



***Social exclusion of hijra
community in India***

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Introduction and Literature review:

*For males 'he' is used
For females 'she' is used
But Hijras falls neither in the 'hes' nor the 'shes'*

Hijra or Transgender, which is known as the Third Gender globally, is considered physically and psychologically ambivalent and because of ambivalence people consider them as minacious community. Hijras are physiological males who have a feminine gender identity, adopt feminine gender roles, and wear women's clothing. According to UNDP hijra is an umbrella term for all sexual minorities. People who were assigned a sex usually at birth and based on their genitals but who feel that this is a false or incomplete description of themselves (USI LGBT campaign, 2007). Transgender identities that display gender fluidity as a way of life question our most basic assumptions of gender and sexuality. There are various trans-identities in India — Hijra, Aravani, Jogappa, Shivashakti, Kinnar, and Sakhi-Bekhi among others. Their communities across south-east Asia date back more than 4,000 years and they appear in ancient texts as bearers of luck and fertility.

According to Katrina Karkazis (Fixing Sex: Intersex, Medical Authority, and Lived Experience) “Bodies are not only biological phenomena but also complex social creations onto which meanings have been variously composed and imposed according to time and space.” This research also focuses on narrowing the various focal points which give meaning, transform and dictate the hijra identity.

The Transgender community has a unique social structure and community norms. The norms vary from Gharana (clans) to Gharana and are determined by various factors like culture, norms and economic factors. The social hierarchy and norms among Hijra communities influence their behaviours and decision making ability in both positive and negative ways. However, most of the community members feel that these norms sometime become too rigid and hinder their assimilation into the mainstream. It obstructs abilities to explore other opportunities and learn other skills.

The census of India does not list hijras separately; they are usually counted as men, but upon request they may be counted as women. However, the category of “Others” under Gender was included in the questionnaire of the latest Census of India in 2011. Estimated 4 million Hijras, with communities recorded back more than 4000 years. Maximum number of Hijras found in Uttar Pradesh (census 2011) around 5% of total percentage of state population. In 2005, Indian passport application form were updated with third gender option. Majority of them belonging to the age 23-26 are dying of diseases or suicide. They got right to vote only in **1994** and in **2014** in the historical order by the honourable Supreme Court of India, transgender were recognized as the third gender of the society.

The Constitution of India in article 19 declares non-discriminatory practices on the basis of religion, race and gender yet; several instances of stigma and discrimination prevail among the sexual minorities in India including the hijras. As Hijra, they were often excluded from family events, weddings, and funerals. There are a number of social justice issues that are common to Hijras everywhere in Indian society. These include following types of problems: Private, domestic and state-sponsored violence, particularly among youth Hijras, Governmental and private discrimination in basic human needs, Governmental refusal to recognize gender identity

in identity documents, Inability to use appropriate gender-segregated facilities Governmental refusal to recognize gender identity in regard to marriage and Inequality in adjudication of refugee asylum petitions. A great majority of the Hijras stated that they have experienced problems caused by the police whether policemen from respective police stations, railway police or traffic policemen. They face a unique set of emotional health issues. Both social exclusion and discrimination have a negative impact on the health of these individuals (Lee, 2000).

The Hijra claim that mainstream society does not understand their culture, gender, and sexuality. Violations of their human and sexual rights have been overlooked in the traditional dogma. (Sibsankar Mal, 2015). The People's Union for Civil Liberties, Karnataka (PUCL-K), published a monograph on the Human Rights Violations against the Transgender Community mapping "the structural violence, the use of force by state and civil society actors and agencies, and of the images of emancipatory struggles" of the transgender community. Human rights and equality for hijra community are also economic development issues. Social inclusion, defined as "the process of improving the ability, opportunity, and dignity of people, disadvantaged on the basis of their identity, to take part in society," has come to be seen as an economic imperative: "**Social inclusion matters because exclusion is too costly,**" as a recent World Bank report concludes (The World Bank 2013).

With regards to the educational status of the transgender community 56 percent of them have only primary and middle school education and 18 percent have higher secondary education. (VEENA K.V, 2011). Based on the HUDCO (2004) classification 64 percent of them belonged to the low income group, 28 percent of them belonged to middle income group and eight percent of them belonged to high income group. Deficiency of adequate education and lack of employment opportunities result in the members being forced into sex work and begging. While some transgender people manage to sustain their jobs in spite of stigma and discrimination in workplace, most of them resign their jobs finding the situation unbearable. A variety of factors such as dearth of adequate education, nonexistence of employment opportunities, and lack of familial support put the male-born sexual minorities at the risk of being infected by HIV. Similarly, sexual and reproductive health needs are often not effectively addressed. In particular, most transgender do not get adequate government support (V.S.Shinu Asmy, 2015).

Hijras face discrimination even in the healthcare settings. Types of discrimination reported by Hijras/TG communities in the healthcare settings include: deliberate use of male pronouns in addressing Hijras; registering them as 'males' and admitting them in male wards; humiliation faced in having to stand in the male queue; verbal harassment by the hospital staff and patients; and lack of healthcare providers who are sensitive to and trained on providing treatment/care to transgender people and even denial of medical services. (UNDP, 2010). Their age old traditional occupation of dancing at the weddings and at homes where a male child has born is called 'badhai' (literally translated as congratulations) (Kalra, Gupta, & Bhugra, 2010). However, with changing Indian social structures, and as a result of globalization (Kalra & Bhugra, 2010), their traditional roles are dwindling and an increasing number of hijra individuals are turning to sex work. A number of them have also started working in the NGO sector under various HIV-AIDS programs running throughout the country as project coordinators, managers or even counsellors. The other fields where this community feels neglected are inheritance of property or adoption of a child. They are often pushed to the periphery as a social out caste and many may land up begging and dance. This is by all means human trafficking. They even engage themselves as sex workers for survival.

Sexual minorities do not assume significant role in any state's position or political parties although there are many sexual minorities with adequate political and governance knowledge and interest. Although transgender contested local body election with social responsibility, they were not adequately recognized by public. Despite discrimination and marginalization, a transgender person is emerging as successful personalities, thereby proving their potential. There are instances of transgender persons occupying positions of political power. For example – Shapnam Mousi became Member of Parliament from Sahogpur in Madhya Pradesh in 2000; Kamla Jaan was elected as Mayor of Ketni in the same year. These odd instances have not significantly empowered the large community. Such people cannot do things which others do such as to find mainstream job, to vote, etc. In 1994 transgender persons of India got the voting right, but the task of issuing them Voter Identity Cards got caught up in the male or female question. Several of them were denied cards with their sexual category of their choice. In the 2009 general election, India's election committee denied three Hijras candidature unless they identified themselves as either male or female

Research Questions:

Why they Choose to become a Hijra?

How they are not socially accepted?

Why they are harassed by the police in public places?

How they get involved in wrong domain and illegal sectors or unaccepted side of the society?

How the exclusion changes state, city and village-wise?

Why they don't have access basic amenities and specially education and health facilities?

Why they live in unhealthy place and unhygienic work place?

Lack of housing facilities and social participation

Lack of role models

What thought could be expressed by the hijra regarding their needs to achieve full inclusion in the society?

As a planner why we always fail to uplift and mainstreaming them in the society?

Aim:

The main aim of this study is to socially include Hijra community, Uplifting and mainstreaming them in society.

General Objective:

- To understand the socio- economic conditions of hijra community.
- To explore some of the cultural aspects of the hijras
- To know the awareness level among the people
- To understand the various political and social pressure on them.
- To explore about government initiative and planner's role in betterment of their lifestyle

Specific objectives

- To realise the causes and consequences of socio-economic problems of transgender.
- To understand different age group and their attitude towards the hijras and how the attitude varies from state to state, rural to urban population related to their acceptance.
- To make the society aware about the problems of transgender community
- To find their extreme living and economic condition caused by various exclusions.
- To understand various initiative taken up by government and NGOs for this group and emerging role of planning in uplifting them

Hypothesis:

Hypothesis is taken according to the objectives and research questions of the study:

- There will be significant association between physical and psychosocial problems among hijras with the selected demographic variables such as age, race, religion, income, education, life style and living condition.
- There will be no significant difference between college students and young adults in their attitude towards hijras.
- There will be significant difference between urban and rural attitude towards hijras.
- There will be a mentality of young adults about their occupation and consider them as a sex workers and their involvement in wrong domain.

Data source and data collection:

The study would adopt a mix of primary and secondary research methods to find answers to a set of broad and specific research questions. It will start with a preliminary literature review, which informed subsequent semi-structured interviews with people with non-normative genders and sexualities, government officials, NGO representatives and donor officials involved in social security provision. Research tools associated with both quantitative and qualitative approaches were combined to collect the data. These were interviews, questionnaires, field observation and document analysis. A non-probability purposive sampling including the snowball technique will be adopted, to collect data from sixty-Hijras having given their oral consent for the interview. Hijras are strictly secretive about divulging any information concerning themselves, hence the long span and difficulty in data collection. A multi-tool approach for data collection based on the objectives consisted of a Structured Interview Schedule with closed and open ended questions and Focus Group Discussions (FGD). The focus will be on questions and pointers for discussion that helped gain an experiential understanding of the economic and opportunity among the respondents. Apart from their profile in terms of age, place of residence, educational level, occupation, family and relationship status, they will be asked if they had information about government poverty alleviation programmes or social security schemes and, if yes, the experience in accessing these schemes.

Statistical tool:

The following statistical techniques will be used for data analysis:

- Data will be analyzed using the Statistical Package for Social Sciences.
- Descriptive statistics, including frequencies, percentages, were used to summarize different variables.
- Chi-square test and gamma test was used to assess the relationship between independent and dependent variables.

Scope and Limitations of the Study:

Geographically, sample area selected only includes Major states in India Like Uttar Pradesh, Maharashtra, Gujarat, Madhya Pradesh, Rajasthan, Andhra Pradesh, Kerala, Punjab, Haryana, Odisha and Jharkhand but only one major city and a village having maximum population of this community will be selected. The study is centric to India so it does not compare the scenario in other countries. The study is not considering the political point of view and humiliation faced by them from the political parties. This study would not go in depth of Laws and legislations. So this topics which are not covered in this paper can be the scope

and can be the research topic. Someone can go in depth of the following topics and can be a thesis topic.

Chapter plan:

Acknowledgements

Executive Summary

1. Introduction

2. Methodology

3. Demographic Composition of Sample

4. The Findings

4.1 Portrait of hijra community

4.2 Education

4.3 Employment

4.4 Health

4.5 Family Life Housing

4.6 Poverty and socio-economic status

4.7 Public Accommodations

4.8 Identification Documents

4.9 Police and Incarceration

4.10 Findings of the Street survey

4.11 Findings from Focus group discussions

4.12 Sexual abuse and physical harassment

5. A Glimpse of inspiring Real Life Scenario and their contribution for the community

5.1 Societal attitudes

5.2 Biases and insensitivity towards people who are 'different'

6. Towards Addressing Concerns of hijra community: Existing Government and NGO Initiatives

7. Towards inclusive approaches by planners: Needed Initiatives to Mainstream Hijra community

8. Recommendations

9. Conclusion and Way Forward

References:

1. People's Union for Civil Liberties, Karnataka (PUCLK), Human Rights Violations Against the Transgender Community: a Study of Kothi and Hijra Sex Workers in Bangalore, Bangalore: PUCL-K, 2003.
2. Marginalization of transgender community: A sociological analysis Mohammed Atheque PP and Rajathurai Nishanthi
3. Agrawal, A. (1997). Gendered bodies: The case of the "third gender" in India. *Contributions to Indian Sociology*, 31, 273–297.
4. Trawick, M. (1990). Notes on love in a Tamil family. Berkeley, CA: University of California Press.
5. Swain S. (2006). Problems of third gender. In: Swain S, editor. *Social Issues of India*. New Delhi: New Vishal Publications.
6. Let Us to Live: Social Exclusion of Hijra Community-Sibsankar Mal.
7. Problems Faced by Hijras (Male to Female Transgenders) in Mumbai with Reference to Their Health and Harassment by the Police Anitha Chettiar.
8. United Nations Development Programme (UNDP) India. (2010). *Hijras/Transgender Women in India: HIV, Human Rights and Social Exclusion*. [Online]. Available:

http://www.undp.org/content/dam/india/docs/hijras_transgender_in_india_hiv_human_rights_and_social_exclusion.pdf.

9. V. Shingala, *the Life Style of the Eunuchs*, New Delhi: Anmol Publications, 1987.
10. Human Rights, the Law, and HIV among Transgender People Stefan Baral, Chris Beyrer, and Tonia Poteati *Social Adjustment of Transgender: A Study of District Chiniot, Punjab (Pakistan)-Tanveer Abbas (Department of Sociology, University of Sargodha) Dr. Yasir Nawaz (Department of Sociology, University of Sargodh)*.
11. *A Study of Attitude of Society towards Transgender in South India* Dr. B. Golden Kisha, Ph.D Principal, Nazareth College of Education for Women, Chennai.
12. *Injustice at Every Turn A Report of the National Transgender Discrimination Survey*.
13. *Hijras: The Unique Transgender Culture of India-Gurvinder Kalra*
14. National Center for Transgender Equality and National Gay and Lesbian Task Force, (2009), *National Transgender Discrimination Survey, 2009*.
15. *Hijaras/ Transgender women in India :HIV , Human Rights and Social exclusion UNDP Report , 2010*
16. World Bank (2012) 'HIV/AIDS in India', 10 July, www.worldbank.org/en/news/feature/2012/07/10/hiv-aids-india (accessed 29 September 2014)

Bibliography:

1. TRANSGENDER AND HUMAN RIGHTS –CURRENT SITUATION AND POTENTIAL OPTIONS OF DEVELOPMENT IN INDIA Mohammad Rafeek
2. Being a Eunuch by Siddharth Narrain, *Frontline*, 14th October 2003.
3. Human Rights Violations against the Transgender Community: A PUCL Report January 2004.
4. SOCIAL EXCLUSION HAVE A NEGATIVE IMPACT ON THE HEALTH OF TRANSGENDER DR. SRIDEVI SIVAKAMI PL ASSOCIATE PROFESSOR, DEPARTMENT OF FOOD SERVICE MANAGEMENT AND DIETETICS, AVINASHILINGAM UNIVERSITY FOR WOMEN, COIMBATORE – 641 043. VEENA K.V LECTURER, DEPARTMENT OF HUMAN SCIENCE ANNA ADARSH COLLEGE FOR WOMEN.
5. HUDCO, (2004). *Housing finance publishing division, Patiala House, New Delhi, P. 232*
6. *The Economic Cost of Stigma and the Exclusion of LGBT People: A Case Study of India* M. V. Lee Badgett, Ph.D. October 2014
7. PRELIMINARY PROBLEMS FACED IN EDUCATING THE THIRD GENDER COMMUNITY V.S.Shinu Asmy, Ph.D. Research Scholar, Department of English, Bharathiar University, Coimbatore. & Dr.P.Nagaraj, Assistant Professor, Department of English, Bharathiar University, Coimbatore.
8. . <http://www.dailymail.co.uk/news/article-2852834/Hidden-world-hijras-Inside-India-s-4-000-year-old-transgender-community-religious-respect-doesn-t-protect-modern-day-discrimination.html>
9. National AIDS Control Organization, 2013. *Annual Report 2012-13*, New Delhi.
10. National Alliance of Women, 2006. *India: Second NGO Shadow Report on CEDAW*, National Alliance of Women.
11. *SEXUAL IDENTITY AND PSYCHOSOCIAL DISABILITIES OF TRANSGENDER WOMEN IN INDIA A Social Exclusion Perspective* Justin P. Jose and Vinod, C.V.
12. Gupta, A., et al. (2006). *Same-Sex Behavior and High Rates of HIV among Men Attending Sexually Transmitted infection clinics in Pune, India (1993-2002)*. *AIDS*, Vol 43, (4), p-483-490.

13. Livelihood, Exclusion and Opportunity: Socioeconomic Welfare among Gender and Sexuality Non-normative People in India Pawan Dhall and Paul Boyce February 2015
14. Sathyanarayana Rao, T.S. and Jacob, K.S. (2014) 'The Reversal on Gay Rights in India', Indian Journal of Psychiatry January–March
15. Singh, Y.; Chakrapani, V.; Aher, A.; Shaikh, S.; Khosa, H.; Mehta, S.; Robertson, J. and Rakesh, S. (2013) Understanding Barriers Faced by Transgender and Hijra Communities in India to Accessing Gender Reassignment Surgeries: Research from the Global Fund-Supported Pehchan Program, Abstract WEPE633 – Poster Exhibition, prepared for 7th IAS Conference on HIV Pathogenesis, Treatment and Prevention, 30 June–3 July 2013, Kuala Lumpur, Malaysia, International AIDS Society, <http://pag.ias2013.org/Abstracts.aspx?AID=2181> (accessed 3 October 2014).
16. Supreme Court of India (2013) Kaushal S.K. and Another versus Naz Foundation and Others, Civil Appeal No. 10972 of 2013, www.judis.nic.in/supremecourt/imgs1.aspx?filename=41070 (accessed 30 September 2014)
17. UNDP (2011) India Fact Sheet – Gender and Social Exclusion Indicators, United Nations Development Programme, www.in.undp.org/content/dam/india/docs/india_factsheet_gender_n_social_exclusion_indicators.pdf (accessed 11 December 2014).
18. US Census Bureau (2014) 'U.S. and World Population Clock', United States Census
19. World Bank (2014) 'GDP Growth (Annual %)', *World Bank Data*, <http://data.worldbank.org/indicator/NY.GDP.MKTP.KD.ZG> (accessed 27 September 2014).
20. A Long Journey towards Social Inclusion: Initiatives of Social Workers for Hijra Population in Bangladesh University of Gothenburg International Master's Programme in Social Work and Human Rights Degree Report 30 Higher Education Credits Autumn 2012.
21. Chakrapani, Dr. V. (2010). Hijras/Transgender Women in India: HIV, Human Rights and Social Inclusion. United Nations Development Programme (UNDP), India.
22. Godwin, John (2010). Legal Environments, Human Rights and HIV responses among men who have sex with men and transgender people in Asia and the Pacific: An agenda for action. Bangkok: United Nations Development Programme (UNDP).
23. Jogappa-Gender, Identity, and the Politics of Exclusion Aneka, Bangalore First Edition: October 2014 Supported by: Heinrich Boll Foundation.
24. Registrar General & Census Commissioner, India. (2011).
25. Census Info India 2011 - Housing, Household Amenities and Assets. Retrieved October 01, 2014, from Census Info India 2011 <http://www.devinfolive.info/censusinfodashboard/website/index.php/pages/sanitation/total/totallatrine/IND>
26. <https://timesofindia.indiatimes.com/city/kolkata/Transgenders-to-stage-lifes-struggle/articleshow/45567930.cms>
27. <http://www.thehindu.com/news/national/all-you-need-to-know-about-the-transgender-persons-bill-2016/article21226710.ece>
28. <http://www.dailymail.co.uk/news/article-2852834/Hidden-world-hijras-Inside-Indias-4-000-year-old-transgender-community-religious-respect-doesn-t-protect-modern-day-discrimination.html>