



“You don’t know us!” –research with the transgender community in Chennai, India.

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ABSTRACT: Transgender community in India characterizes acute Mental Health decline as they experience harassment, discrimination to blatant verbal, physical, and sexual assault, including beatings, rape, and even homicide. This cast-out population facing extreme social exclusion loses it is self-esteem and voice and demands policies and processes that validate their experience and knowledge. This study aims to aid this community by exploring their mental health complexities through the survey method and support their echoes for support and social inclusion through creating awareness. This study is based on the transgender community form three different localities in Chennai, India.

Keywords: transgender community, mental health, social awareness, social inclusion



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1. Introduction

According to the 2011 census, there are about 4.44 lakh transgender people in India, and they are grouped under the male census, which considerably affects the accuracy of the data (Sawant, 2017; Sinha, 2019). Experiencing extreme social exclusion, this community has only 25 percent of the Right to education quota, which has to be shared with other disadvantaged groups (Rajkumar, 2016). Even though the Supreme court of India has passed the Transgender’s Right bill, in 2014, undergoes vast modifications over the years, affecting the applicability of the law’s full capacity (Knight, 2019). In 2014, the Indian constitution also criminalized begging, affecting the survival of this community, leading to increased engagement in sex work resulting in complex health issues (Lyons, 2018; Sinha, 2019). Even though the transgender community holds a significant role in the culture and religion, the Indian state has failed to recognize it as the third gender until now. Respected in the pre-colonial era, this community is now called by various derogatory terms and are seen mostly begging and sex work (Sawant, 2017).

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Thus, this community, which was once celebrated in the Indian culture, is now an oppressed and marginalized group. This cast out community facing extreme social exclusion loses its self-esteem and voice demands policies and process that validates their experience, knowledge (Etmanski et al., 2014; Rajkumar, 2016; Snarch, B., 2004;). These over-researched transgender communities in India are rarely portrayed or less prioritized in the state's law, policies, and they need research that is more accessible to them, actionable, sustainable and caters to their then and now needs (Graham, 2014; Greene et al., 2009). This research project adopted the survey method to engage with the transgender community's voices on their experiences with the society and the awareness of the general community on social acceptance of the transgender community.

Background of the Study

Around 55,000 children were identified as transgender people by their parents, who are disowned by their family and community, making them vulnerable to sex trafficking, harassment, and acute poverty (Sawant, 2017; Sinha, 2019). Transgender individuals claim to be uncomfortable with their biological sex and assigned gender role, and for this community, gender reassignment surgery, hormone therapy, and gender role changing allow them to feel "right" or "natural." Moreover, to afford such expensive reassignment surgery, they are mostly engaged in begging and commercial sex work due to a lack of acceptance and job opportunities. This community characterizes acute Mental Health decline as they experience harassment, discrimination to blatant verbal, physical, and sexual assault, including beatings, rape, and even homicide. Furthermore, most assaults against transgender persons are never reported to the police. A link between these experiences and mental health disorders, such as Post Traumatic Stress Disorder (PTSD), is widely suspected but has not been adequately documented. This study intended to develop an understanding of the issues of the transgender community's mental health, relationship of transgender people with the general society, and assess the level of social acceptance towards them.

Methodology

This research project adopted the close-ended survey method to understand the patterns of livelihood, and mental health problems of the transgender community and assessed the level of acceptance of the transgender community amongst the general public. Descriptive design was used to analyze and describe the data gathered through charts and tables to show the causal relationship. Descriptive design is used in research to describe a population and its characteristics

(Dulock, 1993). Moreover, the recruitment of the sample used to measure the mental health complexities and the social isolation faced by the transgender community was a snowball sampling method. This sampling technique was used since this community was distrustful of the outside research and academy. The study focused on the health issues of transgender people used the sample size of 30 transgender respondents from Saidapet, Zafar Khanpet, Namashivayapuram. Most of this community live in slums on the banks of the river Cooum, an unhygienic and unhealthy environment. The geographic location can prove to be the first cause of their health problems. However, the study revealed that the transgender community faces challenges acquiring a job or a rented house anywhere across the city other than the place they reside in. This leaves them with no other option but to live as groups in different slums where the other marginalized small group of people accommodates them. The second set of data to measure the social acceptance of the transgender community was collected from 50 respondents from the general society through a convenience sampling method in the same localities Saidapet, Zafar Khanpet, Namashivayapuram.

General Profile of the Participants

Participants	Community	Respondents*	Age	Literacy level**
Transgender (Survey A)	Saidapet	11	18-20 = 7 21-30=3 31-40 =1	6 th -10 th grade = 7 10 th to 12 th grade = 2 College = 2
	Zafar Khanpet	9	18-20 = 5 21-30=3 31-40 =1	6 th -10 th grade = 8 10 th to 12 th grade = 1 College = 0
	Namashivayapuram	10	18-20 = 7 21-30=3 31-40 =0	6 th -10 th grade = 9 10 th to 12 th grade = 1 College = 0
General Society (Survey B)	Saidapet	25	20-30=5 31-40 =10 41-50=10	Undergraduate = 10 Postgraduate=15
	Zafar Khanpet	15	31-40 =10 41-50=5	Undergraduate = 7 Postgraduate=8
	Namashivayapuram	10	31-40 =5 41-50=5	Undergraduate = 4 Postgraduate=6

*Number of respondents interviewed in each community.

**Literacy level represents the year of study completed by the respondents at the time of the interview.

Source: Field data.

Respondents' characteristics

Transgender community for Survey A -

- Community - 36.66 % of the respondents are from Saidapet, 30% of respondents are from Zafar Khanpet, and 33.33 % are from Namashivayapuram.

- Age continuum - 63.33% belong to the age bracket of 18 – 20, 30% to 21-30 age bracket, and 6.6 % to 30-40 age bracket.
- Literacy level – 80 % of respondents have ^{sixth} – 10th grade of education, 10 % have a literacy level of 10th to 12th grade, and 6.6% hold a college degree.

A general community for Survey B -

- Community – 50 % of the respondents are from Saidapet, 30% are from Zafar Khanpet, and 20 % are from Namashivayapuram.
- Age continuum – 10 % belong to the age bracket of 20 -30, 50 % to 31-40 age bracket, and 40 % to 41- 50 age bracket.
- Literacy level – 42 % of respondents hold an undergraduate degree, and 58 % hold an undergraduate degree.

Participants

Survey A - The recruitment of transgender participants from each community was voluntary. The participants were compensated for their time, and food was provided. The data collection was done in a safe space, identified by the participating transgender community.

Survey B -The recruitment of the general community participants from all three locations was also voluntary. The data was collected at the comfort of the participant's house. Their time was also compensated through gift cards.

Data analysis

The survey was initially constructed in consultation with the available academic literature and experienced academicians. Survey A, which was administered to the transgender community, was divided into three sections they are demographic details, mental health complexities, and societal acceptance experience. Survey B was administered to the general public with two sections: demographic details and social acceptance of the transgender community. The survey was administered through paper, and the respondents recorded the answers. This was later translated, coded, and analyzed by the academic researcher. The quotes representing the themes emerged during the informal dialogue between the academic researcher and the participants. The quotes were documented and produced here with their consent. The data gathered from the transgender community on social acceptance and the metal health complexities and was grouped under two themes. Moreover, the data gathered was also grouped under one central theme.

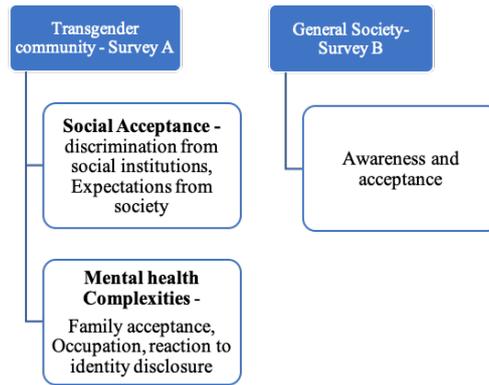
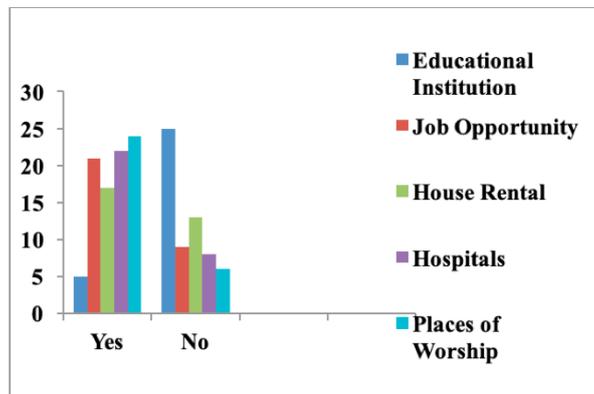


Figure 1 – Themes of the study

Major Findings

Survey A -The Survey A was administered to the transgender community from Saidapet, Zafar Khan pet, Namashivayapuram. The findings from the data were analyzed and grouped under two main themes Social acceptance and Mental Health Complexities. Social acceptance and mental health have a cyclical effect on each other.

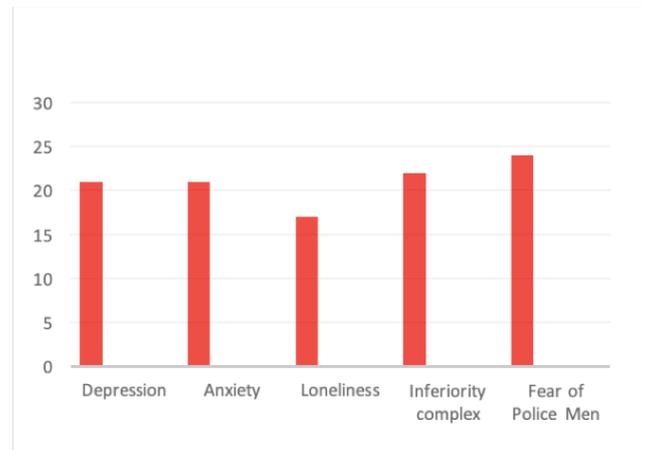


Discrimination experienced in Social institutions.

"Everyone fails to understand us for who we are. We are more than what happens in the bedroom and stop defining us through our appearances. However, appreciate our courage for being truthful to you and ourselves. Accept us, not because we hold equal rights as you do, but foremost we are also human beings" - Anonymous respondent 4#

The social acceptance and discrimination faced are high in Worship places, employment, and access to housing. When analyzed against the need for social acceptance by the transgender

community from society, 85 percentage of the respondents stop discrimination against them and seeks respect from society. Moreover, 25 percent of the transgender community recorded that they have lost hope or expectations from the general community.



Mental Health complexities experience

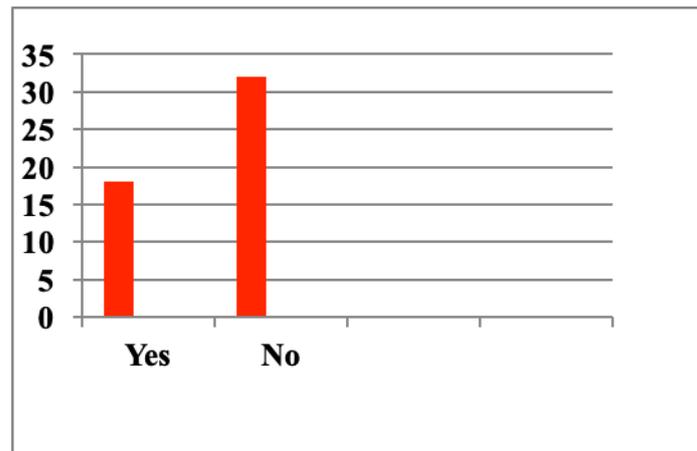
"I suffer from acute depression and inferiority complex, but I am afraid to seek treatment for fear of discrimination. I cannot afford medications or treatments as I survive from the income I earn through sex work. My family disowned me, and I was refused employment. Here I am, what choice do I have?" - Anonymous respondent 11#

Eighteen respondents who participated in this study reported that they are involved in Sex work for survival, and seven are employed in Nongovernmental organizations. Furthermore, 25 transgender community participants responded that they are still not accepted by their immediate family members.

"I regularly try to connect with my family and send them money, even if I go hungry. All I want in return is five minutes with them. I hope it will happen one day and I look forward to that day; after all, I am still their child" - Anonymous respondent 2#

Most of the respondents (27 respondents) came out to their families before the age of 18 and 22. Five respondents ran away from their house for fear of public social exclusion.

Survey B -The Survey B was administered to the general community from Saidapet, Zafar Khan pet, Namashivayapuram. The findings from the data were analyzed and grouped under one central theme acceptance of the transgender community.



Will you accept a Transgender in your family?

"They are a curse to the family. It is against God's creation. If it is my child, I will kill him/her and myself" - Anonymous respondent 3# from the general community.

The above chart indicates the acceptance level of a transgender person as a family member. Among the respondents, 32 reacted negatively to the posted question. However, when questioned about the awareness about the transgender community, 35 respondents reacted positively, and only 15 lacked any awareness.

Awareness creation and Knowledge dissemination

From the interaction with the target group, these significant findings arrived, and these played a crucial role in the determination of the action plan to disseminate the findings through street theatre, a Gram Sabha- talk show on social acceptance of transgender people among the students. As part of this project, the researcher was more focused on creating awareness and removing stigma against transgender people in society. Keeping this in mind, when approached by the researcher, a team of five student volunteers obtained permission to perform street theatre on at The Film and Food Fest conducted by the Tamil Nadu tourism department. The audiences were moved by the volunteers' efforts resulting in appreciation and donation for the welfare of the transgender community.

The second initiative was the Gram Sabha, moderated by Mr. Karthikeyan, the clinical psychologist. Dr. Meenakshi Sundaram & Dr. Fatima Vasant, Retired Principal, MSSW were the panellists in the discussion, which attracted student participation from various city colleges like

MSSW, MCC, MOP. This discussion with the transgender helped the participants to understand various issues revolving around the transgender community. The fundamental problem put forth by transgender is that they are not accepted as a part of the community at large was debated, discussed, and accepted by the participating audiences. The session included screening a documentary on the "Transgender community," slogan writing & signature campaign for social acceptance. The students' overwhelming participation and their interests in promoting products made by transgender during college festivals demonstrated the acceptability of the event. This program was telecast as a part of "Jannalukku Veliye" in Makkal TV and was aired in MOPCRS at the frequency 107.8 Mhz.

Continuing Conversations

The transgender communities in India are often eluded from the critical decision-making processes concerning their well-being and addressing social inequities. Their sensitive culture and values have been misrepresented misconstrued and often sensationalized by the researchers and the state lawmakers (Snarch, B., 2004). Thus, an important focus and outcome of this project were to support disseminate the findings and create awareness among the general public and develop skill and capacity building for an alternate source of earning development.

Due to time and financial limitations, the participants were selected using a convenient sampling method. The data gathered from 30 transgender community in Chennai and 50 general community only. Therefore, the findings cannot be generalized to the entire transgender population of India. However, the findings that emerged from this study will help the social work fraternity in India who are working for the development and the social inclusion of the transgender community. This paper would help in the development of further socially inclusive policies, programs, and health services for the transgender community in India.

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