name is Taniya (name has been changed). She lives in the hijra patty or hijra ghar (shown in photograph no. 4.i). She doesn't know her parents because she was handed over to her Guru Maa at a very young age. Because there was a problem in her genitalia and because of the shame felt by her parents, they handed over her to the hijras. So she brought up by her Guru Maa and she knows this Guru Maa as her mother. Taniya loves her very much. Now Taniya is 24 years old and she has already entered this profession. But she has regrets about her life. If she could have stayed with her parents, if her parents had accepted her, she could

Photograph No. 4.i: Taking Interview of a Hijra Person



Source: Captured by the Researcher.

have then continued her studies and not come to this profession today, maybe she would have had a good job like everyone else. Her life would have been different like those of the other people in the mainstream society.

#### **4.15.5 Their Previous Life:**

As they embrace femininity from the core of their heart, so from their very childhood they are fond of wearing female outfits and jewellery and their gender expressions are also feminine in nature. Thus, even as children they always face bullying. They do not get any love and respect from any part of the society and their families and consequently they start feeling alienated from that society and family. Because of their segregation they start looking for and find those persons who are very much similar to them in body and mind. Sometimes they meet different transgender, transsexual and hijra persons and they join their community and they get likeminded friends. Sometimes, they get to know about different various dance programs held in Uttar Pradesh and Bihar where feminine male persons of these kinds are hired for dancing. Thus some of them go there and meet different transgender and castrated persons. There are two seasons of such dance festivals – ‘chota lagan’ and ‘boro lagan’. The ‘boro lagan’ is held in the months of April and May and the ‘chota lagan’ is held in the months of November and December. At that time they perform their dance there and earn money. Sometimes they fall in love there and enjoy their lives fully. Here they feel entirely free to express their femininity with greater abandon than ever before. ‘Guru- chela’ relationships are important here. Then they feel that their lives will not always be like this. They also feel that in their life youth will pass and old age will come one day. They have to settle down in a place where they will get respect and live peacefully for the rest of their lives. Then some of the people have decided to come back to their own states and join the hijra groups and become a disciple or chela of a hijra Guru or Guru Maa.

#### **4.15.6 Social Hierarchy in Hijra Society:**

‘Hijra’ is a special community which is completely guided by Gurus. Gurus are strictly followed by their disciples in this hijra society. Hijras have a special place in Indian Society. Hierarchy is strictly maintained in the hijra society. The total hijra society is divided into different dynasties or houses and these are called gharanas. Each and every gharana is headed by a Naayak and those persons are the primary decision makers of the gharanas (Singh & Kumar, 2020). There are a number of ‘Gurus’ in each gharana. Here ‘Guru’ means teacher and they act under the guidance of their ‘Naayak’ and each ‘Guru’ may have a number of

‘Chelas’. ‘Chela’ means disciple or follower who learns different customs and rituals of hijra society from the ‘Guru’. Besides these, relationships of different kinds are there in the hijra society. Actually they left home and they don’t have any relatives and friends in their lives and they can’t rely on their parents, either. So they enter into different relations with the hijras. From the primary survey it has been seen that among the chelas or followers, the person of the Guru Maa is everything to them, their mother and sometimes their husband also. This is what they adhere to. This implies that when the Guru Maa dies, they kind of become widows. They consider all the relatives on the side of their Guru Maa as their in-laws. Then a ‘widow’ accepts another Guru as their mother and calls her ‘dudh maa’. These apart, other relationships are also there, such as the relationship with the ‘naani’. The guru of gurus is referred to as ‘naani’ or grandmother and sisters of guru maa are called maternal aunt or maasi.

#### **4.15.7 Modes of Dressing:**

Those people who join the community of eunuchs or hijras are characterized by feminine gender expressions in most cases. They wear feminine clothes, jewellery and arrange their hair in a feminine style. Generally they wear gorgeous feminine outfits, specially sari and salwar- kameez. They wear nose rings and ear rings. They also use ‘sindoor’ as a married woman. They are fond of all these feminine outfits. Some hijras who are mainly referred as ‘Maha-Guru’ or ‘Nayak’ always wear white dress after performing hajj (Mithani & Burfat, 2003).

#### **4.15.8 Marriages and Relationship:**

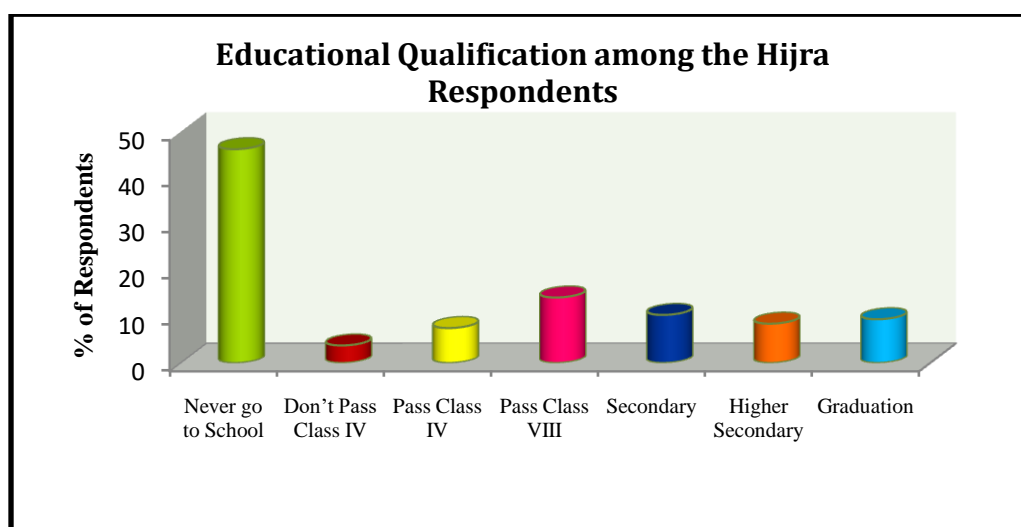
Hijra or eunuch people are generally feminine in nature so that they always want people to refer to them as women and prefer the pronoun ‘she’ instead of ‘he’. They always want to be a wife and do different household chores as other married women do. They want to build a relationship with a man like a woman. They sometimes live with that person. Sometimes those males do have another family. For that reason hijra people who enter into a relationship with a man may be called pseudo heterosexual. Because of their relationships with a man they are also referred to as homosexual and that male person is called ‘Girya’ (Mithani & Burfat, 2003) or ‘Giriya’ (Hall, 2005). These persons are also called ‘panthi’ and they are mainly bisexual in nature and most hijras are androphilic (Stief, 2017). It is seen from the field survey that not only do they have this kind of relationship, but some hijra persons have also been engaged in other types of relationship. They may be attracted to any other gynophilic non binary person.

#### 4.15.9 Education and Employment:

They are always very backward in terms of education. As they are handed over soon after their birth to hijra communities, from the very first day they become the victims of untouchability and they don't get a chance to study and go to school. Even if anyone manages to overcome these hindrances and go to school, that person becomes the victim of bullying and is forced to drop out. Some kothi or transgender persons who are generally feminine in nature are also victims of discrimination and negligence. Those who don't have any problem in their genital parts are also forced to leave their homes because of their feminine expression and nature. They are also the victims of bullying in homes and in educational institutions. For that reason, they also can not complete their education and most hijra-s are uneducated. So they don't get any job and they have to enter the hijra profession because they don't have any other option.

From the graphical presentation below it is clear that 46.23% of people in this category have never attended school. Besides these, 3.77% respondents in this category could not pass class IV and only 7.54% hijra people passed class IV and only 14.15% people fall in this category who passed class VIII. All of them are victims of drop out. Although the percentage of illiterate person is high among them, but some comparatively educated people are also in this profession. So that, it has been seen in this study that 10.38% respondents have passed in madhyamik examination and 8.49% respondents of this category have passed higher secondary examination. Some graduate people are also in this profession. But the percentage is only 9.44% (details graphed in fig. 4.28). However, mainly intersex people come in this profession and among them the rate of illiteracy is high.

**Figure no. 4.28**

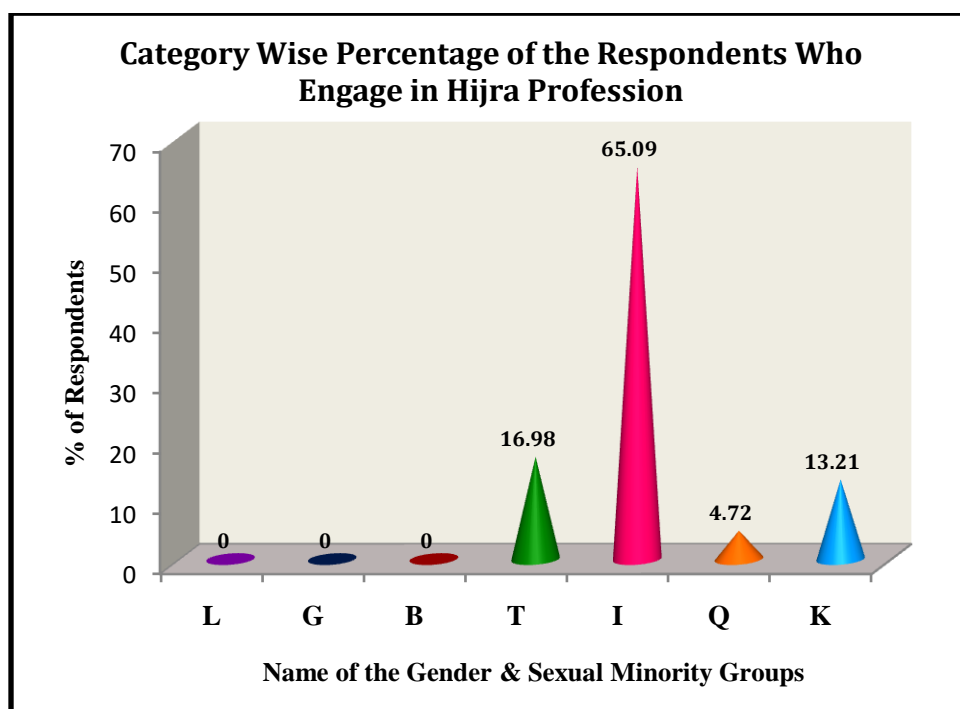


Source: Computed and Prepared by the Researcher<sup>28</sup>.

<sup>28</sup> For details please see Appendix 1.

Here in this study, it has been seen that among the total 106 eunuchs or hijra respondents, the intersex people is highest in ratio with 65.09%, followed by transgender respondents with 16.98%, kothi people with 13.21% and lastly by queer people with a mere 4.72% (details graphed in fig. 4.29). But in this case, it is very well seen that lesbian, gay and bisexual people do not come in this profession in most of the cases. From this study it has been seen that no lesbian, gay and bisexual people have entered in this profession.

**Figure no. 4.29**



Source: Computed and Prepared by the Researcher<sup>29</sup>.

#### 4.15.10 Residing Places:

Actually these groups of people are socially very much marginalized and discriminated against. No one bothers to regard them as normal human beings and treat them accordingly. People always deride and spurn them. So no one agrees to give them room on rent. They don't have any place in mainstream society. It has been seen in this study that in the study area of KMA (Kolkata Metropolitan Area) they are not allowed to live in any Hindu neighborhood. It has been seen from a survey of their settlement areas that they are residing in Muslim dominated areas mainly. Actually the residing areas or colonies of the hijra people

<sup>29</sup> For details please see Appendix 1.

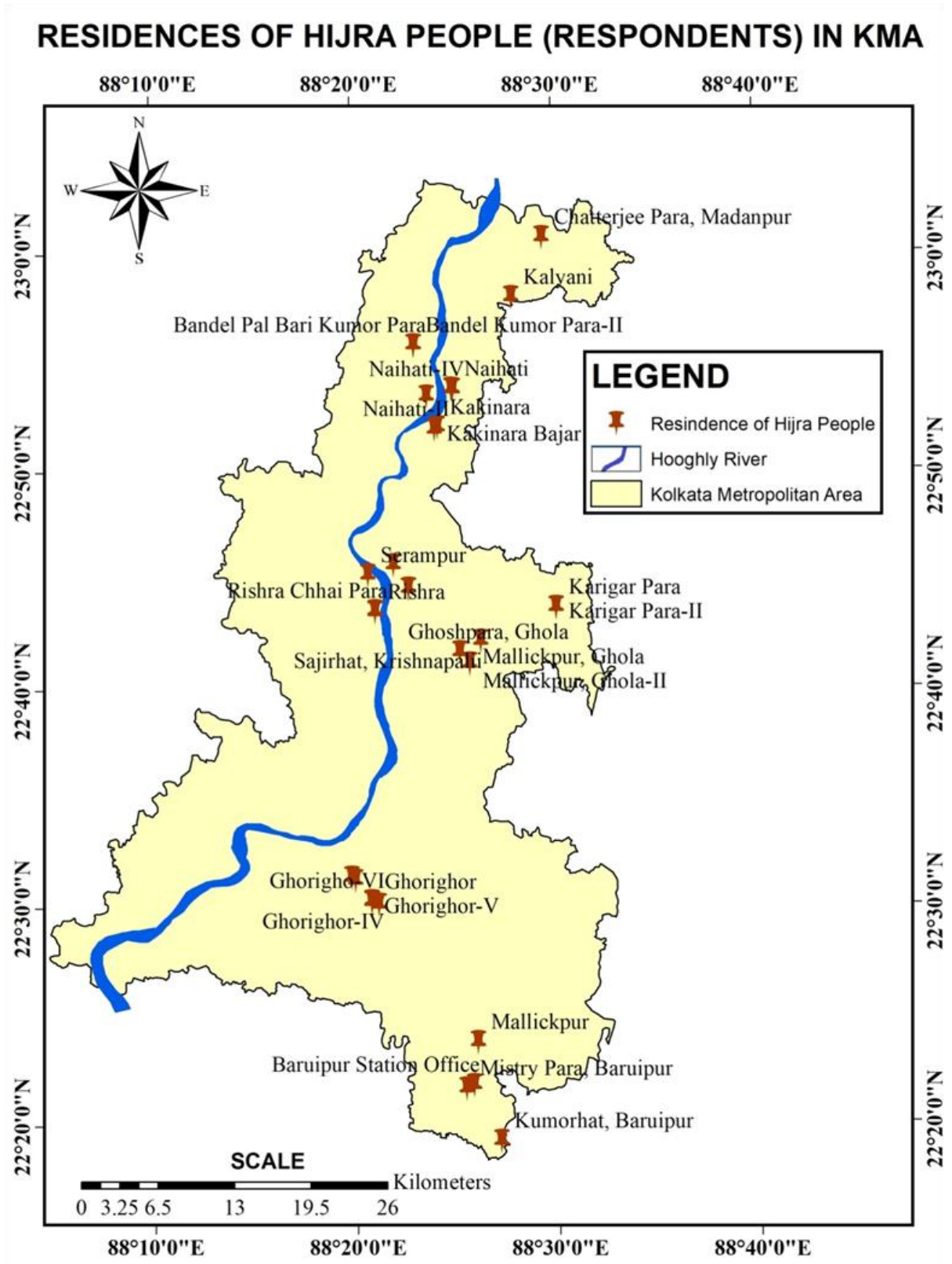
are called 'hijra patty' and the house where the guru maa lives alone or lives with her chelas is called 'daiyaar'.

The residing places of the hijra-s who are the respondents in this study are as follows within the KMA area (details shown in map no. 4.a):--

- i) Chatterjee Para, Madanpur
- ii) Near Kalyani Railway Station
- iii) Bandel, Kumor Para
- iv) Near Naihati Railway Station
- v) Kankinara Bazar
- vi) Srerampore Railway Station
- vii) Chiria More, Barrackpore
- viii) Chhai Para, Rishra
- ix) Karigor Para, Barasat
- x) Ghosh Para, Ghola
- xi) Sajirhat, Krishnapally
- xii) Mallickpur, Ghola
- xiii) Ghor Ghar, near South City Mall
- xiv) Kala Bagan, Tollygunj
- xv) Hijra More, Chetla
- xvi) Near Baruipur Station
- xvii) Mistry Para, Baruipur
- xviii) Kumorhat, Baruipur
- xix) Mallickpur



Map no. 4.a:

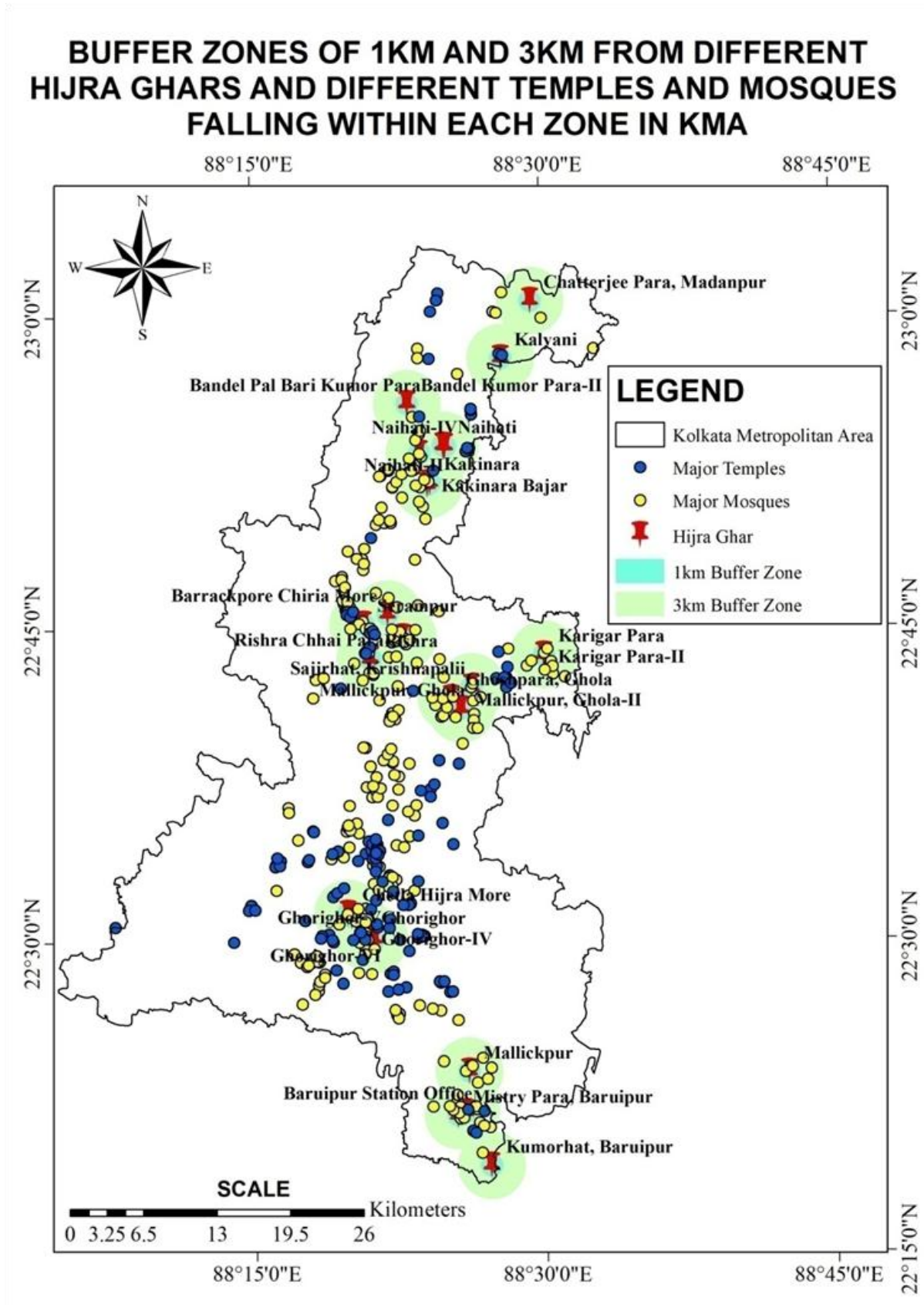


Source: Prepared by the Researcher.

A survey of these places shows that most of them are Muslim dominated areas. But exceptions are also there such as the Ghori Ghar area because here a number of hijras reside here and this area is not a Muslim dominated area. It is situated near South City Mall, one of the highly posh residential hubs of Kolkata. Both Muslims and Hindus reside here. The neighbors do not hate those hijra people. They live together. A hijra Daiyar is located here where a guru maa lives with their chelas, and a number of hijras live here in rented houses.

The map above shows (details shown in map no. 4.b) the different locations of mosques and temples within 1 and 3 km. buffer zones of each and every hijra ghar of the respondents and from this map it has been seen that there are several mosques next to every hijra house and compared to that only a few temples are there. So it can be concluded that the houses of hijras are mainly located in the Muslim majority areas. But as we've already shown, there is exception in the area of Ghari Gar. Here Hindus and Muslims live side by side, but there is no discrimination and all live together in the same neighborhood. There are more temples here than in other places, which means that numerically more Hindus live here than in other clusters of hijra houses or hijra daiyar-s.

Map No. 4.b:



Source: Prepared by the Researcher.

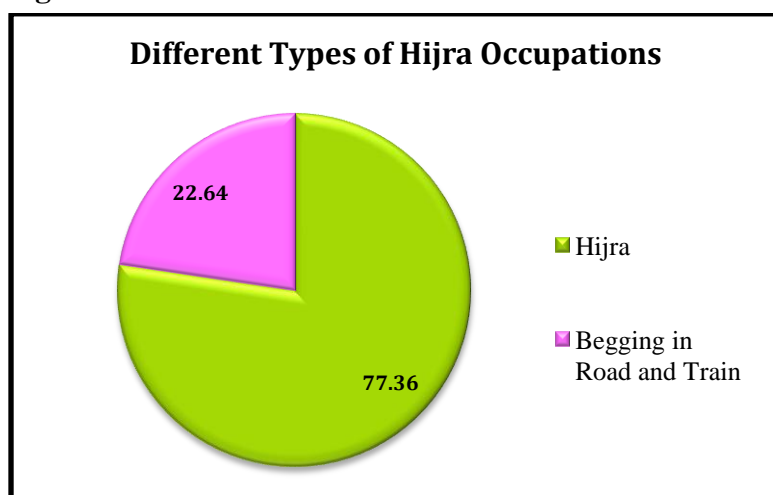
#### 4.15.11 Religion:

The hijras have only one religion and this is the ‘hijra’ religion. Regardless of the religion they are born into, they have to follow strictly the ‘hijra’ religion. Their religion is so special that it is a synthesis embodying the harmony of Hindu and Muslim religions. As they pray as Muslims, they also worship Maa Kali and Bahuchara Mata. So, they are neither Muslim nor Hindu. They are ‘hijra’ and it is their only religion. But it is seen that all those who enter this profession follow the Muslim religion.

#### 4.15.12 Classification:

There are different types of hijras. On the basis of their work they are classified into two types of hijras – ‘Badhai’ hijra and ‘Kandra’ hijra. A badhai hijra occupies a more important place in the hijra society than a kandra hijra. Actually a badhai hijra is emasculated through ‘nirvana’ and consequently they are called ‘real’ hijra which implies an ‘ascetic or sannyasi completely free of sexual desire’ (Das, 2015). They have a comparatively higher position in hijra society. ‘Kandras’ are those hijras who earn money through sex work (Das, 2015). From the field survey it has been seen that hijras of another type are also there who earn money by collecting alms from pedestrians at different road crossings and from passengers in buses and trains. They are called ‘challawali’ in the local language. From this study, it has been seen that among all the respondents who are engaged in hijra occupation, 77.36% respondents earn money from ‘badhai’ and they are called hijra. But on the other hand, the remaining 22.64% respondents earn money from begging in roads and trains and they are called ‘challawali’ (details graphed in fig. 4.30). This is their local term.

**Figure no. 4.30**



Source: Computed and Prepared by the Researcher<sup>30</sup>.

<sup>30</sup> For details please see Appendix 1.

#### 4.15.13 Internal Systems, Customs and Rituals:

They have different systems, customs and rituals which are far different from those of the mainstream society. All chelas or disciples must give 'izzat'(honor) to their guru and every guru has their own 'ilaka' and they have their hereditary right to collect their 'hak' or 'perquisite' from those hijras who reside in their 'ilaka' (Goel, 2016). After the death of one guru the ilaka of that guru must be divided among her chelas and those chelas will become guru maa in their own places or ilakas. After the death of one guru maa, her chelas who become guru maa in their own ilakas arrange a big program in honour of the deceased in which hijras from India and abroad come to participate. This program is naturally very costly and it sometimes becomes impossible for one group to bear this cost. In such a situation many people come forward and share the costs and responsibilities for organizing this program together with the chelas who will be the guru maa in the future. On this occasion huge arrangements are made for food and for that reason this occasion is also called 'khana'. It is not only a program, but also a court law. On this premise those who are denounced as criminals are punished also. Sometimes they are punished physically or sometimes they are asked to pay money as fine. And it is called 'don'. In this program those who will get the power of guru maa in future also hold celebrations.

Another very important custom of hijra society is 'nirvana'. It means emasculation and it is a caste duty or 'dharm' in hijra society (Nanda, 2006). It is a prerequisite for entering 'hijra' occupation. In this ritual the penis and scrotum are cut out from the candidate's body and this is performed by an untrained person. So it is obvious that this is a very risky ritual and may well lead to death. But those who survive are considered reincarnated and it is their rebirth as 'hijra'. It has some mythological basis which has been discussed in detail in chapter three.

This society has another important ritual related to this. It is 'godh bhorai'. It is a very important ritual where after 'nirvana' or emasculation the candidate or the initiated one is ceremonially entering the hijra group. This ritual is performed in front of different gurus. And through this ritual or ceremony a person is socially initiated (diksha) by the 'guru'.

This apart, when the guru maa dies, his or her chelas become widow and they take off their nose rings and mourns. Then they wear white sarees as other widows do. This rituals in hijra society is described beautifully in the story of Aravan and Krishna (Raj, 2020) which has been already discussed in the 2<sup>nd</sup> chapter.

**4.15.14 Recent Trend:**

Recently some changes have been noticed in the hijra society. Actually here everything moves around the guru maa. Actually it was the only custom or rule that in daiyar all chelas would go and live with the guru maa like a joint family. And all controlling power of this joint family rested entirely in the hands of the guru maa and everyone listened to him/her and no one dared to disobey her words. If anyone disobeyed, he would be punished.

But now this system has been changed to some extent. There is still a guru-centered society. But the concept of daiyar and joint family has changed a bit. Actually nowadays it has been seen that the maximum number of chelas do not reside with their guru in the daiyar. In most cases they live with their families and in the morning they go to their guru's house and take their 'dhols' for 'badhai' and go about their work. This is a temporal change in the pattern of their living.

Along with this, another change is very common. Previously no guru maa lived alone in the daiyar. But now in most cases it is seen that the guru maa lives alone in their houses and their chelas live with their families or alone in a rented house or flat or live in with his or her partner. It is a big change in the hijra society.

**4.15.15 Social Exclusion:**

It doesn't seem that they are cordially accepted by the mainstream socially. They are very much a segregated group in our society. They are excluded from the mainstream society in the following manner-

- i. Hindus do not accept them at all because it is seen that they cannot get any house on rent in any Hindu neighborhood. They do not find shelter in any good place.
- ii. They do not have any right to see their parent's dead bodies or a close relative's dead body. If they still go despite dire prohibitions, they are humiliated and insulted.
- iii. They are not allowed to serve their parents.
- iv. In many cases they do not even know the identity of their parents and their address.
- v. Even if they get to know their home address, they are not allowed to visit their home on any occasion.
- vi. They are not allowed to attend any marriage and social program.
- vii. Even if their parents and brothers and sisters are dependent on the income of the hijra person, their family members take the money from them and also still rebuff and

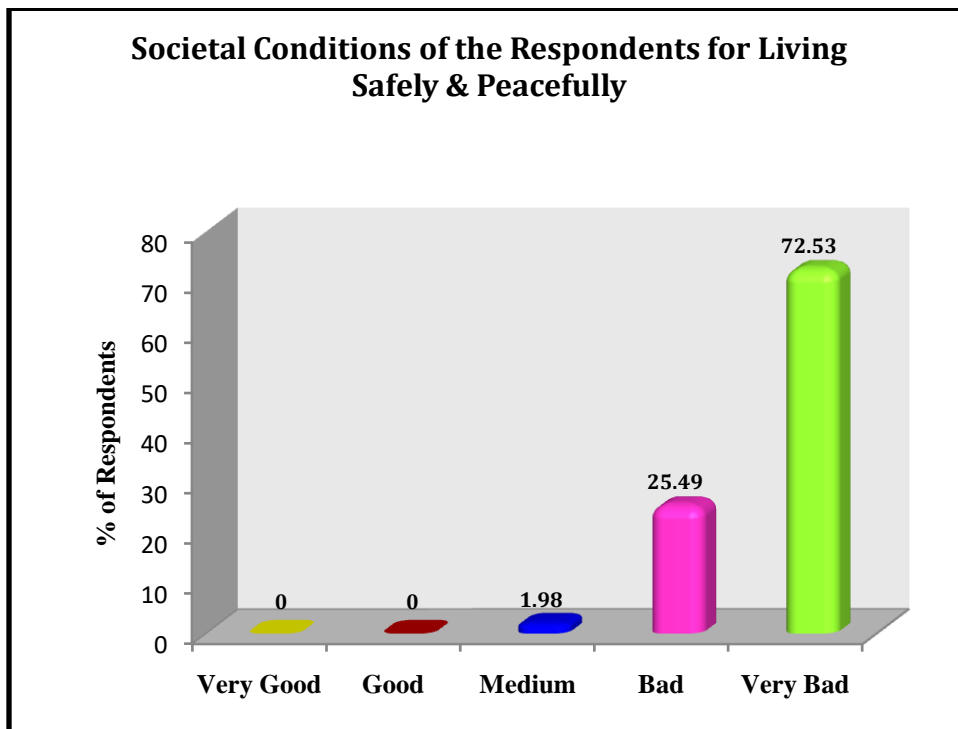
insult them. It is difficult to understand what kind of family and what kind of society it really is.

Apart from this, in many other ways, they are socially excluded, marginalized and discriminated against.

#### 4.16 Societal Condition and Exclusion of Gender and Sexual Minority People:

The discussion of this chapter abundantly shows that they are really excluded from the mainstream society which has taken away their right to live. But this is cruel and unjust. Everyone has the right to live on this earth with dignity and respect. It is stated in the fundamental rights as enshrined in the Constitution of the country that everyone has equal right to live. But as far as the hijras are concerned, this is observed more in the breach. So their position in this society is not changing at all. It has been seen that our society is not good for living safely and peacefully as far as the gender and sexual minority groups of people are concerned.

**Figure no. 4.31**



Source: Computed and Prepared by the Researcher<sup>31</sup>.

<sup>31</sup> For details please see Appendix 1.

Of all the respondents of this study, 72.53% respondents have said that our society is very bad and 25.49% respondents have said that the society is bad. And the remaining respondents have said that the society is a kind of half-way house, neither too good nor too bad (details graphed in fig. 4.31). Actually they are the cream layer of this group of people who get support from their families and also get an opportunity to complete their studies and secure employment. But this category of people is very small numerically. On the whole, maximum people of the hijra community are in a very bad situation. If the society and the law come to their rescue, they will be really benefitted.



# **Chapter – V**

## **Different Problems**

## Chapter - V

### Different Problems

We live in a society that is deeply structured by sex and gender. Actually in our society, people think that there are only two categories of people that are 'male' and 'female' which permeates in our society at every level. Gender diversity presents a challenge to the gender binary system in a number of ways—i.e. intersex, transgender, gender fluid, gender queer etc. People of the transgender category also challenge this superficial normalization of gender binaries. Not only that, people also think that only heterosexual relationship is prevail in our society. But it is not true. Sexual minority groups of people also persist in the society. But all members of these group face severe discrimination and harassment in all respects in contemporary India and they are subjected to unfair treatments like verbal and physical abuse and sexual violence; denial of share in their ancestral property, services, and admission to educational institutions and victimization in multiple sectors like family, educational institutions, workplace, health care facilities and public spaces. Our society often ridicules and abuses the gender and sexual minority people and in public places like railway stations, bus stands, schools, workplaces, malls, theatres, hospitals where they are sidelined and treated as untouchables. One of the most prominent and complex social problems in India is the identity of LGBTIQ and Hijra individuals. For many years identity and social recognition of transgender people in India have remained a prime matter of discussion. Whenever the question of equality and human rights comes to the fore, LGBTIQ and Hijra population hits the headlines. The constitution of India has given equal rights to every citizen of the country. If that is accepted, then those people of the country also have every right like the other citizens of India to live a peaceful life free from any sort of bias.

But people in the LGBT community are fighting continuously for equal rights and acceptance. Transgender people, especially, face a lot of difficulty in finding acceptance. They are looked down upon all the time. This is a major issue because discrimination against the LGBTIQ and hijra or eunuch community is highly prevalent. The prejudices harbored by people lead them to think that LGBTIQ people are odd and very different.

Today, homosexuality and queer identities may be acceptable to more Indian youths than ever before but within the boundaries of families, homes and schools, acceptance still remains a constant struggle for LGBT people. A 2007 study documented that in the past years the percentage of transgender community persons reported for forced sex was 46%, physical

abuse 44%, verbal abuse 56%, blackmail for money 31% and threat to life 24% (Vanitha, 2017).

This study has come to know of people coming out of the closet after being subjected to severe tortures. Their problems are discussed hereunder in detail. The problems they have been facing in their regular lives can be categorized and discussed into following ten categories. These are –problem face in home, problem in educational institutions, lack of livelihood, workplace harassment, problem in public transport, and problem in health care system, legal problem, administrative problem, mental depression and other problems.

## **5.1 Facing Problem at Home:**

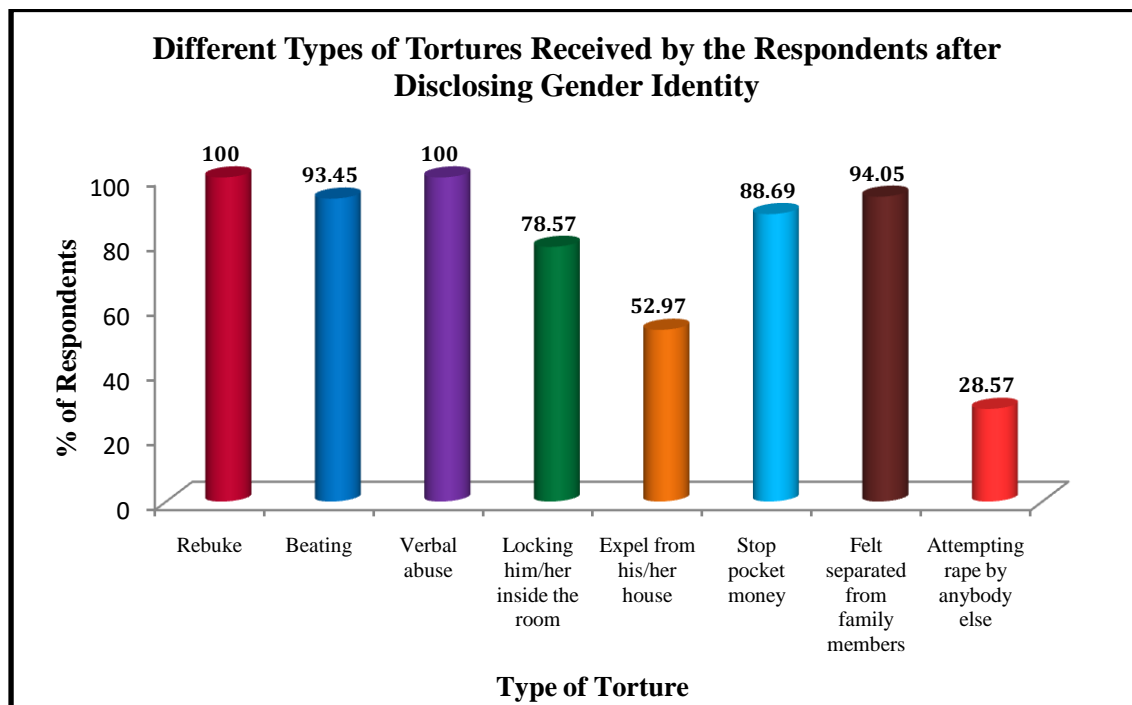
### **5.1.1 Exclusion from Family Members and Getting Afraid to Reveal Their Gender Identity:**

Transgender and other gender and sexual minority people often face denial and aggression right at home. Most families do not want to accept it that their male child suddenly starts behaving in ways which are feminine or inappropriate to his expected gender role. Consequently family members may threaten, scold or even assault their son or sibling for behaving or dressing up like a girl or woman and vice versa. Some parents may outright disown and oust their own child for violating the expected gender norms of the society and for not fulfilling the roles expected from a male child. Besides these, it is also thought that those who have single male child, be it also transgender, their lineage will become extinct. Hence, their guardians remain also very worried regarding their marriages and future generations. These fears result into their coldness to non binary offspring.

For that reason these people are afraid to come out and tell their parents. There are some people who disclosed their identity and were accepted by people; there are others living dual lives and waiting for the right moment to be able to talk about the issue. This waiting period fends in some cases and in some cases it never ends. And the main reason behind this sullen silence is fear. Nothing can overcome this fear as they face constant torture. Here in this study, it has been found that of the total respondents (N=302), 68.21% disclose their gender identity and there's not a shade of doubt about the fact that in maximum cases, the respondents who have disclosed their gender identity face severe torture. Here among the respondents who disclose their gender identity, which is 206 people, 81.55% or 168 respondents are tortured by the members of their family and among those 168 persons with a

history of torture, 100% respondents have been rebuked, 100% respondents have been abused verbally, 94.05% have felt they are estranged from the other members of the family, 93.45% are beaten and 88.69% respondents have no pocket money because their parents stopped giving pocket money to their children. Besides these, 78.57% people are locked up in their rooms by the members of their families and they cannot go outside and mix with the members of the community and 52.97% respondents have been expelled from their homes because as a result of the unsavoury controversy surrounding them, their parents lost face and dignity in society. And lastly, 28.57% respondents have been victimized through rape or attempted rape or molestation (details graphed in fig. 5.1). These instances of torture are very common because of social norms and societal perspective.

**Figure no. 5.1**



Source: Computed and Prepared by the Researcher<sup>1</sup>.

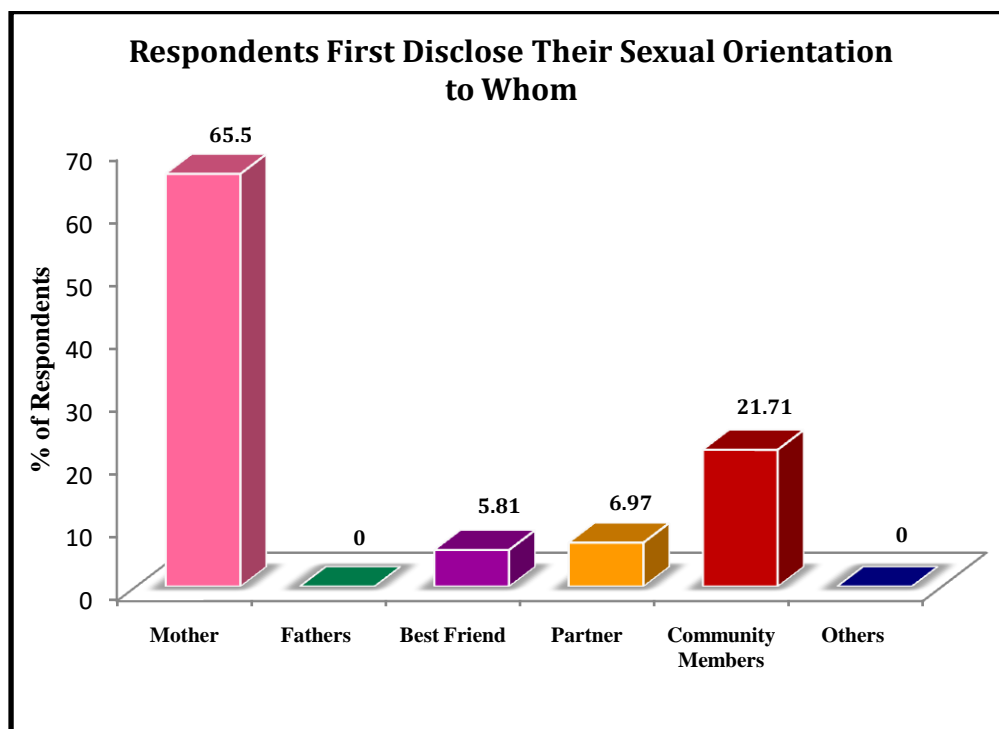
### 5.1.2 Afraid of Disclosing Sexual Orientation:

Every year a huge number of LGBT people face different issues related to violence, unemployment, discrimination, poverty and lack of health care. There are still many people who are not aware of what LGBTIQK stands for, because they think those who are non-binary are not allowed to be a part of the family. That's why they don't want to reveal their

<sup>1</sup> For details please see Appendix 1.

sexual orientation easily because they are afraid of non acceptance and being tortured. It's not a baseless fear, but a reality and physical and mental torture is inflicted on them real life. So they have ample reason to fear. Of all the respondents (N=302), 85.43% disclose their sexual orientation and 14.57% don't. It is not very easy for gender and sexual minority people to come out. But it has been mostly seen that they depend on the mother in the family and in most of the cases they disclose their sexual orientation to their mothers. But in many cases, fearing torture, they often disclose their sexual orientation to persons other than their parents, such as their best friends, partners, community members etc., while the members of the family are not at all aware of their children's sexual orientation and gender identity. Here in this study, among those 258 respondents who disclose their sexual orientation, 65.5% respondents disclose their sexual orientation to their mothers. After mother these people next depend on the community members who think about them and do understand their feelings and for that reason 21.71% respondents disclose their sexual orientation to the community members and 6.97% respondents disclose their orientation to their partners and lastly 5.81% respondents disclose it to their best friends (details graphed in fig. 5.2).

**Figure no. 5.2**



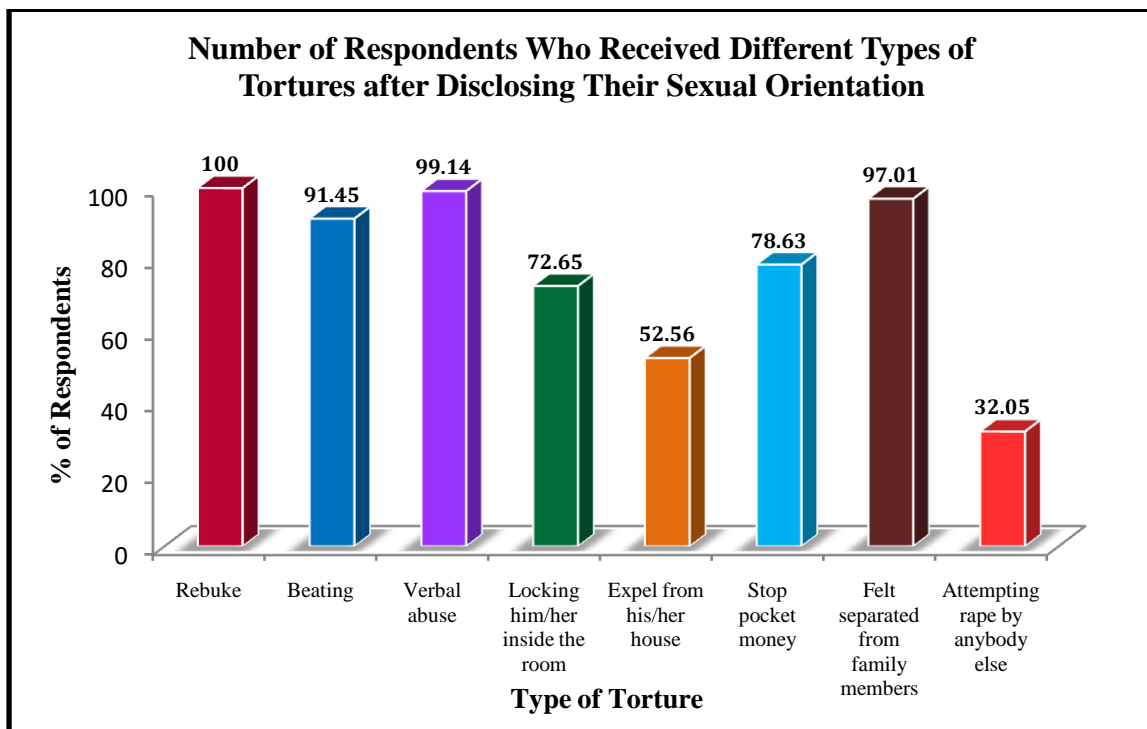
Source: Computed and Prepared by the Researcher<sup>2</sup>.

<sup>2</sup> For details please see Appendix 1.

### 5.1.3 Disclosing Sexual Orientation at Home and Getting Tortured:

It has been seen in maximum cases that those who disclose their sexual orientation at home to the members of the family members are tortured. Among those respondents who disclose their sexual orientation at home or their family members, 77.48% have suffered domestic violence and among those 77.48% respondents or 234 respondents, 100% respondents have been rebuked, 99.14% respondents are abused verbally, 97.01% have felt separate from the other family members, 91.45% are beaten, 78.63% respondents have been suffering from lacking of pocket money because their parents stopped giving pocket money to their children. Besides these, 72.65% people are locked inside their room by their family members as they cannot go to outside and mix with the community members and 52.56% respondents have been expelled from their houses because for themselves, their parent loss their respect. And lastly 32.05% respondents have been victimized by rape or attempting rape or molestation (details graphed in fig. 5.3). These incidents of getting tortured are very common because of social norms and societal perspective.

**Figure no. 5.3**

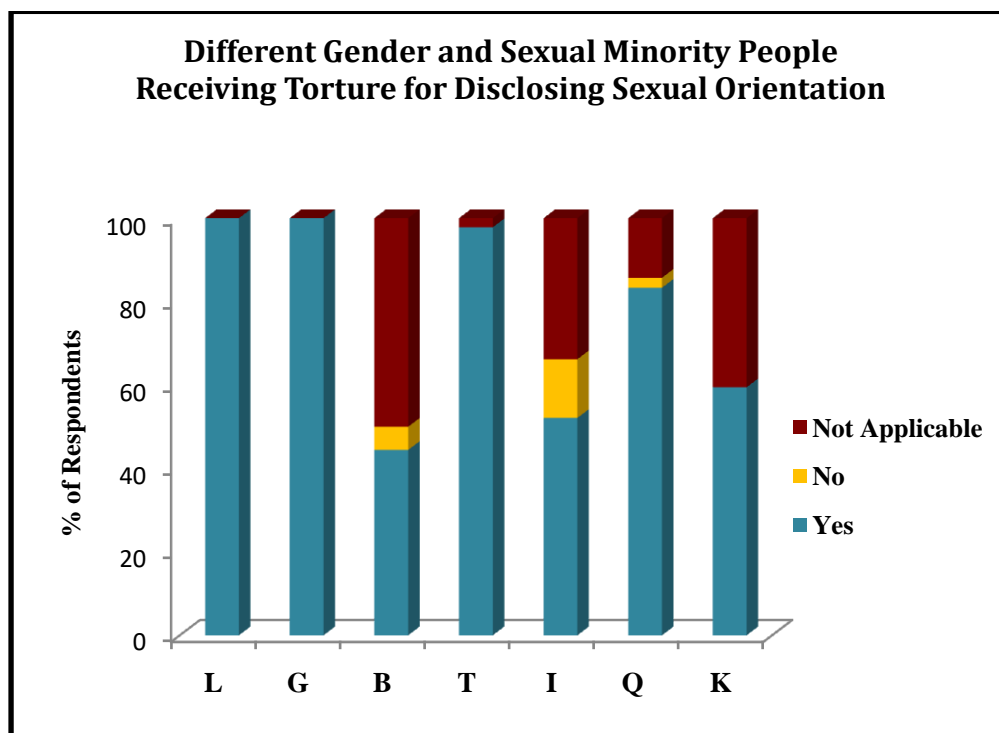


Source: Computed and Prepared by the Researcher<sup>3</sup>.

<sup>3</sup> For details please see Appendix 1.

But when it has been explained category wise, then it has been found in this study that 100% L and G category respondents face severe torture at home after the disclosure of sexual orientation, but only 44.44% bisexual people face domestic violence because they cannot be usually recognized as such and most of the time they do not disclose their orientation. That's why they face less domestic violence in comparison to others. After L and G category people, transgender and queer people come next in terms of facing torture. 97.81% transgender respondents face torture after disclosing their sexual orientation because of their visible gender expression, behavior etc (details graphed in fig. 5.4). Besides these, queer people also face domestic violence. Especially gender queer people face much more violence because of their dressing and gender expression. Actually their gender identity and sexual orientation cannot be easily hidden by the aforesaid category of respondents.

**Figure no. 5.4**



Source: Computed and Prepared by the Researcher<sup>4</sup>.

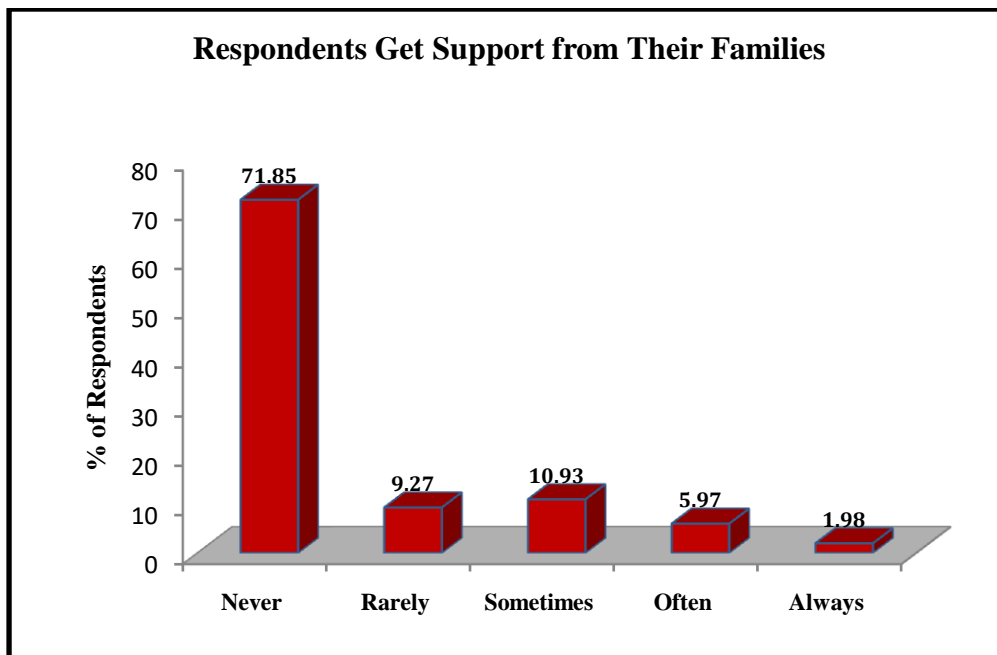
#### **5.1.4 Inacceptance from Family Members:**

This society is used to heterosexual and cisgender people and they don't want to understand anything else. So they are not used to accepting anything beyond this. So this research work

<sup>4</sup> For details please see Appendix 1.

did not show any exception either. Here also it is seen that whenever the family gets to know the actual gender identity and sexual orientation of the respondents, they reject them and refuse to accept them. Here it is seen from this graphical presentation that 71.85% (217 of 302) respondents never get support from their families and the rest 28.15% respondents have received support from their home at some point. Those parents and other family members are very much exceptional in nature because they accept their children as they actually are. This quality is very rare. But they don't always get support from the beginning. 9.27% respondents rarely get support from their parents and 10.93% respondents sometimes get support from home. Besides all of these, there are very few parents who have supported their children immediately after finding out their actual gender identity and sexual orientation and gender expression. The percentage of this kind of people is very rare. Only 7.95% respondents fall in this category. Among these 7.95% respondents, 5.97% respondents often get support from their family members and the remaining 1.98% respondents always get support from their parents and other family members (details graphed in fig. 5.5). They are very lucky persons.

**Figure no. 5.5**



Source: Computed and Prepared by the Researcher<sup>5</sup>.

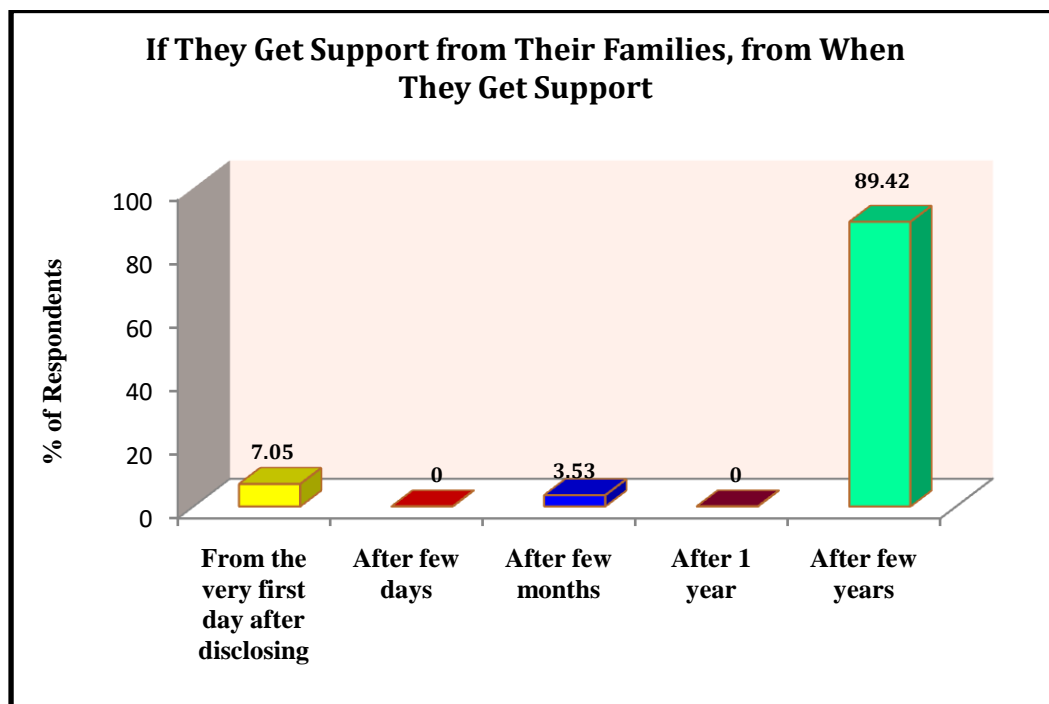
Among the aforesaid 85 respondents, who get support from their families at different times, 89.42% (76 of 85) respondents get support a few years after their disclosure of GI and SO to

<sup>5</sup> For details please see Appendix 1.



their family members. Only 7.05% respondents get support from their families from the very first day after disclosing and the rest 3.53% respondents get support and acceptance after a few months (details graphed in fig. 5.6). For those who receive support from their family, their family becomes a source of great hope and support in their lives.

**Figure no. 5.6**



Source: Computed and Prepared by the Researcher<sup>6</sup>.

## 5.2 Problems Face in Educational Institutions:

These gender and sexual minority people are harassed in various ways in their educational institutions and as a result, they always fall into various helpless conditions. Among them, the number of drop outs is also very high. It has been discussed in detail below.

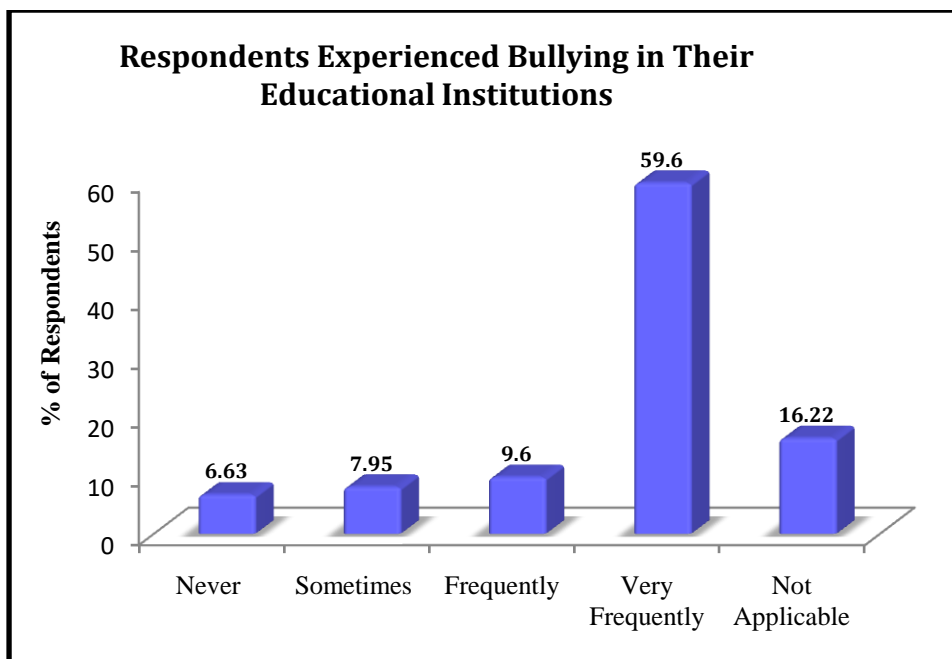
### 5.2.1 Face Bullying in School:

The people of this community face physical, sexual, emotional violence, violence in terms of neglect and discrimination even at school. They often experience isolation and abuse, and are not allowed to share common grounds with classmates. Schools and colleges prove to be torment chambers for transgender community as they face accusations from teachers for violating educational and societal etiquette. This leads to zero acceptance of transgender community at high school, higher secondary and college levels. Deprived by both educational

<sup>6</sup> For details please see Appendix 1.

institutions and family, the students of this community quit education or delimit the scope of education. It has been seen from this study that 59.6% respondents face bullying in their educational institutions very frequently, 9.6% respondents face bullying frequently, 7.95% face bullying in sometimes (details graphed in fig. 5.7). And the rest 22.84% respondents do not face bullying in educational institutions because among them 6.63% respondents fall mainly in the bisexual and queer category who neither disclose their sexual orientation and gender identity to others nor can their GI and sexual orientation be guessed from the outside. And the rest 16.22% fall in the category of 'not applicable' because they never go to any educational institution as they are mainly brought up by the hijra community and engage either in the hijra profession or resort to begging.

**Figure no. 5.7**



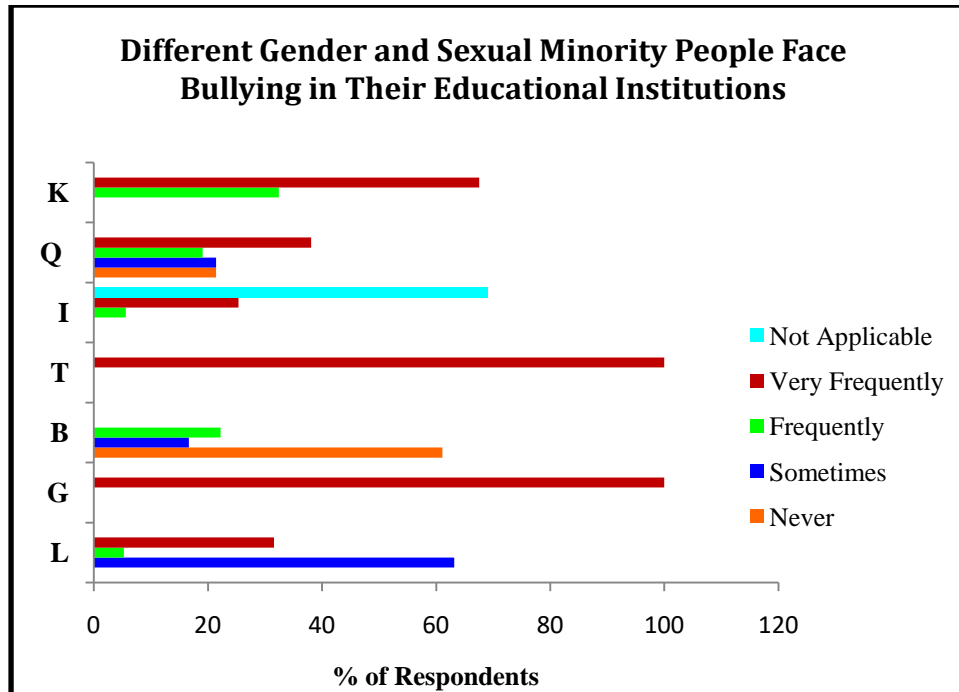
Source: Computed and Prepared by the Researcher<sup>7</sup>.

Among LGBTIQK respondents, G, T and K category respondents face bullying very frequently, 100% 'G' category respondents, 100% 'T' category respondents and 67.57% 'K' category respondents face bullying very frequently and among 'I' category respondents only 25.35% respondents face bullying very frequently because the other 69.02% intersex category people never go to any educational institution. So they don't face bullying. And bisexual people normally stay in a less vulnerable situation because without any disclosure of their sexual orientation, nobody can identify them as bisexual and it has also been seen that

<sup>7</sup> For details please see Appendix 1.

61.11% bisexual respondents never face bullying in any educational institution (details graphed in fig. 5.8).

**Figure no. 5.8**

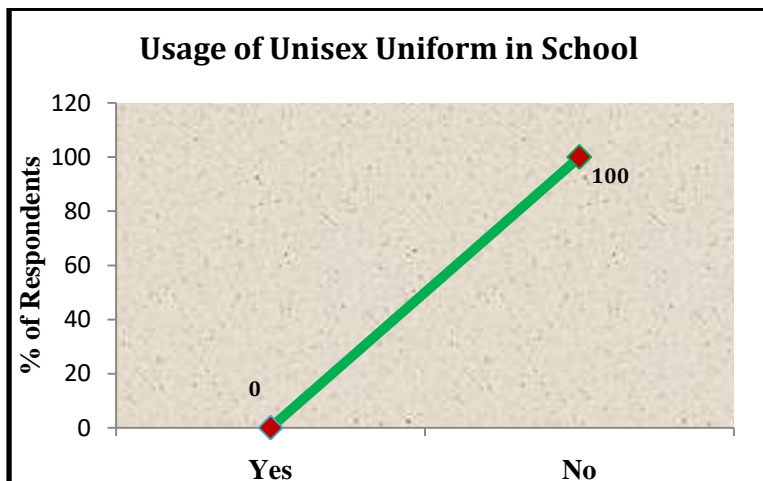


Source: Computed and Prepared by the Researcher<sup>8</sup>.

### 5.2.2 Problem in Dress code:

The problem of dress code in school is a very big problem for gender and sexual minority people. Actually it is not a problem affecting only transgender people because some gay, lesbian, intersex and kothi people also have a problem regarding dress code and school uniform. Some 'G' category people are effeminate who love feminine outfits which do not match with their gender identity. The kothi people also love to wear feminine dresses. Some 'L' category people are not effeminate, they love to wear male outfits and their gender expressions are also masculine. So, all these people do face problems and hesitate to wear school uniform as per the school dress code. So, it is most important for all educational institutions to have unisex uniform. But from this study it has been seen that all respondents have said that their schools don't have the facility of unisex uniform (details graphed in fig. 5.9).

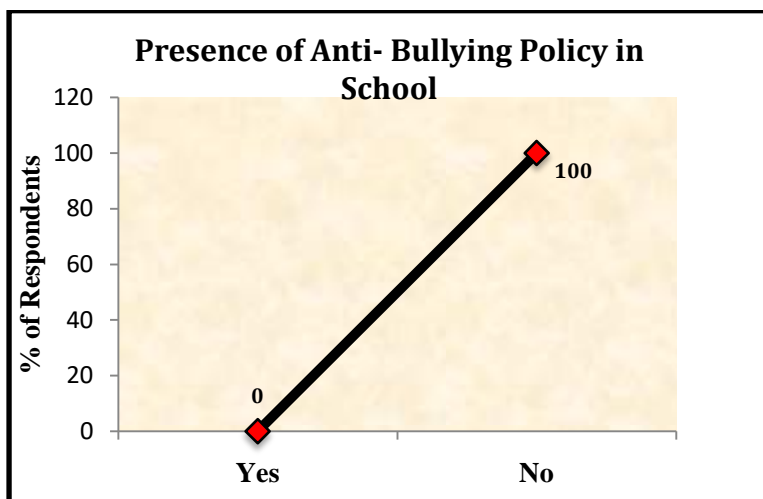
<sup>8</sup> For details please see Appendix 1.

**Figure no. 5.9**

Source: Computed and Prepared by the Researcher<sup>9</sup>.

### 5.2.3 Don't Have Anti-bullying Policy:

These gender and sexual minority groups of people in maximum cases face bullying in their educational institutions. And for that reason, they drop out and discontinue their studies. So, an anti-bullying policy is a must in all types of schools to overcome this menace. But this study reveals that 253 respondents who go to school have said that their schools don't have any anti bullying policy and for that reason, they have been tortured by their classmates and seniors and juniors with impunity (details graphed in fig. 5.10).

**Figure no. 5.10**

Source: Computed and Prepared by the Researcher<sup>10</sup>.

<sup>9</sup> For details please see Appendix 1.

<sup>10</sup> For details please see Appendix 1.

### 5.2.4 Lack of Access to Appropriate Toilet Facilities:

Transgender people often face various problems for using toilets. They may be assaulted if they use the toilets that conforms to their gender identity or forced to use a restroom that does not conform to their gender identity. It is a very big problem for them. Now although gender-neutral toilets are being built gradually in various educational institutions, but not all places are yet to be constructed. But from this study, it has been seen that 253 respondents who go to school have said that their school don't have any gender-neutral toilet (details graphed in fig. 5.11) and they face different problem and harassment for that reason.

**Figure no. 5.11**



Source: Computed and Prepared by the Researcher<sup>11</sup>.

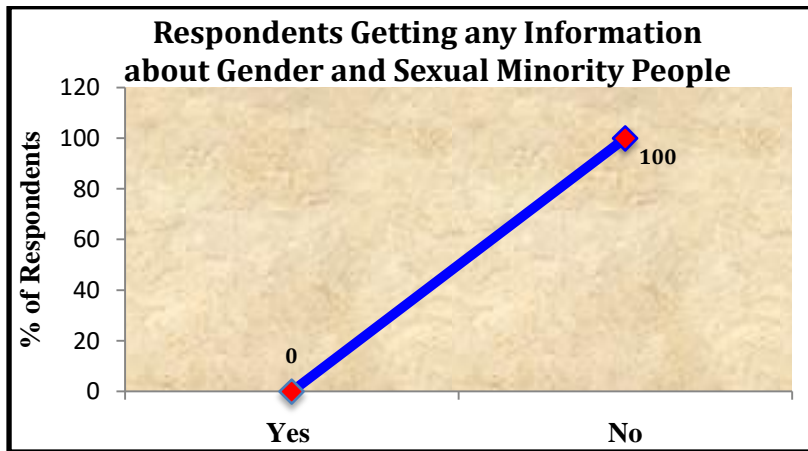
### 5.2.5 Don't Get any Information from School:

In most of the cases, it has been seen that schools do not provide any information about gender and sexual minority people. As a result, various misconceptions about those GSM people are harboured by the students. So they are insulted by other students and the information about these gender and sexual minority people is also not available in the syllabus of any school. So students don't get any information from their schools. It is a very big problem of our society because students are the pillar of the society. If they don't get the correct information or get wrong information, the entire society then becomes paralyzed. If they had received proper information about them, they would never have grown up thinking of them as different and they would have thought of them as one like themselves and the society would have been inclusive. But in this study it has been seen that 253 respondents

<sup>11</sup> For details please see Appendix 1.

who go to school have said that their schools don't provide any information about gender and sexual minority groups of people (details graphed in fig. 5.12).

**Figure no. 5.12**

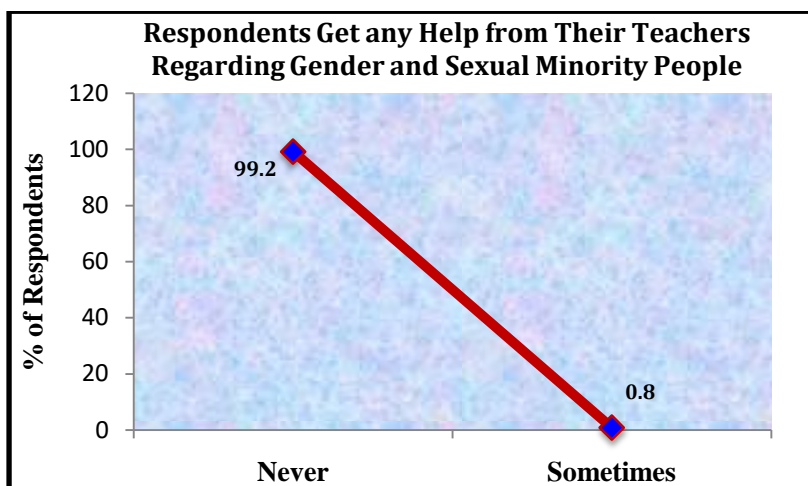


Source: Computed and Prepared by the Researcher<sup>12</sup>.

### 5.2.6 Don't Get any Help from Teachers:

Even those respondents, who go to school, usually don't get any help from their teachers if any bad situation arises in school. So, it is a very big problem for these people and for that reason instances of bullying, harassment and the percentage of dropouts from school are increasing steadily. Here in this study it has been found that 99.2% respondents don't get any help in school from their teachers and only 0.8% respondents sometimes get help from their teachers (details graphed in fig. 5.13).

**Figure no. 5.13**



Source: Computed and Prepared by the Researcher<sup>13</sup>.

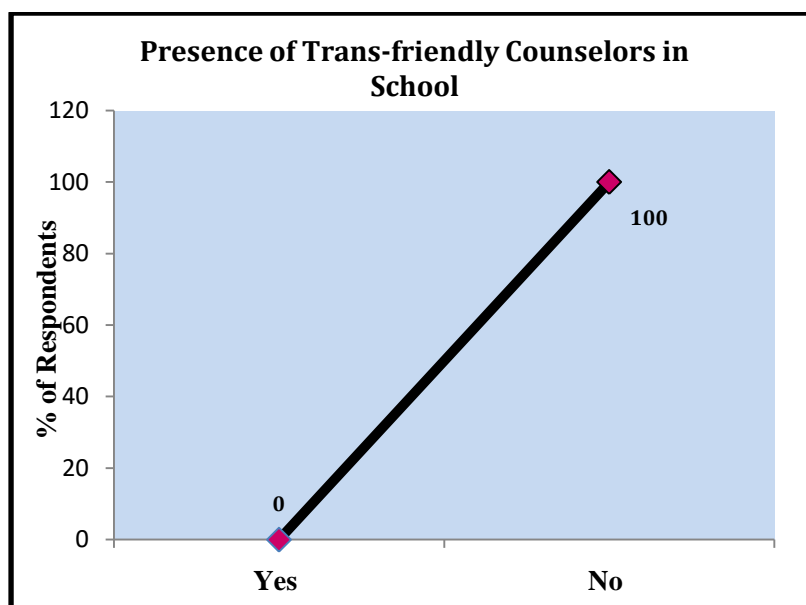
<sup>12</sup> For details please see Appendix 1.

<sup>13</sup> For details please see Appendix 1.

### 5.2.7 Absence of Trans-friendly Counselor:

It is known to all that the mind matters. Actually the mind controls every aspect of our life. If his/her mind is in trouble, the student can't study well. So it is common knowledge that a child psychologist plays a very important part in school precincts. If every school has one child psychologist at its disposal to provide counseling to these gender and sexual minority students, the number of school dropouts may then decrease and counselors must be trans-friendly. But all the respondents who go to school have said that they don't have any trans-friendly counselor in their schools (details graphed in fig. 5.14).

**Figure no. 5.14**

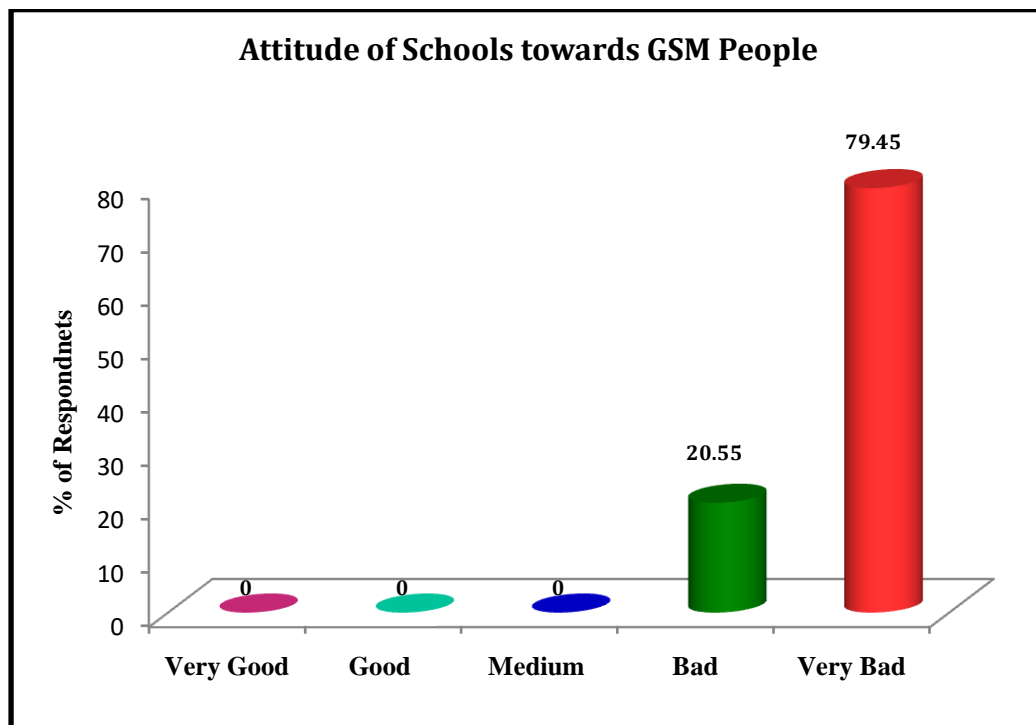


Source: Computed and Prepared by the Researcher<sup>14</sup>.

### 5.2.8 School's Attitude towards GSM People:

Like the rest of society, schools are also very hard and strict with these people. These people in maximum cases don't have good memory as far as studies are concerned and they always face various problems. According to all the respondents, 79.45% have said that school's attitude is very bad towards them and the remaining 20.55% have said that school's attitude is bad towards them (details graphed in fig. 5.15).

<sup>14</sup> For details please see Appendix 1.

**Figure no. 5.15**

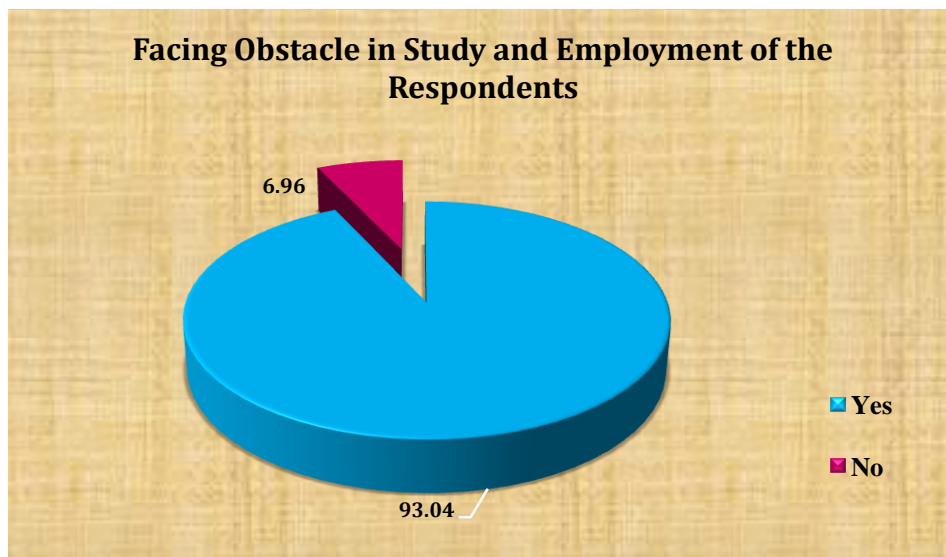
Source: Computed and Prepared by the Researcher<sup>15</sup>.

### 5.2.9 Obstacle in Study:

From the aforesaid description, it has been found that especially LGBTIQK, are subjected to various kinds of harsh words in school and they are ridiculed a lot. So they endure all these, cannot continue their studies for a long time and are forced to drop out of school and do not want to go to school or continue study. In this situation they want to hide their faces from public view and want to stay at home. Thus they lag behind in studies as well. In this way they are unable to complete their education and also greatly lag behind in employment. And one gets a job after a long fight, they also face various problems in their workplace and they are discriminated against in their workplace also due to their gender identity and sexual orientation. Here 93.04% respondents (281 of 302) have admitted that their gender identity and sexual orientation became an obstacle in their study and employment (details graphed in fig. 5.16).

<sup>15</sup> For details please see Appendix 1.



**Figure no. 5.16**

Source: Computed and Prepared by the Researcher<sup>16</sup>.

### 5.3 Lack of Employment:

#### 5.3.1 Engage in Hijra Profession and Begging:

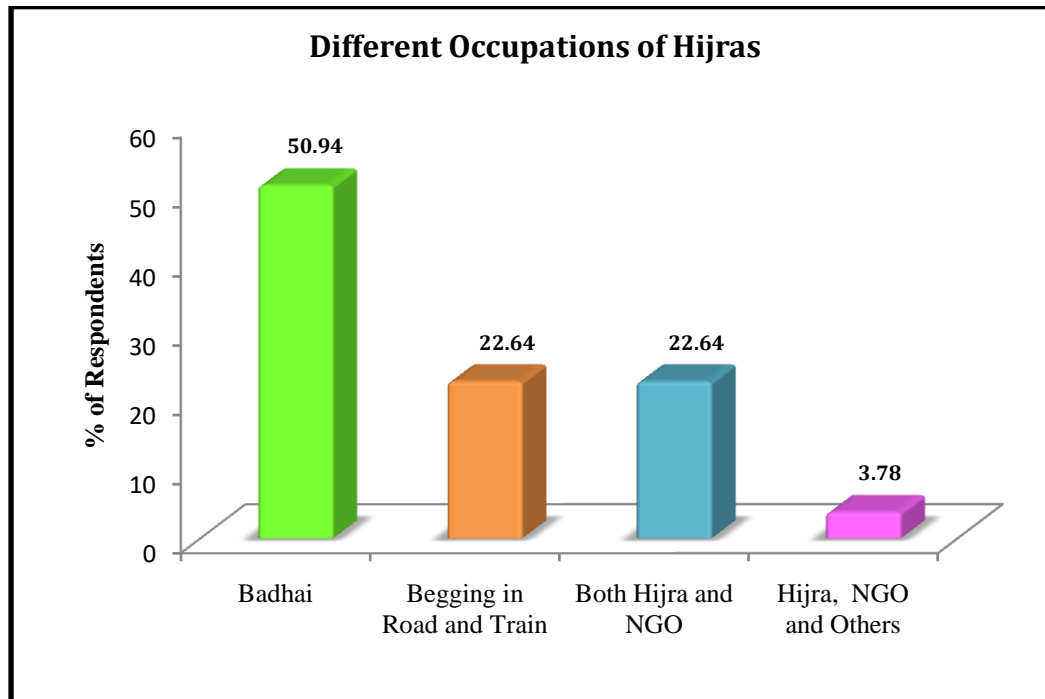
Due to these kinds of tortures they are often forced to leave their homes or sometimes the child or teenager may decide to run away from the family unable to tolerate the domestic violence. But then they don't have any way to survive. It has been seen in this study, a major portion of the respondents are engaged in this profession. Among the total respondents (N=302), 35.1% people are engaged in this profession. After joining this profession, there is no other way for them to study or do anything else. They cannot get out of this problem and within this problem they get stuck in cyclic order. Because when their parents hand them over to the hijras, they don't get opportunity to study. As a result, they lag behind in education and they lag behind in terms of jobs and employment also. Therefore the hijra profession becomes the only source of livelihood for them.

Among the total 302 respondents, 106 respondents are engaged with this hijra profession. Actually 'badhai' is the main profession of hijra. Among these 106 respondents, 50.94% respondents are engaged in 'badhai' profession and 22.64% respondents engage in begging. They beg from the passengers on trains and from pedestrians. Besides these, other 22.64% respondents are not only engaged in hijra profession, but involve with different NGOs also. And the remaining 3.78% respondents among this category of people are also associated with

<sup>16</sup> For details please see Appendix 1.

hijra profession, NGOs and other activities (details graphed in fig. 5.17). Mainly hijra-s or eunuchs people face a lot of insult and mockery. Since they have no other option, they have to keep mum and endure all these insults.

**Figure no. 5.17**

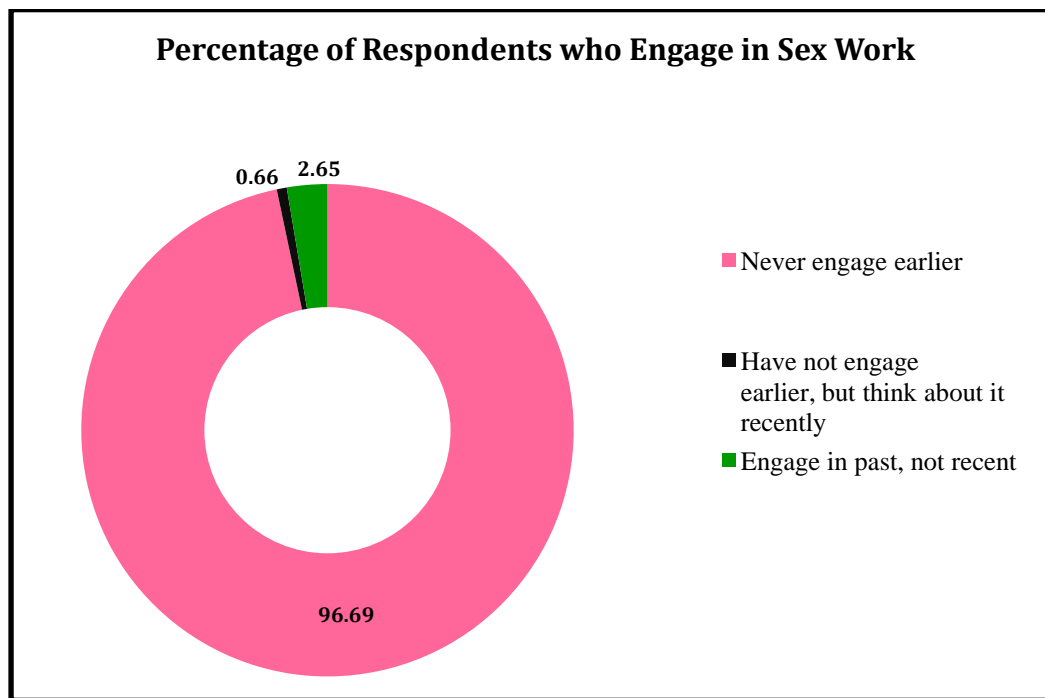


Source: Computed and Prepared by the Researcher<sup>17</sup>.

### 5.3.2 Prostitution as a Profession:

Here the same reason to join this profession prevails as far as the gender and sexual minority groups of people are concerned. Overall they are isolated from the society and common people see them as a different species, as it were. All these reasons apart, they neither get any support from their families nor can they live in an environment of love and respect with them. In most of the cases they are kicked out of their homes and then they become homeless. They are mostly denied the basic and fundamental rights guaranteed by the constitution of the country. There are unending barriers blocking their path in our society. So, most of the time, they earn their livelihood as prostitutes because it's easier to join this profession. Among the total respondents only 2.65% respondents have said that they engaged in this profession in the past and 0.66% respondents think to join in this profession because of their poverty and lack of support from their family members (details graphed in fig. 5.18).

<sup>17</sup> For details please see Appendix 1.

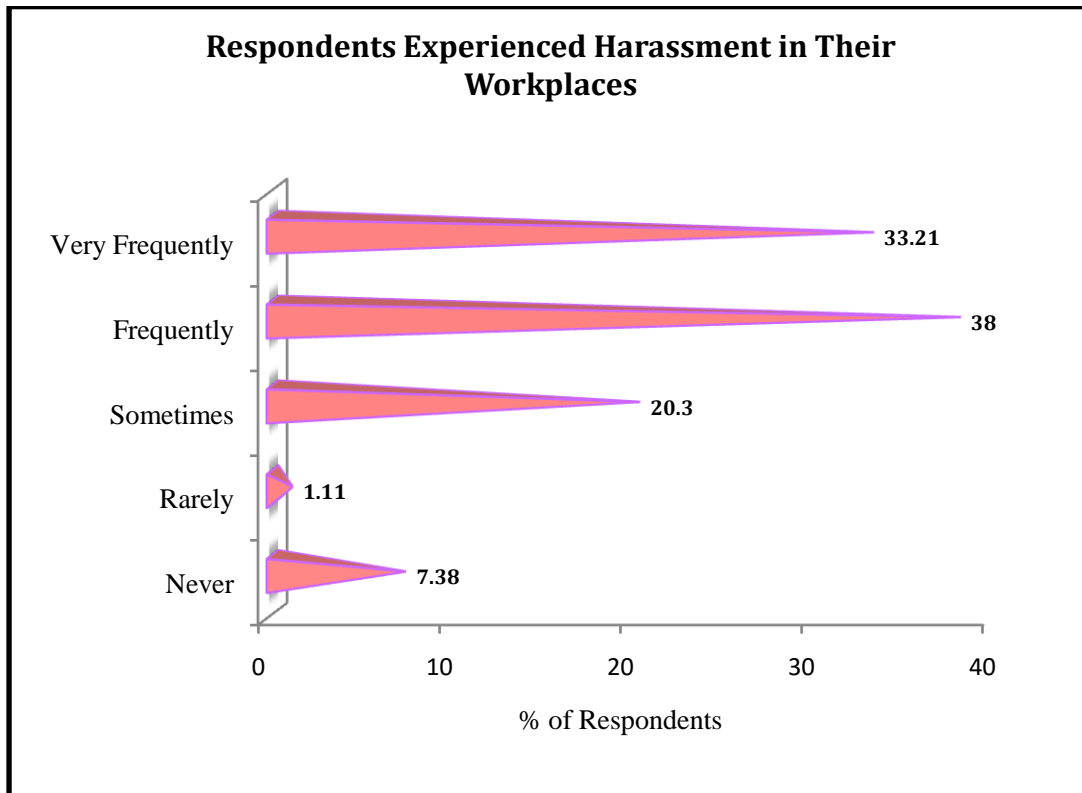
**Figure no. 5.18**

Source: Computed and Prepared by the Researcher<sup>18</sup>.

#### 5.4 Harassment in Workplaces:

Lack of livelihood is an acute problem. Most employers refuse to employ those people of these communities who are qualified and skilled. But among them those who get jobs cannot work in a healthy environment because they are subjected to various harassments and often not being able to bear this pressure, they often leave their jobs. It has been found from this study that among the 271 respondents who are employed in different sectors, 33.21% respondents get harassed very frequently, 38% of the respondents get harassed in their workplaces frequently, 20.3% respondents have been harassed sometimes and lastly 1.11% respondents face harassment rarely. But the remaining 7.38% respondents never get harassed in their workplaces (details graphed in fig. 5.19). Some bisexual and lesbian people fall in this category who never get harassed in their workplaces because these bisexual people don't disclose their sexual orientation neither to their family members nor in their workplaces and those who are lesbian do not face any harassment in their workplaces either because they work mainly in those NGOs that work for these kinds of gender and sexual minority people or they don't disclose their sexual orientation. Therefore, they can work in a healthy and friendly environment.

<sup>18</sup> For details please see Appendix 1.

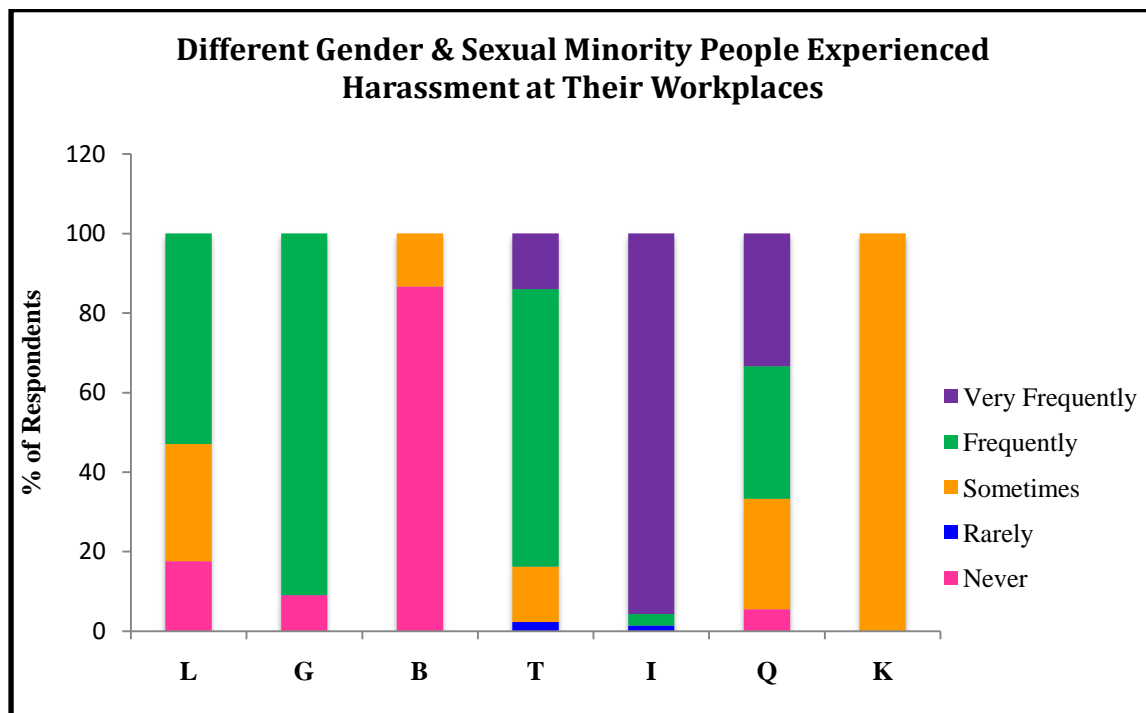
**Figure no. 5.19**

Source: Computed and Prepared by the Researcher<sup>19</sup>.

#### 5.4.1 Category Wise Facing Harassment at Their Workplaces:

If it is seen in category wise, then it has been found that in workplaces L, G, T, I and K people are very frequently harassed because of their outward visibility. Here it has been found that 52.94% 'L' category respondents have been harassed frequently, 90.9% 'G' category respondents are harassed frequently in their workplaces and 69.76% 'T' category respondents are harassed frequently and 95.66% 'I' category respondents are harassed very frequently in their workplaces. 100% of 'K' category respondents are also harassed sometimes in their workplaces (details graphed in fig. 5.20). Actually harassment in the workplace varies depending on how much other employees know about their gender identity and sexual orientation. The more they know, the more tortured are the victims.

<sup>19</sup> For details please see Appendix 1.

**Figure no. 5.20**

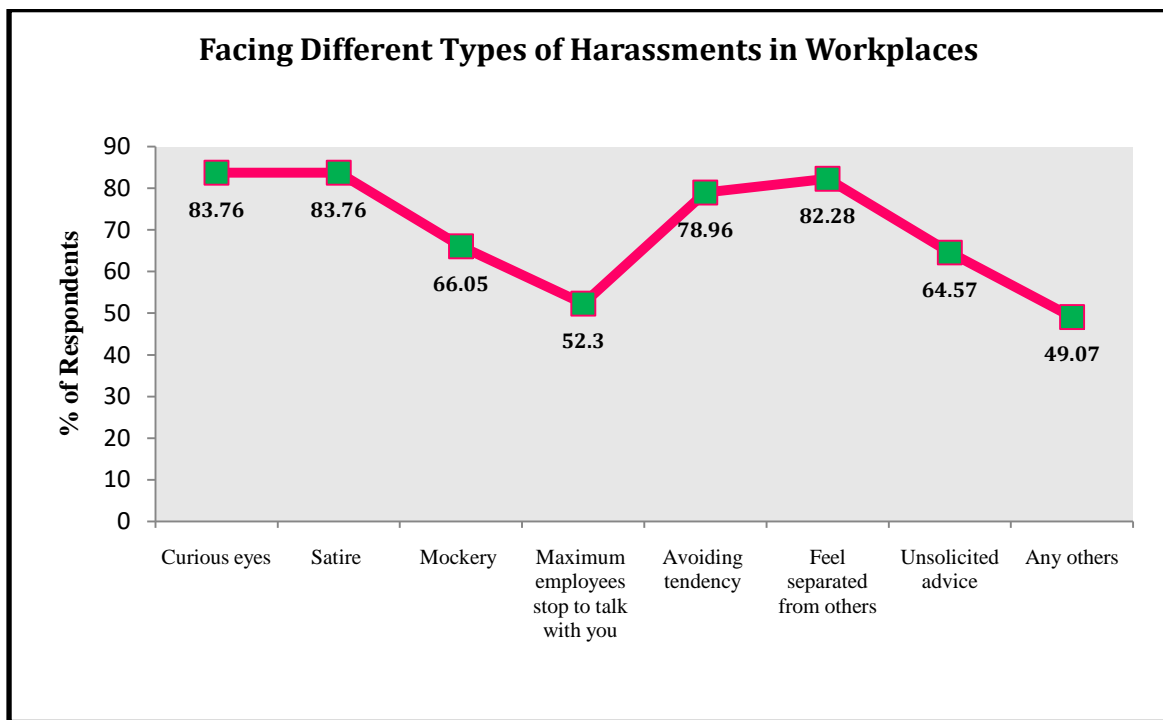
Source: Computed and Prepared by the Researcher<sup>20</sup>.

#### 5.4.2 Different Types of Harassment

Those people are harassed in different ways in their workplaces. Some sneer at them and some look back and forth with curious eyes. In most of the cases, it has been found that maximum employees stop talking with those employees who belong to gender and sexual minority groups. Sometimes they are avoided by other employees and those people for that reason feel estranged and isolated from others. Besides, these people are sometimes gratuitously given advice which irritates them. It has been found from this study that 271 respondents are engaged in work among 302 respondents and among those 271 respondents 83.76% respondents are irritated/inconvenienced by the curious glances cast at them by others, 83.76% respondents are subjected to satirical sarcasm, 66.05% respondents are affected by mockery and 52.3% respondents feel shaky and separated because most employees stop talking with those gender and sexual minority employees. This apart, 78.96% are avoided by other employees, 82.28% respondents feel separated, and 64.57% respondents are given unsolicited advice and 49.07% respondents are harassed in other different ways (details graphed in fig. 5.21).

<sup>20</sup> For details please see Appendix 1.

Figure no. 5.21

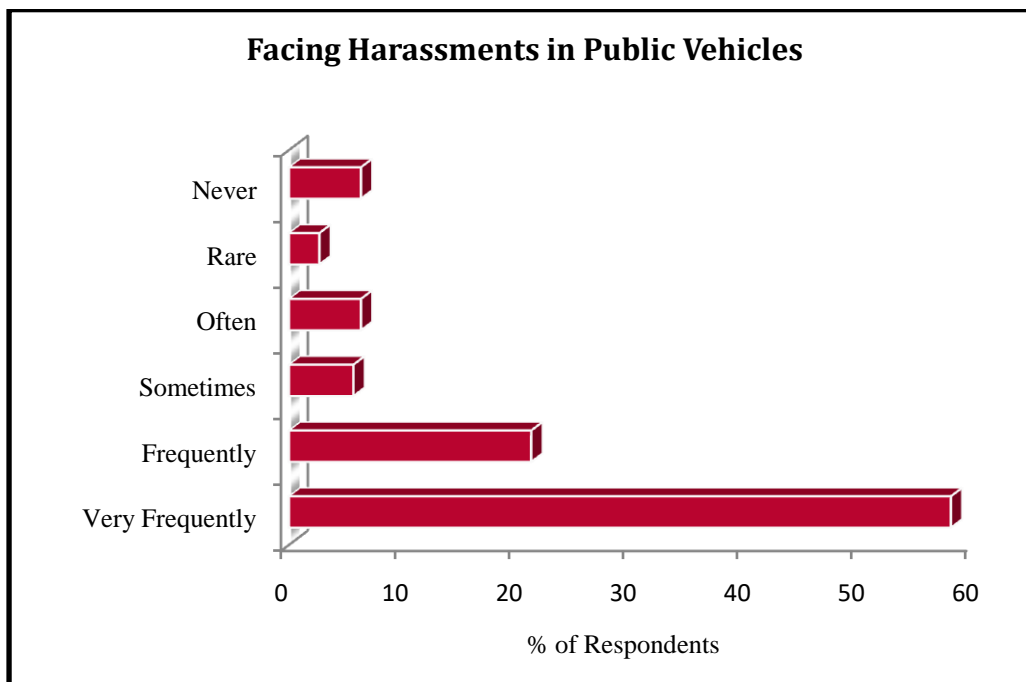


Source: Computed and Prepared by the Researcher<sup>21</sup>.

### 5.5 Harassment in Public Transport:

Public transport is indispensable for all, but in public vehicle also, they face lots of trouble. Actually it has been seen that no one offers them a seat, no one allows them to stand by their side in a public vehicle. Sometimes they are laughed at and often they are not even allowed to ride on public vehicles at all. These humiliating incidents happen almost every day. In this study, it has been seen that 57.94% respondents face harassment very frequently during their travel in public vehicles, 21.2% respondents face harassment frequently, 5.63% respondents face harassment sometimes, 6.29% respondents face often and 2.65% respondents face harassment rarely. And the remaining 6.29% respondents never face any harassment (details graphed in fig. 5.22). Mainly bisexual and some queer respondents fall in this category; they never face any harassment during travel. And the rest are more or less victims of harassment. They mainly face these kinds of harassment-- verbal abuse, bullying, sexual assault, molestation, etc.

<sup>21</sup> For details please see Appendix 1.

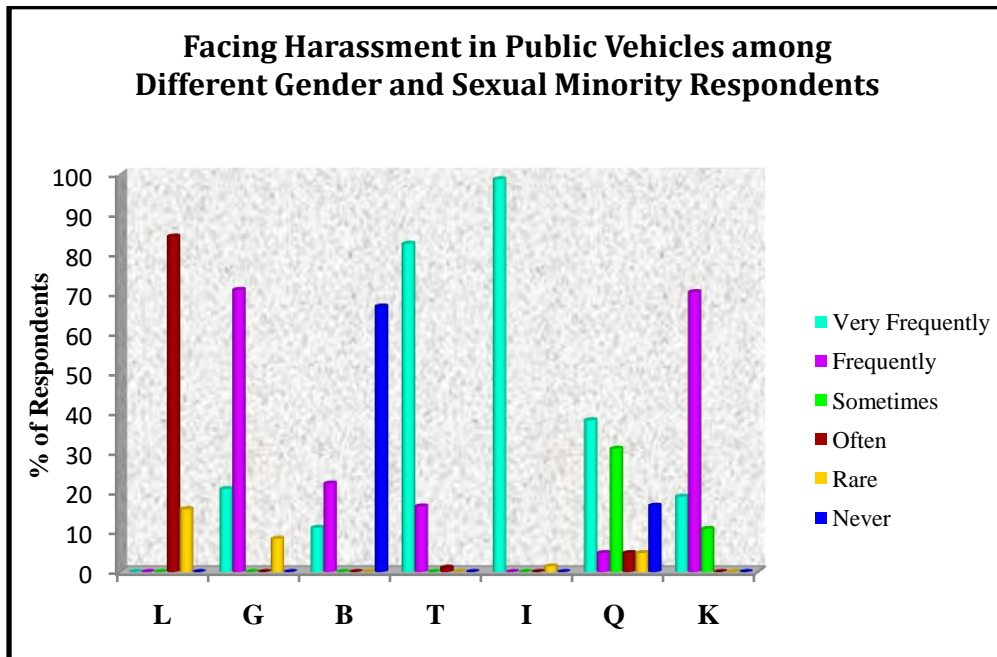
**Figure no. 5.22**

Source: Computed and Prepared by the Researcher<sup>22</sup>.

And when in this study, it is seen category wise, it has been observed that mainly members of the transgender, intersex, queer and kothi categories face harassment in a very horrible way because their dress, expression, hair style, way of talking at once show that they are different from everyone else. In this thesis, it is seen that 82.42% transgender respondents have been harassed very frequently during travel on public vehicles and 98.59% intersex respondents have also been similarly harassed. 70.27% kothi respondents are harassed frequently on public vehicles. Besides these, lesbian and gay people have also been harassed in public vehicles. Sometimes their sexual orientation, behavior and expression draw derisive attention and then they are subjected to harassment in public vehicles. But in comparison to other gender and sexual minority people, bisexual people are less harassed because most of the time they somehow manage not to be objects of ridicule because they maintain a low visibility and they do not disclose their sexual orientation, either. Thus 66.66% bisexual respondents have never been harassed in public vehicles during travel because their sexual orientation can never be understood from the outside (details graphed in fig. 5.23). But transgender, kothi and intersex people stand in a much more dire position in this regard.

<sup>22</sup> For details please see Appendix 1.

Figure no. 5.23



Source: Computed and Prepared by the Researcher<sup>23</sup>.

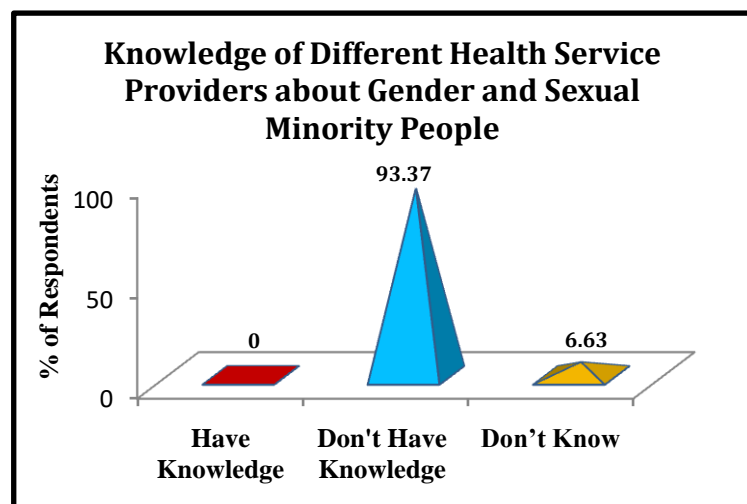
### 5.6 Facing Problems in Healthcare System:

Health is a vital matter for every person. In this regard also they are very unprivileged.

#### 5.6.1 Don't Have Requisite Knowledge about Gender and Sexual minority People:

When they are in hospital for reasons of illness, the hospital authorities do not understand the requirements of the transgender people and can't even decide in which ward they will be admitted. Very few hospitals have separate facilities for transgender people. Besides, most doctors, nurses and other health service providers have no

Figure no. 5.24



Source: Computed and Prepared by the Researcher<sup>24</sup>.

<sup>23</sup> For details please see Appendix 1.

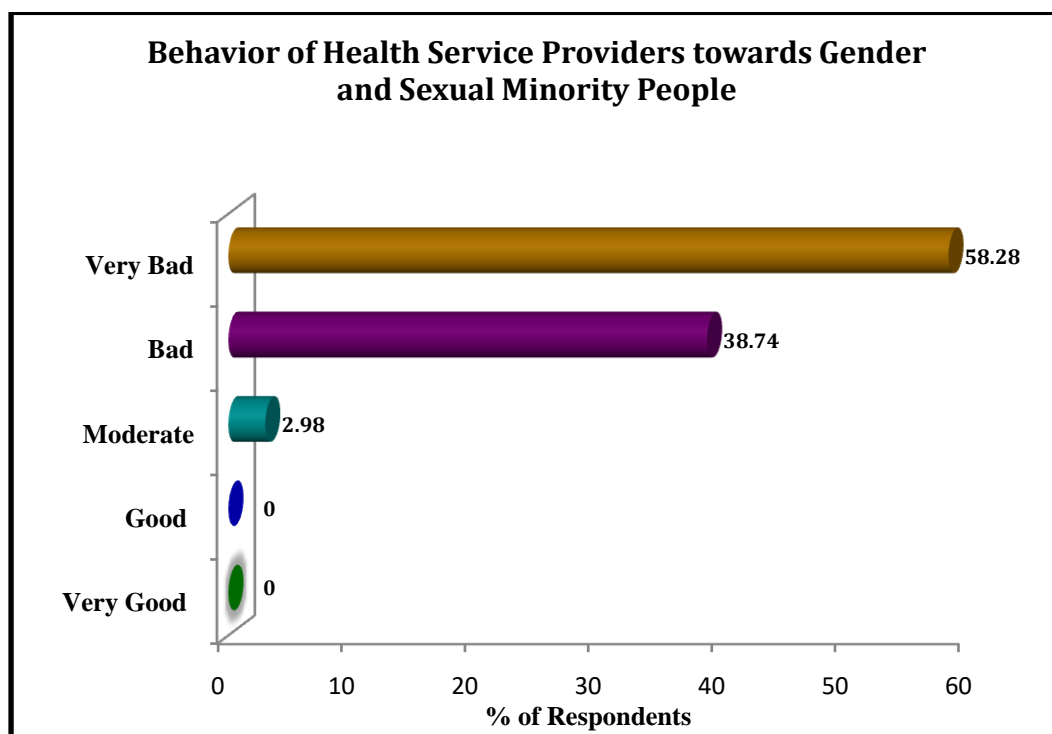
<sup>24</sup> For details please see Appendix 1.



idea about transgender people and for that reason, these gender and sexual minority groups of people have to face a lot of problems in health sectors. Here in this study, it has been found that 93.37% of the total respondents have said that health service providers don't have the requisite knowledge about gender and sexual minority groups of people (details graphed in fig. 5.24).

And the behavior of different health service providers is mostly very bad. Here in this study, 58.28% respondents have said that the behavior of the health service providers is very bad and according to the opinion of 38.74% respondents their behavior is bad to the gender and sexual minority people and only 2.98% respondents have said that they have received moderate behavior which is neither very bad nor good (details graphed in fig. 5.25). So it is a very big issue that they face a lot of difficulties in health sector also.

**Figure no. 5.25**



Source: Computed and Prepared by the Researcher<sup>25</sup>.

<sup>25</sup> For details please see Appendix 1.

- Transgender people do not get a bed in hospital

Here is one very important incident which must be mentioned here. A patient is writhing in agony because he has a gall bladder stone that needs urgent surgery. But it takes many days to resolve this confusion that in which ward he or she will be admitted in the hospital, male ward or female ward and for that reason, the treatment has been delayed. This incident was happened to that person because that person was a transgender (Bhuniya & Bandopadhyay, 2017). This is not an isolated incident and this is happening day-after-day. This incident shows that how much difficulty they are facing in the medical sector day-after-day. But this is very unfair. These should be stopped.

### 5.6.2 Don't Have Health Insurance:

Most Hijras are not under any life or health insurance scheme because of lack of knowledge; inability to pay premiums or get enrolled in the schemes. Thus, most of them rely on the government hospitals in spite of the reality of the pervasive discrimination.

### 5.6.3 HIV/AIDS and Drug Abuse:

The people who belong to gender and sexual minority groups face a variety of social security issues. Most Hijras run away or are evicted from home and they do not expect support from their home in the long run. Subsequently, they face a lot of challenges especially when they

### Paper Cutting No. 5.a:

## হাসপাতালে জায়গা নেই তৃতীয় লিঙ্গের

**দীক্ষা ভূঁইয়া  
তানিয়া বন্দ্যোপাধ্যায়**

যন্ত্রণায় ছটফট করছেন রোগী। গলব্লাডারে পাথর ধরা পড়েছে। দ্রুত অস্ত্রোপচার দরকার। কিন্তু পুরুষ না মহিলা, হাসপাতালের কোন ওয়ার্ডে ভর্তি করা হবে তাকে, সেই ধন্দে কেটে যায় দিনের পর দিন। কারণ রোগী রূপান্তরকামী।

ঘটনাটি কলকাতার এক সরকারি হাসপাতালের। এটি বিচ্ছিন্ন ঘটনা নয়। অনেক সময়েই কোনও না কোনও হাসপাতালে চিকিৎসা পেতে গিয়ে বঞ্চিত হন তৃতীয় লিঙ্গের মানুষেরা, রূপান্তরকামীরাও। এমন কি যারা ইতিমধ্যেই রূপান্তরিত, তারাও। কেন? সমস্যা হল, চিকিৎসাক্ষেত্রে তাদের জন্য নির্দিষ্ট নিয়ম নেই। সরকারি পরিকাঠামোয় পিজিতে লিঙ্গ পরিবর্তনের অস্ত্রোপচার হয় ঠিকই, কিন্তু সেখানেও কোনও আইনি সমস্যা তৈরি হলে তার মোকাবিলা করার ব্যবস্থা নেই। প্রয়োজনীয় 'মেডিকো-লিগ্যাল সেল' তৈরি হয়নি। ফলে তৈরি হচ্ছে নানা জটিলতা। সমস্যা মেনে নিয়েছেন চিকিৎসকেরাও। কিন্তু কী ভাবে এর সমাধান সম্ভব, তার দিশা দেখাতে পারেননি তারা।

ধরা যাক রানিগঞ্জের বড়বাজারের বাসিন্দা, রূপান্তরকামী রানির কথা। ছেলেদের স্কুলে পড়াশোনা করেছেন। নাম ছিল কল্যাণ। সহপাঠী, বন্ধুবান্ধব, আত্মীয়স্বজন— সকলে তাঁকে ছেলে বলেই জানতেন। কিন্তু সপ্তম শ্রেণিতে এক বন্ধুর প্রেমে পড়ে ভিতরে লুকিয়ে থাকার মেয়ের সত্তা বাইরের চেহারায় ফুটিয়ে তোলার জন্য শুরু হয় মানসিক টানা পড়ন। ২০১৪-এ স্তন প্রতিস্থাপনের অস্ত্রোপচার করান রানি। ২০১৫ সালে এক চিকিৎসকের দ্বারস্থ হন সুন্দর মুখ আর হাসি পাওয়ার জন্য। কিন্তু অভিযোগ, মুখের অস্ত্রোপচার করতে গিয়ে সৃজন মুখোপাধ্যায় নামে ওই চিকিৎসক তাঁর স্বাভাবিক সৌন্দর্যটুকু নষ্ট করে দিয়েছিলেন। রানির মুখের চেহারা এক জন বৃদ্ধার মতো হয়ে যায়।

মাধ্যমে রোগীর চাহিদা মতো মুখের সৌন্দর্য তৈরি করতে গেলে এক বা দু'টি ধাপেই তা করা কখনও কখনও সম্ভব হয় না। কিছু সমস্যা থেকে যায়। পরে ছোটখাটো দু'-একটা অস্ত্রোপচার দরকার হয়।" সেটা কি তিনি রানিকে জানিয়েছিলেন? সৃজনবাবুর জবাব, "রানির ক্ষেত্রে পরিস্থিতি এমন জয়গায় পৌঁছয় যে আমার পক্ষে আর কিছু করা সম্ভব ছিল না। একটা অস্ত্রোপচারের পরে যদি রোগী এত অভিযোগ নিয়ে বিভিন্ন মহলে যান, তা হলে পরবর্তী অস্ত্রোপচারগুলি কী ভাবে হবে?"

যদিও রানি একা নন, বাংলাদেশ থেকে আসা গিয়াসউদ্দিন আহমেদ পিজিতে লিঙ্গ পরিবর্তন করে মহিলা হন। ছাড়া পাওয়ার পরে তাঁর স্বকের সমস্যা হয়। ফের পিজি-র প্লাস্টিক সার্জারি বিভাগে ভর্তি হতে গেলে তাঁকে মহিলা ওয়ার্ডে ভর্তি করার পরামর্শ দেন ডাক্তারেরা। কিন্তু তখনও কাগজ-কলমে তাঁর নাম পরিবর্তন হয়নি। তাই ভর্তির সময়ে মহিলা ওয়ার্ডে গিয়াসউদ্দিনের নাম 'এস্তি'ই করা যায়নি।

সমস্যাটা মেনে নিয়েছে স্বাস্থ্য ভবনও। সমাধান কী? স্বাস্থ্য দফতরের প্রতিমন্ত্রী চন্দ্রিমা ভট্টাচার্য বলেন, "এ রাজ্যে রূপান্তরকামীদের কথা ভেবে মমতা বন্দ্যোপাধ্যায়ই প্রথম ট্রান্সজেন্ডার ডেভেলপমেন্ট বোর্ড তৈরি করেন। তিনি এ বিষয়ে সচেতন। যা করার নিশ্চয় করবেন।"

কিন্তু কবে? তার উত্তর কোনও স্বাস্থ্যকর্তার কাছেই পাওয়া যায়নি। বহু সরকারি হাসপাতালের কর্তা ইতিমধ্যে স্বাস্থ্য ভবনে আবেদন জানিয়েছেন, লিঙ্গ পরিবর্তনের অস্ত্রোপচার যে সব হাসপাতালে হয় সেখানে মেডিকো-লিগ্যাল বোর্ড তৈরি করা হোক। ওই বোর্ডে আইনজীবী এবং সমাজবিদেও থাকবেন। কিন্তু সেই আবেদনের কোনও উত্তর মেলেনি। স্বাস্থ্য সচিব রাজেন্দ্র শঙ্কর এ নিয়ে কোনও মন্তব্য করতে চাননি।

রাজ্য ট্রান্সজেন্ডার ডেভেলপমেন্ট বোর্ডও এ বিষয়ে এখনও সরব

Source: Anandabazar Patrika, 17<sup>th</sup> July, 2017.

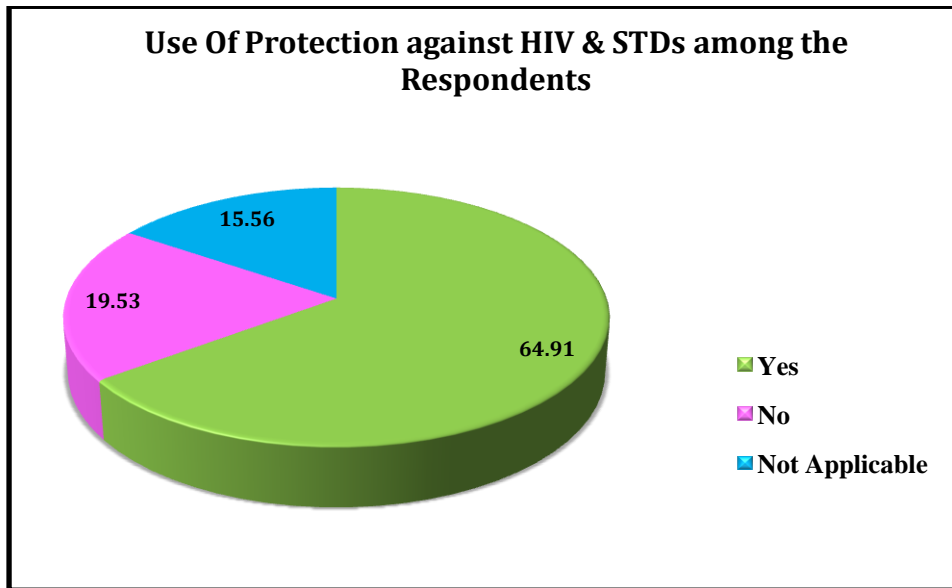
are not in a position to earn (or decreased earning capacity) due to health condition, lack of employment opportunities or old age. Lack of livelihood options is a key reason for a significant proportion of transgender people to choose or continue to be in sex work - with its associated HIV and health-related risks.

The HIV epidemic has frequently been linked to gays, bisexuals and other men who have sex with men. Among these people, the rate of HIV infection is higher; especially MSM people are more affected. This global trend is being seen in India with the current estimated HIV prevalence among MSM ranging between 7 and 16.5 percent. This is in comparison with the overall HIV prevalence estimated to be 0.31 percent (0.25-0.39%) in 2009 (Azad & Nayak, 2016). There are some reasons behind this fact. It has been discussed earlier that the people of this group are very much discriminated against and neglected and stigmatized both by their families and the rest of society. As a result, they can't find anyone to trust and no one likes them. They often take to drugs to forget their current situation. This addiction, sexual promiscuity and constant association with new partners surely result in high rates of HIV infection. Besides, many of them are involved in sex work and so naturally the rate of HIV infection is high among them. Various NGOs and the government are making really serious efforts to increase awareness among them, but, in spite of this among them the rate of HIV infection is much higher than among other sections of society.

#### **5.6.4 Use of Protection against HIV:**

Though these minority people have a high rate of sexually transmitted diseases, there is still reluctance among them to use protection during their romantic relationship. Among all the respondents, 64.91% respondents use protection against HIV and STDs. The other 19.53% do not use any kind of protection against sexually transmitted diseases. Mainly hijras fall in this category. And the remaining 15.56% respondents fall under the 'not applicable' category (details graphed in fig. 5.26) because they don't have any sexual life. For that reason, they don't need to use any protection against HIV.

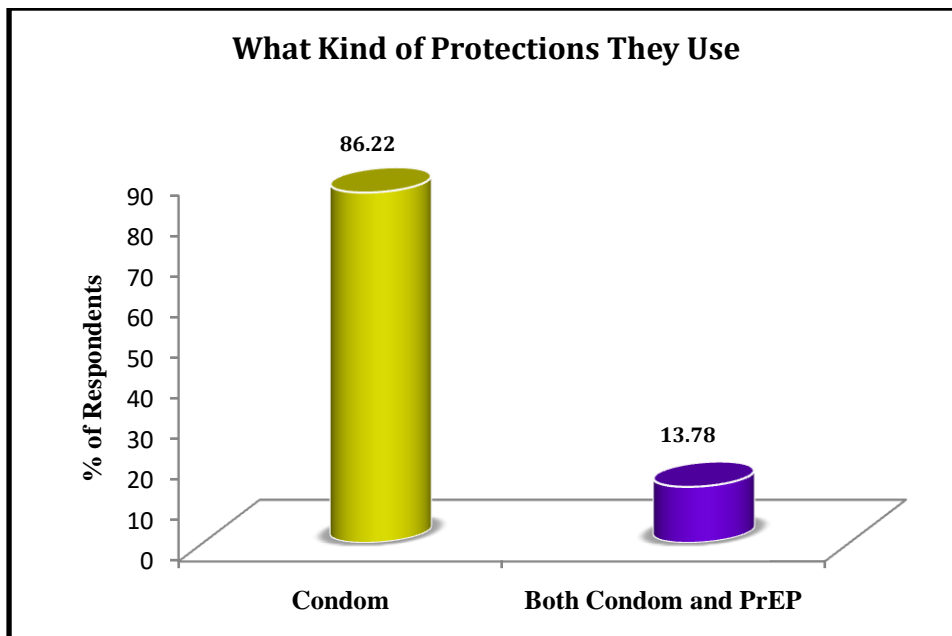
Figure no. 5.26



Source: Computed and Prepared by the Researcher<sup>26</sup>.

Among those who use protection against HIV, 86.22% respondents use only condoms and the remaining 13.78% respondents use PrEP (details graphed in fig. 5.27) and it has been seen that the respondents who use PrEP, they use condom simultaneously against HIV and other sexually transmitted diseases.

Figure no. 5.27



Source: Computed and Prepared by the Researcher<sup>27</sup>.

<sup>26</sup> For details please see Appendix 1.

<sup>27</sup> For details please see Appendix 1.

Besides these types of protection, some others type of protections are available. These have been described in the following-

- a) **PrEP:** The full form of PrEP is pre-exposure prophylaxis and it can reduce the chance of getting HIV from sex or injection drug use. When it is taken as prescribed, PrEP is highly effective in preventing HIV. It is taken in a daily dose (Dolezal et al., 2015).
- b) **PEP:** The full form of PEP is Post-Exposure Prophylaxis (Dolezal et al., 2015) and if anyone thinks that he or she may have been exposed to HIV in the last 72 hours, then for precaution they can take this medicine after proper medical consultation.

Besides the aforesaid processes, there are also some processes of prevention of HIV infection. These are Intravaginal Ring, implants and injectables. But the use of condom, PrEP and PEP are comparatively common among the respondents.

## **5.7 Problem in Legal Issues:**

Although there are various legal benefits for them, but unfortunately they are constantly deprived from those benefits. Those have been discussed below.

### **5.7.1 Discrimination and Indian Law:**

Discrimination on the basis of gender identity is the violation of articles 14, 15, 16, and 21. It is argued that no state can do so knowingly or unknowingly. It is also contended that the non-recognition of the transgender communities that leads to the violation of human rights is actually the violation of the fundamental rights that every citizen of the country is entitled to. It is also emphasized that Yogyakarta Principles have been accepted as the basis of recognizing transsexual persons in various UN bodies and international forums. In the recent past, in many forums, it was clearly contended that the transgender population of the country should be declared as a backward class and must be granted advantages accordingly (Shukla & Shadangi, 2019). It is also contended that each and every transgender should have the right to opt for gender identity as per their wish.

The articles 14, 15, 16, 17, 19 and 21 and fundamental rights of Indian Constitution are thoroughly discussed below:

### **5.7.1.1 Equality before Law:**

According to the Article 14 of the Indian Constitution, the State shall not deny to any person equality before the law or the equal protection of the laws within the territory of India (The Constitution of India, art. 14, n.d.). The aforesaid law should be applicable to all human beings in India. But the present situation is totally different with regard to the LGBTIQ and hijra people. The people of this community do not get equal opportunity and equal protection from police and administration within the territory of India. They are always facing discrimination from every part of our society. So, the article 14 upholding “Equality before law” is not always abided by and it is the violation of human rights.

The sexual minority is not a recognized entity for the purpose of insurance claims, compensation and nomination for the purpose of gratuity benefits. The reality is that the transgender community in India lives in a precarious environment dominated by oppression, discrimination and systematic exclusion. It cannot be forgotten that discrimination is the antithesis of equality and that it is the recognition of equality which will foster the dignity of every individual.

### **5.7.1.2 Prohibition of Discrimination on Grounds of Religion, Race, Caste, Sex or Place of Birth:**

According to the Article 15 of the Indian Constitution, the State shall not discriminate against any citizen on grounds only of religion, race, caste, sex, and place of birth or any of them (The Constitution of India, art. 15, n.d.). But very unfortunately, when it comes to the community of LGBTIQ and hijra people, article 15 (1) is totally breached by our society. They are always discriminated against on the basis of sex and gender. Because of gender binarism of our society, cisgender and heterosexual people always get different facilities from our society. But LGBTIQ and hijra people are always excluded and discriminated against on the grounds of sex and gender. This is a dismal and bleak fact. It is also the violation of the fundamental rights of the Indian constitution.

Besides this, it has been also declared in this Article that no citizen shall be discriminated, on the grounds of religion, race, caste, sex, place of birth or any of them and all the citizens have the same right to access shops, public restaurants, hotels and places of public entertainment. But it is very unfortunate that hijra and LGBTIQ people don't get access as easily as other persons. The people of this community always face humiliation from different

people in shops, public restaurants, hotels, cinema halls etc. People laugh at them and for that reason, they can't freely go everywhere.

Society always hates them and they are insulted in public places. Sometimes they are isolated by their family members and they don't get acceptance even from their parents and relatives. So, they face lots of hindrance in using public wells, tanks, bathing ghats, roads, public resorts etc. It is also the violation of fundamental rights.

### **5.7.1.3 Equality of Opportunity in Matters of Public Employment:**

According to the Article 16 in the Indian Constitution, there shall be equality of opportunity for all citizens in matters relating to employment or appointment to any office under the State (The Constitution of India, art. 16, n.d.). But it is also a fake law for this community because they don't get equal opportunity in matters of employment or appointment to any office under the state because of their gender and sex. So it is proved that there is no equality. Most of the people of our society regard them with scorn. They laugh at them. They insult the people of this community. So, no one is ready to employ them. The experts on interview boards are not mentally ready to listen to them. So they are totally deprived in the field of employment.

And it has been also stated in the Indian Constitution that no citizen shall, on grounds only of religion, race, caste, sex, descent, place of birth, residence or any of them, be ineligible for, or discriminated against in respect of, any employment or office under the State. But this aforesaid rule is not always maintained in different offices. And it is a fact that most of cross dressers are humiliated in their work places. So, they are discriminated against.

### **5.7.1.4 Untouchability:**

“Untouchability” is abolished and its practice in any form is forbidden. The enforcement of any disability arising out of “Untouchability” shall be an offence punishable in accordance with the law (The Constitution of India, art. 17, n.d.). But this is not always true for everyone. Because hijra people are generally untouchable in our society. They don't get a job anywhere. If we trust them, they can do a lot of work with efficiency and honesty. But, due to our mental blockage, we can't accept them heartily. They don't get a chance to prove their worth. People don't accept them as a housemaids or daily workers. Besides, they don't get a chance to take private tuition because of their gender expression and sexual orientation. They are always a deprived class. So this law is not properly applied to benefit them.

### **5.7.1.5 Protection of Certain Rights Regarding Freedom of Speech, etc:**

The fundamental right, which is explained in article 19, is not always accurately followed. According to this article, every Indian citizen has the right to assemble peacefully, to form associations or unions and to move freely throughout the territory of India. Besides these, they have the right to reside and settle in any part of the territory of India (The Constitution of India, art. 19, n.d.). But the present situation is totally different. LGBTIQ and hijra community people don't get a chance to reside in their own house and they also can't stay with other heterosexual or cisgender people in the same area. They always prefer to reside with other hijra people forming a colony far away from the normal residential areas. Besides, they can't travel freely from one place to another because of the threat of humiliation and insulting behaviour of people. They don't get permission to meet or assemble peacefully because nobody is ready to permit them to use their own place for a meeting of the community members. So ultimately, these fundamental rights are a mare's nest.

### **5.7.1.6 Right to Education**

The State shall provide free and compulsory education to all children of the age of six to fourteen years in such manner as the State may, by law, determine (The Constitution of India, art. 21 A, n.d.). This law also does not benefit LGBT community people because, as the gender expressions of these people (LGBTIQ and hijra) are altogether different from their assigned gender at birth, they often suffer from confusion, mental anxiety, depression since childhood. They always question themselves, "Who am I? Why am I different from others?" So, they try and try to find the answer from the core of the heart and they don't get the answer and easily slide into depression. They are humiliated in public places and in schools and they are isolated for their sex and gender, especially for their gender expression and sexual orientation. They drop out their school. Nobody gives them private tuition and treats them properly. They have to fight in every stage of life. When their gender expression and sexual orientation become apparent to their surroundings, society starts to abuse them. They also face sexual torture from their own family members, neighbors and friends and sometimes from their teachers also. For that reason, they generally don't get free and compulsory education. Exceptions are always there, of course. But exceptions don't make a rule.

No formal education for transgenders is available in the Indian context. They are deprived of family and school environment. Transgenders discontinue their education and risk their future



career opportunities. A close analysis of various reports and discussion with community members and stakeholders suggest that transgenders are mostly uneducated or undereducated and become reluctant to continue schooling. The average qualification is secondary (Matric) or senior secondary level. The enrolment is significantly low and dropout rate at the primary and secondary level is still very high. They are hardly educated as they are denied by the society and as a result they do not receive proper schooling. Even if they are enrolled in an educational institute, they are bullied and face harassment every day and are asked to leave the school or they drop out on their own. It is because of this that they take up begging and sex work. It is imperative for the government to afford inclusive education for transgender students and also to provide adult education to them.

### **5.7.2 Problems of Property Inheritance:**

The other fields where this community feels neglected are inheritance of property. They are often pushed to the periphery as a social outcaste and for that reason, many transgender and kothi and other non binary people end up their lives as beggar or hijra. Thus, later transgender people may find it difficult even to claim their share of the property or inherit what would be lawfully theirs.

### **5.7.3 Lack of Access to Banking Facilities:**

Since gender minority people are often faced with the ambiguity between their assigned sex at birth and their gender identity and gender expression, any official document stating gender is an ever persistent problem for themselves. They cannot get rid of this confusion which creates lots of trouble in their banking facilities. Also these gender and sexual minority people often cannot declare their nominees since relationship status is a must in banking works. As a result they have lost their access to locker and other banking facilities.

### **5.7.4 Problem of Prisoners:**

Besides, transgender people also face different awkward situations in jail as there are no separate cells for them and for that reason they have to undergo humongous physical and mental torture leading to trauma. Especially, transgender, kothi and hijra people have to deal with this deplorable state.

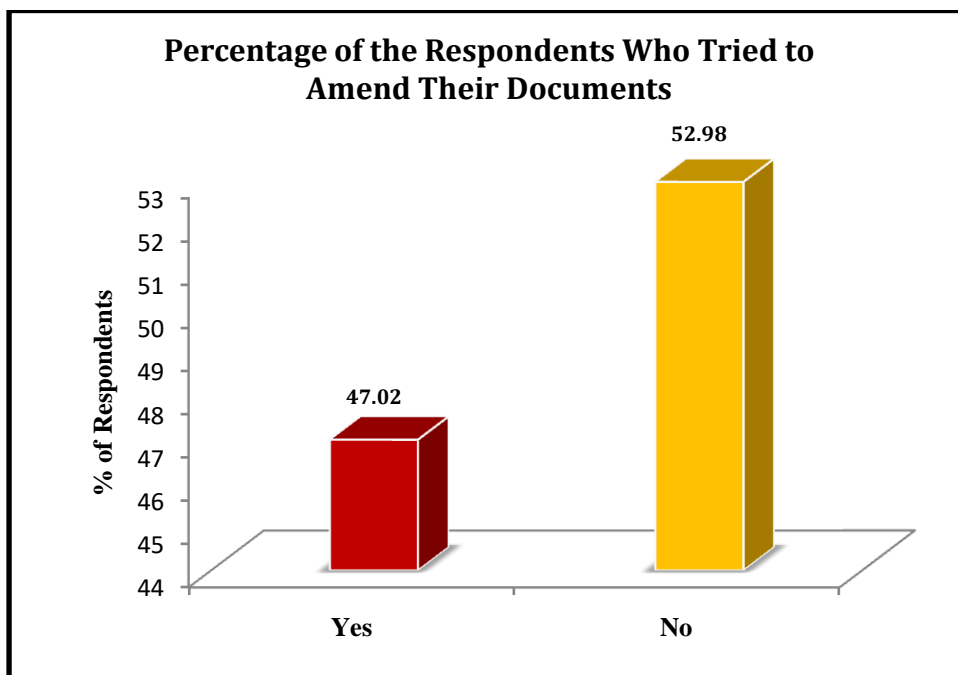
### **5.8 Problems of Getting Identity Cards:**

Most respondents try to amend their documents according to their gender identity. Third gender or transgender or non-binary people have got voting rights, but they have to face more

difficulties than other people in getting voter card, Aadhaar card, PAN card etc. So it is a big problem in their life. Though the National Portal for Transgender persons is a central government portal where one can apply for voter card, aadhaar card, pan card and other such documents, it is really a time consuming process. In all these areas they face various kinds of deprivation and problems.

This study reveals that 47.02% respondents have tried to amend their documents because only transgender, transsexual and hijra people want to amend their documents according to their gender identity and those who have tried to amend their documents fall in this category. But the other 52.98% respondents are sexual minority people who don't have any requirement to change their gender identity (details graphed in fig. 5.28). However, kothi people are also gender minority group; but they don't try to amend their documents because they never want to go for SRS.

**Figure no. 5.28**

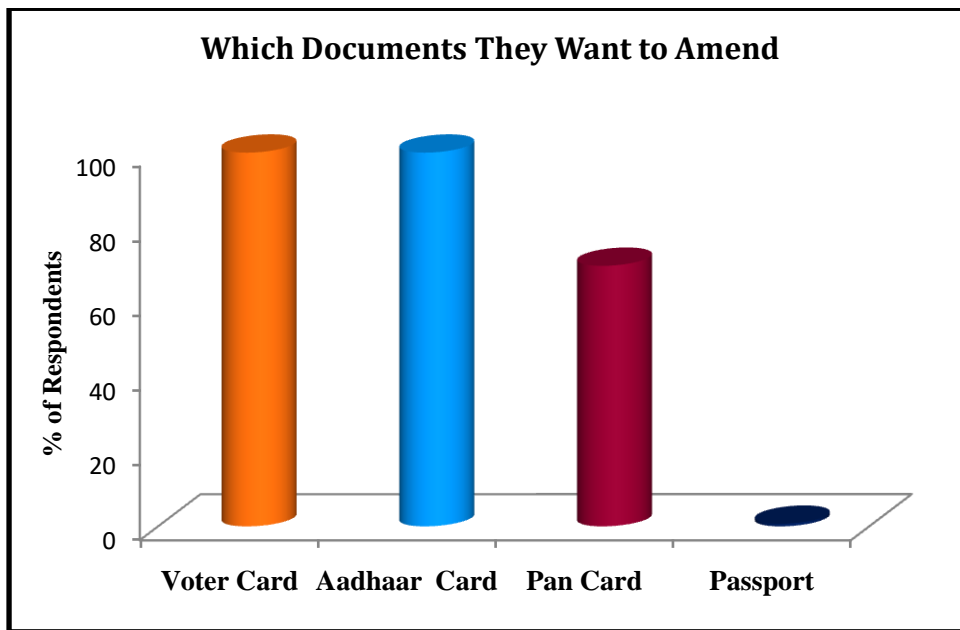


Source: Computed and Prepared by the Researcher<sup>28</sup>.

Of 142 respondents, all want to amend their voter and aadhaar cards and 69.72% want to amend PAN card and only 0.7% respondents want to amend their passport (details graphed in fig. 5.29).

<sup>28</sup> For details please see Appendix 1.

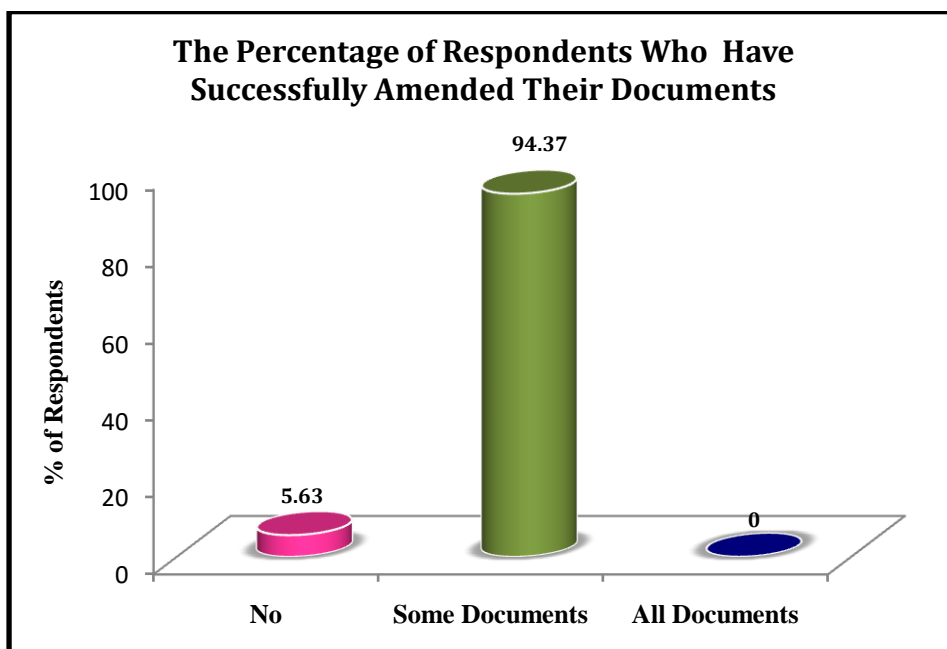
Figure no. 5.29



Source: Computed and Prepared by the Researcher<sup>29</sup>.

Among these 142 respondents, 134 respondents or 94.37% successfully amended some of their documents (details graphed in fig. 5.30).

Figure no. 5.30



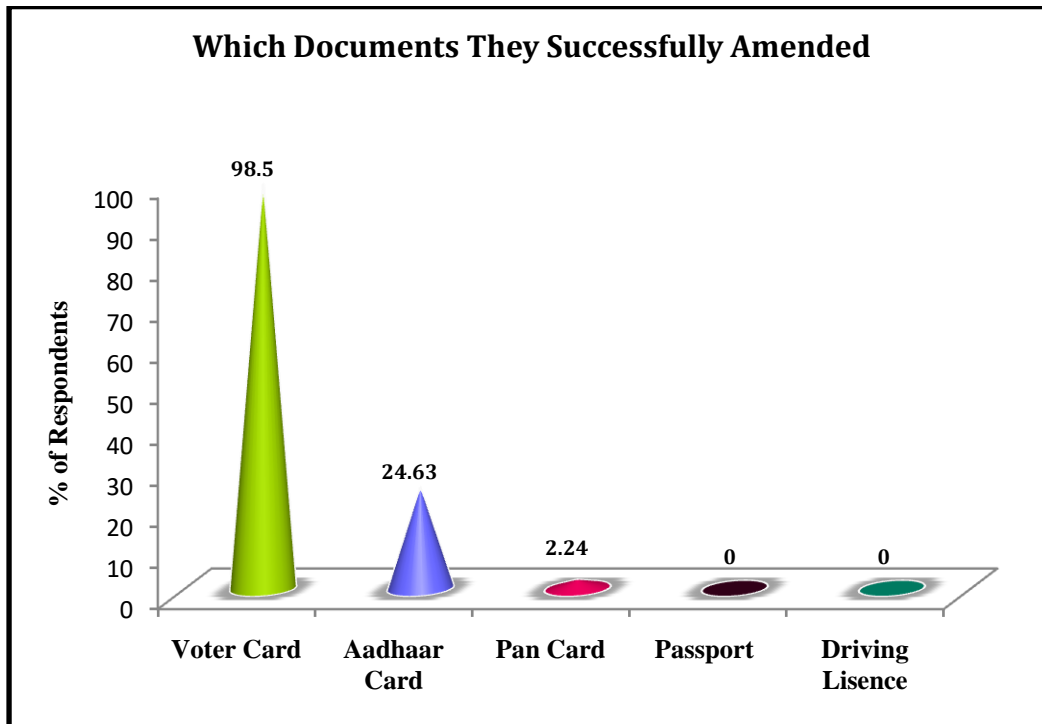
Source: Computed and Prepared by the Researcher<sup>30</sup>.

<sup>29</sup> For details please see Appendix 1.

<sup>30</sup> For details please see Appendix 1.

Among these 134 respondents, 98.5% respondents have successfully amended their voter identity cards, 24.63% respondents have amended their aadhaar cards successfully and 2.24% respondents have amended their pan cards (details graphed in fig. 5.31).

**Figure no. 5.31**



Source: Computed and Prepared by the Researcher<sup>31</sup>.

### 5.9 Political Problems:

In the political field they also face various problems. They don't get important roles in government or political parties very easily because people hardly accept them even though they are human but no one wants to accept this fact. Although they are willing to take responsibility to the utmost of their ability, they do not get the opportunity. In this way they are subjected to discrimination and marginalization in every case which is patently unjust. But there are very few exceptions. Shabnam Mausi and Kamala Jaan are such exceptions. Shapnam Mousi became Member of Parliament from Sahogpur in Madhya Pradesh in 2000 (Sangeetha, 2020); Kamla Jaan was elected as Mayor of Ketni in the same year (Sharma, 2018).

<sup>31</sup> For details please see Appendix 1.

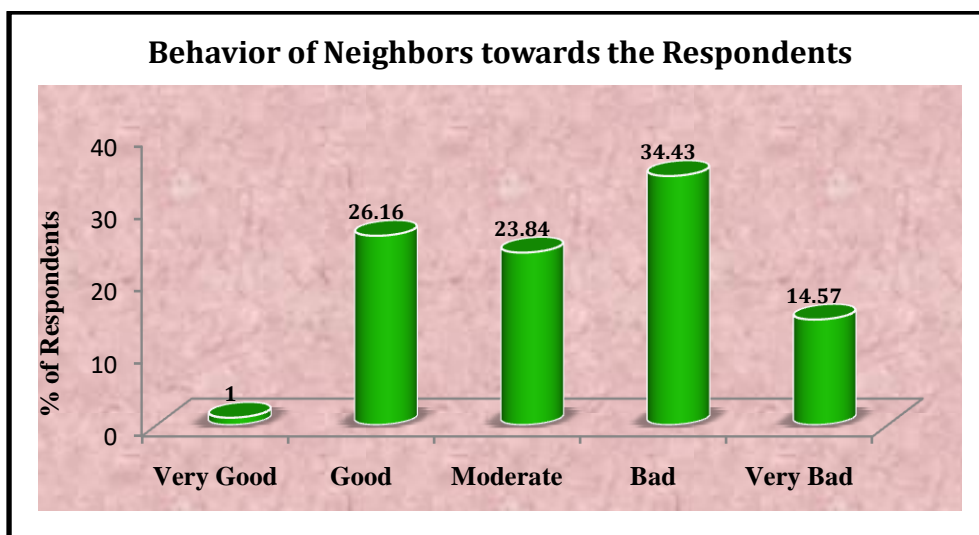
## 5.10 Social Exclusion and Marginalization:

Apart from the above various problems, many more difficulties and hindrances these people have to face on a daily basis and as a result, they feel socially excluded and marginalized which have been discussed below.

### 5.10.1 Neighbor's Behavior:

As the society does not see them well, in the neighborhood where these minorities people live, the neighbors also don't take them kindly and friendly and always want to throw them away. Here in this study, it has also been found that the opinion of the maximum respondents (34.43% respondents) is that they are treated badly from their neighbors and 14.57% respondents are getting very bad treatment and 23.84% respondents get moderate treatment and only 26.16% respondents get good behavior and only 1% respondents get very good treatment or behavior from their neighbors (details graphed in fig. 5.32). The respondents who get good behavior and good treatment from their neighbors are mainly engage with hijra profession and they are mainly living in Muslim dominated area and those hijra or eunuch people get respect from their neighbors and some well established transgender and some other non binary well established and well educated respondents also get good behavior from their neighbors. But it should be kept in mind that exception does not make a rule. So in maximum cases these gender and sexual minority people get negligence and bad behavior from their neighbors and surroundings.

**Figure no. 5.32**



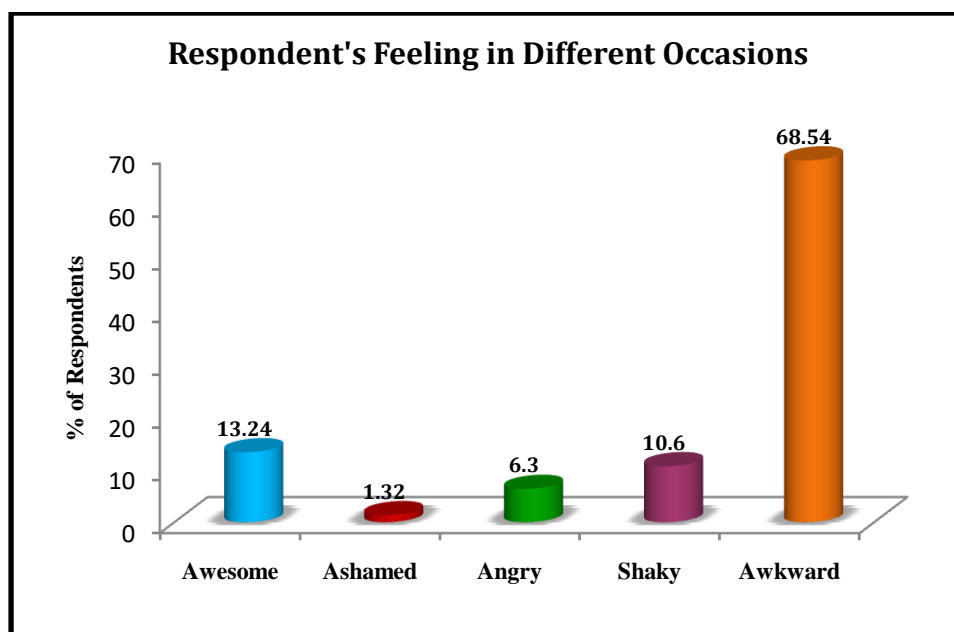
Source: Computed and Prepared by the Researcher<sup>32</sup>.

<sup>32</sup> For details please see Appendix 1.

### 5.10.2 Feeling Unwanted in any Occasion:

Most of the time these people are frowned upon by the general public and that's why they feel very unwanted when they go to any occasion. 13.24% respondents feel awesome in any party, 1.32% respondents feel ashamed, and 6.3% respondents get angry because of facing different types of insult. Besides these, 10.6% respondents feel shaky in any party and occasions because most invitees look at them strangely and avoid them. And this is the same reason that the remaining 68.54% respondents feel very awkward (details graphed in fig. 5.33).

Figure no. 5.33



Source: Computed and Prepared by the Researcher<sup>33</sup>.

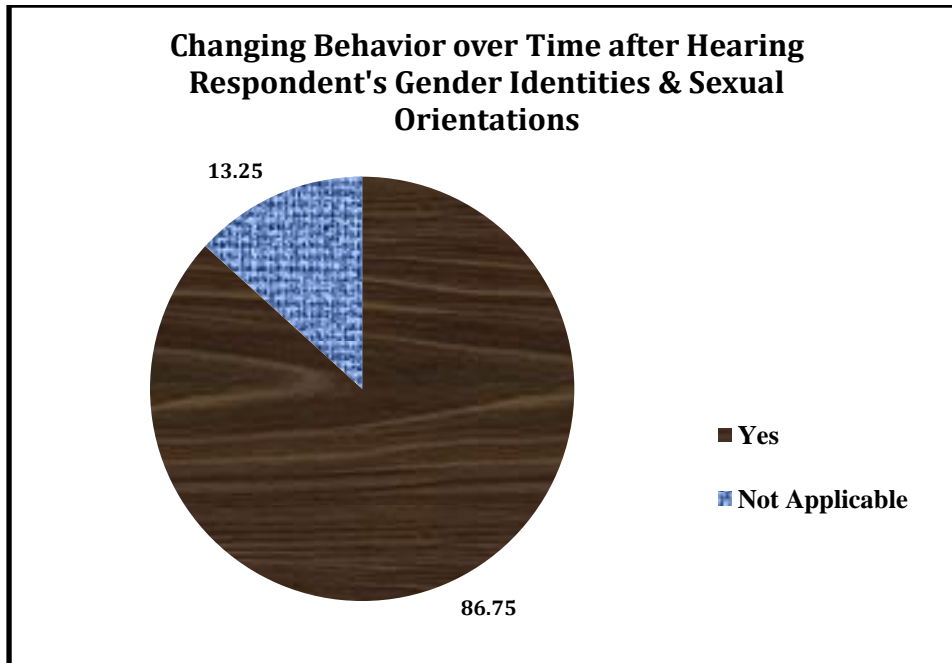
### 5.10.3 Changing Behavior after Hearing Respondent's Gender Identity and Sexual Orientation:

Besides all of these, it has been also found that among the total respondents, 262 people, which is 86.75% of the total respondents, have given their opinion that people around them turn away from those gender and sexual minority respondents and their behavior has changed after hearing their gender identity and sexual orientation. But only 13.35% respondents fall in the category of 'not applicable' (details graphed in fig. 5.34) because either they don't disclose their gender identity or sexual orientation or they brought up within hijra people. But unfortunately, there don't have any respondent who is treated well by the people around them

<sup>33</sup> For details please see Appendix 1.

even after knowing their gender identity and sexual orientation. This shows how neglected and marginalized they are socially.

**Figure no. 5.34**



Source: Computed and Prepared by the Researcher<sup>34</sup>.

#### **5.10.4 Problem in Buying Offices and Flats:**

In spite of the above challenges, a few community-based organizations working for transgender communities across India were able to meet the legal requirements for registration. However, transgender communities reportedly had issues with the government officials who were in charge of processing the registration formalities. They were asked unnecessary and irrelevant questions and there was unnecessary delay. Buying or hiring office space for the legal association is very difficult. Even if they get one, the landlords quote unfair rents. Besides these, the landlords are not very keen in giving houses to these people for rent.

#### **5.10.5 Lack of Access to Appropriate Restroom Facilities:**

Transgender people are often suffering from lack of safe access to public restrooms. They may be assaulted if they use the restroom that conforms to their gender identity or forced to use a restroom that does not conform to their gender identity.

<sup>34</sup> For details please see Appendix 1.

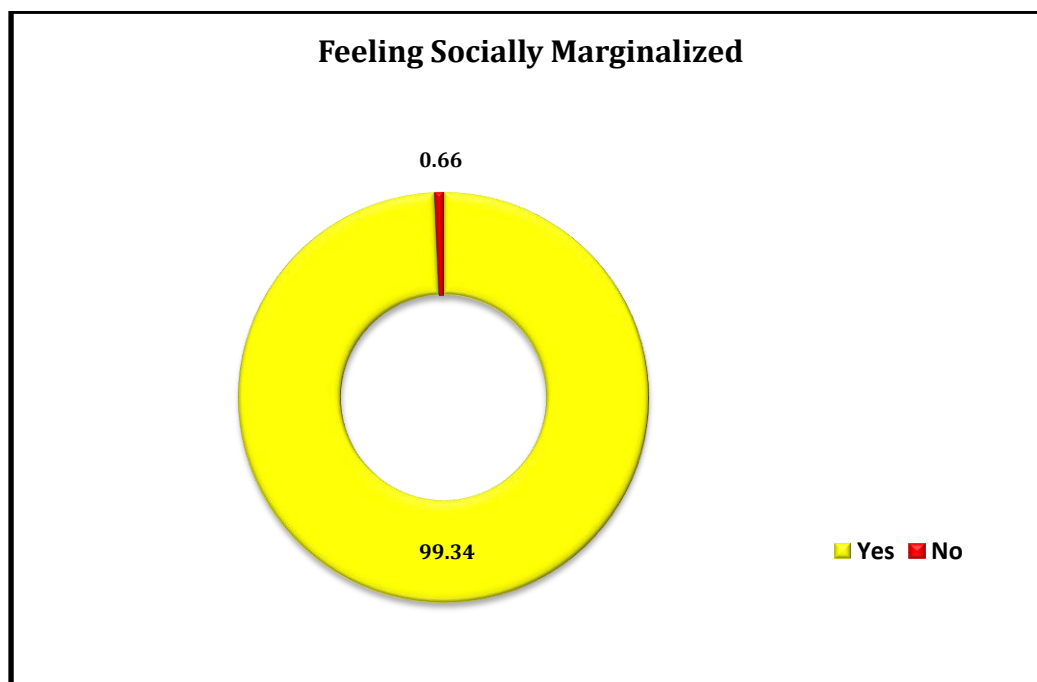
### 5.10.6 Use of Disrespectful Names and Pronouns:

When a transgender youth has identified himself or herself as a particular gender (irrespective of biological sex), it is obvious that everyone should use the name and pronoun chosen by that transgender person which is very much appropriate to that particular gender. The intentional use of prior name and pronouns is very much disrespectful for them. But no one do it and maximum people insult them by using inappropriate and disrespectful pronouns for calling them. It is a big problem for the gender and sexual minority groups of people.

### 5.10.7 Feeling Socially Marginalized and Feel Alone:

From the perspective presented above, it is not difficult to understand that the people of this category are very much deprived and marginalized in this society. Here among all the respondents 99.34% people have said that they feel marginalized in this society (details graphed in fig. 5.35).

**Figure no. 5.35**



Source: Computed and Prepared by the Researcher<sup>35</sup>.

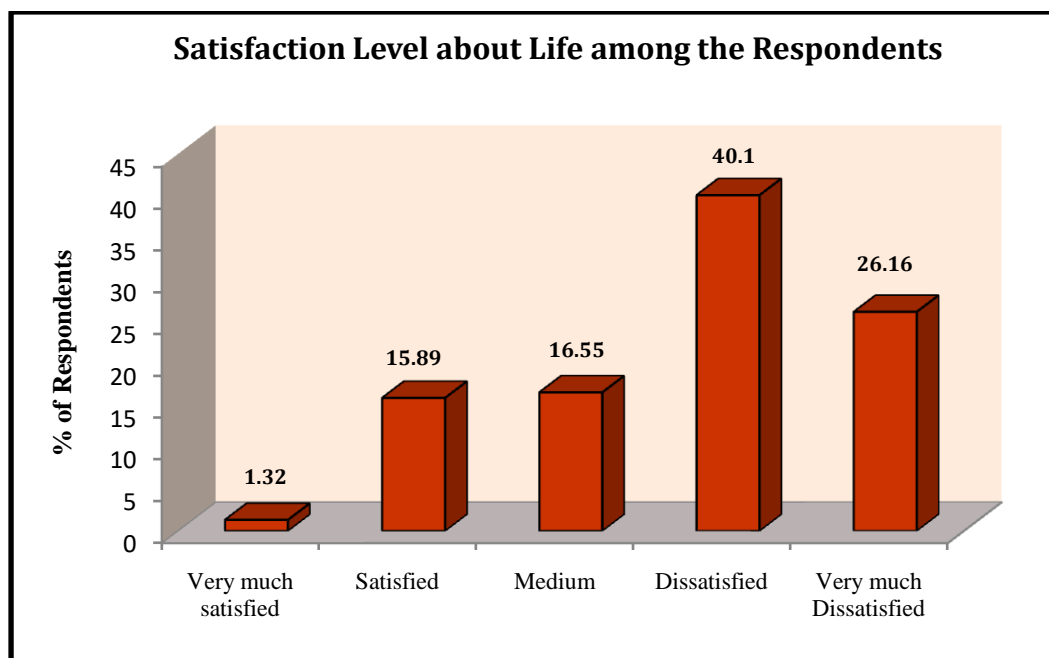
<sup>35</sup> For details please see Appendix 1.



### 5.11 Mental Depression and Dissatisfaction in Life:

Quite naturally, these people come across lot more challenges in their day to day life. A lion's share of this population lives an unhappy and dissatisfied life. Hence, anxiety and depression have become almost an integral part of their lives. In this study, out of the total respondents (N=302), 40.1% are dissatisfied with their lives whereas 26.16% are very much dissatisfied and 16.55% are medium dissatisfied and 15.89% are more or less satisfied. Only a mere 1.32% are very much satisfied with their lives (details graphed in fig. 5.36) as very few of this community have been accepted well in their house despite ambiguity in their assigned sex at birth and gender identity. Besides, some people of this community are satisfied as they have not revealed their sexual orientation to their family members; since sexual orientation cannot be guessed like gender identity, they are naturally successful to deceive their family members.

**Figure no. 5.36**



Source: Computed and Prepared by the Researcher<sup>36</sup>.

#### 5.11.1 Bad Habits and Problem in Sexual Behavior:

As these people are very deprived and suffer from depression, bad habits such as smoking and drinking are easily contracted by them. Apart from these bad habits like smoking and drinking, there are many other things that are not right with them. For example, Hijras often

<sup>36</sup> For details please see Appendix 1.

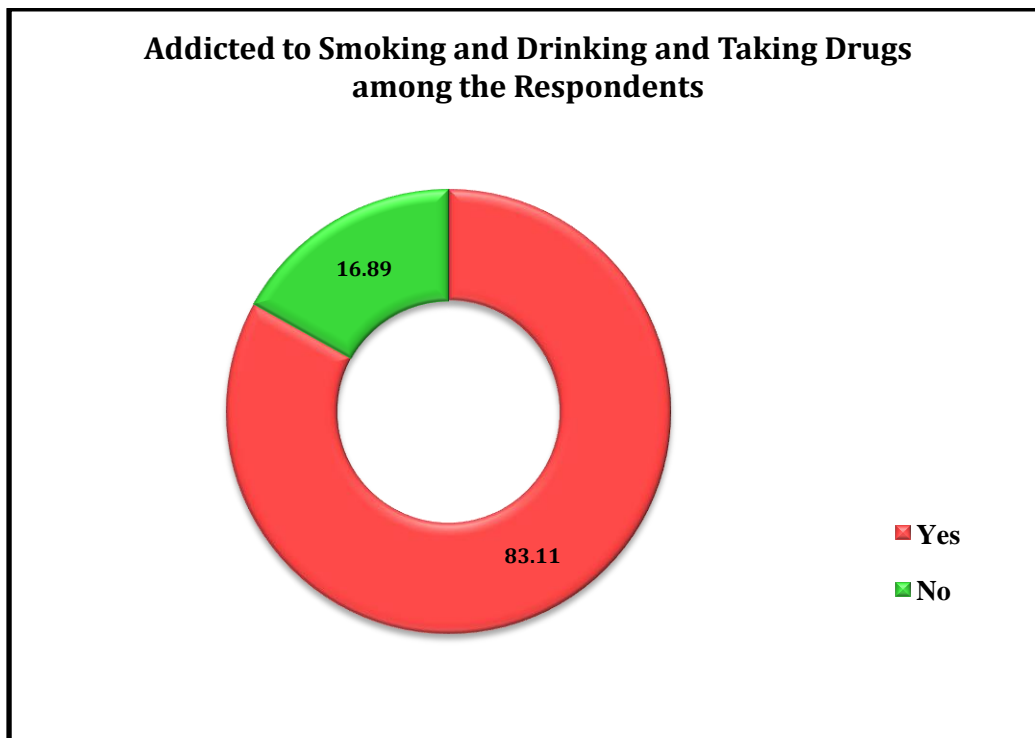
forcibly collect money on the streets, but not all of them do it. But to what extent can we blame them because other sources of income hardly exist for them and for that reason they have chosen this profession. But all these things happen to them because of their social exclusion. If they had equal opportunities for education and employment like people in the mainstream society, they would have lived normally like everyone else, not like this.

Hijras cannot enjoy normal sex life. Many Hijras spend their lives as sex workers. So there is a risk of HIV infection and vulnerability to HIV. Risk is based on personal behavior, but vulnerability is related to the social environment in which one lives.

### 5.11.2 Addiction:

Since these category people are often subjected to physical and mental abuse, harassment both at home and workplace, a lion's share of them are addicted to frequent smoking, drinking and taking drugs on a regular basis. Out of the total respondents (N=302), 83.11% are addicted to these and the remaining 16.89% are not (details graphed in fig. 5.37).

**Figure no. 5.37**

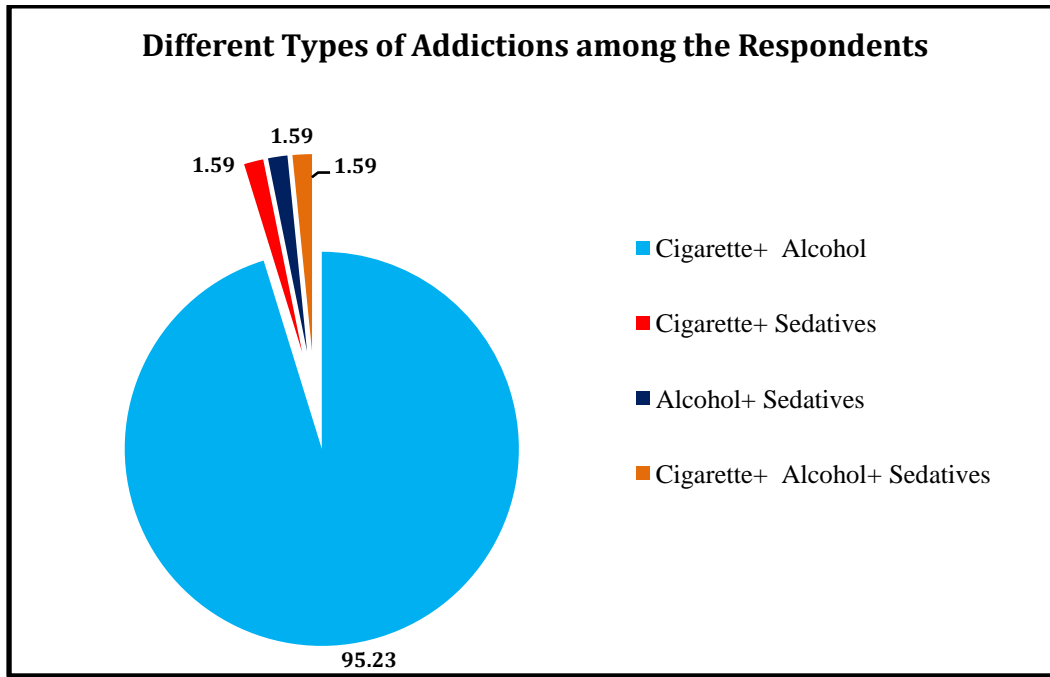


Source: Computed and Prepared by the Researcher<sup>37</sup>.

<sup>37</sup> For details please see Appendix 1.

This study found that among those 251 respondents, who are addicted to different drugs and smoking and drinking, 95.23% are addicted to both cigarette and alcohol, 1.59% to both cigarette and sedatives, 1.59% to both alcohol and sedatives and rest 1.59% to all cigarette, alcohol and sedatives (details graphed in fig. 5.38).

**Figure no. 5.38**



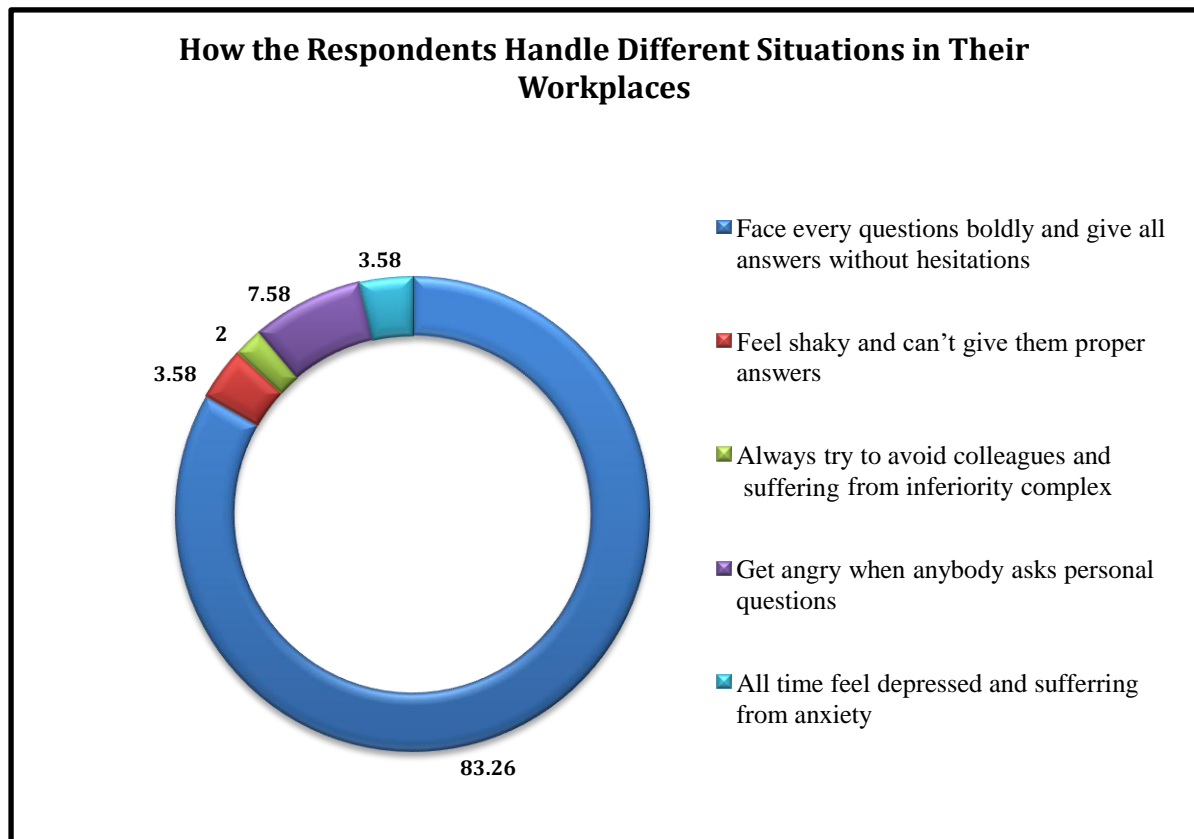
Source: Computed and Prepared by the Researcher<sup>38</sup>.

### 5.11.3 Rough Behavior:

This category people are frequently subjected to physical and mental harassment both in their home and workplace, often with untoward hints and awkward questions. They are often exploited and cornered in every sphere of life. All these factors often lead themselves behaving angrily and arrogantly though it does not necessarily mean they are angry or arrogant by heart. Out of the 251 respondents who have been harassed at their workplace, 83.26% boldly answer without hesitation to each and every question they have faced; 3.58% respondents are found shaky and they cannot give proper reply; 2% respondents suffer from inferiority complex and hence always try to avoid their colleagues; 7.58% respondents get angry when asked personal questions and 3.58% respondents remain always depressed and anxious at their workplace (details graphed in fig. 5.39).

<sup>38</sup> For details please see Appendix 1.

Figure no. 5.39

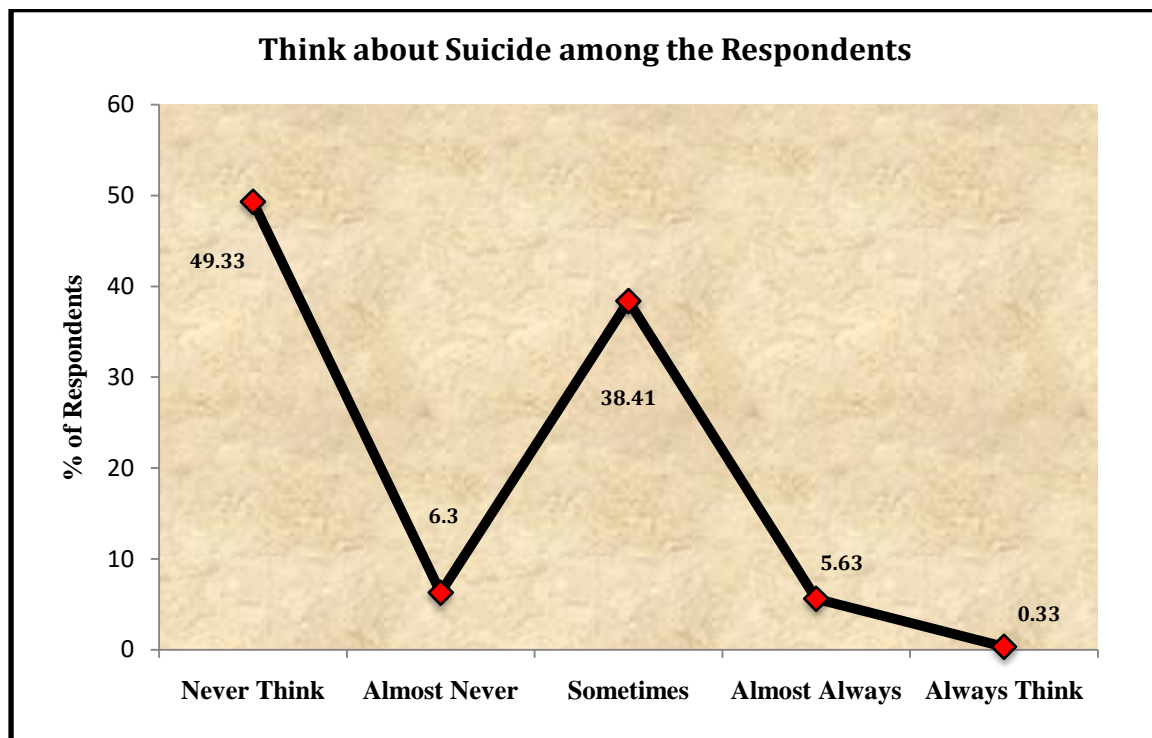


Source: Computed and Prepared by the Researcher<sup>39</sup>.

#### 5.11.4 Suicidal Tendency:

Since these category people found themselves exploited, cornered and marginalized both in their home and workplace, they remain choked in pressure all through the day. Besides, those who do not earn feel extremely burdened with these aforesaid factors. All these strangulations lead to the sorry fact that often thoughts of suicide have crept into their brains. Out of the total respondents (N=302), 0.33% have always and 5.63% have almost always thought of putting an end to their lives; 38.41% have sometimes thought of it; 49.33% respondents have never and 6.3% have almost never thought of suicide (details graphed in fig. 5.40). Those who do not think of suicide are often found mentally strong enough to overcome the lifelong hardship.

<sup>39</sup> For details please see Appendix 1.

**Figure no. 5.40**

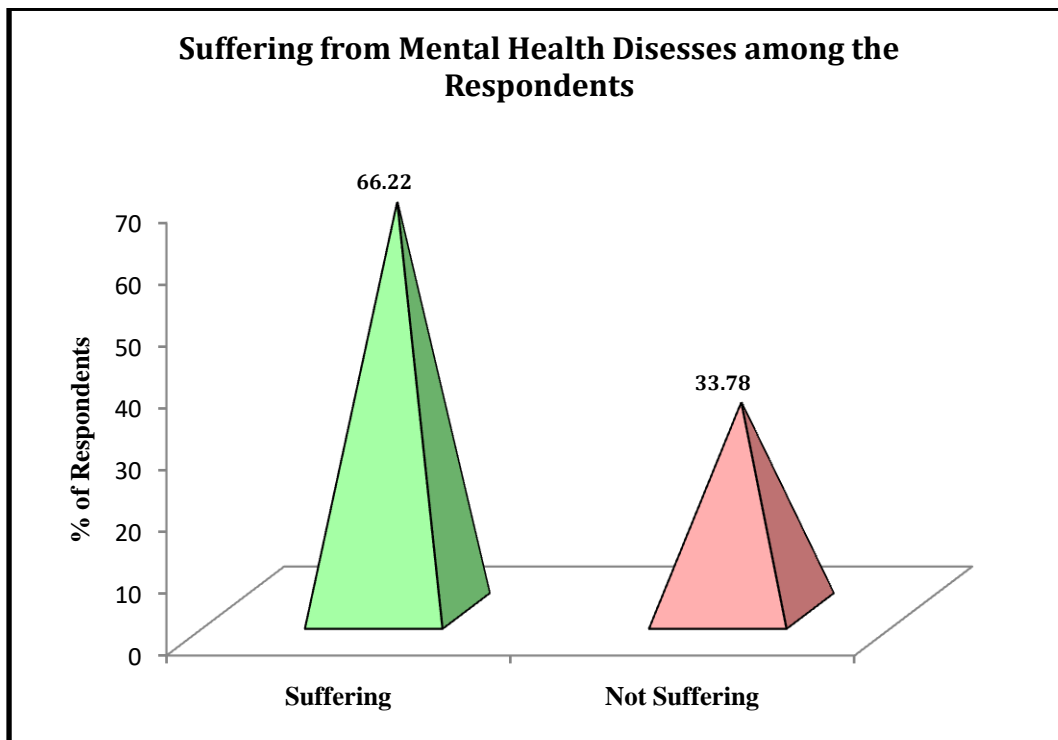
Source: Computed and Prepared by the Researcher<sup>40</sup>.

### 5.11.5 Mental Diseases:

Most of the gender and sexual minority people have been suffering from different mental issues. The main reasons responsible for all their anxiety and long lasting depression are bullying, harassment in educational institutions, in public transport at the time of travelling, domestic violence, etc. There are other reasons also. So, it is very obvious that they have been suffering from long lasting depression

Out of the total respondents, it is found that 66.22% are suffering from different mental health diseases and 33.78% are not (details graphed in fig. 5.41). These 33.78% respondents who answered negative when asked about mental health diseases have two probable causes in doing so; either they really are not suffering from mental health diseases or they are absolutely unaware of the term and significance of mental health.

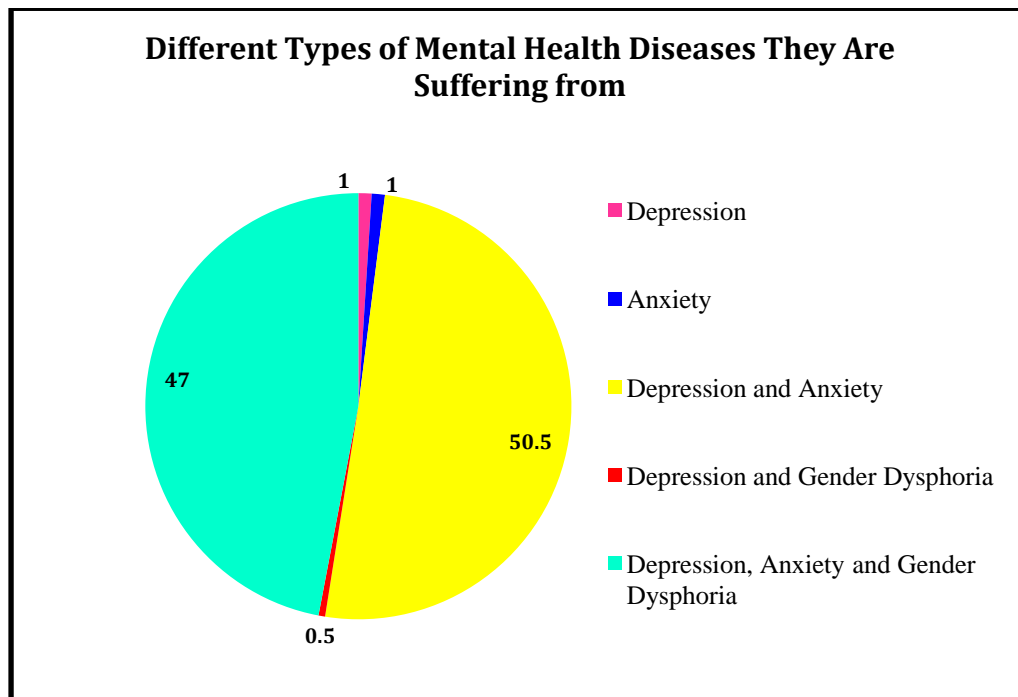
<sup>40</sup> For details please see Appendix 1.

**Figure no. 5.41**

Source: Computed and Prepared by the Researcher<sup>41</sup>.

Out of the total respondents who suffer from different mental diseases (200 out of 302), 1% suffer from only anxiety, 1% suffer from only depression and 50.5% suffer from both anxiety and depression. Besides anxiety and depression, gender dysphoria is also a prime cause for mental problems among transgender, gender queer and gender variant people. It is found that 0.5% respondents suffer from both depression and gender dysphoria whereas 47% suffer from all anxiety, depression and gender dysphoria (details graphed in fig. 5.42).

<sup>41</sup> For details please see Appendix 1.

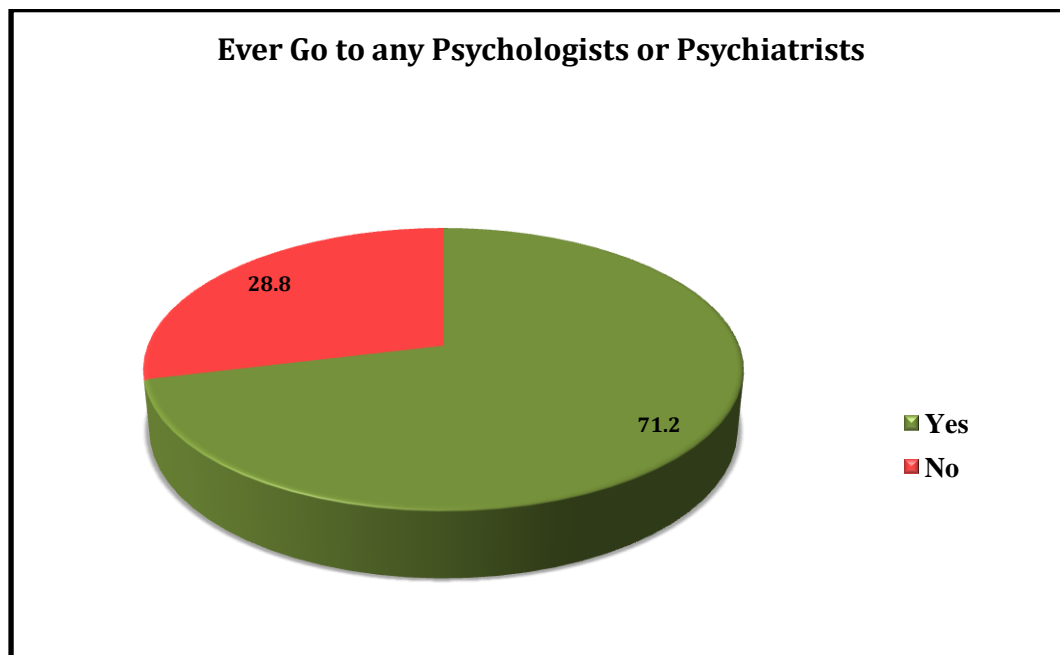
**Figure no. 5.42**

Source: Computed and Prepared by the Researcher<sup>42</sup>.

#### 5.11.6 Visit to Psychologists and psychiatrists:

Since this category people mentally suffer a lot, they are frequent visitors to psychologists and psychiatrists though it does not imply that they are well acquainted with mental health. Rather it is found that they are often unaware of mental health and whenever be aware, mental stigma causes hindrances in their visiting psychologists and psychiatrist. But very often NGOs who work for these gender and sexual minority people take initiative to make themselves aware of mental health and also arrange for visits to specialists. Out of the total respondents (N=302), it is found that 71.2% have visited either psychologists or psychiatrists and 28.8% have not (details graphed in fig. 5.43). A majority of these 28.8% are associated with hijra community who neither are aware of any mental health nor are associated with any NGO resulting in their never visit to any mental health specialist.

<sup>42</sup> For details please see Appendix 1.

**Figure no. 5.43**

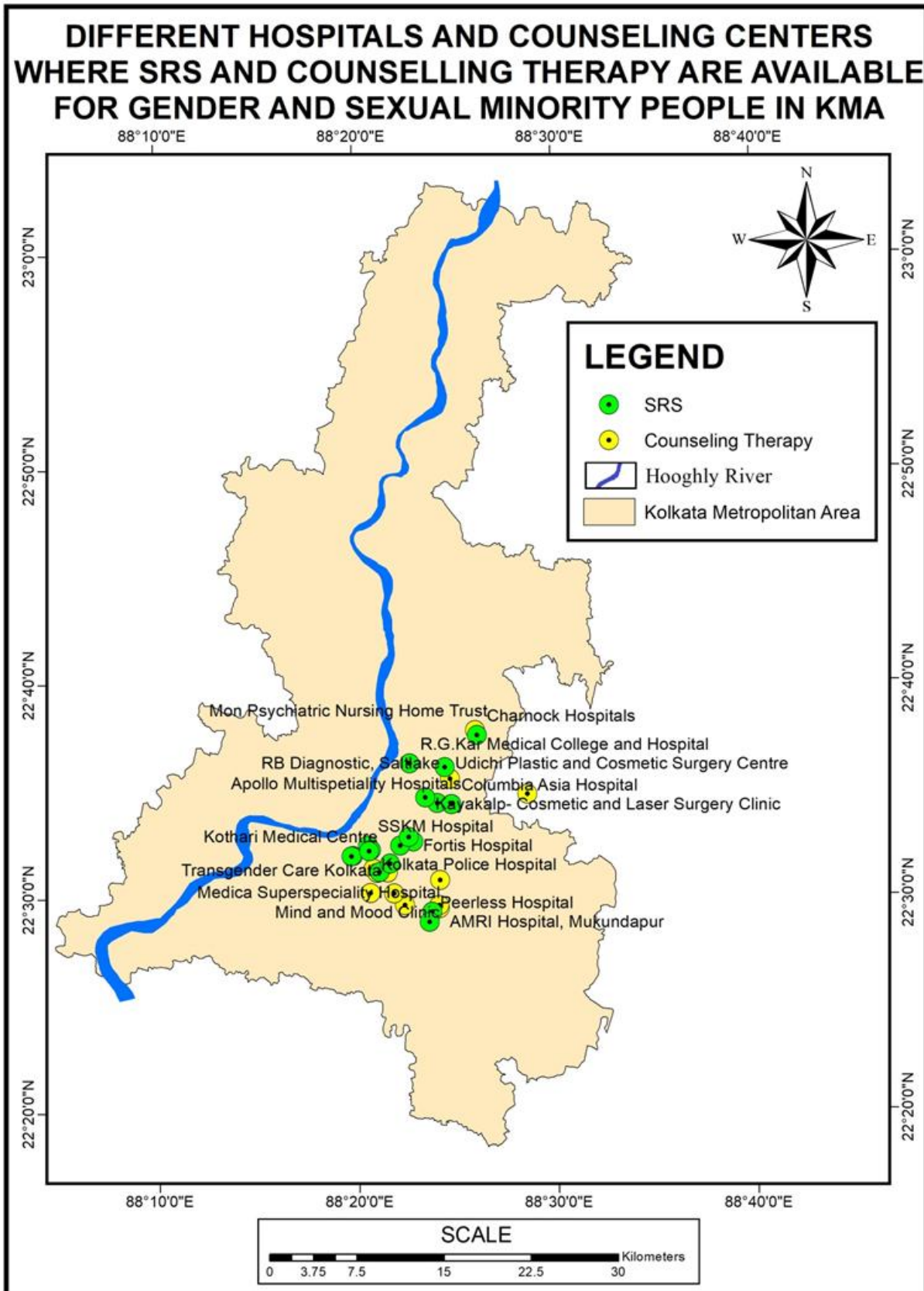
Source: Computed and Prepared by the Researcher<sup>43</sup>.

The life of gender and sexual minority groups of people is full of hindrances. So, those among them who are aware of the risks involved go to psychologists and psychiatrists. They go to doctors for advice concerning different health issues. They also go for SRS performed at hospitals and nursing homes. Actually they need a lot of aid from specialists in their life to recover from gender dysphoria. Some of the renowned psychologists and psychiatrists who help them regularly are Dr. Anuttama Bandopadhyay, Dr. Jhuma Basak, Dr. Abir Mukherjee, Dr. Sabyasachi Moitra, Dr. Debashish Chatterjee (*Good Practice Guide to Gender-Affirmative Care*, 2017) etc. Gynaecologists, endocrinologists, plastic surgeons, ENT surgeons, speech therapists are also needed to render help. Government and private hospitals play a very important role in sex reassignment surgery. In this context some important hospitals are National Medical College, Apollo Glenegles Hospital, Columbia Asia, Fortis, KPC Medical College, AMRI hospital, etc. The locations of mental health care service providers who take care of the minds of transgender and non binary people and different hospitals where SRS is performed have been shown in the following map (details shown in map no. 5.a).

<sup>43</sup> For details please see Appendix 1.



Map no. 5.a:



Source: Prepared by the Researcher.

## 5.12 Chi- Square Test to Prove Their Harassment, Torture and Social Exclusion:

Problems in their day-to-day lives, their harassment and social exclusion in the society are proven through the chi-square test. Chi-Square Test is a type of statistical technique. Karl Pearson invented the test for data analysis and distribution in 1900, hence it was known as Pearson's Chi-Square Test. Here the variance between two different variables collected from the questionnaire survey is determined with the help of chi square (Kothari, 2004).

### 5.12.1 After Disclosure of Gender Identity – They Become the Victims of Domestic Violence:

**Table no. 5.1**

Gender & Sexual Minority Groups	Whether the respondents have received any torture from their family after disclosing their gender identity		
	Yes	No	Total
L	0	18	18
G	0	7	7
T	90	0	90
I	34	10	44
Q	22	3	25
K	22	0	22
Total	168	38	206
Pearson chisquare(5) = 137.0862			Pr = 0.000
Cramér's V = 0.8158			

Source: Computed and Prepared by the Researcher.

Here the variables are Gender and Sexual Minority Groups and whether the respondents have received any torture from their family after disclosing their gender identity.

Here Null Hypothesis is - There is no significant difference in the probability of between of Gender and Sexual Minority Groups and whether respondents received any torture from their family after disclosing their gender identity.

Here Alternative Hypothesis is - There is a significant difference in the probability of between of Gender and Sexual Minority Groups and whether respondents received any torture from their family members after disclosing their gender identity.

Here the value of P is 0.000, which is less than the chosen significance level of 0.01. So, the result is highly significant means, the Null Hypothesis is rejected and the Alternative Hypothesis is accepted and the conclusion is that the Gender and Sexual Minority Groups are tortured by their family members after disclosing their gender identity.

### 5.12.2 After Disclosure of Sexual Orientation – They Become the Victims of Domestic Violence:

**Table no. 5.2**

Gender & Sexual Minority Groups	Whether the respondents have received any torture from their family after disclosing their sexual orientation		
	Yes	No	Total
L	19	0	19
G	24	0	24
B	8	1	9
T	89	0	89
I	37	10	47
Q	35	1	36
K	22	0	22
Total	234	12	246
Pearson chi2(6) = 36.2316			Pr = 0.000
Cramér's V = 0.3838			

Source: Computed and Prepared by the Researcher.

Here the variance between two different variables collected from the questionnaire survey is determined with the help of chi square, that the variables are Gender and Sexual Minority Groups and whether the respondents have received any torture from their family members after disclosing their sexual orientation.

Here Null Hypothesis is - There is no significant difference in the probability of between of Gender and Sexual Minority Groups and whether respondents received any torture from their family after disclosing their sexual orientation.

Here Alternative Hypothesis is - There is a significant difference in the probability of between of Gender and Sexual Minority Groups and whether respondents received any torture from their family members after disclosing their sexual orientation.

Here the value of P is 0.000, which is less than the chosen significance level of 0.01. So, the result is highly significant means, the Null Hypothesis is rejected and the Alternative Hypothesis is accepted and the conclusion is that the Gender and Sexual Minority Groups have been tortured by their family members after disclosing their sexual orientation.

### 5.12.3 Face Bullying in Educational Institution:

**Table no. 5.3**

Gender & Sexual Minority Groups	Whether the respondents have faced bullying in their educational institution due to their gender identity or sexual orientation				Total
	Never	Sometimes	Frequently	Very frequently	
L	0	12	1	6	19
G	0	0	0	24	24
B	11	3	4	0	18
T	0	0	0	91	91
I	0	0	4	18	22
Q	9	9	8	16	42
K	0	0	12	25	37
Total	20	24	29	180	253
Pearson chisquare(18) = 241.0463					Pr = 0.000
Cramér's V = 0.5635					

Source: Computed and Prepared by the Researcher.

Here the variables are Gender and Sexual Minority Groups and whether the respondents have faced bullying in their educational institution due to their gender identity or sexual orientation.

Here Null Hypothesis is - There is no significant difference in the probability of between the Gender and Sexual Minority Groups and whether the respondents have faced bullying in their educational institution due to their gender identity or sexual orientation.

Here Alternative Hypothesis is - There is a significant difference in the probability of between of Gender and Sexual Minority Groups and whether the respondents have faced bullying in their educational institution due to their gender identity or sexual orientation.

Here the value of P is 0.000, which is less than the chosen significance level of 0.01. So, the result is highly significant means, the Null Hypothesis is rejected and the Alternative Hypothesis is accepted and the conclusion is that the Gender and Sexual Minority Groups have faced bullying in their educational institution due to their gender identity or sexual orientation.

#### 5.12.4 Face Harassment in Public Vehicle:

**Table no. 5.4**

Gender & Sexual Minority Groups	Whether the respondents have harassed during travelling due to their gender identity or sexual orientation						Total
	Very Frequently	Frequently	Sometimes	Often	Rare	Never	
L	0	0	0	16	3	0	19
G	5	17	0	0	2	0	24
B	2	4	0	0	0	12	18
T	75	15	0	1	0	0	91
I	70	0	0	0	1	0	71
Q	16	2	13	2	2	7	42
K	7	26	4	0	0	0	37
Total	175	64	17	19	8	19	302
Pearson chi square(30) = 567.1161						Pr = 0.000	
Cramér's V = 0.6128							

Source: Computed and Prepared by the Researcher.

Here the variables are Gender and Sexual Minority Groups and whether the respondents have harassed during travelling due to their gender identity or sexual orientation.

Here Null Hypothesis is - There is no significant difference in the probability of between the Gender and Sexual Minority Groups and whether the respondents have harassed during travelling due to their gender identity or sexual orientation.

Here Alternative Hypothesis is - There is a significant difference in the probability of between of Gender and Sexual Minority Groups and whether the respondents have harassed during travelling due to their gender identity or sexual orientation.

Here the value of P is 0.000, which is less than the chosen significance level of 0.01. So, the result is highly significant means, the Null Hypothesis is rejected and the Alternative Hypothesis is accepted and the conclusion is that the Gender and Sexual Minority Groups have harassed during travelling in public vehicles due to their gender identity or sexual orientation.

### 5.12.5 Face Harassment in Workplace:

**Table no. 5.5**

Gender & Sexual Minority Groups	Whether the respondents have faced any harassment in their workplace due to their gender identity or sexual orientation					Total
	Never	Rarely	Sometimes	Frequently	VeryFrequently	
L	3	0	5	9	0	17
G	2	0	0	20	0	22
B	13	0	2	0	0	15
T	0	2	12	60	12	86
I	0	1	0	2	66	69
Q	2	0	10	12	12	36
K	0	0	26	0	0	26
Total	20	3	55	103	90	271
Pearson chi square(24) = 445.2904						Pr = 0.000
Cramér's V = 0.6409						

Source: Computed and Prepared by the Researcher.

Here the variables are Gender and Sexual Minority Groups and whether the respondents have faced any harassment in their workplace due to their gender identity or sexual orientation.

Here the Null Hypothesis is - There is no significant difference in the probability of between the Gender and Sexual Minority Groups and whether the respondents have faced any harassment in their workplace due to their gender identity or sexual orientation.

Here Alternative Hypothesis is - There is a significant difference in the probability of between of Gender and Sexual Minority Groups and whether the respondents have faced any harassment in their workplace due to their gender identity or sexual orientation.

Here the value of P is 0.000, which is less than the chosen significance level of 0.01. So, the result is highly significant means, the Null Hypothesis is rejected and the Alternative Hypothesis is accepted and the conclusion is that the Gender and Sexual Minority Groups have faced any harassment in their workplace due to their gender identity or sexual orientation.

### 5.12.6 Bad Behavior of Health Service Providers:

**Table no. 5.6**

Gender & Sexual Minority Groups	Whether the respondents have gone to any Dr. and how was their behavior					Total
	Very Good	Good	Medium	Bad	Very Bad	
L	0	0	11	8	0	19
G	0	0	12	12	0	24
B	0	10	6	2	0	18
T	0	1	23	55	12	91
I	0	0	0	38	28	66
Q	2	8	8	19	5	42
K	0	1	16	20	0	37
Total	2	20	76	154	45	297

Pearson chi square(24) = 189.6955 Pr = 0.000  
Cramér's V = 0.3996

Source: Computed and Prepared by the Researcher.

Here the variables are Gender and Sexual Minority Groups and whether the respondents have gone to any doctor and how was their behavior towards the gender and sexual minority groups.

Here the Null Hypothesis is - There is no significant difference in the probability of between the Gender and Sexual Minority Groups and whether the respondents have gone to any Dr. and how was their behavior towards the gender and sexual minority groups.

Here Alternative Hypothesis is - There is a significant difference in the probability of between of Gender and Sexual Minority Groups and whether the respondents have gone to any Dr. and how was their behavior towards the gender and sexual minority groups.





Here the value of P is 0.025, which is less than the chosen significance level of 0.05. So, the result is significant means, the Null Hypothesis is rejected and the Alternative Hypothesis is accepted and the conclusion is that the Gender and Sexual Minority Groups have felt marginalized in the society due to their gender identity and sexual orientation.

God has created human beings as equal without any discrimination on the basis of their skill, will power, grasping power, intellect, etc. But it is human beings themselves who discriminate, misuse and abuse fellow human beings and treat them as objects. Most LGBTIQ and hijra people face different challenges in coming out with one's own gender identity and or gender expression which are opposite to that of the gender identity and gender role imposed on them on the basis of their biological sex or assigned gender at birth. They face several problems such as: shame, fear, and internalized trans-phobia; disclosure and coming out; adjusting, adapting, or not adapting to social pressure to conform; fear of relationships or loss of relationships; and self-imposed limitations on expressions or aspirations. LGBTIQ and hijra people are also a part of our society and they have equal right to everything in the world that is available to all other persons. The presence of LGBTIQ and hijra population is not new, they have been present in societies from time immemorial as could be seen from several scripts, cave arts, etc. The most important aspect we have to think of is the discrimination. The discrimination based on their sex and gender makes the LGBTIQ and hijra community one of the most marginalized groups in Indian Society. Transgender and gender non-conforming people face discrimination in health care settings, are regularly denied needed care, and experience a wide range of health risks because they are transgender or gender non-conforming. The transgender people were not even recognized as part of the society, not even their own. They do not relate to anyone as friends, family or even acquaintance. They are denied the right to love. They are denied every right and for what – just because of their sex and gender. Problems faced by transgender, LGBTIQK and hijra communities are discrimination, denial of employment and education, homelessness, HIV care & hygiene, depression, hormone pill abuse, tobacco and alcohol abuse, marriage, adoption, etc. Although in India they are now being accepted as they are; but still there are some who even now don't accept them as a part of the society. Such people are only required to change their minds because minds like theirs are the reason why transgender community faces discrimination and other such problems.

According to the Constitution of India, all citizens of the country inevitably enjoy all the rights. It also says that they are not to be discriminated against or criminalized just due to their gender identity. Equality and liberty as mentioned in several articles like Articles 14, 15, 16, and 21 are equally applicable to them as well. As such, they can be included in the group of underprivileged people who need to be given special care like the other underprivileged groups for the overall development of the society as well as their own social and economic development. So far this section of the people of India has been neglected, underprivileged and marginalized. This has rendered them severely vulnerable economically and socially. This is our society's moral failure which needs to be specially addressed right now because it is already late.

## **Chapter –VI**

### **Rights, Laws, Movements and Steps towards Inclusion**

## Chapter –VI

### **Rights, Laws, Movements and Steps towards Inclusion**

In this thesis it has already been seen that these people spend their daily life with great difficulty. Nowadays they are to a little extent included socially and legally, but not yet mainstreamed in the every aspect of their lives. Although, according to the Indian constitution there is no distinction between people and all are equal, in reality, these people are far removed from equality. However, many years ago the position of these gender and sexual minority people was rather different. They had a good position in society before the British period. The social position of these people in India changed from the time of British rule. Nevertheless they move forward and continue fighting to achieve their rights and for that reason, inclusion of gender and sexual minority groups has of late started, albeit in a small way. In this chapter, all these things, such as their rights, different laws, their movements and initiation rites for their inclusion in the society have been discussed.

The position of transgender and hijra people in the society was quite significant at various times, especially before the British period. Their position gradually deteriorated from the British period. In the second half of the 19<sup>th</sup> century, the British colonial administration aggressively criminalized the hijra community of India as a tribe who were habitual criminals through the Criminal Tribes Act, 1871. But this act was repealed in 1952, though its legacy continues (Singh & Kumar, 2020). Their social position has moved from inclusion to rigid exclusion. Their presence in the historical period has already been discussed in detail in the 3<sup>rd</sup> chapter and this chapter will discuss the different laws, bills, acts and judicial cases related to gender and sexual minority people and their continuing struggle against their exclusion from different activities of government for achieving an inclusive society. This is not all. Nowadays different organizations also work for these people and sensitization and awareness programs are taken up in different sectors of the society. Different laws, rules and acts for these people have been discussed below.

#### **6.1 Section 377 in IPC:**

The British Raj introduced section 377 in the year 1861 and the draft for this section was constituted long years ago in 1838 by Thomas Macaulay and later brought into immediate effect in 1861 (Gupta, 2006). This act was derived from the Buggery Act of 1533, which says 'buggery' is an unnatural act of sex against the principles of nature and God.

## **6.2 Criminal Tribes Act, 1871:**

The Criminal Tribes Act, 1871 targeted several castes in colonial India. Actually, this act was passed during the British period in India and received the assent of the Governor General on 12th October, 1871. This act criminalized different tribes and communities as habitual criminals. Eunuchs also fell under this category and were categorized as habitual criminals. Part II of the Criminal Tribes Act was specially extended to those people who were suspected by the local Government of kidnapping, castrating children or committing offences under section three hundred and seventy seven of the Indian Penal Code (Criminal Tribes Act, 1871).

The position of the gender and sexual minority communities considerably deteriorated mainly from the British period. But gradually through various struggles, their position gradually improved and is still happening. But nothing ever came easy, though. Each and every change is the product of great struggle and suffering.

Some very much important facts about their struggles and their memorable journey from social exclusion to inclusion have been discussed in detail below.

## **6.3 Journey from Exclusion to Inclusion:**

### **6.3.1 NALSA Judgment:**

The NALSA judgment is a landmark judgment for the transgender and hijra people. This case was between the National Legal Services Authority and Union of India and others. The judgment came on 15<sup>th</sup> April, 2014. Through this judgment they get a number of facilities and recognition in this society and for that reason this day is celebrated as the National Transgender Day by all transgender and hijra communities in India (*National Legal Ser.Auth vs Union Of India & Ors*, 2014). The major facilities and features of this judgment are as follows-

- I. Hijras, eunuchs and other people who are outside the gender binary are declared by the NALSA judgment as “third gender” for safeguarding their rights under Part III of the Indian Constitution.
- II. This judgment declares that third gender persons have the right to declare their self-identified gender as male, female or third gender.

- III. The third gender people are declared as socially and economically backward classes and the Supreme Court asked the centre and the state governments to make all kinds of reservations for them in different educational institutions and in all kinds of public appointments.
- IV. According to this judgment the Central and State governments must operate separate HIV Sero-surveillance Centres because transgender and hijra people face several sexual health issues.
- V. The Central and State governments should address their problems which they face in daily life such as trauma, fear, gender dysphoria, social pressure, depression, suicidal tendencies, social stigma etc. and any insistence or pressure for SRS for declaring one's gender is very much illegal and immoral.
- VI. These people must be provided separate public toilet and other facilities.
- VII. The Central and State Governments should take proper measures for the medical care of transgender people in state-run hospitals.
- VIII. The Central and State Governments should take proper measures to frame different welfare schemes for them.
- IX. The Central and State Governments should take proper measures to create awareness of inclusiveness among people for the benefit of the transgender people who can feel that they are a part of the society.

The aforesaid judgment is very important because it is a step towards inclusion. But this is not the end of the struggle. There is a great deal of struggle ahead. Here some examples of their struggles have been described.

### **6.3.2 Decriminalization of Section 377:**

Actually section 377 was a law of the British colonial Period. From that time homosexuality became criminalized. But before that time there was a golden period of the third gender people because then they held important positions in the society. But their position started deteriorating from the British Period and the situation hasn't changed overmuch even now though better trends are slowly emerging. And their struggle goes on. Consequently a number of difficult steps have been taken and a considerable victory in the struggle was won on 6th September, 2018. This judgment changes the centuries-old ideas. Some of the hindrances faced by them and their struggle have been described below.

At first, in 1994, the Aids Bhedbhav Virodhi Andolan (ABVA) filed a legal petition for decriminalizing homosexuality in the Delhi High Court (Fernandez, 1999).

Then in the year 2001, the Naz Foundation also filed a petition in the Delhi High Court and this appeal was also rejected and the court then dismissed the Public Interest Litigation (PIL) in 2004 (Sheikh, 2013)

2nd July, 2009 was also very important for these people because the Delhi High Court termed Section 377 a violation of the fundamental rights which are constitutionally guaranteed to all the citizens of the India (*Naz Foundation vs Government Of Nct Of Delhi And Others*, 2009). Against this judgment many groups went to the apex court.

This decision did not go unchallenged and in the year 2013, the Supreme Court overturned the verdict of the Delhi High Court (*Suresh Kumar Koushal & Anr vs Naz Foundation & Ors*, 2013).

And on 6th September 2018, the Supreme Court of India finally decriminalized homosexuality and it is a landmark judgment for all non binary people, especially homosexual people. After a long fight they became free (*Navtej Singh Johar vs Union Of India Ministry Of Law And Others*, 2018).

### 6.3.3 Homosexuality and Opposition:

- **Central Government opposes homosexual marriage**

The Supreme Court decriminalized homosexuality. But the society still doesn't accept same-sex marriage as humane or good. And the Central Government also continues to oppose it. In an affidavit filed in the apex court the central government said homosexuality with a same-sex partner is not compatible with the normal concept of husband, wife and children prevalent in Indian society. In the Indian social system when a man and a woman are married, the man is called the husband and the woman the wife, and their children are born biologically. In this regard the

#### Paper Cutting No. 6.a:



Source: Aajkal Patrika, 13<sup>th</sup> March, 2023.

central government urged the Supreme Court to dismiss the case of same-sex couples. The central government also informed that the essence of marriage is the union of two opposite sexes which is inherent in the socio-cultural legal concept of marriage and argued that if the same sex marriage law is legally established, the definition of marriage would change which is not good at all for the Indian society (Bhattacharya, 2023).

#### **6.3.4 The Transgender Persons (Protection of Rights) Act, 2019:**

After a long journey this Act came. This Act was signed on 5<sup>th</sup> December, 2019 and passed by the Parliament of India (The Transgender Persons (Protection of Rights) Act, 2019). The act was introduced in the Lok Sabha on 19 July 2019 by the Minister of Social Justice and Empowerment, Thawar Chand Gehlot for protecting the rights of transgender people. The major provisions for transgender people in this Act are as follows.

##### **a. Prohibition Against Discrimination:**

Chapter II of this Act describes how and where discrimination against transgender people occurs which must be prohibited. They should not be discriminated against in any educational institution, different employment sectors and any health care center. Besides these, they should not be prevented from residing in any place and taking on rent any house or flat or purchasing any property. They cannot be prevented from using any goods, accommodation, service, facility and opportunity dedicated to common people.

##### **b. Recognition of Identity of Transgender Persons:**

Recognition of the gender identity of a transgender person is very much important to these people. According to this Act, the transgender or third gender people have to go to the District Magistrate with an application to get a transgender certificate and after getting the transgender certificate from the DM, all certificates of the applicant should be changed accordingly in conformity with his/her transgender identity. When these persons go for SRS to achieve parity between their assigned sex at birth and their gender identity, they may make an application with the certificate issued by the DM after the completion of SRS.



**c. Change in Gender:**

After getting the certificate a transgender person undergoes the surgery or SRS to change their gender either as male or as female and after these surgical procedures they may take an application along with a certificate issued by the Medical Superintendent or Chief Medical Officer of the medical institution concerned and go to the DM for getting a revised gender certificate.

**d. Non-discrimination in Employment Sector:**

In this act it has been laid down that there should be no discrimination in any employment sector.

**e. Obligations of Establishment:**

Every establishment shall ensure compliance with the provisions of this Act and provide such facilities to transgender persons which have been described in this Act.

**f. Grievance Redressal Mechanism:**

Every establishment shall appoint a person as a complaint officer who will receive complaints from transgender persons about the violation of the provisions of this Act.

**g. Right of Residence:**

In this Act, it has been stated directly that no children shall be separated from their families or their immediate family members for being a transgender.

**h. Provide Inclusive Education:**

Each and every educational institution shall provide inclusive education with notification and give all opportunities for sports, recreation and leisure activities to all transgender persons without discrimination and on an equal basis with others. They should not be segregated from other students.

**i. Provide Vocational Training for Self Employment:**

These people should be provided with different kinds of vocational training for giving support for their livelihood. Different welfare schemes and programs for their wellbeing should also be implemented.

**j. Giving Healthcare Facilities:**

The transgender people should be provided with proper healthcare facilities such as Sero-surveillance Centers to conduct Sero-surveillance on these persons on the basis of the guidelines issued by the National AIDS Control Organization. This apart, they should be provided with medical care facilities for SRS and hormonal therapy and also pre and post operative counseling therapy. Besides these, the authorities concerned should bring out a Health Manual related to sex reassignment surgery in accordance with the World Profession Association for Transgender Health guidelines and they should provide medical insurance which should cover all expenses of SRS and hormone therapy, laser therapy and treatment of other health related issues.

**k. Make National Council for Transgender Persons:**

The Central Government by notification shall constitute a National Council for Transgender Persons to supervise the implementation of all the aforesaid provisions.

**6.3.5 Background of the Transgender Persons (Protection of Rights) Act, 2019:**

In January 2014, while the decision of the NALSA petition was still pending, the Ministry of Social Justice and Empowerment published an Expert Committee Report on the issue of transgender persons and at this stage Tiruchi Siva, a member of parliament (MP) introduced a private member's bill in the Rajya Sabha which is known as Transgender Persons Bill 2014 (Bhattacharya et al., 2022). Later the Ministry of Social Justice and Empowerment (MSJE) introduced another piece of legislation on transgender persons named “‘Transgender Persons (Protection of Rights) Bill’ in the Lok Sabha (lower house of the parliament) in 2016 (*The Transgender Persons (Protection of Rights) Bill*, 2016). But there was a major fault in this Bill, it was not inclusive because this bill suggested the creation of a ‘screening committee’ for deciding the gender identity of non-binary people. But it was a violation of their human rights and the rights of self-declaring one's gender identity as well as a violation of one's right to dignity and bodily autonomy. This is also the violation of NALSA judgment. For this reason protests have been raised against this bill and on 17 December 2018, the Lok Sabha passed a revised version of this Bill (*The Transgender Persons (Protection of Rights) Bill*, 2018) with 27 amendments and it includes an improvement in the definition of a transgender person (Bhattacharya et al., 2022) and after that in 2019, this amended Bill was declared as an Act with nine clauses and 23 sub clauses.

### **6.3.6 Transgender Persons Rules, 2020:**

After the Transgender Persons (Protection of Rights) Act, 2019, Transgender Persons Rules was published in the Gazette of India –Extraordinary in Part II- Sec 3.(i) on 25<sup>th</sup> September, 2020 where different rules and regulations for transgender persons in India are described thoroughly. Details such as which form to fill to get identity card in the office of the District Magistrate and how to fill backside form of the gender identity card and how to fill other forms related to this are explained here thoroughly. Documents to be attached for getting transgender certificate from the DM office are also listed here in details (Transgender Persons Rules, 2020). This rule is very important and effective for all transgender people in India and it is a very good initiative of the Ministry of Social Justice and Empowerment of India.

### **6.3.7 ‘SMILE’:**

It is a very important project of the Central Government for transgender persons and those persons who are engaged in begging. The full form of ‘SMILE’ is “Support for Marginalized Individuals for Livelihood and Enterprise”. Actually this project includes two sub-schemes - ‘Central Sector Scheme for Comprehensive Rehabilitation for Welfare of Transgender Persons’ and ‘Central Sector Scheme for Comprehensive Rehabilitation of persons engaged in the act of Begging’. This is an umbrella scheme and it covers several comprehensive measures including different welfare measures for both transgender persons and persons who are engaged in begging and it focuses extensively on rehabilitation, provision of medical facilities, counseling, education, skill development, economic linkages etc with the support of State Governments/UTs/Local Urban Bodies, Voluntary Organizations, Community Based Organizations (CBOs) (details shown in model no. 6.A) and other institutions (*Support for Marginalized Individuals for Livelihood and Enterprise (SMILE)*, 2022).

• **Model no. 6.A: Support for Marginalized Individuals for Livelihood and Enterprise (SMILE)**



Source: (Ministry of Social Justice and Empowerment, 2020)

This scheme provides the following facilities-

- Providing scholarships for Transgender people
- Taking different measures for Skill Development and Livelihood for the empowerment of transgender communities
- Providing Composite Medical Health Care for Transgender persons
- Providing housing facilities in the form of 'Garima Greh' for Transgender Persons
- Providing E-services for getting all these facilities through a National Portal for Transgender Persons
- Making provision for Transgender Protection Cell
- Providing other Welfare Measures

There are 12 'Garima Greh' projects in India and it is very fortunate that 2 "Garima Greh" projects are situated in West Bengal. Two NGOs are in charge of supervision of these 2

Garima Greh-s, namely, Gokhale Road Bandhan and Kolkata Rista (Ministry of Social Justice and Empowerment, 2020). The project director of Gokhale Road Bandhan is Ranjita Sinha and the project director of the Garima Greh of Kolkata Rista is Dr. Santosh Kumar Giri (Ministry of Social Justice and Empowerment, n.d.).

### **6.3.8 POCSO Act:**

POCSO Act is a very important Act for every child which came into effect in the year 2012. The acronym of 'POCSO' actually means the 'Protection of Children from Sexual Offences'. Here it has been seen that this Act is gender neutral because in this Act Section- 2(1) (d) defines a "child" - as any person below the age of 18 years. So it means that the child may be of any gender, as male, female or third gender (The Protection of Children from Sexual Offences Act, 2012). This Act was amended in the year 2019 and this amendment is also gender neutral and this Act is called as the Protection of Children from Sexual Offences (Amendment) Act, 2019. Here section 2 (a) in sub-section (1), after clause (d), (da) clause is inserted. Here in this clause "child pornography" is inserted and this clause is also very much inclusive because here "child pornography" means 'any visual depiction of sexually explicit conduct involving a child which includes photograph, video, digital or computer generated image indistinguishable from an actual child, and image created, adapted, or modified, but appears to depict a child'(The Protection of Children from Sexual Offences (Amendment) Act, 2019). Here also the word 'child' is used, which is gender neutral.

### **6.3.9 Juvenile Justice Act:**

This Act is yet another very important Act and it is also gender inclusive because here also the word 'child' has been used and this word has been described as a person who has not completed eighteen years of age (The Juvenile Justice (Care and Protection of Children) Act, 2015).

### **6.4 Role of the Court:**

Some very important cases have been discussed below where it has been seen that the Court plays a very important role in supporting these people.

#### **6.4.1 Nangai vs the Superintendent of Police:**

Transgender people are always deprived of education and employment opportunities. This is an important example of the difficulties faced by them in getting employment and simultaneously it is also a great example of the judiciary intervening to protect the interests of

these transgender or third gender people, especially gender minority people. It changed the course of Nangai's life. She had applied for the post of a woman police superintendent under Tamil Nadu Uniformed Services Recruitment Board, Chennai. Her application was successful and she received an order of appointment in the post of Police Superintendent at Karur district. During her training period, she went through a medical examination and on the basis of this it was declared that her chromosomal structures didn't match her genitalia and she was declared as transgender. Consequently her service was terminated. Then she appealed to the Madras High Court seeking justice and The hon'ble High Court held that the petitioner had the liberty to choose a different gender identity as a third gender and set aside the termination order from service to protect her right (*Nangai vs The Superintendent Of Police*, 2014). It was also a great win for every transgender and third gender person for protecting their right in the employment sector.

#### **6.4.2 Atri Kar Versus The Union of India & Ors.:**

These non-binary people face different kinds of refusals and harassment in different employment sectors and they have to struggle at every step for their betterment and win social space. Previously it used to be said that before the NALSA judgment, the word 'transgender' was unknown to most people and employment sectors. Generally, there are only two types of gender; 'male' and 'female' are written in the gender column in application forms. But there is no other option such as transgender. Thus transgender people are deprived on a massive scale. There are many more examples of deprivation like this. One such example is the case of Atri Kar. Actually she is a transgender woman. She wanted to sit for the examination of probationary officer applicants conducted by SBI. But there isn't any option for transgenders in the gender column in the online application form of SBI. So she could not fill up that form. According to Atri Kar, it is a violation of the NALSA verdict. Then she went to court for justice. There are lots of similar examples of people struggling for their rights. (*Atri Kar Versus The Union of India & Ors.*, 2017).

#### **6.4.3 Atri Kar vs Union Public Service Commission:**

This is another example of deprivation of transgender or third gender people in employment sector. Atri Kar, a transgender, wanted to take the UPSC examination. But it is very unfortunate that there were only two options--male and female—mentioned in the application form. The advertisement no. was "EXAMINATION NOTICE NO. 04/2018-CSP", published on 07.02.2018 and then she approached the Central Administrative Tribunal-

Kolkata to appeal for justice. She wanted to sit for this examination as a transgender or 'other' and she wanted to be treated as per NALSA judgment as belonging to the socially and economically backward classes and also claimed a waiver of registration fees. She won this case and the court ruled in her favor and also gave directions that steps be taken to ensure that people like the petitioner need not knock at the doors of the tribunals and courts for getting justice every time a recruitment notification is issued (*Atri Kar vs Union Public Service Commission*, 2018).

#### **6.4.4 Navtej Singh Johar vs Union of India Ministry of Law and Others:**

Article 377 is a big problem for all non-binary people. Actually this constitutional article criminalizes homosexuality. But according to the judgment in this case, section 377 violates the articles 14, 15, 19 and 21, which are the most important fundamental rights of Indian citizens according to the Constitution of India because personal liberty, equality against all types of discriminations, recognition of identity with dignity and privacy of human beings constitute the four important pillars of the fundamental rights in the Indian Constitution. This case and the judgment in this case are landmark achievements for all non-binary people because as a result of this case homosexuality became decriminalized. It was held that consensual sexual acts of adults (i.e. persons above the age of 18 years who are competent to consent) in private do not violate Articles 14, 15, 19, and 21 of the Constitution; such acts are based on free consent, that is completely voluntary in nature and devoid of any duress or coercion. But the provisions of Section 377 will continue to govern non-consensual sexual acts against adults, all acts of carnal intercourse against minors, and acts of bestiality (*Navtej Singh Johar vs Union Of India Ministry Of Law And Others*, 2018). So, it takes forward the life of the non-binary people a beat ahead.

#### **6.4.5 Case of Pinki Pramanik:**

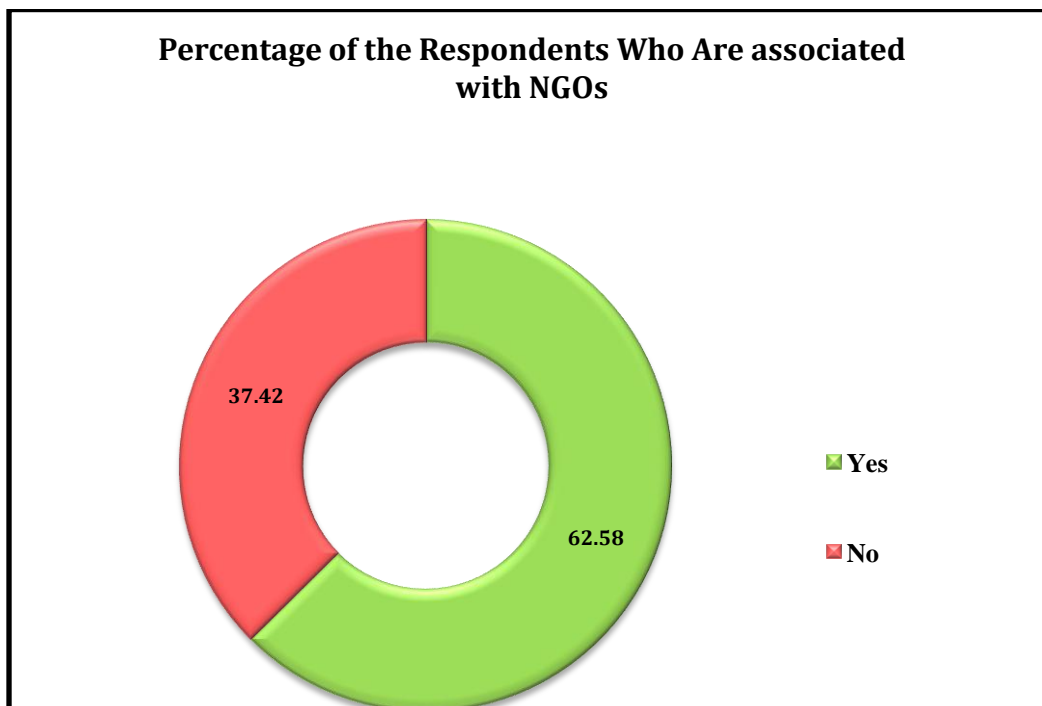
The case of Pinki Pramanik is another very important case. Actually she was a national level female athlete. A rape case was filed against Pinki Pramanik. She was cohabiting with a female person and she filed a case against Pinki Pramanik alleging that Pinki had raped her. Because of the case, Pinki Pramanik was medically examined at S.S.K.M hospital and after the medical examination it was found that Pramanik had the features of a sexual disorder, namely, male pseudohermaphroditism and for that reason Pramanik was unable to rape like other adult men. So Pinki Pramanik was acquitted on this ground and the Case No. 02 (03) 2013 arising out of Baguihati P.S. Case No. 449/2012 dated 13th June, 2012 under Sections

413/417/376/375/506 IPC was set aside and all proceedings pending against the petitioner including the charge sheet No. 384 dated 10th November, 2012 were quashed (*Pinki Pramanik -vs.- State of West Bengal & Anr.*, 2014).

### 6.5 Their Struggle and Companion:

In these ways they are continuing their struggle to get their rights. But nothing comes without a struggle. But it is also very true that the Government plays a vital role in their struggle and tries to protect their fundamental rights. In their continuous fight NGOs, who work for gender and sexual minority groups of people, are also weighing in with their contribution and their main objective is to protect them and their rights. Thus NGOs play a vital part in their lives as no one in mainstream society likes them or gives them respect. Only people of the transgender and hijra communities think for them and support them. So they depend on NGOs. For that reason it has been found in this study that 62.58% respondents are engaged with different NGOs (details graphed in fig. 6.1). In different ways these gender and sexual minority people are attached to NGOs. Some are working for the NGOs and thus getting their livelihood and some come to them looking to find support, relief, soul mates or all of these.

Figure no. 6.1



Source: Computed and Prepared by the Researcher<sup>1</sup>.

<sup>1</sup> For details please see Appendix 1.



### **6.5.1 Different NGOs:**

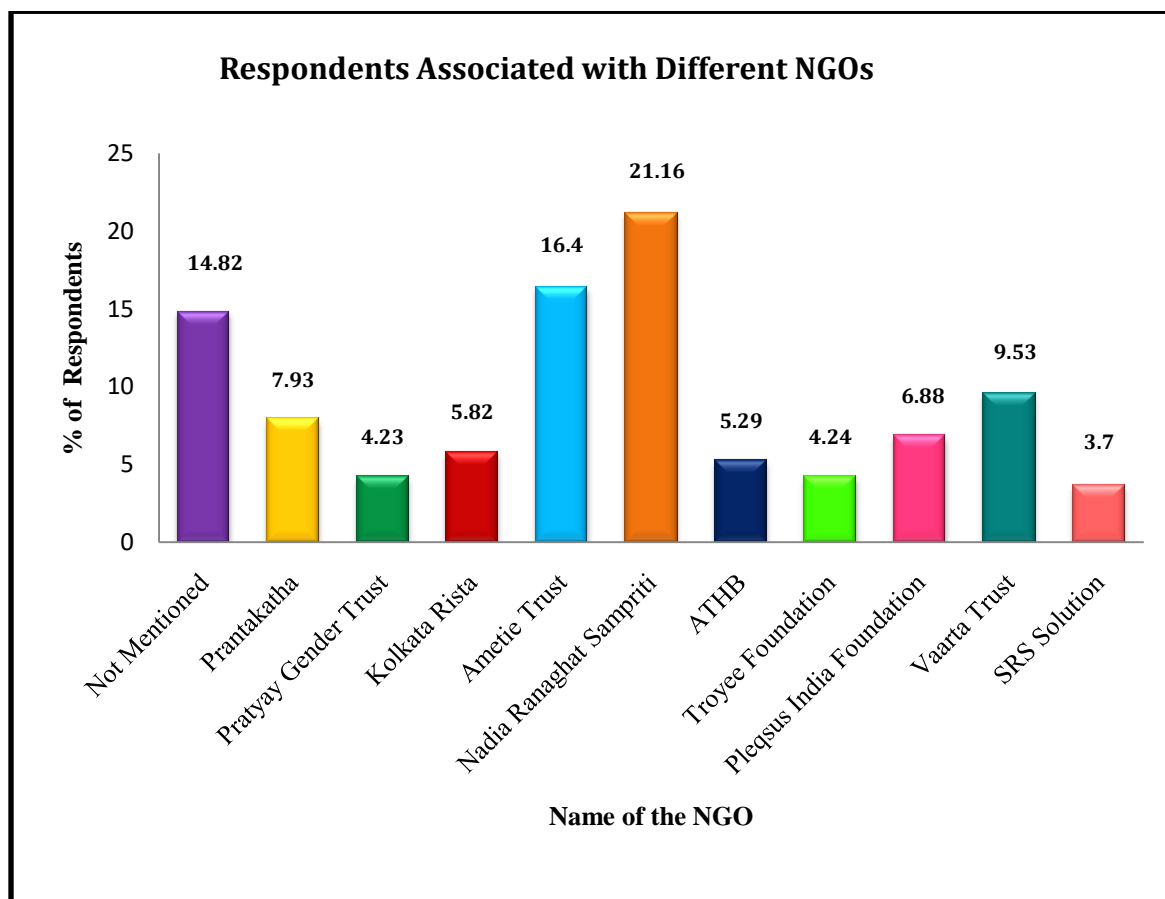
There are a number of NGOs in the study area of KMA. These are as follows-

- a. Ametie Trust, Serampore
- b. SRS Solution, Kolkata
- c. Dum Dum Swikriti Society
- d. Kolkata Rista
- e. Sappho for Equality
- f. Prantakatha
- g. Pratyay Gender Trust
- h. ATHB (Association of Transgender/Hijra in Bengal)
- i. Troyee Foundation
- j. Pleqsus India Foundation
- k. Vaarta Trust
- l. Koshish
- m. Sathi
- n. Samabhabona
- o. Sanlaap

### **6.5.2 Respondents Associated with Different NGOs:**

It is seen from the following graphical presentation that 7.93% respondents are engaged with Prantakatha, 4.23 % are engaged in Pratyay Gender Trust, 5.82% with Kolkata Rista, 16.4% respondents with Ametie Trust, 21.16% respondents with Nadia Ranaghat Sampriti, 5.29% respondents with ATHB, 4.24% respondents with Troyee Foundation, 6.88% respondents with Pleqsus India Foundation, 9.53% respondents with Vaarta Trust and lastly 3.7% respondents are engaged with SRS Solution. Besides all of these, there are 14.82% respondents who do not want to say the name of NGO with which they are associated. (details graphed in fig. 6.2).

Figure no. 6.2



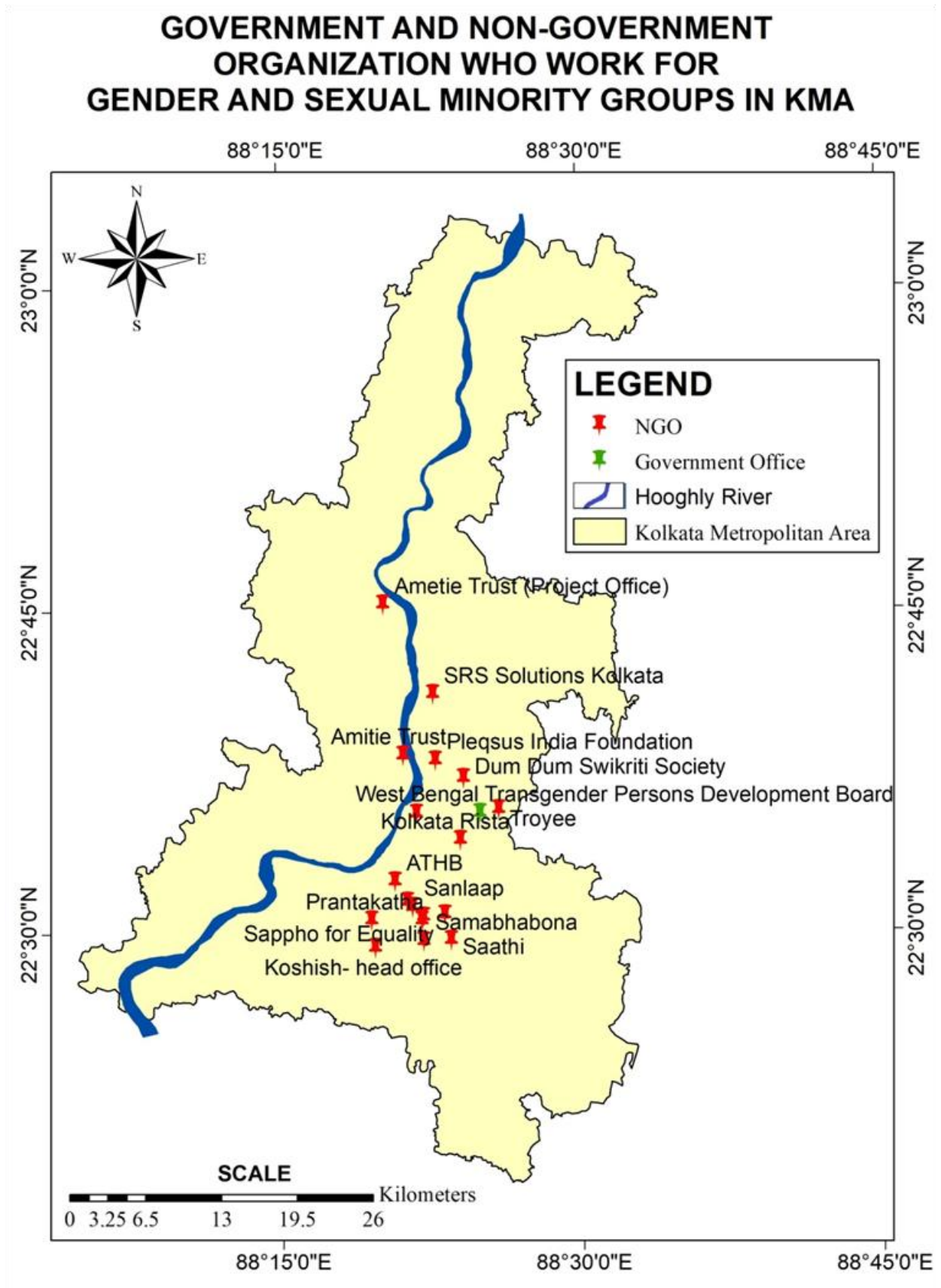
Source: Computed and Prepared by the Researcher<sup>2</sup>.

### 6.5.3 Government's Initiative:

These all are the NGOs who work for these kinds of minority people. Besides these, West Bengal Transgender Persons Development Board is also situated in the Subhanna Bhawan in Kolkata which deals with all matters relating to the development of transgender persons in West Bengal. All these government and non government organizations have been shown in the following map (details shown in map no. 6.a).

<sup>2</sup> For details please see Appendix 1.

Map no. 6.a:

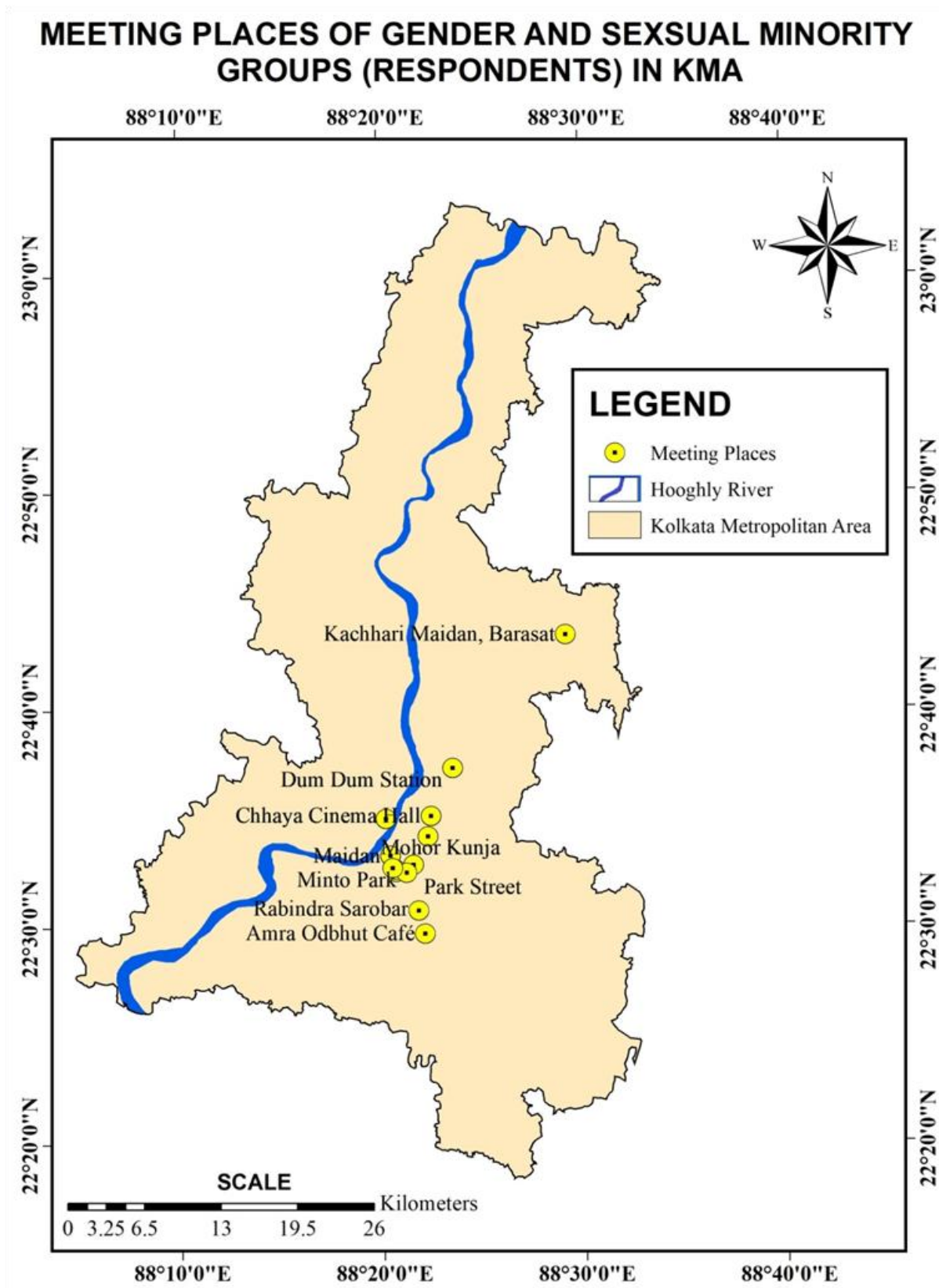


Source: Prepared by the Researcher.

#### **6.5.4 Social Exclusion and Their Meeting Places:**

Generally it is seen that these NGOs become their meeting places also because usually they can't meet in different open places. Most people look at them in a hostile manner, even hatefully. So they don't feel comfortable and choose these NGOs instead as a venue for their conversation and meeting their close ones. These NGOs help them in different ways and with time these NGOs become their home as well as their family. NGOs accompany these people at every step of getting their various rights. Also they meet in some other places which are more comfortable for them. These places are Barasat Kachhari Maidan, Chhaya Cinema Hall, Maidan, Park Street, Rabindra Sarobar, Minto Park, Mohor Kunjo, Nandan, Amra odvut cafe in Jadavpur etc (details shown in map no. 6.b). This also means that they are not very comfortable mixing with common people as common people also do not accept them properly.

Map no. 6.b:



Source: Prepared by the Researcher.

## **6.6 Changing Scenario- towards Inclusion:**

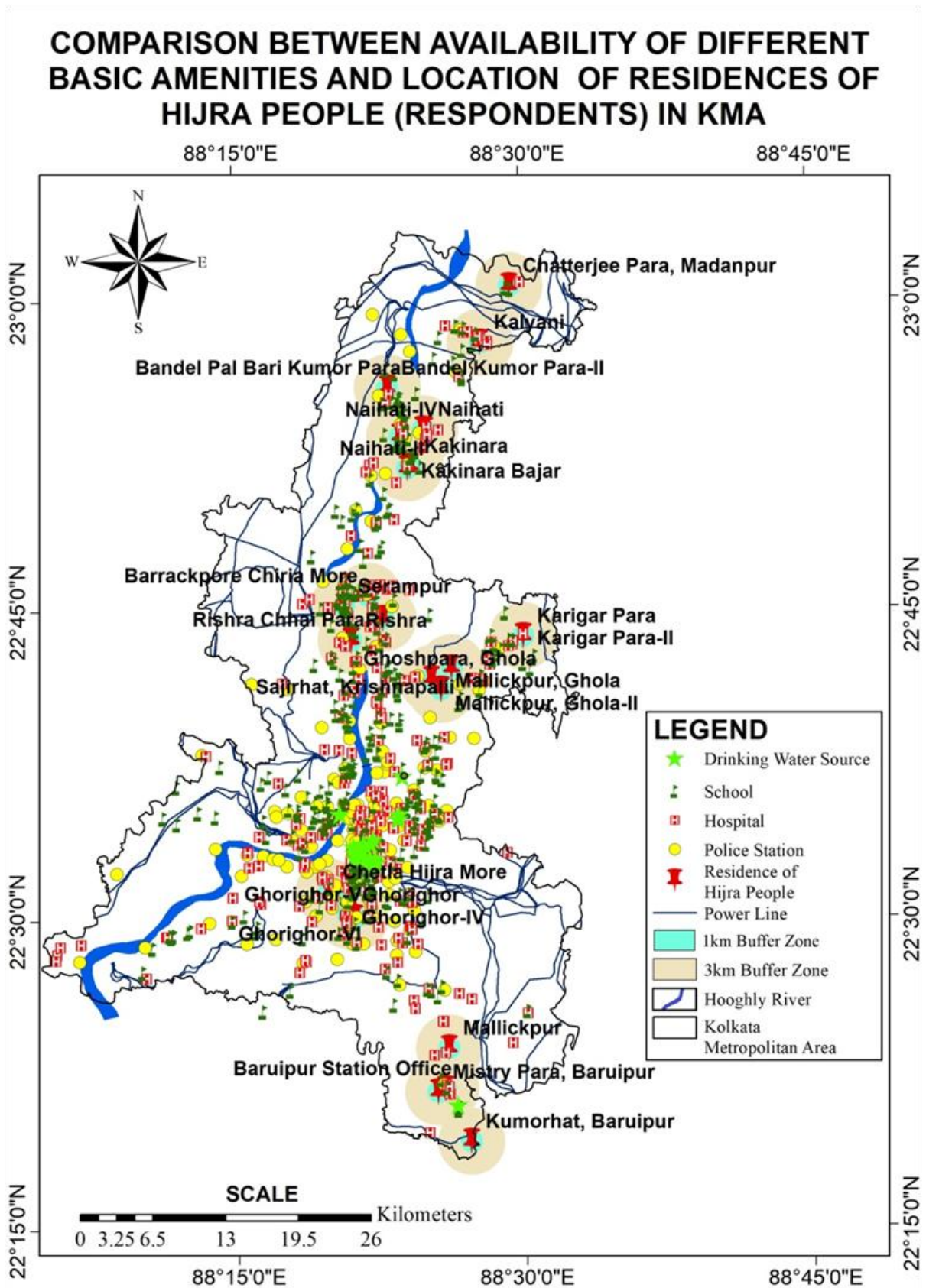
It has already been seen that although they face a lot of problems in different areas of their lives, now their situation in society is slowly changing. Their problems and needs have been described in detail in the previous chapters and the aforesaid survey of the court cases and judgments shows that they don't always tolerate insult, harassment and deprivation, that they can protest against inequality and the government stays on their side. These facts are brought home to us by diverse judgments in different cases and different Acts, rules and laws. The condition of the hijra people has also improved in many ways. Different basic amenities and entertainment services are now available near where they live. In the past the residences of hijra people were generally situated a considerable distance away from the residences of common people and the absence of different basic amenities was very common.

But now the situation is gradually changing. The map below shows that now their residential locations are not very far from the residences of common people. They no more reside in very remote places and they can access different basic amenities such as source of drinking water, electricity, hospitals, schools, police stations etc. In this map buffer zones of 1 and 3 km have been created to show the comparative availability of different basic amenities. Here it is shown that in maximum cases a number of schools are situated within 3 km. buffer zones. But in maximum cases it is seen that there is no school within 1 km buffer zone. Some examples of this kind of residential places of hijra or eunuch in Gori ghar, Karigar Para in Barasat, Kumorhat in Baruipur, Mallickpur in Ghola, Naihati, Titagarh area and Krishnapalli in Sajirhat. In a few cases, however, there is a school within the 1 km buffer area; these places are Chetla commonly known as Hijra More, Mistry Para in Baruipur and some locations in Ghorī Ghar. Besides these, there are more schools than one in a number of places (near the residences of hijra people) such as Chiria More in Barrackpore, Kalyani Station area, Kakinara Bazar, Chatterjee Para near Madanpur Station, Chhai Para in Rishra and Serampore. In Serampore there is the highest number of schools—six in all. So it is obvious that their situation, in terms of location, has been changing for the better.

As for the 3 km buffer zones, it has been seen that each and every place has schools. There's at least one school in all 3 km. buffer zones and in most cases it appears that there are more than 10 schools in most of the 3 km buffer zones. Most schools are situated within 3 km buffer zones of the residences of hijra people in Serampore(details shown in map no. 6.c) .

Now let's come to the point of availability of hospitals near the residences of hijra or eunuch people. It has also been seen here that in maximum places there are more than five hospitals or nursing homes or health centers. Gharighar and Chetla are the two places which lead the rest in all respects.

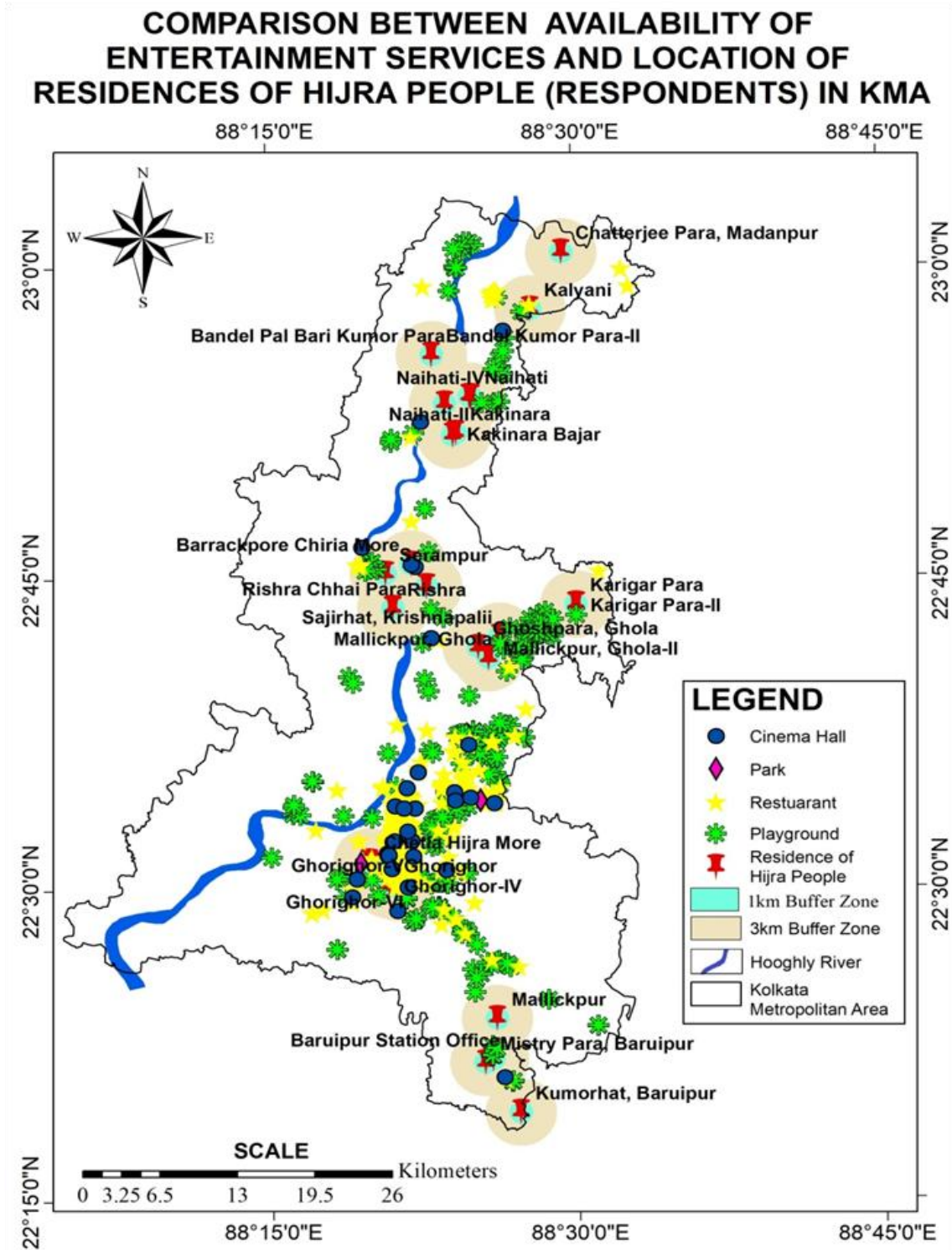
Map no. 6.c:



Source: Prepared by the Researcher.

As for in entertainment, availability of parks, cinema halls, restaurants and play grounds has also been noted within 1 and 3 km buffer zones of the residences of hijra people. But these facilities are mostly available in Kolkata and Barasat areas such as Karigar Para, Ghori Ghar area and Chetla (details shown in map no. 6.d).

Map no. 6.d:



Source: Prepared by the Researcher.



So, from these two maps it can be seen clearly that these people are not very segregated nowadays from the common people. They reside among others in most of the cases and they can also avail of different services and facilities in the society.

But now the society itself is also thinking about them from different aspects and doing different things for them and with them, not excluding them. It is obviously a big thing because society wants to move forward with them. But for this they have to endure a lot of suffering and humiliation. They have fought many battles with the society. A very important example of this is the Rainbow Pride Walk. Here not only the people of this community participate but those who support them, stand with them and pay tribute to their life's fight also participate in this Pride Walk. However, LGBT Queer Rainbow Festival was first held in Madurai to eliminate discrimination and marginalization of these people from the society and also carried out in Kolkata at the same time (Khatun, 2018). Every year this festival is held in Kolkata in which lots of people participate. Below are some pictures of Kolkata Rainbow Pride Walk (shown in photograph no. 6.i and 6.ii).

Photograph No. 6.i: Rainbow Pride Parade in Kolkata      Photograph No. 6.ii: Rainbow Pride Parade in Kolkata



Source: Captured by the Researcher.



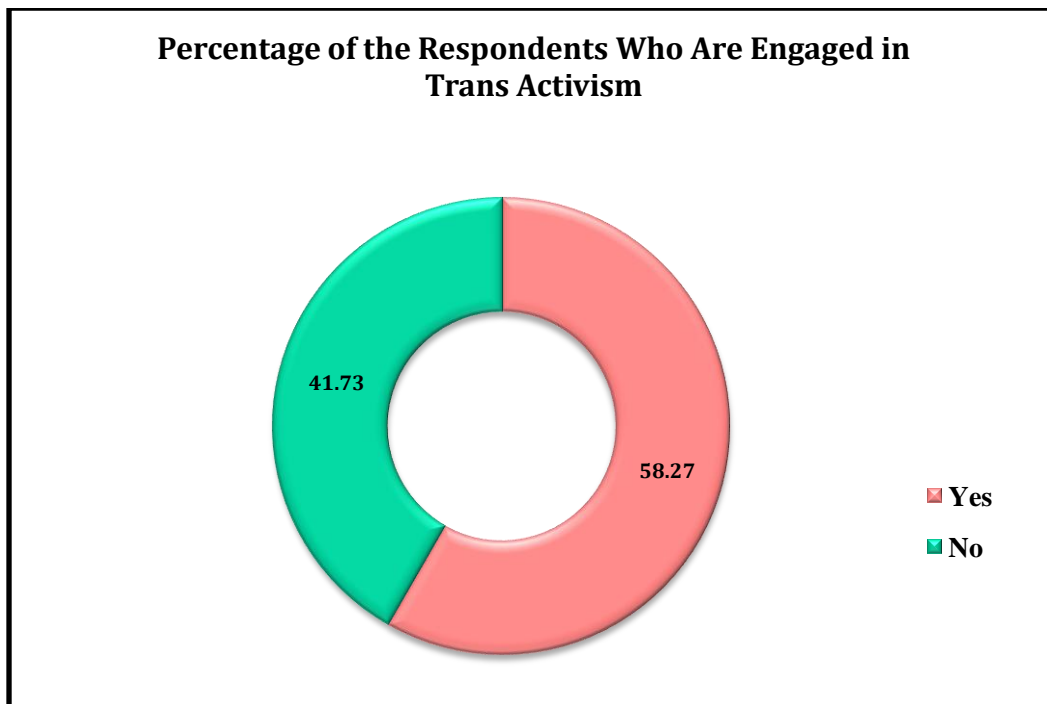
Source: Captured by the Researcher.

Administration also plays a very important role in making an inclusive society. These facts are more clearly understood from some incidents described below.

Yes, it is very much true that nothing can be obtained without movement, nothing is given by one's hands and everything has to be taken away by struggle and movement. This is very much true especially for gender and sexual minority people. So, most of these people are associated with activism. Here in this study, it has been found that 58.27% respondents are

actively engaged in trans activism and the remaining 41.73% respondents are not engaged in activism (details graphed in fig. 6.3) because they do not aware about their rights and those are mainly hijra people who are basically far away from education and activism and they don't know anything about it.

**Figure no. 6.3**



Source: Computed and Prepared by the Researcher<sup>3</sup>.

This activism has led to various changes in the society and these are discussed below.

### **6.7 Different Inclusive Steps of Society and People Awareness:**

The following are the different incidents which clearly show that the people of the gender and sexual minority groups are being little by little included in the society and in this they are helped by the common people and the Central and the State Government and administrations also shoulder their responsibility in this regard. The judiciary also plays a very important role.

<sup>3</sup> For details please see Appendix 1.

• **Separate toilet for transgender people**

However, a burning problem for all transgender people is getting proper toilet facilities. According to the law they are supposed to get all the benefits which, however, remain out of their reach most of the time. No one shows them even the slightest courtesy. But the situation is changing at a snail's pace. South Kolkata resident Shobhon Mukhopadhyay arranged public toilets for transgender people in ward no 112 in the KMC area. He arranged separate public toilet for them by placing a sticker which reads 'Tridhara' on general public toilets. One

such toilet is in the ward no 112 on the way to Banshdrooni from Gitanjali Metro Station. However, in this initiative he received the support of Councilor Anita Kar Majumder and Shashi Panja, Minister of Women and Child Development and Social Welfare in West Bengal ("Rupantarkamider Jonno e Bar Prithok Sulobh,"

**Paper Cutting No. 6.b**

**নিজস্ব সংবাদদাতা**

ওয়ার্ডের একাধিক সুলভ শৌচালয়ে ইতিমধ্যেই ওই যুবক তার দলকে নিয়ে এই ব্যবস্থা চালু করে ফেলেছেন।

দক্ষিণ কলকাতার বাসিন্দা ওই যুবক শোভন মুখোপাধ্যায় ওই ওয়ার্ডের বিভিন্ন জায়গায় পুরসভা নির্মিত শৌচালয়েই পুরুষ-মহিলাদের মতো আলাদা করে সিঁকার দিয়ে ব্যবস্থা করেছেন রূপান্তরকারীদের ব্যবহারের জন্য শৌচালয়। ১১২ নম্বর ওয়ার্ডের গীতাঞ্জলি মেট্রো স্টেশন থেকে বাশদ্রোণী যাওয়ার পথে রয়েছে একটি বড় শৌচালয়। সেখানেই প্রথম আলাদা করে 'ত্রিধারা' ব্যবস্থা করা হয়। পাশাপাশি, ওই ওয়ার্ডেরই পীরপুকুর এবং বড়তলার কিছু সুলভ শৌচালয়েও করা হয়েছে এই ব্যবস্থা। তবে একটি ওয়ার্ডেই থেমে থাকছেন না শোভন এবং তাঁর দল। ১১৩ এবং ১১৪ নম্বর ওয়ার্ডেও একই ব্যবস্থা করার পরিকল্পনাও ইতিমধ্যেই শুরু হয়ে গিয়েছে।

শোভনের কথায়, "রূপান্তরকারীদের সঙ্গে মিশতে গিয়ে মনে হয়, ওঁদের জন্য কোনও ব্যবস্থা, সুবিধা থাকবে না কেন?" আর এই ভাবনা থেকেই তাঁর মনে হয়, কোনও

আলাদা শৌচালয়ের ঘর তৈরির দরকার নেই। বরং দরকার আলাদা স্বীকৃতির। অন্য নাগরিকদের মতোই যে ওঁদের জন্য ভাবা দরকার, সেইটাই শুরু করা প্রয়োজন। তিনি জানান, সেই ভাবনা থেকেই শুরু করেন বিভিন্ন জনপ্রতিনিধির সঙ্গে যোগাযোগ। কিন্তু অনেক জায়গায় সাড়া মেলেনি। শেষে ১১২ নম্বর ওয়ার্ডের কাউন্সিলর অনিতা কর মজুমদার রাজি হন।

শোভন আরও জানাচ্ছেন, শুধু 'সিঁকার' লাগিয়ে আলাদা ব্যবস্থা করে দিলেই হতো না। তাই শৌচালয়গুলিতে গিয়ে ব্যবহারকারী মহিলা ও পুরুষদের সঙ্গে কথা বলে এবং সচেতনতা বাড়াবার জন্য আলোচনা করেই এ কাজ করা সম্ভব হয়েছে।

তাঁর এই উদ্যোগে খুশি কাউন্সিলরও। অনিতাছেনই বলেন, "ছেলেটির কথা শুনে মনে হল, সত্যিই তো ভাল কাজ।" এক জন সাধারণ নাগরিক যে এমন কাজে উদ্যোগী হয়েছেন, তাতেই খুব খুশি নারী ও শিশু কল্যাণমন্ত্রী শশী পান্জা। তিনি বলেন, "সাধারণ এক জন নাগরিক যে এমন ভেবেছেন, সে জন্য তাঁকে বনাদা জানাই।"

Source: Anandabazar Patrika, 11<sup>th</sup> August, 2017.

• **Crossing obstacles, this is the time for fulfilling dreams**

**Paper Cutting No. 6.c**

**সামসুদ্দিন বিশ্বাস**

পথটা আগেই খুলে গিয়েছে। এ বার সেই পথ ধরেই স্বপ্নপূরণ করতে চান ওঁরা। ওঁরা মানে রাজকুমার দাস, অরুণাত নাথ, মুগ্ধেন্দ্র দে, কৌশিক দত্তের মতো আরও অনেকে রূপান্তরকারী। তাঁদের কথা ভেবে সন্ত্রাস্তি পড়ার কি মকুব করে দিয়েছে ইন্দিরা গান্ধী ন্যাশনাল ওপেন ইউনিভার্সিটি (ইগনু)। সেই সিদ্ধান্তে রূপান্তরকারীরা খুশি তো বটেই, তারা বিশ্বাসটিকে স্বীকৃতি হিসেবে দেখছেন।

চলতি শিক্ষাবর্ষে ইগনু-র রত্ননাথঞ্জলি রিজিওনাল-এর বেশ কয়েকটি স্টাডি সেন্টারে ইতিমধ্যে ১০ জন রূপান্তরকারী ভর্তিও হয়েছেন। সংখ্যাটা মেমেন বড় না হলেও সাজা যে মিলাছে, তাতেই উচ্ছ্বসিত ইগনু কর্তৃপক্ষ। তাঁরা জানাচ্ছেন, এর আগে ভারতীয় কর্মকর্তাদের কাছে অন্য কোনও আলাদা আলাদা থাকত না। পুরুষ ও মহিলায় পাশে দেখা থাকত "অন্যান্য"। সেই "অন্যান্য" বিভাগেও গত বছর পর্যন্ত রত্ননাথঞ্জলি রিজিওনালে কেউ নাম লেখাননি।

ইগনু-র রত্ননাথঞ্জলি রিজিওনাল সেন্টার ডিরেক্টর শাহনু মুখোপাধ্যায় বলেন, "এক দিকে রূপান্তরকারীদের 'বি' মকুব, অন্য দিকে, তাঁদের পড়াশোনা চালিয়ে যাওয়ার জন্য উত্কর্ষ করা—এই দুটি পদক্ষেপ কাজে দিয়েছে বসেই মনে হচ্ছে। ইতিমধ্যে ১০ জন ভর্তি হয়েছেন। আশা করছি, সংখ্যাটা আরও বাড়বে।"

তবে, রাজকুমার, অরুণাত কিংবা কৌশিকেরা সমস্বরে বলেন, "পড়াশোনা চালিয়ে যাওয়ার ইচ্ছে ছিল যোগে আনাই। কিন্তু নানা বাধার কারণে সেটা হয়ে উঠছিল না। ইগনু-র সৌজন্যে আমরা এ বার স্বপ্নপূরণ করতে পারছি।"

বরেন্দ্রপুরের বাসিন্দা অরুণাত বিএ পাস করে পড়াশোনার ইচ্ছা টেনেছিলেন। তিনি বরেন্দ্র, "পড়তে গেলে তো বাইরে বেগোতে হয়।

মেমেন ভাবে মেমেন নিতে পারেনি। ফলে পড়াশোনার খরচটা তাঁকেই রোপাড়া করতে হত। তাঁর কথায়, "সেই কারণে বরেন্দ্রপুর কুম্ভনাথ কলেজে বিএ দ্বিতীয় বর্ষ পর্যন্ত পড়ার পরে আর পড়াশোনাতোী চালাতে পারিনি। ইগনু-র বিশ্বটি জানার পরেই ফের সেখানে ভর্তি হয়েছি।"

কুম্ভনাথের উইমেস কলেজের অধ্যক্ষ তথা রাজ্যের রূপান্তরকারী উন্নয়ন বোর্ডের সহ-সভাপতি মানবী বন্দ্যোপাধ্যায় বলেন, "এটা অত্যন্ত শুভ প্রয়াস। আমরা খুব ভাল লাগছে। অন্য বিশ্ববিদ্যালয়গুলির এ ব্যাপারে এগিয়ে আসা জরুরি।"

রূপান্তরকারী পাশাপাশি বম্বেরও নিম্নরত্নায় পড়াচ্ছে ইগনু। বরেন্দ্রপুর কলেজের সশোনাধিকারী ৭০ বর্ষি এ বার ইগনুতে ভর্তি হয়েছেন। শাহনুবাঈ বলেন, "ওই সংশোধনগুলো শীঘ্রই একটি স্টাডি সেন্টার চালু করা হবে। সেখানে শিক্ষক-শিক্ষিকারা গিয়ে পড়িয়ে আসবেন।"

Source: Anandabazar Patrika, 4<sup>th</sup> September, 2017.

In most cases these people suffer from financial difficulties and it is not possible for them to continue their studies properly. Keeping this in mind, Indira Gandhi National Open University (IGNOU) has waived its fees for transgender people and this decision has immensely benefitted the transgender people. About 10

transgender people have already been admitted to the study center of Raghunathganj Regional office of IGNOU (Biswas, 2017).

- See through the lens of camera

**Paper Cutting No. 6.d:**



Source: Anandabazar Patrika, 17<sup>th</sup> September, 2017.

Previously one would never have thought of transgender people as a model. But such prejudiced thinking is also changing slowly. From the physical point of view, being a woman it is not a big deal. But from the psychological point of view, understanding the female viewpoint is much more important. A student of Law, Bodhisatya Ghosh has taken an initiative to convey this idea and message to common people through a fashion blog. In this fashion blog he has featured transgender women as models (“Camerar Chokhe,” 2017).

- Yuva CPM has opened its door for transgender people

**Paper Cutting No. 6.e:**



Source: Anandabazar Patrika, 4<sup>th</sup> October, 2017.

The Youth wing of the Communist Party of India (Marxist) has of late opened its doors for transgender people. A few years ago, its student organization SFI fielded an LGBT candidate in the elections of the Jawaharlal Nehru University students’ body. But their youth organization DYFI has gone a step further and opened the doors for transgender people in their unit committees as well. CPM sources claim that this is the first case of its kind in the country where 9 members are transgender among 11 members in a unit committee (Chakraborty, 2017). This is also a groundbreaking step.

• **Training for the hijra people in how to use VVPAT**

Voting is a vital process in a democratic country like India.

**Paper Cutting No. 6.f:**

Every person has the right to vote. Being uneducated, the hijra people in maximum cases are unaware of things such as VVPAT (Voter Verified



Paper Audit Trail). Keeping this in mind, the

Source: Anandabazar Patrika, 25<sup>th</sup> March, 2019.

administration of Baruiapur Block arranged training for the hijra people in how to use VVPAT. This was organized in the panchayat of Mallickpur because according to Anirban Dutta, the BDO of Baruiapur, many hijra people live in Mallickpur though only 50 hijra people enlisted their names as voters. So this is an effort to persuade others to register their names in the voters' list (Chottopadhyay, 2019). This is really an important effort by the government and administration to help them and to convince them that the government cares for them and tries to give them all the benefits they deserve as other human beings.

• **Changing the way of thinking**

**Paper Cutting No. 6.g:**

Old ideas are changing, though, and liberal minded



people are also coming forward to support them. Keeping this in mind, Senco Gold and Diamonds is helping to bring progressive thinking to our society. They inaugurated and launched India's first jewellery range – 'Pride Collection' for gender and sexual minority people and LGBTIQ community. Actually it was organized on 27<sup>th</sup> June, 2019 at their show room in Moulali to synchronize with the celebration of World Pride Month. A fashion show was organized at this inaugural function named 'Sphulingo, Freedom of

Source: Anandabazar Patrika, 29<sup>th</sup> June, 2019.

Expression' ("Chintadharay Bodol, Sobai k Kore Apon," 2019).

• **Pandel of Durga Puja is decorated with the stories of hijra**

Paper Cutting No. 6.h:

Durga Puja is the greatest Bengali festival. Socially these people do not have the right to rejoice on this occasion. They are isolated in all aspects of their lives. But the artist Anirban Das created the beautiful pavilion of Dum Dum Tarun Dal based on the concept of the mind structure and the day to day life of hijra people or brihannalas (Karmakar, 2019). This is a very bold move indeed.



Source: Aajkal Patrika, 24<sup>th</sup> September, 2019.

• **Police rescued a transgender person**

According to Anandabazar Patrika, there was a transgender male person who was a victim of domestic violence by his mother, father and elder sister and he was rescued by the police of Bhatpara Police Station. Here the victim is a biological female person, but she thought of herself as a male person and wore male outfits. So the members of her family got very unhappy and angry about her behavior and this kind of gender expression. So they started torturing her. When there was a great commotion in the neighborhood over this incident, the police of Bhatpara Thana arrived and brought the person to the police station to save her from domestic violence.

Paper Cutting No. 6.i:



Source: Anandabazar Patrika, 27<sup>th</sup> October, 2019.

Transgender lawyer Ankan Biswas, Trans female Teesta Das and social activists such as Bappaditya Mukhopadhyay, Aparajita Gangopadhyay were also present there to help rescue that person. When she got wind of this outrage, the well known social activist Ranjita Sinha, a transgender woman, immediately informed the police and it is also very fortunate that the police took proper action and rescued that person (“Rupantorkami Juba k Bari Feralo Police,” 2019). Source: Anandabazar Patrika, 27<sup>th</sup> October, 2019.

• **High Court stands by third gender people**

**Paper Cutting No. 6.j:**



A recent notification of the Calcutta High Court mentions male and female as gender but leaves no scope for the third gender. As a result of this notification, a case was filed in the High Court by a transgender lawyer Ankan Biswas and his advocate Indrajit Dey. But meanwhile the High Court added the word ‘other’ in the notification and viewing this position of the court Ankan Biswas said that this plea would give the whole transgender rights movement a lot of momentum in the days to come. This is a very good example of how they can enforce their rights through litigation and it is also true that the court stands by them and will stand by them in the future (“Tritiyo Lingero Sujog High Court E,” 2020).

Source: Ei Somoy, 1<sup>st</sup> October, 2020.

• **Rules and regulations have been changed for transgender people**

The government also cares about their self respect and honor. Earlier on they had to undergo a physical examination while obtaining the transgender certificate from the District Magistrate for their gender identity. But allegations of harassment have been levelled repeatedly. Therefore, the Central Government has abolished the rules of physical examination and now only an affidavit will be issued as per the new law.

**Paper Cutting No. 6.k:**



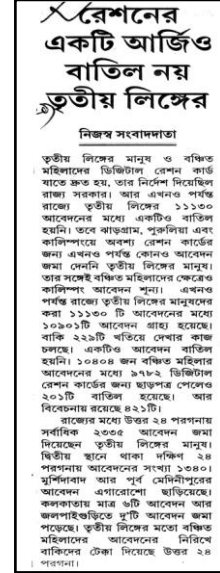
Source: Anandabazar Patrika, 3<sup>rd</sup> October, 2020.

It has been said that until the online system is introduced, the application has to be submitted physically in the office of the District Magistrate. But the parents can also apply on behalf of their children (“Rupantorkamider Jonno Niyome Bodol,” 2020). This is also a very good step.

- **No application of ration card of third gender people has been cancelled**

During the Covid crisis the West Bengal government directed that every third gender person should get a digital ration card and that everyone should get ration. Our state has so far received 11130 applications from third gender people and none has been rejected. Within the state, North 24 Parganas district received the highest number of applications from people of third gender. It is a very good initiative in the direction of an inclusive mainstream society (“Ration Er Ekti Arjio Batil Noi Tritiyo Linger,” 2020).

**Paper Cutting No. 6.l:**



Source: Anandabazar Patrika, 7<sup>th</sup> October, 2020.

- **Transgender person will sit in the UGC NET examination**

**Paper Cutting No. 6.m:**



Source: Anandabazar Patrika, 3<sup>rd</sup> February, 2021.

These gender and sexual minority people face numerous problems in their lives. From this study it has already been seen that they often face bullying in their educational institutions and unable to face all this, they are often forced to leave their studies. Overcoming these hurdles the few who continue their studies also face several problems, mainly economic problems. The case of Sumana Pramanik serves as an example in this regard. This incident proves that all obstacles can be overcome with strength of mind and willpower. Sumana Pramanik is a resident of Nadia and a gold medalist in mathematics from



Kalyani University. A transgender female, she wanted to sit the UGC NET examination in the category of science as a transgender and she was unable to pay the recommended fees. She wanted waiver of fees and relaxation of age as a third gender candidate. As she was not given this opportunity, she went to court and won her case after a long battle. It is a big example that the judiciary also thinks about them and empowers them with different opportunities that other common people easily get (“Porikhay Bosben Rupantarkami,” 2021).

- **Vaccination of Community people**

**Paper Cutting No. 6.n:**

Not only the government, but various non-government organizations also work for the gender and sexual minority groups in different ways such as arranging vaccination of these people in the covid-19 situation. One such organization is Prantakatha and this



Source: Anandabazar Patrika, 13<sup>th</sup> June, 2021,

organization organized a vaccination program for the people of LGBTIQ plus community in collaboration with Medica Hospital and Calcutta Foundation at Kishore Bharati Stadium. About 130 transgender, homosexual and bisexual people were vaccinated through this program (“LGBTIQ Communityr Manushder Tikakoron,” 2021).

**Paper Cutting No. 6.o:**

- **Vaccination of transgender people in Jadavpur**

The government also arranged vaccination programs for the gender and sexual minority people. The picture below shows a transgender person getting vaccinated at a vaccination center in Jadavpur (“Jadavpure Rupantorkamider Tika,” 2021).

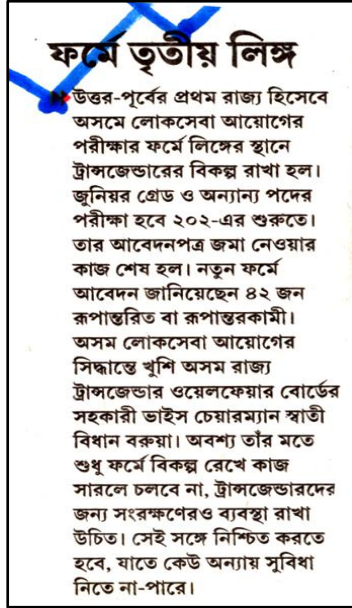


Source: Aajkal Patrika, 8<sup>th</sup> July, 2021.

- Include the option ‘third gender’ in the examination form of Lok Sabha Ayog, Assam
- In Delhi metro

Assam became the first state in the North east to include transgender as an option in the place of gender in the Lok Sabha Aayog examination form (“Form e Tritiyo Lingo,” 2020).

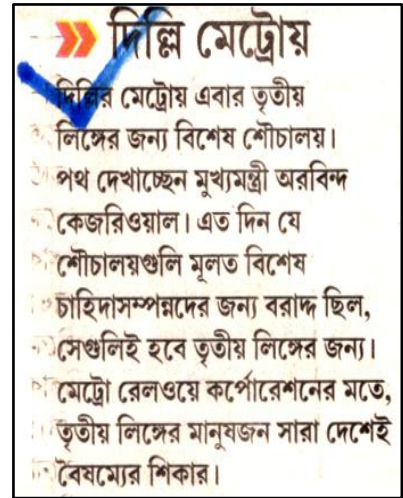
**Paper Cutting No. 6.p:**



Source: Anandabazar Patrika, 30<sup>th</sup> October, 2020.

Chief Minister Arvind Kejriwal has taken the initiative to arrange special toilets for the third gender people in Delhi Metro (“Delhi Metro,” 2021).

**Paper Cutting No. 6.q:**

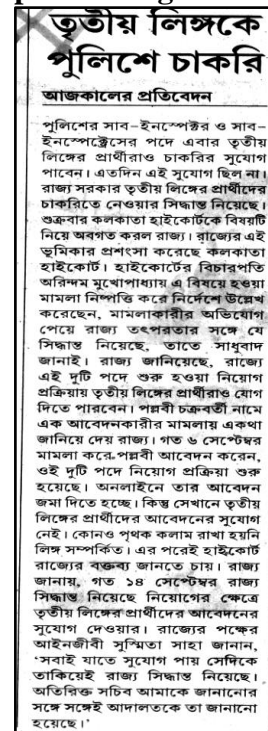


Source: Aajkal Patrika, 1<sup>st</sup> September, 2021.

- Third gender candidates have been given job opportunities for the posts of sub-inspector of police

Third gender candidates have also been given job opportunities for the posts of sub-inspector and female sub-inspector of police. Actually this decision was taken following the case of Pallabi Chakraborty. She went to court arguing that she wanted to apply for the two aforesaid posts, but there was no option for the third gender category to apply. Then Calcutta High Court decided the case in her favour enabling her to give to sit the examination as a third gender person. Sushmita Saha, lawyer for the state, said that the state government had decided to ensure that everyone should get a chance (“Tritiyo Lingo k Police e Chakri,” 2021).

**Paper Cutting No. 6.r:**



Source: Aajkal Patrika, 2<sup>nd</sup> October, 2021.

• **A transgender person got selected as a judge of Lok Adalat**

They have to constantly defend themselves against adverse, slanted comments and survive in a hostile environment. They know it very well that they can't survive without fighting, no one fights for them and they have to fight their own fights. But this struggle awakens in some the will to move forward in life. One such name is Aitri Kar who has successfully battled her way through various problems. She is a Lok Adalat judge and a transgender social activist (Sen, 2022). The work done by the State and District Legal Service Authorities in this regard is certainly commendable.

**Paper Cutting No. 6.s:**



Source: Aajkal Patrika, 13<sup>th</sup> November, 2022.

All these people are still victims of deprivation. Society does not want to accept them easily and keeps them apart everywhere. Passers-by still stare at these people on the road. Seeing them at the traffic signal, many people roll up their car windows. In private everyone makes fun of them. But many people simply don't want to understand that they too are human beings and like others they too have emotions and can cry, too. They can't believe that given the opportunity, these people, too, can develop themselves. But they hardly get that opportunity in this society. In most cases, once their gender identity and sexual orientation is known, they are either confined to the house or thrown out of the house. This is how all their dreams and hopes turn to dust. They have no freedom to marry, no freedom to live well and actually they have nothing. But in spite of such bad conditions, there is a light of hope in the incidents mentioned above. From the aforesaid incidents it can be said that the people of the mainstream society are now gradually getting to know more about the people of gender and sexual minority groups. And various social workers, the Central and the State Governments and various non-government organizations have come forward to help them and these are really positive steps. So, it must be said if the mindset of society and people is changing in this way, a day will come perhaps sooner than we imagine when the dream of an inclusive society will be substantially fulfilled.

# **Chapter-VII**

## **Concluding Suggestions and Future Action Plan**

## Chapter-VII

### Concluding Suggestions and Future Action Plan

The salient features revealed in course of the discussion in the previous chapters about the gender and sexual minority people are summarized below. Actually their exclusion from the mainstream society and the causes and the consequences of their exclusion move in a cyclic order. It is like a vicious circle of poverty. They cannot break out of the circle at all. Actually they need a big push to enable them to get rid of all these problems. Some important suggestions are made at the end of this chapter to free them from these problems and take away them from social exclusion towards social inclusion. But it is common knowledge that without purposive action everything becomes meaningless. So, an action plan has also been prepared and explained at the end of this chapter.

#### 7.1 Major Findings:

- Gender identity and assigned sex at birth do not generally match each other in the case of gender and sexual minority people.
- Gender and sex are not the same; they are different from each other.
- One's gender identity and gender expression match each other.
- Different types of gender identities are seen among gender and sexual minority people, i.e., male, female, trans male, trans female, queer, kothi, tom boy etc.
- One's sexual orientation cannot be understood if one does not disclose it.
- But in most cases, gender identity can be understood from their gender expression.
- These gender and sexual minority people cannot be accepted by society in most of the cases.
- The percentage of school dropouts is very high among them.
- The rate of illiteracy is also very high among them.
- Considering all the respondents of gender and sexual minority people, the hijra community is in the direst situation. Among them the percentage of those who never went to school is the highest.
- They face bullying very frequently and educational institutions generally don't have the kind of infrastructure and administrative policy required to protect them from

different kinds of harassment and teachers are also not aware and sensitized properly about these kinds of minority people and the persecution suffered by them.

- Among the gender and sexual minority people, the main category is LGBTIQ and they are prominent among these minority communities.
- Hijra is a kind of profession. Whoever takes to this profession is called hijra.
- Generally these gender and sexual minority people who don't have any other option to earn money engage in this hijra profession.
- Hijra community mainly follows the Islam religion.
- The people of this minority community mainly reside in Muslim-dominated areas.
- They are variously engaged with different NGOs in most of the cases and in their day to day life NGOs play a vital role.
- Yet many hijra people are not related to NGOs.
- Among all the respondents maximum people are unmarried.
- Most of these people have had to leave their houses and live in separate places and ultimately move to shelters mostly provided by fellow hijras.
- Those who left home are not requested to come back home. Their parents are ashamed of them. But a few exceptions are also there.
- Most people understand their gender identity within 5 to 10 years and become aware of their sexual orientation within 10 to 18 years.
- It is not a fact that people always come out or disclose their gender identity or sexual orientation.
- But those who disclose their gender identity and sexual orientation face torture and domestic violence in most of the cases.
- These people are generally harassed, humiliated and discriminated against in home and public places.
- These people mostly suffer from depression and anxiety and they are addicted to various types of addictive substances.

Most persons of this category have to go to a psychologist or psychiatrist for treatment. But hijra people are exceptions in this regard because owing to lack of education they in most of the cases don't go to any psychologist or psychiatrist.

- Among these gender and sexual minority people, a proneness to suicidal tendency is seen.

- In most of the cases, it has been seen that transgender and intersex people are unhappy with their assigned sex at birth and they want SRS. But for various reasons not everyone who wants to undergo SRS can do it.
- They are mostly dissatisfied with their social life.
- In most of the cases these people have been harassed in their workplaces frequently and they feel marginalized in society.
- They live a very hard life and they cannot fulfill their various needs.
- In maximum cases, these people are engaged in activism. On the other hand, hijra people are not engaged in this kind of activism.
- These minority people don't get any help from their families in most of the cases and basically they get help from their community members.
- It is not that those people who get support from their families get help from the very first day of their disclosing their gender identity or sexual orientation. In maximum cases, they get support after few years of their disclosure.
- In the area of health and healthcare they are also ignored and harassed. Health service providers also don't have proper knowledge about these people.
- They are avoided by their friends, family members, neighbors, relatives, parents in every part of life. They remain outcasts in society and never make it to the mainstream.
- Although they benefit from the laws in various ways, they still remain socially excluded.

## **7.2 Concluding Suggestions:**

There are different critical sectors, i.e. education, health, different socio-economic government projects, administration, political sector, etc., where inclusive space must be created for the inclusion of these people and the policies of those sectors must be very inclusive, too.

### **7.2.1 Education:**

- Education system is the base of every society. So, if children are educated properly, they will become the strength of the society. So, firstly the education system must be inclusive and curriculum and syllabus must be suitably inclusive,

too, so that common people and children can get to know the characteristics and definition of gender and sexual minority people.

- Anti-ragging policy and anti-ragging committee must be created in every educational institution so that no one will drop out from an educational institution as a result of different kinds of harassment and discrimination.
- Scholarships should be introduced for the education of those children, so that they can continue their education without any help from their family members.
- Reservation system must be introduced in higher studies for these gender and sexual minority people.
- School uniform must be gender neutral.
- For these people, all school and college fees should be waived.
- A complaint cell must be created in all kinds of educational institutions, so that every victim of this category can come and complain against the perpetrators of abuse.
- A comprehensive sex education program should be included in the school curriculum so that children can acquire non-judgmental information about those marginalized people and a liberal outlook as far as gender and sexual minority people are concerned.
- It will be a very good step if night schools can be run to educate these transgender and hijra people, who do not get a chance to go to any educational institution due to the peculiar nature of their livelihood earning activity which keeps them engaged the whole day. Such an initiative could lead to their being intellectually enriched and as a result, they will have an opportunity to move away from their present profession to other gainful and normal professions.

### **7.2.2 Health:**

- On a regular basis, sensitization programs on gender and sexual minority people must be organized in different hospitals and health centers and it must be ensured that all health service providers, including all doctors, are included in this program and this sensitization program should be made mandatory for all.
- MCI should issue proper guidelines that strictly ensure that the gender and sexual minority people will not face any discrimination or refusal at the time of their



treatment and that offensive behavior on the part of any health service provider will be treated as professional misconduct.

- The medical syllabus also needs to be changed in order to include the various physical and mental problems and the treatment procedures of transgender and intersex people and this part of the syllabus should be mandatory for all medical students.
- Separate beds should be provided for them in every government and private hospital and the charges for those beds should be subsidized and a transgender ward should be created in every department of every hospital and nursing home.
- The whole SRS procedure should be free of cost in every government and private hospital.
- Each and every government and private hospital should have counseling cells for gender and sexual minority people.
- Minimum age for Gender Affirmative Surgery should be 18 and surgery before this age should be made a punishable offence for their parents.
- HIV testing and treatment should be free for these people.
- Treatment of various sexually transmitted diseases should be free for these minority people.

### **7.2.3 Shelter:**

- Shelter home for the displaced people of the gender and sexual minority groups must be built in every district and crisis management centres for these people must be made in every municipality and gram panchayat area where they can register their problems in details and primarily take shelter and obtain food for their survival.
- Allowance and pension should be provided for elderly transgender, hijra, kothi and intersex people.
- Child care home for the children of gender non-conforming and gender and sexual minority children must be set up in every district where destitute and displaced children can grow up and get education.

#### **7.2.4 Livelihood:**

- There should be reservation for these gender and sexual minority people in each and every sector of work and work policy should be accordingly inclusive.
- Each and every workplace must have a committee that represents only gender and sexual minority people and this committee should receive all complaints from their GSM employees and ensure their protection.
- Those people are mostly uneducated or half-educated and for that reason some training programs and workshops should be arranged for them so that they can earn their own living.
- It has been frequently seen that in the case of transgender people there is no match between their gender identity and their official identity cards and other certificates. But it must be ensured that they should not be deprived of any employment opportunity for this reason.

#### **7.2.5 Administration:**

- Firstly, in the census exercise, the gender and sexual minority people should be included separately from grass roots level because in the 2011 census, only 'others' term has been used to indicate non binary and third gender people. But here LGBTIQ and other terms have not been employed separately. So, it is impossible to get actual data of each and every category of gender and sexual minority people. And this data should be at the micro level like other census data.
- Those persons, who collect data through questionnaire for house to house survey, should be given special training about gender and sexual minority people with a view to protecting their respect, dignity and privacy.
- It must be ensured that these transgender people get the pension after the death of their earning parents.
- All running government projects that exist must be gender and sexual minority people inclusive.
- Medical insurance must cover the cost of SRS procedure for transgender people.
- It must be ensured that after applying for transgender certificate, the applicants find the process of getting transgender certificate smooth and easy.

- A process or portal should be created through which transgender people can change their gender identity and name and include the same in their documents and this process should be easy and fast.
- Besides, all government policies should cover gender and sexual minority people.
- Laws should be made for these people so that they are not deprived of various civil rights such as marriage, inheritance, adoption etc.
- Participation of these people in Lok Sabha, Rajya Sabha, Bidhan Sabha, Gram Panchayat and other various administrative and political platforms should be ensured through laws and policies.
- It should be ensured that third gender people get their own pucca house through ‘Bangla Awas Yojana’ (BAY) (Bangla Awas Yojana, 2016) and PMAY (U) (Pradhan Mantri Awas Yojana – Urban, 2015).
- The people under these minority categories who don’t have proper sanitation system, must be included in ‘Nirmal Bangla’ project under West Bengal Government through which they can get proper sanitation system (Schemes - Nirmal Bangla, 2011).

#### **7.2.6 Banking Sector**

- They face numerous problems in the banking sector also. Therefore, banking service should be inclusive so that they can open their accounts without any hassle and make their partner a nominee without any complications.
- They should get loans with minimum interest payment or better still, interest free loans to start their own business to be able to stand on their own feet.

#### **7.2.7 Legal Reforms**

- After the death of their parents, these marginalized people face a lot of difficulties in getting their inheritance. To remove problems of this kind, suitable law must be introduced.
- Most couples want to have children. But these gender and sexual minority people cannot get married and simultaneously they are unable to adopt a child. Everyone has the right to be a parent. So they should be legally empowered to adopt children.

### **7.2.8 Police Reforms**

- The police administration should form a committee in every police station with a social activist on board who works for the rights of gender and sexual minority people to investigate all reports of abuses inflicted on these kinds of minority people.
- Sensitization program should be arranged at regular intervals for every policeman so that they could behave sympathetically with the hijras and other gender and sexual minority people.
- Every police station should make arrangements for a separate cell for transgender, kothi and hijra people because they don't feel comfortable in the cells meant for ordinary males and females.

### **7.2.9 Other Measures**

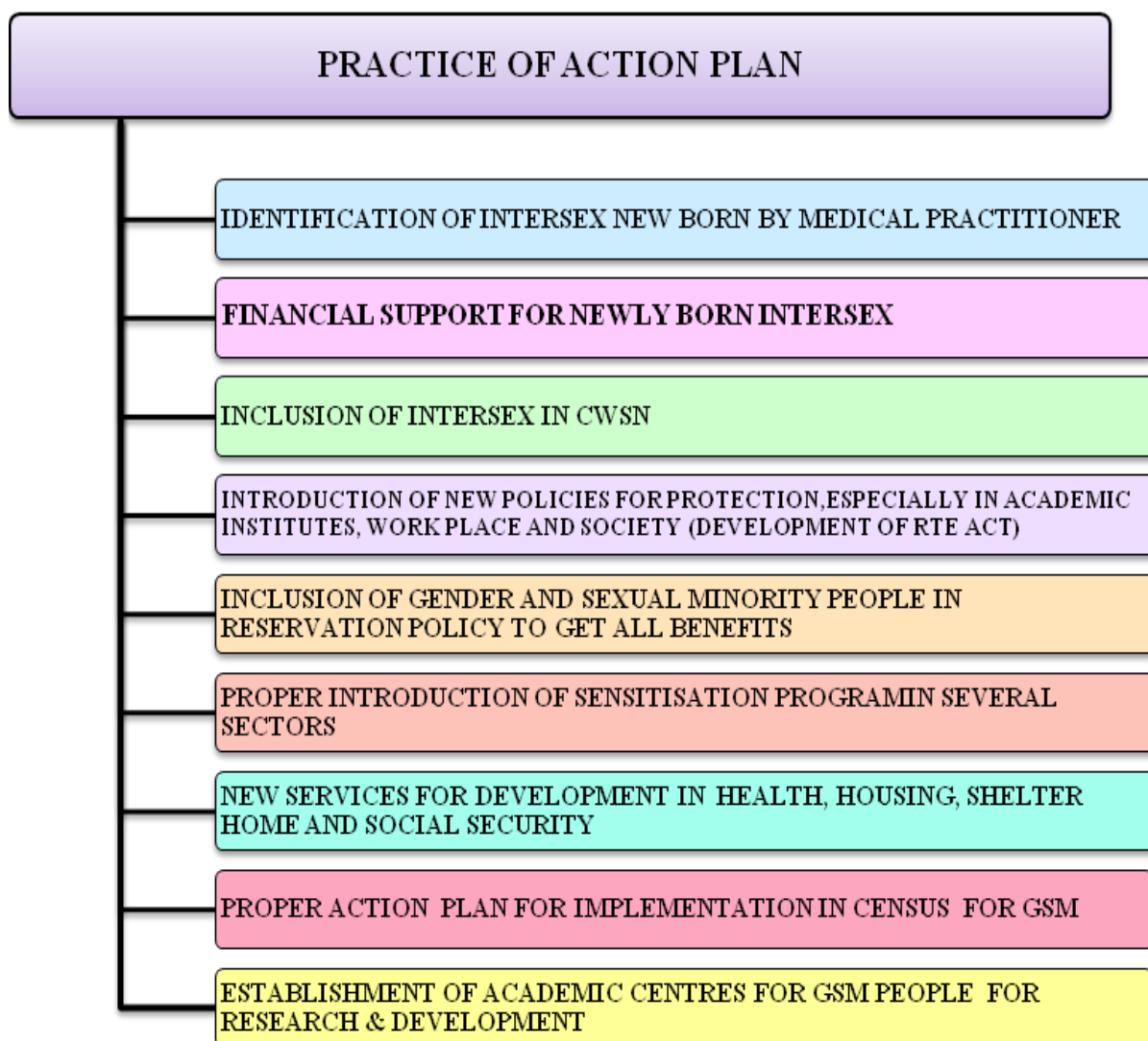
- Suitable legal provision should be made for hijra, kothi and transgender people so that they can travel in ladies' compartments on trains and they should have separate seats in every public transportation system.
- They should also have the right to marry without SRS as well as the right to divorce and get alimony in case of domestic violence, fraud and abuses.
- Government should initiate steps to bring all needy and deprived hijras and other gender and sexual minority people under employment guarantee schemes or MGNREGA.
- The hijra community has a unique culture of dance and folk songs. This culture is an inseparable part of this community's life. Government should take the initiative to keep this culture alive. Efforts should be made with adequate fund support to give them employment opportunities.

### **7.3 Future Action Plan:**

Recommendations and suggestions are really important in solving any problem. And suggestions don't have any value without their implementation. So implementation is very much necessary to solve any problem. Here two models have been given for the implementation of all these suggestions – model-1 and model-2. Here two main things are very important and these two models revolve around these two wheels. These two wheels or main things are- practice and supervision. Here model -1 (details shown in model no. 7. A) is the action plan where practice plays the pivotal role and under practice, there are the following steps-

### 7.3.1 Model-1: Action Plan

Model no. 7.A:



Source: Prepared by the Researcher.

The model-1 has been described in detail below.

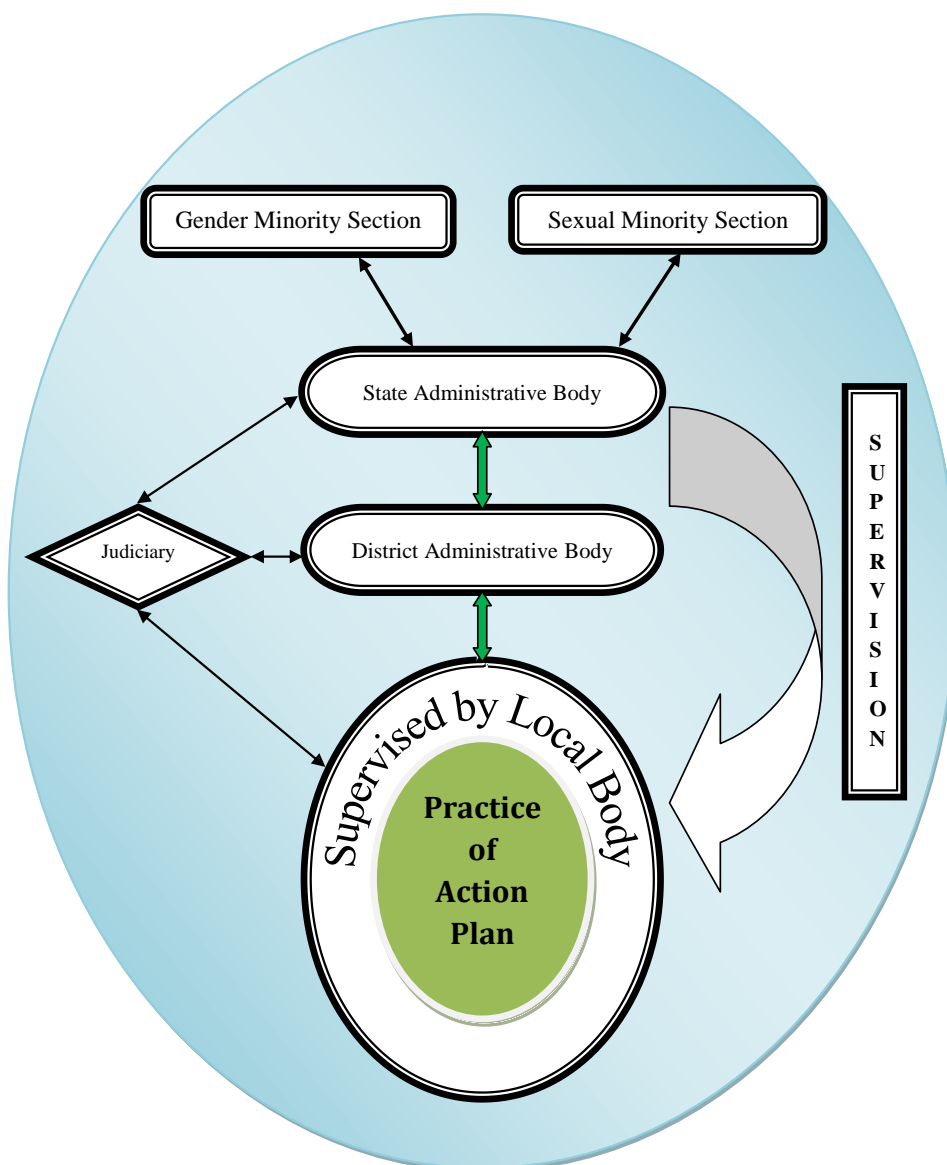
1. Identification of intersex new born by medical practitioner. When a baby is born, the doctor looks at their external genital parts and assigns sex in their birth certificate. And in a birth certificate there must be three options, i.e. male, female and other or intersex and this assigned sex should not be changed due to any pressure or hindrance. And the gender column should be left blank in their birth certificate.

2. The new born intersex must be included in hospital or nursing home's data base and this data base must be connected to a government portal so that they can be identified easily by the government and financial support should be given to the parents of a new born intersex so that they won't give up their children.
3. Those children must be included as CWSN children in different anganwadi and primary schools at the time of their admission so that they can get some financial support for continuing their studies.
4. Anti harassment and anti ragging committee must be created in every educational institution from grass roots level and at least one member of this committee should be from this community people or the parents of the children who fall in this category.
5. All government and private sectors must reserve some percentage of seats for these minority people for their employment.
6. Third gender and other non binary people should not be given any stereotype dress code in any educational institution and different workplaces.
7. Anti harassment and equality cell must be set up in every workplace which must take necessary steps to solve the problems.
8. All running government projects must offer the option of 'transgender' and 'other', so that these people can apply for all government benefits without going to court and these options should be included in both the modes--online and offline.
9. Sensitization programs must be arranged in each and every educational institution and in all government and private sectors at regular intervals so that everyone gets to properly know about these people.
10. Sensitized and specialized census workers should be appointed who can identify them and count them and include them in the census data.
11. An academic and research center for the development of gender and sexual minority people must be established and different courses and diplomas should be offered by this academic and research centre on the subjects related to gender and sexual minority communities.
12. Resource persons for each and every sensitization program must be either from the aforesaid academic and research centre or from the community people who belong to the gender and sexual minority groups.

### 7.3.2 Model-2: Implementation of Action Plan

The aforesaid steps of action plan (details shown in model no. 7.A) must be implemented. But inclusion of those people in the mainstream society through implementation of the action plan is not so easy because mainstream society doesn't want to accept them from the core of their heart. But no person can be forced to live alone or separately from the society. All people have their right to live with respect and dignity in this society. But when one's rights are taken away by force, then the help of law must be sought and they have to earn their right to live. For that reason model-2 is very much important (details shown in model no. 7.B).

#### Model no. 7.B: Implementation of Action Plan



Source: Prepared by the Researcher.

This model is described below step-by-step.

- There are three bodies to watch or observe that Action Plan is being followed properly. These are local bodies, district administrative bodies and the state administrative body and these three bodies are connected to each other.
- The local body must be located in every municipality and gram panchayat area.
- The main work of the local body is to observe whether the practices are maintained properly or not at grass roots levels.
- Another task of the local body is to take different complaints from the victims and act in their own way.
- Local bodies are connected with the state administrative body and those complaints which are taken locally from the victims and which can't be solved locally are sent to the district administrative body and these district administrative bodies must be set up in every district. And a number of local bodies work under each district administrative body.
- District administrative body also continuously monitors the local bodies.
- Besides these, all district administrative bodies are connected with the state administrative body.
- The state administrative body must have two wings- gender minority section and sexual minority section.
- All these bodies are connected to and supervised by the judiciary because when one person or victim cannot get proper facility or when one feels deprived, they can go to court for proper judgment and redressal.

In this way, if proper observation, policy making and implementation go on simultaneously, it will be ensured that these gender and sexual minority people can never be excluded from the mainstream of the society. As a result of this, all will live in a world where there will be no discrimination and all people can live side by side as equals.



# **Glossary**

## GLOSSARY

- ❖ **Abuse:** It means cruel, violent, or unfair treatment of someone. Abuse can come in many forms, such as: physical or verbal maltreatment, injury, assault, violation, rape, unjust practices, crimes, or other types of aggression.
- ❖ **Agender:** Those people who don't believe in any gender concept and who don't want to be labeled under any gender category are called agender or gender neutral or neutrosis (Harrington, 2016).
- ❖ **AIDS Bhedbhav Virodhi Andolan (ABVA):** AIDS Bhedbhav Virodhi Andolan (ABVA; English: AIDS Anti-Discrimination Movement) was the first HIV/AIDS activist movement in India, founded in 1988 in New Delhi.
- ❖ **AIDS:** Acquired Immunodeficiency Syndrome (AIDS) is a chronic, potentially life-threatening condition caused by the Human Immunodeficiency Virus (HIV). By damaging one's immune system, HIV interferes with one's body's ability to fight infection and disease.
- ❖ **Androgynae:** 'Androgyny' comes from the Greek word 'andros' means 'man' and 'gyne' means 'woman'. An androgynous person is, therefore, one who has both masculine and feminine characteristics. Androgyny refers to sex-role flexibility and adaptability.
- ❖ **Androgynous:** An androgynous person is one whose appearance is neither clearly masculine nor clearly feminine and a being of ambiguous sexual identity or one that combines masculine and feminine external manifestations of gender expression and a person with ovaries who also has secondary sex traits commonly found in men.
- ❖ **Androphilia and Gynephilia:** Androphilia describes sexual attraction to men or masculinity and gynephilia describes the sexual attraction to women or femininity.
- ❖ **Androphilic:** The term 'androphilic' describes those persons who are sexually attracted to men or masculinity.
- ❖ **Anti-bullying-policy:** Anti-bullying legislation is a legislation enacted to help reduce and eliminate bullying. The aim of the anti-bullying policy is to ensure that pupils learn in a supportive, caring and safe environment without fear of being bullied.
- ❖ **Anxiety:** Anxiety is a feeling of fear, dread, and uneasiness. It might cause you to sweat, feel restless and tense, and have a rapid heartbeat. It can be a normal reaction to stress.
- ❖ **Asexual:** a sexual orientation that reflects little to no sexual attraction, either within our outside relationships. People who identify as asexual can still experience romantic attraction across the sexuality continuum.
- ❖ **Assigned sex at birth:** When a baby is born, a doctor assigns the baby a sex (male or female) based on its biology (in this case its visible sex organs, although biological sex also includes things like internal sex organs, hormones, and chromosomes). This is what gets written on a person's birth certificate. This is known as baby's assigned sex at birth (Barz & Owen, 2015).

- ❖ **Augmentation Mammoplasty:** Augmentation Mammoplasty is a surgical process (plastic surgery) to enlarge and enhance breasts and to reinstate the shape, size, and volume of the breast disfigured after medical conditions. This is very popular and common among transgender and transsexual female persons.
- ❖ **Badhai:** It is a traditional rituals and occupation of the people of hijra community and in this occupation they give blessings to married couple and new born children and this blessing is called 'badhai'. People believe that hijra people have the power to give blessings.
- ❖ **Baganda:** Baganda is a Bantu ethnic group of people, who are natives of Baganda and Baganda is in Uganda, situated in East Africa.
- ❖ **Bahuchara Mata:** The Bahuchara Mata is a Hindu goddess of chastity and fertility in her Maiden aspect, of the incarnation of the Hinglaj. Like other divinities in Gujarat and Rajasthan, Bahuchara is of Charan origin. Devi Bahuchara was the daughter of Bapaldanji Detha. She is also considered the patroness of the hijra community. Her primary temple is located in Becharaji town in Mehsana district of Gujarat, India.
- ❖ **Bakla:** This word is used to denote those third gender person who live in Philippines (Stief, 2017).
- ❖ **Bangla Awas Yojana:** Banglar Awas Yojana (BAY) is a praiseworthy social welfare drive of the West Bengal State Government and in this yojana, houseless families and individuals living in dilapidated or kutcha houses can now avail houses having at least 25 square meter floor area and clean cooking space.
- ❖ **Basic amenities:** Basic amenities are the things which are considered to be essential to make life easier and more pleasant.
- ❖ **Bigender:** The word 'bigender' denotes those kind of people having two genders; a combination of man, woman, and/or other gender identities.
- ❖ **Binary (Gender):** This is a classification of gender into the two categories of either man or woman based on biological characteristics.
- ❖ **Biological children:** The father and mother whose DNA a child carries are usually called the child's biological parents.
- ❖ **Biologist:** A biologist is a scientist who conducts research in biology. Biologists are interested in studying life on Earth, whether it is an individual cell, a multi cellular organism, or a community of interacting populations.
- ❖ **Biphobia:** Biphobia is aversion toward bisexuality or people who are identified or perceived as being bisexual. Similarly to homophobia, it refers to hatred and prejudice specifically against those identified or perceived as being in the bisexual community.
- ❖ **Bisexual:** The word 'bisexual' is defined as that kind of sexual or romantic attraction in which they feel attraction to members of one's own gender identity as well as to members of other gender identities.

- ❖ **Buffer zone:** A buffer zone is a zonal area that lies between two or more bodies of land, usually pertaining to countries. Depending on the type of buffer zone, it may serve to separate regions or conjoin them.
- ❖ **Bullying:** Bullying is a distinctive pattern of repeatedly and deliberately harming and humiliating others, specifically those who are smaller, weaker, and younger or in any way more vulnerable than the bully. Bullying can involve verbal attacks (name-calling and making fun of others) as well as physical ones, threats of harm, other forms of intimidation, and deliberate exclusion from activities.
- ❖ **Butch:** Traditionally, in lesbian culture, the word 'butch' refers to a woman whose gender expression and traits present as typically 'masculine'. Being butch is about playing with and challenging traditional binary male and female gender roles and expressions.
- ❖ **Castration:** Castration is actually the removal of one's male organs, i.e. penis and gonads and testis. It is one kind of surgery, but it is not to be confused with a modern surgical process like Sex Reassignment Surgery. Generally, most people of the hijra community undergo castration.
- ❖ **Census:** A census is the procedure of systematically acquiring, recording and calculating population information about the members of a given population.
- ❖ **Chela:** Hijra kinship works as a non-binary family network and the continuation of which is based on a non-biological discipleship-lineage system. Within this community, the disciples of Guru Maa are called Chelas.
- ❖ **Child Psychologist:** A child psychologist is a mental health professional who uses psychological evaluations and various forms of therapy to help children and adolescents learn to better cope with life and relationship issues and mental health conditions.
- ❖ **Cisgender:** Those people are called cisgender whose gender identity matches their assigned sex at birth.
- ❖ **Coming Out:** To disclose one's sexual identity or gender identity. It can mean telling others or it can refer an internal process of coming to terms with one's identity.
- ❖ **Community Based Organization:** Community organization or Community Based Organization refers to organization aimed at making desired improvements to a community's social health, well-being, and overall functioning.
- ❖ **Community:** Community means the condition of sharing or having certain attitudes and interests in common.
- ❖ **Counselling:** Counselling is a talking therapy that involves a trained therapist listening to you and helping you find ways to deal with emotional issues.
- ❖ **COVID-19:** Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus. Most people infected with the virus will experience mild to moderate respiratory illness and recover without requiring special treatment. However, some will become seriously ill and require medical attention.

- 
- ❖ **Crisis intervention:** Crisis intervention is a short-term management technique designed to reduce potential permanent damage to an individual affected by a crisis.
  - ❖ **Cross dresser:** Individual who dresses in clothing usually associated with a sex that differs from the one assigned at birth. This is done for a variety of personal reasons. Crossdressing is not indicative of sexual orientation or gender identity. This term replaces the term transvestite.
  - ❖ **Cross Sectional Hormone Therapy:** Cross sex hormone therapy (CSHT) is a strongly desired medical intervention for gender incongruent individuals. The goal is to change secondary sex characteristics to facilitate gender presentation that is consistent with the desired sex (Majumder et al, 2020).
  - ❖ **Curriculum:** In education, a curriculum is broadly defined as the totality of student experiences that occur in the educational process. The term often refers specifically to a planned sequence of instruction, or to a view of the student's experiences in terms of the educator's or school's instructional goals.
  - ❖ **Custom:** Custom is an action or way of behaving that is usual and traditional among the people in a particular group or place.
  - ❖ **CWSN:** Children with Special Needs (CWSN) are children who have a handicap and require special care and assistance. These children's particular needs are determined by the nature of their handicap.
  - ❖ **Daiyar:** The house where the Guru Maa lives alone or lives with her chelas is called 'daiyar'.
  - ❖ **Data:** In the pursuit of knowledge, data is a collection of discrete values that convey information, describing quantity, quality, fact, statistics, other basic units of meaning, or simply sequences of symbols that may be further interpreted.
  - ❖ **Depression:** Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest.
  - ❖ **District Legal Services Authority:** District Legal Services Authority is constituted in every District to implement Legal Aid Programmes and Schemes in the District. The District Judge of the District is its ex-officio Chairman.
  - ❖ **Domestic partnership:** A domestic partnership is a relationship, usually between couples, who live together and share a common domestic life, but are not married.
  - ❖ **Domestic Violence:** Domestic violence (also known as domestic abuse or family violence) is violence or other abuse that occurs in a domestic setting, such as in a marriage or cohabitation. In its broadest sense, domestic violence also involves violence against children, parents, or the elderly. It can assume multiple forms, including physical, verbal, emotional, economic, religious, reproductive, or sexual abuse.
  - ❖ **Drag King:** Drag kings are mostly female performance artists who dress in masculine drag and personify male gender stereotypes as part of an individual or group routine.
  - ❖ **Drag Queen:** A drag queen is a person, usually male, who uses drag clothing and makeup to imitate and often exaggerate female gender signifiers and gender roles for entertainment purposes.
  - ❖ **Dropout:** A dropout is someone who has left school or college before they have finished their studies.

- ❖ **DSM III:** The Diagnostic and Statistical Manual of Mental Disorders, Third Edition (DSM-III) published by the American Psychiatric Association in 1980 and it has probably had on psychiatric thinking as important an impact as the Treatise of Psychiatry of E. Kraepelin at the beginning of the century (Pichot, 1986).
- ❖ **Effeminate men:** This word has been used to refer those males with feminine qualities.
- ❖ **Emasculation:** Emasculation is the removal of both the penis and the testicles, the external male sex organs.
- ❖ **Equality:** Equality is a state of affairs in which all individuals within a specific society have equal rights, liberties, and status, possibly including civil rights, freedom of expression, autonomy, and equal access to certain public goods and social services.
- ❖ **Eunuch:** A eunuch is a male who has been castrated.
- ❖ **Fa'afafine :** Fa'afafine is a term generally used in Samoa for non- binary people. They are generally assigned male sex at birth, but they behave like a female (Bartlett & Vasey, 2006).
- ❖ **Facial Feminization Surgery:** Facial feminization surgery is a set of cosmetic surgical procedures by which male faces are converted to female faces. This process includes brow lift, rhinoplasty, and cheek implantation and lip augmentation.
- ❖ **Female:** A female is an individual of the sex that is typically capable of bearing young or producing eggs and who usually inherits XX chromosome.
- ❖ **FTM:** Female-to-male transgender person, often identifying as a trans man. Someone assigned female at birth who identifies as male or on the male-aligned identity. Also referred to as “transmasc” or “transmasculine.”
- ❖ **Fundamental Rights:** Fundamental rights are the basic human rights enshrined in the Constitution of India which are guaranteed to all citizens. They are applied without discrimination on the basis of race, religion, gender, etc. Significantly, fundamental rights are enforceable by the courts, subject to certain conditions.
- ❖ **Garima Greh:** Garima Greh is a project of the Central Government to provide shelter to transgender persons with basic amenities like food, medical care and recreational facilities. Besides, it will provide support for the capacity-building or skill development of Transgender persons.
- ❖ **Gay:** The word ‘gay’ describes those kinds of males who are emotionally and sexually attracted by another male.
- ❖ **Gender and sexual minority:** Sexual and gender minority is an umbrella term that encompasses populations included in the acronym "LGBTI" (lesbian, gay, bisexual, transgender and intersex), and those whose sexual orientation or gender identity varies.
- ❖ **Gender Binary:** The idea that there are only two genders is sometimes called a “gender binary,” because binary means “having two parts” (male and female).
- ❖ **Gender diversity:** Gender diversity is an umbrella term that is used to describe gender identities that demonstrate a diversity of expression beyond the binary framework.

- ❖ **Gender Dysphoria:** The term “gender dysphoria” was used in the Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-5) and this manual was published by the American Psychiatric Association in 2013. This term was intended to focus on gender identity-related distress that some transgender people may experience (and for which they may seek psychiatric, medical, and surgical treatments) rather than on transgender individuals or identities themselves. The DSM–5 states that “gender non-conformity is not in itself a mental disorder,” rather the diagnosis was created to help people with gender dysphoria get access to appropriate health care and treatment.
- ❖ **Gender expression:** Gender expression is the way in which people communicate or express themselves in front of others (Barz & Owen, 2015).
- ❖ **Gender fluid:** Gender fluid means that a person is flexible in regard to the gender with which they identify. Their gender identity or expression is not fixed and may encompass one gender, multiple genders, or no gender. Their gender identity and expression may also change over time.
- ❖ **Gender Identity:** Gender identity is a person’s intrinsic sense of self as male, female or as an alternate gender (Majumder, 2016). Gender identity is one’s deeply held personal internal sense of being male, female, some of both, or neither. One’s gender identity does not always correspond to biological sex (i.e., a person who is assigned female at birth, identifies as male or a person who is assigned male at birth, identifies as female).
- ❖ **Gender neutral:** The term ‘gender-neutral’ means that something is not associated with either women or men.
- ❖ **Gender Norms:** Gender norm is a Cultural values and beliefs that define how people should dress, act and behave according to the gender assigned to them, inclusive of the expected roles and positions they have in society.
- ❖ **Gender schema:** Gender schema refers to mental structures that organize incoming information according to gender categories and in turn lead people to perceive the world in terms of gender. They also help people to match their behavior with the behavior they believe is appropriate for their own gender.
- ❖ **Gender Spectrum:** The Gender Spectrum” refers to the idea that there are many gender identities (female, male, transgender, two-spirit, etc.). It also acknowledges that there is a range of gender expressions, or ways in which people externally communicate their gender identity to others through behavior, clothing, haircut, voice, and other forms of presentation.
- ❖ **Gender variant:** The people whose gender role, gender expression may vary from time to time and they don’t confirm their gender identity or they can’t are called gender variant (Harrington, 2016).
- ❖ **Gender:** gender is a socially constructed role and in day to day life, everyone practices their gender. Gender is the structure of social relations that centre on the reproductive arena and the set of practices that bring reproductive distinctions between bodies into social processes (Connell, 2009).
- ❖ **Genderless:** Genderless typically refers to people who do not have a gender or do not identify with any specific gender on the spectrum.

- ❖ **Genderqueer:** Genderqueer is a spectrum of gender identities that are not exclusively masculine or feminine—identities that are outside the gender binary.
- ❖ **Girya:** Girya is not from the Hijra community, but is a normal male who is involved in a sexual relationship with a Hijra; sometimes the Giryas have their own family and children (Mithani & Burfat, 2003).
- ❖ **Guru Maa:** Every hijra community (locally called Para or hijra patty) has its own head, which sets the rules and regulations for their members. The head, known as Guru Maa (mother), was the pedestal head of their community.
- ❖ **Gynaecologist:** A gynecologist is a doctor who specializes in female reproductive health. They diagnose and treat issues related to the female reproductive tract. This includes the uterus, fallopian tubes, and ovaries and breasts.
- ❖ **Hak:** It is a very common term among hijra community and they believe that this is their right to collect their hereditary right (vatan) or ‘perquisite’, from the villagers or from their ‘ilaka’ and this kind of hereditary right is termed as ‘hak’ among hijra society (Goel, 2016).
- ❖ **Halloween:** Halloween is also known as All Hallows’ Eve or All Saints’ Eve. It is observed in many countries on 31<sup>st</sup> October. It is actually Western Christian festival. This festival is held to remember all the dead persons, including saints, martyrs and all the faithful persons, who are dead in different times.
- ❖ **Hard-to-reach group:** Hard to reach or seldom heard groups are defined as people that are typically under-represented in the planning or development process, or in wider public life.
- ❖ **Health Insurance:** Health insurance is a type of insurance that covers medical expenses that arise due to an illness. These expenses could be related to hospitalization costs, cost of medicines or doctor consultation fees.
- ❖ **Hermaphrodites:** Those people, who are neither clearly male nor female, are called ‘hermaphrodite’ in the past. In the case of human beings, there are two types of hermaphrodite, true hermaphrodite and pseudo hermaphrodite.
- ❖ **Heterosexual:** A person, who is sexually or romantically attracted exclusively to people of the other sex, is called heterosexual.
- ❖ **Hijra:** Hijra is a socio-cultural group of India. They fall in the category of third gender according to an order of the Supreme Court issued on 15th April, 2014 (*National Legal Ser.Auth vs Union Of India & Others*, 2014). Actually hijras are a clearly defined secluded community under active guidance from their gurus and the gurus enjoy enormous power in their everyday life and over every aspect in their life.
- ❖ **HIV:** HIV (Human Immunodeficiency Virus) is a virus that attacks the body's immune system. If HIV is not treated, it can lead to AIDS (acquired immunodeficiency syndrome). There is currently no effective cure. Once people get HIV, they have it for life.
- ❖ **Homophobia:** Homophobia encompasses a range of negative attitudes and feelings toward homosexuality or people who are identified or perceived as being lesbian, gay or bisexual.



- ❖ **Homosexual:** A person who is sexually or romantically attracted to people of their same sex, are called homosexual. Homosexual people are of two types, lesbian and gay.
- ❖ **Hormone Replacement Therapy (HRT):** The process by which trans individuals choose to take a prescription of artificial hormones in order to physically/medically affirm their gender is called Hormone Replacement Therapy or HRT. For trans women, that may include estrogen as well as testosterone-blockers and for trans men, testosterone, or T.
- ❖ **Human Rights:** are agreed international standards that recognize and protect the dignity and integrity of every individual, without distinction.
- ❖ **Hysterectomy:** Hysterectomy is the procedure for complete or partial removal of uterus, cervix, ovaries and fallopian tubes and other surrounding structures (Mayrhofer et al., 2021).
- ❖ **Ilaka:** It is a territorial boundary assigned to the Guru Maa whose chelas have earned the right to visit these places for the purpose of *tol* badhai and begging on their regular beats. These areas are marked and divided between the nayaks (head of the gharana) and discussed and revised by the senior gurus in their monthly meetings (Goel, 2016).
- ❖ **Inclusive development:** Inclusive development is the concept that every person, regardless of their identity, is instrumental in transforming their societies. Development processes that are inclusive yield better outcomes for the communities that embark upon them.
- ❖ **Inclusive education:** Inclusive education means all children in the same classrooms, in the same schools. It means real learning opportunities for groups who have traditionally been excluded.
- ❖ **Inclusiveness:** Inclusiveness is the quality of including many different types of people and treating them all fairly and equally.
- ❖ **Inequality:** Inequality refers to the phenomenon of unequal and/or unjust distribution of resources and opportunities among members of a given society. The term inequality may mean different things to different people and in different contexts.
- ❖ **Internal and external genitalia:** The genitalia encompasses external and internal structures. The scrotum and penis are the male external genitalia and internal organs include the vas deferens, prostate and urethra. The labia minora, labia majora (vulva) and the clitoris comprise the female external genitalia. The Fallopian tubes, ovaries, cervix, uterus, and vagina are the female internal genitalia.
- ❖ **Intersex:** Intersex is a general term used for a variety of conditions in which a person is born with a reproductive or sexual anatomy that doesn't seem to fit the typical definitions of female or male. For example, a person might be born appearing to be female on the outside, but having mostly male-typical anatomy on the inside. Or a person may be born with genitals that seem to be in-between the usual male and female types.
- ❖ **Intravaginal ring:** The intra vaginal ring is a flexible vaginal ring made of silicone that slowly releases an antiretroviral medication (ARV) called dapivirine over the course of one month to reduce the risk of HIV infection.

- 
- ❖ **Izzat:** The word 'izzat' means honour and it is created and manifested within the Hijra community (Goel, 2016) and each and every chelas and nati chelas give izzat to their Guru Maa and they always obey their Guru Maa and give izzat to her and it is a ritual among hijra community.
  - ❖ **Kabuki:** Kabuki is a Japanese traditional theatre form and it originated in the Edo period at the beginning of the Seventeenth Century. Generally it is popular in urban areas and both men and women participate in this drama. But mainly male actors perform in the plays. But when male actors perform the role of a woman, they are called Onnagata. The other two types of actors are aragoto (rough style) and wagoto (soft style) (ich.unesco.org).
  - ❖ **Kathoey:** This word is used to denote those third gender person who live in Thailand (Stief, 2017).
  - ❖ **Khwaja Sara:** Khwaja Sara is the term for the 'third gender' community in Pakistan (Khan, 2016).
  - ❖ **Kothi:** Those males who are fond of wearing female clothes and accessories and behave like a female, but don't want to change their sex with the help of Sex Reassignment Surgery are called Kothi.
  - ❖ **Kwayama:** Kwayama is a tribe of Angolan Bantus. They are not only cultivators and herders, but they are diviners and healers of illness also. They mainly wear women's clothes and do women's work and marry a man.
  - ❖ **Lesbian:** The word 'lesbian' denotes to those women who are sexually or romantically attracted exclusively to other women.
  - ❖ **Literature review:** A literature review is an overview of the previously published works on a topic. The term can refer to a full scholarly paper or a section of a scholarly work such as a book, or an article.
  - ❖ **Livelihood:** A person's livelihood refers to their "means of securing the basic necessities (food, water, shelter and clothing) of life". Livelihood is defined as a set of activities essential to everyday life that are conducted over one's life span.
  - ❖ **Lok Adatat:** NALSA along with other Legal Services Institutions conducts Lok Adalats. Lok Adalat is one of the alternative dispute redressal mechanisms, it is a forum where disputes/cases pending in the court of law or at pre-litigation stage are settled/ compromised amicably. Lok Adalats have been given statutory status under the Legal Services Authorities Act, 1987.
  - ❖ **Lok Sabha and Rajya Sabha:** The Lok Sabha, constitutionally the House of the People, is the lower house of India's bicameral Parliament, with the upper house being the Rajya Sabha.
  - ❖ **Male:** A male person is an individual of the sex that is typically capable of producing small, usually motile gametes (such as sperm or spermatozoa) which fertilize the eggs of a female and a man's genome usually inherits an X chromosome from the mother and a Y chromosome from the father.
  - ❖ **Mardi Gras:** Mardi Gras a special festival of New Orleans, Louisiana, in U.S... This is a festival of the practice of eating of rich food in last night before the fasting of the Lenten season. Lent is the religious observations in the Christian observations.
  - ❖ **Mastectomy:** It is breast removal surgery for female to male transsexual persons.

- ❖ **Mental health:** Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community.
- ❖ **Metoidioplasty:** It is a process for the creation of male genitalia and in this process, testosterone replacement therapy gradually increases clitoris.
- ❖ **MGNREGA:** The Mahatma Gandhi National Rural Employment Guarantee Act 2005 or MNREGA, earlier known as the National Rural Employment Guarantee Act or NREGA, is an Indian labour law and social security measure that aims to guarantee the 'right to work'.
- ❖ **Molestation:** The crime of sexual acts, including touching of private parts, exposure of genitalia, taking of pornographic pictures, rape, inducement of sexual acts etc.
- ❖ **MSM:** An abbreviation for men who have sex with men. This term emphasizes the behavior, rather than the identities of the individuals involved.
- ❖ **MtF:** This term 'MtF' denotes those persons who are Male-to-female transgender person and often identify themselves as a trans woman. Someone assigned male at birth who identifies as female or a female-aligned identity, also referred to as "trans feminine."
- ❖ **Mummer's Festival:** The Mummer's Festival is a participant- driven, non-profit, folk based festival which is celebrated in Newfoundland and Labrador's as a Christmas tradition and it is one of the most popular festivals in America. Mumming is the art of disguise and in this festival; everyone should hide their own identity. Mummer's parade is also a very important part of this festival. In 2020, virtually held this festival ([mummersfestival.ca](http://mummersfestival.ca)).
- ❖ **Muxe:** Muxe people are those who are assigned male sex at birth, but behave and dress like a female in Southern Mexico (Mirandé, 2016).
- ❖ **Mythology:** A mythology is a collection of myths or stories about a specific person, culture, religion, or any group with shared beliefs.
- ❖ **NALSA:** The full form of NALSA is National Legal Services Authority of India and its purpose is to provide free legal services to eligible candidates, and to organize Lok Adalats for speedy resolution of cases.
- ❖ **Neighbour:** A person who is living next door to or very near to the speaker or person is referred to as neighbor.
- ❖ **NGO:** Non-governmental organization (NGO), voluntary group of individuals or organizations, is usually not affiliated with any government that is formed to provide services or to advocate a public policy.
- ❖ **Nirmal Bangla:** Nirmal Bangla is a mission to eliminate open defecation from the rural landscape of the state. It is the state counterpart of the national Nirmal Bharat Abhiyan. The mission aims at constructing latrines in households, especially in the uncovered households in the rural areas to ensure zero defecation in the open. This scheme will ensure a sufficient number of functional toilets in educational institutions, regular intervals on the road, public places, etc.

- ❖ **Nirvana:** The central part of a hijra's life is the castration, or more appropriately emasculation surgery. This emasculation process is called 'Nirvan' and that has been viewed as a rebirth for these hijras.
- ❖ **Noh Drama:** Noh Drama is a very popular Japanese classical dance drama which was developed by Kan'ami and his son Zeami and is still performed regularly in.
- ❖ **Non-binary:** The word "non-binary" denotes to a gender identity that does not conform to traditional binary beliefs about gender, which indicate that all individuals are exclusively either male or female.
- ❖ **Ohafia:** Ohafia is a town of Ohafia Local Government Area in Abia State, Nigeria. It is an Igbo speaking region. Igbo is a native language of some parts of Nigeria and this Ohafia area falls in the south-eastern part of the Anambra basin (Eke & Igboekwe, 2011).
- ❖ **Orchiectomy:** Orchiectomy is a surgical procedure to remove both testicles from a male bodied person.
- ❖ **Ovotestis:** An ovotestis is a gonad with both testicular and ovarian aspects. When ovary and testis form together in one organ and single or both gonads contain both the tissues, then it is called ovotestis. In humans, ovotestes are an infrequent anatomical variation associated with gonadal dysgenesis.
- ❖ **Pangender:** This term denotes to those people who exhibit the characteristics of multiple genders and deliberately are refuting the concept of only two genders.
- ❖ **Pansexual:** The term 'pansexual' describes or indicates those kinds of people who are emotionally or sexually attracted by any kind of gender and sex (Rice, 2015).
- ❖ **Paradigm Shift:** A paradigm shift is defined as "an important change that happens when the usual way of thinking about or doing something is replaced by a new and different way."
- ❖ **Penectomy:** Penectomy is the surgical procedure to remove all or part of the penis. This procedure is mainly used as treatment against penile cancer. Penile cancer is a collection of malignant, or cancerous, cells either inside or on the surface tissue of the penis.
- ❖ **PEP:** PEP (post-exposure prophylaxis) means taking medicine to prevent HIV after a possible exposure. PEP should be used only in emergency situations and must be started within 72 hours after a recent possible exposure to HIV.
- ❖ **Petitioner:** A petitioner is a person who pleads with governmental institution for a legal remedy or a redress of grievances, through use of a petition.
- ❖ **Phalloplasty:** Phalloplasty is the construction or reconstruction of penis and it is a very important surgical procedure among female to male transsexual persons.
- ❖ **Polyamorous:** This word is used for the state or practice of having more than one romantic relationship during a period of time, or referring to someone open to having multiple partners, while not currently in multiple romantic relationships.
- ❖ **Polyamory:** The practice of having more than one open concurrent romantic relationship at a time, with the consent of all partners involved.

- 
- ❖ **Polygender:** When multiple gender identities or gender expressions are seen within the same person, those persons are called by different names such as polygender, mixed gender or multigender (Harrington, 2016).
  - ❖ **PrEP:** PrEP (pre-exposure prophylaxis) is medicine that reduces the chances of getting HIV from sex or injection drug use. When taken as prescribed, PrEP is highly effective for preventing HIV.
  - ❖ **Prisoner:** A person deprived of liberty and kept under involuntary restraint, confinement, or custody.
  - ❖ **Prostitution:** Prostitution involves engaging, agreeing, or offering to engage in sexual conduct with another person in return for a fee.
  - ❖ **Psychiatrist:** A psychiatrist is a physician who specializes in psychiatry, the branch of medicine devoted to the diagnosis, prevention, study, and treatment of mental disorders.
  - ❖ **Queer:** Queer people are those who don't want to put themselves in any type of box or category; in other words they don't want to categorize themselves at all.
  - ❖ **Questioning:** This term refers to those individuals who are in the process of examining their sexual orientation and/or gender identity.
  - ❖ **Rehabilitation:** Rehabilitation is care that can help someone to get back, keep, or improve abilities that you need for daily life. These abilities may be physical, mental, and/or cognitive (thinking and learning).
  - ❖ **Research gap:** A research gap is a question or a problem that has not been answered by any of the existing studies or research within your field.
  - ❖ **Research Methodology:** Research methodology is a way of explaining how a researcher intends to carry out their research. It's a logical, systematic plan to resolve a research problem. A methodology details a researcher's approach to the research to ensure reliable, valid results that address their aims and objectives.
  - ❖ **Residential areas:** A residential area is a land used in which housing predominates, as opposed to industrial and commercial areas.
  - ❖ **Respondents:** The term 'respondents' denotes the number of people who answered a survey.
  - ❖ **Respondents:** The number of people who answered a survey is termed as respondents.
  - ❖ **Restroom:** It is a room or suite of rooms in a public space providing toilets and lavatories.
  - ❖ **Rhinoplasty:** Rhinoplasty is a surgical procedure designed to change the shape of the nose (Dempf & Eckert, 2010).
  - ❖ **Ridicule:** The word 'ridicule' means unkind words or actions that make someone or something look stupid.
  - ❖ **RTE Act:** The Right of Children to Free and Compulsory Education Act or Right to Education Act (RTE) is an Act of the Parliament of India enacted on 4 August 2009, which describes the modalities of the importance of free and compulsory education for children between the age of 6 to 14 years in India under Article 21A of the Indian Constitution.

- ❖ **Scrotoplasty:** Scrotoplasty is the process to repair or construct the scrotum (Selvaggi et al., 2009). It is also a sex reassignment surgical procedure for female to male transgender persons.
- ❖ **Secondary data:** Secondary data refers to the data that is collected by someone other than the primary user and is published also in different books and journals. Common sources of secondary data for social science include censuses, information collected by government departments, organizational records and data that was originally collected for other research purposes.
- ❖ **Sedatives:** A sedative or tranquilliser is a substance that induces sedation by reducing irritability or excitement. They are CNS depressants and interact with brain activity causing its deceleration. Various kinds of sedatives can be distinguished, but the majority of them affect the neurotransmitter gamma-aminobutyric acid.
- ❖ **Self-employment:** Self-employment is the state of working for oneself rather than an employer.
- ❖ **Sensitization:** Sensitization literally means making people 'sensitive' about an issue. This is the core of awareness raising and is what you ideally want to achieve – that people become aware and react to certain issues.
- ❖ **Serosurveillance:** Serosurveillance is the testing of blood samples for the presence of antibodies against a particular disease, due to past infection or vaccination, in the general population. It gives public health policy makers the information they need to make better and more cost-effective decisions.
- ❖ **Sex Reassignment Surgery:** The procedures that some trans individuals might undergo so their external bodies can better reflect their internal gender identities. Other names include “Gender Affirmation Surgery” and “gender confirmation surgery.” These procedures may be called “top surgery” (e.g. reshaping a chest or providing breast augmentation) and “bottom surgery” (e.g. reshaping genitals). Surgery is not required for someone to claim a certain identity, but is considered of essential, gender-affirming healthcare for those who seek it.
- ❖ **Sex:** One’s sex depends on their biological organs, specially the genital parts, formation of the chromosomes, activities of the hormones, etc. “Sex” refers to the biological and physiological characteristics that define men and women (Barz & Owen, 2015).
- ❖ **Sexual Assault:** The term sexual assault refers to sexual contact or behavior that occurs without explicit consent of the victim.
- ❖ **Sexual health:** Sexual health is a field of research, healthcare, and social activism that explores the health of an individual's reproductive system and sexual wellbeing during all stages of their life.
- ❖ **Sexual identity:** Sexual identity is how one thinks of oneself in terms of to whom one is romantically and/or sexually attracted.
- ❖ **Sexual minority:** A sexual minority is a group whose sexual identity, orientation or practices differ from the majority of the surrounding society. Primarily used to refer to lesbian, gay, bisexual, or non-heterosexual individuals, it can also refer to transgender, non-binary or intersex individuals.

- ❖ **Sexual Orientation:** When a child gets older, they feel some physical, mental, emotional, spiritual attraction towards other people and this kind of attraction is called sexual orientation (Barz & Owen, 2015).
- ❖ **Sexuality:** Sexuality is the way people experience and express themselves sexually. This involves biological, psychological, physical, erotic, emotional, social, or spiritual feelings and behaviors.
- ❖ **Sexually perverse:** It refers to those persons who do any sexual practice that is regarded by a community or culture as an abnormal means of achieving orgasm or sexual arousal.
- ❖ **Shelter home:** A shelter home is a place to take refuge or a temporary arrangement if someone is in urgent need or emergency.
- ❖ **Social exclusion:** Social exclusion describes a state in which individuals are unable to participate fully in economic, social, political and cultural life, as well as the process leading to and sustaining such a state.
- ❖ **Social hierarchy:** Social hierarchies are broadly defined as systems of social organization in which some individuals enjoy a higher social status than others.
- ❖ **Social stigma:** Social stigma is the disapproval of, or discrimination against, an individual or group based on perceived characteristics that serve to distinguish them from other members of a society.
- ❖ **Socially and Economically Backward Class:** Socially and Economically Backward Classes refers to a category of people in India who are socially and economically disadvantaged and therefore eligible for certain benefits and privileges, such as reservations in education and government jobs.
- ❖ **Spatial location:** Spatial location describes where a registry object (such as a collection) is physically located; using geospatial coordinates such as latitude and longitude.
- ❖ **Speech therapist:** A speech therapist — also called a speech-language pathologist — assesses, diagnoses and treats speech disorders and communication problems.
- ❖ **Standard of Care:** Treatment that is accepted by medical experts as a proper treatment for a certain type of disease and that is widely used by healthcare professionals is called Standard of Care.
- ❖ **Stigmatization:** It is an act of treating someone or something unfairly by publicly disapproving of them.
- ❖ **Suicidal tendency:** Suicidal tendency is the propensity for a person to have suicidal ideation or to make suicide attempts.
- ❖ **Suicide:** Suicide is the act of intentionally causing one's own death.
- ❖ **Survey:** A survey is the process of collecting, analysing and interpreting data from many individuals. It aims to determine insights about a group of people. A survey goes much deeper than a questionnaire and often involves more than one form of data collection.
- ❖ **Syllabus:** A syllabus or specification is a document that communicates information about an academic course or class and defines expectations and responsibilities. It is generally an overview or summary of the curriculum.

- ❖ **Target group:** The target group is the group of individuals that the intervention intends to conduct research in and draw conclusions from.
- ❖ **Teenager:** A person aged between 13 and 19 years.
- ❖ **The NAZ Foundation:** The Naz Foundation (India) Trust is a non-governmental organisation (NGO) in that country that works on HIV/AIDS and sexual health. It is a Delhi-based organization that has been at the forefront of the battle against Section 377 of the Indian Penal Code that discriminates against individuals based on their sexual orientation.
- ❖ **Third Gender:** According to NALSA judgment, hijra, eunuchs, apart from binary gender, are treated as third gender for the purpose of safeguarding their rights under Part III of the Indian Constitution and the laws made by the Parliament and the State Legislature (*National Legal Ser.Auth vs Union Of India & Others*, 2014).
- ❖ **Thyrochondroplasty:** It is a surgical procedure by which thyroid cartilage is reduced by surgery and it is a very common and important surgery among male to female Gender Affirmation Surgeries or GAS (Lipschitz et al., 2017).
- ❖ **Togo:** Togo is situated near the border of Benin and its total area is 56,785 sq. km. and the nature of population in this region is mostly rural.
- ❖ **Trans-friendly:** It means the environment that welcomes the transgender people.
- ❖ **Transgender:** Those people whose gender identity does not match their assigned sex at birth are called transgender (Barz & Owen, 2015).
- ❖ **Transgenderism:** Transgenderism is an umbrella term which is used for those whose gender identity or gender expression differs from what is usual for the sex assigned at birth (Fisher & Gooren, 2019).
- ❖ **Transition:** This is an individualized process by which transgender people move from living as one gender to living as another gender. There are three general aspects to transitioning: social (e.g. name, pronouns), medical (e.g. hormones, surgery), and legal (e.g. gender marker and name change). Each path through transition is unique to the individual, and some may choose not to transition socially, medically, and/or legally due to access barriers or other personal reasons.
- ❖ **Transphobia:** Fear of, hatred of, or discomfort with people who are transgender or otherwise gender non-normative.
- ❖ **Transsexual:** A transgender person, especially one whose bodily characteristics have been altered through surgery or hormone treatment to bring them into alignment with their gender identity is called transsexual.
- ❖ **Transsexualism:** Transsexualism describes the condition when a person's psychological gender differs from his or her biological sex. People with gender identity disorder suffer persistently from this incongruence and they search hormonal and surgical sex reassignment to the desired anatomical sex.
- ❖ **Transvestite:** Transvestites are those persons who prefer to dress like their opposite sex. It doesn't mean that they want to change their body with the help of any surgery. They just prefer to dress like their opposite sex (Weiss, 2008).



- ❖ **Tridhara:** The 'Tridhara' is a kind of public toilets which have been installed at 'Pay & Use' toilet and are blocked for transgender community in Kolkata.
- ❖ **Trigender:** When a person experiences three types of gender identity at once, that person is called trigender (Harrington, 2016).
- ❖ **Two-Spirit:** The term 'two-spirit' is also an umbrella term which includes those types who are generally gender variant people and many two-spirit individuals have seen themselves as having both male and female spirits within them and their gender expressions also vary from time to time (Harrington, 2016).
- ❖ **Untouchability:** Untouchability is a form of social institution that legitimises and enforces practices that are discriminatory, humiliating, exclusionary and exploitative against people belonging to certain social groups.
- ❖ **Urbanization:** Urbanization refers to the population shift from rural to urban areas, the corresponding decrease in the proportion of people living in rural areas, and the ways in which societies adapt to this change.
- ❖ **Vaccination:** The act of introducing a vaccine into the body to produce protection from a specific disease.
- ❖ **Vaginectomy:** It is a process for the removal of vagina for those transgender male people who want to go through SRS (Ergeneli et al., 1999).
- ❖ **Vaginoplasty:** It is a most important surgical procedure by which vagina is constructed. It is a surgical procedure of male to female sex reassignment surgery.
- ❖ **Vicious Circle of Poverty:** The vicious circle of poverty moves in a cyclic order that states that low-income levels lead to low-income investment and savings. Therefore, there will be a low rate of investment, leading to a decrease in the productivity rate that will again lead to low income.
- ❖ **Vocational training:** Vocational training focuses on developing technical skills for a specific job or trade. It offers someone practical knowledge in contrast to theoretical knowledge offered by the conventional formal education system.
- ❖ **Vodun ceremony:** Vodun ceremony is generally practiced in Africa. It is a traditional religion of Africa. It is described as the "folk religion of Haiti". This ritual is famous among Haitians and it is a belief that all Haitians have to practice Vodou.
- ❖ **Waria:** This word is used to denote those third gender person who live in Indonesia (Stief, 2017).
- ❖ **West Bengal Transgender Persons Development Board:** According to the verdict of National Legal Services Authority v. Union of India in 2014, West Bengal was one of the first few states to set up the Transgender Development Board. This Board, which was set up on 18th March, 2015, under the guidance of Minister for Women and Child Development, Shashi Panja, was to function as a nodal agency for coordinating all policy decisions and development work pertaining to the transgender population in West Bengal. Now the name of this board is West Bengal Transgender Persons Development Board.

- ❖ **Workplace:** A workplace or place of employment is a location where people perform tasks, jobs and projects for their employer in return for a salary.
- ❖ **WPATH:** The World Professional Association for Transgender Health (WPATH), formerly the Harry Benjamin International Gender Dysphoria Association (HBIGDA), is a professional organization devoted to the understanding and treatment of gender identity and gender dysphoria, and creating standardized treatment for transgender and gender variant people. WPATH was founded in September 1979 by endocrinologist and sexologist Harry Benjamin, with the goal of creating an international community of professionals specializing in treating gender variance.

# **Bibliography**

## BIBLIOGRAPHY

- Abbott, E. (2001). *A History of Celibacy*. Lutterworth Press.
- Ahmed, U., Yasin, G., & Umair, A. (2014). Factors affecting the social exclusion of eunuchs (Hijras) in Pakistan. *Mediterranean Journal of Social Sciences*, 5(23), 2277–2284. <https://doi.org/10.5901/mjss.2014.v5n23p2277>
- Atri Kar Versus The Union of India & Ors., (2017). <https://translaw.clpr.org.in/wp-content/uploads/2018/09/Atri-Kar.pdf>
- Atri Kar vs Union Public Service Commission, (2018).
- Azad, S. A. K., & Nayak, P. K. (2016). Health Care Barriers Faced by LGBT People in India: An Investigative Study. *Research Innovator: International Multidisciplinary Peer-Reviewed Journal*, 3(5), 77–82.
- Bandyopadhyay, M., & Pandey, J. M. (2017). *A Gift of Goddess Lakshmi*. Random House Publishers India Pvt. Limited.
- Bandyopadhyay, S., Pathak, C. R., & Dentinho, T. P. (2020). *Urbanization and regional sustainability in South Asia : socio-economic drivers, environmental pressures and policy responses*.
- Bangla Awas Yojana, Housing and West Bengal Housing Board Department (2016). <https://www.wbgov.org/bangla-awas-yojana/>
- Bartlett, N. H., & Vasey, P. L. (2006). A retrospective study of childhood gender-atypical behavior in Samoan fa'afafine. *Archives of Sexual Behavior*, 35(6), 659–666. <https://doi.org/10.1007/s10508-006-9055-1>
- Barz, E., & Owen, L. (2015). *Our Trans Loved Ones: Questions and Answers for Parents, Families and Friends of People Who Are Transgender and Gender Expansive* (E. Kohm, L. Owen, & A. Diego M. Sanchez (Eds.)). PFLAG.
- Becker, I., Ravens-Sieberer, U., Ottová-Jordan, V., & Schulte-Markwort, M. (2017). Prevalence of Adolescent Gender Experiences and Gender Expression in Germany. *Journal of Adolescent Health*, 61(1), 83–90. <https://doi.org/10.1016/j.jadohealth.2017.02.001>
- Beemyn, B. (Ed.). (2013). *Creating a Place For Ourselves Lesbian, Gay, and Bisexual Community Histories*. Taylor & Francis.
- Beemyn, B., & Eliason, M. (Eds.). (1996). *Queer Studies A Lesbian, Gay, Bisexual, and Transgender Anthology*. NYU Press.
- Bhalla, P. P. (2007). *Hindu Gods & Goddesses*. Pustak Mahal.
- Bhattacharya, B. (2023, March 13). Somolingo-Bibaher Birodhita Kendrer. *Aajkal Patrika*, 8.

- Bhattacharya, S., Ghosh, D., & Purkayastha, B. (2022). 'Transgender Persons (Protection of Rights) Act' of India: An Analysis of Substantive Access to Rights of a Transgender Community. *Journal of Human Rights Practice*, 14(2), 676–697. <https://doi.org/10.1093/jhuman/huac004>
- Bhattecharjee, S. S. (n.d.). *Mahabharater Charitaboli*. Ananda Publishers Private Limited.
- Bhuniya, D., & Bandopadhyay, T. (2017, July 17). Haspatale Jaiga Nei Tritiyo Linger. *Anandabazar Patrika*, 10.
- Biswas, S. (2017, September). Badha Periy e Bar Shopno Puroner Pathe. *Anandabazar Patrika*, 13.
- Blechner, M. J. (2015). Bigenderism and Bisexuality. *Contemporary Psychoanalysis*, 51(3), 503–522. <https://doi.org/https://doi.org/10.1080/00107530.2015.1060406>
- Boas, S. R., Ascha, M., Morrison, S. D., Massie, J. P., Nolan, I. T., Shen, J. K., Vyas, K. S., & Satterwhite, T. (2019). Outcomes and Predictors of Revision Labiaplasty and Clitoroplasty after Gender-Affirming Genital Surgery. *Plastic and Reconstructive Surgery*, 144(6), 1451–1461. <https://doi.org/10.1097/PRS.0000000000006282>
- Bockrath, J. T. (2003). Bhartia Hijro Ka Dharma: The Code of India's Hijra. *Legal Studies Forum*, 27(1), 83–96. [http://heinonline.org/hol/cgi-bin/get\\_pdf.cgi?handle=hein.journals/lstf27&section=8](http://heinonline.org/hol/cgi-bin/get_pdf.cgi?handle=hein.journals/lstf27&section=8)
- Bogaert, A. F. (2015). Asexuality: What it is and why it matters. *Journal of Sex Research*, 52(4), 362–379. <https://doi.org/10.1080/00224499.2015.1015713>
- Bojesen, A., & Gravholt, C. (2007). Klinefelter syndrome in clinical practice. *Nature Clinical Practice Urology* Volume, 4(4), 192–204. <https://doi.org/https://doi.org/10.1038/ncpuro0775>
- Brien, J. O. (Ed.). (2008). *Encyclopedia of Gender and Society*. SAGE.
- Burkert, W. (1985). *Greek Religion*. Harvard University Press.
- Camerar Chokhe. (2017, September 17). *Anandabazar Patrika*, 5.
- Cauldwell, D. O. (2006). Psychopathia Transexualis. In S. and S. W. Stryker (Ed.), *The Transgender Studies Reader* (pp. 40–44). Routledge.
- Census of India. (2011). *PCA OTH: Primary Census Abstract Data for Others, India & States/UTs*. Office of the Registrar General & Census Commissioner, India. <https://censusindia.gov.in/census.website/data/census-tables>
- Chakraborty, S. (2017, October 4). Rupantarkamider Jonno Dar Mukto Jubo CPM e. *Anandabazar Patrika*, 3.
- Chatterjee, D. A. K., Chakrabarti, D. C., & Ghosh, D. S. N. (2012). *Modern Approach to A Text Book of Zoology* (Fourteenth). Nirmala Library.
- Chintadharay Bodol, Sobai k Kore Apon. (2019, June 29). *Anandabazar Patrika*.

- Chottopadhyay, R. (2019, March 25). Hatekolome Votjontrer Proshikhon Brihannalader. *Anandabazar Patrika*, 6.
- Cohen, W. A., Sangalang, A. M., Dalena, M. M., Ayyala, H. S., & Keith, J. D. (2019). Navigating Insurance Policies in the United States for Gender-affirming Surgery. *Plastic and Reconstructive Surgery - Global Open*, 7(12), E2564. <https://doi.org/10.1097/GOX.0000000000002564>
- Connell, R. (2009). *Short Introductions GENDER* (Second Edi). Polity Press.
- Conner, R. P., & Sparks, D. (2013a). *Queering Creole Spiritual Traditions – Lesbian, Gay, Bisexual, and Transgender Participation in African – Inspired Traditions In The Americas*. Routledge.
- Conner, R. P., & Sparks, D. H. (2013b). *Queering Creole Spiritual Traditions – Lesbian, Gay, Bisexual, and Transgender Participation in African – Inspired Traditions In The Americas*. Routledge.
- Conner, R. P., Sparks, D. H., & Sparks, M. (1997). *Cassell's Encyclopedia of Queer Myth, Symbol and Spirit: Gay, Lesbian, Bisexual and Transgender Lore (Cassell Sexual Politics Series)*. Cassell.
- Cose, S. (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *American Psychologist*, 67(1), 10–42. <https://doi.org/10.1037/a0024659>
- Craig, T., & Lacroix, J. (2011). Tomboy as protective identity. *Journal of Lesbian Studies*, 15(4), 450–465. <https://doi.org/10.1080/10894160.2011.532030>
- Criminal Tribes Act, (1871). [https://www.indiacode.nic.in/repealed-act/repealed\\_act\\_documents/A1871-27.pdf](https://www.indiacode.nic.in/repealed-act/repealed_act_documents/A1871-27.pdf)
- Cronn-Mills, K. (2015a). *Transgender Lives: Complex Stories, Complex Voices*. Twenty-First Century Books.
- Cronn-Mills, K. (2015b). *Transgender Lives: Complex Stories Complex Voices*. Twenty-First Century Books.
- Dalal, R. (2014). *Hinduism : An Alphabetical Guide*. Penguin Books India.
- Das, R. (2015). Representation and categorization: Understanding the Hijra1 and transgender identities through personal narratives. *Rupkatha Journal on Interdisciplinary Studies in Humanities*, 7(3), 196–205.
- de Oliveira, R. M. R., Verreschi, I. T. do N. V., Lipay, M. V. N., Eça, L. P., Guedes, A. D., & Bianco, B. (2009). Y chromosome in turner syndrome: Review of the literature. *Sao Paulo Medical Journal*, 127(6), 373–378. <https://doi.org/10.1590/s1516-31802009000600010>
- Delhi Metroi. (2021, September 1). *Aajkal Patrika*, 5.
- Dempf, R., & Eckert, A. W. (2010). Contouring the forehead and rhinoplasty in the feminization of the face in male-to-female transsexuals. *Journal of Cranio-Maxillofacial Surgery*, 38(6), 416–422. <https://doi.org/10.1016/j.jcems.2009.11.003>

- Denny, D. (Ed.). (2013). *Current Concepts in Transgender Identity*. Taylor & Francis.
- Department of Women & Child Development and Social Welfare, G. of W. B. (n.d.). *West Bengal Transgender Development Board*.
- Deschamps-Braly, J. C., Sacher, C. L., Fick, J., & Ousterhout, D. K. (2017). First Female-to-Male Facial Confirmation Surgery with Description of a New Procedure for Masculinization of the Thyroid Cartilage (Adam's Apple). *Plastic and Reconstructive Surgery*, 139(4), 883e-887e. <https://doi.org/10.1097/PRS.00000000000003185>
- Dhejne, C., Van Vlerken, R., Heylens, G., & Arcelus, J. (2016). Mental health and gender dysphoria: A review of the literature. *International Review of Psychiatry*, 28(1), 44–57. <https://doi.org/10.3109/09540261.2015.1115753>
- Dolezal, C., Frasca, T., Giguere, R., Ibitoye, M., Cranston, R. D., Febo, I., Mayer, K. H., McGowan, I., & Carballo-Diéguez, A. (2015). Awareness of post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) is low but interest is high among men engaging in condomless anal sex with men in Boston, Pittsburgh, and San Juan. *AIDS Education and Prevention*, 27(4), 289–297. <https://doi.org/10.1521/aeap.2015.27.4.289>
- Doniger, W. (1999). *Splitting the Difference - Gender and Myth in Ancient Greece and India*. The University of Chicago Press.
- Drets, M. E., & Shaw, M. W. (1971). Specific banding patterns of human chromosomes. *Proceedings of the National Academy of Sciences of the United States of America*, 68(9), 2073–2077. <https://doi.org/10.1073/pnas.68.9.2073>
- Ekins, R., & King, D. (2005). *Virginia Prince Pioneer of Transgendering* (D. King & R. Ekins (Eds.)). Taylor & Francis.
- El-Shamy, H. (2005). Hermaphroditism. In J. Garry (Ed.), *Archetypes and Motifs in Folklore and Literature: A Handbook* (1st ed., pp. 57–63). Routledge. <https://doi.org/10.4324/9781315097121>
- Ellis, A. L., & Riggle, E. D. (2014). *Sexual Identity on the Job Issues and Services*. Taylor & Francis.
- Ergeneli, M. H., Duran, E. H., Özcan, G., & Erdogan, M. (1999). Vaginectomy and laparoscopically assisted vaginal hysterectomy as adjunctive surgery for female-to-male transsexual reassignment: Preliminary report. *European Journal of Obstetrics and Gynecology and Reproductive Biology*, 87(1), 35–37. [https://doi.org/10.1016/S0301-2115\(99\)00091-3](https://doi.org/10.1016/S0301-2115(99)00091-3)
- Fausto-Sterling, A. (1993). The Five Sexes Why Male and Female Are Not Enough. *The Sciences*, 20–24.
- Fausto-Sterling, A. (2004). The Five Sexes: Why Male and Female Are Not Enough. *Identities- Journal for Politics, Gender and Culture*, 3(6), 191–205. <https://doi.org/10.51151/identities.v3i1.118>
- Feinberg, L. (1996). *Transgender Warriors Making History from Joan of Arc to RuPaul*. Beacon Press.

- Feinberg, L. (1998). *Trans Liberation Beyond Pink Or Blue*. Beacon Press.
- Feinberg, L. (2006a). *Drag King Dreams*. Basic Books.
- Feinberg, L. (2006b). Transgender Liberation: A Movement Whose Time Has Come. In S. Stryker & S. Whittle (Eds.), *The Transgender Studies Reader* (pp. 205–220). Routledge.
- Feinberg, L. (2006c). Transgender Liberation: A Movement Whose Time Has Come. In S. Stryker & S. Whittle (Eds.), *The transgender studies reader* (pp. 212–214). Routledge.
- Feinberg, L. (2006d). Transgender Liberation A Movement Whose Time Has Come. In S. Stryker & S. Whittle (Eds.), *The Transgender Studies Reader* (1st Editio). Routledge.
- Feinberg, L. (2010). *Stone Butch Blues*. ReadHowYouWant.com, Limited.
- Fernandez, B. (Ed.). (1999a). *humjinsi- A Resource Book on Lesbian, Gay & Bisexual Rights in India*. India Centre for Human Rights and Law.
- Fernandez, B. (Ed.). (1999b). *humjinsi A Resource Book on Lesbian, Gay & Bisexual Rights in India*. India Centre for Human Rights and Law. [sangama.org/files/sexual-minorities.pdf](http://sangama.org/files/sexual-minorities.pdf)
- Fernandez, B. (Ed.). (2002). *Humjinsi A Resource Book on Lesbian, Gay, and Bisexual Rights in India*. India Centre for Human Rights and Law.
- Finnegan, D. G., & McNally, E. B. (2002). *Counseling Lesbian, Gay, Bisexual, and Transgender Substance Abusers Dual Identities*. Haworth Press.
- Form e Trito Lingo. (2020, October 30). *Anandabazar Patrika*, 8.
- Forsyth, C. J., & Copes, H. (Eds.). (2014). *Encyclopedia of Social Deviance*. SAGE.
- Frey, J. D., Poudrier, G., Thomson, J. E., & Hazen, A. (2017). A Historical Review of Gender-Affirming Medicine: Focus on Genital Reconstruction Surgery. *Journal of Sexual Medicine*, 14(8), 991–1002. <https://doi.org/10.1016/j.jsxm.2017.06.007>
- Girshick, L. B. (2009). *Transgender Voices Beyond Women and Men*. University Press of New England.
- Goel, I. (2016). Hijra Communities of Delhi. *Sexualities*, 19(5–6), 535–546. <https://doi.org/10.1177/1363460715616946>
- Good Practice Guide to Gender-Affirmative Care*. (2017). Sappho for Equality. <http://www.sapphokolkata.in/wp-content/uploads/2017/06/GAC-Guideline1.pdf>
- Gupta, A. (2006). Section 377 and the Dignity of Indian Homosexuals. *Economic and Political Weekly*, 41(November), 4815–4823. <https://www.jstor.org/stable/4418926>
- Hall, K. (2005). Intertextual Sexuality. *Journal of Linguistic Anthropology*, 15(1), 125–144. <https://doi.org/10.1525/jlin.2005.15.1.125>



- Harrington, L. (2016). *Traversing Gender: Understanding Transgender Realities*. Mystic Production Press.
- Hinchy, J. (2017). The eunuch archive: Colonial records of non-normative gender and sexuality in India. *Culture, Theory and Critique*, 58(2), 127–146. <https://doi.org/10.1080/14735784.2017.1279555>
- Holt, J. C. (2004). *The Buddhist Visnu Religious Transformation, Politics and Culture*. Columbia University Press.
- Horbach, S. E. R., Bouman, M. B., Smit, J. M., Özer, M., Buncamper, M. E., & Mullender, M. G. (2015). Outcome of Vaginoplasty in Male-to-Female Transgenders: A Systematic Review of Surgical Techniques. *Journal of Sexual Medicine*, 12(6), 1499–1512. <https://doi.org/10.1111/jsm.12868>
- Hossain, A. (2017). The paradox of recognition: hijra, third gender and sexual rights in Bangladesh. *Culture, Health and Sexuality*, 19(12), 1418–1431. <https://doi.org/10.1080/13691058.2017.1317831>
- Hox, J. J., & Boeije, H. R. (2004). Data Collection, Primary vs. Secondary. In *Encyclopedia of Social Measurement* (pp. 593–599). <https://doi.org/10.1016/B0-12-369398-5/00041-4>
- Hughes, I. A., Houk, C., Ahmed, S. F., & Lee, P. A. (2006). Consensus statement on management of intersex disorders. *Journal of Pediatric Urology*, 2(3), 148–162. <https://doi.org/10.1016/j.jpuro.2006.03.004>
- Hunter, N. D., Joslin, C. G., & McGowan, S. M. (2004). *The Rights of Lesbians, Gay Men, Bisexuals, and Transgender People The Authoritative ACLU Guide to the Rights of Lesbians, Gay Men, Bisexuals, and Transgender People* (fourth). NYU Press.
- Israel, G. E., & Tarver, D. E. (1997). *Transgender Care Recommended Guidelines, Practical Information, and Personal Accounts* (G. E. I. Donald E. Tarver (Ed.)). Temple University Press.
- Jadavpura Rupantorkamider Tika. (2021, July 8). *Aajkal Patrika*, 2.
- Johnson, D. A. (2014). *Corpus Syriacum Johnsoni I*. Lulu.com.
- Jones, C., & Heever, J. van den. (2021). Building blocks of sexuality. *HTS Theologiese Studies / Theological Studies*, 77(3), 92–101. <https://doi.org/10.4102/hts.v77i3.6569>
- Kalra, G. (2012). Hijras : the unique transgender culture of India. *International Journal of Culture and Mental Health*, 5(2), 121–126. <https://doi.org/10.1080/17542863.2011.570915>
- Karmakar, S. (2019, September 24). Mondope Brihannalader Katha. *Aajkal Patrika*, 3.
- Kelly, E. (2013). Encyclopedia of human genetics and disease. In *Encyclopedia of human genetics and disease, vol 1*. ABC-CLIO.
- Kenagy, G. P. (2005). Transgender health: Findings from two needs assessment studies in Philadelphia. *Health and Social Work*, 30(1), 19–26. <https://doi.org/10.1093/hsw/30.1.19>

- Kessler, S. J. (1990). The Medical Construction of Gender: Case Management of Intersexed Infants. *Signs: Journal of Women in Culture and Society*, 16(1), 3–26. <https://doi.org/10.1086/494643>
- Khan, S. (2016). What is in a Name? Khwaja Sara, Hijra and Eunuchs in Pakistan. *Indian Journal of Gender Studies*, 23(2), 218–242. <https://doi.org/10.1177/0971521516635327>
- Khatun, H. (2018). LGBT Movement in India. *Journal of the Department of Sociology of North Bengal University*, 5, 217–224. <http://ir.nbu.ac.in/handle/123456789/3542>
- KMDA. (2022). *Map of Kolkata Metropolitan Area (KMA)*. Planning Department of Kolkata Metropolitan Development Authority. [https://kmda.wb.gov.in/page/cms/map\\_of\\_kma\\_c1fed8](https://kmda.wb.gov.in/page/cms/map_of_kma_c1fed8)
- Kothari, C. R. (2004). *Research Methodology Methods and Techniques* (second edi). New Age International (P) Limited, Publishers.
- Lancellotti, M. G. (2002). *Attis, Between Myth and History King, Priest, and God*. Brill.
- Lev, A. I. (2004). *Transgender Emergence: Therapeutic Guidelines for Working with Gender-variant People and Their Families* (illustrate). Routledge.
- LGBTIQA Communityr Manushder Tikakoron. (2021, June 13). *Aajkal Patrika*, 2.
- Lipschitz, N., Wolf, M., Amir, O., Sagiv, D., & Primov-Fever, A. (2017). Thyroid chondroplasty: Smoothing the thyroid cartilage— A retrospective study of thyroid chondroplasty for feminine neck appearance. *International Journal of Transgenderism*, 18(4), 389–394. <https://doi.org/10.1080/15532739.2017.1363679>
- Love, H. (2014). Queer. *TSQ: Transgender Studies Quarterly*, 1(1–2), 172–176. <https://doi.org/https://doi.org/10.1215/23289252-2399938>
- MacKenzie, G. O. (1994). *Transgender Nation*. Bowling Green State University Popular Press.
- Majumder, A., Chatterjee, S., Maji, D., Roychaudhuri, S., Ghosh, S., Selvan, C., George, B., Kalra, P., Maisnam, I. and, & Sanyal, D. (2020). IDEA Group Consensus Statement on Medical Management of Adult Gender Incongruent Individuals Seeking Gender Reaffirmation as Female. *Indian Journal of Endocrinology and Metabolism*, 24(2), 128–135. [https://doi.org/10.4103/ijem.IJEM\\_593\\_19](https://doi.org/10.4103/ijem.IJEM_593_19)
- March, J. (2014). *Dictionary of Classical Mythology* (Kindle Edi). Oxbow Books.
- Massey, R. (2004). *India's Dances Their History, Technique and Repertoire*. Abhinav Publications.
- Matsui, F., Shimada, K., Matsumoto, F., Itesako, T., Nara, K., Ida, S., & Nakayama, M. (2011). Long-term outcome of ovotesticular disorder of sex development: A single center experience. *International Journal of Urology*, 18(3), 231–236. <https://doi.org/10.1111/j.1442-2042.2010.02700.x>
- McCall, J. C. (2000). *Dancing Histories Heuristic Ethnography with the Ohafia Igbo*. The University of Michigan Press.

- McDaid, L., Aghaizu, A., Frankis, J., Riddell, J., Nardone, A., Mercey, D., Johnson, A., Hart, G., & Flowers, P. (2016). Frequency of HIV testing among gay and bisexual men in the UK: implications for HIV prevention. *HIV Medicine*, *17*(9), 683–693. <https://doi.org/10.1111/hiv.12373>
- Meier, S. C., & Labuski, C. M. (2013). *International Handbook on the Demography of Sexuality* (Vol. 5, Issue February 2013). <https://doi.org/10.1007/978-94-007-5512-3>
- Michaels, S., & Lhomond, B. (2006). Conceptualization and measurement of homosexuality in sex surveys: A critical review. *Cadernos de Saude Publica*, *22*(7), 1365–1374. <https://doi.org/10.1590/S0102-311X2006000700002>
- Michelraj, M. (2015). Historical Evolution of Transgender Community in India. *Indian Streams Research Journal*, *5*(7), 1–4.
- Miller, T. J., Wilson, S. C., Massie, J. P., Morrison, S. D., & Satterwhite, T. (2019). Breast augmentation in male-to-female transgender patients: Technical considerations and outcomes. *JPRAS Open*, *21*, 63–74. <https://doi.org/10.1016/j.jpra.2019.03.003>
- The Protection of Children from Sexual Offences Act, (2012).
- The Juvenile Justice (Care and Protection of Children) Act, (2015).
- The Protection of Children from Sexual Offences (Amendment) Act, (2019). [https://wcd.nic.in/sites/default/files/Protection of Children From Sexual Offences %28Amendment%29 Act%2C 2019.pdf](https://wcd.nic.in/sites/default/files/Protection%20of%20Children%20From%20Sexual%20Offences%20Amendment%20Act%202019.pdf)
- Ministry of Social Justice and Empowerment. (n.d.). *Support for Marginalized Individuals for Livelihood & Enterprise*. Ministry of Social Justice & Empowerment. Retrieved January 30, 2023, from <https://transgender.dosje.gov.in/Applicant/Registration/ListofNGO>
- Ministry of Social Justice and Empowerment. (2020). *National Portal for Transgender Persons*. Ministry of Social Justice & Empowerment, Government of India. <https://transgender.dosje.gov.in/>
- Mirandé, A. (2016). Hombres Mujeres: An Indigenous Third Gender. *Men and Masculinities*, *19*(4), 384–409. <https://doi.org/10.1177/1097184X15602746>
- Mithani, A., & Burfat, F. M. (2003). Hijra - The Sex in Between. *Journal of Independent Studies and Research-Management, Social Sciences and Economics*, *1*(1). <https://doi.org/https://doi.org/10.31384/jisrmsse/2003.01.1.6>
- Mohan, B. (2021). Third Gender : Connections with the Past. *Contemporary Social Sciences*, *30*(1), 139–145. <http://jndmeerut.org/wp-content/uploads/2021/07/Vol.-30-No.-1-2021.pdf#page=144>
- Morrison, S. D., Shakir, A., Vyas, K. S., Kirby, J., Crane, C. N., & Lee, G. K. (2016). Phalloplasty: A Review of Techniques and Outcomes. *Plastic and Reconstructive Surgery*, *138*(3), 594–615. <https://doi.org/10.1097/PRS.0000000000002518>

- Morrison, S. D., Vyas, K. S., Motakef, S., Gast, K. M., Chung, M. T., Rashidi, V., Satterwhite, T., Kuzon, W., & Cederna, P. S. (2016). Facial Feminization: Systematic Review of the Literature. *Plastic and Reconstructive Surgery*, 137(6), 1759–1770. <https://doi.org/10.1097/PRS.0000000000002171>
- Namba, Y., Watanabe, T., & Kimata, Y. (2009). Mastectomy in Female-to-male Transsexuals. *Acta Medica Okayama*, 63(5), 243–247. <https://doi.org/http://doi.org/10.18926/AMO/31841>
- Nanda, S. (1984). The Hijras of India A Preliminary Report. *Medicine and Law*, 3, 59–75.
- Nanda, S. (1998). *Neither Man nor Woman The Hijras of India* (Second Edi). Wadsworth Publishing Company.
- Nanda, S. (2006). *The hijras of India: Cultural and individual dimensions of an institutionalized third gender role* (P. A. Richard Parker (Ed.); 1st Editio). Routledge. <https://doi.org/https://doi.org/10.4324/9780203966105>
- Nangai vs The Superintendent Of Police, (2014).
- National Legal Ser.Auth vs Union Of India & Ors, (2014). <https://indiankanoon.org/doc/193543132/>
- National Legal Ser.Auth vs Union Of India & Others, (2014). <https://main.sci.gov.in/jonew/judis/41411.pdf>
- Navtej Singh Johar vs Union Of India Ministry Of Law And Others, (2018).
- Naz Foundation vs Government Of Nct Of Delhi And Others, (2009).
- Neal, C. (2000). *Issues In Therapy With Lesbian, Gay, Bisexual And Transgender Clients* (C. Neal & D. Davies (Eds.)). McGraw-Hill Education.
- Newman, L. K. (2002). Sex, Gender and Culture: Issues in the Definition, Assessment and Treatment of Gender Identity Disorder. *Clinical Child Psychology and Psychiatry*, 7(3). <https://doi.org/https://doi.org/10.1177/1359104502007003004>
- Parmeshwaranand, S. (2004). *Encyclopaedia of the Saivism*. Sarup & Sons.
- Pattanaik, D. (2006). *Shiva to Shankara Decoding the Phallic Symbol*. Indus Source Books.
- Pattanaik, D. (2012). *The Man Who Was a Woman and Other Queer Tales from Hindu Lore* (2012th ed.). Routledge.
- Penczak, C. (2003). *Gay Witchcraft Empowering The Tribe*. Red Wheel Weiser.
- Perovic, S. V., & Djordjevic, M. L. (2003). Metoidioplasty: A variant of phalloplasty in female transsexuals. *BJU International*, 92(9), 981–985. <https://doi.org/10.1111/j.1464-410X.2003.04524.x>
- Pinki Pramanik -vs.- State of West Bengal & Anr., (2014).
- Porikhay Bosben Rupantarkami. (2021, February 3). *Anandabazar Patrika*, 3.

- Pradhan Mantri Awas Yojana – Urban, Ministry of Housing and Urban Affairs, Government of India (2015).  
<https://pmay-urban.gov.in/>
- Prunas, A., Vitelli, R., Agnello, F., Curti, E., Fazzari, P., Giannini, F., Hartmann, D., & Bini, M. (2014). Defensive functioning in MtF and FtM transsexuals. *Comprehensive Psychiatry*, 55(4), 966–971.  
<https://doi.org/10.1016/j.comppsy.2013.12.009>
- Quinn, S., & Swain, N. (2018). Efficacy of intensive voice feminisation therapy in a transgender young offender. *Journal of Communication Disorders*, 72(May 2017), 1–15.  
<https://doi.org/10.1016/j.jcomdis.2018.02.001>
- Raj, A. (2020). the Quest To Recognise the Historical and Legal Prevalence of the Transgender in India. *International Journal of Social Science and Economic Research*, 05(06), 1425–1434.  
<https://doi.org/10.46609/ijsser.2020.v05i06.005>
- Ration er Ekti Arjio Batil Noi Tritiyo Linger. (2020, October 7). *Anandabazar Patrika*, 7.
- Reeder, G. (2000). Same-sex desire, conjugal constructs, and the tomb of Niankhkhnum and Khnumhotep. *World Archaeology*, 32(2), 193–208. <https://doi.org/10.1080/00438240050131180>
- Rice, K. (2015). Pansexuality. In P. Whelehan & A. Bolin (Eds.), *The international encyclopedia of human sexuality* (pp. 861–1042). John Wiley & Sons, Inc.  
<https://doi.org/https://doi.org/10.1002/9781118896877.wbiehs328>
- Richards, C., Bouman, W. P., Seal, L., Barker, M. J., Nieder, T. O., & Tsjoen, G. (2016). Non-binary or genderqueer genders. *International Review of Psychiatry*, 28(1), 95–102.  
<https://doi.org/10.3109/09540261.2015.1106446>
- Ross, M. W., Paulsen, J. A., & Stalstrom, O. W. (1988). Homosexuality and Mental Health. *Journal of Homosexuality*, 15(1–2), 131–152. [https://doi.org/10.1300/J082v15n01\\_10](https://doi.org/10.1300/J082v15n01_10)
- Rupantarkamider jonno e bar prithok sulobh. (2017, August 11). *Anandabazar Patrika*, 14.
- Rupantorkami Juba k Bari Feralo Police. (2019, October 27). *Anandabazar Patrika*, 5.
- Rupantorkamider Jonno Niyome Bodol. (2020, October 3). *Anandabazar Patrika*, 6.
- Sangeetha, K. (2020). Review Article A Need to Know Lgbt Rights. *Global Academic Journal of Humanities and Social Sciences*, 2(1), 1–5. <https://doi.org/10.36348/gajhss.2020.v02i01.001>
- Sanyal, D., & Majumder, A. (2016). Presentation of gender dysphoria: A perspective from Eastern India. *Indian Journal of Endocrinology and Metabolism*, 20(1), 129–133. <https://doi.org/10.4103/2230-8210.172247>
- Sanyal, S., & Maity, A. (2018). A Discordant Harmony – A Critical Evaluation of the Queer Theory from an Indian Perspective. *International Journal of Linguistics, Literature and Culture (LLC)*, 5(1), 50–71.  
<https://doi.org/10.19044/llc.v5no1a5>

- Saxena, P. (2011). *Life Of A Eunuch*. Shanta Publishing House.
- Schemes - Nirmal Bangla, West Bengal State Portal (2011). <https://wb.gov.in/government-schemes-details-nirmalbangla.aspx>
- Sell, R. L., & Weinrich, J. D. (1995). Definition and Measurement of Sexual Orientation. *Suicide and Life-Threatening Behavior*, 25, 40–51. <https://doi.org/10.1111/j.1943-278X.1995.tb00489.x>
- Selvaggi, G., Hoebeke, P., Ceulemans, P., Hamdi, M., Van Landuyt, K., Blondeel, P., De Cuyper, G., & Monstrey, S. (2009). Scrotal reconstruction in female-to-male transsexuals: A novel scrotoplasty. *Plastic and Reconstructive Surgery*, 123(6), 1710–1718. <https://doi.org/10.1097/PRS.0b013e3181a659fe>
- Selvaraj, S. D. (2018). Bahuchara Mata (Deity of Transgenders). *Hinduism and Tribal Religions*, 1–2. [https://doi.org/10.1007/978-94-024-1036-5\\_831-1](https://doi.org/10.1007/978-94-024-1036-5_831-1)
- Sen, D. (2017). *Magh Barua Community In Kolkata: A Study In Social Geography*. UNIVERSITY OF CALCUTTA.
- Sen, M. (2022, November 13). Lok Adalat e Bicharoker Ason Boslen Rupantarkami. *Aajkal Patrika*, 3.
- Sha, Y.-W., Sha, Y.-K., Ding, L., Lin, S.-B., Ji, Z.-Y., Wang, X., Song, Y.-Q., & Li, P. (2017). A successful pregnancy by intracytoplasmic sperm injection using ejaculate sperm from an infertile man with 46, XX/46, XY true hermaphrodite. *Asian Journal of Andrology*, 16(6), 721–722. <https://doi.org/10.4103/1008-682X.190329>
- Sharma, A. (2018). Identity Crisis for Transgender in India: A Case-study from Madhya Pradesh. *Quest - The Journal of UGC - HRDC Nainita*, 12(2), 157–167. <https://doi.org/10.5958/2249-0035.2018.00021.9>
- Sheikh, D. (2013). The Road to Decriminalization: Litigating India's Anti-Sodomy Law. *Yale Hum. Rts. & Dev. LJ*, 16, 110. <https://heinonline.org/HOL/LandingPage?handle=hein.journals/yhurdv116&div=6&id=&page=>
- Shukla, R., & Shadangi, S. (2019). The Plight of Transgender Persons: The Ostracised People in the Indian Society and Their Journey for Gender Justice. *Journal of The Gujrat Research Society*, 21(16), 1401–1411.
- Simini, V. (2017). Cross-dressing and the sexual symbolism of the divine sphere in pharaonic Egypt. In D. Campanile, F. Carlà-Uhink, & M. Facella (Eds.), *Transantiquity- Cross- Dressing and Transgender Dynamics in the Ancient World* (First, pp. 85–98). Routledge.
- Singh, H., & Kumar, P. (2020). Hijra : An Understanding. *Journal of Psychosocial Research*, 15(1), 77–87. <https://doi.org/10.32381/jpr.2020.15.01.6>
- Solarz, A. L. (Ed.). (1999). *Lesbian Health Current Assessment and Directions for the Future*. National Academies Press.

- 
- Somasundaram, O. (2009). Transgenderism : Facts and fictions. *Indian Journal of Psychiatry*, 51(1), 73–75.  
<https://doi.org/10.4103/0019-5545.44917>
- Stein, M. (2004). *Encyclopedia of Lesbian, Gay, Bisexual, and Transgender History in America*. Charles Scribner's Sons/Thomson/Gale.
- Stief, M. (2017a). The Sexual Orientation and Gender Presentation of Hijra, Kothi, and Panthi in Mumbai, India. *Archives of Sexual Behavior*, 46(1), 73–85. <https://doi.org/10.1007/s10508-016-0886-0>
- Stief, M. (2017b). The Sexual Orientation and Gender Presentation of Hijra, Kothi, and Panthi in Mumbai, India. *Archives of Sexual Behavior*, 46, 73–85. <https://doi.org/https://doi.org/10.1007/s10508-016-0886-0>
- Support for Marginalized Individuals for Livelihood and Enterprise (SMILE)*. (2022). [https://socialjustice.gov.in/public/ckeditor/upload/SMILE Guidelines\\_1649742207.pdf](https://socialjustice.gov.in/public/ckeditor/upload/SMILE_Guidelines_1649742207.pdf)
- Suresh Kumar Koushal & Anr vs Naz Foundation & Ors, (2013).
- Swan, W. (Ed.). (2004). *Handbook of Gay, Lesbian, Bisexual, and Transgender Administration and Policy*. Taylor & Francis.
- Tamarin, R. H. (2002). *Principles of Genetics* (Seventh). McGraw Hill Education (India) Private Limited.
- The Constitution of India, art. 14.
- The Constitution of India, art. 15.
- The Constitution of India, art. 16.
- The Constitution of India, art. 17.
- The Constitution of India, art. 19.
- The Constitution of India, art. 21 A.
- The Transgender Persons (Protection of Rights) Act, (2019).
- The Transgender Persons (Protection of Rights) Bill*, (2016).
- The Transgender Persons (Protection of Rights) Bill*, (2018).
- Tiwari, E. (2014). Distortion of " Tritya Prakriti " (Third Nature) By Colonial Ideology in India. *International Journal of Literature and Art*, 2, 19–24. [www.seipub.org/ijla](http://www.seipub.org/ijla)
- Transgender Persons Rules, (2020).
- Tritiyog Lingero Sujog High Court e. (2020, October 1). *Ei Somoy*, 4.
- Tritiyog Lingo k Police e Chakri. (2021, October 2). *Aajkal Patrika*, 1.

- van der Sluis, W. B., Steensma, T. D., & Bouman, M.-B. (2020). Orchiectomy in transgender individuals: A motivation analysis and report of surgical outcomes. *International Journal of Transgender Health, 21*(2), 176–181. <https://doi.org/10.1080/26895269.2020.1749921>
- Vanita, R. (2000a). Introduction: Ancient Indian Materials. In S. K. Ruth Vanita (Ed.), *Same-Sex Love in India Readings from Literature and History* (p. 18). St. Martin's Press.
- Vanita, R. (2000b). Introduction: Ancient Indian Materials. In R. V. & S. Kidwai (Ed.), *Same-Sex Love in India Reading from Literature and History* (pp. 14–15). St. Martin's Press.
- Vanitha, J. (2017). Social Exclusion and Challenges Faced by Transgender Community (A Sociological Approach to the Study of Transgender Community in Tamil Nadu). *4th International Conference on Arts and Humanities*, 11–17. <https://doi.org/DOI:https://doi.org/10.17501/icoah.2017.4102>
- Verma, S. K., Shukla, A., & Bharti, P. (2011). The Indian eunuch: An efficient emotional labour. *Eastern Anthropologist, 64*(2–3), 251–261.
- Wattendorf, D. J., & Muenke, M. (2005). Klinefelter syndrome. *American Family Physician, 72*(11), 2259–2262. <https://doi.org/10.1177/0009922813493831>
- Weiss, J. T. (2008). *Transgender identity, Textualism, and the supreme court: What is the plain meaning of sex in title VII of the civil rights act of 1964*. Temp. Pol. & Civ. Rts. L. Rev. <https://heinonline.org/HOL/LandingPage?handle=hein.journals/tempcr18&div=24&id=&page=>
- Weyers, S., Monstrey, S., Hoebeke, P., Cuypere, G. De, & Gerris, J. (2008). Laparoscopic hysterectomy as the method of choice for hysterectomy in female-to-male gender dysphoric individuals. *Gynecological Surgery, 5*, 269–273. <https://doi.org/https://doi.org/10.1007/s10397-008-0386-x>
- Wilfong, T. G. (2007). Gender and Sexuality. In T. Wilkinson (Ed.), *The Egyptian World* (pp. 211–212). Routledge.
- Wilhelm, A. Das. (2003). *Tritiya-Prakriti: People of the Third Sex Understanding Homosexuality, Transgender Identity and Intersex Conditions through Hinduism*. Xlibris Corporation.
- Williams, C. (2014). Transgender. *TSQ: Transgender Studies Quarterly, 1*(1–2), 232–234. <https://doi.org/https://doi.org/10.1215/23289252-2400136>
- Wroblewski, P., Gustafsson, J., & Selvaggi, G. (2013). Sex reassignment surgery for transsexuals. *Current Opinion in Endocrinology, Diabetes and Obesity, 20*(6), 570–574. <https://doi.org/10.1097/01.med.0000436190.80104.56>



# Appendices

## Appendix- 1

(Primary Data for Cartographic Presentation)

### Chapter- I

Figure No. 1.1

Category Wise Number of the Respondents							
L	G	B	T	I	Q	K	Total
19	24	18	91	71	42	37	302
Category Wise Percentage of the Respondents							
L	G	B	T	I	Q	K	Total (%)
6.29	7.94	5.96	30.13	23.51	13.91	12.26	100

### Chapter – III

Figure No. 3.1

Gender Identity of the Respondents								
Male	Female	Trans Male	Trans Female	Gender Queer	Kothi	Tom Boy	Others	Total
56	94	11	56	7	38	6	34	302
Percentage of Different Gender Identity of the Respondents								
Male	Female	Trans Male	Trans Female	Gender Queer	Kothi	Tom Boy	Others	Total (%)
18.55	31.13	3.64	18.54	2.32	12.58	1.98	11.26	100

Figure No.3.2

Name of the Gender & Sexual Minority Groups	Category Wise Gender Identity of the Respondents								
	Male	Female	Trans Male	Trans Female	Gender Queer	Kothi	Tom Boy	Others	Total
L	-	13	-	-	-	-	6	-	19
G	24	-	-	-	-	-	-	-	24
B	9	9	-	-	-	-	-	-	18
T	15	20	10	45	1	-	-	-	91
I	-	27	-	10	-	-	-	34	71
Q	8	25	1	1	6	1	-	-	42
K	-	-	-	-	-	37	-	-	37
Total	56	94	11	56	7	38	6	34	302
Name of the Gender & Sexual Minority Groups	Category Wise Percentage of Gender Identity of the Respondents								
	Male	Female	Trans Male	Trans Female	Gender Queer	Kothi	Tom Boy	Others	Total (%)
L	-	68.42	-	-	-	-	31.58	-	100
G	100	-	-	-	-	-	-	-	100
B	50	50	-	-	-	-	-	-	100
T	16.48	21.98	10.98	49.46	1.1	-	-	-	100
I	-	38.03	-	14.08	-	-	-	47.89	100
Q	19.04	59.53	2.38	2.38	14.29	2.38	-	-	100
K	-	-	-	-	-	100	-	-	100

**Figure No. 3.3**

Understanding Gender Identity among the Respondents		
Yes	No	Total
300	2	302
The Percentage of Understanding Gender Identity among the Respondents		
Yes	No	Total (%)
99.34	0.66	100

**Figure No. 3.4**

Age Wise Understanding of Gender Identity among the Respondents					
<5	5-10	10-18	18-25	25-40	Total
14	227	48	9	2	300
Age Wise Percentage of Understanding of Gender Identity among the Respondents					
<5	5-10	10-18	18-25	25-40	Total (%)
4.67	75.67	16	3	0.66	100

**Figure No. 3.5**

Assigned Sex at Birth of the Respondents			
Male	Female	Don't Know	Total
168	86	48	302
The Percentage of Assigned Sex at Birth of the Respondents			
Male	Female	Don't Know	Total (%)
55.63	28.48	15.89	100

**Figure No. 3.6**

Name of the Gender & Sexual Minority Groups	Category Wise Assigned Sex at Birth of the Respondents			
	Male	Female	Don't know	Total
L	0	19	0	19
G	24	0	0	24
B	9	9	0	18
T	66	25	0	91
I	13	10	48	71
Q	19	23	0	42
K	37	0	0	37
Total	168	86	48	302
Name of the Gender & Sexual Minority Groups	Category Wise Percentage of Assigned Sex at Birth of the Respondents			
	Male	Female	Don't know	Total (%)
L	-	100	-	100
G	100	-	-	100
B	50	50	-	100
T	72.53	27.47	-	100
I	18.31	14.08	67.61	100
Q	45.24	54.76	-	100
K	100	-	-	100

**Figure No. 3.7**

Physical Appearance of the Respondents			
Masculine	Feminine	Others	Total
72	229	1	302
Percentage of Physical Appearance of the Respondents			
Masculine	Feminine	Other	Total (%)
23.85	75.83	0.33	100

**Figure No. 3.8**

Sexual Orientation of the Respondents								
Heterosexual	Bisexual	Lesbian	Gay	Queer	Not Identified	Pseudoheterosexual	Don't want to disclose	Total
91	18	19	62	49	3	38	22	302
The Percentage of Sexual Orientation of the Respondents								
Heterosexual	Bisexual	Lesbian	Gay	Queer	Not Identified	Pseudo heterosexual	Don't want to disclose	Total (%)
30.13	5.96	6.3	20.53	16.22	0.99	12.58	7.29	100

**Figure No. 3.9**

Understanding Sexual Orientation among the Respondents		
Yes	No	Total
300	2	302
Percentage of Understanding Sexual Orientation among the Respondents		
Yes	No	Total (%)
99.34	0.66	100

**Figure No. 3.10**

Age of the Respondents for Understanding Sexual Orientation				
5-10	10-18	18-25	25-40	Total
67	219	12	2	300
Percentage of the Respondents Under Different Age Group for Understanding Sexual Orientation				
5-10	10-18	18-25	25-40	Total (%)
22.34	73	4	0.66	100

**Figure No. 3.11**

Respondents Who Have & Have Not Gone through SRS		
Yes	No	Total
66	236	302
Percentage of the Respondents Who Have Gone through SRS		
Yes	No	Total (%)
21.85	78.15	100

**Figure No. 3.12**

The Number of Respondents Who Think about SRS				
Always	Often	Sometimes	Never	Total
120	3	2	177	302
Percentage of the Respondents Who Think about SRS				
Always	Often	Sometimes	Never	Total (%)
39.74	0.99	0.66	58.61	100

**Figure No. 3.13**

MTF and FTM Surgeries among the Respondents		
MTF	FTM	Total
55	11	66
The Percentage of MTF and FTM Surgeries among the Respondents		
MTF	FTM	Total (%)
83.33	16.67	100

**Figure No. 3.14**

Different Types of MTF Surgeries Taken by the Respondents									
Augmentation Mammoplasty	Penectomy	Orchiectomy	Vaginoplasty	Facial feminization surgery	Liposuction	Voice Surgery	Thyroid cartilage reduction	Hair Reconstruction	Clitoroplasty
55	47	47	46	55	17	21	22	15	15
Percentage of Different Types of MTF Surgeries Taken by the Respondents									
Augmentation Mammoplasty	Penectomy	Orchiectomy	Vaginoplasty	Facial feminization surgery	Liposuction	Voice Surgery	Thyroid cartilage reduction	Hair Reconstruction	Clitoroplasty
100	85.45	85.45	83.63	100	30.9	38.18	40	27.27	27.27

**Figure No. 3.15**

Different Types of FTM Surgeries Taken by the Respondents						
Mastectomy	Hysterectomy	Phalloplasty	Scrotoplasty	Vaginectomy	Voice surgery	Liposuction
11	6	6	6	4	2	3
Percentage of Different Types of FTM Surgeries Taken by the Respondents						
Mastectomy	Hysterectomy	Phalloplasty	Scrotoplasty	Vaginectomy	Voice surgery	Liposuction
100	54.54	54.54	54.54	36.36	18.18	27.27

**Figure No. 3.16**

Number of the Respondents and Their Satisfaction Level about the Result of SRS			
Satisfied	Medium	Dissatisfied	Total
38	15	13	66
Percentage of the Respondents and Their Satisfaction Level about the Result of SRS			
Satisfied	Medium	Dissatisfied	Total (%)
57.57	22.73	19.7	100

**Figure No. 3.17**

Eagerness for Further Modifications of the Body of the Respondents through SRS in Future		
Yes	No	Total
30	36	66
Percentage of the Respondents Who Have Eagerness for Further Modifications of Their Body through SRS in Future		
Yes	No	Total (%)
45.45	54.55	100

**Figure No. 3.18**

Eagerness of Doing Different Kind of Surgeries in Future among the Respondents		
MTF	FTM	Total
24	6	30
Eagerness of Doing Different Kind of Surgeries in Future among the Respondents in Percentage		
MTF	FTM	Total (%)
80	20	100

**Figure No. 3.19**

Number of the Respondents Who Take Hormone Replacement Therapy		
Yes	No	Total
69	233	302
Percentage of the Respondents Who Take Hormone Replacement Therapy		
Yes	No	Total (%)
22.84	77.16	100

## Chapter- IV

**Figure No. 4.1**

Education Qualification of the Respondents											
Never go to School	Don't Pass Class IV	Pass Class IV	Pass Class VIII	Secondary	Higher Secondary	Graduation	Masters	PhD	LLB	Others	Total
49	6	8	19	16	43	85	53	13	7	3	302
Education Qualification of the Respondents (in percentage)											
Never go to School	Don't Pass Class IV	Pass Class IV	Pass Class VIII	Secondary	Higher Secondary	Graduation	Masters	PhD	LLB	Others	Total (%)
16.23	1.98	2.66	6.3	5.29	14.23	28.14	17.54	4.3	2.32	1	100

**Figure No. 4.2**

Religion of the Respondents		
Hinduism	Islam	Total
259	43	302
Religion of the Respondents (in percentage)		
Hinduism	Islam	Total (%)
85.76	14.24	100

**Figure No. 4.3**

Marital Status of the Respondents					
Unmarried	Married	Separated	Divorcee	Others	Total
234	42	4	2	20	302
Marital Status of the Respondents (%)					
Unmarried	Married	Separated	Divorcee	Others	Total (%)
77.5	13.9	1.32	0.66	6.62	100

**Figure No. 4.4**

Residing Pattern of the Respondents						
Family	On my own	With Partner	Hostel	Community member's house	HijraGhar	Total
142	60	33	2	4	61	302
Residing Pattern of the Respondents (%)						
Family	On my own	With Partner	Hostel	Community member's house	HijraGhar	Total (%)
47.02	19.86	10.94	0.66	1.32	20.2	100

**Figure No. 4.5**

Disclosure of Gender Identity of the Respondents			
Yes	No	Not require to disclose separately	Total
206	17	79	302
Disclosure of Gender Identity of the Respondents (%)			
Yes	No	Not require to disclose separately	Total (%)
68.21	5.63	26.16	100

**Figure No. 4.6**

Number of the Respondents who Receive Torture after Disclosing Gender Identity		
Yes	No	Total
168	38	206
Percentage of the Respondents who Receive Torture after Disclosing Gender Identity		
Yes	No	Total (%)
81.55	18.45	100

**Figure No. 4.7**

Disclosure of Sexual Orientation among the Respondents		
Yes	No	Total
258	44	302
Percentage of Disclosure of Sexual Orientation among the Respondents		
Yes	No	Total (%)
85.43	14.57	100

**Figure No. 4.8**

Number of the Respondents who Getting Tortured after Disclose Their Sexual Orientation			
Yes	No	Not Applicable	Total
234	12	56	302
Percentage of the Respondents who Getting Tortured after Disclose Their Sexual Orientation			
Yes	No	Not Applicable	Total (%)
77.48	3.97	18.55	100



**Figure No. 4.9**

The Number of Respondents Who leave Home after Getting Tortured			
Yes	No	NA	Total
137	106	59	302
The Percentage of Respondents Who leave Home after Getting Tortured			
Yes	No	Not Applicable	Total (%)
45.36	35.1	19.54	100

**Figure No. 4.10**

Living Places of the Respondents after Living Home						
Friend's House	House of the Community Members	HijraGhar	With Partner	On my own	Other	Total
1	9	49	32	44	2	137
Living Places of the Respondents after Living Home (%)						
Friend's House	House of the Community Members	HijraGhar	With Partner	On my own	Other	Total (%)
0.73	6.58	35.76	23.36	32.11	1.46	100

**Figure No. 4.11**

Respondents Who Are Requested for Coming Back Home		
Yes	No	Total
66	71	137
Percentage of the Respondents Who Are Requested for Coming Back Home		
Yes	No	Total (%)
48.17	51.83	100

**Figure No. 4.12**

The Number of Respondents Who Coming Back Home after Getting Requested		
Yes	No	Total
10	56	66
The Percentage of Respondents Who Coming Back Home after Getting Requested		
Yes	No	Total (%)
15.16	84.84	100

Figure No. 4.13

Working Population among the Respondents		
Yes	No	Total
271	31	
Percentage of Working Population among the Respondents		
Yes	No	Total (%)
89.74	10.26	100

Figure No. 4.14

Different Types of Non Working Population among the Respondents				
Reading in School	Reading in College	Reading in University	Not doing anything	Total
2	11	5	13	31
Percentage of Different Types of Non Working Population among the Respondents				
Reading in School	Reading in College	Reading in University	Not doing anything	Total (%)
6.45	35.48	16.13	41.94	100

Figure No. 4.15

Different Professions of the Respondents									
Govt. Sector	Private Sector	NGO	Hijra	Lawyer	Self Employed	Begging in road and train	In Creative Sector	Others	Total
12	35	63	82	3	27	24	22	3	271
Different Professions of the Respondents (%)									
Govt. Sector	Private Sector	NGO	Hijra	Lawyer	Self Employed	Begging in road and train	In Creative Sector	Others	Total (%)
4.43	12.91	23.24	30.25	1.11	9.97	8.86	8.12	1.11	100

Figure No. 4.16

Monthly Income of the Respondents					
<10000	10000-20000	20000-50000	50000-100000	1-2 Lakhs	Total
59	135	65	10	2	271
Monthly Income of the Respondents (%)					
<10000	10000-20000	20000-50000	50000-100000	1-2 Lakhs	Total (%)
21.77	49.82	23.98	3.7	0.73	100

**Figure No. 4.17**

Condition of Physical Health of the Respondents				
Very Good	Good	Medium	Bad	Total
3	244	40	15	302
Condition of Physical Health of the Respondents (%)				
Very Good	Good	Medium	Bad	Total (%)
0.99	80.8	13.24	4.97	100

**Figure No. 4.18**

HIV Testing among the Respondents		
Yes	No	Total
229	73	302
Percentage of HIV Testing among the Respondents		
Yes	No	Total (%)
75.82	24.18	100

**Figure No. 4.19**

When the Respondents Have Been Tested HIV Last				
<1 Year	1-2 Years	2-5 Years	>5 Years	Total
164	28	17	20	229
When the Respondents Have Been Tested HIV Last (%)				
<1 Year	1-2 Years	2-5 Years	>5 Years	Total (%)
71.62	12.23	7.42	8.73	100

**Figure No. 4.20**

Avoided by the Neighbors			
Yes	No	Not Applicable	Total
236	39	27	302
Avoided by the Neighbors (%)			
Yes	No	Not Applicable	Total (%)
78.15	12.91	8.94	100

**Figure No. 4.21**

Feeling Marginalized within Family			
Yes	No	Not Applicable	Total
275	17	10	302
Feeling Marginalized within Family (%)			
Yes	No	Not Applicable	Total (%)
91.06	5.63	3.31	100

**Figure No. 4.22**

If Feeling Marginalized within Family, With Whom the Respondents Feel Better					
Friends	Community Members	Both Friends and Community Members	Both Community Members and Others	Friends, Community Members, and Others	Total
4	236	17	11	7	275
If Feeling Marginalized within Family, With Whom the Respondents Feel Better (%)					
Friends	Community Members	Both Friends and Community Members	Both Community Members and Others	Friends, Community Members, and Others	Total (%)
1.45	85.81	6.2	4	2.54	100

**Figure No. 4.23**

Number of the Respondents Who Feel Free to Talk with Non-binary People		
Yes	No	Total
187	115	302
Percentage of the Respondents Who Feel Free to Talk with Non-binary People		
Yes	No	Total (%)
61.92	38.08	100

**Figure No. 4.24**

Who Have Children among the Respondents		
Yes	No	Total
68	234	302
Who Have Children among the Respondents (%)		
Yes	No	Total (%)
22.52	77.48	100

**Figure No. 4.25**

Who have Biological Children among the Respondents		
Yes	No	Total
17	51	68
Percentage of the Respondents Who have Biological Children		
Yes	No	Total (%)
25	75	100

**Figure No. 4.26**

The Number of Respondents Who have Children from Different Sources			
From parents	Street child	From Other sources	Total
19	10	22	51
The Percentage of Respondents Who have Children from Different Sources			
From parents	Street child	From Other sources	Total (%)
37.25	19.61	43.14	100

**Figure No. 4.27**

The Number of Respondents Who Engage in Hijra Profession		
Hijra	Others	Total
106	196	302
The Percentage of Respondents Who Engage in Hijra Profession		
Hijra	Others	Total (%)
35.1	64.9	100

**Figure No. 4.28**

Educational Qualification among the Hijra Respondents							
Never go to School	Don't Pass Class IV	Pass Class IV	Pass Class VIII	Secondary	Higher Secondary	Graduation	Total
49	4	8	15	11	9	10	106
Educational Qualification among the Hijra Respondents (%)							
Never go to School	Don't Pass Class IV	Pass Class IV	Pass Class VIII	Secondary	Higher Secondary	Graduation	Total (%)
46.23	3.77	7.54	14.15	10.38	8.49	9.44	100

**Figure No. 4.29**

Name of the Gender & Sexual Minority Groups	Hijra occupation
L	0
G	0
B	0
T	18
I	69
Q	5
K	14
Total	106
Name of the Gender & Sexual Minority Groups	Hijra occupation
L	0
G	0
B	0
T	16.98
I	65.09
Q	4.72
K	13.21
Total (%)	100

**Figure No. 4.30**

Different Types of Hijra Occupations		
Hijra	Begging in Road and Train	Total
82	24	106
Different Types of Hijra Occupations (%)		
Hijra	Begging in Road and Train	Total (%)
77.36	22.64	100

**Figure No. 4.31**

Societal Conditions of the Respondents for Living Safely & Peacefully					
Very Good	Good	Medium	Bad	Very Bad	Total
0	0	6	77	219	302
Societal Conditions of the Respondents for Living Safely & Peacefully (%)					
Very Good	Good	Medium	Bad	Very Bad	Total (%)
0	0	1.98	25.49	72.53	100

## Chapter-V

Figure No. 5.1

Different Types of Tortures Received by the Respondents after Disclosing Gender Identity							
Rebuke	Beating	Verbal abuse	Locking him/her inside the room	Expel from his/her house	Stop pocket money	Put him /her in a room	Attempting rape by anybody else
168	157	168	132	89	149	158	48
Different Types of Tortures Received by the Respondents after Disclosing Gender Identity (%)							
Rebuke	Beating	Verbal abuse	Locking him/her inside the room	Expel from his/her house	Stop pocket money	Put him /her in a room	Attempting rape by anybody else
100	93.45	100	78.57	52.97	88.69	94.05	28.57

Figure No. 5.2

Respondents First Disclose Their Sexual Orientation to Whom						
Mother	Fathers	Best Friend	Partner	Community Members	Others	Total
169	0	15	18	56	0	258
Respondents First Disclose Their Sexual Orientation to Whom (%)						
Mother	Fathers	Best Friend	Partner	Community Members	Others	Total (%)
65.5	0	5.81	6.97	21.71	0	100

Figure No. 5.3

Number of Respondents Who Received Different Types of Tortures after Disclosing Their Sexual Orientation							
Rebuke	Beating	Verbal abuse	Locking him/her inside the room	Expel from his/her house	Stop pocket money	Put him /her in a room	Attempting rape by anybody else
234	214	232	170	123	184	227	75
Percentage of Respondents Who Received Different Types of Tortures after Disclosing Their Sexual Orientation							
Rebuke	Beating	Verbal abuse	Locking him/her inside the room	Expel from his/her house	Stop pocket money	Put him /her in a room	Attempting rape by anybody else
100	91.45	99.14	72.65	52.56	78.63	97.01	32.05

**Figure No. 5.4**

Name of the Gender & Sexual Minority Groups	Getting Any Torture from Home after Disclosing Their SO			
	Yes	No	Not Applicable	Total
L	19	-	-	19
G	24	-	-	24
B	8	1	9	18
T	89	-	2	91
I	37	10	24	71
Q	35	1	6	42
K	22	-	15	37
Name of the Gender & Sexual Minority Groups	Getting Any Torture from Home after Disclosing Their SO (%)			
	Yes	No	Not Applicable	Total (%)
L	100	-	-	100
G	100	-	-	100
B	44.44	5.56	50	100
T	97.81	-	2.19	100
I	52.12	14.07	33.81	100
Q	83.33	2.38	14.29	100
K	59.46	-	40.54	100

**Figure No. 5.5**

Number of Respondents Get Support from Their Families					
Never	Rarely	Sometimes	Often	Always	Total
217	28	33	18	6	302
Percentage of the Respondents Get Support from Their Families					
Never	Rarely	Sometimes	Often	Always	Total (%)
71.85	9.27	10.93	5.97	1.98	100

**Figure No. 5.6**

If They Get Support from Their Families, from When They Get Support					
From the very first day after disclosing	After few days	After few months	After 1 year	After few years	Total
6	0	3	0	76	85
If They Get Support from Their Families, from When They Get Support (%)					
From the very first day after disclosing	After few days	After few months	After 1 year	After few years	Total (%)
7.05	0	3.53	0	89.42	100

**Figure No. 5.7**

Respondents Experienced Bullying in Their Educational Institutions					
Never	Sometimes	Frequently	Very Frequently	Not Applicable	Total
20	24	29	180	49	302
Respondents Experienced Bullying in Their Educational Institutions (%)					
Never	Sometimes	Frequently	Very Frequently	Not Applicable	Total (%)
6.63	7.95	9.6	59.6	16.22	100



Figure No. 5.8

Name of the Gender & Sexual Minority Groups	Different Gender and Sexual Minority People Face bullying in Their Educational Institutions					
	Never	Sometimes	Frequently	Very Frequently	Not Applicable	Total
L	-	12	1	6	-	19
G	-	-	-	24	-	24
B	11	3	4	-	-	18
T	-	-	-	91	-	91
I	-	-	4	18	49	71
Q	9	9	8	16	-	42
K	-	-	12	25	-	37
Name of the Gender & Sexual Minority Groups	Different Gender and Sexual Minority People Face bullying in Their Educational Institutions (%)					
	Never	Sometimes	Frequently	Very Frequently	Not Applicable	Total (%)
L	-	63.16	5.26	31.58	-	100
G	-	-	-	100	-	100
B	61.11	16.66	22.23	-	-	100
T	-	-	-	100	-	100
I	-	-	5.63	25.35	69.02	100
Q	21.43	21.43	19.05	38.09	-	100
K	-	-	32.43	67.57	-	100

Figure No. 5.9

Usage of Unisex Uniform in School		
Yes	No	Total
0	100	253
Usage of Unisex Uniform in School (%)		
Yes	No	Total (%)
0	100	100

Figure No. 5.10

Presence of Anti-Bullying Policy in School		
Yes	No	Total
0	253	253
Presence of Anti-Bullying Policy in School (%)		
Yes	No	Total (%)
0	100	100

Figure No. 5.11

Presence of Trans-Friendly Toilet in School		
Yes	No	Total
0	253	253
Presence of Trans-Friendly Toilet in School (%)		
Yes	No	Total (%)
0	100	100

**Figure No. 5.12**

Respondents getting any Information about gender and Sexual Minority People		
Yes	No	Total
0	253	253
Respondents getting any Information about gender and Sexual Minority People (%)		
Yes	No	Total (%)
0	100	100

**Figure No. 5.13**

Respondents Get any Help from their Teachers Regarding Gender and Sexual Minority People		
Never	Sometimes	Total
251	2	253
Respondents Get any Help from their Teachers Regarding Gender and Sexual Minority People (%)		
Never	Sometimes	Total (%)
99.2	0.8	100

**Figure No. 5.14**

Presence of trans-friendly counselors in School		
Yes	No	Total
0	253	253
Presence of trans-friendly counselors in School (%)		
Yes	No	Total (%)
0	100	100

**Figure No. 5.15**

Attitude of Schools towards GSM People					
Very Good	Good	Medium	Bad	Very Bad	Total
0	0	0	52	201	253
Attitude of Schools towards GSM People (%)					
Very Good	Good	Medium	Bad	Very Bad	Total (%)
0	0	0	20.55	79.45	100

**Figure No. 5.16**

Facing Obstacle in Study and Employment of the Respondents		
Yes	No	Total
281	21	302
Facing Obstacle in Study and Employment of the Respondents (%)		
Yes	No	Total (%)
93.04	6.96	100

Figure No. 5.17

Different Occupations of Hijras				
Badhai	Begging in Road and Train	Both Hijra and NGO	Hijra, NGO and Others	Total
54	24	24	4	106
Different Occupations of Hijras (%)				
Badhai	Begging in Road and Train	Both Hijra and NGO	Hijra, NGO and Others	Total (%)
50.94	22.64	22.64	3.78	100

Figure No. 5.18

Number of Respondents Who Engage in Sex Work			
No & never engage earlier	Have not engage earlier, but think about it recently	Engage in past, not recent	Total
292	2	8	302
Percentage of Respondents Who Engage in Sex Work			
No & never engage earlier	Have not engage earlier, but think about it recently	Engage in past, not recent	Total (%)
96.69	0.66	2.65	100

Figure No. 5.19

Respondents Experienced Harassment in Their Workplaces					
Never	Rarely	Sometimes	Frequently	Very Frequently	Total
20	3	55	103	90	271
Respondents Experienced Harassment in Their Workplaces (%)					
Never	Rarely	Sometimes	Frequently	Very Frequently	Total (%)
7.38	1.11	20.3	38	33.21	100

Figure No. 5.20

Name of the Gender & Sexual Minority Groups	Different Gender and Sexual Minority People Experienced Harassment at Their Workplaces					
	Never	Rarely	Sometimes	Frequently	Very Frequently	Total
L	3	-	5	9	-	17
G	2	-	-	20	-	22
B	13	-	2	-	-	15
T	-	2	12	60	12	86
I	-	1	-	2	66	69
Q	2	-	10	12	12	36
K	-	-	26	-	-	26
Name of the Gender & Sexual Minority Groups	Different Gender and Sexual Minority People Experienced Harassment at Their Workplaces (%)					
	Never	Rarely	Sometimes	Frequently	Very Frequently	Total
L	17.65	-	29.41	52.94	-	100
G	9.1	-	-	90.9	-	100
B	86.66	-	13.34	-	-	100
T	-	2.33	13.95	69.76	13.96	100
I	-	1.45	-	2.89	95.66	100
Q	5.56	-	27.78	33.33	33.33	100
K	-	-	100	-	-	100

Figure No. 5.21

Facing Different Types of Harassments in Workplaces							
Curious eyes	Satire	Mockery	Maximum employees stop to talk with you	Avoiding tendency	Feel separated from others	Unsolicited advice	Any others
227	227	179	142	214	223	175	133
Facing Different Types of Harassments in Workplaces (%)							
Curious eyes	Satire	Mockery	Maximum employees stop to talk with you	Avoiding tendency	Feel separated from others	Unsolicited advice	Any others
83.76	83.76	66.05	52.3	78.96	82.28	64.57	49.07

Figure No. 5.22

Facing Harassments in Public Vehicles						
Very Frequently	Frequently	Sometimes	Often	Rare	Never	Total
175	64	17	19	8	19	302
Facing Harassments in Public Vehicles (%)						
Very Frequently	Frequently	Sometimes	Often	Rare	Never	Total (%)
57.94	21.2	5.63	6.29	2.65	6.29	100

Figure No. 5.23

Name of the Gender & Sexual Minority Groups	Facing Harassment in Public Vehicles among Different Gender and Sexual Minority Respondents						
	Very Frequently	Frequently	Sometimes	Often	Rare	Never	Total
L	-	-	-	16	3	-	19
G	5	17	-	-	2	-	24
B	2	4	-	-	-	12	18
T	75	15	-	1	-	-	91
I	70	-	-	-	1	-	71
Q	16	2	13	2	2	7	42
K	7	26	4	-	-	-	37
Total	175	64	17	19	8	19	302
Name of the Gender & Sexual Minority Groups	Facing Harassment in Public Vehicles among Different Gender and Sexual Minority Respondents (%)						
	Very Frequently	Frequently	Sometimes	Often	Rare	Never	Total (%)
L	-	-	-	84.21	15.79	-	100
G	20.83	70.83	-	-	8.34	-	100
B	11.12	22.22	-	-	-	66.66	100
T	82.42	16.48	-	1.1	-	-	100
I	98.59	-	-	-	1.41	-	100
Q	38.09	4.77	30.96	4.76	4.76	16.66	100
K	18.91	70.27	10.82	-	-	-	100

**Figure No. 5.24**

Knowledge of Different Health Service Providers about Gender and Sexual Minority People			
Have Knowledge	Don't Have Knowledge	Don't Know	Total
0	282	20	302
Knowledge of Different Health Service Providers about Gender and Sexual Minority People (%)			
Have Knowledge	Have Not Knowledge	Don't Know	Total (%)
0	93.37	6.63	100

**Figure No. 5.25**

Behavior of Health Service Providers towards Gender and Sexual Minority People					
Very Good	Good	Moderate	Bad	Very Bad	Total
0	0	9	117	176	302
Behavior of Health Service Providers towards Gender and Sexual Minority People (%)					
Very Good	Good	Moderate	Bad	Very Bad	Total (%)
0	0	2.98	38.74	58.28	100

**Figure No. 5.26**

Number of Respondents who Use Protection against HIV & STDs			
Yes	No	Not Applicable	Total
196	59	47	302
Percentage of Respondents who Use Protection against HIV & STDs			
Yes	No	Not Applicable	Total (%)
64.91	19.53	15.56	100

**Figure No. 5.27**

What Kind of Protections They Use		
Only Condom	Both Condom and PrEP	Total
169	27	196
What Kind of Protections They Use (%)		
Condom	Both Condom and PrEP	Total (%)
86.22	13.78	100

**Figure No. 5.28**

Number of the Respondents Who Tried to Amend Their Documents		
Yes	No	Total
142	160	302
Percentage of the Respondents Who Tried to Amend Their Documents		
Yes	No	Total (%)
47.02	52.98	100

**Figure No. 5.29**

Which Documents They Want to Amend			
Voter Card	Adhaar Card	Pan Card	Passport
142	142	99	1
Which Documents They Want to Amend (%)			
Voter Card	Aadhaar Card	Pan Card	Passport
100	100	69.72	0.7

**Figure No. 5.30**

The Number of Respondents Who Have Successfully Amended Their Documents			
No	Some Documents	All Documents	Total
8	134	0	142
The Percentage of Respondents Who Have Successfully Amended Their Documents			
No	Some Documents	All Documents	Total (%)
5.63	94.37	0	100

**Figure No. 5.31**

Which Documents They Successfully Amended					
Voter Card	Aadhaar Card	Pan Card	Passport	Driving Lisence	Others
132	33	3	0	0	0
Which Documents They Successfully Amended (%)					
Voter Card	Aadhaar Card	Pan Card	Passport	Driving Lisence	Others
98.5	24.63	2.24	0	0	0

**Figure No. 5.32**

Behavior of Neighbors towards the Respondents					
Very Good	Good	Moderate	Bad	Very Bad	Total
3	79	72	104	44	302
Behavior of Neighbors towards the Respondents (%)					
Very Good	Good	Moderate	Bad	Very Bad	Total (%)
1	26.16	23.84	34.43	14.57	100

**Figure No. 5.33**

Respondent's Feeling in Different Occasions					
Awesome	Ashamed	Angry	Shaky	Awkward	Total
40	4	19	32	207	302
Respondent's Feeling in Different Occasions (%)					
Awesome	Ashamed	Angry	Shaky	Awkward	Total (%)
13.24	1.32	6.3	10.6	68.54	100

**Figure No. 5.34**

Changing Behavior over Time after Hearing Respondent's Gender Identities & Sexual Orientations		
Yes	Not Applicable	Total
262	40	302
Changing Behavior over Time after Hearing Respondent's Gender Identities & Sexual Orientations (%)		
Yes	Not Applicable	Total (%)
86.75	13.25	100

**Figure No. 5.35**

Feeling Socially Marginalized		
Yes	No	Total
300	2	302
Feeling Socially Marginalized (%)		
Yes	No	Total (%)
99.34	0.66	100

**Figure No. 5.36**

Satisfaction Level about Life among the Respondents					
Very much satisfied	Satisfied	Medium	Dissatisfied	Very much Dissatisfied	Total
4	48	50	121	79	302
Satisfaction Level about Life among the Respondents (%)					
Very much satisfied	Satisfied	Medium	Dissatisfied	Very much Dissatisfied	Total (%)
1.32	15.89	16.55	40.1	26.16	100

**Figure No. 5.37**

Addicted to Smoking and Drinking and Taking Drugs among the Respondents		
Yes	No	Total
251	51	302
Addicted to Smoking and Drinking and Taking Drugs among the Respondents (%)		
Yes	No	Total (%)
83.11	16.89	100

**Figure No. 5.38**

Different Types of Addictions among the Respondents				
Cigarette+ Alcohol	Cigarette+ Sedatives	Alcohol+ Sedatives	Cigarette+ Alcohol+ Sedatives	Total
239	4	4	4	251
Different Types of Addictions among the Respondents (%)				
Cigarette+ Alcohol	Cigarette+ Sedatives	Alcohol+ Sedatives	Cigarette+ Alcohol+ Sedatives	Total (%)
95.23	1.59	1.59	1.59	100

**Figure No. 5.39**

How the Respondents Handle Different Situations in Their Workplaces					
Face every questions boldly and give all answers without hesitations	Feel shaky and can't give them proper answers	Always try to avoid colleagues and suffering from inferiority complex	Get angry when anybody asks personal questions	Feel depressed and suffering from anxiety in workplaces	Total
209	9	5	19	9	251
How the Respondents Handle Different Situations in Their Workplaces (%)					
Face every questions boldly and give all answers without hesitations	Feel shaky and can't give proper answers	Always try to avoid colleagues and suffering from inferiority complex	Get angry when anybody asks personal questions	Feel depressed and suffering from anxiety in workplaces	Total (%)
83.26	3.58	2	7.58	3.58	100

**Figure No. 5.40**

Think about Suicide among the Respondents					
Never Think	Almost Never	Sometimes	Almost Always	Always Think	Total
149	19	116	17	1	302
Think about Suicide among the Respondents (%)					
Never Think	Almost Never	Sometimes	Almost Always	Always Think	Total (%)
49.33	6.3	38.41	5.63	0.33	100

**Figure No. 5.41**

Suffering from Mental Health Diseases among the Respondents		
Suffering	Not Suffering	Total
200	102	302
Suffering from Mental Health Diseases among the Respondents (%)		
Suffering	Not Suffering	Total (%)
66.22	33.78	100

**Figure No. 5.42**

Different Types of Mental Health Diseases They Are Suffering from					
Depression	Anxiety	Depression and Anxiety	Depression and Gender Dysphoria	Depression, Anxiety and Gender Dysphoria	Total
2	2	101	1	94	200
Different Types of Mental Health Diseases They Are Suffering from (%)					
Only anxiety	Only depression	Depression and Anxiety	Depression and Gender Dysphoria	Depression, Anxiety and Gender Dysphoria	Total (%)
1	1	50.5	0.5	47	100



**Figure No. 5.43**

Ever Go to any Psychologists or Psychiatrists		
Yes	No	Total
215	87	302
Ever Go to any Psychologists or Psychiatrists (%)		
Yes	No	Total (%)
71.2	28.8	100

**Chapter-VI****Figure No. 6.1**

Respondents Who Are Associated with NGOs		
Yes	No	Total
189	113	302
Percentage of the Respondents Who Are Associated with NGOs		
Yes	No	Total (%)
62.58	37.42	100

**Figure No. 6.2**

Different NGOs and Number of the Respondents Who Are Associated with											
Not Mentioned	Prantakatha	Pratyay Gender Trust	Kolkata Rista	Ametie Trust	Nadia RanaghatSampriti	ATHB	Troyee	Pleqsus India	Vaarta Trust	SRS Solution	Total
28	15	8	11	31	40	10	8	13	18	7	189
Different NGOs and Percentage of the Respondents Who Are Associated with											
Not Mentioned	Prantakatha	Pratyay Gender Trust	Kolkata Rista	Ametie Trust	Nadia RanaghatSampriti	ATHB	Troyee	Pleqsus India	Vaarta Trust	SRS Solution	Total (%)
14.82	7.93	4.23	5.82	16.4	21.16	5.29	4.24	6.88	9.53	3.7	100

**Figure No. 6.3**

Engage in Trans Activism		
Yes	No	Total
176	126	302
Engage in Trans Activism (%)		
Yes	No	Total (%)
58.27	41.73	100

Source: Collected, Computed and Prepared by the Researcher.

## DATA TABLE OF CHI SQUARE TEST

Sl. No.	Name of the Gender & Sexual Minority Groups	After disclosing or knowing your GI, do you receive any torture from your family?	Getting any torture after disclosing your SO from home?	Do you face any bullying in your educational institution due to your GI/SO?	Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?	Do you face any harassment during travelling in public vehicles?	If you are working, then do you face any harassment in your workplace?	Do you feel that you are marginalized in our society?
1	1	3	1	3	3	5	1	1
2	1	2	1	5	3	5	1	1
3	1	2	1	3	4	4	3	1
4	1	2	1	3	4	4	3	1
5	1	2	1	3	4	4	3	1
6	1	2	1	3	3	4	3	1
7	1	2	1	3	3	4	3	1
8	1	2	1	3	3	4	4	1
9	1	2	1	3	3	4	0	1
10	1	2	1	3	3	4	0	1
11	1	2	1	5	3	4	4	1
12	1	2	1	5	3	4	4	1
13	1	2	1	3	3	4	4	1
14	1	2	1	3	4	4	4	1
15	1	2	1	3	4	4	4	1
16	1	2	1	5	4	4	4	1
17	1	2	1	5	4	4	4	1
18	1	2	1	5	4	4	4	1
19	4	1	1	5	4	1	3	1
20	4	1	1	5	4	1	4	1
21	4	1	1	5	4	1	4	1
22	4	1	1	5	4	1	4	1
23	4	1	1	5	4	1	4	1
24	4	1	1	5	4	1	4	1
25	4	1	1	5	4	1	4	1
26	4	1	1	5	4	1	4	1
27	4	1	1	5	4	1	4	1
28	4	1	1	5	4	1	4	1
29	4	1	1	5	4	1	4	1
30	4	1	1	5	4	1	0	1
31	4	1	1	5	4	2	4	1
32	4	1	1	5	4	2	4	1
33	4	1	1	5	4	2	4	1
34	4	1	1	5	4	2	5	1
35	4	1	1	5	4	2	5	1
36	4	1	1	5	3	2	5	1
37	4	1	1	5	4	2	4	1
38	4	1	1	5	3	2	4	1
39	4	1	3	5	3	2	4	1
40	4	1	1	5	3	2	4	1
41	4	1	1	5	3	1	4	1
42	4	1	1	5	3	1	3	1
43	4	1	1	5	4	1	4	1
44	4	1	1	5	4	1	4	1
45	4	1	1	5	3	1	4	1
46	4	1	1	5	4	1	4	1
47	4	1	1	5	5	1	4	1
48	4	1	1	5	5	1	4	1
49	4	1	1	5	4	1	4	1
50	4	1	1	5	3	1	4	1

Sl. No.	Name of the Gender & Sexual Minority Groups	After disclosing or knowing your GI, do you receive any torture from your family?	Getting any torture after disclosing your SO from home?	Do you face any bullying in your educational institution due to your GI/SO?	Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?	Do you face any harassment during travelling in public vehicles?	If you are working, then do you face any harassment in your workplace?	Do you feel that you are marginalized in our society?
51	4	1	1	5	3	1	4	1
52	4	1	1	5	3	1	4	1
53	4	1	1	5	3	1	4	1
54	4	1	1	5	3	1	4	1
55	4	1	1	5	4	1	0	1
56	4	1	1	5	4	1	0	1
57	4	1	1	5	4	1	4	1
58	4	1	1	5	4	1	4	1
59	4	1	1	5	3	1	4	1
60	4	1	1	5	3	1	4	1
61	4	1	1	5	4	1	4	1
62	4	1	1	5	4	1	4	1
63	4	1	1	5	4	1	4	1
64	4	1	1	5	4	1	4	1
65	4	1	1	5	4	1	4	1
66	4	1	1	5	4	1	4	1
67	4	1	1	5	5	1	4	1
68	4	1	1	5	5	1	4	1
69	4	1	1	5	5	1	4	1
70	4	1	1	5	5	1	4	1
70	4	1	1	5	3	1	3	1
72	4	1	1	5	3	1	3	1
73	4	1	1	5	3	1	4	1
74	4	1	1	5	3	1	4	1
75	4	1	1	5	3	1	4	1
76	4	1	1	5	3	1	4	1
77	4	1	1	5	4	1	4	1
78	4	1	1	5	4	1	4	1
79	4	1	1	5	4	1	3	1
80	4	1	1	5	4	1	3	1
81	4	1	1	5	4	1	3	1
82	4	1	1	5	4	1	3	1
83	4	1	1	5	3	1	3	1
84	4	1	1	5	3	1	3	1
85	4	1	1	5	3	1	2	1
86	4	1	1	5	5	1	2	1
87	4	1	1	5	5	1	5	1
88	4	1	1	5	5	1	5	1
89	4	1	1	5	5	1	0	1
90	4	1	1	5	5	1	0	1
91	2	3	1	5	4	2	0	1
92	2	3	1	5	4	2	4	1
93	2	3	1	5	4	2	4	1
94	2	3	1	5	3	2	4	1
95	2	3	1	5	3	2	4	1
96	2	3	1	5	3	1	4	1
97	2	3	1	5	3	1	4	1
98	2	3	1	5	3	1	4	1
99	2	2	1	5	3	1	4	1
100	2	2	1	5	4	1	0	1
101	2	2	1	5	4	2	4	1
102	2	2	1	5	4	2	4	1

Sl. No.	Name of the Gender & Sexual Minority Groups	After disclosing or knowing your GI, do you receive any torture from your family?	Getting any torture after disclosing your SO from home?	Do you face any bullying in your educational institution due to your GI/SO?	Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?	Do you face any harassment during travelling in public vehicles?	If you are working, then do you face any harassment in your workplace?	Do you feel that you are marginalized in our society?
103	2	2	1	5	4	2	4	1
104	2	2	1	5	4	2	4	1
105	2	2	1	5	4	2	4	1
106	2	3	1	5	4	2	4	1
107	2	3	1	5	4	2	4	1
108	2	3	1	5	4	2	4	1
109	2	3	1	5	3	2	4	1
110	2	3	1	5	3	2	4	1
111	2	3	1	5	3	2	4	1
112	2	3	1	5	3	5	1	1
113	2	3	1	5	3	2	4	1
114	2	3	1	5	3	5	1	1
115	3	3	1	4	3	1	1	1
116	3	3	1	4	3	6	1	1
117	3	3	3	1	2	6	1	1
118	3	3	3	1	2	2	1	1
119	3	3	1	3	4	6	1	1
120	3	3	1	3	4	2	1	1
121	3	3	3	1	2	6	1	1
122	3	3	2	3	3	6	1	1
123	3	3	3	1	2	6	1	1
124	3	3	1	1	2	6	3	1
125	3	3	3	1	2	6	1	1
126	3	3	3	1	2	6	0	1
127	3	3	3	1	2	6	1	1
128	3	3	1	4	3	1	3	1
129	3	3	3	4	2	6	1	1
130	3	3	1	1	3	2	0	1
131	3	3	1	1	3	2	0	1
132	3	3	3	1	2	6	1	1
133	7	1	1	5	4	2	3	1
134	7	3	3	5	2	3	3	2
135	7	3	3	4	3	3	3	1
136	7	1	1	5	4	2	3	1
137	7	1	1	5	3	2	3	1
138	7	1	1	5	3	2	3	1
139	7	1	1	5	4	2	3	1
140	7	1	1	5	4	2	3	1
141	7	1	1	4	4	2	3	1
142	7	1	1	4	4	2	3	1
143	7	1	1	4	4	1	3	1
144	7	1	1	4	4	2	3	1
145	7	1	1	4	4	1	3	1
146	7	1	1	5	4	2	3	1
147	7	3	3	5	3	3	3	2
148	7	3	3	4	4	3	3	1
149	7	1	1	5	3	2	3	1
150	7	1	1	5	3	2	3	1
151	7	1	1	5	4	2	3	1
152	7	1	1	5	4	2	3	1
153	7	1	1	5	4	2	3	1
154	7	1	1	4	4	2	3	1

Sl. No.	Name of the Gender & Sexual Minority Groups	After disclosing or knowing your GI, do you receive any torture from your family?	Getting any torture after disclosing your SO from home?	Do you face any bullying in your educational institution due to your GI/SO?	Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?	Do you face any harassment during travelling in public vehicles?	If you are working, then do you face any harassment in your workplace?	Do you feel that you are marginalized in our society?
155	7	1	1	4	4	2	3	1
156	7	1	1	4	4	1	3	1
157	7	1	1	4	4	2	3	1
158	7	1	1	4	4	1	3	1
159	6	1	1	5	4	1	1	1
160	6	3	3	1	1	6	0	1
161	6	3	1	1	4	3	4	1
162	6	3	1	1	4	3	3	1
163	6	1	1	4	4	1	3	1
164	6	3	3	4	1	3	3	1
165	6	1	1	5	5	1	4	1
166	6	1	1	5	5	1	5	1
167	6	3	2	1	3	6	0	1
168	6	1	1	5	4	1	5	1
169	6	1	1	5	4	1	5	1
170	6	2	1	5	2	3	5	1
171	6	2	1	5	2	3	5	1
172	6	1	1	3	2	5	4	1
173	6	1	1	5	5	1	5	1
174	6	1	1	5	5	1	5	1
175	6	1	1	5	4	1	5	1
176	6	1	1	5	4	1	5	1
177	6	1	1	5	4	1	0	1
178	6	3	1	1	4	6	4	1
179	6	3	1	1	4	4	0	1
180	6	1	1	3	4	3	3	1
181	6	3	3	3	2	6	3	1
182	6	1	1	3	4	2	3	1
183	6	1	1	3	4	2	3	1
184	6	1	1	3	5	1	4	1
185	6	3	1	3	4	1	4	1
186	6	3	3	1	2	6	3	1
187	6	3	1	3	4	3	3	1
188	6	3	1	3	4	3	4	1
189	5	1	1	5	4	1	5	1
190	5	1	1	5	4	1	5	1
191	5	3	3	6	0	1	5	1
192	5	1	3	4	5	1	5	1
193	5	1	1	5	4	1	5	1
194	5	3	3	6	0	1	5	1
195	5	3	3	6	0	1	5	1
196	5	2	3	4	4	5	0	1
197	5	1	1	5	4	1	5	1
198	5	1	1	5	4	1	5	1
199	5	1	1	5	4	1	0	1
200	5	1	1	6	4	1	5	1
201	5	3	3	6	0	1	5	1
202	5	3	1	6	0	1	5	1
203	5	3	1	6	4	1	5	1
204	5	1	1	4	4	1	5	1
205	5	1	1	4	4	1	5	1
206	5	1	1	6	5	1	5	1

Sl. No.	Name of the Gender & Sexual Minority Groups	After disclosing or knowing your GI, do you receive any torture from your family?	Getting any torture after disclosing your SO from home?	Do you face any bullying in your educational institution due to your GI/SO?	Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?	Do you face any harassment during travelling in public vehicles?	If you are working, then do you face any harassment in your workplace?	Do you feel that you are marginalized in our society?
207	5	1	1	6	5	1	5	1
208	5	1	1	6	5	1	5	1
209	5	2	1	6	5	1	5	1
210	5	2	1	6	5	1	5	1
211	5	1	1	6	5	1	5	1
212	5	1	1	6	5	1	5	1
213	5	2	3	6	5	1	5	1
214	5	2	3	6	5	1	5	1
215	5	2	3	6	5	1	5	1
216	5	2	3	6	5	1	5	1
217	5	1	1	6	5	1	5	1
218	5	1	1	6	5	1	5	1
219	5	1	1	6	5	1	5	1
220	5	1	1	6	5	1	5	1
221	5	1	1	6	5	1	5	1
222	5	1	1	6	5	1	5	1
223	5	2	3	6	5	1	5	1
224	5	2	3	6	5	1	5	1
225	5	2	3	6	5	1	5	1
226	7	3	3	5	4	2	0	1
227	4	1	1	5	4	1	3	1
228	4	1	1	5	2	1	5	1
229	6	1	1	5	3	3	3	1
230	6	2	1	4	3	4	4	1
231	4	1	1	5	4	4	4	1
232	1	2	1	4	3	5	1	1
233	5	3	2	6	4	1	5	1
234	5	3	2	6	4	1	5	1
235	5	3	2	6	4	1	5	1
236	5	3	2	6	4	1	5	1
237	5	3	2	6	4	1	5	1
238	5	3	2	6	4	1	5	1
239	5	3	2	6	4	1	5	1
240	5	3	2	6	4	1	5	1
241	5	3	2	6	4	1	5	1
242	5	3	2	6	4	1	5	1
243	7	3	3	5	3	2	0	1
244	7	3	3	5	3	2	0	1
245	7	3	3	5	3	2	0	1
246	7	3	3	5	3	1	0	1
247	7	3	3	5	3	2	0	1
248	7	3	3	5	3	2	0	1
249	7	3	3	5	3	2	0	1
250	7	3	3	5	3	1	0	1
251	7	3	3	5	3	1	0	1
252	7	3	3	5	3	2	0	1
253	5	1	1	5	4	1	5	1
254	5	1	1	5	4	1	5	1
255	5	1	1	5	4	1	5	1
256	5	1	1	5	4	1	5	1
257	5	1	1	5	4	1	5	1
258	5	1	1	5	4	1	5	1

Sl. No.	Name of the Gender & Sexual Minority Groups	After disclosing or knowing your GI, do you receive any torture from your family?	Getting any torture after disclosing your SO from home?	Do you face any bullying in your educational institution due to your GI/SO?	Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?	Do you face any harassment during travelling in public vehicles?	If you are working, then do you face any harassment in your workplace?	Do you feel that you are marginalized in our society?
259	5	1	1	5	4	1	5	1
260	5	1	1	5	4	1	5	1
261	5	1	1	5	4	1	5	1
262	5	1	1	5	4	1	5	1
263	5	3	3	6	5	1	5	1
264	5	3	3	6	5	1	5	1
265	5	3	3	6	5	1	5	1
266	5	3	3	6	5	1	5	1
267	5	3	3	6	4	1	5	1
268	5	3	3	6	4	1	5	1
269	5	3	3	6	4	1	5	1
270	5	3	3	6	4	1	5	1
271	5	3	3	6	4	1	5	1
272	5	3	3	6	5	1	5	1
273	6	3	3	1	2	6	0	1
274	6	1	1	4	2	5	0	1
275	6	1	1	5	3	1	5	1
276	6	1	1	5	3	1	5	1
277	6	1	1	5	4	1	5	1
278	6	3	1	4	3	3	4	1
279	6	3	1	4	3	3	4	1
280	6	3	1	4	3	3	4	1
281	6	1	1	4	4	3	4	1
282	6	3	3	1	2	6	1	1
283	4	1	1	5	4	1	5	1
284	5	1	1	6	5	1	5	1
285	5	3	3	6	5	1	2	1
286	4	1	1	5	4	1	4	1
287	5	1	1	5	4	1	4	1
288	5	1	1	5	4	1	4	1
289	4	1	1	5	4	1	5	1
290	4	1	1	5	4	1	5	1
291	4	1	1	5	4	1	5	1
292	4	1	1	5	4	1	4	1
293	4	1	1	5	5	1	5	1
294	4	1	1	5	4	2	5	1
295	4	1	1	5	4	2	4	1
296	4	3	3	5	4	2	4	1
297	4	1	1	5	4	2	4	1
298	4	1	1	5	4	2	4	1
299	4	1	1	5	4	1	4	1
300	4	1	1	5	4	1	3	1
301	4	1	1	5	4	1	4	1
302	4	1	1	5	4	1	4	1

Source: Collected, Computed and Prepared by the Researcher.

## CODE SHEET OF CHI-SQUARE TEST

1. L
2. G
3. B
4. T
5. I
6. Q
7. K

**After disclosing or knowing your GI, do you receive any torture from your family?**

Yes-1

No-2

NA-3

**Getting any torture after disclosing your SO from home?**

Yes-1

No-2

NA-3

**Do you face any bullying in your educational institution due to your GI/SO?**

Never-1

Rarely-2

Sometimes-3

Frequently-4

Very Frequently-5

Not Applicable-6

**Do you face any harassment during travelling in public vehicles?**

Very Frequently-1

Frequently-2

Sometimes-3

Often-4

Rare-5

Never-6

**If you are working, then do you face any harassment in your workplace?**

Never-1



Rarely-2

Sometimes-3

Frequently-4

Very Frequently-5

Not Applicable-0

**Do you ever go to any Dr. for your treatment in your health issue? How was his / her behaviour ?**

Very Good-1

Good-2

Medium-3

Bad-4

Very Bad-5

Not Applicable-0

**Do you feel that you are marginalized in our society?**

Yes-1

No-2

## Appendix- 2

### Secondary Data: Collected from Census Office (Census of India, 2011)

Sl. No.	Names of States and Union Territories of India	Total 'Other' Population
1	Andaman & Nicobar Islands	47
2	Andhra Pradesh	43769
3	Arunachal Pradesh	495
4	Assam	11374
5	Bihar	40827
6	Chandigarh	142
7	Chhattisgarh	6591
8	Dadra & Nagar Haveli	43
9	Daman & Diu	59
10	Goa	398
11	Gujarat	11544
12	Haryana	8422
13	Himachal Pradesh	2051
14	Jammu & Kashmir	4137
15	Jharkhand	13463
16	Karnataka	20266
17	Kerala	3902
18	Lakshadweep	2
19	Madhya Pradesh	29597
20	Maharashtra	40891
21	Manipur	1343
22	Meghalaya	627
23	Mizoram	166
24	Nagaland	398
25	NCT of Delhi	4213
26	Odisha	20332
27	Puducherry	252
28	Punjab	10243
29	Rajasthan	16517
30	Sikkim	126
31	Tamil Nadu	22364
32	Tripura	833
33	Uttarakhand	4555
34	Uttar Pradesh	137465
35	West Bengal	30349
<b>INDIA</b>		<b>487803</b>

Source: Census of India, 2011

AS PASSED BY LOK SABHA ON 17.12.2018

**Bill No. 210-C of 2016**

THE TRANSGENDER PERSONS (PROTECTION OF RIGHTS)  
BILL, 2018

A

BILL

*to provide for protection of rights of transgender persons and their welfare and for matters connected therewith and incidental thereto.*

BE it enacted by Parliament in the Sixty-ninth Year of the Republic of India as follows:—

CHAPTER I

PRELIMINARY

- 5 2018. **1.** (1) This Act may be called the Transgender Persons (Protection of Rights) Act, Short title, extent and commencement.
- (2) It extends to the whole of India.
- (3) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.
- 10 **2.** In this Act, unless the context otherwise requires,— Definitions.
- (a) "appropriate Government" means,—
- (i) in relation to the Central Government or any establishment, wholly or substantially financed by that Government, the Central Government;
- (ii) in relation to a State Government or any establishment, wholly or substantially financed by that Government, or any local authority, the State Government;
- 15

(b) "establishment" means—

(i) any body or authority established by or under a Central Act or a State Act or an authority or a body owned or controlled or aided by the Government or a local authority, or a Government company as defined in section 2 of the Companies Act, 2013, and includes a Department of the Government; or

5 18 of 2013.

(ii) any company or body corporate or association or body of individuals, firm, cooperative or other society, association, trust, agency, institution;

(c) "family" means a group of people related by blood or marriage or by adoption made in accordance with law;

(d) "inclusive education" means a system of education wherein transgender students learn together with other students without fear of discrimination, neglect, harassment or intimidation and the system of teaching and learning is suitably adapted to meet the learning needs of such students;

(e) "institution" means an institution, whether public or private, for the reception, care, protection, education, training, or any other service of transgender persons;

(f) "local authority" means the municipal corporation or municipality or Panchayat or any other local body constituted under any law for the time being in force for providing municipal services or basic services, as the case may be, in respect of areas under its jurisdiction;

(g) "National Council" means the National Council for Transgender Persons established under section 17;

(h) "notification" means a notification published in the Official Gazette;

(i) "person with intersex variations" means a person who at birth shows variation in his or her primary sexual characteristics, external genitalia, chromosomes or hormones from normative standard of male or female body;

(j) "prescribed" means prescribed by rules made by the appropriate Government under this Act;

(k) "transgender person" means a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, gender-queer and person having such socio-cultural identities as kinner, hijra, aravani and jogta.

## CHAPTER II

### PROHIBITION OF CERTAIN ACTS

35

Prohibition  
against  
discrimination.

**3.** No person or establishment shall discriminate against a transgender person on any of the following grounds, namely:—

(a) the denial, or discontinuation of, or unfair treatment in, educational establishments and services thereof;

(b) the unfair treatment in, or in relation to, employment or occupation;

(c) the denial of, or termination from, employment or occupation;

(d) the denial or discontinuation of, or unfair treatment in, healthcare services;

(e) the denial or discontinuation of, or unfair treatment with regard to, access to, or provision or enjoyment or use of any goods, accommodation, service, facility, benefit, privilege or opportunity dedicated to the use of the general public or customarily available to the public;

(f) the denial, or, discontinuation of, unfair treatment with regard to the right of movement;

(g) the denial or discontinuation of, or unfair treatment with regard to the right to reside, purchase, rent, or otherwise occupy any property;

(h) the denial or discontinuation of, or unfair treatment in, the opportunity to stand for or hold public or private office;

5 (i) the denial of access to, removal from, or unfair treatment in, Government or private establishment in whose care or custody a transgender person may be.

CHAPTER III

RECOGNITION OF IDENTITY OF TRANSGENDER PERSONS

10 **4.** (1) A transgender person shall have a right to be recognised as such, in accordance with the provisions of this Act. Recognition of identity of transgender person.

(2) A person recognised as transgender under sub-section (1) shall have a right to self-perceived gender identity.

15 **5.** A transgender person may make an application to the District Magistrate for issuing a certificate of identity as a transgender person, in such form and manner, and accompanied with such documents, as may be prescribed: Application for certificate of identity.

Provided that in the case of a minor child, such application shall be made by a parent or guardian of such child.

20 **6.** (1) On the receipt of an application under section 5, the District Magistrate shall refer such application to the District Screening Committee to be constituted by the appropriate Government for the purpose of recognition of transgender persons. District Screening Committee.

(2) The District Screening Committee referred to in sub-section (1) shall comprise—

(a) the Chief Medical Officer;

(b) District Social Welfare Officer;

(c) a Psychologist or Psychiatrist;

25 (d) a representative of transgender community; and

(e) an officer of the appropriate Government to be nominated by that Government.

30 **7.** (1) The District Magistrate shall issue to the applicant under section 5 a certificate of identity as transgender person on the basis of the recommendations made by the District Screening Committee in such form and manner, within such time, as may be prescribed, indicating the gender of such person as transgender. Issue of certificate of identity.

(2) The gender of transgender person shall be recorded in all official documents in accordance with certificate issued under sub-section (1).

(3) A certificate issued to a person under sub-section (1) shall confer rights and be a proof of recognition of his identity as a transgender person.

35 **8.** (1) After the issue of a certificate under sub-section (1) of section 7, if a transgender person undergoes surgery to change gender either as a male or female, such person may make an application, alongwith a certificate issued to that effect by the Medical Superintendent or Chief Medical Officer of the medical institution in which that person has undergone surgery, to the District Magistrate for revised certificate, in such form and manner as may be prescribed. Change in gender.

(2) The District Magistrate shall, on receipt of an application alongwith the Certificate under sub-section (1), and on being satisfied with the correctness of such certificate issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.

45 (3) The person who has been issued a certificate of identity under section 7 or a revised certificate shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person:

Provided that such change in gender and the issue of revised certificate under sub-section (2) shall not affect the rights and entitlements of such person under this Act.

#### CHAPTER IV

##### WELFARE MEASURES BY GOVERNMENT

- Obligation of the appropriate Government. 5
- 9.** (1) The appropriate Government shall take steps to secure full and effective participation of transgender persons and their inclusion in society.
- (2) The appropriate Government shall take such measures as may be necessary to protect the rights and interests of the transgender person, and facilitate their access to welfare schemes framed by that Government.
- (3) The appropriate Government shall formulate welfare schemes and programmes which are transgender sensitive, non-stigmatising and non-discriminatory. 10
- (4) The appropriate Government shall take steps for the rescue, protection and rehabilitation of transgender persons to address the needs of such person.
- (5) The appropriate Government shall take appropriate measures to promote and protect the right of transgender persons to participate in cultural and recreational activities. 15

#### CHAPTER V

##### OBLIGATION OF ESTABLISHMENTS AND OTHER PERSON

- Non discrimination in employment. 20
- 10.** No establishment shall discriminate against any transgender person in any matter relating to employment including, but not limited to, recruitment, promotion and other related issues.
- Obligations of establishments. 20
- 11.** Every establishment shall ensure compliance with the provisions of this Act and provide such facilities to the transgender person as may be prescribed.
- Grievance redressal mechanism. 25
- 12.** Every establishment shall designate a person to be a complaint officer to deal with the complaints relating to violation of the provisions of this Act.
- Right of residence. 25
- 13.** (1) No child shall be separated from parents or immediate family on the ground of being a transgender, except on an order of a competent court, in the interest of such child.
- (2) Every transgender person shall have—
- (a) a right to reside in the house-hold where parent or immediate family members reside;
- (b) a right not to be excluded from such house-hold or any part thereof; 30
- (c) a right to enjoy and use the facilities of such house-hold in a non-discriminatory manner.
- (3) Where any parent or a member of his immediate family is unable to take care of a transgender, the competent court shall by an order direct such person to be placed in rehabilitation centre. 35

#### CHAPTER VI

##### EDUCATION, SOCIAL SECURITY AND HEALTH OF TRANSGENDER PERSON

- Obligation of educational institutions to provide inclusive education to transgender persons. 40
- 14.** Every educational institution funded or recognised by the appropriate Government shall provide inclusive education and opportunities for sports, recreation and leisure activities without discrimination on an equal basis with others.

15. The appropriate Government shall formulate welfare schemes and programmes to facilitate and support livelihood for transgender persons including their vocational training and self-employment.

Vocational training and self-employment.

16. The appropriate Government shall take the following measures in relation to the transgender persons, namely:—

Health care facilities.

(a) to set up separate human immunodeficiency virus Sero-surveillance Centres to conduct sero-surveillance for such persons in accordance with the guidelines issued by the National AIDS Control Organisation in this behalf;

(b) to provide for medical care facility including sex reassignment surgery and hormonal therapy;

(c) before and after sex reassignment surgery and hormonal therapy counselling;

(d) bring out a Health Manual related to sex reassignment surgery in accordance with the World Profession Association for Transgender Health guidelines;

(e) review of medical curriculum and research for doctors to address their specific health issues;

(f) to facilitate access to the transgender persons in the hospitals and other healthcare institutions and centres;

(g) provision for coverage of medical expenses by a comprehensive insurance scheme for Sex Reassignment Surgery, hormonal therapy, laser therapy or any other health issues of transgender persons.

## CHAPTER VII

### NATIONAL COUNCIL FOR TRANSGENDER PERSONS

17. (1) The Central Government shall by notification constitute a National Council for Transgender to exercise the powers conferred on, and to perform the functions assigned to it, under this Act.

National Council for Transgender.

(2) The National Council shall consist of—

(a) the Union Minister in-charge of the Ministry of Social Justice and Empowerment, Chairperson, *ex officio*;

(b) the Minister of State, in-charge of the Ministry of Social Justice and Empowerment in the Government, Vice-Chairperson, *ex officio*;

(c) Secretary to the Government of India in-charge of the Ministry of Social Justice and Empowerment, Member, *ex officio*;

(d) one representative each from the Ministries of Health and Family Welfare, Home Affairs, Housing and Urban Affairs, Minority Affairs, Human Resources Development, Rural Development, Labour and Employment and Departments of Legal Affairs, Pensions and Pensioners Welfare and National Institute for Transforming India Aayog, not below the rank of Joint Secretaries to the Government of India, Members, *ex officio*;

(e) one representative each from the National Human Rights Commission and National Commission for Women, not below the rank of Joint Secretaries to the Government of India, Members, *ex officio*;

(f) representatives of the State Governments and Union territories by rotation, one each from the North, South, East, West and North-East regions, to be nominated by the Central Government, Members, *ex officio*;

(g) five representatives of transgender community, by rotation, from the State Governments and Union territories, one each from the North, South, East, West and North-East regions, to be nominated by the Central Government, Members;

(h) five experts, to represent non-governmental organisations or associations, working for the welfare of transgender persons, to be nominated by the Central Government, Members;

(i) Joint Secretary to the Government of India in the Ministry of Social Justice and Empowerment dealing with the welfare of the transgender persons, Member-Secretary, *ex officio*. 5

(3) A Member of National Council, other than *ex officio* member, shall hold office for a term of three years from the date of his nomination.

Functions of the Council.

**18.** The National Council shall perform the following functions, namely:—

(a) to advise the Central Government on the formulation of policies, programmes, legislation and projects with respect to transgender persons; 10

(b) to monitor and evaluate the impact of policies and programmes designed for achieving equality and full participation of transgender persons;

(c) to review and coordinate the activities of all the Departments of Government and other Governmental and non-Governmental Organisations which are dealing with matters relating to transgender persons; 15

(d) to redress the grievances of transgender persons;

(e) to perform such other functions as may be prescribed by the Central Government.

#### CHAPTER VIII

20

#### OFFENCES AND PENALTIES

Offences and penalties.

**19.** Whoever,—

(a) compels or entices a transgender person to indulge in the act of begging or other similar forms of forced or bonded labour other than any compulsory service for public purposes imposed by Government; 25

(b) denies a transgender person the right of passage to a public place or obstructs such person from using or having access to a public place to which other members have access to or a right to use;

(c) forces or causes a transgender person to leave house-hold, village or other place of residence; 30

(d) harms or injures or endangers the life, safety, health, or well-being, whether mental or physical, of a transgender person or tends to do acts including causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse,

shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine. 35

#### CHAPTER IX

#### MISCELLANEOUS

Grants by Central Government.

**20.** The Central Government shall, from time to time, after due appropriation made by Parliament by law in this behalf, credit such sums to the National Council as may be necessary for carrying out the purposes of this Act. 40

Act not in derogation of any other law.

**21.** The provisions of this Act shall be in addition to, and not derogation of, any other law for the time being in force.

Protection of action taken in good faith.

**22.** No suit, prosecution or other legal proceeding shall lie against the appropriate Government or any local authority or any officer of the Government in respect of anything which is in good faith done or intended to be done in pursuance of the provisions of this Act and any rules made thereunder. 45



**23.** (1) The appropriate Government may, subject to the condition of previous publication, by notification, make rules for carrying out the provisions of this Act.

Power of appropriate Government to make rules.

(2) In particular, and without prejudice to the generality of the foregoing powers, such rules may provide for all or any of the following matters, namely:—

- 5           (a) the form and manner in which an application shall be made under section 5;
- (b) the form and manner in which a certificate of identity is issued under sub-section (1) of section 7;
- (c) the form and manner in which an application shall be made under sub-section (1) of section 8;
- 10           (d) the form, period and manner for issuing revised certificate under sub-section (2) of section 8;
- (e) facilities to be provided under section 11;
- (f) other functions of the National Council under clause (d) of section 18;
- (g) any other matter which is required to be or may be prescribed.

15           (3) Every rule made by the Central Government under sub-section (1), shall be laid, as soon as may be after it is made, before each House of Parliament, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions, and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, both Houses agree in making any modification in the rule or

20 both Houses agree that the rule should not be made, the rule shall thereafter have effect only in such modified form or be of no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.

25           (4) Every rule made by the State Government under sub-section (1), shall be laid, as soon as may be after it is made, before each House of the State Legislature where it consists of two Houses, or where such legislature consists of one House, before that House.

30           **24.** (1) If any difficulty arises in giving effect to the provisions of this Act, the Central Government may, by order published in the Official Gazette, make such provisions, not inconsistent with the provisions of this Act as appear to it to be necessary or expedient for removing the difficulty:

Power to remove difficulties.

Provided that no such order shall be made after the expiry of the period of two years from the date of commencement of this Act.

(2) Every order made under this section shall, as soon as may be after it is made, be laid before each House of Parliament.

## CRIMINAL TRIBES' ACT, 1871.

### CONTENTS.

Preamble.

#### SECTIONS.

1. Short title.
- Commencement.
- Local extent.

#### PART I.

##### CRIMINAL TRIBES.

2. Local Government to report what tribes should be declared criminal.
3. Report to contain certain particulars.
4. Occupation of wandering tribe to be stated ; also proposed residence and means of livelihood.
5. Notification declaring tribe to be criminal.
6. Bar of jurisdiction of Courts in questions relating to notification.
7. Register of members of such tribes.
8. Procedure in making register.
9. Penalties for failing to appear, refusing or giving false information.
10. Charge of register.  
Reporting desirable alterations.
11. By whom alterations to be made.  
Notice to persons affected.
12. Complaints of entries in register.
13. Settlement of tribe in place prescribed by Local Government.
14. Removal to other place.
15. Arrangements to be made prior to settlement or removal.
16. Transfer of register of persons ordered to be removed.
17. Power to place tribe in reformatory settlement.
18. Power to make rules.
19. Penalties for breach of rules.
20. Arrest of registered person found beyond prescribed limits.
21. Duties of Village-Headmen, Village-Watchmen, &c.
22. Penalty

1871.]

*Criminal Tribes.*

347

## SECTIONS.

- 22. Penalty for breach of such duties.
- 23. Indemnity for past registrations and detentions.

---

 PART II.

## EUNUCHS.

- 24. Registers of eunuchs and their property.  
'Eunuch' defined.
- 25. Complaints of entries in register.
- 26. Penalty on registered eunuch appearing in female clothes;  
or dancing in public, or for hire.
- 27. Penalty on registered eunuch keeping boy under sixteen.
- 28. Maintenance and education of boys whose parents cannot be found.
- 29. Disabilities of registered eunuchs.
- 30. Power to require information as to registered eunuchs property.  
Penalty for refusing such information.
- 31. Rules for making and keeping up registers of eunuchs.

1871. ]

*Criminal Tribes.*

355

regarded by such Local Governments as criminal tribes; and no suit or other proceeding shall be maintained against any such Magistrate or other person in respect of anything so done.

---

PART II.

EUNUCHS.

24. The Local Government shall cause the following registers to be made and kept up by such officer as, from time to time, it appoints in this behalf:—

Registers of eunuchs and their property.

(a) a register of the names and residences of all eunuchs residing in any town or place to which the Local Government specially extends this Part of this Act, who are reasonably suspected of kidnapping or castrating children, or of committing offences under section three hundred and seventy-seven of the Indian Penal Code, or of abetting the commission of any of the said offences; and

(b) a register of the property of such of the said eunuchs as, under the provisions hereinafter contained, are required to furnish information as to their property.

The term 'eunuch' shall, for the purposes of this Act, be deemed to include all persons of the male sex who admit themselves, or on medical inspection clearly appear, to be impotent.

'Eunuch' defined.

25. Any person deeming himself aggrieved by any entry made or proposed to be made in such register, either when the register is first made or subsequently, may complain to the said officer, who shall enter such person's name, or erase it, or retain it, as he sees fit.

Complaints of entries in register.

Every order for erasure of such person's name shall state the grounds on which such person's name is erased.

The Commissioner shall have power to review any order passed by such officer on such complaint, either on appeal by the complainant or otherwise.

26. Any

Penalty on registered eunuch appearing in female clothes;

or dancing in public, or for hire.

**26.** Any eunuch so registered who appears, dressed or ornamented like a woman, in a public street or place, or in any other place, with the intention of being seen from a public street or place,

or who dances or plays music, or takes part in any public exhibition, in a public street or place or for hire in a private house,

may be arrested without warrant, and shall be punished with imprisonment of either description for a term which may extend to two years, or with fine, or with both.

Penalty on registered eunuch keeping boy under sixteen.

**27.** Any eunuch so registered who has in his charge, or keeps in the house in which he resides, or under his control, any boy who has not completed the age of sixteen years, shall be punished with imprisonment for a term which may extend to two years, or with fine, or with both.

Maintenance and education of boys whose parents cannot be found.

**28.** The Magistrate may direct that any such boy shall be returned to his parents or guardians, if they can be discovered. If they cannot be discovered, the Magistrate may make such arrangements as he thinks necessary for the maintenance and education of such boy, and may direct that the whole or any part of a fine inflicted under section twenty-seven may be employed in defraying the cost of such arrangements.

The Local Government may direct out of what local or municipal fund so much of the cost of such arrangements as is not met by the fine imposed, shall be defrayed.

Disabilities of registered eunuchs.

**29.** No eunuch so registered shall be capable—

(a) of being or acting as guardian to any minor,

(b) of making a gift,

(c) of making a will, or

(d) of adopting a son.

Power to require information as to registered eunuch's property.

**30.** Any officer authorized by the Local Government in this behalf may, from time to time, require any eunuch so registered to furnish information as to all property, whether movable or immovable, of or to which he is possessed or entitled, or which is held in trust for him.

Any

1871.]

*Criminal Tribes.*

357

Any such eunuch intentionally omitting to furnish such information, or furnishing, as true, information on the subject which he knows, or has reason to believe, to be false, shall be deemed to have committed an offence under section one hundred and seventy-six or one hundred and seventy-seven of the Indian Penal Code, as the case may be.

Penalty for refusing such information.

**31.** The Local Government may, with the previous sanction of the Governor General in Council, make rules for the making and keeping up and charge of registers made under this Part of the Act.

Rules for making and keeping up registers of eunuchs.

THE TRANSGENDER PERSONS (PROTECTION OF RIGHTS) ACT, 2019

---

ARRANGEMENT OF SECTIONS

---

SECTIONS

CHAPTER I

PRELIMINARY

1. Short title, extent and commencement.
2. Definitions.

CHAPTER II

PROHIBITION AGAINST DISCRIMINATION

3. Prohibition against discrimination.

CHAPTER III

RECOGNITION OF IDENTITY OF TRANSGENDER PERSONS

4. Recognition of identity of transgender person.
5. Application for certificate of identity.
6. Issue of certificate of identity.
7. Change in gender.

CHAPTER IV

WELFARE MEASURES BY GOVERNMENT

8. Obligation of appropriate Government.

CHAPTER V

OBLIGATION OF ESTABLISHMENTS AND OTHER PERSONS

9. Non-discrimination in employment.
10. Obligations of establishments.
11. Grievance redressal mechanism.
12. Right of residence.

CHAPTER VI

EDUCATION, SOCIAL SECURITY AND HEALTH OF TRANSGENDER PERSONS

13. Obligation of educational institutions to provide inclusive education to transgender persons.
14. Vocational training and self-employment.
15. Healthcare facilities.

CHAPTER VII

NATIONAL COUNCIL FOR TRANSGENDER PERSONS

16. National Council for Transgender Persons.
17. Functions of Council.

CHAPTER VIII

OFFENCES AND PENALTIES

18. Offences and penalties.

CHAPTER IX  
MISCELLANEOUS

SECTIONS

19. Grants by Central Government.
20. Act not in derogation of any other law.
21. Protection of action taken in good faith.
22. Power of appropriate Government to make rules.
23. Power to remove difficulties.



THE TRANSGENDER PERSONS (PROTECTION OF RIGHTS) ACT, 2019

ACT NO. 40 OF 2019

[5th December, 2019.]

An Act to provide for protection of rights of transgender persons and their welfare and for matters connected therewith and incidental thereto.

BE it enacted by Parliament in the Seventieth Year of the Republic of India as follows:—

CHAPTER I

PRELIMINARY

**1. Short title, extent and commencement.**—(1) This Act may be called the Transgender Persons (Protection of Rights) Act, 2019.

(2) It extends to the whole of India.

(3) It shall come into force on such date<sup>1</sup> as the Central Government may, by notification in the Official Gazette, appoint.

**2. Definitions.**—In this Act, unless the context otherwise requires,—

(a) “appropriate Government” means, —

(i) in relation to the Central Government or any establishment, wholly or substantially financed by that Government, the Central Government;

(ii) in relation to a State Government or any establishment, wholly or substantially financed by that Government, or any local authority, the State Government;

(b) “establishment” means—

(i) any body or authority established by or under a Central Act or a State Act or an authority or a body owned or controlled or aided by the Government or a local authority, or a Government company as defined in section 2 of the Companies Act, 2013 (18 of 2013), and includes a Department of the Government; or

(ii) any company or body corporate or association or body of individuals, firm, cooperative or other society, association, trust, agency, institution;

(c) “family” means a group of people related by blood or marriage or by adoption made in accordance with law;

(d) “inclusive education” means a system of education wherein transgender students learn together with other students without fear of discrimination, neglect, harassment or intimidation and the system of teaching and learning is suitably adapted to meet the learning needs of such students;

(e) “institution” means an institution, whether public or private, for the reception, care, protection, education, training or any other service of transgender persons;

(f) “local authority” means the municipal corporation or Municipality or Panchayat or any other local body constituted under any law for the time being in force for providing municipal services or basic services, as the case may be, in respect of areas under its jurisdiction;

(g) “National Council” means the National Council for Transgender Persons established under section 16;

(h) “notification” means a notification published in the Official Gazette;

---

1. 10th January, 2020, *vide* notification No. S.O. 135(E), dated 10th January, 2020, *see* Gazette of India, Extraordinary, Part II, sec. 2(ii).

(i) “person with intersex variations” means a person who at birth shows variation in his or her primary sexual characteristics, external genitalia, chromosomes or hormones from normative standard of male or female body;

(j) “prescribed” means prescribed by rules made by the appropriate Government under this Act; and

(k) “transgender person” means a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities as *kinner*, *hijra*, *aravani* and *jogta*.

## CHAPTER II

### PROHIBITION AGAINST DISCRIMINATION

**3. Prohibition against discrimination.**—No person or establishment shall discriminate against a transgender person on any of the following grounds, namely:—

(a) the denial, or discontinuation of, or unfair treatment in, educational establishments and services thereof;

(b) the unfair treatment in, or in relation to, employment or occupation;

(c) the denial of, or termination from, employment or occupation;

(d) the denial or discontinuation of, or unfair treatment in, healthcare services;

(e) the denial or discontinuation of, or unfair treatment with regard to, access to, or provision or enjoyment or use of any goods, accommodation, service, facility, benefit, privilege or opportunity dedicated to the use of the general public or customarily available to the public;

(f) the denial or discontinuation of, or unfair treatment with regard to the right of movement;

(g) the denial or discontinuation of, or unfair treatment with regard to the right to reside, purchase, rent, or otherwise occupy any property;

(h) the denial or discontinuation of, or unfair treatment in, the opportunity to stand for or hold public or private office; and

(i) the denial of access to, removal from, or unfair treatment in, Government or private establishment in whose care or custody a transgender person may be.

## CHAPTER III

### RECOGNITION OF IDENTITY OF TRANSGENDER PERSONS

**4. Recognition of identity of transgender person.**—(1) A transgender person shall have a right to be recognised as such, in accordance with the provisions of this Act.

(2) A person recognised as transgender under sub-section (1) shall have a right to self-perceived gender identity.

**5. Application for certificate of identity.**—A transgender person may make an application to the District Magistrate for issuing a certificate of identity as a transgender person, in such form and manner, and accompanied with such documents, as may be prescribed:

Provided that in the case of a minor child, such application shall be made by a parent or guardian of such child.

**6. Issue of certificate of identity.**—(1) The District Magistrate shall issue to the applicant under section 5, a certificate of identity as transgender person after following such procedure and in such form and manner, within such time, as may be prescribed indicating the gender of such person as transgender.

(2) The gender of transgender person shall be recorded in all official documents in accordance with certificate issued under sub-section (1).

(3) A certificate issued to a person under sub-section (1) shall confer rights and be a proof of recognition of his identity as a transgender person.

**7. Change in gender.**—(1) After the issue of a certificate under sub-section (1) of section 6, if a transgender person undergoes surgery to change gender either as a male or female, such person may make an application, along with a certificate issued to that effect by the Medical Superintendent or Chief Medical Officer of the medical institution in which that person has undergone surgery, to the District Magistrate for revised certificate, in such form and manner as may be prescribed.

(2) The District Magistrate shall, on receipt of an application along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and on being satisfied with the correctness of such certificate, issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.

(3) The person who has been issued a certificate of identity under section 6 or a revised certificate under sub-section (2) shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person:

Provided that such change in gender and the issue of revised certificate under sub-section (2) shall not affect the rights and entitlements of such person under this Act.

#### CHAPTER IV

##### WELFARE MEASURES BY GOVERNMENT

**8. Obligation of appropriate Government.**—(1) The appropriate Government shall take steps to secure full and effective participation of transgender persons and their inclusion in society.

(2) The appropriate Government shall take such welfare measures as may be prescribed to protect the rights and interests of transgender persons, and facilitate their access to welfare schemes framed by that Government.

(3) The appropriate Government shall formulate welfare schemes and programmes which are transgender sensitive, non-stigmatising and non-discriminatory.

(4) The appropriate Government shall take steps for the rescue, protection and rehabilitation of transgender persons to address the needs of such persons.

(5) The appropriate Government shall take appropriate measures to promote and protect the right of transgender persons to participate in cultural and recreational activities.

#### CHAPTER V

##### OBLIGATION OF ESTABLISHMENTS AND OTHER PERSONS

**9. Non-discrimination in employment.**—No establishment shall discriminate against any transgender person in any matter relating to employment including, but not limited to, recruitment, promotion and other related issues.

**10. Obligations of establishments.**—Every establishment shall ensure compliance with the provisions of this Act and provide such facilities to transgender persons as may be prescribed.

**11. Grievance redressal mechanism.**—Every establishment shall designate a person to be a complaint officer to deal with the complaints relating to violation of the provisions of this Act.

**12. Right of residence.**—(1) No child shall be separated from parents or immediate family on the ground of being a transgender, except on an order of a competent court, in the interest of such child.

(2) Every transgender person shall have—

- (a) a right to reside in the household where parent or immediate family members reside;
- (b) a right not to be excluded from such household or any part thereof; and

(c) a right to enjoy and use the facilities of such household in a non-discriminatory manner.

(3) Where any parent or a member of his immediate family is unable to take care of a transgender, the competent court shall by an order direct such person to be placed in rehabilitation centre.

## CHAPTER VI

### EDUCATION, SOCIAL SECURITY AND HEALTH OF TRANSGENDER PERSONS

**13. Obligation of educational institutions to provide inclusive education to transgender persons.**—Every educational institution funded or recognised by the appropriate Government shall provide inclusive education and opportunities for sports, recreation and leisure activities to transgender persons without discrimination on an equal basis with others.

**14. Vocational training and self-employment.**—The appropriate Government shall formulate welfare schemes and programmes to facilitate and support livelihood for transgender persons including their vocational training and self-employment.

**15. Healthcare facilities.**—The appropriate Government shall take the following measures in relation to transgender persons, namely:—

(a) to set up separate human immunodeficiency virus Sero-surveillance Centres to conduct sero-surveillance for such persons in accordance with the guidelines issued by the National AIDS Control Organisation in this behalf;

(b) to provide for medical care facility including sex reassignment surgery and hormonal therapy;

(c) before and after sex reassignment surgery and hormonal therapy counselling;

(d) bring out a Health Manual related to sex reassignment surgery in accordance with the World Profession Association for Transgender Health guidelines;

(e) review of medical curriculum and research for doctors to address their specific health issues;

(f) to facilitate access to transgender persons in hospitals and other healthcare institutions and centres;

(g) provision for coverage of medical expenses by a comprehensive insurance scheme for Sex Reassignment Surgery, hormonal therapy, laser therapy or any other health issues of transgender persons.

## CHAPTER VII

### NATIONAL COUNCIL FOR TRANSGENDER PERSONS

**16. National Council for Transgender Persons.**—(1) The Central Government shall by notification constitute a National Council for Transgender Persons to exercise the powers conferred on, and to perform the functions assigned to it, under this Act.

(2) The National Council shall consist of—

(a) the Union Minister in-charge of the Ministry of Social Justice and Empowerment, Chairperson, *ex officio*;

(b) the Minister of State, in-charge of the Ministry of Social Justice and Empowerment in the Government, Vice-Chairperson, *ex officio*;

(c) Secretary to the Government of India in-charge of the Ministry of Social Justice and Empowerment, Member, *ex officio*;

(d) one representative each from the Ministries of Health and Family Welfare, Home Affairs, Housing and Urban Affairs, Minority Affairs, Human Resources Development, Rural Development, Labour and Employment and Departments of Legal Affairs, Pensions and Pensioners Welfare and National Institute for Transforming India Aayog, not below the rank of Joint Secretaries to the Government of India, Members, *ex officio*;

(e) one representative each from the National Human Rights Commission and National Commission for Women, not below the rank of Joint Secretaries to the Government of India, Members, *ex officio*;

(f) representatives of the State Governments and Union territories by rotation, one each from the North, South, East, West and North-East regions, to be nominated by the Central Government, Members, *ex officio*;

(g) five representatives of transgender community, by rotation, from the State Governments and Union territories, one each from the North, South, East, West and North-East regions, to be nominated by the Central Government, Members;

(h) five experts, to represent non-governmental organisations or associations, working for the welfare of transgender persons, to be nominated by the Central Government, Members; and

(i) Joint Secretary to the Government of India in the Ministry of Social Justice and Empowerment dealing with the welfare of the transgender persons, Member Secretary, *ex officio*.

(3) A Member of National Council, other than *ex officio* member, shall hold office for a term of three years from the date of his nomination.

**17. Functions of Council.**—The National Council shall perform the following functions, namely:—

(a) to advise the Central Government on the formulation of policies, programmes, legislation and projects with respect to transgender persons;

(b) to monitor and evaluate the impact of policies and programmes designed for achieving equality and full participation of transgender persons;

(c) to review and coordinate the activities of all the departments of Government and other Governmental and non-Governmental Organisations which are dealing with matters relating to transgender persons;

(d) to redress the grievances of transgender persons; and

(e) to perform such other functions as may be prescribed by the Central Government.

## CHAPTER VIII

### OFFENCES AND PENALTIES

**18. Offences and penalties.**—Whoever,—

(a) compels or entices a transgender person to indulge in the act of forced or bonded labour other than any compulsory service for public purposes imposed by Government;

(b) denies a transgender person the right of passage to a public place or obstructs such person from using or having access to a public place to which other members have access to or a right to use;

(c) forces or causes a transgender person to leave household, village or other place of residence; and

(d) harms or injures or endangers the life, safety, health or well-being, whether mental or physical, of a transgender person or tends to do acts including causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine.

## CHAPTER IX

### MISCELLANEOUS

**19. Grants by Central Government.**—The Central Government shall, from time to time, after due appropriation made by Parliament by law in this behalf, credit such sums to the National Council as may be necessary for carrying out the purposes of this Act.

**20. Act not in derogation of any other law.**—The provisions of this Act shall be in addition to, and not in derogation of, any other law for the time being in force.

**21. Protection of action taken in good faith.**—No suit, prosecution or other legal proceeding shall lie against the appropriate Government or any local authority or any officer of the Government in respect of anything which is in good faith done or intended to be done in pursuance of the provisions of this Act and any rules made there under.

**22. Power of appropriate Government to make rules.**—(1) The appropriate Government may, subject to the condition of previous publication, by notification, make rules for carrying out the provisions of this Act.

(2) In particular, and without prejudice to the generality of the foregoing power, such rules may provide for all or any of the following matters, namely:—

(a) the form and manner in which an application shall be made under section 5;

(b) the procedure, form and manner and the period within which a certificate of identity is issued under sub-section (1) of section 6;

(c) the form and manner in which an application shall be made under sub-section (1) of section 7;

(d) the form, period and manner for issuing revised certificate under sub-section (2) of section 7;

(e) welfare measures to be provided under sub-section (2) of section 8;

(f) facilities to be provided under section 10;

(g) other functions of the National Council under clause (e) of section 17; and

(h) any other matter which is required to be or may be prescribed.

(3) Every rule made by the Central Government under sub-section (1), shall be laid, as soon as may be after it is made, before each House of Parliament, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions, and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, both Houses agree in making any modification in the rule or both Houses agree that the rule should not be made, the rule shall thereafter have effect only in such modified form or be of no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.

(4) Every rule made by the State Government under sub-section (1), shall be laid, as soon as may be after it is made, before each House of the State Legislature where it consists of two Houses, or where such legislature consists of one House, before that House.

**23. Power to remove difficulties.**—(1) If any difficulty arises in giving effect to the provisions of this Act, the Central Government may, by order published in the Official Gazette, make such provisions, not inconsistent with the provisions of this Act as appear to it to be necessary or expedient for removing the difficulty:

Provided that no such order shall be made after the expiry of the period of two years from the date of commencement of this Act.

(2) Every order made under this section shall, as soon as may be after it is made, be laid before each House of Parliament.

रजिस्ट्री सं० डी० एल—(एन)04/0007/2003—12

REGISTERED NO. DL—(N)04/0007/2003—12



# भारत का राजपत्र The Gazette of India

असाधारण

EXTRAORDINARY

भाग II—खण्ड 1

PART II—Section 1

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

सं० 34]

नई दिल्ली, बुधवार, जून 20, 2012/ ज्यैष्ठ 30, 1934 (शक)

No. 34] NEW DELHI, WEDNESDAY, JUNE 20, 2012/ JYAISTHA 30, 1934 (SAKA)

इस भाग में भिन्न पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।  
Separate paging is given to this Part in order that it may be filed as a separate compilation.

## MINISTRY OF LAW AND JUSTICE

(Legislative Department)

*New Delhi, the 20th June, 2012/Jyaistha 30, 1934 (Saka)*

The following Act of Parliament received the assent of the President on the 19th June, 2012, and is hereby published for general information:—

### THE PROTECTION OF CHILDREN FROM SEXUAL OFFENCES

ACT, 2012

[No. 32 OF 2012]

[19th June, 2012]

An Act to protect children from offences of sexual assault, sexual harassment and pornography and provide for establishment of Special Courts for trial of such offences and for matters connected therewith or incidental thereto.

WHEREAS clause (3) of article 15 of the Constitution, *inter alia*, empowers the State to make special provisions for children;

AND WHEREAS, the Government of India has acceded on the 11th December, 1992 to the Convention on the Rights of the Child, adopted by the General Assembly of the United Nations, which has prescribed a set of standards to be followed by all State parties in securing the best interests of the child;

AND WHEREAS it is necessary for the proper development of the child that his or her right to privacy and confidentiality be protected and respected by every person by all means and through all stages of a judicial process involving the child;

AND WHEREAS it is imperative that the law operates in a manner that the best interest and well being of the child are regarded as being of paramount importance at every stage, to ensure the healthy physical, emotional, intellectual and social development of the child;

AND WHEREAS the State parties to the Convention on the Rights of the Child are required to undertake all appropriate national, bilateral and multilateral measures to prevent—

(a) the inducement or coercion of a child to engage in any unlawful sexual activity;

- (b) the exploitative use of children in prostitution or other unlawful sexual practices;  
 (c) the exploitative use of children in pornographic performances and materials;

AND WHEREAS sexual exploitation and sexual abuse of children are heinous crimes and need to be effectively addressed.

BE it enacted by Parliament in the Sixty-third Year of the Republic of India as follows:—

## CHAPTER I

### PRELIMINARY

Short title,  
 extent and  
 commencement.

1. (1) This Act may be called the Protection of Children from Sexual Offences Act, 2012.  
 (2) It extends to the whole of India, except the State of Jammu and Kashmir.  
 (3) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

Definitions.

2. (1) In this Act, unless the context otherwise requires, —

- (a) "aggravated penetrative sexual assault" has the same meaning as assigned to it in section 5;  
 (b) "aggravated sexual assault" has the same meaning as assigned to it in section 9;  
 (c) "armed forces or security forces" means armed forces of the Union or security forces or police forces, as specified in the Schedule;  
 (d) "child" means any person below the age of eighteen years;  
 (e) "domestic relationship" shall have the same meaning as assigned to it in clause (f) of section 2 of the Protection of Women from Domestic Violence Act, 2005;  
 (f) "penetrative sexual assault" has the same meaning as assigned to it in section 3;  
 (g) "prescribed" means prescribed by rules made under this Act;  
 (h) "religious institution" shall have the same meaning as assigned to it in the Religious Institutions (Prevention of Misuse) Act, 1988;  
 (i) "sexual assault" has the same meaning as assigned to it in section 7;  
 (j) "sexual harassment" has the same meaning as assigned to it in section 11;  
 (k) "shared household" means a household where the person charged with the offence lives or has lived at any time in a domestic relationship with the child;  
 (l) "Special Court" means a court designated as such under section 28;  
 (m) "Special Public Prosecutor" means a Public Prosecutor appointed under section 32.

43 of 2005.

41 of 1988.

(2) The words and expressions used herein and not defined but defined in the Indian Penal Code, the Code of Criminal Procedure, 1973, the Juvenile Justice (Care and Protection of Children) Act, 2000 and the Information Technology Act, 2000 shall have the meanings respectively assigned to them in the said Codes or the Acts.

45 of 1860.  
 2 of 1974.  
 56 of 2000.  
 21 of 2000.

## CHAPTER II

### SEXUAL OFFENCES AGAINST CHILDREN

#### A.—PENETRATIVE SEXUAL ASSAULT AND PUNISHMENT THEREFOR

Penetrative  
 sexual assault.

3. A person is said to commit "penetrative sexual assault" if—  
 (a) he penetrates his penis, to any extent, into the vagina, mouth, urethra or anus of a child or makes the child to do so with him or any other person; or  
 (b) he inserts, to any extent, any object or a part of the body, not being the penis, into the vagina, the urethra or anus of the child or makes the child to do so with him or any other person; or



रजिस्ट्री सं० डी० एल०—(एन)04/0007/2003—19

REGISTERED NO. DL—(N)04/0007/2003—19



# भारत का राजपत्र The Gazette of India

असाधारण

EXTRAORDINARY

भाग II — खण्ड 1

PART II — Section 1

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

सं० 44] नई दिल्ली, मंगलवार, अगस्त 6, 2019/ श्रावण 15, 1941 (शक)

No. 44] NEW DELHI, TUESDAY, AUGUST 6, 2019/SHRAVANA 15, 1941 (SAKA)

इस भाग में भिन्न पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।

Separate paging is given to this Part in order that it may be filed as a separate compilation.

## MINISTRY OF LAW AND JUSTICE

(Legislative Department)

New Delhi, the 06th August, 2019/Shravana 15, 1941 (Saka)

The following Act of Parliament received the assent of the President on the 5th August, 2019, and is hereby published for general information:—

### THE PROTECTION OF CHILDREN FROM SEXUAL OFFENCES (AMENDMENT) ACT, 2019

No. 25 OF 2019

[5th August, 2019.]

An Act further to amend the Protection of Children from Sexual Offences Act, 2012.

BE it enacted by Parliament in the Seventieth Year of the Republic of India as follows:—

1. (1) This Act may be called the Protection of Children from Sexual Offences (Amendment) Act, 2019. Short title and commencement.

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

32 of 2012.

2. In the Protection of Children from Sexual Offences Act, 2012 (hereinafter referred to as the principal Act), in section 2,— Amendment of section 2.

(a) in sub-section (1), after clause (d), the following clause shall be inserted, namely:—

'(da) "child pornography" means any visual depiction of sexually explicit conduct involving a child which include photograph, video, digital or computer generated image indistinguishable from an actual child, and image created, adapted, or modified, but appear to depict a child;'

(b) in sub-section (2), for the words, brackets and figures "the Juvenile Justice (Care and Protection of Children) Act, 2000", the words, brackets and figures "the Juvenile Justice (Care and Protection of Children) Act, 2015" shall be substituted. 56 of 2000.  
2 of 2016.

Amendment  
of section 4.

3. In the principal Act, section 4 shall be renumbered as section 4(I) thereof and—

(a) in sub-section (I) as so renumbered, for the words "seven years", the words "ten years" shall be substituted;

(b) after sub-section (I), the following sub-sections shall be inserted, namely:—

"(2) Whoever commits penetrative sexual assault on a child below sixteen years of age shall be punished with imprisonment for a term which shall not be less than twenty years, but which may extend to imprisonment for life, which shall mean imprisonment for the remainder of natural life of that person, and shall also be liable to fine.

(3) The fine imposed under sub-section (I) shall be just and reasonable and paid to the victim to meet the medical expenses and rehabilitation of such victim."

Amendment  
of section 5.

4. In section 5 of the principal Act,—

(I) in clause (j),—

(A) in sub-clause (i), the word "or" occurring at the end shall be omitted;

(B) in sub-clause (iii), the word "or" occurring at the end shall be omitted;

(C) after sub-clause (iii), the following sub-clause shall be inserted, namely:—

"(iv) causes death of the child; or";

(II) in clause (s), for the words "communal or sectarian violence", the words "communal or sectarian violence or during any natural calamity or in similar situations" shall be substituted.

Substitution of  
new section  
for section 6.

5. For section 6 of the principal Act, the following section shall be substituted, namely:—

"6. (I) Whoever commits aggravated penetrative sexual assault shall be punished with rigorous imprisonment for a term which shall not be less than twenty years, but which may extend to imprisonment for life, which shall mean imprisonment for the remainder of natural life of that person, and shall also be liable to fine, or with death.

(2) The fine imposed under sub-section (I) shall be just and reasonable and paid to the victim to meet the medical expenses and rehabilitation of such victim."

Punishment  
for aggravated  
penetrative  
sexual assault.

Amendment  
of section 9.

6. In section 9 of the principal Act,—

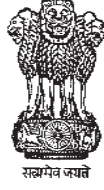
(i) in clause (s), for the words "communal or sectarian violence", the words "communal or sectarian violence or during any natural calamity or in any similar situations" shall be substituted;

(ii) after clause (u), the following clause shall be inserted, namely:—

"(v) whoever persuades, induces, entices or coerces a child to get administered or administers or direct anyone to administer, help in getting administered any drug or hormone or any chemical substance, to a child with the intent that such child attains early sexual maturity;"

रजिस्ट्री सं० डी० एल०—(एन)04/0007/2003—16

REGISTERED NO. DL—(N)04/0007/2003—16



# भारत का राजपत्र The Gazette of India

असाधारण

EXTRAORDINARY

भाग II — खण्ड 1

PART II — Section 1

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

---

सं० 2] नई दिल्ली, शुक्रवार, जनवरी 1, 2016/पौष 11, 1937 (शक)  
No. 2] NEW DELHI, FRIDAY, JANUARY 1, 2016/PAUSHA 11, 1937 (SAKA)

---

इस भाग में भिन्न पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।  
Separate paging is given to this Part in order that it may be filed as a separate compilation.

---

**MINISTRY OF LAW AND JUSTICE**  
(Legislative Department)

*New Delhi, the 1st January, 2016/Pausha 11, 1937 (Saka)*

The following Act of Parliament received the assent of the President on the 31st December, 2015, and is hereby published for general information:—

**THE JUVENILE JUSTICE (CARE AND PROTECTION OF CHILDREN)  
ACT, 2015**

No. 2 OF 2016

[31st December, 2015.]

An Act to consolidate and amend the law relating to children alleged and found to be in conflict with law and children in need of care and protection by catering to their basic needs through proper care, protection, development, treatment, social re-integration, by adopting a child-friendly approach in the adjudication and disposal of matters in the best interest of children and for their rehabilitation through processes provided, and institutions and bodies established, hereinunder and for matters connected therewith or incidental thereto.

WHEREAS, the provisions of the Constitution confer powers and impose duties, under clause (3) of article 15, clauses (e) and (f) of article 39, article 45 and article 47, on the State to ensure that all the needs of children are met and that their basic human rights are fully protected;

AND WHEREAS, the Government of India has acceded on the 11th December, 1992 to the Convention on the Rights of the Child, adopted by the General Assembly of United Nations, which has prescribed a set of standards to be adhered to by all State parties in securing the best interest of the child;

AND WHEREAS, it is expedient to re-enact the Juvenile Justice (Care and Protection of Children) Act, 2000 to make comprehensive provisions for children alleged and found to be in conflict with law and children in need of care and protection, taking into consideration the standards prescribed in the Convention on the Rights of the Child, the United Nations Standard Minimum Rules for the Administration of Juvenile Justice, 1985 (the Beijing Rules), the United Nations Rules for the Protection of Juveniles Deprived of their Liberty (1990), the Hague Convention on Protection of Children and Co-operation in Respect of Inter-country Adoption (1993), and other related international instruments.

56 of 2000.

BE it enacted by Parliament in the Sixty-sixth Year of the Republic of India as follows:—

## CHAPTER I

### PRELIMINARY

Short title,  
extent,  
commencement  
and  
application.

**1.** (1) This Act may be called the Juvenile Justice (Care and Protection of Children) Act, 2015.

(2) It extends to the whole of India except the State of Jammu and Kashmir.

(3) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

(4) Notwithstanding anything contained in any other law for the time being in force, the provisions of this Act shall apply to all matters concerning children in need of care and protection and children in conflict with law, including —

(i) apprehension, detention, prosecution, penalty or imprisonment, rehabilitation and social re-integration of children in conflict with law;

(ii) procedures and decisions or orders relating to rehabilitation, adoption, re-integration, and restoration of children in need of care and protection.

Definitions.

**2.** In this Act, unless the context otherwise requires,—

(1) “abandoned child” means a child deserted by his biological or adoptive parents or guardians, who has been declared as abandoned by the Committee after due inquiry;

(2) “adoption” means the process through which the adopted child is permanently separated from his biological parents and becomes the lawful child of his adoptive parents with all the rights, privileges and responsibilities that are attached to a biological child;

(3) “adoption regulations” means the regulations framed by the Authority and notified by the Central Government in respect of adoption;

(4) “administrator” means any district official not below the rank of Deputy Secretary to the State, on whom magisterial powers have been conferred;

(5) “aftercare” means making provision of support, financial or otherwise, to persons, who have completed the age of eighteen years but have not completed the age of twenty-one years, and have left any institutional care to join the mainstream of the society;

(6) “authorised foreign adoption agency” means a foreign social or child welfare agency that is authorised by the Central Adoption Resource Authority on the recommendation of their Central Authority or Government department of that country for sponsoring the application of non-resident Indian or overseas citizen of India or persons of Indian origin or foreign prospective adoptive parents for adoption of a child from India;

(7) “Authority” means the Central Adoption Resource Authority constituted under section 68;

(8) “begging” means—

(i) soliciting or receiving alms in a public place or entering into any private premises for the purpose of soliciting or receiving alms, under any pretence;

(ii) exposing or exhibiting with the object of obtaining or extorting alms, any sore, wound, injury, deformity or disease, whether of himself or of any other person or of an animal;

(9) “best interest of child” means the basis for any decision taken regarding the child, to ensure fulfilment of his basic rights and needs, identity, social well-being and physical, emotional and intellectual development;

(10) “Board” means a Juvenile Justice Board constituted under section 4;

(11) “Central Authority” means the Government department recognised as such under the Hague Convention on Protection of Children and Cooperation in Inter-country Adoption (1993);

(12) “child” means a person who has not completed eighteen years of age;

(13) “child in conflict with law” means a child who is alleged or found to have committed an offence and who has not completed eighteen years of age on the date of commission of such offence;

(14) “child in need of care and protection” means a child—

(i) who is found without any home or settled place of abode and without any ostensible means of subsistence; or

(ii) who is found working in contravention of labour laws for the time being in force or is found begging, or living on the street; or

(iii) who resides with a person (whether a guardian of the child or not) and such person—

(a) has injured, exploited, abused or neglected the child or has violated any other law for the time being in force meant for the protection of child; or

(b) has threatened to kill, injure, exploit or abuse the child and there is a reasonable likelihood of the threat being carried out; or

(c) has killed, abused, neglected or exploited some other child or children and there is a reasonable likelihood of the child in question being killed, abused, exploited or neglected by that person; or

(iv) who is mentally ill or mentally or physically challenged or suffering from terminal or incurable disease, having no one to support or look after or having parents or guardians unfit to take care, if found so by the Board or the Committee; or

(v) who has a parent or guardian and such parent or guardian is found to be unfit or incapacitated, by the Committee or the Board, to care for and protect the safety and well-being of the child; or

(vi) who does not have parents and no one is willing to take care of, or whose parents have abandoned or surrendered him; or

(vii) who is missing or run away child, or whose parents cannot be found after making reasonable inquiry in such manner as may be prescribed; or

(viii) who has been or is being or is likely to be abused, tortured or exploited for the purpose of sexual abuse or illegal acts; or

(ix) who is found vulnerable and is likely to be inducted into drug abuse or trafficking; or

**The Transgender Persons (Protection of Rights) Rules, 2020**



**Government of India**  
**Ministry of Social Justice and Empowerment**  
**Notification**

New Delhi, dated the

G.S.R No \_\_\_ In exercise of the powers conferred by sub-section (1) and (2) of Section 22 the Transgender Persons (Protection of Rights) Act, 2019, the Central Government hereby makes the following rules, namely:

**1. Short title and commencement:** - (1) These rules may be called the Transgender Persons (Protection of Rights) Rules, 2020.

(2) They shall come into force on such date as the Central Government may, may by notification in the Official Gazette, appoint.

**2. Definition:** - In these rules, unless the context otherwise requires, -

- (a) 'Act' means the Transgender Persons (Protection of Rights) Act, 2019;
- (b) 'affidavit' means affidavit in **form – 2** to be submitted by an applicant seeking certificate of identity;
- (c) 'application' means application-cum-enumeration form as in **form – 1** of these rules.
- (d) 'certificate of identity' means a certificate issued by the District Magistrate under sections 5 and 6 or 7 of the Act as in **form – 3** or **form – 4** of these rules;
- (e) 'identity card' a photo identity card in **form – 5** issued to a transgender person under section 6 or **form - 6** issued to a transgender person on change of gender under section 7 on the basis of 'certificate of identity' issued by the District Magistrate or an identity card to a transgender person issued by a State authority prior to the commencement of these rules;
- (f) 'procedure' means procedure laid in **annexure – 1** to be adopted by District Magistrate for issue of certificate of identity under section 6 or 7.
- (g) 'section' means section of the Act

**3. Application for issue of identity of certificate under section 6 or 7:**

(1) Any transgender person desirous of obtaining a certificate of identity shall make an application, in **form – 1** of this rule.

(2) The application shall be submitted to the District Magistrate in person or by post till online facilities are developed by the State Government concerned, and thereafter application may also be made online.

**4. Procedure for issue of certificate of identity (section 6):**

(1) The District Magistrate shall, based on the application, the affidavit attached therewith and the report of psychologist, without any medical examination, issue the certificate of identity.

(2) The said certificate of identity shall be issued within 30 days of receipt of duly filled in application along with the affidavit and the report of psychologist.

#### **5. Issue of certificate of identity for transgender person under section 6:**

(1) The District Magistrate shall issue to the applicant following the procedure under rule 4, a certificate of identity in **form – 3** of these rules, indicating the gender of such person as transgender.

(2) The certificate of identity issued under this sub-rule shall be the basis to record or change the gender as well as name, if so necessitated, of transgender person in all such official documents illustrated in **annexure – 1** to these rules, in accordance with the gender specified in the said identity card.

(3) For the purpose of determination of the District Magistrate concerned, the applicant must be a resident of the area under the jurisdiction of the District Magistrate for a period of one completed year, to protect the interests and facilitate inclusive development of transgender persons.

(4) Any official document wherein gender of transgender is revised based on the said certificate of identity shall bear the same serial or reference number as in the original official document of such transgender person who seeks change in the gender and the name in the official documents.

#### **6. Procedure for issue of certificate of identity for change of gender (Section 7):**

(1) If a transgender person undergoes surgery to change gender either as a male or female, such person may apply in the **form – 1** of these rules, along with a certificate issued to that effect by the Medical Superintendent or Chief Medical Officer of the medical institution in which that person has undergone surgery, to the District Magistrate for revised certificate.

(2) The District Magistrate shall, on receipt of an application for change in gender under section 7 of the Act, along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and surrender of the transgender identity card issued under rule 5 or a transgender identity card issued by a State authority before the commencement of these rules, and on being satisfied with the correctness of such medical certificate, issue a certificate indicating change in gender in **form – 4**.

(4) The certificate of identity issued under sub-rule \_\_\_ shall be the basis to record the revised gender of the person in all such official documents illustrated in **Annexure – 1** to these rules, in accordance with the gender specified in the revised identity card.

(5) For the purpose of determination of the District Magistrate concerned, the applicant must be a resident of the area under the jurisdiction of the District Magistrate for a period of one completed year, to protect the interests and facilitate inclusive development of transgender persons.

(6) District Magistrate may verify with the Medical Superintendent or Chief Medical Officer to confirm the correctness or otherwise of the medical certificate.

(7) The District Magistrate shall thereafter issue the revised certificate of identity within 30 days from the receipt of application along with the certificate of the Medical Superintendent or Chief Medical Officer.



(8) In case the Medical Superintendent or Chief Medical Officer does not confirm the correctness of the certificate or does not recommend issue of revised identity card, District Magistrate shall inform the applicant of the application for issue of certificate of identity has been rejected due to non-confirmation of correctness of the medical certificate submitted by the applicant or/and non-recommendation by Medical Superintendent or Chief Medical Officer.

(9) The applicant shall have a right to appeal, within 30 days from the date of intimation of rejection of the application, to the District Magistrate who shall refer the matter to a medical board for a final decision.

(10) Any official document wherein gender of transgender is revised based on the said certificate of identity shall bear the same serial or reference number as in the original official document of such transgender person who seeks change in the gender and the name in the official documents.

### **7. Welfare measures, education, social security and health of transgender persons by appropriate Government:**

(1) The appropriate Government shall notify the general category transgender persons in 'other backward classes' so as to enable them to avail the benefits of vertical reservation provided for the other backward classes.

Provided nothing in this sub-rule shall deny the benefits to transgender persons belonging to the scheduled caste and scheduled tribe under the vertical reservation or to the persons with disability, ex-servicemen and sportspersons under the horizontal reservation.

(2) Ministry or Department concerned under the appropriate Government shall review all existing educational, social security and health schemes and welfare measures to include transgender persons so as to protect their rights and interests and facilitate their access to such schemes and welfare measures framed by that Government.

(3) The appropriate Government shall formulate educational, social security and health schemes and welfare schemes and programmes in a manner so as to be transgender sensitive, non-stigmatising and non-discriminatory to transgender persons.

(4) The appropriate Government shall review Acts, rules, regulations, codes, bye-laws, and such statutes for the rescue, protection and rehabilitation of transgender persons to address their needs and promote.

(5) The appropriate Government shall create institutional and infrastructure facilities such as separate wards in the hospital wash rooms within two years from the date of commencement of these rules to protect the rights of such persons to participate in cultural and recreational activities.

(6) The appropriate Government shall carry out awareness campaigns to enlighten and facilitate transgender persons to avail benefits of welfare schemes as well as to other stakeholders in developing appropriate change in behavior towards transgender persons.

[F No \_\_\_\_\_]

(Joint Secretary to the Government of India)

**Form - 1**

## Appendix- 4

### NATIONAL LEGAL SERVICES AUTHORITY (NALSA) VS. UNION OF INDIA

**Citation:** AIR 2014 SC 1863  
**Court:** SUPREME COURT OF INDIA  
**Judges:** K S RADHAKRISHNAN & A K SIKRI

**KEY FACTS:** This case was filed by the National Legal Services Authority of India (NALSA) to legally recognize persons who fall outside the male/female gender binary, including persons who identify as “third gender”.

**ISSUES & DECISION:** The Court had to decide whether persons who fall outside the male/female gender binary can be legally recognised as “third gender” persons. It deliberated on whether disregarding non-binary gender identities is a breach of fundamental rights guaranteed by the Constitution of India. It referred to an “Expert Committee on Issues Relating to Transgender” constituted under the Ministry of Social Justice and Empowerment to develop its judgement.

This was a landmark decision where the apex court legally recognised “third gender”/transgender persons for the first time and discussed “gender identity” at length. The Court recognised that third gender persons were entitled to fundamental rights under the Constitution and under International law. Further, it directed state governments to develop mechanisms to realise the rights of “third gender”/transgender persons.

**Defining “Third Gender”** The Court upheld the right of all persons to self-identify their gender. Further, it declared that hijras and eunuchs can legally identify as “third gender”.

The Court clarified that gender identity did not refer to biological characteristics but rather referred to it as “an innate perception of one’s gender”. Thus, it held that no third gender persons should be subjected to any medical examination or biological test which would invade their right to privacy.

**Fundamental Rights** The Court interpreted ‘dignity’ under Article 21 of the Constitution to include diversity in self-expression, which allowed a person to lead a dignified life. It placed one’s gender identity within the framework of the fundamental right to dignity under Article 21.

Further, it noted that the right to equality (Article 14 of the Constitution) and freedom of expression (Article 19(1)(a)) was framed in gender-neutral terms (“all persons”). Consequently, the right to equality and freedom of expression would extend to transgender persons.

It drew attention to the fact that transgender persons were subject to “extreme discrimination in all spheres of society” which was a violation of their right to equality. Further, it included the right to express one’s gender “through dress, words, action, or behaviour” under the ambit of freedom of expression.

Under Articles 15 and 16, discrimination on the ground of “sex” is explicitly prohibited. The Court held that “sex” here does not only refer to biological attributes (such as chromosomes, genitalia and secondary sexual characteristics) but also includes “gender” (based on one’s self-perception). Thus, the Court held that discrimination on the ground of “sex” included discrimination on the basis of gender identity.

Thus, the Court held that transgender persons were entitled to fundamental rights under Articles 14, 15, 16, 19(1)(a) and 21 of the Constitution. Further, the Court also referred to core international human rights treaties and the Yogyakarta Principles to recognise transgender persons’ human rights.

**Further Directions** The Court held that public awareness programs were required to tackle stigma against the transgender community. It also directed the Central and State Governments to take several steps for the advancement of the transgender community, including:

Making provisions for legal recognition of “third gender” in all documents

Recognising third gender persons as a “socially and educationally backward class of citizens”, entitled to reservations in educational institutions and public employment.

Taking steps to frame social welfare schemes for the community

**SIGNIFICANCE:** This is a landmark decision because it is the first to legally recognise non-binary gender identities and uphold the fundamental rights of transgender persons in India. The judgement also directed Central and State governments to take proactive action in securing transgender persons’ rights.

## **NANGAI VS. SUPERINTENDENT OF POLICE**

**Citation:** (2014) 4 MLJ 12  
**Court:** MADRAS HIGH COURT  
**Judges:** JUSTICE S. NAGAMUTHU

**KEY FACTS:** Nangai (name changed) was assigned and registered as female at birth. Nangai’s documents, including her birth certificate, medical records, family card and census data to the records at the all-girls’ school and women’s college she attended, all identify her as female.

In 2009, she appeared for the selection process of Grade II Police Constable (Women) conducted by then The Tamil Nadu Uniformed Services Recruitment Board, Chennai (“the board”). Upon clearing the selection, she was given a recruitment order and sent for training to the Police Recruit School in Vellore. As part of her training, she underwent a medical examination where the Medical Officer declared her as “transgender” and directed further medical examination. Consequently, Nangai was forced to undergo a series of medical examinations intermittently totalling to 121 days of medical leaves that interrupted her Police training. The Board declared that since she had missed her training, ‘falsely’ applied under the Women’s quota, and failed to appear in the final exams, her order of recruitment as woman constable stands terminated. Nangai challenged this order of termination in the High Court.

**ISSUES:** The issues considered by the Court in this case were firstly, whether the petitioner is a “female” who is eligible for appointment as “Woman Police Constable”. Secondly, whether the termination of services for being transgender is sustainable.

**DECISION:** The Court recognized that the gender fluidity of transsexual persons is not accommodated for in Indian laws. Consequently, under the Registration of Births & Deaths Act of 1969 and other legislations, sex is determined at birth based on physical characteristics and by society at large. In no situation (such as employment, election, and inheritance, etc.) has a person been made to undergo a medical examination to prove they are female and forcing the petitioner to do so, in this case, is unreasonable.

Further, it held that not treating Nangai as a female would be a violation of the right to equality, non-discrimination, freedom of speech and expression, life, and personal liberty guaranteed in the Constitution of India (Articles 14, 15, 16, 19(1)(a), 21) as upheld in NALSA v Union of India. Finally, the Court held that Nangai was a woman and eligible for the post of a woman police constable. In addition, it accorded Nangai the freedom to self-identify her gender identity, including third gender identity. Noting that Nangai had not misled the Board with regard to her gender and acknowledging the turmoil that the forced medical examinations had caused her, the Court set aside the order terminating Nangai’s service and directed the Superintendent to reinstate her as a woman police constable.

### **SIGNIFICANCE:**

The Court recognized that compelling a person to undergo a medical examination of gender violated Article 21. It upheld a person’s right to self-identify their own gender. It disregarded medical proof of gender and noted the consistent emphasis on binary gender identities in Indian and international documents.

**ATRI KAR VS. UNION OF INDIA**

Citation: **2017 SCC ONLINE CAL 3196**  
 Court: **HIGH COURT AT CALCUTTA**  
 Judges: **JUSTICE DEBANGSU BASAK**

**KEY FACTS:** Atri Kar was a transgender person who wished to participate in the selection process conducted by the State Bank of India (“SBI”) to recruit Probationary Officers. However, the application form did not contain a gender column for transgender applicants. The petitioner made a representation to SBI. It did not elicit any response. The petitioner approached the High Court to be allowed to participate in the selection process as a transgender person.

**ISSUES & DECISION:** The Court deliberated on whether SBI was an instrument of Central or State Government and whether the directions in NALSA v. Union of India (“NALSA”) are binding on SBI. It also considered whether not including “third gender” in the gender column in the application form violated Atri’s fundamental rights.

The Bank argued that NALSA is applicable only to the Centre and State Governments. As SBI is neither, the directions in NALSA would not be applicable to it. Hence, SBI is not required to provide a separate column for third gender applicants.

The Court held that NALSA’s directions to the Centre and State Governments would extend to an authority within the meaning of Article 12 of the Constitution of India, 1950. Hence, the directions would also bind SBI. Further, it observed that transgender persons cannot be discriminated on the basis of sex and failure to provide a separate column for third gender persons amounts to discrimination under Article 15. Therefore, the Court directed SBI to allow the petitioner to participate in the selection process as a transgender person and to extend the benefits of the directions in NALSA to the petitioner.

**SIGNIFICANCE:** This Court held that NALSA binds instruments of the State, and not just the Centre and State Governments. It clarified that NALSA’s directions also apply to the State Bank of India.

**PINKI PRAMANIK VS. STATE OF WEST BENGAL**

Citation: **2014 SCC ONLINE CAL 18832**  
 Court: **HIGH COURT AT CALCUTTA**  
 Judges: **JUSTICE SUBRATA TALUKDAR**

**KEY FACTS:** Pinki Pramanik was a national-level female athlete who had been cohabiting with a friend of hers whose husband had abandoned her. After 3 years of living together, the woman brought a complaint of sexual assault and rape against Pinki for inducing her into sexual activity on the pretext of marriage and exploiting her vulnerable situation. Upon her arrest, Pinki was forced to undergo multiple medical examinations to ‘determine’ her gender. The tests declared her to be a “male pseudo-hermaphrodite” (sic.) suffered a “disorder of sexual development”. According to the results, Pinki was ‘deemed’ to be an intersex person.

**ISSUE:** The Court had to decide whether Pinki had and could be considered capable of committing the offence of rape.

**DECISION:** Given that under the IPC, the sexual offences against an adult are gender-specific i.e. complaints of sexual offences can only be made against men by women, the Court thought it necessary to determine whether Pinki was a “man” for the purposes of this offence.

After invasive and extensive analysis of the medical reports attained to through the medical examinations of Pinki, the court concluded that since she is not capable of “penetrative intercourse” she cannot be accused of rape. The Court also held that the allegation of inducement on the pretext of marriage did not stand since the complainant was already married. Pinki was acquitted.

**SIGNIFICANCE:** Since Pinki Pramanik was a national level athlete, this case received national attention and extensive media coverage that was largely sensationalized and voyeuristic. This case highlights the indignity and humiliation that gender non-conforming persons and intersex persons are subjected

to at the hands of authorities including Courts and Police. She forced to undergo innumerable medical tests, held in a man's prison cell during the trial and subjected to harassment. Her medical examinations were also leaked to public and press making her sexuality and gender a subject of public scrutiny. Pinki was also denied her right to dignity and life in the determination of her gender – being declared as 'male' by the Courts and the media

### **NAVTEJ SINGH JOHAR VS. UNION OF INDIA**

Citation: **WRIT PETITION (CRIMINAL) NO. 76 OF 2016**

Court: **SUPREME COURT OF INDIA**

Judges: **CHIEF JUSTICE DIPAK MISRA, JUSTICE ROHINGTON NARIMAN, JUSTICE D Y CHANDRACHUD, JUSTICE A M KHANVILKAR, & JUSTICE INDU MALHOTRA**

**KEY FACTS:** Section 377 of the Indian Penal Code (IPC) criminalised consensual sexual intercourse between persons of the same sex for being “against the order of nature”. In 2009, before the Delhi High Court, the Naz Foundation (India) Trust (“Naz”) challenged the constitutionality of Section 377 for violating Articles 14, 15, 19 and 21 of the Constitution. The court ruled that punishing sexual activity between two consenting adults under Section 377 violates the right to equality, privacy and personal liberty of such persons.

This decision was appealed before the Supreme Court and in 2013, the Court reversed the Naz verdict in *Suresh Kumar Koushal & Anr. v. Naz Foundation & Ors.* (“Koushal”). It held that only the Parliament could decriminalize homosexuality.

Five individuals from the LGBTQ communities (Navtej Singh Johar, Ritu Dalmia, Ayesha Kapur, Aman Nath and Sunil Mehra) filed a new writ petition challenging the constitutionality of Section 377.

**ISSUES & DECISION:** The Court deliberated on the soundness of the Koushal decision. It also considered whether Section 377 violates:

Article 14 as it discriminates against individuals on the basis of their “sexual orientation” and “gender identity”?

The right to autonomy and dignity under Article 21 by penalizing private consensual acts between same-sex persons?

The right to expression under Article 19(1)(a) by criminalizing the gender expression of the LGBTQI+ community?

#### **The Decision in ‘Koushal’**

All five judges overruled Koushal. The Court drew on the doctrine of progressive realisation of rights to hold that rights should not be revoked. The march of a progressive society should only be forward.

The Court also noted the guarantee of a fundamental right to privacy in *Justice K. S. Puttaswamy (Retd.) vs Union Of India* and held that Koushal's finding that Section 377 affected only a ‘miniscule minority’ cannot be the basis to deny the right to privacy. It observed that minorities face discrimination because their views and beliefs do not align with the majority and the Koushal decision violated the right of all persons to equal protection.

#### **The Litmus Test for Survival of Section 377**

The Supreme Court tested the constitutionality of Section 377 against the principles of equality, liberty, dignity under Articles 14, 19 and 21.

1. **Right to Equality and Non-Discrimination:** The Court observed that Section 377 arbitrarily punishes individuals who engage in same sex relationships. To substantiate this, the Court noted that Section 377 classifies and punishes individuals who engage in carnal intercourse against the order of nature to protect women and children. However, this objective has no reasonable nexus with the classification, as unnatural offences have also been separately penalised under Section 375 and the POCSO Act. Therefore, the Court held that the unequal treatment of LGBT individuals violates Article 14. Further, the Court held that Section 377 is manifestly arbitrary as it does not distinguish between consensual and non-

consensual sexual acts between adults. It targeted people exercising certain choices and treated them as “less than humans” and encouraged prejudices and stereotypes accompanied by debilitating social effects. This violates Article 14, which is the very basis of non-discrimination.

2. **Freedom of Expression:** The Court acknowledged that all persons, including LGBTQI individuals, had the right to express their choices without any fear. It recognized same-sex sexuality as a normal variant of human sexuality. In particular, the Court noted that Section 377 stigmatises and discriminates against transgender persons. Next, the Court tested whether public order, decency and morality are reasonable grounds to restrict the right to freedom of expression of sexuality under Article 19(1)(a). It noted that Section 377 criminalises private consensual acts which neither disturb public order, nor injure public decency or morality. Sexual acts cannot be viewed solely from the lens of morality where they are seen to be purely for procreation. An unreasonable restriction on acts within a person’s private space will have a chilling effect on freedom of choice. For these reasons, the Court held that Section 377 is disproportionate and violates the fundamental right to freedom of expression.
3. **Right to Life and Personal Liberty:** The Court held that Section 377 violates human dignity, decisional autonomy and the fundamental right to privacy. Every individual has the liberty to choose their sexual orientation, seek companionship and exercise it within their private space. As Section 377 inhibits the exercise of personal liberty to engage in voluntary sexual acts, it violates Article 21. It socially ostracises LGBT persons and does not permit full realisation of their personhood. Denying the right to determine one’s sexual orientation curtails the right to privacy of an individual. Therefore, the Court held that the scope of the right to privacy must be widened to incorporate and protect ‘sexual privacy’.

#### “the Order of Nature”

Section 377 criminalises ‘unnatural sex’ which is “against the order of nature”. The Court held that such a classification between natural and unnatural intercourse is not legally valid. Naturalness should not determine the legality or acceptance of a phenomenon. Penal consequences for an act that is unnatural or wrong cannot be imposed without sufficient justification.

**Constitutional Morality** The Court described ‘constitutional morality’ as the ideals and morals of the Constitution and the values that create an inclusive society. It recognized the Constitution as a tool to transform society. A decision on whether a penal provision violates fundamental rights must be guided by the principles of constitutional morality and not societal morality. Where a constitutional court finds that a provision violates constitutional morality, it must be struck down.

#### Yogyakarta Principles

The Court observed that India is a signatory to the Yogyakarta Principles which prohibits discrimination on the grounds of sexual orientation and gender identity. NALSA vs. Union of India also relied on these principles, though they are not binding, to uphold the right of non-discrimination on the grounds of gender identity. Relying on the Yogyakarta Principles and NALSA, the Court held that Section 377 does not conform with India’s international obligations.

#### Conclusion

The Court upheld the right to equal citizenship of all members of the LGBTQI community in India. Thus, it read down Section 377 to exclude consensual sexual relationships between adults, whether between same-sex individuals or otherwise. Section 377 will continue to apply to non-consensual sexual activity against adults, sexual acts against minors and bestiality.

**SIGNIFICANCE:** The five-judge bench of the Supreme Court overruled the Koushal decision. It unanimously read down Section 377 and decriminalised same-sex relations between consenting adults. It applies to all citizens, and not just to the LGBT community. This judgment holds immense persuasive value for other nations which continue to criminalise homosexuality.

### **Naz Foundation v. Govt. of NCT and Ors.**

<b>Particulars</b>	<b>Details</b>
<b>Name of the Court:</b>	Delhi High Court
<b>Case Name:</b>	Naz Foundation v. Government of NCT of Delhi and Others.
<b>Case Number:</b>	WP(C) No.7455/2001
<b>Petitioner:</b>	Naz Foundation.
<b>Respondent:</b>	Government of NCT of Delhi and others.
<b>Date of Judgement:</b>	2 <sup>nd</sup> July, 2009.
<b>Bench:</b>	Shah, A.P (CJ) and Muralidhar, S.
<b>Provisions of law:</b>	1) Section 377, IPC. 2) Articles 14, 15 and 21 of the Constitution of India.

### **Facts of the Case**

Naz Foundation (India) Trust, a non-governmental organization led the movement for repealing Section 377 by filing a lawsuit in the Delhi High Court in 2001, seeking legalization of voluntary homosexual intercourse between consenting adults and contended that Section 377 of the Indian Penal Code was unconstitutional.

In 2003, the Delhi High Court refused to consider a petition regarding the legality of the law, saying that the petitioners had no locus standi in the matter. Naz Foundation appealed to the Supreme Court of India against the decision of the High Court to dismiss the petition on technical grounds. The Supreme Court decided that Naz Foundation had the standing to file a public interest lawsuit in this case, and sent the case back to the Delhi High Court to reconsider it on the merits.

In 2006, the National AIDS Control Organization (NACO) filed an affidavit stating that the enforcement of Section 377 violates LGBT rights. Simultaneously, there was a significant intervention in the case by a Delhi-based coalition of LGBT, women's and human rights activists called "Voices Against 377", which supported the demand to "read down" Section 377 to exclude adult consensual sex from within its purview.

### **Issues Raised**

Whether the impugned provision should be interpreted to decriminalize penile non-vaginal sex between consenting adults?

Whether the fundamental rights of equality, life, liberty, privacy, dignity enshrined under Articles 14, 15, and 21 of the Constitution are violated by Section 377, IPC?

Whether the decriminalization of the impugned provision to the extent of consensual sexual relationship is opposed to societal views and public morality?

### **Contentions of Petitioner**

1. As a result of Section 377 IPC, basic fundamental human rights of such individuals/groups (in minority) stood denied and they were subjected to abuse, harassment, and assault from public and public authorities.

2. According to the petitioner, Section 377 IPC is based upon traditional Judeo-Christian moral and ethics, which conceive sex purely for the purpose of procreation only. Thus legislation criminalizing consensual oral and anal sex is outdated and has no place in modern society.
3. By criminalizing private, consensual same-sex conduct, Section 377 IPC serves as the weapon for police abuse; harassment, forced sex, payment of hush money; and perpetuates negative and discriminatory beliefs towards same-sex relations and sexuality minorities. Section 377 IPC thus creates a class of vulnerable people that is continually victimized and directly affected by the provision.
4. They further argued and submitted that the right to non-discrimination on the basis of sex in Article 15 should not be read restrictively and obstructively but it should include "sexual orientation".
5. They argued that the Constitution protects the right to privacy (which is not expressly mentioned) under the right to life and liberty enshrined in Article 21. It is averred that no aspect of one's life may be said to be more private or intimate than that of consensual sexual relations. The petitioner argues that the fundamental right to privacy under Article 21 can be abridged only for a compelling state interest.

### **Contentions of Respondent**

1. Both the Ministry of Home Affairs (MHA) and the Ministry of Health and Family Welfare submitted legal opinions in respect to the writ petition. But it was a surprise that completely contradictory affidavits have been filed by two wings of the Union of India. The Ministry of Home Affairs (MHA) sought to justify the retention of Section 377 IPC, whereas the Ministry of Health & Family Welfare insisted that continuance of Section 377 IPC has hampered the HIV/AIDS prevention efforts.
2. The MHA, argued for the retention of Section 377 on several grounds. Firstly, that it is provided for the prosecution of individuals for the sexual abuse of children. Secondly, that it filled a gap in the rape laws. Third, that if removed it would provide for "flood gates of delinquent behavior and can possibly be misconstrued as providing unfettered license for homosexuality which would not be in the public interest.
3. In contrast, the Ministry of Health and Family Welfare (with association from the National Aids Control Organization) submitted evidence in support of the Naz Foundation's plea- that the existence of section 377 is damaging to the efforts of HIV/AIDS prevention and treatment for the same.

### **Judgment**

4. The Delhi High Court delivered a path breaking judgment and declared that Section 377 is ultra vires to the Constitution insofar it criminalizes consensual sexual acts of adults in private.

### **Reasoning and Findings of Supreme Court**

1. The Court did not strike down Section 377 as a whole. The section was declared unconstitutional insofar it criminalizes consensual sexual acts of adults in private as it is violative of Article 14, 15 and 21. The judgment keeps intact the provision insofar as it applies to non-consensual non-vaginal intercourse and intercourse with minors. The court stated that the judgment would hold until Parliament chose to amend the law.
2. The High Court observed that any distinction or classification must be based on an intelligible differentia which has a rational relation to the objective sought and must not be unfair or unjust. Section 377, the Court said, does not distinguish between public and private acts, or between consensual and non-consensual acts, therefore does not take into account relevant factors such as age, consent and the nature of the act or absence of harm. Thus, such criminalization in the absence of evidence of harm seemed arbitrary and unreasonable.
3. The High Court referred to the Human Rights Committee's decision in *Toonen v. Australia*, (No.488/1992, CCPR/C/50/D/488/1992, March 31, 1994) in which the criminalization of sexual acts between men was considered a violation of



Article 2 of the International Covenant on Civil and Political Rights, where a reference to “sex” was taken as including sexual orientation. On the basis of the analysis of Indian and international human rights jurisprudence the High Court declared that Section 377 was also unconstitutional on the basis of Article 15: “We hold that sexual orientation is a ground analogous to sex and that discrimination on the basis of sexual orientation is not permitted by Article 15. Further, Article 15(2) incorporates the notion of horizontal application of rights. In other words, it even prohibits discrimination of one citizen by another in matters of access to public spaces. In our view, discrimination on the ground of sexual orientation is impermissible even on the horizontal application of the right enshrined under Article 15.

4. High Court observed, the appropriate sphere of privacy allows persons to develop human relations without interference from the outside community or from the State. The exercise of autonomy enables an individual to attain fulfillment, grow in self-esteem, build relationships of his or her choice and fulfill all legitimate goals that he or she may set. In the Indian Constitution, the right to live with dignity and the right of privacy both are recognized as dimensions of Article 21. Section 377 IPC denies a person’s dignity and criminalizes his or her core identity solely on account of his or her sexuality and thus violates Article 21 of the Constitution. As it stands, Section 377 IPC denies a gay person a right to full personhood which is implicit in notion of life under Article 21 of the Constitution.
5. High Court observed that, Section 377 IPC come in the way of MSM accessing HIV/AIDS prevention material or health care intervention. Section 377 IPC pushes gays and MSM underground, leaves them vulnerable to police harassment and renders them unable to access HIV/AIDS prevention material and treatment.
6. High court also observed that “the submission of ASG that Section 377 IPC helps in putting a brake in the spread of AIDS and if consensual same-sex acts between adults were to be decriminalized, it would erode the effect of public health services by fostering the spread of AIDS is completely unfounded since it is based on incorrect and wrong notions. Sexual transmission is only one of the several factors for the spread of HIV and the disease spreads through both homosexual as well as heterosexual conduct. There is no scientific study or research work by any recognized scientific or medical body, or for that matter any other material, to show any causal connection existing between decriminalization of homosexuality and the spread of HIV/AIDS.”
7. Addressing the last issue of the case, the Court observed that, popular morality or public disapproval of certain acts is not a valid justification for restriction of the fundamental rights under Article 21. Popular morality, as distinct from a constitutional morality derived from constitutional values, is based on shifting and subjecting notions of right and wrong. If there is any type of “morality” that can pass the test of compelling state interest, it must be “constitutional” morality and not public morality. The Constitution of India recognizes, protects and celebrates diversity. To stigmatize or to criminalize homosexuals only on account of their sexual orientation would be against the constitutional morality.

## **SURESH KUMAR KAUSHAL VS. NAZ FOUNDATION**

### **In the Supreme Court of India**

NAME OF THE COURT	SURESH KUMAR KAUSHAL VS. NAZ FOUNDATION
CITATION	CIVIL APPEAL NO. 10972 OF 2013
DATE OF THE CASE	11 DECEMBER 2013
PETITIONER	SURESH KUMAR KAUSHAL

RESPONDENT	NAZ FOUNDATION
BENCH / JUDGE	G.S.SINGHVI, SUDHANSHU JYOTI MUKHOPADHAYA
STATUES / CONSTITUTION INVOLVE	CONSTITUTION OF INDIA, INDIAN PENAL CODE
IMPORTANT SECTIONS / ARTICLES	SECTION 377 OF IPC, ARTICLE 14, ARTICLE 15 AND ARTICLE 21 OF THE INDIAN CONSTITUTION, SECTION 294 OF IPC

**ABSTRACT :-**

**Section 377** OF IPC deals with the punishment for people who voluntarily has carnal intercourse against the order of nature with any man, woman or animal. Punishment involves imprisonment for life, imprisonment for some time which may extend to ten years, and also be liable for a fine. Sec 377 of the British colonial penal code criminalized all sexual acts against the order of nature. This section was used for prosecuting people involved in the sexual act along with homosexual activities.

Suresh Kumar Kaushal v. Naz Foundation is a case in which 2 judge bench of Supreme Court which consists of Justice G. S. Singhvi and S. J. Mukhopadhaya turned over the Delhi high courts judgment of Naz foundation v govt. of NCT of Delhi and reinstated sec 377 of the IPC.

**INTRODUCTION:-**

Suresh Kumar Kaushal v Naz foundation case is concerned with the topic of LGBT rights which has been a very heated topic for discussion and debate .the Delhi high court passed a judgment in favour of LGBT people in 2009 in the landmark judgment of Naz Foundation v. Govt. Of NCT Delhi which declares sec 377 of IPC unconstitutional and said that sec 377 is violative of Articles 14,15 and 21 of the constitution of India and allowing consensual sexual activity between 2 homosexuals above 18 years of age. This leads to the ending of around 100 years of criminalization and oppression.

In the Suresh Kumar Kaushal v Naz foundation case supreme court struck down the Delhi high courts decision in the Naz Foundation case.

The case deals with the constitutionality of sec 377of IPC which criminalizes sexual activity against the order of nature that criminalizes any sexual activity other than the heterosexual

Homosexuality until very recently was considered to be an abnormality or aberrance and for this reason, LGBT people were subjected to torture, harassment to cure them of it.

A draft of the penal code was prepared during the British administration which dealt with unnatural sexual offences which were later incorporated into sec 377 as a part of IPC under offences concerning to human body and unnatural offences.

The legal definition of this section reveals that consent is no defence under this section and no qualification concerning age is made in this sec although that is there for other crimes concerning the body and human life under the IPC.

**BACKGROUND OF THE CASE:-**

- Naz Foundation is an NGO that works in the field of prevention and intervention of HIV/AIDS. Its work focuses on targeting homosexuals or gays in consonance with the integrationist policy.
- Asserting that its efforts have been severely harmed by the discriminatory attitude exhibited by the state authorities towards the LGBT community people and it is not possible to prevent HIV /AIDS unless the dignity of the LGBT people is restored by doing away the discriminatory laws like sec 377of IPC.
- Naz foundation filed a writ petition before the Delhi high court and prayed for a grant of a declaration that sec 377 IPC to the extent it applies to and penalizes sexual acts in private between consenting adults is violative of Article 14, 15,19(1) (a)-(d) and 21 of the constitution of India.

**FACT OF THE CASE:-**

- The case concerns with the constitutionality of sec 377 of IPC.
- Sec 377 created an offence of voluntarily having carnal intercourse “against the order of the nature” with any man , woman ,or animal punishable by imprisonment or a fine .
- In 2001 Naz foundation filed a writ petition before Delhi High Court seeking a declaration that sec377 to extent that it penalized sexual acts in private between consenting adults violated the Indian constitution specifically sec 14 , 15 , 19(1) (a)-(d) and 21.
- Naz foundation argued that as private consensual relations were protected under article 21 of constitution, sec 377 was invalid as there was no compelling state interest to justify the curtailment of fundamental rights .
- Naz foundation also argued that sec 377 violated article 14 of the constitution of India .
- In 2004 high court dismissed the writ petition on the ground that only purely academic issues had been submitted which could not be examined by the court.
- In its 2009 decision, the Delhi high court decided that the sec 377 of the IPC disregarded various fundamental rights , including article 14 , 15 and 21 . The said decision was appealed against in the supreme court of India in Suresh Kumar Kaushal v. Naz foundation and it was held the Delhi high court was wrong in reading down the sec to allow consensual homosexual activities between two adults of same-sex.

**ISSUES RAISED BEFORE THE COURT:-**

**The major issues that emerged before the court for its attention and contemplation involved the violation of Fundamental rights given under article 14, article 15 and article 21 of the Indian constitution.**

- Whether section 377 violates any of the provisions related to part 3 (sec 12 to 35) fundamental rights of constitution of India and therefore it is constitutionally valid or invalid ?
- Whether section 377, in so far criminalizes consensual sexual activity of two adults of same-sex in private, is violating article 21 of Indian constitution which guarantees right to life and personal liberty ?
- Whether or not the high court was justified in entertaining the challenge to section 377?

**ARGUMENTS:-****Appellants argument:-**

- A severe error was committed by the high court by declaring section 377 to violate articles 14,15, and 21 of the constitution as it ignores the lack of fundamental facts in the respondent’s writ which would be essential for pronouncing the constitutionality of any statutory provision. The documentary evidence supplied in its place was not a basis for finding that homosexuals were singled out for discriminatory treatment by the law.
- The appellant also argued that the data presented was built and deceitful. And the statistical incorporate by respondents in its petition were insufficient for finding that section 377 adversely affect the control of HIV AIDS and decriminalization of sec377 would decrease the no.
- Section 377 of IPC is gender-neutral and covers voluntary acts of carnal intercourse irrespective of gender committing the act. As no specific class is targeted by the law, no classification is being made therefore inducing the decision of the high court that it offended article 14 to be without basis.
- Sec 377 on the force of it does not mention any particular group of people or gender and hence is not violative of articles 14,15 and 21 of the constitution of India.
- The right to privacy does not include the right to commit any offense so sec 377 does not violate the right to privacy and dignity under Article 21.

- If the ordinance were approved, India's social structure and the institution of marriage would be detrimentally affected and it would cause young people to become temperate towards homosexual activities.
- Courts by their very own nature should not undertake the task of legislating which should be left to parliament. The high court was unsure whether it was serving the law or reading it down and as long as the law is on the statute book there is a constitutional presumption in its favor. Whether a law is moral or immoral is a matter that should be left to parliament to decide.

#### **Respondents argument:-**

- Sec 377 is based on traditional Judeo-Christian morals and ethical standards and is being used to legitimize discrimination against LGBT.
- Sec 377 targets the LGBT community by criminalizing closely held personal characteristics such as sexual orientation. Sexual rights and sexuality are human rights guaranteed under article 21. Sec 377 deprives LGBT of their full moral citizenship.
- Sec 377 is so far so it criminalizes sexual activities between two adults of same-sex or heterosexual penile no vaginal sexual intercourse between consenting adults is a violation of articles 14,15 and 21 of the constitution of India.
- Sexual intimacy is a core aspect of human experience and criminalizing sexual acts engaged in by homosexual people is the denial of this human experience while the same is allowed to heterosexuals.
- Criminalization increase stigma and discrimination for LGBT people and it acts as a barrier to HIV prevention programs.
- Sec 377 is impermissibly broad, assigns policymaking powers to the police, and results in the harassment and abuse of the rights of the LGBT.
- The difference between obscene acts in public and private is acknowledged in sec 294. It should be examined in light of the Constitutional provisions which comprises the right to be let alone.

#### **RELATED PROVISIONS:-**

##### **Section 377 of IPC:-**

Whoever voluntarily has carnal intercourse against the order of nature with any man, woman, or animal shall be punished with imprisonment of life or with imprisonment of either for a term which may extend to ten years and shall also be liable to fine.

##### **Section 294 of IPC:-**

Obscene acts and songs.—Whoever, to the annoyance of others—

- does any obscene act in any public place, or
- sings, recites or utters any obscene song, ballad or words, in or near any public place, shall be punished with imprisonment of either description for a term which may extend to three months, or with fine, or with both.

##### **Article 14 of the Indian constitution:-**

Article 14 of the Constitution of India is as under: “the State shall not deny the right to equality before the law or the equal protection of the laws within the territory of India.”

##### **Article 15 of the Indian constitution:-**

The state shall not discriminate against any citizen on grounds only of religion, race, caste, sex, place of birth, or any of them.

No citizen shall, on the ground only of religion, race, caste, sex, place of birth or any of them, be subject to any disability, liability, restriction or condition with regard to -

- (a) access to shops, public restaurants, hotels and places of public entertainment; or

(b) the use of wells, tanks, bathing ghats, roads and places of public resort maintained whole or partly out of State funds or dedicated to the use of the general public.

**Article 19 of the Indian constitution:-**

It states that – “everyone has the right to freedom of opinion and expression; this right shall include freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers.”

**Article 21 of the Indian constitution:-**

It states that – no person shall be deprived of his life or personal liberty except according to procedure established by the law.

**JUDGEMENT:-**

The panel of 2 judges of the Supreme Court deciding the case allowed the appeal and overturned the Delhi high courts judgment of the Naz Foundation case.

The supreme court ultimately found that sec 377 of IPC does not violate the Constitution of India and dismissed the petition filed by the respondent.

The supreme court held that sec 377 is not violative of articles 14,15 and 21 of the Constitution and that carnal intercourse means unnatural lust ought to be punished.

The supreme court states that a minuscule fraction of countries population constitutes LGBT and Delhi high court had inaccurately relied on International precedents in its distress to protect the rights of LGBT community peoples.

Justice Sanghvi said that as sec 377 is a pre Constitutional legislation and if there were any violation of rights guaranteed under part 3 of the Constitution parliament would have noticed that and repealed the sec 377 long ago.

Supreme Court held that sec 377 of the IPC does not suffer from any constitutional infirmity and left the competent legislature to assess the desirability and legitimacy of deleting the sec from the statute book or altering the same to allow the sensual sexual activity between 2 adults of the same sex.

**CONCLUSION:-**

The two judges bench of the Supreme court upheld the constitutional validity of Sec 377 of the Indian penal code that makes the consensual sexual act a punishable offence. The court held that those who indulge in carnal intercourse. The court held that those who indulge in carnal intercourse in the regular course and those who indulge in carnal intercourse against the order of nature constitute different Categories and the people falling under the latter category cannot claim that the sec 377 of IPC suffers from corruption of arbitrariness and unfair division. In this case, the supreme court recriminalized sexual intercourse against the order of nature. Both judges however noted that the Parliament should debate and decide on the matter. A bench of justices upheld the constitutional validity of Section 377 of the Indian Penal Code that makes anal sex a punishable offence.

**Central Administrative Tribunal - Kolkata**  
**Atri Kar vs Union Public Service Commission on 11 July, 2018**  
**Bench: Nandita Chatterjee, Bidisha Banerjee**

CENTRAL ADMINISTRATIVE TRIBUNALKOLKATA BENCH

Date of Order:  
11.07.2018.

O,A350/196/2018

Coram: Hon'ble Ms. Bidisha Banerjee, Judicial Member

Hon'ble Dr. (Ms.) Naridita Chatterjee, Administrative  
Member

Atri Kar, son of Sri Parimal Kar, and presently self identified as transgender, aged about 28 years, residing at 2/A,

Shibpur Main Road, Bansberia, Mogra, Hooghly - 712503, West Bengal.

---Applicant.

-Versus-

The Union of India, service through the Secretary, Ministry of Human Resources and Development, having its office at 302-C, Shastri Bhawan, New Delhi - 110001.

The Union Public Service Commission, represented by its Chairman, having its office at Dholpur House, Shahjahan Road, New Delhi - 110069.

The Secretary, Union Public Service Commission, having its office at Dholpur House, Shahjahan Road, New Delhi - 110069.

---Respondents.

For The Applicant(s): Ms. A. Chakraborty, Counsel For The Respondent(s): Mr. A. K Chattopadhyay, Counsel ORDER (ORAJJ Per: Ms. Bidisha Banerjee, Judicial Member:.

This application was filed in order to seek the following relief:

Direction upon the respondents and their men and agent to modify and/or rectify the Notification being Advertisement No. "EXAMINATION NOTICE NO. 04/2018-CSP", published on 07.02.2018 and the online Application form and incorporates and/or includes the option of "Other" in the Gender category and to allow the petitioner candidate to fill up the Application Form in accordance with law.

Direction upon the respondents and their men and agent to allow the petitioner to fill up Offline form, if the respondents and their men and agent cannot modify/rectify the said Online Application within the prescribed time viz 06.03.2018.

Direction upon the respondents and their men and agent to treat the petitioner as a socially and /or economically backward / class candidate and treat the petitioner as a reserved candidate and therefore waive off the requisite fees required for Registration.

Direction upon the respondents and their men and agent to not act on the impugned notice dated 07.02.2018 till the petitioner is allowed to fill up the form as per their self identified gender.

Direction upon the respondents and their men and agent to pass any order as to costs, and To pass any such other order or order as the Hon'ble Tribunal may deem fit and proper."

2. Hon'ble Apex Court in Writ Petition (Civil) No. 400 of 2012 (National Legal Services Authority vs. Union of India & Ors.) discussed each and every aspect in regard to discrimination towards transgender category and one's gender identity and recognition, inter alia, describing the Rights to the universal enjoyment of human rights, Rights to equality and non-discrimination, Right to privacy, Right to freedom of opinion and expression, Right to education and public employment, Right to recognition before the law, Rights to life etc. The Hon'ble Apex Court in the case considered some Foreign judgments as well as its earlier decisions and finally declared that :-

To transgender persons right to decide their identified gender is also availed and the central and state Governments are directed to grant legal recognition of their gender identity such as "Male" and "Female" and "Third Gender";

We direct the Central and the State Government to treat them as social, educational backward classes or citizens and extend all kinds of reservation in case of admission in educational institutions and for public appointment."

In the present case, the applicant, a transgender, was deprived from appearing in the Civil Services Examination, scheduled to be held on 03.06.2018, where the last date of filling up of the application form was 06.03.2018 since the application form did not have any column other than "Male" and "Female".

Since, the main issue regarding rights of the Transgender has already attained finality in view of the Hon'ble Apex Court's decision, this Tribunal, on 27.02.2018, directed the respondent authorities, more particularly the respondent No. 2 to allow the applicant to fill up the Application Form offline for appearing in the Civil Services Examination, 2018 in pursuance of the Examination Notice No, 04/2018-CSP dated 07.02.20 18 issued by the UPSC.

Today at hearing, id counsel for both the parties were present and submitted in unison that the applicant has been allowed to appear in the examination pursuant to such directions, and therefore, this O.A he disposed of as infructuous.

In our considered opinion, since the applicant has been allowed to sit for the examination (Civil Services Examination conducted by UPSC), as per directions of this Tribunal, the reliefs prayed for seeking modification or rectification of notification has become infructuous.

Accordingly we dispose of the O.A with a direction upon the respondents to process her case in accordance with law and not to pose any further hindrance or impediment in her consideration on the basis of her gender identity. No costs.

However before we part, we would hasten to add that we are concerned the fate of such candidates alike the present one. Hence, we request the DOPT to oversee that in matters of public employment, the judgement of Hon'ble Apex Court (supra) is duly implemented, so that candidates alike the present applicants are not compelled to knock the doors of Tribunals & Courts for justice, every time a recruitment/ notification is issued.

A copy of this order be sent to the DOPT.

(Nandita Chatterjee)

Member (A)

(Bidisha Banerjee)

Member (J) ss

## Appendix- 5

### QUESTIONNAIRE

- (1) What of the following best describes the gender identity of you?
  - a) Male
  - b) Female
  - c) Trans male
  - d) Trans female
  - e) Genderqueer
  - f) Kothi
  - g) Tom Boy
  - h) Others
  
- (2) What is your assigned sex on your birth certificate?
  - a) Male
  - b) Female
  - c) Intersex
  - d) Don't know
  
- (3) What is the highest level of education you have attained so far?
  - a) Never go to school
  - b) Do not passed class iv
  - c) Class Iv pass
  - d) Passed class viii
  - e) Passed Madhyamik (M.P.)
  - f) H.S.
  - g) Completed graduation
  - h) Masters
  - i) Ph d
  - j) Law (LLB)
  - k) Other qualification (if any) .....
  
- (4) What is your age? .....
  
- (5) Do you engage in any work?
  - a. Yes
  - b. No
  
- (6) If you are working, what type of job do you have?
  - a. Govt. Sector
  - b. Private Sector
  - c. NGO
  - d. Hijra
  - e. Lawyer
  - f. Self Employed
  - g. Begging in Road and Train
  - h. In Creative Sector
  - i. Others



- 
- (7) If you are working, then your monthly income?
- a. <10000
  - b. 10000-20000
  - c. 20000-50000
  - d. 50000-100000
  - e. 1-2 Lakhs
  - f. >2 Lakhs
- (8) If you are working, then type of your work?
- a. Part Time
  - b. Full Time
- (9) If you are non- working, then what are you doing now?
- a. Reading in school
  - b. Reading in College
  - c. Reading in University
  - d. Others
- (10) Are you associated with any NGO?
- a) Yes
  - b) No
- (11) If yes, then please specify :
- a) Sappho For Equality
  - b) Prantakatha
  - c) The pratyay gender trust
  - d) Kolkata rista
  - e) Ametie Trust
  - f) Nadia Ranaghat Sampriti
  - g) ATHB
  - h) Troyee
  - i) Plexus India-9
  - j) Vaarta Trust
  - k) SRS Solution
  - l) Others
- (12) In which religion do you belong?
- a) Hinduism
  - b) Islam
  - c) Christianity
  - d) Judaism
  - e) Buddhism
  - f) Atheist
  - g) Agnostic
  - h) Other .....
- (13) What is your legal marital status? Tick all the options that apply to you.
- a) Unmarried
  - b) Married
  - c) Separated
  - d) Divorcee
  - e) Widowed
  - f) Others

- (14) Now a day, with whom do you live in?
- a) With family
  - b) On my own
  - c) With my partner
  - d) Friend's house
  - e) Hostel
  - f) Community member's house
  - g) Under the roof of NGO
  - h) With hijra community or hijra ghar
  - i) Other .....(please specify)
- (15) Do you understand your gender Identity?
- a. Yes
  - b. No
  - c. Confusing or gender fluid
- (16) If the answer is 'yes, then at which age do you understand your gender identity...
- (17) Do you disclose your gender identity or sexual orientation to others?
- a) Yes
  - b) No
  - c) Not require to disclose separately
- (18) If yes, then at which age, you disclose your gender identity to others? .....
- (19) With whom, do you first disclose your gender identity?
- a) Your mother
  - b) Your father
  - c) Both the Parent
  - d) Best friend
  - e) Partner
  - f) Community members
  - g) Other ..... (please specify)
- (20) After disclosing or knowing your GI, do you receive any torture from your family?
- a. Yes
  - b. No
  - c. Not Applicable
- (21) If the ans is yes, then which type of torture do you receive at home?
- a. Rebuke
  - b. Beating
  - c. Verbal abuse
  - d. Locking him/her inside the room
  - e. Expel from his/her house-5
  - f. Stop pocket money-6
  - g. Put him /her in a room-7
  - h. Attempting rape by anybody else-8
  - i. Others
- (22) Do you understand your sexual orientation?
- a. Yes
  - b. No

- 
- (23) If the ans is 'yes', then at which age do you understand your SO? .....
- (24) Do you disclose your SO?
- Yes
  - No
- (25) If yes, then at which age, you disclose your sexual orientation to others? .....
- (26) With whom, do you first disclose your sexual orientation?
- Your mother
  - Your father
  - Best friend
  - Partner
  - Community members
  - Other ..... (please specify)
- (27) To whom you are sexually attracted to?
- Male
  - Female
  - Trans male
  - Trans female
  - Queer
  - Intersex
  - All binary people
  - Non -binary people
  - Both male and female
  - Not attracted to any gender
- (28) How do you define your SO?
- Heterosexual
  - Bisexual
  - Lesbian
  - Gay
  - Pansexual
  - Queer
  - Asexual
  - Not Identified
  - Pseudoheterosexual
  - Don't want to disclose
- (29) Getting any torture after disclosing your Sexual Orientation from home?
- Yes
  - No
  - Not Applicable
- (30) If the ans is yes, then which type of torture do you receive at home?
- Rebuke
  - Beating
  - Verbal abuse
  - Locking him/her inside the room
  - Expel from his/her house-5
  - Stop pocket money-6

- g. Put him /her in a room-7
  - h. Attempting rape by anybody else-8
  - i. Others
- (31) Due to different problems arises for your GI & SO, do you leave your home?
- a. Yes
  - b. No
  - c. Not Applicable
- (32) If the ans is 'yes', then where did you live then?
- a. Under the shelter of NGO
  - b. Friend's House
  - c. Neighbour's House
  - d. House of the Community Members
  - e. Shelter Home
  - f. Hijra Ghar
  - g. With Partner
  - h. On my own
  - i. Others
- (33) Are you requested for coming back home?
- a. Yes
  - b. No
  - c. NA
- (34) If you are requested, do you come back your home?
- a. Yes
  - b. No
- (35) Do you smoke or drink or use any drugs on a regular basis?
- a. Yes
  - b. No
- (36) If yes, then which of the following do you take?
- a. Cigarette
  - b. Alcohol
  - c. Marizuana
  - d. Heroin
  - e. Sedatives
  - f. Others
- (37) Do you have any romantic relationship?
- a. Yes
  - b. No
- (38) If 'Yes', how would you feel about your romantic relationships?
- a. Very Good
  - b. Good
  - c. Medium
  - d. Bad
  - e. Very Bad

- 
- (39) Do you use any protection against HIV & STD?
- Yes
  - No
  - NA
- (40) If the ans is 'Yes', then what kind of protection do you use?
- Condom
  - PrEP
  - PEP
  - Intravaginal Ring
  - Injectables
  - Implants
  - Antibodies
  - Others
- (41) How would you describe your physical health in last 12 months?
- Very good
  - Good
  - Medium
  - Bad
  - Very bad
- (42) Do you suffer from any chronicle diseases?
- Yes
  - No
- (43) If the ans is yes, then what kind of diseases do you suffer from?
- Blood pressure
  - Blood sugar
  - Arthritis
  - Hemophilia
  - Cirrhosis of lever
  - Others
- (44) Do you ever go to any psychologists or psychiatrist?
- Yes
  - No
- (45) Are you suffering from any mental health diseases?
- Yes
  - No
- (46) If the ans is 'yes', then what kind of mental diseases do suffer from?
- Depression
  - Anxiety
  - Gender Dysphoria
  - Homophobia
  - Trans phobia
  - Schizophrenia
  - Others

- 
- (47) Do you ever think about suicide?
- Never
  - Almost never
  - Sometimes
  - Almost always
  - Always
- (48) Do you ever attempt suicide?
- Never
  - Rarely
  - Sometimes
  - Often
  - Always
- (49) Do you ever harm yourself?
- Never
  - Rarely
  - Sometimes
  - Often
  - Always
- (50) Have you ever felt unhappy about your assigned sex and present body structure?
- Never
  - Rarely
  - Sometimes
  - Often
  - Always
- (51) How much you satisfied about your overall life?
- Very much satisfied
  - Satisfied
  - Medium
  - Dissatisfied
  - Very much dissatisfied
- (52) How much satisfied about your Social life?
- Very much satisfied
  - Satisfied
  - Medium
  - Dissatisfied
  - Very much dissatisfied
- (53) Do you have any sexual life?
- Yes
  - No
- (54) If the ans is 'Yes', how would you feel about your sexual life?
- Very much satisfied
  - Satisfied
  - Medium
  - Dissatisfied
  - Very much dissatisfied

- 
- (55) How much your satisfaction about your educational qualification?
- Very much satisfied
  - Satisfied
  - Medium
  - Dissatisfied
  - Very much dissatisfied
- (56) Do you want to study more?
- Yes
  - No
- (57) Do you face any bullying in your educational institution due to your GI/SO?
- Never
  - Rarely
  - Sometimes
  - Frequently
  - Very frequently
  - Not Applicable
- (58) Does your school have anti bullying policy?
- Yes
  - No
  - Not Applicable
- (59) Does your school provide any information about gender & sexual minority people?
- Never
  - Rarely
  - Sometimes
  - Frequently
  - Very frequently
  - Not Applicable
- (60) Do you get any help from your teachers about gender & sexual minority people?
- Never
  - Rarely
  - Sometimes
  - Frequently
  - Very frequently
  - Not Applicable
- (61) Does your school have trans friendly counselor?
- Yes
  - No
  - NA
- (62) Does your school have unisex uniform?
- Yes
  - No
  - NA

(63) Does your school have trans friendly toilet?

- a. Yes
- b. No
- c. NA

(64) What is your school's attitude towards discover different gender and sexual minorities?

- a. Very good
- b. Good
- c. Medium
- d. Bad
- e. Very bad
- f. NA

(65) Was/is it possible to tell about your GI & SO to your teachers?

- a. Never
- b. Rarely
- c. Sometimes
- d. Frequently
- e. Very frequently
- f. Not Applicable

(66) If yes, how is your job satisfaction?

- a. Very much satisfied
- b. Satisfied
- c. Medium
- d. Dissatisfied
- e. Very much dissatisfied

(67) If you are working, then do you face any harassment in your workplace?

- a. Never
- b. Rarely
- c. Sometimes
- d. Frequently
- e. Very frequently

(68) If you are facing harassment in your workplace, then what kind of harassment do you face?

- a. Curious eye
- b. Satire
- c. Mockery
- d. Maximum employees stop to talk with you
- e. Avoiding tendency
- f. Feel separated from others
- g. Unsolicited advice
- h. Any others

(69) If you are facing all these humiliation, then in what way you handle all of these?

- a. Face every questions boldly and give all answers without hesitations
- b. Feel shaky and can't give them proper answers



- 
- c. You always try to avoid your colleagues and suffering from inferiority complex
  - d. You get angry when anybody asks your personal questions
  - e. All time in your workplace feel depressed and suffering from anxiety
- (70) How is our society for living safely & peacefully for gender & sexual minority people?
- a. Very good
  - b. Good
  - c. Medium
  - d. Bad
  - e. Very bad
- (71) Are your GI & SO become an obstacle in your study and employment?
- a. Yes
  - b. No
- (72) Are you ever discriminated for your GI & SO?
- a. Never
  - b. Rarely
  - c. Sometimes
  - d. Frequently
  - e. Very frequently
- (73) Do you feel that you are marginalized in our society?
- a. Yes
  - b. No
- (74) Do you ever get any help from any source?
- a. Yes
  - b. No
- (75) If the ans is yes, then from whom they get help?
- a. Community member
  - b. NGO
  - c. Government
  - d. Common people
  - e. Other sources
- (76) Are you actively engaged in trans activism?
- a. Yes
  - b. No
- (77) Is there any supportive person in your life?
- a. Yes
  - b. No
- (78) If yes, then who is your supportive person in your life?
- a. Mother
  - b. Father
  - c. Both Parent
  - d. Other family member
  - e. Friends

- f. Community members
- g. Others

(79) Do you ever go to any Dr. for your treatment in your health issue?

- a. Yes
- b. No

(80) If the answer is 'yes', then how was his / her behaviour ?

- a. Very good
- b. Good
- c. Medium
- d. Bad
- e. Very bad

(81) Is any Dr. refuse you to treat because of your GI & SO?

- a. Yes
- b. No

(82) Do you think that health service providers have a vast knowledge towards gender non binary people and other sexual minority groups of people?

- a. Yes
- b. No
- c. Don't know

(83) What do you think about the behaviors of different health service providers to the community people in different hospitals and nursing homes?

- a. Very good
- b. Good
- c. Medium
- d. Bad
- e. Very bad

(84) Has anyone changed their behavior over time after hearing your GI/SO?

- a. Yes
- b. No
- c. NA

(85) If yes, then please tell me the relationship of the person with you?

- a. Father
- b. Mother
- c. Both parent
- d. Other family members
- e. Neighbors
- f. Teachers
- g. Friends
- h. Others

(86) Are you satisfied with your assigned sex at birth & your body structure?

- a. Yes
- b. No

- 
- (87) Do you ever think about change your body through SRS?
- Always
  - Often
  - Sometimes
  - Rarely
  - Never
  - Not Applicable
- (88) Do you take any Hormone Replacement Therapy?
- Yes
  - No
- (89) If the answer is 'no', then did you think to take HRT in future?
- Yes
  - No
- (90) Do you ever go through any SRS?
- Yes
  - No
- (91) If the ans is 'yes', then is it MTF / FTM?
- MTF
  - FTM
- (92) If MTF, then which type of surgeries do you have undergone?
- Augmentation Mammoplasty
  - Penectomy
  - Orchiectomy
  - Vaginoplasty
  - Facial feminization surgery
  - liposuction
  - lipofilling
  - Voice Surgery
  - thyroid cartilage reduction
  - Gluteal augmentation
  - Hair Reconstruction
  - Clitoroplasty
  - Vulvoplasty
  - Commisuroplasty
  - Deepening the neo-vagina
  - Others
- (93) If FTM, then which type of surgeries do you have undergone?
- Mastectomy
  - Hysterectomy
  - phalloplasty
  - metoidioplasty
  - scrotoplasty
  - vaginectomy
  - Voice surgery
  - liposuction
  - lipofilling

- j. pectoral implants
  - k. Others
- (94) If you go through the surgery, are you satisfied with this?
- a. Very much satisfied
  - b. Satisfied
  - c. Medium
  - d. Dissatisfied
  - e. Very much dissatisfied
- (95) Do you want further physical modifications?
- a. Yes
  - b. No
- (96) If 'yes', what kind of modifications do you want?
- a. MTF
  - b. FTM
- (97) If MTF, then which type of surgeries do you want to undergo?
- a. Augmentation Mammoplasty
  - b. Penectomy
  - c. Orchiectomy
  - d. Vaginoplasty
  - e. Facial feminization surgery
  - f. liposuction
  - g. lipofilling
  - h. Voice Surgery
  - i. thyroid cartilage reduction
  - j. Gluteal augmentation
  - k. Hair Reconstruction
  - l. Clitoroplasty
  - m. Vulvoplasty
  - n. Commisuroplasty
  - o. Deepening the neo-vagina
  - p. Others
- (98) If FTM, then which type of surgeries do you want to undergo in future?
- a. Mastectomy
  - b. Hysterectomy
  - c. phalloplasty
  - d. metoidioplasty
  - e. scrotoplasty
  - f. vaginectomy
  - g. Voice surgery
  - h. liposuction
  - i. lipofilling
  - j. pectoral implants
  - k. Others
- (99) If you not yet go through any surgeries, do you want to go through SRS in future?
- a. Yes
  - b. No

- 
- (100) If yes, MTF/FTM?
- MTF
  - FTM
- (101) If MTF, then which type?
- Augmentation Mammoplasty
  - Penectomy
  - Orchiectomy
  - Vaginoplasty
  - Facial feminization surgery
  - liposuction
  - lipofilling
  - Voice Surgery
  - thyroid cartilage reduction
  - Gluteal augmentation
  - Hair Reconstruction
  - Clitoroplasty
  - Vulvoplasty
  - Commisuroplasty
  - Deepening the neo-vagina
  - Others
- (102) If FTM, then which type ?
- Mastectomy
  - Hysterectomy
  - phalloplasty
  - metoidioplasty
  - scrotoplasty
  - vaginectomy
  - Voice surgery
  - liposuction
  - lipofilling
  - pectoral implants
  - Others
- (103) How do you define your physical appearance?
- Musculine
  - Feminine
  - Neutral or other
- (104) Do you get support from your family for your GI/SO?
- Never
  - Rarely
  - Sometimes
  - Often
  - Always
- (105) If you get support from your family, then from when you got support from your family?
- From the very first day after disclosing
  - After few days
  - After few months
  - After 1 year
  - After few years

- 
- (106) Do you face any harassment during travelling in public vehicles?
- Very frequently
  - Frequently
  - Sometimes
  - Often
  - Rare
  - Never
- (107) Then what kind of harassment do you receive?
- Verbal abuse
  - Bullying
  - Sexual Assault
  - Molestation
  - Bad Eyes
  - Other
- (108) Do you have acceptance within your family member?
- Never
  - Very rare
  - Rare
  - Sometimes
  - Often
  - Always
- (109) How does your neighbor treat you?
- Very good
  - Good
  - Moderate
  - Bad
  - Very bad
- (110) After knowing your GI & SO, do your neighbors invite you to their house in any occasion?
- Never
  - Very rare
  - Rare
  - Sometimes
  - Often
  - Always
- (111) Are they avoiding you, especially for your GI & SO?
- Yes
  - No
- (112) Do you get cordial invitation in any social programme (i.e, picnic, pujo celebration etc.) in your area?
- Never
  - Very rare
  - Rare
  - Sometimes
  - Often
  - Always

- 
- (113) How friends behave with you?
- Very good
  - Good
  - Medium
  - Bad
  - Very bad
- (114) Does your parent get ashamed for your GI & SO?
- Yes
  - No
  - NA
- (115) Do you feel marginalized within your family?
- Yes
  - No
  - NA
- (116) Do you feel free to talk and make friendship with any cisgender and other heterosexual people?
- Yes
  - No
- (117) If you feel marginalized in your family, then with whom do you feel better?
- Friends
  - Community members
  - Others
- (118) Do you want to go any party or marriage ceremony?
- Never
  - Rare
  - Sometimes
  - Often
  - Always
- (119) If you go to the party, how would you feel there?
- Awesome
  - Ashamed
  - Angry
  - Shaky
  - Awkward
- (120) If you don't want to go there, then what is the reason behind it?
- Maximum people try to avoid you-1
  - People ask different insulting questions-2
  - Verbal abuse-3
  - Others
- (121) Do you have children?
- Yes
  - No
- (122) If yes, then is the child is your biological child?
- Yes
  - No

- 
- (123) If the answer is 'no', then from where do he/she/ they come?
- a. Adopted from orphanage
  - b. Adopted through KARA
  - c. From parents
  - d. Street child
  - e. From Other sources
- (124) If at present, you don't have any children, do you want to have a child?
- a. Yes
  - b. No
- (125) If the answer is 'yes', then from where do you want to adopt your child?
- a. From orphanage
  - b. Street child
  - c. Slum area
  - d. Through KARA
  - e. From parents
  - f. Other
- (126) Do you have any medical insurance?
- a. Yes
  - b. No
- (127) Have you ever tried to amend your documents?
- a. Yes
  - b. No
  - c. NA
- (128) If yes, then which documents do you want to amend?
- a. Voter card
  - b. Adhaar card
  - c. PAN card
  - d. Passport
  - e. Driving license
  - f. Others
- (129) Are you successful to amend your documents?
- a. No
  - b. Some documents
  - c. All documents
- (130) If the answer is 'yes', then which documents of you are successfully amended?
- a. Voter card
  - b. Adhaar card
  - c. PAN card
  - d. Passport
  - e. Driving license
  - f. Others



- 
- (131) Are you currently or previously engage in sex work?
- a. No & never engage earlier
  - b. I have not engage earlier, but I think about it recently
  - c. Yes, I engage with it recently
  - d. Engage in past, not recent
- (132) Have you ever tested HIV?
- a. Yes
  - b. No
- (133) If yes, then are you HIV positive?
- a. Yes
  - b. No
- (134) If you have tested HIV, then when have you tested last?
- a. <1 year
  - b. 1-2 year
  - c. 2-5 year
  - d. >5 years
- (135) Do you ever tested STD's?
- a. Yes
  - b. No
- (136) If yes, then are you positive?
- a. Yes
  - b. No
- (137) If you are positive, then which type of STD's do you have?
- a. chlamydia-1
  - b. gonorrhea-2
  - c. herpes-3
  - d. HPV-4
  - e. syphilis-5
  - f. other-6
- (138) In which category do you fall among the gender and sexual minority groups?
- a. L (Lesbian)
  - b. G (Gay)
  - c. B (Bisexual)
  - d. T (Transgender)
  - e. I (Intersex)
  - f. Q (Queer)
  - g. K (Kothi)

## Appendix- 6

### RESOURCE PERSONS

- **Bipul Kumar Biswas** - Member Secretary, West Bengal Transgender Persons Development Board.
- **Debdas Biswas** - Former Deputy Director of West Bengal Transgender Persons Development Board.
- **Manabendra Patra** - Deputy Director of West Bengal Transgender Persons Development Board.
- **Ankan Biswas** - Transgender Lawyer.
- **Sourav Sen** - Deputy Director of Planning, KMPC Circle, Statutory Planning Unit, KMDA.
- **Aparna Banerjee** - Secretary of *Amitie Trust* and board member of West Bengal Transgender Development Board and a transgender activist.
- **Ranjita Sinha** - A transgender activist and member of ATHB (Association of Transgender/Hijra in Bengal). She is a social activist and also associated with many NGOs in Kolkata and she has started building the first ever transgender clinic in one of the oldest private healthcare provider Peerless Hospital in Kolkata..
- **Megh Sayantan Ghosh** - A transgender activist, a good dancer and a lawyer.
- **Abhinav Dutta** - A gender and sexuality rights activist, Principal Investigator and Research Fellow at the Williams Institute at UCLA School of Law and works at NIRDPR-National Institute of Rural Development & Panchayati Raj.
- **Dr. Manobi Bandyopadhyay** - India's first transgender college principal.
- **Madhuja Nandi** - A transgender activist, Co-Trustee of Varta Trust, Program Associate at Sanlaap and a member of Barasat Transgender Development Organization.
- **Anuprabha Das Majumder** - a transgender activist and fellow of School For Social Entrepreneurs India.
- **Shree Ghotok** - a transgender activist, a famous dancer and a member of West Bengal Transgender Persons Development Board
- **Aitri Kar** - She is the first *transgender* person in India to take part in a civil services exam after a long legal battle and she is also school teacher in a government primary school and a trans activist
- **Pawan Dhall** - a Kolkata-based queer activist, archivist, researcher and writer. He was a founding member of Counsel Club, Kolkata (1993-2002), among India's earliest queer support groups, and edited its house journal 'Pravartak'. He worked with SAATHII from 2002-14 on universal access to health and social justice. He is now associated with Varta Trust as Founding Trustee. His latest publications include 'Queer Potli: Memories, Imaginations and Re-imaginings of Urban Queer Spaces in India' (Queer Ink, 2019) and 'Out of Line and Offline: Queer Mobilizations in '90s Eastern India' (Seagull Books, 2020).
- **Raina Roy** - She is an activist and co-founder of trans led intersectional feminist organisation Samabhabona working with trans grassroot and minority issues in Bengal. She is also the co-founder of Amra Odbhuth – a space for art, culture and performance for LGBTQUI community, which became a shelter home for the trans community during the pandemic.

- **Shovon Mukhopadhyay** - He arranged public toilets for transgender people in ward no 112 in the KMC area. He arranged separate public toilet for them by placing a sticker which reads 'Tridhara' on general public toilets.
- **Sohini Boral** - Gender and sexuality rights activist, dancer and model
- **Dr. Sheila Rohatgi** - Plastic Surgeon
- **Dr. Anirban Majumder** - Endocrinologist, KPC Medical College and Hospital
- **Dr. Soma Roy** - Advisor of Kolkata Anandam for Equality and Justice and also works at Child in Need Institute (CINI)
- **Dr. Prabir Josh** - Plastic Surgeon
- **Srabasti Majumdar** - Psychological counsellor and gender and sexuality rights activist
- **Dr. Santosh Kumar Giri** - Secretary of Kolkata Rista
- **Sintu Bagui** – A trans activist and Secretary of the NGO 'Kolkata Anandam for Equality and Justice'

## Appendix- 7

### IMPORTANT OFFICES & NGOs

#### Government Offices

- West Bengal Transgender Persons Development Board - Shubhanna(7<sup>th</sup> Floor) DF Block, Sector-I, Salt Lake City,Kolkata-700091.
- KMDA (Kolkata Metropolitan Development Authority) - Unnayan Bhavan, Salt Lake City, DJ-11, Sector-II, Kolkata-700 091.
- Directorate of Census Operations, West Bengal (Ministry of Home Affairs, Govt. of India) - IB-199, Janganana Bhawan, IB Block, Sector III, Bidhannagar, West Bengal 700106.
- West Bengal Human Rights Commission - Purta Bhavan, (2nd Floor), Block-DF, Sector-I, Salt Lake, Kolkata-700091.

#### Non Government Organization:

- Sappho - Ground floor, 21, Jogendra Garden (South, Near, Hindol Park, Kolkata, West Bengal 700078.
- Ametie Trust - 89, Kumir Jala Rd, Barabagan, Serampore, Dakshin Rajyadharpur, West Bengal 712204.
- Prantakatha - Lake View Rd, lake Terrace, Ballygunge, Kolkata, West Bengal 700029
- Pratyay Gender Trust - 293, Jodhpur Park, Jodhpur Park, Jodhpur Park, Kolkata – 700068.
- Kolkata Rista - near Kolkata Rista, 2/H/9, Ghore Bibi Ln, Kadapara, Phool Bagan, Kankurgachi, Kolkata.
- ATHB - Association of Transgender/Hijra in bengal /Gokhale road Bandhan.
- Troyee Foundation - Address: BC 331, Milan bazar Kestopur Kolkata 700102.
- Varta Trust – Near Hajra Road, Kolkata.
- SRS Solution - 1/30, Mahajati Nagar, Matagiri Harna Pally, Agarpara, Kolkata, West Bengal 700109.
- Pleqsus India Foundation - Ramlal Agarwala Lane, Baranagar.

## Appendix- 8

### WEBLIOGRAPHY

[https://wbcdwds.gov.in/User/wings\\_wbtdb](https://wbcdwds.gov.in/User/wings_wbtdb)  
<https://censusindia.gov.in/census.website/data/census-tables>  
<https://nhrc.nic.in/>  
<https://transgender.dosje.gov.in/>  
<https://www.wbgov.org/bangla-awas-yojana/>  
[https://www.childlineindia.org/a/issues/sexual-abuse?gad=1&gclid=EAIaIQobChMIhqeTmtTe\\_gIVHphmAh21swO5EAAYASAAEgKa8\\_D\\_BwE](https://www.childlineindia.org/a/issues/sexual-abuse?gad=1&gclid=EAIaIQobChMIhqeTmtTe_gIVHphmAh21swO5EAAYASAAEgKa8_D_BwE)  
<https://lawmin.gov.in/>  
<https://socialjustice.gov.in/>  
<https://www.sapphokolkata.in/>  
<https://vartagensex.org/>  
<https://resources.vartagensex.org/covid19-resources/amitie-trust/>  
<https://nalsa.gov.in/>  
<https://wbslsa.bangla.gov.in/>  
<https://main.sci.gov.in/jonew/judis/41070.pdf>  
[https://main.sci.gov.in/supremecourt/2016/14961/14961\\_2016\\_Judgement\\_06-Sep-2018.pdf](https://main.sci.gov.in/supremecourt/2016/14961/14961_2016_Judgement_06-Sep-2018.pdf)  
<https://legalserviceindia.com/legal/article-995-lawrence-v-s-texas-naz-foundation-v-s-govt-of-nct-of-delhi-based-on-right-to-privacy.html>  
[https://thc.nic.in/Central%20Governmental%20Rules/Transgender%20Persons%20\(Protection%20of%20Rights\)%20Rules,%202020.pdf](https://thc.nic.in/Central%20Governmental%20Rules/Transgender%20Persons%20(Protection%20of%20Rights)%20Rules,%202020.pdf)  
[https://prsindia.org/files/bills\\_acts/bills\\_parliament/2016/Transgender%20persons%20bill%20as%20passed%20by%20LS.pdf](https://prsindia.org/files/bills_acts/bills_parliament/2016/Transgender%20persons%20bill%20as%20passed%20by%20LS.pdf)  
[https://loksabhadocs.nic.in/Refinput/New\\_Reference\\_Notes/English/The%20Transgender%20persons.pdf](https://loksabhadocs.nic.in/Refinput/New_Reference_Notes/English/The%20Transgender%20persons.pdf)  
<https://www.epw.in/tags/criminal-tribes-act>  
[https://www.indiacode.nic.in/repealed-act/repealed\\_act\\_documents/A1871-27.pdf](https://www.indiacode.nic.in/repealed-act/repealed_act_documents/A1871-27.pdf)  
<https://transgender.dosje.gov.in/Applicant/Registration/ListofNGO>  
<https://www.indiacode.nic.in/bitstream/123456789/13091/1/a2019-40.pdf>  
<https://cdnbbsr.s3waas.gov.in/s380537a945c7aaa788ccfcdf1b99b5d8f/uploads/2023/02/2023021080-2.pdf>  
<https://legislative.gov.in/central-acts-updated/>  
<https://www.mha.gov.in>  
<https://lawfoyer.in/suresh-kumar-kaushal-vs-naz-foundation/>  
<https://indiankanoon.org/doc/121012098/>  
<https://legislative.gov.in/constitution-of-india/>