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Ministry of Health & Family Welfare, Government of India
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UPTAKE OF S O C I A L P R O T E C T I O N S C H E M E S B Y T R A N S G E N D E R P O P U L A T I O N I N I N D I A



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FOREWORD

National AIDS Control Organization in its long history of spearheading the national response to the HIV epidemic has always kept the marginalized communities at the center. The felt needs of these communities are addressed through multitudes of specially designed interventions.

National AIDS Control Programme (NACP) is known for its global success, foundation of which is evidence based programming to develop customized interventions for the most marginalized groups. Special emphasis is given to community participation while conceptualizing and implementing the programmes.

There is enough evidence to show that the transgender community faces higher levels of stigma and is conspicuous by its absence from various social entitlements and schemes provided by the government. Efforts have been made to address the issues specific to the transgender population after the path breaking judgment of the Supreme Court in 2014 recognizing transgenders as third gender. State level TG Welfare Boards have been established and schemes are being modified to make them inclusive of transgender persons. Transgenders continue to remain at the margins due to the stigma and discrimination against them and lesser opportunities to bring them to the mainstream society. Minimal livelihood options for transgenders force them to resort to begging and sex-work for sustenance. We understand the direct correlation between social protection and positive health seeking behaviours therefore skill development for livelihood opportunities of transgender persons is critical.

NACO has undertaken an exercise to develop a compendium of good practices to understand the progress regarding social protection including livelihood and the achievements of the State Transgender Welfare Boards. The Compendium consists of three documents a) Good Practices post the Supreme Court Judgement b) **Uptake of Social Protection Schemes by Transgender population in India** and c) Skilling for Livelihood Opportunities for Transgenders in India. I hope this Compendium will be used to address the special needs of the transgender persons and integrate them into the mainstream society.

I would like to thank UNDP for providing support in capturing and developing this important Compendium that recorded the efforts in making the social environment more inclusive for the transgender community.

(Dr. Naresh Goel)

ACKNOWLEDGEMENT

This document would not have been possible if it was not for the time and valuable inputs of a few key stakeholders. We are extremely grateful to all the community members and leaders, IEC-Mainstreaming Division of NACO, State AIDS Control Societies, officers of other line departments, especially the Ministry of Social Justice & Empowerment and the Department of Social Welfare, who provided relevant information regarding the progress made in States. Sincere thanks also goes to the technical consultant and the organizations SWASTI- Resource Centre and Vrutti- Livelihood Resource Centre for the scrupulous documentation.

BACKGROUND



I.1 Definitions

TRANSGENDER PEOPLE

Transgender is an umbrella term for people whose gender identity and expression does not conform to the norms and expectations traditionally associated with the sex assigned to them at birth; it includes people who are transsexual, transgender or otherwise considered gender non-conforming. Transgender people may self-identify as transgender, female, male, transwoman or transman, trans-sexual, or, by

a variety of indigenous terms used in specific cultures, such as hijra (India), kathoey (Thailand), waria (Indonesia), or one of many other transgender identities. They may express their gender in a variety of masculine, feminine and/or androgynous ways. - **World Health Organisation**

SOCIAL PROTECTION

Social protection refers to policies designed to reduce people's exposure to risks, enhancing their capacity to protect themselves against hazards and loss of income. Social protection involves interventions from public, private, voluntary organisations, and social networks, to support individuals, households and communities prevent, manage, and overcome the hazards, risks, and stresses threatening their present and future well-being. - **United Nations Development Programme**

1.2. Why this study?

- Transgenders (TGs) are one of the most discriminated high risk groups in India.
- Census 2011 counted 4.9 lakh transgenders in India. The highest proportion of the third gender population, about 28%, was identified in Uttar Pradesh followed by 9% in Andhra Pradesh, 8% each in Maharashtra and Bihar. Over 66% of the population identified as third gender lived in rural areas [1].
- Only 46% of the TG population, as compared to 76% of general population, are literate. The proportion of those working in the TG community is much lower (38%) compared to 46% in the general population. Only 65% of the TGs, as compared to 75% in the general population, find work for more than six months in the year [2].
- TGs effeminate behaviour, trans status, real or perceived association with sex work; real or perceived HIV status, dress code, physical appearance and others contribute to the multiple forms of discrimination they face from families, neighbourhood, communities and public and private institutions [3].
- The study looks at whether social protection schemes for TGs by the government have been adequate in addressing their needs and whether the services have been accessed by the community.

STUDY PROCESS



2.1 Objectives

The overall objectives of the study are:

- To list different social protection schemes of government relevant to Transgender population
- To assess the current utilisation pattern of the social protection schemes availed by Transgender population

- To identify the priority schemes for the Transgender from among the existing schemes in the state that would require to be modified to cater to the specific needs of the TGs or any identified need of formulation of exclusive schemes for the TGs to address their specific needs.
- To understand the barriers for accessing the schemes

2.2 Methods

The methodology consisted of a mix of secondary research and primary data collection.

Document review helped collate the type and number of schemes both from central and state governments of Tamil Nadu, Karnataka, Maharashtra, Gujarat and Uttar Pradesh. Focus Group Discussions (FGD) and Key Informant Interviews (KII) threw light on the extent of, and the barriers and enablers to access of schemes by the TG community.

Tools were pilot tested on 29 and 31 October 2016 in Chikkaballapur in Karnataka. The results were analysed to check for their efficacy, revisions made based on the results and tools were then finalised.

Language validation and test for flow of questions helped ensure that interpretation of the questions remained intact throughout the translations.

2.2.1 SECONDARY RESEARCH

The study relied on information from secondary data sources to list the social protection schemes relevant to transgenders and assess the current utilisation pattern of schemes by TGs. Secondary research focused on collating and synthesising existing information on social protection schemes offered by the national and five state governments.

Information on the number and type of schemes and data on uptake were documented using the following sources:

- Open data platforms of the government
- Official statistics from annual reports of government ministries and departments

- Reports from government, non profits, academia and think tanks
- Journal and mass media articles including broadcast
- Reports from Avahan programme implemented by Swasti

2.2.2. PRIMARY RESEARCH

Focus Group Discussions (FGDs) and Key Informant Interviews (KIIs) formed the primary research methods. Fieldwork was conducted between 1 to 17 November in four states of India namely Karnataka, Maharashtra, Tamil Nadu and Uttar Pradesh. The fieldwork included visits to the relevant city/town where TG population was accessible.

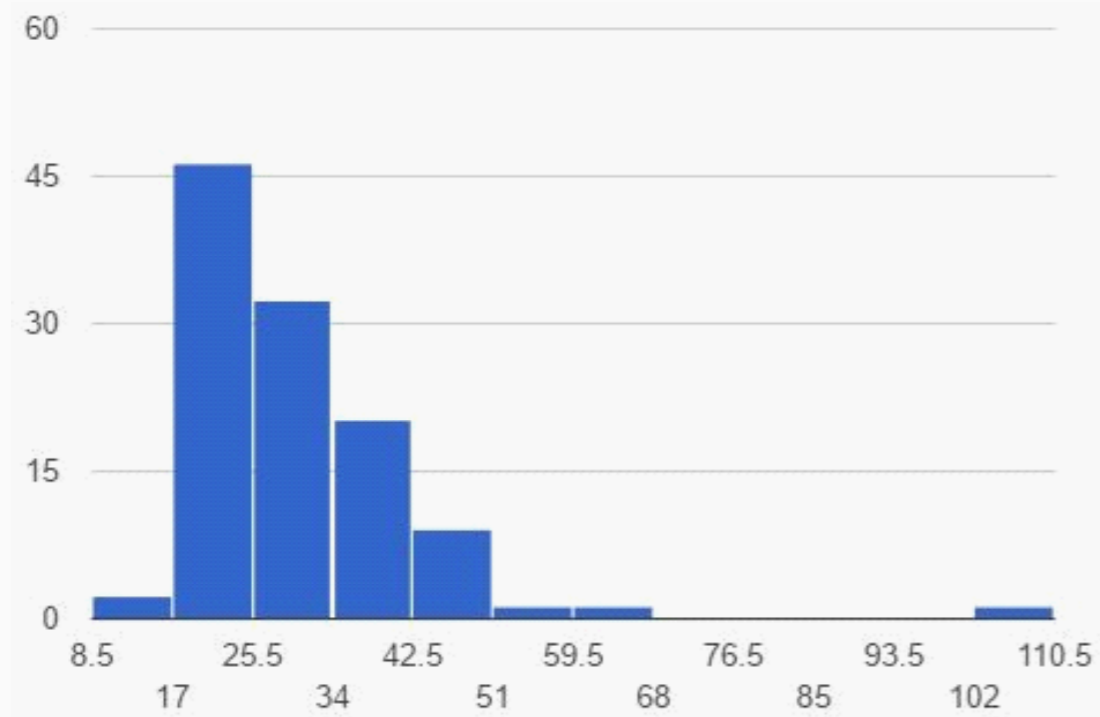
- Two focus group discussions (FGDs) were conducted in every state by a team of two researchers. Each group had 6 to 10 participants. The group of participants were guided by a moderator from Swasti, who introduced the topics for discussion and helped the groups to participate in a lively and natural manner.
- The KIIs were conducted with board members and leaders of community organisations to gain a deeper understanding of the members' knowledge and utilisation patterns of social entitlements.
- The FGDs and KIIs had open ended questions to understand the issues faced by the TG communities with regard to access to social entitlements and possible solutions for enabling access.

2.2.3. SAMPLING

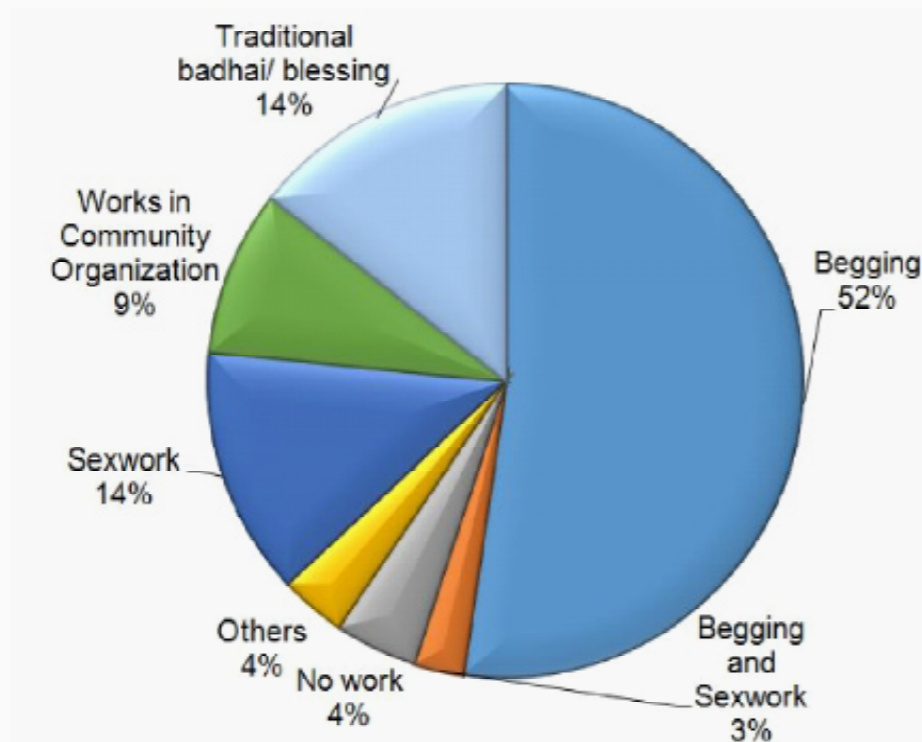
A sampling frame was evolved to capture the voices of both rural and urban TG population. TG groups and key informants representing rural and urban realities of TGs were spoken to. A total of 111 TGs, from across the five states of Tamil Nadu, Karnataka, Maharashtra, Gujarat and Uttar Pradesh participated in the study.

Sl. No	State	Sample Size
1	Tamil Nadu	26
2	Karnataka	20
3	Maharashtra	21
4	Gujarat	18
5	Uttar Pradesh	26

Age of the respondents



Occupation of the respondents



2.3. Data Analysis

- For analysis of primary research data, the findings were collated and analysed after every field visit. Cross sectional analyses, incorporating findings from all the sites, revealed information on areas of social protection schemes most relevant to the TG population, barriers that they face in the uptake of schemes and potential solutions to increase their access to existing programmes from the government.
- For analysis of secondary research data, a framework was evolved wherein schemes were categorised based on the entitlements offered by them to the beneficiaries. This is further explained in the following sections.

2.3.1. CATEGORISATION OF SCHEMES & RIGHTS

A total of 12 categories were decided upon to cover the range of government programmes and laws that grant citizenry rights to TGs including voting rights. The categories also include all forms of proof of identity that establish your citizenship. These are listed below:

i.	Citizenry rights
ii.	Education
iii.	Economic Development
iv.	Financial security
v.	Food security
i.	Health, Nutrition and Medical
vii.	Housing Security
viii.	Identity
ix.	Legal Services
x.	Sanitation
xi.	Transportation
xii.	Multi-category

2.3.2. UNPACKING THE CATEGORIES

CATEGORIES	TYPES OF SCHEMES INCLUDED
Citizenry Rights	Prevention of atrocities including trafficking & those related to adoption, helplines, rehabilitation and fostering communal harmony & establishment of welfare boards
Education	Fellowships and scholarships for primary, secondary and postsecondary education & for pursuing research, literacy programmes, academic awards, hostels and reservation in courses; and vocational education schemes
Economic Development	Livelihood and employment schemes such as interest subsidies, skill development, loans and direct employment schemes; those which are not aimed at giving jobs to the beneficiaries are marked as livelihood support
Financial Security	Pension; life, accident, disability and crop insurances; other financial assistance; endowment schemes and financial inclusion programmes
Food Security	Right to Food Act, entitlement cards that provide subsidised grains, and provision of low cost meals
Health, Nutrition, Medical	Health and medical insurance, nutrition programmes, and financial assistance for sex reassignment surgeries
Housing Security	Those that provide constructed houses or financial assistance for construction of houses
Identity	All documentation accepted as proofs of identity
Legal Services	Free legal services, mechanisms to ensure speedy trial of offences and ensure access to benefits, rights and justice
Sanitation	Programmes to eradicate open defecation and construct individual toilets, or sanitary complexes
Transportation	Road construction and connectivity
Multicategory	Schemes that provide benefits across diverse areas; for e.g. Sabala, a national programme ensures access to education, health, life and vocational skills for adolescent girls

2.3.3. LEVELS OF CATEGORISATION

- Schemes are categorised into three levels - national, joint and state - based on the funding pattern.
- Those funded exclusively by the central government are marked as National and by the state governments as State UP/GU/MH/KN/TN.
- Schemes for which there is a fund sharing pattern between the central and state governments are marked as Joint.
- Ratio of fund sharing pattern is provided wherever data is publicly available and found.

2.3.4. CATEGORISATION OF BENEFICIARIES

- Five categories of beneficiaries are created.
- The categories are based on the explicit mention of the beneficiary groups in the scheme documents or use of he/she in the document narrative. . Accordingly, these are male, female or transgender (M/F/T), male & female only (M/F), female only (F) or transgender only (TG), ambiguous.
- Beneficiary groups are marked as Ambiguous against schemes for which this is not stated clearly in the government documents.

2.3.5. UPTAKE ANALYSIS FRAMEWORK

- Information sourced on the uptake of schemes include the number of beneficiaries and the expenditure on the scheme.
- Four subcategories are created to organise the data - male, female, transgender and overall.
- Gender disaggregated data is provided wherever possible.
- However, there is poor availability of gender disaggregated data with regard to uptake of public schemes. For those schemes, where such data is unavailable, information on overall number of beneficiaries is given.

- Information on maternal, neonatal and institutional development schemes except for those catering specifically to community institutions of transgenders are excluded from the list.

2.4. Challenges & Limitations

- Unavailability of information in the public domain significantly affected the sourcing of information on the uptake of schemes, especially the number of beneficiaries and expenditure.
- There are wide variations in the available uptake data reported by multiple sources and is hence inconsistent. Also, information for the same time period for different schemes is unavailable. This limits the possibility of any comparative analyses.
- Lack of data disaggregated by state, gender or social group meant that information on uptake by transgenders could not be sourced even for those schemes, where they are listed as beneficiaries.
- The secondary data was sourced from varied sources including media reports as government data was not always available. Hence it is difficult to ensure data quality for the listing of schemes and uptake information.
- Shortage of time available for the research limited the volume of information sourced on the number of schemes and their utilisation.

FINDINGS

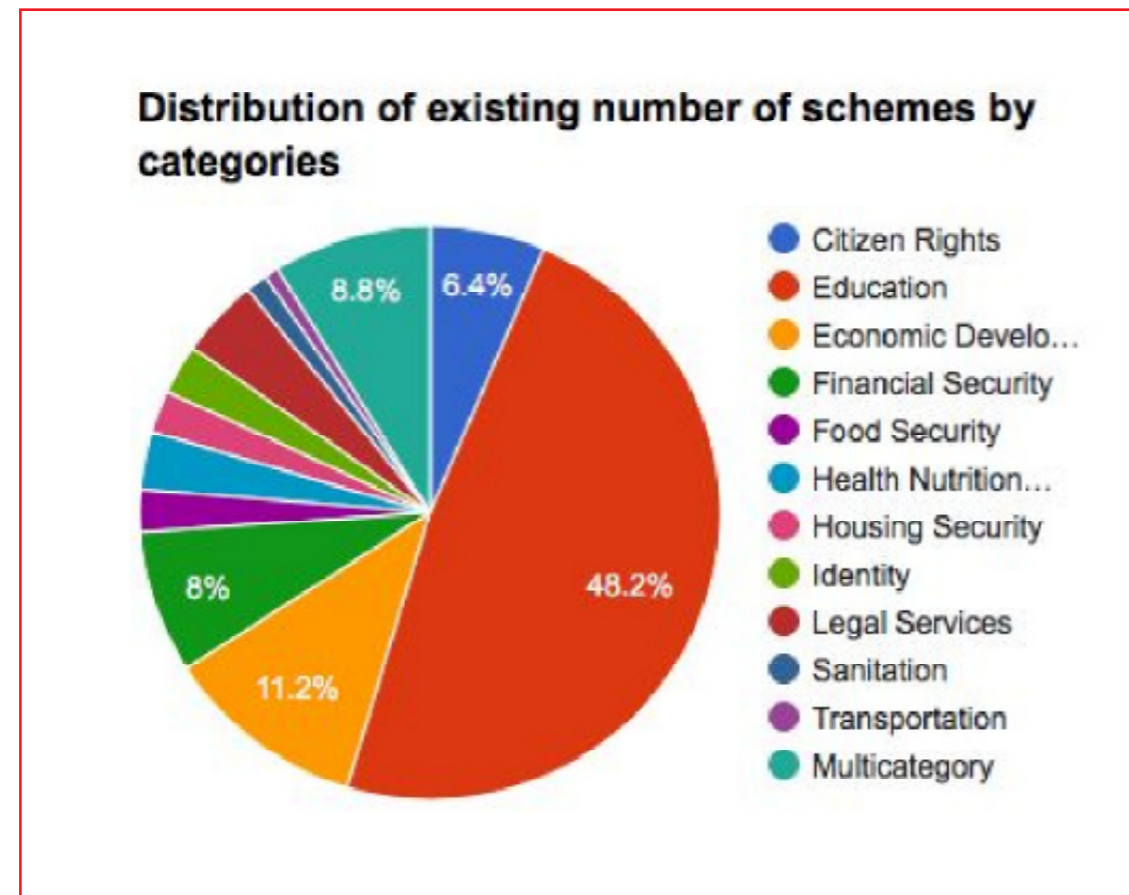


3.1. Existing Schemes: An Overview

Central and state governments have so far taken the following measures for the TG community.

- Giving basic recognition and identity to the community through inclusion in electoral rolls, inclusion in census, inclusion of category 'E' in passports, column for TGs in registration for cards issued by the Unique Identification Authority.

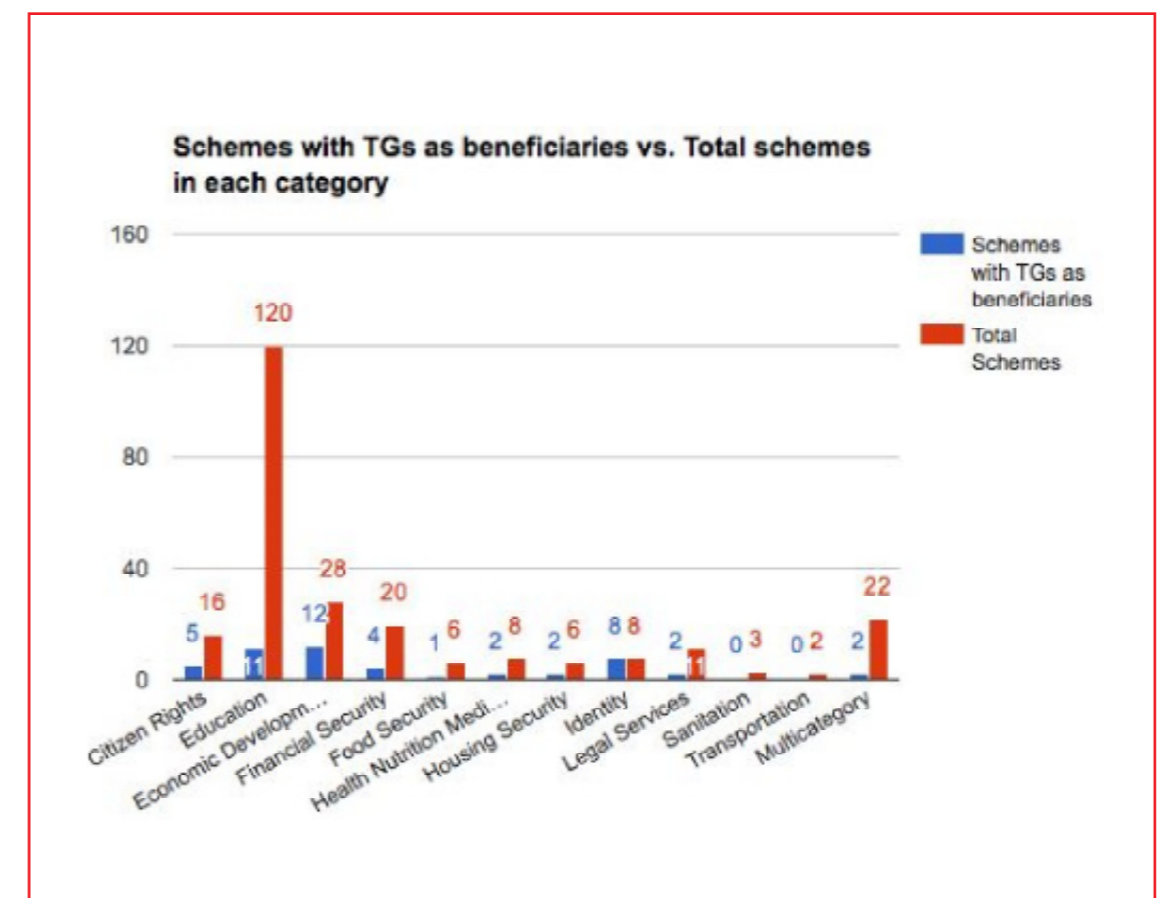
- Ensuring representation and participation of TGs through inclusion of TG representatives in the Transgender Welfare Board, in expert committee in Maharashtra, which is meant to review the state's women's policy and representation of the community in the civil society engagement with formulation of the 12th Five year Plan and mention of the need to empower the community in the 12th Five Year Plan etc.
- Specific recommendations to address the health of the TG community under NACP IV.
- Schemes and steps taken in the state of Tamil Nadu, such as the constitution of the Transgender Welfare Board and measures to ensure welfare of the community under or independent of the Board.



249 schemes, from national and state governments, can potentially be accessed by transgenders.

Link to the database on existing government schemes: <https://goo.gl/RIt3IC>

- Close to half of all number of schemes (120) across all categories are in Education
- This is followed by Economic Development (28), Financial Security (20) and Citizen Rights (16) schemes
- The category of identity proofs does not show up as prominent, as there are specific and limited number of documents considered as valid proofs nationally. These include Voters Id, Unique Identification Number, Permanent Account Number, Passport, Bank Pass Book, National Food Security Card, and Birth Certificate.
- Housing Security, listed as the first priority by transgenders in discussions, have just a total of six schemes from both central and state governments



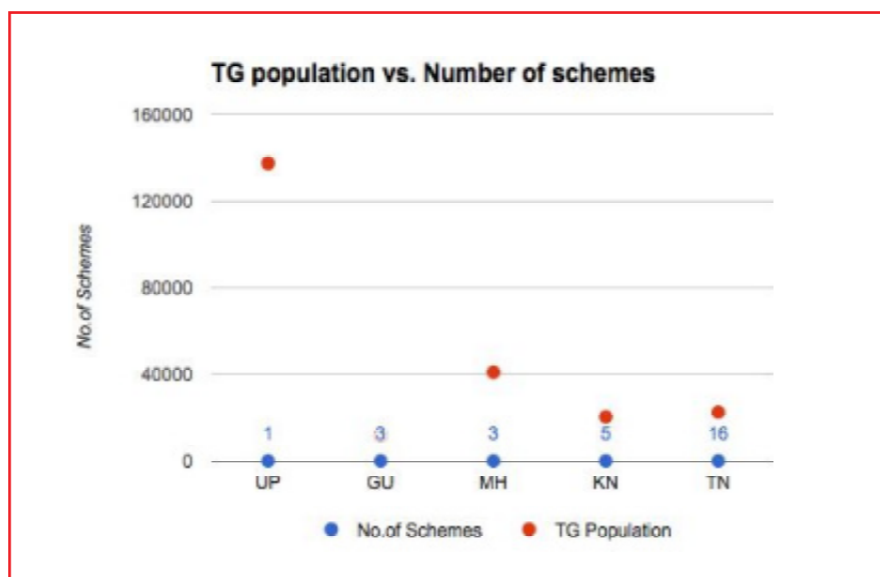
Only 49 out of a total of 249 schemes explicitly list transgenders (TGs) as beneficiaries.

- Only 20% of the total number of schemes, across categories, at the national and state levels, explicitly list TGs as beneficiaries.
- TGs are entitled to get all of the recognised identity proofs from the government.
- 43% of schemes (12) in the Economic Development category list TGs as beneficiaries making it the area with most number of initiatives that recognise TGs as a separate gender.
 - Most of these schemes (9) provide interest subsidy or loans to set up enterprises, skill development or assist in income generation.
 - Three schemes, one in Uttar Pradesh and two in Tamil Nadu, provide direct employment opportunities. These include recruitment as teachers or into the police force or allowing for TGs to use the state employment exchange to search for jobs.
- Housing Security (33%), Citizen Rights (31%) and Financial Security (20%) are the other categories with TGs as beneficiaries.
- In Housing, the Pradhan Mantri Gramin Awaas Yojana (PMGAY) at the national level and the Chief Minister's Solar Powered Green House Scheme (CMSPGHS) from the Tamil Nadu government explicitly state TGs as beneficiaries.

➤ National Government recently passed The Transgender Persons (Protection of Rights) Bill 2016 giving TGs the 'right to perceived gender identity'.

➤ Tamil Nadu and Maharashtra have constituted Transgender Welfare Boards.

➤ Karnataka has scheme for rehabilitation of TGs and



Uttar Pradesh has the most number of TGs (137465) & least number of schemes, while Tamil Nadu with a relatively lower number of TGs (22364) has the most number of scheme

the Shelter for Homeless scheme in Tamil Nadu is open for TGs to access the benefits.

- Rape and sexual assault in the Indian Penal Code, 1860, the relaxing of gender barriers in laws that determine marriage to the transgender community.

3.2. Uptake of Schemes

Transgenders identified Housing, Economic Development, Health, Financial Security and Proof of Identity as their priority needs. They expect government support to realise these needs. The following section will look at the available data on access to schemes in these five categories.

➤ Proofs of Identity

- As of 31 December 2014, 43602 TGs had the Unique Identification Card (UID) number registered in their names. This is only 9% of the total TG population in India.
- The Indian Passport Applications allow for individuals to enter their sex under the category 'E', signifying Eunuchs as a social grouping. Though all TGs do not identify as Eunuchs, this is largely seen as a move towards official recognition of third gender in the country.
- Gender disaggregated data is unavailable for all other recognised identity proofs.
- In Tamil Nadu, 350 out of total TG population of 22364 have the Transgender Welfare Card i.e. less than 2%.

➤ Voting Rights

- Census 2011 records 4,87,803
- TGs in India; TGs constitute only 0.0035% of the total population with voters ID.
- In the 2014 General Elections, 28,341 TGs were registered as voters by the Election Commission.



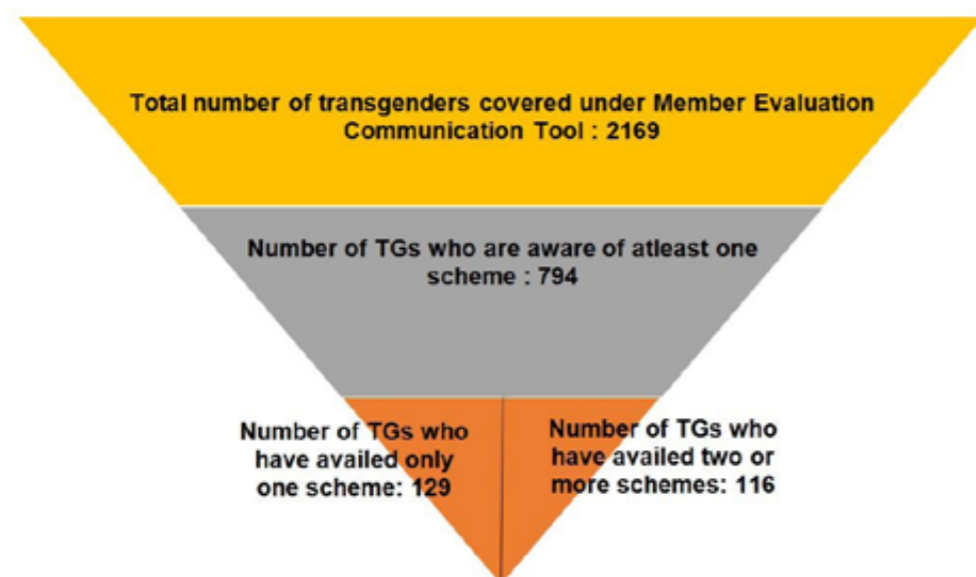
- Only 6% of the total transgender population in the country have voters id.
- Gender disaggregated data is unavailable for Housing, Economic Development, Health and Financial Security schemes.
- Within Financial Security, 1021 TGs in Karnataka accessed the Maithri scheme, which provides a monthly pension of Rs.500 for TGs aged above 40 years.

➤ Education

Even though numerous schemes list transgender as beneficiaries only two national level schemes, from the Ministry of Social Justice and Empowerment, have access data.

- 57 TGs accessed the National Means cum Merit Scholarship (2014-15) awarded to meritorious students of economically weaker sections to arrest their dropout from school in Class 8 and continue secondary education.
- 272 TGs accessed the Post Matric Scholarship scheme for minorities awarded to meritorious students belonging to economically weaker sections of minority community so as to provide them better opportunities for higher education, increase their rate of attainment in higher education and enhance their employability.

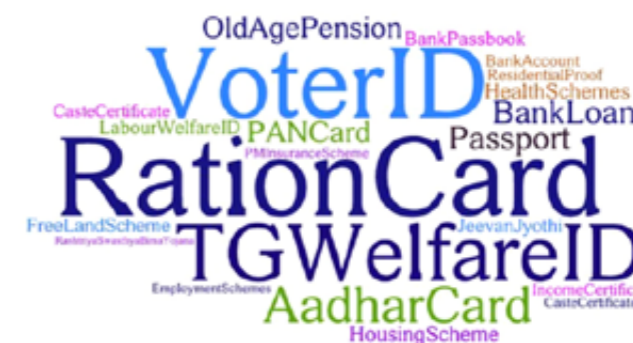
3.3 Funnel of Attrition



3.4 Popular Social Protection Schemes among TGs

- The participants were asked about schemes and entitlements that were popularly wanted among the TG community.
- They were asked to prioritise these schemes keeping in mind the needs and requirements of their peers and community groups.
- The word cloud in the following slides represent the schemes and entitlements listed out by the respondents in each of the states.
- The word clouds statistically represent the top schemes and entitlements prioritised by the respondents in the respective states.

3.4.1 TAMIL NADU



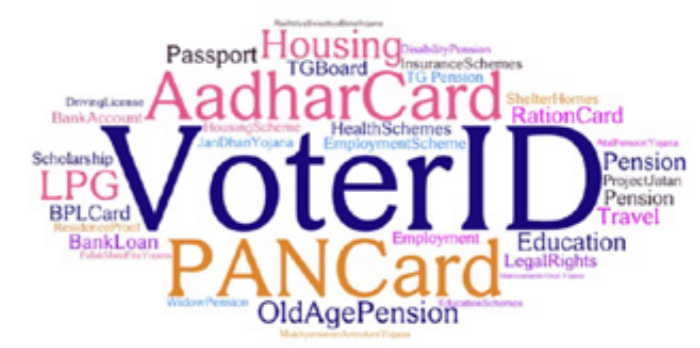
Priority	Scheme/ Entitlement
1	TG Welfare ID
2	Ration Card
3	Voter ID
4	Aadhar Card
5	Housing Scheme
6	Old Age Pension
7	Health Scheme
8	Labour Welfare ID
9	Bank Account
10	Insurance Schemes

3.4.2 KARNATAKA



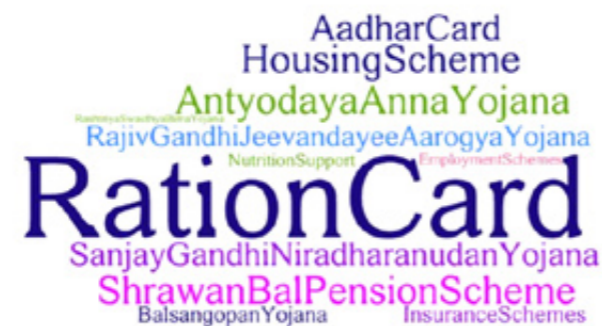
Priority	Scheme/ Entitlement
1	Ration Card
2	Housing Scheme
3	Voter ID
4	Health Scheme
5	Pension Scheme
6	Aadhar Card
7	Bank Loan
8	Vocational Training
9	Mythri Scheme / Pension
10	BPL Card

3.4.4. GUJARAT



Priority	Scheme/ Entitlement
1	Housing
2	Employment
3	Health
4	Aadhar Card
5	Ration Card
6	Transgender Welfare Board
7	Voter ID
8	Education
9	Resident Proof
10	Old Age Pension

3.4.3. MAHARASHTRA



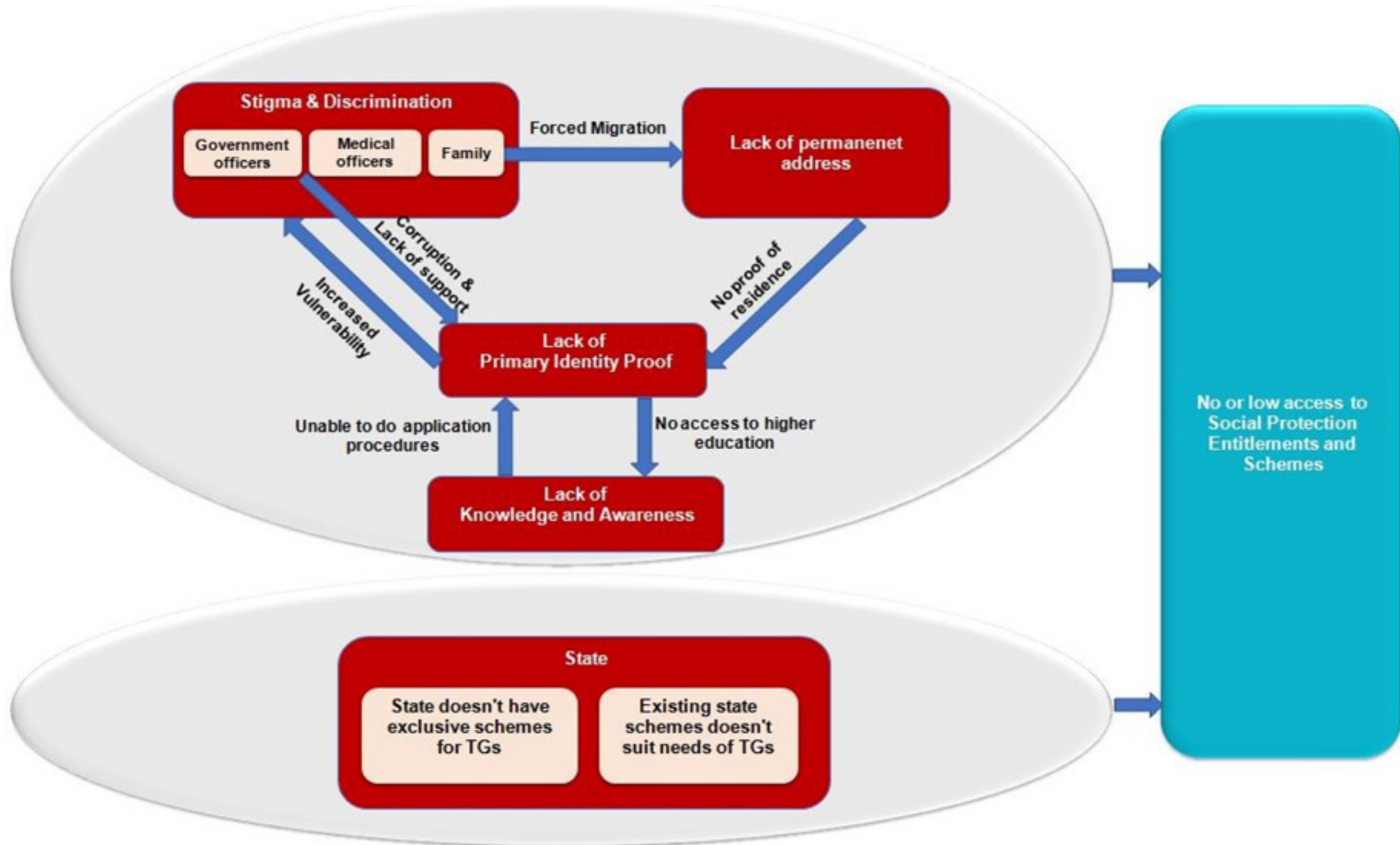
Priority	Scheme/ Entitlement
1	Sanjay Gandhi Niradhar Anudan Yojana
2	Rajiv Gandhi Jeevandayee Arogya Yojana
3	Ration Card
4	Aadhar Card
5	Shrawan Bal Seva Yojana
6	Antyodaya Anna Yojana
7	Voter ID
8	Gharkul House Scheme
9	Ration Card
10	Nutrition Scheme

3.4.4. UTTAR PRADESH



Priority	Scheme/ Entitlement
1	Aadhar Card
2	Housing Scheme
3	Ration Card
4	Voter ID
5	Old Age Pension
6	Transgender Welfare Board
7	Water Scheme
8	Employment Scheme
9	Electricity Scheme
10	Bank Account

3.5. Challenges in Accessing the Schemes & Entitlements



3.5.1 STIGMA & DISCRIMINATION

- TG community continue to face multiple layers of stigma and ostracism that play out simultaneously due to their non-conformity to the gender binary system.
- These include verbal, physical, sexual violence; harassment; refusal to provide services; false arrests; denial of share in ancestral property; denial of or delayed services at hospitals; denial of admission in educational institutions; victimisation by teachers and fellow students and several others.

“Why do you need an identity proof when God himself created you without an identity? - This is what the government officer asked me when I went for an identity card”
-----FGD, Uttar Pradesh
- Weak support systems, and migration and exclusion from familiar locations lead to a life of abandonment.
- Government officers are not supportive when individuals seek out their help in applying for schemes and entitlements. The officers use unacceptable terms to tease them or outright ignore them. Corruption pushes TGs to pay large sums of money as bribes to get Voters ID and Ration Cards. There is no response or follow up from the government officers post the application process.
- Government officers assume that TGs' income through begging and sex work put them above the poverty line. Hence, they do not let TGs access any below poverty line schemes.
- People are made to wait for a long time and often sent home without attending to their requirements because there isn't a separate “queue” for them.

“Nobody ever listens to us if we go to any government office. They don't even ask us why we are here.”
-----FGD, Karnataka
- Doctors do not attend to TGs once they find out their gender identity. Respondents said that they are often tossed between doctors with female doctors referring them to male doctors and vice versa.
- While applying for a TG certificate, they have to get a certificate stating their gender from the Chief Medical Officer and a psychologist among others. The doctors are not cooperative and refuse to issue the certificate. There have also been instances of harassment and unethical behaviour because of which most

people do not follow through the entire process for application.

- Doctors have refused treatment to TGs citing lack of awareness of medications that can be given to transgenders.

“The doctors have often said that they don't know which tablet or treatment to give us because they don't know whether to give us male tablets or female tablets. They have said that they do not know how to go about the treatment.”

-----FGD, Uttar Pradesh

3.5.2. LACK OF PRIMARY IDENTITY PROOF

- Ambiguity on the part of the government with regard to the identity of the TGs continue to remain. The transgender welfare ID is issued only to those who are castrated. This leaves a large population of TGs without any form of identity proof.
- Lack of basic proof of identity means that they cannot access any scheme or entitlement from the government. There is also delay in processing the applications. Respondents said that it takes a minimum of six months to process any application.
- The identity proofs issued often have errors and the rectification process is long and tedious.
- Change of gender on existing identity cards is also a cumbersome process. A letter of proof is needed from doctors who are usually not cooperative.

“Many of our people are not castrated, they may still have a penis but they are also transgenders. They also beg, live with us and live the same life we do”

- -----FGD, Uttar Pradesh

3.5.3. LACK OF PROOF OF RESIDENCE

- TGs often migrate out of their villages and communities when they realise their TG identity. Often families disown them when they reveal their identity. TGs also leave their homes fearing potential stigma on their gender identity being found.
- Of the total TGs covered under the member evaluation communication tool of Avahan, 63% left their homes with issues related to gender identity. TGs

“Most of us leave our families and move to another city. We have no permanent address. And they ask us for residential proof wherever we go”

-----KII, Karnataka

who migrate do not have a permanent proof of residence. Often families refuse to give TGs cards stating their gender identity at birth or certificates, such as the school leaving certificate, once they come out as TGs.

- Without a proof of residence, they are unable to apply for any other basic identity cards such as Voter ID, UID Card, Ration Card, PAN Card etc.

3.6.4. LACK OF EDUCATION & AWARENESS

- Most of the TGs discontinue schooling because of harassment, stigma, discrimination and exclusion by their schoolmates and teachers. Leaving home also contributes to school discontinuation.

- In their new place of residence, not having a supporting document to prove their age or last school attended means that they cannot join a new school or college. For those TGs who join the Jamaat system, Gurus persuade the boys to earn money rather than getting an education.

- Low levels of education lead to poor awareness of schemes and programmes relevant to them or the process of applying to access the schemes on their own without the assistance of a community organisation or an educated and supportive peer.

“Most of the TGs not aware of how to access any schemes. We usually have to apply through an NGO or a community based organisation

-----KII, Tamil Nadu

3.7. Priority Areas of Social Protection among TGs: An Overview



Priority	Scheme/ Entitlement
1	Housing
2	Employment
3	Health, Nutrition & Medical
4	Identity
5	Financial Security
6	Education
7	Livelihood Support
8	Vocational Education
9	Legal Services
10	Citizenry Rights
11	Food Security

3.7.1. ASPIRATIONS VS. REALITY

Respondents across the five states identified Housing, Employment, Health, Proof of Identity and Financial Security as the top five priority areas in which they seek government assistance. Other included Education, Livelihood Security, Vocational Education, Legal Services, Citizenry Rights and Food Security in that order.

The existing government schemes rarely reflect the needs and aspirations of the community. For instance, there are a total of six schemes from central and state governments providing access to housing. Two of them mention TGs as beneficiaries. However, stigma and discrimination prevent them from accessing these schemes even when they make an effort to do so. An FGD participant in Gujarat narrates her experience of applying for a house under the Pradhan Mantri Awaas Yojana, the Central Government housing scheme, “I had put in an application for a house. After repeated visits, the officer told me that my number had not come up in the current lot. On further probing, he said that the general community allottees would blame him if he had given a plot to a TG next to their plots. I did not pursue it any further. It takes so much time and effort to put in an application in the first place. Who will have the time to do it again and again?”.

Similarly, though Economic Development is the category in which the government has most number of schemes that recognise TGs as beneficiaries, employment access continue to remain low due to low education among the community, lack of institutional linkages, absence of essential documentation and stigma. Most of these schemes are also for setting up businesses with subsidised loan support from the government. With no initial capital available for investment, TGs will find it difficult to access these benefits.

Only three schemes, across the two states of Uttar Pradesh and Tamil Nadu, provide direct employment. Explaining the complexity of the issue in getting a job or holding onto an existing job, a respondent says, *“Because our faces are feminine, businesses fear that they will lose customers if they employ us. If we join a company, we face discrimination daily like the other staff won't sit and eat with us or take water from us. You have to pass at least Class X to get a job and most TGs who leave home early do not have the basic qualification to apply for jobs. Even in cases where we are interviewed, we are hardly informed about the results of the interview.”*

The HIV/AIDS intervention in India has to an extent ensured that TGs receive health care access especially services related to STI and HIV/AIDS. However, where community organisations (CO) of TGs are not strong, sensitisation of government hospital staff does not happen or is inadequate. Constant turnover of doctors also means that any break in the sensitisation programmes leaves the TGs at the mercy of the attending doctors. Deep rooted stigma is also tough to change, which means that TGs may get timely and non-discriminatory access to services if accompanied by a CO leader or peer worker and not otherwise.

However, very few states in India has schemes that provide for the kind of services that TGs need such as Sex Reassignment Surgery (SRS), except for in Tamil Nadu, laser operations for hair removal or breast implants. A respondent from Gujarat says about the lack of support for these procedures, *“There is no facility in the government hospitals for SRS. Pre operative counselling itself takes six months and most times, the hospital does not give a date for the procedure. This means, they will get into sex work to save money for these procedures and this puts them at the risk of HIV. Family anyways will not help with money. If they join the Hijra community, the Gurus do the castration after which urine will not pass easily and issues emerge related to that. TGs go to the private hospitals to treat these conditions where they are charged double for the services.”*

Although existing proofs of identity in India such as electoral id, UID card, passport allow for mentioning gender identity as that of TGs, access continues to be a problem for the community. This is linked closely to the fact that most TGs live away from their natal villages and homes and are without any proofs of residence or age. These become mandatory for accessing the identity cards that will give them access to government schemes. It thus becomes a disempowering cycle, wherein stigma from the family leads to destitution and abandonment, which then prevents them establishing their citizenship rights and secure government benefits.

In Financial Security, most of the TG specific schemes include that of pension. The pension is given after the age of 40 years. This does not address the needs of the young TGs without a livelihood and sources of income. Also, the pension amounts are so low that it is insufficient to lead a life of dignity in the cities, to which most TGs migrate. It is also much lower as compared to what they would earn from begging or sex work. Hence most TGs do not access the scheme. An FGD participant from Karnataka says, *“The Mythri scheme gives us Rs. 500 pension per month. I would make more than that per day being a sex worker. How is this scheme in any way useful to us?”*

3.8. Awareness of Transgender Welfare Board among TGs

- Transgender Welfare Boards have been set up by the states of Tamil Nadu, Maharashtra, Odisha, West Bengal and Manipur in India.
- Most TG participants in the study however did not know about the TG Welfare Boards.
- Among those who knew, many had just heard about the setting up of the board without an understanding of its purpose or functions. Others were aware that the board had designed new schemes for TGs, helped them better access existing government schemes and that as a result their transgender peers can live well as TGs.
- Transgender participants who were aware and unaware about the board made an unanimous demand for the setting up of a body that will cater exclusively to their needs. They hoped that such a body would enable their access to government schemes, design new schemes for their welfare, provide measures to protect them from violence, and be their representative in liaising with the government.

The TG welfare body can partner with the government to make the public aware about our community and sensitise them towards our needs, help the government make the schemes more TG friendly, provide old age homes, education and employment and have special schemes for TGs just like how there are for women. They can bring new schemes and liaise with different government departments for TGs, for eg. many women get tailoring machines because they can stitch, the TGs can get specific benefits like that.

COMMUNITY ASKS FOR A TRANSGENDER WELFARE MECHANISM

There should be a representative body for the TGs informing us about the government programmes and helping us secure access to those. Then the TGs will get to know about transgender rights and schemes; they can work for the TGs and solve their issues. They can also issue identity cards to TGs which will serve as an identity proof based on which access to schemes for TGs can be decided.

The TG welfare body can also help with medical services, castration, SRS for trans women and trans-men, voice change, body design and breast implant . Because these facilities are unavailable, children when they realize, their identity has nowhere to go for counselling, are not supported by parents and end up being on the road , begging or joining the Hijra community and be part of the guru chela system. If there is a problem now TGs have to solve it on their own. If there is a body, we can approach them and get support from them to resolve the issues and help us get access to schemes that will fulfill our needs.

The TG welfare body can partner with the government to make the public aware about our community and sensitise them towards our needs, help the government make the schemes more TG friendly, provide old age homes, education and employment and have special schemes for TGs just like how there are for women. They can bring new schemes and liaise with different government departments for TGs, for eg. many women get tailoring machines because they can stitch, the TGs can get specific benefits like that.

RECOMMENDATIONS



4.1. Recommendations

1. Effective and functional institutional mechanisms for TG welfare

- a. Which aggregates demand and supply for TG welfare comprehensively
- b. Focus should be on functionality, not form; No one size fits all (TG Board is NOT the only solution)
- c. Options include - TG Board, CBO of TGs, NGO led, TG Commission, Ombudsman, Lokayukta kind of mechanisms etc.

2. TG specific services, coordinated through TG welfare mechanisms (point 1)

- a. Sex Reassignment Surgery (SRS)
- b. Non-stigmatised medical services
- c. Counselling and mental health support

“Rahne ke liye makkan, khane ke liye roti aur pehne ke liye kapde, this is the basic need of every human being and that’s all what we need”

-----KII, Gujarat

3. Policy changes at National and State level to address TG identify and address proof issues

- a. Inclusion of Third Gender in all applications/ forms
- b. Space for changing gender identity over time
- c. Practical solution for address proof (e.g. State TG institution certification)
- d. Marriage, adoption rights

4. Demand based modifications of mainstream schemes for TGs (Focusing on uptake)

- a. Focus on high demand schemes (Housing)
- b. Modify these scheme to ensure they are TG friendly
- c. Facilitate access to these schemes

5. Facilitation of employment for TGs

- a. Prioritizing areas where TGs likely to be employed (TGs and employers intersect)
- b. Dialogue with employers for uptake
- c. Counselling, education and preparedness

