Transgender Health & Rights in the World

Towards a New Narrative

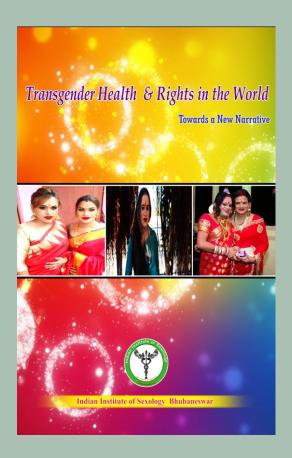








Indian Institute of Sexology Bhubaneswar



Transgender Health & Rights in the World



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The contents and views reflected in the article are of the respective authors. IISB is not responsible for any controversy or any intellectual property right infringement. Most of what we do on earth is being governed by our positioning in the social universe, and our lives entangled in a complex cobweb of emotions, that they only make sense in relation to our social identities, which themselves are creations of systems and structures. Historically, Transgenders have remained as 'invisibly visible', and sometimes 'visibly invisible'. Indian history is replete with examples of Transgenders, portrayed with attributes such as valor, beauty, poignant voices, and enigma, be it Srikhandi or Brihannala of Mahabharat, or closeted males (with fear of persecution and non-acceptance of identities and behavior) in several stories and novels in vernacular languages of India. Often referred to as Kinners and Hijras, as ones who are 'in-between', they embody and symbolize beauty, virtue and life in transition- in becoming... They defy the very ontology of 'being', a fixated narrative of statics, and reflect on very imminent and nascent notion of 'gender fluidity'. However, they are to be seen and their lives are to be interpreted beyond 'gender lens' and construed with a sensitive approach focused on identities. as they come to negotiate and live with.

This special issue 'Transgender Health and Rights in the World' is a symbolic gesture to recognize, to celebrate lives in their pure form, and reorient the focus of much of our thoughts and actions from a stereotypical one which limits and negates identities, to one which scopes beyond life, and their world. This issue aimed at becoming a voice of transgenders in India, focusing on their lives, to present a coherent narrative of their trials and tribulations, and inner battles they fought with society to get their due rights and dignity. It also presents a picture which juxtaposes it with their intense and desperate attempts and desire to rise above, and race beyond limits. I believe we have been able to achieve much more, by intensively able to focus on their inner pursuits, and identities beyond

in a globalized world order, which truly recognizes their strengths of character.

This special issue aims to provide a critique on theoretical frameworks and the latest empirical formation, contribute to aggressive and prosocial behaviors, understand their sexuality, and benefit or harm, their relationships with their parents, friends, and romantic partners. In places, where the published research on a topic is missing, research from the face to face context can be used to provide a starting point for understanding the same topics. As we are now entering into 2018, when we are considering and re-considering our possibilities, and ways of engaging with the world, wherein diversity is the core of life, and LGBTQI community in the developing world are a more visible one.

However, the goals of championing rights and equality are far from being a reality, although we have made major headways into policy making e.g. Indian Transgender Bill, 2016 to recognize rights of Transgenders in India. The current struggle with multiple voices raised against the Government's discriminate and insensitive Policy for Transgenders in December 2017 is reflective of deeply disturbing pathos in our Indian society.

In this issue, we got 7 critical pieces, each carrying messages, and insights from diverse fields of inquiry such as Philosophy, History, Human Rights ,Law, Psychology, Sociology, Development Studies, Queer Studies, LGBT Studies, Journalism, and Literature.

This issue also features one empirical study 'Original Article', conducted on Indian population on micro-attitudes and discrimination towards homosexual orientation bringing state of the art knowledge in the field of social psychology on current stands of the society. It also includes an invited commentary on 'Gay Marriage and Its Impact on LGBTQI Rights in the UK and the Western World', and a 'Personal Creative Piece' celebrating 7 Transgender activists of India who have truly made it larger than life. Each of these aims to present chromatic ensemble of lives, identities, critiques on current policies, existing societal attitude, belief systems, and underscores a surreal representation of journey of travelers across time and space.

Although we celebrate these lives, their unique efforts, scientific evidence informs us that we have a long way to go as far as goals of true gender equality, inclusion and equity are concerned. At this critical juncture, we must solemnly recognize that we have embarked on a journey, wherein the goals of true equality would not be realized, unless we move together, leaving no one behind.

With this issue we aim to engage with the world with our effort to synthesize information, offer unique perspectives and hopefully negotiate space, and improve visibilities of 'Trans-Lives' in the mainstream society.

Hope, our small initiative will be received kindly by all...

Sincerely Maheswar Satpathy Special Issue Editor 31st Dec 2017



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Sexuality, Democracy and Human Rights

Hari Hara Sudhan R

Abstract

Sexuality is a subject to be discussed without shying-away. This essay, discusses about how sexuality of a certain minority people in India and across borders, are being perceived by people in various countries and the consequences faced by the people whose sexuality seems deviant i.e. the sexual minorities from the majority. This essay provides illustrations in the form of research done by various sources that provides such evidences that paint a different picture of the sexual minorities viz. Lesbian, Gay, Bisexual, Transgender, Intersex and Queer (LGBTIQ) people in India and across the world aiming at eliminating the prejudice against them.

Keywords: Sexuality, Democracy, Human Rights, LGBTIQ, India, Sexual Minorities

Introduction

Human Rights are considered as those rights which are "inalienable fundamental rights to which a person is inherently entitled" (Ramaswamy & Mane, 2013). These human rights are provided to each and every one irrespective of their citizenship and nationality. In light of this definition, one may question if human rights are being enjoyed by all sects of people irrespective of their caste, creed, ethnicity, gender and sexuality to name a few discriminations. To any person, human rights are more invaluable than any other right. For example, to an Indian, it is more than the fundamental rights as the human rights are those rights enjoyed by people across nations by virtue of being humans.

The human rights have more of a moral nature rather than legal nature (Osiatynski, W., 2009). It would be immoral to provide one group of people with more rights leading to access of certain resources than to all. In a smaller scale this is indeed a question of morality. Sometimes in a broader sense, this is also meant as ethics and that people often happen to be in an ethical dilemma. Each and every person is required to be served with the same level of importance. In terms of human rights enjoyed by peoples across borders, one person is no superior to another. Individuals' rights are as important to those of organizations which are treated as 'persons' for legal convenience. Medieval rights were considerably different from the rights which are being enjoyed

age. This means people of different times have different needs. Due to the changing needs of the people, one could say that the rights have evolved accordingly (Osiatynski, W., 2009). Human Rights are very essential to thrive on this planet. Without certain rights with which one can claim it is not possible for one to survive especially with the growing violence and other social vices. Right to equality, right to freedom of speech and expression, assemble, movement, residence, practice a certain profession are all some of the human rights which is being guaranteed to people across the earth (Pancholi, P. V., 2014). This suggests that the human rights are universal in nature.

Human rights also form an essential characteristic of a democracy (Teitel, R. G., 2013). Democracy has different values to different people in different contexts. A definition for the concept of democracy can be arrived as follows:

"Democracy is a system of government in which ultimate decision-making authority resides in the body of the competent adult citizens, which typically exercises that authority through regular elections and by simple majority vote" (Peters, C. J., 2011).

Democracy involves equality (Forsey, E., 1942). The equality before the law, equal legal freedom, equality to hold office, etc., fall under the broader concept of democracy. Democracy involves liberty (Forsey, E., 1942). Liberty sought could vary from one person to another, from one group to another group and likewise. At present, we could at some parts of the world see a struggle for civil rights or civil liberties. Hence, as a characteristic of our political system which is a democracy, we are guaranteed these human rights – which are provided to us by virtue of humanity or us being human.

When talking about human rights being universal rights to all humans in the world irrespective of any distinction in terms of gender, race, caste, creed, etc., the importance of the same must be acknowledged at an international level. That which has been traditionally the function of the states or nations to monitor, govern and guarantee the human rights of the people have now become transnational. The onus of responsibility has been shifted from governments of nations to international governmental and nongovernmental organizations to further assure from at a higher level the human rights of peoples rather than just to people of one particular country. This exhibits a resulting attribute of people – 'universal personhood' (Koenig & Guchteneire, 2007).

The concept of 'universal personhood' tempts one to understand and believe that people across the globe are treated as universally equal. However this may not be the case. Democracy is not always good. It indeed at times works-out counter-productive. Referring back to the aforementioned definition of democracy, a government is elected after measuring the simple majorityvote. This is termed as 'majority-faction'. Whilst, on one hand it is good that a majority of people like or need one particular party to govern a democratic country such as India, the opinions and votes of the minority is simply unheard. In this case, by the term minorities, the sexual minorities could be looked at. Whilst the number of sexual minorities may seem a negligible number, these people should also be offered a voice. For a start, there could be constitutional remedies in the form of amendments recognizing sexual minorities in India, first of all as humans; as people. This could be enhanced to representation of sexual minorities in the Parliament and the Legislative Assemblies in India.

In Madison's words, "united and actuated by some common impulse of passion, or of interest" is the characteristic of the people who form this majority-faction (Peters, C. J., 2011). Hence, often in a democracy whilst the opinions of a majority of people are taken into account and are acted upon, the minority is left behind and is required to endure with the consequences. This means, personal freedom is not given importance to. Rather, it is opinion of a collective populace which determines who shall be free and not free. This seems contradictory to the phenomenon of universal personhood.

With the disagreement that could potentially build between the majority and the minority, there are often disputes which one could see occurring and recurring and still democracy is unable to disengage such disputes. It is agreed on a global-level that democracy is a good system of governance. However, one is not being instilled with a critical thought about the same. Considering the process of policymaking, there is supposed to be a broad participation of people of the country, especially of those of who are affected to make a policy more effective. However, in a democratic process this feature of a broad participatory system is close to absent if not absent at all (Peters, C. J., 2011).

Thus, it is clear that one group may be advantaged while the other being left disadvantaged. This is not only about poverty, however this happens in many aspects of democracy, giving rise to injustice. What is just for one may not be just for another. Sometimes law and legal institutions also acknowledge the fact that one man's food is another man's poison and vice-versa. Justice in this sense, is not being served equally even in a democracy. Societies still work without a definite clarity on what is just for their society. When trying to consider what

is just for a society, the process of consideration could be a democratic process itself. That is, only the opinion of the majority would hold good and the minority at many times, could be disregarded.

Justice, like many is an abstract notion, which does not have a perfect definition. According to Aristotle, 'the just will be both the lawful and what is fair, and the unjust will be both the lawless and the unfair' (Heinze, E., 2014). Studying about these concepts makes one acknowledge the subordination that is shown to certain sects of people such as women, the Lesbian Gay Bisexual Transgender Intersex and Queer (LGBTIQ) community, religious minority, etc. Hence in many ways, democracy, although a majorly good concept of governance, may not yield goodness to all the people on the whole. Perhaps one could draw attention to the concepts of inequality and injustice going together here. Inequality whilst often associated with indicating the economically downtrodden should also be associated with the people who are deprived of rights.

A lot of studies are being conducted on the issues of women, their rights and about how women are being treated. However, issues of the LGBTIQ community are understudied. Such studies are particularly negligible in the Indian context. It is often thought that being a lesbian, gay, bisexual or a transgender in the Indian context, is only due to the deficient sex that one has. Some other opinions are such that, these communities exist due to a choice they have made. Few others believe that the people belonging to the LGBTIQ community are more sexually deviant and promiscuous. Often people associate that the LGBTIQ people are more affected by HIV/AIDS. Adequate efforts are not made to study all these issues in an unbiased manner.

When, one studies about humanity, it is essential that one comes across the issues of sexuality. It is an inevitable part of human life. It is a historical belief that sex is an activity meant for reproduction. It is also believed that this activity is natural and occurs as per God's will. Some say that this is a natural course of life and associate it with the 'Mother Nature'. Also, the terms 'normal' and 'natural' are often being used to provide synonymous meanings to the effect that there are certain prescribed sexual attitudes and behaviours, which is acceptable and which is normal as it is considered to being a part of the plan of the supernatural being 'The God' or the plan executed by 'Mother Nature'. This belief has led to any sexual activity outside of the prescribed one simply unacceptable and ought to be condemned (Kauth, M. R., 2000).

To consider few examples, homosexuality or the same-sex attraction and masturbation are condemned according to many religions. Even the oral sex was banned long time ago. When these issues arise, one often is made to wonder as to who knows the plan of 'The God' or 'Mother Nature'. It provides one with the intellectual thirst to analyze, understand and to reason with what is being preached. What is preached often happens to be for the advantage of a certain majority, again applying the aforementioned definition of democracy. Democracy as agreed as being not all that bad of a governance system, it enables one to have access to knowledge and question certain ways that the world works. This is perhaps, one of the reasons if not the only one, for why the LGBTIQ community receives support from certain heterosexual people despite the fact that they do not belong to that community.

It is being said that there are two major forces which shape our lives – the genetic force and

the forces around us in the environment (Kauth, M. R., 2000). Such features like our skin colour, body shape, etc., are provided to us genetically. Our behavior, attitudes, etc. are modified by the environment. One must find a common point viz. our human body, to tackle the complex relationship between these two forces. One is required to know the balance between the two forces to be able to tackle the two forces in a way that it benefits us to be able to live in harmony with the rest of the world.

Hence, this helps us understand that whilst we have certain physical features, it is the society and the societal forces which help an individual act or behave in a certain way. This behavior is required to be congruent with their body. By congruence, it is to mean that there would have been a set of traditional behaviours which the world would have seen as being common and existing among all men and another set with the women. These would have been documented and in time utilized for child rearing purposes which is why one receives a lot of conditioning from the family and society.

Congruent to that populous opinion, sexual activity is believed to be for reproduction. In some countries the sexual activity forms a part of a person and their life. For example, in the western countries, sexual feelings and personal identity become very important of a person's personality (Kauth, M. R., 2000). It should also be noted that association of culture and heritage to sex would vary from one society to another (Kauth, M. R., 2000). "Genes associated with sexual attraction create predispositions in how key neural systems receive and process particular sexrelated stimuli" (Kauth, M. R., 2000).

This indicates the possibility that irrespective of whether male or female, gay or straight, the

sexual attraction works the same for all people the same way. Moreover the receipt and the process of particular sex-related stimuli add further idea of how sexual attraction could work differently from one person to another. This means that, this warrants further analysis as to how, why and even perhaps when the LGBTIQ people develop such different sexual feelings and behavior. Without stopping just there, one also is required to appreciate such people and their behavior rather than forsaking them.

At times, with the way, especially in India, when boys are warned against talking to girls at schools and colleges, one is made to wonder if the attraction to the same-sex is built due to the contribution received from the restrictive behavioural conditioning such as this. Evidently, most men, spend time with other males and not with females (Geary, C. D., 1998). Coalition of men, as many seem to understand due to false propaganda has existed in many ancient societies. Hominid males existed in same-sex coalitions. This has not only helped them to keep away enemies and gather food but also for sexual happiness. There were also political benefits between two males – especially between an older male and a younger male (Kauth, M. R., 2011). This kind of a social relationship between two men could help them and their societies.

Homosexuality has for long time now been a serious and a sensitive topic of debate. Despite having existed in almost every civilization and culture all along history, for some reason the acceptance of the same is close to nil. Homosexuality is often associated with bestiality. The need for laws protecting the homosexual couples has been seriously questioned. This behavior is particularly associated as being deviant from

'Normal' or 'Natural' sexual behavior. However, when saying so, one might have to also consider the fact that our genetic makeup contributes equally to all sexes and responds to certain sexual stimuli differently.

Don Wildmon is quoted as writing, "Every time you go against the law you pay. The problem is that by the time we admit that we have gone wrong against the laws of nature and nature's God, the damage has already been done". Such perceptions in society might create or amplify the hatred behavior towards homosexual individuals. Whilst analysis one could easily figure out many unnecessary and biased propaganda about homosexuality. During the analysis, people, if when unbiased easily dispel certain myths that have been made associate with homosexuality. Some of them are discussed in the following paragraphs.

In this age of information, in India, a girl was found dead. She is quoted to have written in her last letter to her mother, "Forgive me, Ma, I am leaving like a coward. But I can't help it; I love her and she also loves me; it is impossible for us to live together. Nobody is responsible for our death. Our only request to you, Ma, let us both be cremated at the same crematorium".

These women were unable to conform to the norms and practices set by the society which had a set structure to live by. Recalling the words of Don Wildman, one may wonder if this is what was meant when he wrote about having to 'Pay'. And of course, this is not the end of the discrimination that is faced by the members of the LGBTIQ community. Every day, these people live a silent-life which is in danger of being persecuted at any point in time. The point here however is that the women showed a great deal of love and care for each other, on which any family and family

values are built on. Hence, this helps one to understand that even lesbian couples are indeed fit to enter matrimony. However, it is just the majority of people who seem to exercise democracy, who are disapproving of such people. There is also a contention that homosexuals are not fit to run a family based on the fact that homosexual people have multiple sex partners or companions. There is another statement that these homosexual people are having multiple sex partners and practice unsafe sex, with at least many of them if not all, are very highly prone to Sexually Transmitted Diseases (STDs) such as HIV/AIDS. It is necessary to understand the significance of institutionalizing the samesex marriage. Societies must allow marriage between same-sex couples so that they could have one partner alone. One of the consistent findings says that lesbian and gay couples value relationships more than the heterosexual couples (Dunne, G., 1997).

When marriage or civil unions are considered, the concept of similarities and dissimilarities come in, to better understand the differences in the way of life of the lesbian and gay and heterosexual couples. Obviously, in heterosexual marriages there is a stark gender difference. On the contrary, in homosexual civil unions, there is no such concept (Kitzinger, C., 2001). This gender difference becomes an inevitable barrier to cross for the heterosexual couples. This is definitely in the attitudes of the couples in the heterosexual marriage.

Research evidences according to Kurdek L. A. (1993) suggest that it is due to this gender difference that there is a strong difference in the way homosexual and heterosexual people share household work. Whilst the lesbian couples shared the work on the basis of equality, gay couples shared the work based on balance. However, the heterosexual

couples shared their responsibilities by segregation according to Kurdek, L.A. (1993). Much of the household work which included kitchen-work was left to the female partners. Hence the study concludes that the couples could do much better without establishing gender as the concept of sharing the household work resulting in a successful marital life.

Jan Pahl, is the first to have pursued research on money in the relationships of the homosexual couples. Pahl in her research in 1989 concluded that women felt much better living in refuge than living in the control of the male bread-winner. This happens to be the result of many marital relationships between heterosexual people. Hence, this only suggests that heterosexual marriages are not successful as they claim that homosexual civil unions, let alone marriages are being banned in many parts of the world. Similarly, another study concluded that homosexual couples. when it comes to financial management or simply put, money management, manage the same effectively by adopting to the merge or pooling some or all of their income together (Clarke et al., 2005)

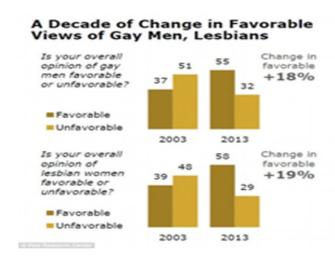


Figure 1.1 PEW Research Centre Data

The next debate that requires careful attention is that homosexuality is by choice. However the homosexual people claim that this is not true and place many facts for assessment. Pew Research Centre (PRC hereafter) study (Figure 1.1) shows that majority of the Americans, around 50% were not in favour of Gay men and Lesbian women in 2013. Another study by the PRC in 2013 shows that there was an increase in the people viewing Gay men and Lesbian women favourably. These studies show a considerable shift in the attitudes of the people of the United States of America (USA).

Whilst the Americans seem to be growing out of their prejudice, it is quite the contrary in many parts of the world. In many conservative countries like India, Malaysia, Zimbabwe, Nigeria, etc., homosexuality is condemned. This is the same trend in the middle-eastern countries as shown in Figure 1.2. This shows the tolerance and prejudice level on homosexual people and homosexuality in one country viz. the United States as opposed to many others across the world. These differences may have arisen due to cultural differences as the peoples in both the countries differ from one another in many ways including the way they might have been brought-up, their religious teaching, the values that the people have imbibed as a result of the value education they have received, their belief system, etc.

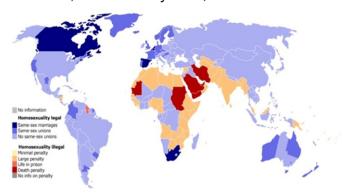


Figure 1.2 Pew Research Centre Data

The Figure 1.2 does not only show the countries where homosexuality is legal but also where the penalty or punishment is minimum and maximum (death penalty). It is clear that whilst there are four territories where homosexuality leads to death penalty in a majority of the places there is no legality of same sex unions. In a few other places there is legality for same-sex unions and countries like Canada, South Africa and Spain are the only countries allowing same-sex marriages. This is another PRC finding (Figure 1.3) which indicates the bifurcation of the opinions of the people in the USA. Here the study shows that the people believe that homosexuality is by an effect by birth or that which occurs due to the person's upbringing and other environmental factors that would otherwise contribute to a person's personality.

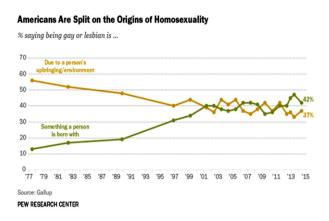


Figure 1.3 Pew Research Centre Data

The Figure 1.3 now leads this discussion to yet another aspect of human sexuality by and large. As seen in the diagram it is to assess if or if not, sexuality and homosexuality in particular is something innate, as in, if it is as a consequence of a particular genetic make-up or a chromosomal composition or if it is as a result of the various exposures and treatments which as humans we come across

in our environment. For this it is essential that there is at least a glance at the biopsychological aspects of sexuality of humanbeings. Also it is essential for one to understand that there exist other forms of gender-viz. Intersex.

Essentially the notion that homosexuality is a result of some form of biological difference from that of the heterosexuals, is a widely accepted notion that acts as a good enough sign-post for one to research further upon with respect to the medical aspects of the homosexual beings across the globe. It is important that it is this notion which has aided in 'gay' movements across the globe especially in the USA. However, this phenomenon should be discouraged from being used as a tool to denote and attribute homosexual men and women of the LGBT community as somewhat abnormal and as people who require some sort of treatment.

Conclusion

The Lesbian, Gay, Bisexual, Transgender, Interesex and Queer (LGBTIQ) community seem to form a negligible minority in the Indian scenario. As a result of this, these individuals, as mentioned in the examples above, even in the day and age of the 21st century continue to constantly face serious lapses in enjoying their human rights, despite the truth that human rights are those to be ensured and enjoyed by all individuals across race, colour, gender, caste and sexuality.

Certain beliefs about the people belonging to the LGBTIQ community such as they are more prone to or are more affected by HIV/AIDS is not true. There are such other beliefs that the LGBTIQ people are unfit for family due to their perceived promiscuity. There have been evidences as mentioned above that certain countries are very unfriendly towards the LGBTIQ community in terms of their legal provisions, prejudice and so on.

This essay tries to convey that the LGBTIQ community deserves a recognition so that they could enjoy their human rights bestowed upon them without any discrimination and prejudice. Author believes that in a country as large as India, certain constitutional amendments must be made to recognise the existence of the LGBTIQ community in India, may be as minority to ensure their rights and peaceful co-existence.

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Who am I? A Transformative Process of Same-Sex Sexual and Gender Identities Development in Indian Context

Apurva Kumar Pandya, Zripti Kathuria

Abstract

Although, sexuality in recent years expanded rapidly across a wide range of social sciences, very few Indian researches attempt to question how homosexually oriented men come to adopt sexual identities and distinct gender identity. The present study captures and explains the transformative process of same-sex sexual and gender identities development. Using constructivist grounded theory methodology, 16 men with diverse sexual identities and 2 hijra and transgender each were interviewed using semi-structured interviews. With constructivist grounded theory principles, the data elaborates Indian model of same-sex sexual and gender identities and a transformative process of the same in an Indian context.

Keywords: same-sex, sexual and gender identities, transformative process, Indian context.

Introduction

Studies on sexuality in recent years expanded rapidly across a wide range of social sciences. Researchers, since last two decades, have attempted to understand and explain the underlying process of becoming aware, acknowledge, and accept same-sex sexual identity by various sexual identity development models. Existing models broadly describes stages – progression from one stage to final stage of sexual identity development – (Cass, 1979; Coleman, 1982; Dube, 2000; Minton and McDonald, 1984; Troiden, 1989; McCarn & Fassinger, 1996; Minton & McDonald, 1984) and process of sexual identity development – pathways of sexual identity formation, going forth and back from one phase to another – in Western cultural context (Alderson, 2003; Downing & Roush, 1985; Eliason, 1996; Cox & Gallois, 1996). These models stress on the content, and the process, of identity development. However, these models fail to adequately recognise interplay of indigenous cross-cultural structures as an agency and internal psychological processes individuals go through, particularly within predominantly heterosexual (and extremely homophobic) sociocultural contexts. Furthermore, these models fail to distinguish between personal and group identity development, which has been found to be central in conceptualisation of same-sex sexual identity development.

Most existing literature in India focusing on sexuality is in realm of sexual health issues primarily on HIV prevention. Studies on sexual identity development process in Indian cultural context are largely ignored by Indian academicians and professionals. This warrants the need of research on same-sex identity development from Indian perspectives. Present study is a part of a larger study to understand development of same-sex sexual identity in Indian cultural context conducted in Gujarat. The study discussed the process model of same-sex sexual identity development and

explained five developmental markers (Pandya, et al. 2013). However, it did not capture the transformative processes that lead to development of sexual as well as gender identity among men who have sex with men, Hijra and Transgender population. The present study specifically looks at psychosocial process of sexual and gender identity development. It also discusses the complex socio-cultural structures that act as an agency that regulate transformative processes of sexual and gender identities development.

Method

This study was conducted in the city of Vadodara (formally known as Baroda), in western Indian state of Gujarat. We 'Grounded Theory' approach considered (Glaser and Strauss 1967; Charmaz, 2006) as the best-fit approach for the present research to address our aim and to help us construct a theory of transformative process of sexual and gender identity development in Indian context. Using constructivist grounded theory methodology, 20 men with diverse sexual and gender identities were selected through Lakshya Trust - a community based organization working with men who have sex with men, hijra and transgender population in three cities of Gujarat namely, Vadodara, Surat and Rajkot. In order to represent the MSM, hijra and transgender population, men with different sexual and gender identities from Vadodara city were recruited in the study. It is important to note that these culturally adapted sexual and gender identities are fluid and dynamic. Some of them are labels which were internalized and persons started identifying themselves with these labels. The Table 1 is an attempt to organize cultural beliefs around sexual & gender identities, psychological & behavioural characteristic and sexual characteristics of men who have sex with men. hijra and transgender (MHT) population, which may vary with time.

Study Participants

All participants were self-identified with same-sex orientation and those who were willing to participate in the study were recruited using following inclusion criteria:

- 1. Self-identified men as same-sexual orientation who are above 18 years of age
- 2. Married (heterosexually)
- 3. Married or Unmarried with steady relationship
- 4. Married or Unmarried and exploring relationship

The study used theoretical sampling as presented in the Table 2. Interviews of each participant were carried out until the saturation of data achieved.

Data Collection

All interviews were conducted face-to-face, at their convenient time, either at counselling centre, drop-in-centre (DIC) of the community based organization, Lakshya Trust, or participants' home by the first author. Participants were interviewed at least 3 times. The duration of first interview was approximately 90 to 120 minutes while rest were follow-up interviews for 15-20 minutes to clarify or seek missing information. Entire data collection and primary analysis process was spread over 9 months.

Participants were aged between 18 and 51 years. Of the 20 participants, 10 had some secondary education (10th standard), 6 had higher secondary education (12th standard), and 4 were graduates. 8 worked as daily wage labourers, 4 worked with government or non-government organisations, 5 had small businesses, and 1 was a photographer and 2 were begging in the train. Most of them (12) identified as being from low-income

families, while the others belonged to the Indian middle class. Most participants (12) lived in joint-family (where multiple generations of family members live under one roof).

A semi-structured interview schedule, based on previous literature, was developed. The interview schedule chronologically covered: childhood experiences, experiences of being different from others, awareness about and proclivity towards the same-sex, factors that push and pull to accept or reject same sexsexual identity, culturally defined genderinappropriate behaviours including factors that push and pull to adopt opposite gender role, personal responses to such behaviours, and factors that make them comfortable with sexual being. Interviews were transcribed and translated into English, and these transcripts were then organised into categories (Bogdan and Biklen, 1992). Data from each interview were analysed, where we examined general patterns and themes, before conducting the next interview. This iterative process allowed us to incorporate additional avenues of investigation to our interview schedule.

The data were coded using four levels of coding: initial coding, focused coding, axial coding, and theoretical coding (Charmaz, 2006). Finally, through the process of constant comparison of categories, core categories were developed that revealed the experiences of participants as a group.

Several strategies to assure trustworthiness of findings were employed. These included: (i) member checking by providing participants an opportunity to read transcripts and respond to initial analysis, (ii) independently reviewing the codes and analysis by all the authors to ensure reliability of coding.

Results

Same-sex sexual and gender identity development consists of different layers of identities such as personal, community and public sexual identities. Each layer integrates different identity developmental markers. The Figure 1 explains three broad identities and developmental markers.

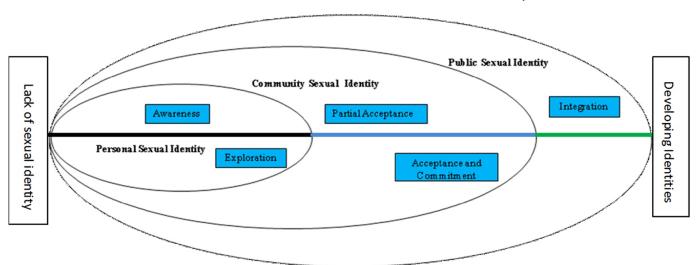


Figure 1. Indian Model of same-sex sexual and identity development

Table 1 Sexual and gender identities, psychological, behavioural, and sexual characteristics

Sexual identity	Gender identity	Psychological and Behavioural Characteristics	Sexual characteristics
Homosexual (Important to note that homosexual is not a term used by participants. Usually others (outside of their community) referred their sexual identity as "homosexual" which is later internalized.	Koti (effeminate man)	Psychologically feel and behave the way women do. Feel romantic and sexual attraction towards other men. Strong inclination to wear female attire and makeup.	Engage in anal or oral sex with men. Usually take receptive (passive) role and popularly known as "bottom" within the culture.
Bisexual	Man	Feel romantic and sexual attraction towards both men and women. Some men display effeminate while	Engage in vaginal sex and receptive as well as penetrative anal/oral sex with men
Double Decker	Koti (However, some men identify them as man with homosexual orientation)	others display masculine mannerism. Feel romantic and sexual attraction towards other men. Strong inclination to wear female attire and do makeup. Occasionally, they wear female attire and make-up.	Engage in receptive as well as penetrative anal/oral sex with other men.
Gay	Man	Feel romantic and sexual attraction towards other men.	Engage in receptive and penetrative anal/oral sex with other men
Ghadiya	Man	Feel romantic and sexual attraction towards other men. Masculine men whom Koti or Double Decker label as "Ghadiya." Ghadiya usually are active partners or lovers. Some masculine men with same-sex orientation started identifying them as "Ghadiya" and have romantic relationship with Koti.	Engage in penetrative anal sex with other men (known as "top")
Same-sex sexual identity	Hijra	Feel romantic and sexual attraction towards other man. Wear female attire and part of the Hijra gharana – a cultural group with strict behavioural norm.	Occasionally engage in sexual activities with other men
Same-sex sexual identity	Transgender	Feel romantic and sexual attraction towards other man. Wear female attire and socially	Engage in sexual activities with other men.

Table 2 Characteristics of study participants

Number of	Participant's sexual	Characteristics
participants	and gender identity	Charactisues
participants	and gender ruentity	
6	Koti	Effeminate men, sometimes wearing female attire and
		makeup, usually passive/ 'bottom' in anal/oral sex
		with men. Two participants were heterosexually
		married, and one was in steady same sex-sexual
		relationship; other two were single who were
		exploring relationship; and rest two were in steady
		same-sex relationship.
4	Bisexual	Sexually active with both men and women and also
		identified themselves as bisexual. Two participants
		were married.
2	Double Decker	Effeminate unmarried men involved in receptive as
		well as penetrative anal/oral sex with other men. Both
		were seeking steady same-sex relationship.
2	Gay	Men self-identified as gay who were engaged in
		receptive and penetrative anal/oral sex with other men.
		Both were unmarried and sexually active with men
		only. One was in steady same-sex relationship while
		other was exploring potential same-sex relationship.
2	Ghadiya	Unmarried masculine men and active partners/'tops'
		who engage in penetrative anal sex with other men and
		penetrative vaginal sex with women. One Ghadiya was
		cohabiting with other male partner after "same-sex
		marriage" within the closed community.
2	Hijra	One was Guru and another was Chela from Behcharaji
		Gharan in Vadodara. Both were identified them as
		"Hijra," with occasional same-sex sexual relationship.
		Guru had castrated penis while chela's castration
		ceremony yet to be organized. Begging was their
		primary income generating activity,
2	Transgender women	Men who identified as transgender woman who
		adopted woman's role. One was undergoing sexual re-
		assignment surgery (SRS) to change the sex while
		other was adopted opposite gender role after castration
		of penis. Both were living as women at the time of
		interview.

Personal sexual identity comprises two phases: awareness and exploration. Awareness is the first phase which encompasses of being aware of differences than peers and person starts questioning the previously held assumptions of being heterosexual. The Figure 2 presents the process of development of personal identity. Once the awareness of differences is acknowledged, men actively explores the differences, interests towards same sex individuals, and same sex feelings. Men develop a sense of being different than other and challenge the previously held assumptions of being heterosexual. They start recognizing their feelings as different from the peers. They find their behaviour being 'gender inappropriate'. The recognition of being different from others and 'dender inappropriate behaviour' such as feeling of being attracted towards same gender individual, hugging and holding hands in public spheres create confusion within as well as curiosity to explore more about their feelings and behaviour results in active exploration of such differences. Being aware differences, men actively engage in exploring questions related to same sex desires, feelings and experiences and engage in repetaing sexual experiences. They define these sexual exploration and experiences as 'masti' or time pass and seek out pleasure from these experiences. Hoewever, at the same time, they undergo an internal conflict. With such experiences they gained more knowledge about samesex sexuality and seek for other man. The Figure 3 presents the process of development of community sexual identity.

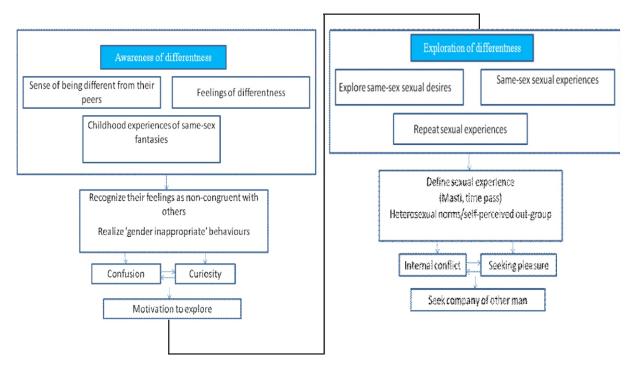


Figure 2. Process of development of personal identity

When men become aware of differences and exploring those differences through same-sex sexual experiences within the closeted group of same-sex men, community sexual identity was demonstrated through partial acceptance of one's same-sex sexual feelings and desires. The dominant heteronormative values, created a personal construct of homosexuality as undesirable, and created mixed feelings such as fear, shame and guilt, coupled with love and excitement (Pandya, 2011). Therefore, same-sex sexuality was accepted only within closeted group — a

private space where same-sex sexual activities are acted out without recourse to validate one's same-sex feelings, desires, and demonstrate sexual and gender identity in public as heterosexual men. The closeted group includes, peers with same-sex and gender identities, family of choice where they nurture family relationships (like mother, sister, daughter-in-law) with peers and support group of the organization working on sexual minority. This phase represents romantic relationships, relate themselves with sexual and gender

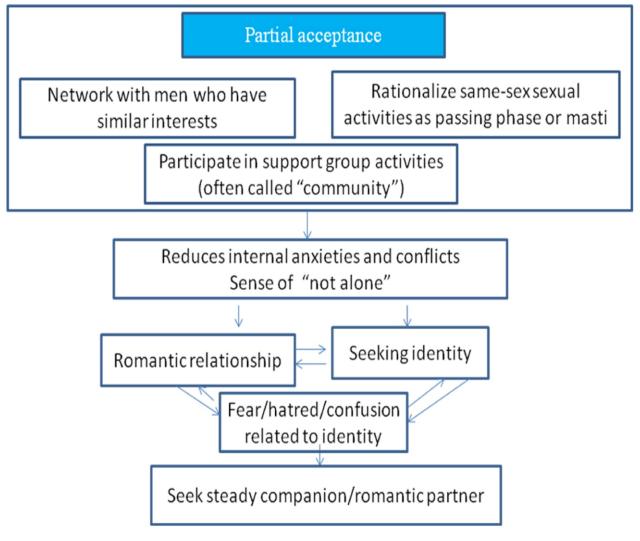


Figure 3. Process of development of community identity

identities at the same time, fear, hatred towards self due to their engagement with peers, support group and same-sex sexual relationships.

After partial acceptance and coming out with same sex identity in community, the person move forward and accept the same sex identity and commitment to one's identity. At this stage, person get into emotional and ideological transformation which leads to satisfaction from the relationship that further leads to accepting homosexuality as reality. At this stage there is calculative disclosure within the community and person is engaged into community and nurture 'family of choice' relationship, which leads to fulfilling homosexual relationship. The Figure 4 presents the process of development of public sexual identity.

Public sexual identity was reflected with acceptance, commitment to sexual being and integration of sexual identities. It involved clarification and validation of same sex feelings. Men began to intensely identify with their same-sex sexual community and their activities, and began to challenge homophobia and accept the same-sex sexuality as a reality. In this period, internal conflicts related to sexual feelings, desires, practices and sexual identities are clarified and resolved. At this phase, a full acceptance and commitment to same-sex attraction and desire as part of an overall identity is attainted. Acceptance of sexuality by family members emerged as catalyst for validating and synthesizing their sexual being. Integration same-sex attraction and desire forms public sexual identity among

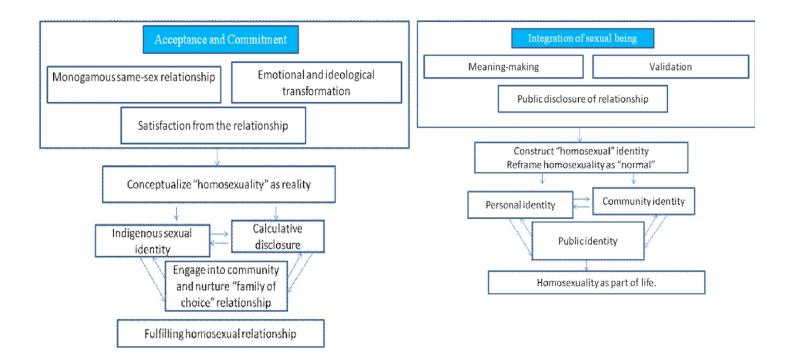


Figure 4. Process of development of public identity

homosexually oriented men while Hijra strongly relate them as 'Hijra' as an identity and transgender identifies as 'Women'. Here, it is important to note there are many overlaps in Hijra and Transgender identity. This research validates that identity of Hijra and Transgender as exclusive identities. There may be Hijra and Transgender persons who identify them as 'Women', with the fact that there is sizable 'Hijra' who consider themselves as 'Hijra' who are different from women and transgender.

Integrity of sexual being is the last developmetnal marker of same sex sexual and gender identity development. They make meaning of their identity and validate their ideas against and diclosure their relationship with same sex partner in public in case of homosexually identified men. These experiences reframe their notions of homesexuality as normal. That leads to personal and community identity which integrate public identity and accepting homosexuality as part of life. In case of Hijra and Transgender, it is easy for them to build identity as Hijra or Transgender due to their appearance and clothing as women. Hijras have distict identity as 'Hijra' who are considered as sacred / spiritual identity. Hijra represents strick tradition. Hijras are believed to be married to the Lord Shiva, worship goddess Behchraji. Ideologically, they are not allowed to keep romantic or sexual relationship with any men; however, in some Gharana, Hijras keep secret realtionship with men or even married with men. Transgender person have distinct identity as 'transgender' and do not bound by the laws of 'Hijra'. They can publicly keep relationship with other men, which reduces their conflicts related to their sexual and gender identity.

Different identities, personal, community and public identities overlaps sexual and gender identity demonstrated by men at one point of time. Sexual and gender identity development processes may go back and forth within, and may go beyond, the five processes we have identified here.

Discussion

The present study attempted to describe process of transformation of same-sex sexual and gender identities among Indian MSMs, Hijra and Transgender. Same-sex sexual and gender identity develop as a result of five interconnected transformative processes, emergent identities, identity conflicts, validation of identities, multiple identities formation and conceptualization of sexual and gender identities. The Figure 5 explains the transformative process of sexual and gender identities.

Limitations of the study

The findings of this study need to be read in light of certain limitations. Participants for the research were recruited through a community-based organisation and were part of a support group. Each participant was ritually participated in 'family of choice' practice. The data we have are retrospective accounts of a group of men, Hijras and Transgender persons who were already oriented to sexuality issues and had strong bonds and relationships with the same-sex sexuality community of Vadodara city. Our participants also represent only specific geographical, historical (in case of Hijra) and classed strata of Indian society. Therefore, the tentative theory generated from the present research remains context-bound and limited in terms of its generalisability.

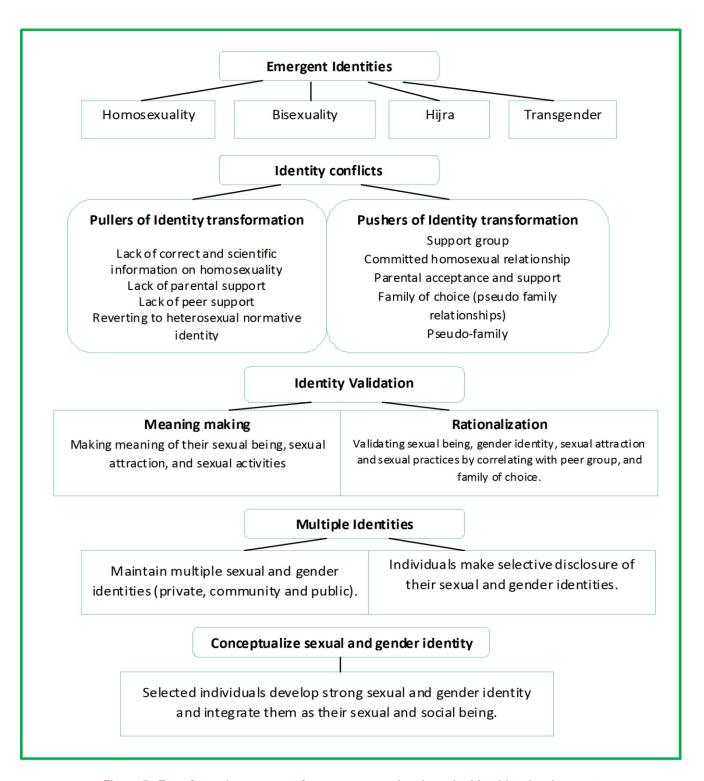


Figure 5. Transformative process of same-sex sexual and gender identities development

Conclusion

We have conceptualised Indian model of samesex sexual and gender identity as well as transformative process of developing sexual and gender identities. The research identified developmental processes marked with processes that transform and shape nonnormative sexual and gender identities. There exist multiple identities particularly for men identified as gay, bisexual, and indigenous identities. Men who become Hijra or Transgender have multiple identities; however, develop distinct sexual and gender identity over a period of time and live with single identity and integrate new gender identity into their being. The process of identity formation is continual and does not have endpoint while transformative processes are micro processes that facilitated formation of same-sex sexual and gender identities.

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Gender Identity Development among Transgenders in Odisha

Bigyan Kar

Abstract

Transgender identity development model given by Gagne, Tewksbury, and Mc Gaughey in 1997 proposed that the period of identity exploration was often very long, but there tended to be three major outcomes or desired outcomes. The transsexual MTFs (Male to Female) desired to transform completely to women. The cross-dressing men sought opportunities to vary their identity presentation, both publicly and privately. And last, the gender radicals desired recognition as transgendered.

Present study explores the nature of gender identity development and coming out experiences among transgender people. Major focus is given to transgender community in Odisha. The study trie to analyze the role of social stigma and discrimination in identity formation and coming out experiences, and to explore how social support mediate one's psychological well being and there by affect one's gender identity. The discovery of one's sexual orientation being toward the same gender can be a shock, and sometimes it may lead to identity crisis, which without accurate information and support may manifest into a traumatic experience.

Keywords: gender identity, transgenders, LGBT, Odisha

Introduction

Gender and sexuality are distinct but related topics. Individuals living in the early 21st century are gendered, and those genders inform and constrain our sexual expression. We are socialized by parents, peers, teachers and the media to conform to our gender roles: boys are active and assertive, girls are gentle and nurturing, and everyone is heterosexual. Those who do not conform to the norm of heterosexuality are subject to societal sanction, rejection, and, in some instances, violence. The existence of homophobia and heterosexism demonstrates the continued need to research the topic of sexuality, and to expose those mechanisms that normalize and naturalize heterosexuality while pathologizing alternate forms of gender and sexual expression.

Defining sexual orientation and gender identity is a very difficult task in Indian context. Although there are several movies which have been done upon 'sex' but none of them define sexual orientation or gender identity development of a person. Still it is very difficult for a common man to discuss about sex in a general context. A study conducted by British feminist scholar Marie T.Farr,

in late 1980s, upon first-year US college students; reveal that usually students face difficulty to discuss anything about sex because it is a very personal topic and they lack the suitable language for it, which should be neither clinical nor moral. So it is very much important to understand the concept of sex and gender.

The term sex refers to biological differences among male, female, and intersex people (hormones, secondary sex characteristics, reproductive anatomy) that can be changed over time through the use of hormones and surgical interventions (Krieger, 2003).

People are aware about rape and sexual harassment but still, they are unaware about homophobia and homosexuality. Usually people use a binary way (either male or female) of marking a person's sexual identity. They never think about Lesbian, Gay, Bisexual and Transgender people and in case people find anyone from LGBT community, they do not accept them so easily and most of the times make fun of them. As a result, if anyone belongs to the LGBT community, they do not like to share it with others. They prefer to be 'closet' (without disclosing to anyone). Sometimes 'selective disclosure' takes place.

It is not possible to provide the accurate numbers of occurrence of LGBT people in the world. The most common figure generally mentioned is that 10% of a population display to more or a lesser degree a form of homosexuality. A survey conducted in India shows that 37-50% of the male population had experiences of same sex encounters. But however, there is no confirmed evidence for it. In single sex environments such as boarding schools and prisons it is sometimes claimed that homosexuality increases (Samelius and Wagberg, 2005).

In India, LGBT community is deprived of so many opportunities. Majorly they experience religious and social opposition which makes their life more pathetic. In India third gender people are popularly known as 'Hijra'. Hijra tradition is deep rooted in Hinduism.

Sometimes Lesbian, Gay, Bisexual, Transgender, Queer people face more critical situations where they take conversion therapy to change their sexual orientation from homosexual to heterosexual. However, conversion therapies have been called 'improper' (Davison, 1991), 'patently inefficacious' (Brown, 1996) and 'unethical and professionally irresponsible' (Haldeman, 1991).

For LGBT people, act of revealing their sexual orientation to others (coming out) is a very challenging work. Coming out to family, especially parents, is often the biggest challenge (Savin-Williams, 2003). It may need to be emphasized to young people that disclosing their sexuality is a process and a personal decision. When, to whom they come out, and timing is their choice and ideally, should be done with support and options. The process of coming out has some positive and negative consequences. But it is very important that a person should successfully come out in order to develop their gender identity. According to Cass Homosexual Identity Development Model, (1979), coming out is a necessary part of developing a healthy and positive identity as a gay/lesbian/bisexual individual. The process of coming out is not staged and always remains a fluid one.

However, a person's gender identity development takes place through certain stages and there are several theories and models that explain gender identity development. Some of them are - Cass Identity Model developed by Cass in 1979, Fassinger's Model of Gay and Lesbian Identity Development developed by Fassinger in 1996, Homosexual Lifespan Development model by Hyde and Jaffee in 2000 and Troiden's Model of Sexual Identity Development proposed by Trioden in 1979. Adolescents may identify as lesbian, gay, or bisexual without having had any sexual experience (Savin-Williams, 1989).

In a general sense, identity is used to refer to one's "unique combination of personal, generally inalienable data, like name, age, sex, and profession, by which that individual is characterized and distinguishable from any other person" (Graafsma & Bosma, 1994). This form of identity is primarily public in nature, and can include the identity of groups and organizations, such as the democratic party. But when it is related to discussions of social and personality psychology, identity may include how people are distinguished from one another on various personality dimensions. This may refer to one's own sense of one's personality structure, or how others see one's personality structure. Erikson's approach to identity includes a social-perceptual aspect: the awareness of being perceived by others in accordance with one's self-perception (Graafsma & Bosma, 1994). This is similar to the identity found in humanistic psychology, which is part of the process of self-actualization and the sense of being one's authentic self.

American Psychological Association defined gender as the attitudes, feelings, and behaviors that a given culture associates with a person's biological sex. Gender identity refers to "one's sense of oneself as male, female or transgender" (American Psychological Association, 2006). The term gender identity has been used to describe an individual's internal sense of self as male,

female, or an identity between or outside these two categories (Wilchins, 2002). Therefore, Gender identity refers to a person's inner sense of being male or female or transgender. A person's gender identity can be same or different from their sex assigned at birth. Sometimes there is incompatibility in between the prescribed gender role and gender identity of a person.

There are some theoretical explanations that describe about the gender and sexuality within a person. These theories are drawn from a number of disciplines, including biology, sociobiology and psychology. Biological models of sexuality are drawn from two distinct schools of thought. The first is a straight forward biological explanation that suggests that homosexuality and transsexuality result from brain differences, genetic factors, and prenatal hormonal fluctuations (Bailey, 1995; LeVay, 1991, 1996). The second approach is the evolutionary or sociobiological model, which argues that sexual behaviors developed because they were selected for by evolutionary forces (Symonds, 1979). Although these approaches differ, here is some overlap, especially given that many researchers searching for biological causation are willing to accept evolutionary explanations for the existence of said mechanisms.

Psychological models of sexuality have also emerged from several different schools of thought. Many people associate the psychological study of sexuality with psychoanalytic approaches. Psychoanalytic approaches, such as Freud's, are one type of psychological explanation for the development of human sexuality. These perspectives postulate that individuals must resolve a series of psychosexual stages in

order to develop healthy adult sexuality. Deviations from normal adult heterosexuality are typically the result of improper fixation at a less mature stage (Freud, 1905). In contrast, Bandura's (1977) social learning theory focused on observation and imitation, may also account for learning about traditional gender roles and 'appropriate' sexual expressions.

Interactionist theories attempt to explain how biological, psychological, and cultural factors act together to produce a developmental outcome. One such interactionist theory is Money's (1988) neuro-hormonal stress-diathesis model. This model suggests that biological factors predispose an individual to a given outcome such as homosexuality, and thatenvironmental factors(e.g. mate availability) mediate the strength of that outcome.

Building Gender Identity among transgenders

In India there are a host of socio cultural groups of transgender people like Hijras/ Kinnars, and other transgender identities like Shiv-Shaktis, Jogtas, Jogappas, Aradhis, Sakhi, etc. However, these socio cultural groups are not the only transgender people, but there may be those who do not belong to any of the groups but are transgender persons individually. Though an accurate and reliable estimate of transgender people is not available, it cannot be denied that their number is miniscule compared with the total population of the country. Transgenders have very limited employment opportunities. Transgenders have no access to bathrooms/toilets and public spaces. The lack of access to bathrooms and public spaces access is illustrative of discrimination faced by transgenders in availing each facilities and amenities. They face similar problems in prisons, hospitals and schools. Transgenders have very limited employment opportunities as most jobs are confined to male and female sexes. Transgenders, being a third sex, cannot even apply for most of the jobs.

Hijras are generally biological males who have adopted this specialized third gender status. Part of the Hindu religion, they worship 'Bahuchara Mata', the 'Mother Goddess'. They dress and act like women and undergo emasculation to be endowed with the divine powers of both the Goddess and the ascetic. "While hijras, as eunuchs or hermaphrodites, are 'man minus man,' they are also, unlike eunuchs in other cultures, man plus woman" (Nanda, 1993). Nanda noted that women who do not menstruate can become hijras as well, but this is far rarer. One of the hijras' principle roles in Indian society is to perform at celebrations following the birth of a son. They also perform at weddings. Again, these are culturally acknowledged ritual positions that are not filled by Western transgendered people. The hijras also challenge traditional notions that gender identity and biological sex are deterministic and intractable. "On the contrary, my study of the hijras suggests that gender identity can continue to undergo change after childhood, even in some dramatic ways" (Nanda, 1993).

Transgender Identity Development

Transgender identity development model was given by Gagne, Tewksbury, and Mc Gaughey in 1997. They examined the coming out process for transgendered people. However, they did not create a linear model for this phenomenon. Instead, they identified steps and challenges that were important in

the coming out and transitioning processes. First, they identified that transgendered people are in a different situation with respect to identity management than are gay, lesbian and bisexual people. While gay, lesbian and bisexual people often have the choice to not disclose their sexuality to, for example, colleagues at work, the transgendered person may not have this luxury. The transitioning process creates obvious, physical changes in the body that must be addressed with others.

This model was based on interviews with 65 male-born transgendered individuals. Largely, they said, these were Male To Female trans-sexuals, many of whom conformed to traditional beliefs about gender. Their goal was to live as women, and they saw their masculine bodies as a biological mistake. The cross-dressing men, on the other hand, simply saw cross-dressing as a way to express their feminine selves, but they were generally content with their masculine bodies. The last group was the radical transgenderists, ambigenderists, and third genders. This group wanted to live as nongendered, or somewhere in between. The steps involved in the coming out and transitioning for these transgendered men and MTFs included an initial sense that their gender was wrong. The transsexuals reported knowing they were or wanted to be girls early in life, while the cross-dressers tended to say they knew they were boys but occasionally wanted to be girls. The crossdressers tended to hide their desires and habits; this may have been more difficult for the transsexuals. Generally, they became aware of the fact that they were not accepted by society and were ashamed of their desires. This led to periods of drug use, drinking, and purging, or ridding themselves of all their female clothing and accessories.

The next period involved coming out to

oneself. Generally, this process was driven by events that informed them they were wrong for their cross-gendered behavior (such as being caught or admonished by someone), the location of a name or label for their feelings, and the realization that others shared their desires and practices. They may have fantasized about men during this time, although they rarely adopted a gay identity. The realization that they were not alone often alleviated (but not completely removed) their feelings of isolation.

After coming out to oneself, the individual followed this by coming out to others. Here, it was necessary to find a sense of validation, either from significant people in the MTF's life, or through interacting with a community of similar people. Public declaration of identity was unsurprisingly reported to be very intimidating. Attempts to pass while crossdressed were also intimidating, although this public recognition of them as a woman was seen as different from significant others' recognition of them as transgendered. The authors found that support groups could facilitate identity development, but that they could also lead to greater confusion or increased anxiety.

Finally, the authors said, the transgendered MTFs found a resolution. The period of identity exploration was often very long, but there tended to be three major outcomes or desired outcomes. The transsexual MTFs desired to transform completely to women. The cross-dressing men soughtopportunities to vary their identity presentation, both publicly and privately. And last, the gender radicals desired recognition as transgendered. This extended process, the authors said, tended to create a strong sense of community among transgendered people, and instilled in them a desire to help other transgendered people.

Transgender Identity Development in Odisha

According to NALSA judgement para 20,15th April, 2014, Supreme Court stated that "each person's self-defined sexual orientation and gender identity is integral to their personality and is one of the most basic aspects of self-determination, dignity and freedom". So now it is visible that Government is taking vital steps for promoting the identity of transgenders as well as after such judgment some sort of legal rights transgenders can claim for their identity in society.

After NALSA judgment, a 32 year Government, gazetted officer, Ratikant Pradhan, came out boldly and accepted her identity as transgender. Now she has adopted a new identity as Aishwarya Rutuparna Pradhan (Times of India, December 20, 2015). Taking such bold step shows that social stigmas and stereotypes are now not able to prevent a transgender from coming out.

According to Express News Service, May 24, 2017, Odisha Government has made several policies to protect the rights of transgender people. For example, actions will be taken on parents who do not look after the specific need of the transgender child. Similarly action will be taken for any sorts of bullying or discrimination within school environment.In Odisha, several institutions are made for protecting and enhancing the rights of transgender people. Some of them are governed by transgenders. For example, Meera and Sadhna, two transgenders established two institutions 'SAKHA' as well as 'THE THIRD GENDER WELFARE TRUST' in the year 2006 and 2015 respectively. These institutions receive support from HIV Alliance India to undertake preventive HIV/ AIDS intervention amongst the transgender community.

A 27 year old transgender Meghna Sahoo got married to a man on January 27, 2017. This marriage is well supported by the society (Times of India, January 27, 2017). All above events shows that government of Odisha provides great scope for protecting as well as enhancing identity of transgenders. Thus ,transgenders of Odisha are now taking bold steps and coming out to their family as well as to the society

Conclusion

In Odisha, both at government and private level much more activities are conducted for gender identity development of transgender. Such activities are promoting them to take a bold step and disclosed their sexual orientation not only to their family but also to the society. Through social awareness programs stereotypes and taboos related to transgender are eliminating. However, it requires a long term consistent efforts to integrate transgender community of our society into main stream.

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Transgenders in India: A Fight for Right to Life

Gumpul Rana

Abstract

Transgender people, right from the 'coming-out' phase till death, are subjected to various forms of discrimination and violence. Even after the Indian Government's recognition of 'transgender' as the third gender (different from men and women), the situation hasn't significantly changed. The present article explores the homophobic stereotypical attitudes, the role of media, and other factors that aggravate the problems faced by the transgender people, and their endeavoring struggle for existence and their fight for the 'Right to Life' with dignity. Over the years, the success stories of many transgender personalities, who could rise against the storm to fit-in with the mainstream society highlight the immediate need of introducing various sensitization programs. In addition, legal provisions, socio-political inclusion and acceptance of transgender people in different institutions of the society would result in a society built on egalitarian values.

Keywords: Discrimination, gender identity, homophobia, LGBT, right to life, sexual minority, transgender.

Introduction

"One morning, Jolly wakes up to the enchanting rays of the bright sunlight that pierces through the windows of her room to disperse vibrant energy all around and to glorify her morning with a blissful welcome. Lazily gazing around the room and stepping sluggishly on the ground, she gets up to get dressed. Selecting the best saree and applying some beauty touch-up to make her feel and look more adorable, she steps out of the house, carrying a heart-melting smile. As she strolls on the road, waiting for a cab or an auto, she observes that all the people around her are constantly staring at her and are even passing derogatory comments to her. Some are even avoiding eye-contact with her as if she is no less than a haram swine. Ignoring these, Jolly calls a taxi and before she could utter anything, the driver immediately asks her- "Nani, Khandagiri re chadiasibiki?" (Sister, Should I drop you at Khandagiri). Reflecting a socially indoctrinated cheap mindset, the driver misidentifies her as a sex-worker going for her customers in Khandagiri. Offended she did feel, but she is quite used to this kind of misperception. Engulfing the disrespect and awful reactions, Jolly instructs the cab driver to take her to the dance school where she wishes to make her first step in fulfilling her childhood dream of becoming a trained dancer. Having reached there, Jolly enthusiastically fills up the admission form but stops at the 'gender' category as the form requires her to 'tick' on either the 'male' or the 'female' option. She conveys her confusion to the person on-chair, but to her utter dismay, the person yells at her with the clear message on his face-"There is no place for creatures like you." With all these nasty experiences of being turned down and rejected by almost all the institutions of the state, Jolly returns home disheartened, forlorn and wishes to vent out all her frustrations to her parents. But then she realizes that it was her parents who had thrown

her out of the house when she was only 12 years old. They had disowned her - disowned, as she was different - different from others; weird, queer - a bundle of embarrassment for the family.

A logical and humane analysis of this single day of Jolly's life would compel one to think and question the inhuman and unjust stereotypes prevailing in the society. Jolly is not an exception but is one of the million 'transgenders' who face such discrimination and rejection every single day for their whole lives. At this stage of human civilization, when the space technologies aim to search for alien life, many lives already on earth are disdainfully clustered and left alone in the filthy crowded slums inevitably consigned to die. Now, the basic questions that arise are - Are transgender people not human beings? If yes, then why are they deprived of the basic human rights? Is trans-identity' unnatural' and 'against the law of nature'? If yes, then who has postulated the laws of nature? Are transgender people a waste for the society? If no, then why are they dragged to prostitution and beggary? Somewhere deep down one's heart a regretful voice echoes that it is only we, the self-assumed denizen of divine infallibility strutting on a fallen world, who have categorized life into a unilateral and closed hierarchical strata - attributing high value and respect to the lives in the higher strata; and arrogantly maligning the lives in the lower strata with indignity and shameful reactions.

Transgender: How is it different from 'LGB'

Transgender is an umbrella term used to describe a person, whose 'Gender Identity' differs from the sex that was assigned by the doctor on his/her birth certificate or whose gender expression doesn't match the society's expectations with regard to the stereotypical

gender roles. Although transgender is used in the term 'LGBT' to refer to all the sexual-minority communities, there exists a fundamental difference between transgender and rest all gay, lesbian and bisexual communities. LGB people are differentiated and defined by their sexual orientation. On the other hand, transgender people are defined by their gender identity i.e. a person's internal and personal sense of being a man or a woman or someone outside of the gender binary. Being transgender isn't the result of one single thing or a matter of one's choice. It encompasses a complex amalgamation of biological, psychological and environmental factors. Transgender people can be straight, gay, lesbian, or bisexual. Most transgender people seek to bring their bodies more into alignment with their gender identity by using prescribed hormones or undergoing surgery. However, for most transgender people the process of transition i.e. the process of shifting from the gender assigned at birth to living the gender with which they identify is not simple. The dichotomy between the society's expectations and one's own realization of self-identity gives rise to several challenges as well as opportunities that could either make or mar the life of the person.

Problems faced by a transgender for being a 'transgender'

The most significant hurdle that a transgender person faces is accepting/appreciating his/her own gender identity. In our society, almost every person is indoctrinated with some preconceived stereotypical notions, which regulate and differentiate the specific activities, roles, behaviors, and expectations of both men and women. Breaking and challenging these societal beliefs and expectations, and coming out from one's shelve can be psychologically and emotionally challenging [1,2]. Many people, who realize their transgender identity, refuse to

accept or appreciate it because of their own negative stereotypes and feelings of transphobia that they have learned from the society [3]. It takes years of pain and struggles to develop a positive gender identity. For those who successfully identify it themselves, the next struggle is - finding someone, whom they can trust and reveal their identity to. This 'Coming-Out' process can be a very freeing experience for a transgender person, but it too accompanies (in most cases) its own share of problems and difficulties such as rejection [4,5], gossip [6], harassment [7], physical violence [8], abuse, loss of job, discrimination and so on. According to one report in 2014, 57% of families of transgender people chose not to talk or spend time with them after the coming-out phase.

Despite Indian Government's recognition of 'Transgender' as the third gender (separate from men and women) and the passage of 'Rights of Transgender Person's Bill' by Rajya Sabha (on 24th April, 2015), deeply embedded homophobic and transphobic attitudes, often combined with a lack of adequate legal protection against discrimination on grounds of gender identity, exposes many transgender people to extreme forms of violation of their human rights. Transgender people often face multiple forms of marginalization such as racism, sexism, poverty and other related factors. Marginalization often starts within the family in the form of family rejection or lack of social support which leaves the transgender people with little control over their lives and resources available to them [9,10]. Unable to cope with this social exclusion, many transgender people commit suicide and end their lives [11,12]. According to a report of National Transgender Discrimination Survey 'Injustice at Every Turn', almost 50% of transgender people attempt suicide by the time they turn 20 years. Some hardy personalities who are able to overcome their suicidal ideations (and in most cases, are home lessafter being rejected and dejected by the family) face the next set of discriminations - harassment and bullying at schools and workplaces. The use of harsh tags and able to overcome their suicidal ideations (and in most cases, are homelessafter being rejected and dejected by the family) face the next set of discriminations - harassment and bullying at schools and workplaces. The use of harsh tags and labels at schools and social places against the transgender people further negatively affects their self-esteem and confidence [13]. A study by Rankin (2005) on LGBT students' experiences in campus highlights that out of 713 subjects, 11% had been physically assaulted, 36% had experienced harassment, 83% had heard derogatory comments, and 48% had been threatened.

Transphobic attitude or hostility towards transgender people is not just limited to educational institutions or workplaces, rather it transcends to almost every social sphere. Some of the social and religious ideologies, propagating strict conformity to social gender norms, help in transferring these negative beliefs from one generation to the next, which gets manifested in various daily life social situations in the form of transphobic jokes, violence, physical attacks, or bullying. Even hospitals and medical health care centers are insensitive to their needs and health care. As per the reports of a US survey, 26.7% of the respondents reported that they were refused health care because of their transgender identity. Transgender people who experience depression and other psychotic problems seldom visit mental hospitals or clinical psychologists for check-up [14]. As painful as it might be, they get accustomed to these kinds of negative feelings and thoughts as visiting a mental health professional might prove to be more disastrous and disheartening owing to the apathetic attitude of the professionals. The probability of acquiring sexually transmitted disease is higher for transgender people than all adults of reproductive age [15]. But due to lack of adequate trained professionals and doctors, coupled with the prevailing negative prejudices, many of these cases get unnoticed and uncared for.

As the torch bearer of the society, even the mass media doesn't leave any stone unturned in downgrading and diminishing the respect and dignity of the transgender people. The portrayal of transgender people, in most movies and television programmes, can be seen in two polarities - either they are the demonized ruthless antagonist, or are the comic elements with cheap, offensive (and disgusting) jokes aimed at them. In one survey by one US nongovernmental media monitoring organization, GLAAD, on transgender-inclusive television episodes over the past ten years, it has been found that transgender characters were portrayed in a 'victim' role at least 40% of the time; and the most common profession transgender characters were depicted as having that of sex workers. This kind of negative airing and media representation (although intended as comedy and for fun) of transgender people can have at least two dangerous impacts. First, viewers could get the impression that it is normal to bully and mock transgender people which later gets reflected in their own behavior and attitude towards them. Second, the negative portrayal of this community overshadows the success and inspiring stories of many transgender persons who could be represented as role models for others in the society.

Conclusion

Every person has the right to live a life with full dignity and respect. The constitution empowers all and strictly prohibits any action that denies someone of these rights. Discrimination and harassment of transgender people are nothing less than acts of untouchability. As the foremost duty of being humans, it is high time that all the people unite and stand against these transphobic cruelties. It is essential to understand, accept and respect the transgender people by thinking and acting beyond the homophobic prejudices. Sensitization programs can help in creating

awareness among people. Role models and local people can play a big role by participating in the campaigns against transphobic biases and by sharing their ideas or experience, which would encourage rest all to follow the positive ideals and get away with their stereotypes. Necessary facilities at public places like genderneutral bathroom at shopping malls and restaurants would ensure more sensitivity towards the inclusion and acceptance of transgender people. Another vital strategy could be towards the inclusion of transgender people through their greater participation in politics and other decision-making bodies, which would naturally provide them the power and authority to fight for their cause and upliftment of all. Most significantly, effective legal protection against discrimination of transgender people must be implemented and enforced so that harassment and deprivation at hospitals, workplaces, and educational institutions would result in strict punishment for the offender.

Till date in many societies, any discussion on transgender or homosexuality is viewed as a taboo. The general naive idea one carries about transgender people is that they are the ones who beg and variously harangue and harass the passengers inside the trains or railway platforms, or that these are the people responsible for the unpardonable social evil of sex-work in the society. Yes, many transgender people do resort to begging or sex work. But before jumping on to any inference just by overlooking at the numbers, a deeper rational analysis on this problem would tempt us to rethink and reevaluate the root of all these as well as to reconsider the real forces or segments responsible for these. A transgender person who has been subjected to all kinds of rejection - right from the tender childhood years at home, was denied the basic needs for existence, was deprived of being trained with minimum education or work skills, and was forced to live in the filthy slums - could never be a chooser in life. The person is compelled to beg, or do any kind of work by which he/she could earn something.

Because at the end of the day, it is the unavoidable question of one's survival - the

unavoidable question of one's survival - the primary physiological needs of food and water, and the ultimate tryst to fight against society, against all forms of discrimination, against all kinds of inhumane activities targeted at his/ her identity. This is a fight only to live a life, simple yet respectful and with full dignity.

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ORIGINAL ARTICLE

Measuring 'Micro-Attitudes' towards 'Homo-Sexual Orientation and Gender Identities' among University Students in Delhi, India

Maheswar Satpathy

Abstract

Attitudes towards 'Homosexuality' or 'Homosexual Orientation' have been studied extensively in western context. But, it has not been studied as intensively as it should be for understanding the deeper level factors which might be playing a role in the causation of these. Anecdotal evidences, and media representations related to grossly negativistic attitude, prejudice and discrimination, and to certain extent violence towards people displaying homosexual orientation in Indian society exist. This is the first reported study in Indian context related to prejudice in university students related to 'Homosexual Orientation' and 'Gender Identity'. It aimed at studying the micro-attitudes among 165 university students (Mean Age = 22 years) in New Delhi, India. A detailed analysis of types of prejudice, their manifestations, and factors responsible for such a presentation is made. Implications of 'Micro-Attitudes' among student population and how it influences social acceptance of LGBTQIA population is also discussed.

Keywords: Micro-attitudes, prejudice, homosexual orientation, homophobia, India

Introduction

"Suddenly, one day I realized that I have grown up. But what up to? I had never aspired to grow like this, never thought of quenching my thirst for like this...this path which has carried me such a distance on its way has taught me so much.... It has added all the colors to my life, filled every pore of my soul with that enigma which is so sacred and so sweet as the sound of silence...Sometimes I feel I am aberrated, but from what? So, this is my only consolation that I am distinct. I am unique, I am sacred".

This is an account of a distinct so called 'Homosexual' person who describes his life as a process of growth and maturity. So, let us analyze this indecisiveness over attraction or repulsion into the flowing stream of impulses, feelings and emotions, and the object of love circumscribed by standard of society, which has somehow got the label of 'Homosexuality'. So also let us give a glance at the attitudes and prejudices surrounding this distinct search for intimacy and spiritual growth.

Whenever and wherever the topic of love is broached, everybody listens. Some laugh, some cry, some shout for joy, and some are cynical. Love does indeed make the world go' round. But here we promise to tell you a different tale of love. The case where love starts somewhere so subtly in the core of one's heart and dies out because of the societal normative standards. The tiny flower of delicate nature withers away with the hard sunrays; the petals grow pale, gradually dry and then become almost lifeless. This is a process in which one learns to act 'Social', instead of maintaining their idiosyncrasies.

Functionally speaking, homosexuality is the disposition to seek feelings of romantic love and to have

sexual relations with persons of one's own sex in preference to the opposite sex. So, it is the sustained erotic preference for the same sex persons in the presence or absence of a free choice of partner with regard to sex. There are several other attributes which may codetermine erotic attraction towards the other. However, as it appears Homosexuality is much beyond sexual attraction, but can be referred to a range of behaviors and attributes of an individual, which pertain to their identity. It is crucial in dealing with homosexuality to make it clear that a great range of behaviors may be labeled homosexual both in terms of the kinds of behavior as well as the relative frequency of such behaviors (Humphreys, 1970).

It is important to note that the degree of homosexual involvement compared to heterosexual involvement is not an all-or-none phenomenon. The behavioral characteristics of effeminacy and transvestism are not necessarily indicative of homosexuality. Placing a person in a category leads to ascribing to him many characteristics which he may not exhibit in his actual behavior. The effects of being placed in the category may lead to the regularities of behavior, but these regularities are the effects of the categorization rather than the causes of homosexual acts.

This is especially pertinent to note that sexual standards change with time and across context. Sexual practices which may be statistically rare are still in the domain of interpersonal behavior, and if they occur between consenting adults in private then are usually not under the purview of law.

According to Freud, the most striking distinction between the erotic life of antiquity and our own no doubt lies in the fact that the ancient laid the stress upon the instinct itself, whereas we emphasize on object of sex. The people of past glorified the instinct and were prepared on its account to honor even an inferior object; while we despise the instinctual activity itself, and find

excuses for it only in the merit of the object (Freud, 1964, Lessler, 1964; Rappaport & Gill, 1959).

Similarly, the secrecy and the value loaded concept of sexuality in the victorian era has been best described by Marcus (1974): "But the representation in 'My Secret Life' does something which the pornography cannot. It demonstrates how truly, and literally childish such behavior is; it shows us, as nothing else that I know does, the pathos of perversity, how deeply sad, how cheerless, a condemnation it really is. It is more than a condemnation; it is-or was-an imprisonment for life. For if it is bad enough that we are all imprisoned within our own sexuality, how much sadder must it be to be still further confined within this foreshortened, abridged and parodically grotesque version of it."

The concept of secrecy, and a hidden aspect closely intimate with our identities has been made somewhat clearer in the words of Richard Sennet (1977): "Sexuality we imagine defining a large territory of who we are and what we feel...whatever we experience must in some way touch on our sexuality, but sexuality is...we uncover it, we discover it, we come to terms with it, but we do not master it."

The broad understanding of sexuality as private involves other significant dualities, which, while not simple translations of the general division into private and public spheres, do present obvious analogies to it in the minds of those who accept it. Briefly, the sexual sphere is seen as the realm of psychology, while the public sphere is seen as the realm of politics and economics. Marx and Freud are often taken as symbolic of this division. The sexual sphere is considered as the symbolic realm of consumption, the public sphere that of production; the former is sometimes viewed as the site of use value and the latter as that of exchange value. Sexuality is the realm of nature', of the individual, and of biology; the public sphere is the realm of culture, society, and history. Finally, sexuality tends to be identified most closely with the female and the homosexual, while the public sphere is

considered/conceived of as male and heterosexual (Peiss, Simmons & Padgug, 1989).

It is clear that, within certain limits, human beings have no fixed inherited nature. We become humans only in human society. This is true of sexuality in all its forms, from what seems to be the most purely 'Natural' acts of intercourse (Malson, 1972). Sexual reality is variable, and it is so in several senses. The meaning attached to Sexuality changes within individuals, within genders, and within realities of societies, just as it differs from gender to gender, from class to class, and from society to society. (Peiss, Simmons & Padgug, 1989; Dynes & Donaldson, 1992). Even the very meaning and content of sexual arousal varies contextual to these social categories (Davenport, 1977). What Marx suggests for hunger is equally true of the social forms of sexuality: "Hunger is hunger, but the hunger gratified by cooked meat eaten with a knife and fork is a different hunger from that which bolts down raw meat with the aid of hand, nail and tooth" (Marx, 1973).

The forms, content, and context of sexuality always differ. There is no abstract and universal category of the erotic or the sexual universally applicable to all societies. Any view which suggests otherwise is hopelessly mired in one or another form of biologism, and biologism is easily put forth as the basis of normative attitudes towards homosexuality, which if deviated from, may be seen as rendering deviant behavior unhealthy and abnormal. Such views are as unenlightening when dealing with Christian celibacy as when discussing Greek homosexual behavior.

The conversion of acts into personalities, and ultimately into subcultures, cannot be said to be accomplished before at least the 17th century, and as a firm belief and more or less close approximations of reality, the late 19th century. Jeffrey Weeks, in discussing the acts of Henry

VIII of 1533 which first brought sodomy within the preview of statute law, argues that: "The central point was that the law was directed against a series of sexual acts, not a particular type of person. There was no concept of homosexual in law, and homosexuality was regarded not as a particular attribute of a certain type of person but as a potential in all sinful creatures" (Weeks, 1977).

What is prejudice?

Prejudice is basically a social orientation either towards whole groups of people or towards individuals because of their membership in a particular group; prejudice can be both positive as well as negative. The kind of prejudice which besets so many societies in the world today and which so urgently require our understanding is the negative variety: the wary, fearful, suspicious, derogatory, hostile, or ultimately murderous treatment of one group of people by another.

Prejudice may/not be regarded as false or irrational set of beliefs, or faulty generalizations, or is an unwarranted disposition to behave negatively towards another group. So, prejudice will be regarded thus as the holding of derogatory or cognitive beliefs, the expression of negative affect, or the display of hostile or discriminatory behavior towards members of a group. If someone is treated unfairly as a virtue of their group membership, then it not only reflects one's attitudinal (cognitive) components, but also one's emotional latency and behavioral manifestations.

Manifestation of prejudice in various forms towards homosexuality

Homosexuality has become a focus of conflict and struggle in modern society. But it is quite ironical though not surprising that the general views of yesteryear remain somewhat similar to those of today; although many of the half-truths and myths have been dispelled, society at large has changed little in its generally condemnatory attitude to homosexuality.

Tacit acceptance of the system was by no means general and some authorities were quite vociferous in their criticism, especially in respect of the positive partner who was generally considered to be grossly abnormal. He was often believed to be suffering from a hereditary disorder of the anus which had become the primary erotic zone replacing the genitals (Aristotle). Mettler (1947) quoted Aretaeus who stated that "Impotence....and effeminization resulted from excessive sexual indulgence". It is clear from the context that Aretaeus was referring to homosexuality. The silence of Christians over the issue of homosexuality in middle ages mirrors position of the church, which saw it as a sin so horrible that it should not be put into words by Christians. In the early nineteenth century, basic attitudes towards homosexuality had become more fanciful and dramatic by being its association with masturbation and as such were considered as a kind of insanity. Benjamin Rush (Quoted in Cooper, 1974) provides a good example of the ways in which prejudice and bigotry can fashion medical philosophy. In 1830, he said "If one indulged in undue or a promiscuous intercourse with the female sex or in onanism, it produces seminal weakness.... faulty feminization...and death." Indeed, even the noted liberal sexologist Havelock Ellis (1905) said "In the constitutionally disposed, masturbation may lead not only to neurasthenia but to premature ejaculation, impotence, and aversion to coitusthe latter helping to furnish a soil on which the inverted impulse may develop". Krafft-ebbing and Moreau Block were also numbered among those who believed disapprovingly that masturbation may lead to homosexuality.

Dr. Morrison, a London based consultant righteously referred to homosexuality as being of so detestable a character; it is a consolation to know that it is sometimes the consequence of insanity. The man in the street still regards

homosexuality as deviant and somehow wrong. This is largely because he is incapable of fitting it into his concept of normal sexual behavior. Most people fear the unknown, for example, they are generally afraid to die, so the acceptance of homosexuality depends upon the degree of popular education a society caters.

In the past homosexuality has been equated with evil and debauchery. Discrimination against homosexuals is still rampant although such discrimination is now subtler than in past. Often the homosexual person is non-conformative and does not share the modus vivendi. Homosexuality still remains a taboo in our society and conflicts with normal social and cultural values.

To the homosexual, conventional society must appear prejudiced, bigoted and inflexible. It inflicts on the homosexual a sustained trauma which for many is exceedingly difficult to bear. How can we wonder, therefore, that homosexuals become exquisitely sensitive and chary of making normal human relationships for fear of non-acceptance? How can we wonder that other homosexuals compensate for their feelings of inferiority and inadequacy by showing to others a brazen and sometimes highly abrasive front?

Why is it necessary to study prejudice towards homosexuality?

Each individual occupies a unique position in regard to the strength, direction and stability of his sexual behavior and sexual fantasy. The attempt to categorize all humanity into two mutually exclusive and contrasting groups of homosexuals and heterosexuals, a form of them and us, besides being ethically and politically dubious, produces misleading over simplifications. A generation ago, the word homosexuality was best avoided in polite conversation; or referred to in muted terms appropriate to a dreaded and scarcely mentionable disease.

A symbol of taboo

In western, Judea - Christian culture, homosexual behavior has long been considered taboo or sinful. Thus, in the United States and other predominantly Christian cultures, homosexuality has been frowned upon, and homosexuals have been ostracized, being seen as perverted, unnatural, or sick.

Male and female homosexuality in a male dominated society

Throughout the developed world and in most of the underdeveloped countries, the male is dominant and reigns supreme. In western societies, male homosexuality is frequently perceived as a threat to masculinity; the male homosexual is regarded as inferior, and his status approximates to that of a woman.

Persecution of lesbians by society has never been as acute as has been the case for male homosexuals. Lesbians are fewer in number; they are tolerated better; they pose no threat; they are often regarded as eccentrics and objects of pity rather than targets for opprobrium. A male chauvinist and there are still many in society cannot comprehend how a relationship between two women could ever be as satisfying as his own heterosexual indulgences. Thus, the masculine superego is protected, and the conventional wisdom remains content (Loraine, 1974).

Popular misconceptions about homosexuality

Many of the public remain disgusted by the whole concept of homosexuality. To them it is unnatural, unorthodox, and totally incomprehensible. And until quite recently figures in public life have done little to dispel such subjective and inappropriate emotions. Indeed, in Great Britain, less than 5 decades ago, one of the then conservative governments

home secretary, Lord Kilmuir took a certain relish in designating himself the hammer of the homosexuals and was continuously denouncing the evils of sodomite societies and buggery clubs.

Yet now the intransigence for the issue persists for, within the narrow conceptual horizons of conformists, there is no room for the thought that a proportion of men and women actually prefer homosexual to heterosexual relationships and that they will persist in such activities in spite of the most strident calls to sexual orthodoxy.

Indeed, the conventional wisdom of society often seems incapable of judging a man or woman by parameters other than his/her sex life. Nor does it apparently over contemplate the contributions to civilization of avowed homosexuals such as Leonardo da Vinci, Oscar Wilde, John Maynard, Keynes, and Ivor Novello. Another misconception regarding Homosexuality is how it is often confused with pedophilia. Yet there is no objective evidence to suggest that homosexuals are more likely to seduce young children than are heterosexuals.

Many adults are uneasy in the presence of known or obvious homosexuals because they fear they will be seduced. Homosexuality has ever been castigated as a disruptive factor in family life. Yet this whole concept does not stand up to critical examination. For adult's seduction without coercion is rare, and at any rate, homosexuals tend on average to be less violent than their heterosexual counterparts. The populace believes that entertainment world is riddled with homosexuals. However, to equate artistic talents with a propensity for homosexuality is obviously a very dubious procedure. The conventional wisdom of society throws up its hands in horror when marriage between homosexuals is mentioned. As our society tends to hold homosexuality in low esteem, one ought to expect punishments involved in homosexual behavior would outweigh the rewards attached to it.

Furthermore, children growing up with a homosexual parent are statistically unlikely to become homosexual, thus contradictory the notion that homosexual behavior might be learned from others (Green, 1978). There is no relationship between psychological adjustment and sexual preference as it is believed. Bisexuals and homosexuals enjoy the same overall degree of mental and physical health as heterosexuals do. They hold equivalent ranges and types of attitudes about themselves (Feldman, 1997).

Homosexual tragedies

The grievances of homosexuals against the dominant society are many and real. Many a times they are labeled as criminals, weird, sick, pedophiles, and many perceive them as corrupters of young. They suffer from blackmail, extortion without recourse, and violent victimization by thugs in neighborhood. However, Police does not often seem to be cooperative enough, in protecting and defending their interests. They are also being discriminated in every walk of life, including employment (be it military or in civil forms), and are discharged without any reasons in spite of their heroic performances in past. They are also subjected multiple forms of discrimination in employment in terms of increment and promotion.

They are subject to difficulties in finding housing on a par with heterosexuals, to tensions in public accommodations. They are generally subject to slings and arrows of stigma in all its guises, to constant uncertainty about how they will be treated or reacted if they are open to others about their sexual preference; to fear of exposure affecting careers and families. They are subject to all manners of psychological suffering attendant upon real or expected or feared negative reactions from non-homosexuals, to their form of loving and deriving

basic satisfactions than others regard as the birth right of all. They are subject to estrangement, loneliness, isolation, depression, suicidal thoughts or attempts stemming as they it at least, from the desperateness of being a persecuted 'Outsider' in the society in which one lives and wants to live, to repeated assaults on one's dignity as a human being. One's tendency to keep their sexuality hidden and secret might be a preference, or might cause by their day to day experiences which is colored by discrimination, repeated exposure to antihomosexual prejudices. Therefore, selfdisclosure does not seem to be a natural outcome, as it does come with several kinds of outcomes. For the secret deviants, it creates endless strains and difficulties of living in two or more worlds, to the pain of rarely being able to 'be one's own true self'.

For those with this preference as one part of their sexual life and yearning, alongside a differently accented orientation to the opposite sex as well, the pains of living with ambiguity, uncertainty, anxiety and the struggle between the absolutist polar labels, 'Gay' and 'Straight' supported both by the conventional world and the deviant minority subculture of the gays, with neither of these feeling like really fitting or comfortable attire. Contrary to widely prevalent stereotypes, homosexuals can/are to be seen in all kinds of occupations, at all class levels, in all kinds of physique and appearances; they rarely molest students or pupils, don't make passes at coworker cops or fireman, don't infect the military, rarely proselytize.

Homosexuality as abnormality

Homosexuality has been perceived as abnormal from many viewpoints: Inversion of the Judeo-Christian religious tradition, as well as in other religious views, it is regarded as a violation of supernaturally derived moral codes. In the laws of the USA and many other modern nations, specific homosexual acts are crimes prosecutable by the law. It is regarded as

'Deviant' in opposition to commonly held social mores in many modern societies. Some view it as opposed to evolutionary dictates requiring heterosexuality as necessary for the survival of the species.

Some simply see it as statistical anomaly; it is practiced by only a small minority of the population. Still another view sees it as abnormal in the sense of opposed to standards of psychological health i.e. as 'Sick'. Homosexuality as a crime is the negative evaluation of homosexuality derived from the Judeo-Christian religious tradition translated into the laws of various countries and states. These are clear cases of religious mores relating to emotionally held views of the perniciousness of 'Unnatural' sexual acts, without any foundation indemonstrable damage to other persons, at least in the case of consensual adult homosexual acts, or to society in general.

Homosexual behavior is seen as deviant. This is a common rubric in sociological discussion of homosexual behavior: it is deviant in the sense and to the extent that the behavior in question violates strongly held mores of the population in which this occurs. So, these terms are formed by anti-homosexuals in reference to a society. Thus, the sociologist who deals with it, they go along with popular prejudices to the effect that homosexuality is wrong, immoral, unnatural, against the interest of society, and the like.

Homosexuality as a sickness

Homosexuality has been historically considered as abnormal, and a form of manifesting psychopathology, to an extent that modern psychiatry used to treat homosexuality as a psychological disorder until 2000. Psychoanalysts have done the most harm in vilifying and derogating gays as 'Sick'. However, there is no intrinsic connection between homosexual preference and psychological sickness or impairment.

Reading the medical and psychological literature on homosexuality written before 1970 can be a jarring experience. Relevant articles included 'Effeminate homosexuality: a disease of childhood' and 'On the cure of Homosexuality. During the first half of the 20th century, those who didn't believe that homosexual people were mentally ill and in need of treatment tended to believe that they were criminals in need of incarceration (Bayer, 1981). British and American culture had long taken punitive approaches to homosexual behavior.

Although homosexuals and heterosexual subjects typically don't differ in psychological adjustment, there is some evidence that homosexual people do have higher rates of alcoholism and depression (Saghir and Robbins, 1973). However, it is likely that these elevated rates of alcoholism and depression are a consequence of the prejudice and stigmatization that they often still experience rather than being a consequence of having a homosexual orientation per se.

The word 'Pathological' is applicable where it is the exclusive or strongly preferential sexual object choice, i.e. where the person must have a sexual partner of the same sex, or such partner is strongly preferred to one of opposite sex. The gender object choice may be the only way in which this individual varies from what psychoanalysis regards as optimal psychological functioning, from optimal psychic health in the psychoanalytic sense of the term. Stoller, a psychoanalyst has made the thing very clear that though homosexuality itself shouldn't be considered a separate clinical entity, but still it is a condition combining all kinds of disordered persons engaged in. In his own words: "There is homosexual behavior; it is varied. People with all sorts of personality types prefer homosexuality as their sexual practice; people without overt neurotic symptomatology, schizophrenics, obsessive-compulsives, alcoholics, people with other perversions-almost every category in the nomenclature" (Stoller, 1975).

The issue of gay marriage

There is a heavy controversy regarding the fragility and short-livedness of gay marriages by the heterosexual commentators. There is also general lack of structural or cultural support from society at large for any kind of enduring homosexual relationship. The hostility to malemale coupling, particularly in the form of cohabitation, seems to be greater than that given to female-female couplings. We find a lack of social structural support i.e. there is no established social structure for married couple for homosexuals, or any related structures, such as definite in-law relationship and the lack of cultural support such as exists in abundance for heterosexual marriage.

Margaret Mead's studies on homosexuality in the Manus tribes of New Guinea found a prejudicial view: "homosexuality occurs in both sexes, but rarely. Natives recognize, and take only a laughing count of it, if it occurs between unmarried boys, sometimes exploited publicly in the boy's houses. Sodomy is the only form.... Homosexual relations between women are rare.... Boys away from home, on plantation work, are likely to turn to homosexuality" (Mead, 1930, 2001:102). This shows how a structure or conception is fitted in the minds of people regarding homosexuality. Robert Suggs points out that homosexual behavior is strongly disapproved, particularly between two adult males. There is a strongly stigmatized label, 'Mahu' for any male who has more than fleeting sexual contact with other males. There is a very small number of such males and still smaller number of male homosexual transvestites who do feminine domestic chores (Suggs, 1966).

The Homophobias

In spite of these scientific data, many heterosexuals (especially males) still harbor negative feelings about homosexuality. This phenomenon is called homophobia. Some of this fear, disgust, and hatred are attributable to the incorrect belief that many homosexuals are child-molesters. In fact, 90% of the pedophiles are heterosexuals. Another source of homophobia is the fear of Acquired Immuno-Deficiency Syndrome (AIDS). This deadly sexually transmitted disease is more easily transmitted through anal intercourse than through vaginal intercourse and thus has spread more rapidly among homosexuals than heterosexual.

A homosexual's self-identification however means nothing to a homophobe. Homophobia is an assertion of control over the category 'Homosexual'. Homophobes try to seize the power of definition. The attitudinal expression is a blank-full of blank anger or discomfort, or a tautological spinning of the definitional wheels. What is directed at homosexuals is not a standard, stereotyping adjective but the charge 'he or she is homosexual'. The category itself-and whatever it means to the individual using it-is the main accusation: "faggot!", "dyke!" is supposed to be pejorative (Young-Bruehl, 1996, 2000).

Homophobia is mainly a category accusation because it is primarily directed at acts and what acts represent in fantasy, and only secondarily at the people who commit those acts, even though this century has given those people a distinct name. This is the one ideological prejudice that aims at doing, not being. The Christian homophobic fundamentalists currently rail against the 'Homosexual lifestyle', which they held to be immoral and unnatural and they are willing to tolerate homosexuals as long as the homosexuals don't declare themselves or engage in homosexual acts. In other words, homophobes hate acts that they themselves can and usually do engage in, so, to repudiate these acts they must assign them clearly to another category of people. The category is all that stands between them and those acts.

There are many psychologists who view it as a male's denigration of the femaleness and femininity in other men and in himself. Richard Isay (1989) has even argued that fear of homosexuality per se is secondary in homophobic men to their fear and hatred of what they perceive as feminine in other men and in themselves (Young-Bruehl,1996, 2000). In some aspects homosexuality can be viewed as a minority problem; but this is largely because an ignorant majority has historically reacted towards it with prejudice heavily tinged with emotions (and perhaps more heavily so than in relation to other questions, because of the social components), seeking to exorcise the strange and the different which the more extreme regard with repugnance.

Dispelling some myths

The notion that most male homosexuals behave effeminately and most female homosexuals (lesbians) are aggressively masculine dies hard in the absence of any substantial and significant proof. Many male homosexuals have typically masculine interests, attitudes and mannerisms and like to assert their maleness with clothes that accentuate their masculine physique. They enjoy a firmly masculine self-image or 'Gender identity' dislike being thought effeminate because of their homosexual inclination and would be horrified to be afford the possibility of surgical interference to alter the sex of their genitals.

The prejudice is manifested in several forms and one of them is expressed through the laws passed by the community or the given society. In addition to their felony laws, most of the states also have a multiplicity of misdemeanor statutes against 'Outrageous conduct'. 'Lewd behavior', 'Vagrancy' and the like which they use to suppress homosexual behavior or solicitation.

From the ocean of negative feelings towards feelings of people towards those who assert and proclaim their freedom, independence and nonconformity these are few of them. In order to make more vivid and clearer the concept of

prejudice of people towards homosexuality and homosexuals, a small study was conducted. The study is only an assessment of the value judgments of the people and the opinion sorting.

Objectives of the study

- To understand prejudice among University students for people with homosexual orientation.
- To explore reasons, find the origin and the prevalence of these Micro-attitudes.
- To identify the nature of these Micro-attitudes, resulting in stronger prejudice.

Method of study

The research study adopted a survey technique for data collection, besides Focused Group Discussions (FGDs).

Sampling: The sample size was 165 males. It was conducted using a 'Micro-attitude questionnaire'. The respondents were all post-graduate students of a reputed University in Delhi, India.

Tools and Materials

The total check-list contains 50 questions (items) referring to 10 broad dimensions measuring micro-attitudes, stereotypes and prejudice. The broad dimensions included ethical evaluation and value attachment; destructive and disruptive aspects for the individual and society; dispositional aspects; deficiency factors; general attitudes towards males; attitude toward homosexual life pattern; etiological factors; experiential factors; expectations from society; behavioral expectation from a Self-identified Homosexual individual. Then under each dimension the group data was measured. Then degrees of attitude in group were assessed. The mode of answering (response mode) was bimodal i.e. ves/no.

Discussion

From the study, it was found that each person has a differential viewpoint regarding the issue of homosexuality. The attitude can be first assessed from the item aspect. Then the dimension discussion will reveal the group's attitude toward that dimension in the test.

Under dimension one, i.e. ethical evaluation and value attachment 40.8% people are found to have negative attitudes towards homosexuality, basically due to the ethical values attached with it. This shows the effects of moral constraints and value indoctrination and its strength. Under the second dimension, i.e. the destructive and disruptive aspect for the individual and the society, 43.3% people reported having prejudiced viewpoints which is due to their beliefs in the ability of homosexuality to create adverse effects. Under dimension number three, i.e. dispositional aspects, 28 % of the sample reported that they believe that some innate and inherent factors in homosexuals cause them to engage in this abnormal activity.

Under the fourth dimension, i.e. deficiency factors, 68 % of the sample reported having a viewpoint that some of the deficiencies in homosexual people make them to resort to homosexual behavior. Under the fifth dimension, i.e. general attitudes toward males, 38 % of the sample considered that the experience with homosexual people makes them to generalize that feeling in some contexts. They have a slightly average attitude towards males in general. Under the sixth dimension, i.e. attitude towards homosexual life pattern, 41 % of the sample reported having negative attitude towards the life patterns and living styles and the way of coping with the demands of life by homosexuals.

Under the seventh dimension, i.e. etiological factors, 69 % people have the idea that homosexuality results from inborn, innate subjective factors. Under the eighth dimension,

i.e. experiential factors, 63 % of the sample reported that they have no knowledge of any homosexual person and they never want to acknowledge the presence of homosexuality nor homosexuals. Under the ninth dimension, i.e. expectation from society, 67% of the sample reported that homosexuals never deserve any kind of sympathy or favorableness from the society. Under the tenth dimension, i.e. behavioral expectation from an individual towards homosexuality 68 % of the sample reported having a very negative attitude towards cohabiting, sharing, and living with a homosexual individual.

Conclusion

This phase of the study can unearth the attitude which is prevalent towards the differential orientation by the educated youths. From this study, we can infer that even among the educated youths, the preparedness has not come to accept a liberal, non-confirmative, alternative and substitutive orientation in the search of love, intimacy and spiritual growth. By looking at a long history of widely abhorred kind and uncertain future we can just pass on the message that the way for getting out of the closed box or confined arena, 'A configured paradigm' is not paved by anyone. This is mainly due to the contentment with the conservative mode of living and lack of desire and curiosity to experiment upon, to explore the sundry aspects of life which has never been traded before, the path on which the persons have never taken any strong initiative to go by. But looking at the categorization of homosexuals into a kind of alien being, and a defiled creature is ironical and so also dubious. The stigmatization towards a minority has always been a problem on the face of humanity. So, what is needed is to create at least a feeling of sympathy, amity and a respect for each other's individuality and distinct proclivities and colorful idiosyncrasies. So, the situation now calls for an attitude which is as transparent as truth and as liberal as life. The philosophy which is to be followed is 'Live and let live'.

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Gay Marriage and Its Impact on LGBTQI Rights in the UK and the Western World

Niranjan Kamatkar

As one of the first same-sex couples to get married on 29th March 2014 in the UK, we were acutely aware of two key factors: We felt privileged to exercise our right, which the law allowed us, after years of struggle to win the fight for equality. Secondly, millions of LGBTQI (Lesbian, Gay, Bisexual, Trans, Queer and Intersex) people, who had preceded us over the several centuries, were a part of this long journey that has brought us here. It was a momentous milestone in our lives. Of course, it does not mean that the fight for achieving equality for LGBTQI people has to slow down, as there are a number of hurdles and discriminations that still remain unconquered, in the battle for social and cultural equality in the Western world.

When I talk about the struggle over the several centuries, I also include the great efforts for survival and daily struggles that our predecessors have had to face. Due to lack of proper archiving and research material, several of them continue to remain unknown to us and to the entire world. We have to admit that they must have lived under huge pressures as enormously marginalized sexual and gender minorities in the largely oppressive world. Several must have lived to survive and abided by or conformed to the norms defined by 'Society' of the day, unable to live their lives as they would have liked to.

It must be noted that the UK (England and Wales) was not one of the first countries in the world to lift sanctions on same-sex mariage and allowing the couples to get married in a civil ceremony. The Netherlands was the first to allow couples to get married as long ago as 2001. Progress has been patchy for gay and /or LGBTQI rights across different political boundaries. A number of countries including (and in some cases part of) Argentina, Brazil, Colombia, Mexico, New Zealand, Portugal, South Africa, Spain, and Uruguay, now allow same sex marriages. A few more countries allow same-sex civil unions or same-sex partnerships, which provides legal sanction to the union, of varying degrees. Wikipedia provides largely correct picture of this, on a regularly basis.

In some ways, this is not just a matter of allowing the right to use the word 'Marriage' for acceptance of a union of two people of the same gender. But in many ways it is a fight over using whole set of vocabulary that's associated with equal right movement for LGBTQI people. Hence, it may not be entirely out of place to mention that legal protections won for LGBTQI people in different countries of the world include a major milestone in winning the same-sex marriage rights. In many ways this is also about greater social acceptance process for the LGBTQI people in the world, particularly in the West.

In today's 'Post-truth' and 'Post-Brexit' world, there is still a lack of easy acceptance of LGBTQI diversity in the West, unless you make a big noise. Up until now, only 4 LGBT leaders have been OUT and proud presidents or prime ministers in the West. Here is a recent (White House in US, May 2017) example of sparking fierce outrage after omitting to mention the name of the husband of Luxembourg's gay Prime Minister Xavier Bettel. It was an official Facebook photo caption of the spouses of G7 nations' leaders gathering. This omission says a lot about challenges of acceptance from the top.

At a grass roots level, I personally highlight a number of cases and stories of discrimination on a daily basis via my social media channels. A number of cases or stories of mostly law abiding LGBTQI citizens, fall in the area of reiterating our legally protected rights in the global North countries.others often fall in the grey areas since a number of workplaces, cultural, sports, media and educational institutes still haven't offered clear statutory protections to LGBTQI individuals and their loved ones in several countries. This might be also largely true in the global South context, but also, more specifically true in some Eastern European countries, some US states, and countries like South Africa which has accepted gay marriage on its statute books.

Why should the 'patch progress' matter to us here in London? London has been a melting pot of global citizens, either on a visit or living here. The 2011 census shows, 36.7% of London's 8.6 million population was foreign born (including 24.5% born in countries outside Europe). In short, as a 2014 research figure shows now nearly 3,082,000 residents are born abroad. Some people are inclined to bring along their prejudices and discriminatory attitudes towards LGBTQI people along with their much welcomed cultural heritage and rich languages that has made this city a truly global capital of culture from beginning of the 21st century.

Second part of the argument is connected to internalized homophobia, biphobia and transphobia. These phobias will take some time to tackle, since broader and wider legal protection for lesbian and gay people (to some degree the protections extend to bi and trans people - but we are still not there as far as full equality is concerned) are achieved as recently as 2013. These are still recent or new developments for a number of elderly people from establishment backgrounds. Their involvement in promoting LGBTQI rights is a pivotal point for delivering institutional change over a sustained period. Due to legal protection, the discrimination now seems to have gone

underground. It is far more difficult to challenge and tackle covert discrimination. Sometimes, I notice that some people have learnt well to bypass addressing equality and cultural as well as social diversity in its true spirit, once they have dealt with it in a tokenistic way.

It is logical to think, that this is where the battle lines for the next stages of progress will be drawn. What is most pertinent is visibility of diversity of LGBTQI people in all walks of life from our elected chambers to businesses (small and big), to the educational and cultural institutions, and on our streets. It is imperative to have a real and sustained visibility of older and younger LGBTQI people from different religious backgrounds, including no religion, and most importantly LGBTQI people from Black, Asian, Minority Ethnic (BAME) backgrounds. It's equally important to emphasize that LGBTQI people can come from diverse backgrounds: economically rich or poor, urban or rural and educated or illiterate. The stereotypes around their existence and professions or their likes and dislikes are far too many to list here but they can be as false as any stereotyping goes.

There is a growing visibility of same-sex couples' presence on the streets of London every day. The family units with their (surrogate or biological) children making the family portraits complete on the day out. You can see single parents with their children and a few transparents with children. All help to reinforce the notion of diverse families and offer greater public visibility. These snap-shots provide answers to the criticism from LGBTQI communities (note the plural, since there is no single cohesive community), that we are likely to follow the hetero-normative patterns of societal conformity. It might be also appropriate to note, that each family unit can be as diverse as each individual's identity/identities. Stereotyping a perception from some media stories might be a different equation, when we look closely in each unit with greater fascination on how they differ in from say a traditional or conventional binary (male and female) family unit brining up their children.

I am happy to say that, there is now a growing awareness in the UK media world of no-binary (not identifying as traditional 'male' or 'female') identities recognition. A recognition that covers a widest possible spectrum of identities in each person - not necessarily conforming to gender specific or sexual orientation specific roles and behaviors. There is still a long way to go before we get wider acceptance to gender-fluid or genderless or A-gender persons across the world, but the process is on its way.

I believe there is also a little more awareness. than before, amongst global academic circles, of the traditional and historic trans, gender fluid or third gender/sex e.g.South Asian socioreligious and economic identities, or constructs such as Hijras / Hijada / Kothis / Giryas (not very well-known) Khusaraa/Ali (again, not as much well-known) and Far East Asian identities such as Bakla, etc. I also accede that the levels of awareness that is needed, is still not enough, however at least there seems to be an interest in academic and research circuits to know more. Some have heard or know the terms and, more importantly, are now aware, to some further degree, of the terms from the diversity vocabulary.

However, we still lack allies support networks and particularly greater support from, visibly loud and proud BAME community leaders and allies. BAME business community leaders are conspicuous by their absence in openly and solidly supporting the LGBTQI people from BAME communities. Their substantial financial and corporate powers count in the global cities like London.

It is not to say, that mainstream (white) LGBTQI communities are not aware of and concerned of the plight of LGBTQI people in the global South. Majority of them are greatly aware of the countries that criminalize homosexuality. Where trans and diverse sexual or gender minorities can face a huge stigma in the societies. A number of commonwealth countries inherited

these suffocating and inhuman laws as part of legacy from the erstwhile British empire. Most haven't even tried to repeal them. In some cases, this persecution is carried on with increasingly resurgent effect to ensure homosexuality remains a criminal offence. In many ways, we cannot hold on to a blame culture. Instead we need to work together on finding solutions that can offer legal protections for people. It is a fundamental human right of everyone to live openly and safely as who they are. Contrastingly, there are a number of opinion columns and news stories cover the topics such as, 'racism still being rife in the LGBTQI communities in the West'. This also means people believing in a process that accepts our own shortcomings and working on removing them.

Informed people in the West are now more concerned about equality rights struggles in the other parts of the world. They are keen to support those as members of our fellow communities. Again, Wikipedia and Pew research institute provide us with mostly reliable research and upto-date figures of these struggles in various places wherever homophobia, biphobia and transphobia exists today. We know and have learned that these struggles matter to an individual's life, which can be a life-or-death fight or a basic survival on a daily basis. A current case of Chechen police (or the state) attempting to purge gay and bisexual men from society, met with a rapid response from the large parts of the world - condemning the acts and offering support to those men who suffered.

I return back to our own story again, I have borrowed sections from an article, Subodh, my husband and I wrote for the Pinknews (Europe's largest LGBTQI news portal) on the eve of our official wedding in March 2014 - since some points still make sense. Having supported the Same-Sex marriage bill in the UK, it was only natural that we wanted to opt for marrying on the first day. 22 years ago we exchanged our 'marital vows' on a beautiful, quiet beach of Nargol, on border of Indian states of Gujarat and

Maharashtra — where our parents originally came from. Both of us are of Indian origin and wanted to celebrate our union in presence of senior family members, work colleagues, friends, straight and gay couples, and people who have been part of our lives for over the last 22 years and more.

We don't suppose, we can ever fully answer the question - 'why was it important for us to get married?' As both of us were on the verge of facing our 50s, marriage may not seem like a priority in our lives. In the last 22 years, we made conscious efforts to highlight our relationship and sometimes received recognition, surprisingly from the most unexpected sources. That does not mean we did not have our fair share of challenges. But we hope that the toughest ones seem to be behind us as we would like to believe that the community, society, friends, majority of family members have accepted us for who we are, however long and difficult the process might have been for some of them.

To many, it may look like an entirely naïve belief that as a couple, we can talk about positive developments from a safe distance. However, having worked on culturally sensitive sexuality related issues and projects across South Asia, East European countries and for a few international development agencies in the past, we recognize change can happen when you get

the strategies right. Change is possible when we work effectively on the strategies that deliver it. The strategies should not solely depend upon quiet diplomacy. LGBTQI people across the world still continue to fall victims to horrible hate crimes on a daily basis. Each of us needs to raise our voice against a culture of social injustice.

When we first met in Mumbai (Bombay) over 20 years ago, at the first South Asian Gay conference, we could not have envisaged the progress achieved by LGBTQI people on several fronts. Then in our late twenties, we could have only dreamt of it. We didn't really know then that it takes a lot to learn, listen, build upon strengths and reduce weaknesses. There is still a need to work together with diverse people at the grassroots and develop new skills to be really efficient change makers.

It is my aspiration to see that LGBTQI equality is achieved in all or most of the countries in our lifetime. It is feasible that this 'dream' can be a reality - if we build upon the political, social and capacity building strategies and drive, along with a smart prioritization process. We also need to focus more on 'right kind' of diverse, collective LGBTQI leadership who will this outcome.

NOW is the time to shift to the full cultural and full legal acceptance in the diverse world that we live, and to ensure 'Equality in All Walks of Life'.

Health of LGBT People in Nigeria Exploring the Intersectionality of Culture, Religion and Laws

Sekoni AO

Abstract

Multiple forms of discrimination creates a system of oppression that adversely affects the life experiences of the burden bearers. Multiple group identities exposes individuals to social oppression and exclusion at different levels. The interaction and overlapping of systemic injustice at multiple levels creates a hostile environment that becomes a psychological stressor. Marginalised social identities can seek redress under the law but for criminalised identities this is not an option. Such laws therefore create a platform that justifies and reinforces the social oppression. The Nigerian law that criminalises LGBT identity as well as 'people who support them' effectively targets family members, friends and colleagues of people who are suspected to be/identifies as LGBT people. These people are therefore at risk of social exclusion and regarded as criminals by association. By criminalising family members and friends this law robs LGBT people of social support and introduces multiple layers of discrimination and oppression against LGBT people in Nigeria. This is partly responsible for shaping the expression of other forms of social oppression experienced by LGBT people in Nigeria.

Key Words: LGBT, Nigeria, culture, religion, health, laws

Introduction

Discrimination and criminalising laws are barriers which have excluded lesbians, gay, bisexual and transgender (LGBT) people from being recognised as equal citizens within their own countries [1]. Social exclusion places individuals in a disadvantaged position among their peers, within families and communities thereby preventing them from participating in activities that will lead to development, progress and empowerment. It also leads to inability to access resources and opportunities in life. Socially excluded people are thereby segregated to the fringe of society and become invisible to the public and healthcare system [2].

In contemporary Nigeria, gay is a popular derogatory word commonly used as a noun to refer to people who engage in same sex sexual behaviour. Lesbians are not recognised by any word, but come under the umbrella homosexual. People who assume alternative gender identity and expression are also commonly referred to as gay/homosexual. Being identified as a gay man/ woman or homosexual can result in arrest, imprisonment and physical violence [3]. The physical violence is sometimes extended to organizations providing health related services to LGBT people [4].

LGBT, Nigeria, culture, religion, health, laws

Nigeria does not recognise same sex marriages or civil union for same sex couples. Shortly after he assumed office in July 2015, the current president of Nigeria, President Mohammadu Buhari publicly

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reiterated his support for the Same Sex Marriage Prohibition Law passed by his predecessor President Goodluck Jonathan in January 2014 [3]. The law states that individuals convicted for contracting same sex marriage are liable to 14 years imprisonment. People who registers, operates or participates in gay clubs/societies/organizations and their supporters are liable to 10 years of imprisonment. Thereby effectively putting an end to efforts at getting the law reversed during his tenure [5]. The country has been ranked as one of the highly intolerant African countries towards LGBT people because of this law which violates the African Charter on Human and Peoples' Rights adopted by the African heads of states and African governments in June 1981 in Nairobi, Kenya [6,7].

The law was first proposed as the Same Sex Marriage Prohibition Act by the Executive Council in 2006. Three years later during a public discussion of the act on the floor of the National Assembly, gay activists came out to speak against the proposed law which generated negative public response and increased public support for the law [8,9]. Attributing the political climate solely to this law alone will however be misleading because Nigeria's criminal code remains unchanged since the colonial era with regards to imprisonment for homosexual behaviour [10].

The constitution developed in 1999 for the federal republic of Nigeria post-independence retained various sections of the criminal and penal code inherited from the British [10,11]. Over the years, some sections have been amended but not chapter 21, section 214 which stipulates that any person having carnal knowledge of another person against the order of nature or allows a male person to have carnal knowledge of him or her against the order of nature is liable to imprisonment for 7 years [10]. The constitution in its current form is at variance with the laws in England, Wales, Scotland and Northern Ireland which decriminalized same

sex sexual behaviour in 1967,1981 and 1982 respectively [12].

Apart from the variety of laws, one of the barriers to the inclusiveness of LGBT people in Africa and Nigeria is religion, which is a central part of African culture [13]. The way of life of the average African person is mostly influenced by the teachings of one of the two dominant religions; Islam and Christianity. Both religions in Africa very strongly oppose same-sex sexual behaviour and the leaders have been quick to lend support for anti-same sex laws [14]. Religious organizations and members of their congregations in Nigeria have used the law in preaching from time to time [15,16]. The Sharia law operated by some states in the northern part of Nigeria criminalises homosexual practice with severe sentences. LGBT people living in Nigeria therefore occupy a unique position of being criminalised by three distinct laws, all the religions and the culture of the three main ethnic groups in the country.

The Same Sex Marriage Prohibition Act was hailed by religious leaders in the country. The Nigerian government in power at the time of the introduction of the law benefitted from the positive publicity generated within the country with improved rating of their performance by the populace [6,17]. This is however contrary to reactions from the international community. The law was widely condemned by Western leaders. The condemnation was subsequently followed by the threat of economic sanctions including withdrawal of funding for donor funded programs against the country if the law is implemented [18].

This sequence of events made Nigerians suspicious that there was a hidden Western agenda. This was a tactical error that resulted in greater acceptance of the law by Nigerians as shown by the opinion polls.

Subsequent opinion poll however showed a decline in general support for the law from 92% to 87% in 2015 [19]. This result has been

disputed by people who claimed the study was biased because the researchers were from LGBT organizations. In the absence of scientific studies, people have had to rely on information from key interviews and opinion polls to make decisions about LGBT related issues in Nigeria. Three years has gone since the law was passed, reports of persecution, arrest or violence against LGBT people have dwindled but the law remains in place. A state of uneasy calm exists where LGBT people are constantly on edge and critical issues pertaining to the health of LGBT people in the mainstream health sector remains largely unaddressed.

Impact on Health

The unfavourable social environment created by the current synergy between the laws, religion and culture will inevitably negatively impact on the physical health and social well-being of LGBT people living in Nigeria leading to health disparity [20]. The immediate effect of the law on utilization of HIV related services by HIV positive MSM has since been published [21]. There is death of evidence on the health problems of LGBT people in Nigeria, almost all the available studies was conducted among the MSM community and they revolve around HIV and STI. This has hampered generation of evidence based recommendations for tackling the social environment of LGBT people in Nigeria.

For young LGBT people the challenge is compounded by their dependent status on parental support for feeding, accommodation and schooling. To continue to enjoy this support, they are expected to conform strictly to the societal norms with regards to sexual orientation and gender identity. Having to lead a double live places a lot of stress on these young people which if not properly managed may lead to anxiety and depression. Nigeria is lagging behind in provision of sexual and reproductive health (SRH) services to young people [22]. Culture, religion and country level policies

influence provision and utilization of SRH services. The 2013 National Demographic and Health Survey (NDHS) shows that majority of adults in Nigeria oppose teaching adolescents about condoms to prevent HIV infection. Condom use at last sex was low among sexually active adolescents. Testing for HIV was a rare occurrence while self-reported symptoms of STI was high [23]. This has had an adverse effect on the health of the estimated seventy million young people but is expected to have an even bigger impact on LGBT young people.

Globally the health of LGBT people has been identified as an area demanding urgent research and intervention. LGBT health disparities resulting from lack of access and poor utilization of health services exist in literature [24]. Achieving good health and wellbeing will remain elusive as long as LGBT people are not part of the mainstream in societies. The slogan 'leaving no-one behind' emphasizes the United Nations commitment to ensuring that all people from all segments of society are entitled to good health [25]. However there is a recognition that tackling the social environment needs local input and locally designed intervention based on data from local research.

Research on the health of LGBT people in Nigeria has focused primarily on HIV and other sexually transmitted infections [21,26-30]. Even though a high burden of disease exists, as established by available data, providing health services to sexual minority groups remains a huge challenge [31,32]. In a country where HIV positive people experience stigma as a result of their HIV status it becomes a double jeopardy for an individual to be an HIV positive LGBT person.

Conclusion

To secure an enduring social environment, recognition of LGBT rights was preceded by gay rights activism in most countries. However, in Nigeria, gay activism appears not to be very

successful at changing criminalising laws at this point in time. Therefore, in trying to propose an agenda for inclusiveness of LGBT people in contemporary Nigeria, the perception of this researcher is that, a health-based approach rather than a legislative measure to repeal the law will be extremely beneficial in tackling the existing health disparity. Generating an action plan for providing SRH services based on global best practices will ensure that the rights of all individuals are protected. At the same time this shifts the conversation from religion and culture to promoting, maintaining and restoring the health and wellbeing of all people from all segments of the society.

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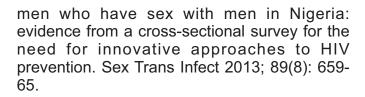
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Mental Health Issues in Transgender Population: A Biopsychosocial Perspective

Anubhuti Jain

If they see
breasts and long hair coming
they call it a woman,
if beard and whiskers
they call it a man;
but, look, the Self that hovers in between
is neither man nor woman.

Devara Dasimaiya (Indian devotional saint, tenth century C.E.)

Abstract

Transgender is an inclusive term, an umbrella concept that includes all people who are gender variant. When issues related to transgenderism are raised socially, various reactions, usually negative crop up. Because transgenderism is viewed as pathology, such people often face several challenges and are also likely to suffer from various mental health issues. These issues and challenges faced by them are often the sequelae of the various physical, psychological and social factors. There is an urgent need to talk about and raise awareness regarding the LGBTQ community so as to help them gain the status in society that they much desire.

Key words: Transgender, mental health, biopsychosocial, awareness

Introduction

The contemporary society is grappling with understanding the issues related to gender and cross gender transgression. Both, professionals and laypeople are impacted alike by the shifting concepts of gender. The subject of transgenderism is one that produces myriad reactions so much so that many people find themselves confused and even uncomfortable in dealing with the idea of transsexualism. Transgendered is an inclusive term, an umbrella concept that includes all people who are gender variant. According to Pfäefflin and Coleman (1997), "Transgender is a new term which transcends the restricting and extant categories of gender identity, is more neutral regarding etiology and encompasses the vast complexity of gender manifestations and identities."

When issues related to transgenderism are raised socially, conversation suddenly changes even though people pose themselves to be not judgmental. The difficulties faced by LGBTQ people like social phobia, depression, anxiety, suicidality, acting out, etc. might be symptoms and sequelae of their social denigration rather than a proof of their gender-related mental illness because transgenderism is often viewed as a pathology in the society. The stigma and shame that intersexed people face, might be more related to the secrecy surrounding their medical conditions and the shame of not just being different but being wrong and needing to be fixed.

Mental health issues in transgender population

The reports from National Institute on Mental Health, America suggest that an estimated 26% of adults, 18 years and older suffer from mental illness in a given year. People belonging to the LGBTQ community also experience mental illnesses just like everyone else. First of all, however, it must be remembered that being gay, lesbian, bisexual, or transgender is not a mental illness in and of itself. By merely identifying themselves as LGBTQ doesn't automatically mean that such people will experience a mental

illness. However, LGBTQ people may face unique risks to their mental health and well-being.

As per the largest survey done till date on transgenders, the US Transgender Survey Report (2015) covering all the fifty states, 10% of transgender people experience violence from some family member; 54%, 24% and 13% of transgender people are likely to be victims of verbal harassment, physical attacks and sexual assault respectively in school environments; 39% of the respondents in the survey experienced serious psychological distress and 40% of them had attempted suicide.

According to National Alliance on Mental Illness (NAMI)-

- It is three times more likely that individuals belonging to the LGBTQ community will experience a mental health condition such as major depression, generalized anxiety disorder or post traumatic stress disorder as compared to others. It may be because they are afraid of coming out in the public, as they feel they will be discriminated against, because of their different sexual orientation and gender identities.
- Also, the LGBTQ community is at a high risk for committing suicide because they face harassment, mental health conditions and substance abuse and lack peer support. For LGBTQ people aged 10-24 years of age, sucide is one of the leading causes of death.
- Approximately 38-65% of transgender individuals experience suicidal ideation. Also, youth belonging to the LGBTQ community are four times more likely to attempt suicide, have suicidal thoughts or engage in activities like self-harm as compared to straight people.
- Family support is of vital importance in

decreasing the likelihood of suicide. Transgender individuals who faced rejection after revealing their identities to their families were more than eight times more likely to have made a suicide attempt in comparison to those who were accepted by their families after revealing their sexual orientation.

- The usage rates for substances like drugs, alcohol and tobacco are also reported to be higher in people belonging to the LGBTQ community as compared to that of straight people. Factors like prejudice, discrimination, lack of cultural competency in the health care system and lack of peer support may often be responsible for this difference.
- When compared to the general population, an estimated 20-30% of LGBTQ people abuse substances and 25% of LGBTQ people abuse alcohol.

Mustanski et al (2010), examined associations of race/ethnicity, gender, and sexual orientation with mental disorders in a sample of 246 lesbian, gay, bisexual, and transgender (LGBT) youths. One third of participants met criteria for atleast one mental disorder, 17% for conduct disorder. 15% for major depression, and 9% for posttraumatic stress disorder. Anorexia and bulimia were found to be rare. About 31% had attempted suicide. Few racial/ethnic and gender differences were also found to be statistically significant. Youth belonging to the LGBT community had higher prevalence of mental disorder than youths in national samples. Suicides behaviors of LGBT community were comparable to representative youth samples of the same geographic area.

From the above data, it goes without doubt that without good mental health one cannot be healthy. It is but natural for all individuals to experience emotional ups and downs from time to time caused by events in their lives. However, mental health conditions go beyond these emotional reactions to specific situations and

cause changes in how an individual thinks and feels and in his/her mood. The mental health issues encountered by the lesbian, gay, bisexual, transgender, queer and questioning (LGBTQ) community is similar to the rest of the population. Infact, they may experience more negative mental health outcomes due to prejudice and other biases they go through.

Understanding the mental health issues as per the bio-psycho-social model

Until the late 1970s, transsexualism was viewed as a sin, a crime and a sickness. Early health research on LGBTQ people placed heavy emphasis on demonstrating the 'health' and 'nomalcy' of LGBTQ people. However, the present day research documents and emphasizes the health difficulties and illnesses that affect the people belonging to this community (Terry, 1990). LGBTQ health. whether 'good' or 'bad', is influenced by multiple factors including the prevailing ideologies in the community. Most research addressing LGBTQ health and illness today, is informed by the biopsychosocial model and there has been a push in some countries (e.g., the USA) for LGBTQ people to be the subjects of biopsychosocial research (Epstein, 2003).

In some ways, physical health has been a neglected topic in LGBTQ health research. Genetic abnormalities like trisomy may lead to transgenderism. Also, many people undergo castration or may indulge in reconstructive surgery of the genitals which may lead to lack of gender specific hormones thus resulting in unwanted biological changes in the body. Hormonal imbalances may force them to resort to treatments like hormone therapy. However, recent research indicates that, for some transmen, long-term hormone therapy has significant cumulative effects on their health.

Research on the physical health of transmen highlights both positive and negative side effects of hormonetherapy. Regarding the positive effects of hormone therapy, recent findings suggest that testosterone treatment can help to maintain or develop bone density, a significant factor in determining the likelihood of osteoporosis. However, this may only be the case for transmen who also undergo the removal of their ovaries, if not a complete hysterectomy (Turner et al., 2004). Talking of the negative effects of hormone therapy, general research on breast cancer suggests that there is an association between increased levels of androgens (such as testosterone) and breast cancer risk (Burcombe et al., 2003; Andrews, 2008). This is especially pertinent for transmen undergoing hormone therapy for lengthy periods of time. In addition, it has been suggested that elective mastectomies undertaken by transmen as part of their transition do not necessarily prevent future instances of breast cancer because of the above mentioned factors. This research highlights the physical complexities of gender reassignment for trans people. While the psychological effects of transitioning may be positive for trans people (i.e., they may feel that their bodies finally match their gender identity), the physical effects can be long term and potentially life threatening.

On the psychological level, hundreds of thousands of people experience uncertainty and emotional distress regarding gender identification and are often treated with negative reactions by family members, friends, acquaintances and also the public at large. Individuals experiencing concerns about their gender identity may suffer from social isolation, emotional anguish and distorted self-image. As a consequence, harmful external forces may have adverse impact on mental health of transgenders through moral condemnation, physical and emotional violence, refusal to communicate and also professional misdiagnosis. Very often, body-image distortions lead to development of eating

disorders within the individual (Katz, 2011). Apart from dilemma related to gender identity, several personality factors may also play a role in determining the mental health status of such individuals. Some people tend to be more prone to depression and anxiety, are less resilient and more vulnerable to falling prey to adverse consequences of distress. In a recent study, it was reported that persons with gender identity disorder, compared to cisgender heterosexuals have higher presence of Personality Disorders (PDs), particularly Paranoid PDS, Avoidant PDs, and comorbid PDs. In addition, it was found that transwomen have a more severe psychopathological profile (Duisin et al., 2014). In an earlier study conducted by Bodlund et al. (1994), it was reported that transgender people had a higher presence of cluster B (antisocial, borderline, histrionic and narcissistic) personality disorders as compared to healthy controls. Similarly, they were also more susceptible to the presence of multiple personality pathologies.

With regards to the social aspect, the LGBTQ people face social distress in the form of stigma and isolation which in turn affects their mental health adversely. People belonging to the LGBTQ community often face 'dual stigma'. Mental illness is regrettably still stigmatized in our society and so is being lesbian, gay, bisexual or transgendered. An LGBTQ person with mental illness may be in the unfortunate position, then, of having to contend with both stigmas. It is often the case that such people experience a mental health care system that is not comfortable with or sensitive to issues related to sexual orientation, while their community is not sensitive to or educated about serious mental health issues. This societal stigma can contribute to and also further exacerbate existing mental health problems. A sense of never fully belonging to the community often prevails within them and results in feelings of isolation and estrangement, which may in turn lead to increased psychological vulnerability to mental illness. In a study conducted by Pitts et

al.(2009), it was reported that bisexual women and transgender people are particularly susceptible to mental health problems and taken together, the incidence of mental health problems attributable to stress and prejudice in people belonging to the LGBTQ community is likely to be considerable. Not only do transgender people deal with prejudice and stigma, they often become the victims of social violence and abuse as well, which may in turn lead to social isolation. The societal stigma and prejudice against LGBTQ people may manifest in the form of verbal and physical violence. Such experiences of violence can have lasting adverse consequences on mental health of these people.

The US Transgender Survey (2015), reported the following estimates of pervasive mistreatment and violence faced by the transgendered people:

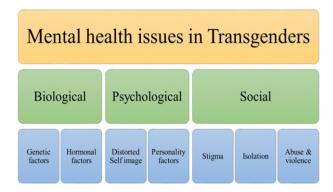
- High levels of mistreatment, harassment, and violence in almost all the aspects of life. For approximately 10% of the sample, at least one family member of the individuals revealing their sexual orientation to their family was violent towards them because they were transgender and 8% were asked to leave the house because they were gender variant.
- At school, those who were out as or perceived to be transgender, experienced some form of mistreatment- being verbally harassed (54%), physically attacked (24%), and sexually assaulted (13%). Tragically, 17% experienced such severe mistreatment that they had to leave school.
- At the workplace, approximately 30% of respondents reported being fired, denied a promotion, or experiencing some other form of mistreatment like being physically or verbally harassed or sexually assaulted because of their gender identity.
 - In relationships, more than half (54%) of

the respondents had been through some form of intimate partner violence, including acts involving coercive control and physical harm.

 Overall, 46% of respondents had been verbally harassed; 9% physically attacked and nearly half (47%) sexually assaulted at some point of time in their lives, because of being transgender.

Apart from facing stigma, isolation, violence and abuse, transgender people often indulge in activities like substance abuse and unprotected sexual activities which may lead to human immunodeficiency virus (HIV) infection and sexually transmitted infections (STIs). Transgender people can be heavy users of alcohol (Hughes and Eliason, 2002), cigarettes (Ryan et al., 2001) and recreational drugs (Skinner and Otis, 1996). In some studies, LGBTQ people's use of such substances is significantly higher than heterosexuals' usage (Lee, 2000), and younger LGB people, in particular, seem to be more at risk of substance abuse(Savin-Williams, 1994). A number of possible explanations have been put forward to explain the growing incidence of health harming behaviours in such people. The limited range of social networking options available to LGBTQ people (i.e., bars and clubs in urban areas) may shape LGBTQ people's consumption of substances like alcohol and drugs etc. In other words, many LGBTQ people socialize in bars and clubs and these environments actively encourage substance use. Another explanation is that substance (mis)use may be a 'survival strategy' or a form of escape from experiences of heterosexism, homophobia, biphobia and transphobia (Hiller et al., 2004).

The biopsychosocial model can be summarized as follows:



Raising awareness of LGBTQ people's health related behaviours in order to provide 'culturally appropriate' health services and support is the need of the hour, but the narrow focus on individual health behaviours can again potentially lead to 'blaming the victim' and labelling LGBTQ people as pathological.

What needs to be done?

Several issues need to be addressed in order to help the people belonging to the LGBTQ community and so that they too can lead an enriching life. Some of the key issues that need to be addressed are as follows:

Acceptance in the society: First of all, LGBTQ people need to be accepted within the community as equally normal and healthy individuals as heterosexuals. Moreover, LGBTQ people facing serious mental illnesses need to be treated and given consideration.

Sexuality is not addressed: There is an unspoken assumption that the clients must not have sexuality because sexuality is only discussed as a problem. This needs to be addressed.

Poor knowledge and attitude of the health professionals: Not only the public, but also health care professionals suffer from high levels of ignorance and prejudice related to LGBTQ people. Usually there are many false assumptions like transgender people are HIV

positive, or they are man hating or sexual predators, etc. these notions result in maltreatment of the clients because often professionals lack expertise in dealing with clients belonging to this marginalized group.

Peer intolerance: There is disregard from other communities and also often from different sections within the community. Such issues need to be addressed.

Lack of health statistics: There is an absence of robust public health statistics about incidence of illness and disease in LGBTQ groups. More and more surveys need to be done to address this issue and also there is a need to include sexuality and gender identity as a part of routine demographic information in population based health surveys.

Conclusion

Transgender people often experience oppression because of gender nonconformity. They represent an extremely stigmatized population at high risk of developing mental health problems. Everyday discrimination and internalized transphobia increase depression, anxiety, and suicidal ideation. Factors like social support and resilience may help in ameliorating the impact of stress on mental health. Beyond this, social and public policy initiatives are needed to understand and reduce stigma faced by the transgender populations that in turn may result in positive physical and mental health outcomes.

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Prominent Transgender Activists of India



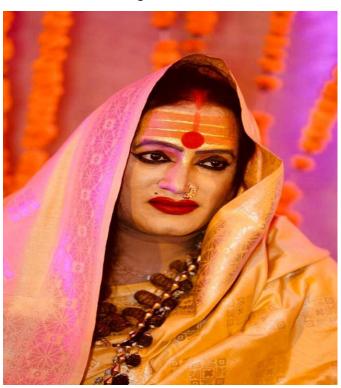


Gender Identity, Voices and Action Transgender Activists of India and Their Worldviews

Maheswar Satpathy, Fasiha Noor&Lokanath Choudhury

Transgender Identities across Asia has been sparse, and oblivious, and sometimes poignant. In a chaotic background where identities are negotiated with space and time, individuals have come to discover and create space for themselves in their unique contexts.

This critical piece aims at uncovering, identifying and representing voices while celebrating their identities and their contributions to the society. The struggles they have endured, the space they have created for themselves and for all in the society is a matter of pride for the whole Transgender Community! The following is a collection of representative voices from different parts of India, symbolically telling us lives and how they come to create a space for them in Indian society. Each of these 7 figurine represent unique voices, and are representative of nobility, virtue and worth. While Laxmi represents a never-ending source of inspiration by her sheer determination, Abhina is enigmatic with her endurance, Dhananjay epitomizes humility and grace, Ranjita of oratory and zeal, Rudrani of her 'beauty' in its purest form, and Meera and Sadhana embody 'action' as it channelizes and gets reflected in a momentum of change.



Laxmi Narayan Tripathi

(Mumbai-Pan India)

Claiming herself to be 'a woman who can put all other women to shame', Laxmi Narayan Tripathi is a goddess for many Transgenders, because the way she became the flag-bearer in the community, pulled out many a man from their state of dilemma, and helped them to identify their sexual orientation so as to begin their new journey in life as a transgender. In fact, Laxmi's motive is to beautify the lives of transgender- a dignified, deserving and a life worth living. She is a lady who is profoundly awe-inspiring- a fighter in herself who stood up for her choice of becoming a transgender. Having vast experience as a transgender rights activist, dancer as well as an actor. She is an achieververy bold, fearless, and incredibly fabulous one.

She is the first transgender activist in Mumbai representing Asia Pacific in the UN in 2008. She actively partakes in transgender community services and has served on the boards of various Non-Governmental Organizations especially doing LGBT activist work. She represents India in numerous international



forums. Her take on why she chose to become a Hijra is very clear. She created history by raising her voice very strongly to forfend people with HIV in India. What is more powerful about her personality is her attitude towards life. Laxmi started an organization named ASTITIVA which focuses on the promotion of the welfare of sexual minorities. This became a revolutionary step for people like her from all over the world. Her achievement scroll begins with one of her first victories, it was when her passport stated that she is a female. She says, "I face hatred even today, but who cares?" This attitude is her strength to stand up against her haters, fall on her knees, endure every suffering, lament over the situation for some time but finally get up once again on her feet, dust herself off and fight back.

> *Abhina Aher* (New Delhi-Pan India)

Abhina Aher represents and is a figurine of transgender movement in India and worldwide.

transgender movement in India and worldwide. She is a program manager of HIV/AIDS Alliance, New Delhi. She has co-organized with Jeff Roy-a prestigious recipient and alumnus of United States-India Educational Foundation (USIEF)'s

Fulbright Fellowship a dance performance and film screening at Godrej India Culture Lab, titled "The dancing queens: a celebration of India's Transgender Communities'. The event marked the first appearance of a transgender performance ensemble at a major Indian corporate campus and was featured in a number of media outlets in India.



She shares her story of growing up as a Transgender in India with parallels. It was clear to her family that she certainly wasn't the average boy or girl. She recalls dressing up as a woman, and wanting to be addressed as one, but, constantly being pressured by her family to dress and act like a man:

"I was mesmerized by that. When I used to be at home, I used to have grand performance where I am calling all the neighbors and dancing in front of them and putting up a show exactly replicating what my mother is doing on the stage". Aher remembers "One fine day, she just found out, and she just got really mad about it. I was asked to sit in front of a God and make a pledge that I will never do that again". But, Abhina Aher felt empty, as if something was missing all her childhood, because she was forced to be someone she wasn't. As she grew a sense of feeling of incompleteness also grew inside her. She was abused by her classmates, and had received no visible support from Teachers who said, "Your friends are doing this to you because you are behaving in an extremely feminine way, and that's what is an issue".

She had a very tumultuous journey in her gender identity development during which she was subjected to psychiatric consultation and treatment. "I had to do that almost for 10-15 years. I used to watch myself, how I walk, how I talk, how I behave, how I dress up, just to hide my sexuality, just to fit into the heterosexual world". Aher continues "I finished my education... and I started working as a software engineer. There was a huge feeling of incompleteness all the time-having something wrong with your body all the time, not being able to connect with your soul all the time".

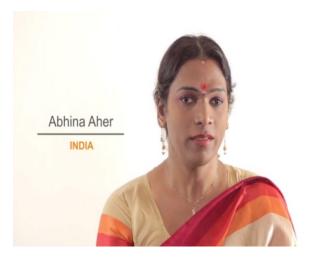
She has undertaken a long and arduous journey, feeling marginalized since childhood and have attempted suicide thrice. However, she finally rejected her biological sex and opting to become a Hijra. Then finally after the law was placed recognizing the third gender, she began to notice some changes. She can finally be addressed as a woman, and dressed the way she pleases. The sweeping decision redefined their rights and the state's obligation to them as one of India's most marginalized groups.

Speaking on a desperate attempt by many to go through sex reassignment surgery following the 2014 SC judgment on TG recognition, she observes "It's not joke", says solemnly. "It can be psychologically and physically traumatic; their body-altering hormone, often followed by operations to reassign sexual organs in a process known as feminization" besides their costliness. She continues "after the castration, you can't walk for almost 1 ½ month. It is not an easy task, it's a journey of pain. It happens in a dingy room, a 10 by 10 probably. Immediately after the castration, 2 hours, the Hijra is asked to leave that place, because it is illegal. The operations are normally done by quacks, and a lot of Hijras die because of that".

Hijras have long been discriminated against in jobs, housing, education and healthcare. They are routinely turned away from hospitals. Aher recalls being turned away by 17 hotels in a row

whole on a business trip in the Indian state of Kerala, which is thought to be more enlightened on gender attitude than other states.

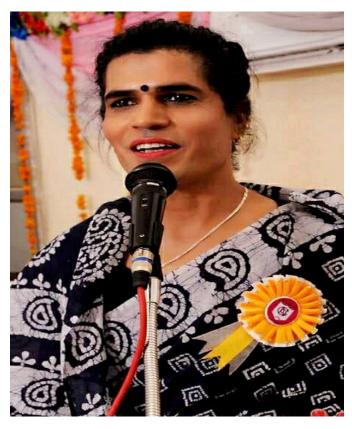
She has triumphed the cause of TG community by adequately representing them in all national and international forums, by giving TED Talks, and states on the never-ending fight against colonial Section-377, "what we have done is that we have put a foot inside a door, which is a door of hope, and we will open it- very, very soon".



Speaking at 21st International AIDS Conference in Durban, South Africa (2016), representing India where more than 400 TG representatives took part, Abhina Aher indeed threw light on that year's theme i.e. 'No more lip service: Trans Access, equity and rights now!'. The programme also looked at how TG people could be better engaged in the Global Fund to fight AIDS, TB, and Malaria. AbhinaAher emphasized on the role of TG people in decision-making processes by saying "Our issues and vulnerabilities are more than just about HIV. Resources for Transgender people are not reaching Trans organizations and they don't have access to funding".

When asked about what she desires of her future, Aher speaks with a hearty laugh "I just wanted to become a beautiful butterfly."





Dhananjay Chauhan Mangalmukhi (Chandigarh, North India)

She is a social and human rights activist, reformer, counsellor, motivator and a student representative at Punjab University in Chandigarh. From an identity struggle faced with maintaining family and earning basic livelihood, to a person who has suffered insufferable Ignominy, horrendous psychological and physical abuse and trauma and years running errands seeking justice and retuning without any favor she has evolved, matured and has emerged the voice of the voiceless. Dhananjay is the 1st TG at a reputed higher education institution such as Punjab University and has been a front runner in challenging the status quo, fighting the hierarchy and represent needs of a historically invisible community in front of the authorities of the universities and negotiate a space which they rightfully deserve. Dhananjay is credited with an initiative to institute a separate

toilet for TG (male, and female) at PU after a 2year running to authorities, bargaining, convincing and demanding for their desperate needs. Finally, the authorities understood the valid need that this community has.

2 years ago, when Dhananjay started study for her masters in human Rights after 20-year break from studies she was the only one at university representing the community. Just like any other she had also suffered occasional giggles, taunts and laughs. However, she didn't bother about it. One thing which make Dhananjay stand apart is she doesn't stand out, complain or lament over the systemic failures. As she candidly shares "if we wish to see any change in the system, we cannot afford to just make complaints. We must be inside the system and represent the system to make the changes in it. So, we need a little bit of tact, some amount of strategies and a lot of common sense. We can't afford to go ahead by standing opposite to each other, but by only being on the same side of table. We are not alone in this struggle. Everyone around me is a part of me as much as I am apart of them. So, we need to work together."



Dhananjay's contribution is clearly visible in an exceptional reception and acceptance and profound sense of support shown by the student community and elected representatives. Many of them have come forward encouraging her to take big leaps in bringing the transgender communities and enable them with an opportunity to pursue higher education at the university. Due to her never-say-no attitude, humility, determination and strength of character she could inspire five other transgender students who had left all desire and hopes to pursue their dreams of a life worth living.

As a representative of a queer community, Dhananjay has transformed the way a male dominated patriarchal society in Punjab and Haryana perceives the sexual minorities and treats it. We certainly need more inspiring figures like Dhananjay who has represented India internationally in countries like Netherlands and have played a prominent role in the activities of SAHRA (South Asian Human Rights Organization).



Meera & Sadhana

(Odisha, South-East India)

Everyone is born equal in God's creation. We may experience differences in terms of color, shape and looks, nature and behavior. However, all of us are part of the larger humanity bearing essential virtues endowed upon us by the almighty. And, everyone deserves a right to life with dignity and exercise their freewill. These essential yet unanswered questions have been broached upon by couple of people in past few years, and Meera And Sadhana are two of them.

Meera says, "I have a family, in which I got my parents and siblings residing. But, they have also never accepted us as normal human beings. I have always had questions lurking in my mind, why am I not 'normal'? why are they unable to accept me as I am? Wherever I used to go, people used to look down upon me, someone would refer me as 'Malli', 'Basanti' or 'Maichia' or someone will call me 'Hijra'. Why??? Don't I have a right to live? I used to have goosebumps thinking of these. Am I all alone in this world? Am I the only one who has been created like this? When I was a child, I didn't know much... I had spent most of my childhood just like normal kids playing in the neighborhood. I used to be fascinated towards all the girly activities and cross dressing. Would this childhood practice change my identity? Moreover, until I had reached my youth I had not realized my actual sexual identity. I could only make out that I embody certain differences. Only after I joined a dance class I came across people like me. These acquaintances helped me gain my self confidence and made me realize that I am not the only one. But no matter what, my family could never accept my reality. My parents got me married with an assumption that I will change. But unfortunately, it didn't happen!

After a chaotic marriage and a mutual separation, her real struggle begins. From a very young age she had learnt to be self-reliant. Her financial struggle begins with her first earning of rupees 35. After a long time suffering she finally ended up opening a travel agency. But all went in vain and the agency room collapsed, and no one supported her. She had also left all hopes and

thought of giving up life. Disappointed from the ongoing in her life she left for Mumbai where he got to meet LaxmiNarayanTripathy- a famous transgender activist in India. Outside Odisha transgenders are usually able to live a decent and respectful life while only in Odisha she feels that they are compelled to beg and resort to sex work as the last alternative to earn their livelihood.

Therefore, in 2005, she and her friend Sadhana Mishra (Subham) created an organization named SAKHA which has literally grown from four members to thousands of members. As a part of this organization's activity they have



worked tirelessly over past thirteen years to organize a collective of transgender and sexual minority community members and create awareness and sensitivity in the state. All this has been possible due to the dogged determination of Meera and sincere cooperation of Sadhana. They have become bacons of hope for many people just like them. Both have taken their friendship to a different level and have turned obstacles into their strength. This is reflected in their endurance of all the suffering and discrimination and yet maintaining strength of character. They have emerged as neverending sources of inspiration for the whole transgender community in the state for whose rights they have fought tirelessly. They have represented the voices of transgender community and have demanded for social,

legal, and financial assistance from government for empowering the community.

Recently, Meera and Sadhana both have got recognized by the international community for their inspiring work by getting an invite from the HRC of US. They have made enormous strides for social inclusion and have taken constructive steps for making their community members live a life of dignity. They have played a major role in revision of Transgender Bill 2016. They have also represented India internationally at international forums like APCOM Bangkok and SAHRA.

Here are excerpts from a brief personal interview with Meera and Sadhana:

Q: What do you do at SAKHA?

A. We promote the rights and dignity of TGs, populations affected by stigma, and noninclusion and by doing so, improve their selfesteem, health and wellbeing. Sakha has organized countless community driven gettogethers for TG and Hijra community under one umbrella to increase self-acceptance and positive identity in Odisha. We have also worked tirelessly with our NGO partners for HIV prevention, awareness creation, Legal aid clinics in different parts of Odisha, and state and national level consultations for better HIV and Healthcare Programming, and most recently related to TG Bill pertaining to their rights. We are also starting to work on livelihood based approaches for TG community. We have also conducted numerous sensitization training programs for media, police, civil society, healthcare professionals, Govt. Officials and Corporators. We have also conducted several activities for social welfare like blood donation camps, jalchhatra, Swachh bharatabhiyaan, tree plantation program, and helping the poor and needy by offering livelihood, monetary assistance, and more recently scholarships to girl child.

Q: Last year you've received a prestigious Best Transgender Award. What would you say regarding it?

A. (Meera): Last December, 107 person were selected by the UNDP, NACO, HIV/AIDS Alliance and fortunately I received it and it is obviously a matter of pride for me. This honor certainly enables me to go ahead with constructive improvement for the community.

Q: Last year you had gone to US. How was the experience?

A. American government had voluntarily selected transgenders from all over India. We had gone to represent India in Washington DC where we met the previous secretary of the President Barack Obama who herself is a transgender, and had shared her journey of success. We had extensive discussions regarding American federal policies regarding transgender rights and how transgenders are working to create sensitivity in the mainstream society. We went from DC to Denburgh, San Diago, Boston and IOWA state University for reviewing the policies and practices regarding the transgender rights. This experience has subtly helped me in changing our mindset, working style and improving self-confidence.

Q: Last year government has taken certain initiatives inorder to improve lives of TGs, what are your opinion about it?

A. We would certainly consider it as a welcome step and would thank the government for their noble initiatives. The govt. has given us Aadhar card, driving license, voter card, ration card, shelter to dwell under through Biju Pakkah Ghar Yojana. We are hopeful that the govt. would continue to work on constructive and empowerment programs for the transgender communities.

Q: In past, you have contributed to the CM's relief fund, what is your take on this?

A. Everyone in the society has a role to play. With our hard workwherever we are able to earn we try to invest that in social welfare activities. We also contribute a large segment of our

income for several such welfare activities in our local communities.

Q: You have shared that a lot of Kinners resolve to begging and sex work, what is your take on this?

A. We believe that it can be attributed to lack of proper education, abject poverty, and virtually no support from family members which is pushing these people to succumb to such activities for earning their livelihood. If they could receive certain vocational training and means of employment, they would be able to come and be a part of the mainstream society.

Q: You have opened a boutique which has given employment to some Kinners, what would you say about it?

A. Yes, at our boutique many Kinners are actively playing a role and earning a decent livelihood. Recently we organized several ramps shows at prominent fashion festival in Odisha. I want to prove that given an opportunity they will be able to prove their abilities.

Q: What would like to say about your future?

A. We must learn to live a life of dignity without seeking anyone's help or being a matter of pity. We continue to struggle, and do something to make people happy. The path that I have taken isn't easy, is long and full of struggle. But we are fighters. We wouldn't yield so easily. We create our own path and change the mindset of the society.

Q: What would you say about the support in the community?

A. The support inside the community is immense. If we have survived, it is only because of our community members and how we love each other. For e.g. "when Meera came to my life", says Sadhna "I realized that I am not alone in the world. She might not be highly educated, but she has the ability to effectively implement a programme. She is a friend like no other and has a golden heart and we are sisters for life".





Ranjita Singha

(Kolkata, West Bengal-East India)

Ranjita Sinha, a front-running TG activist hails from Kolkata and has represented the very vibrant transgender community across the eastern and north-eastern part of India. She has represented herself at all national and international forums, consultations and conferences including academic ones championing the voices of the transgender community.

Ranjita Sinha is the pioneer who established the Indian first Transgender Registered Network in West Bengal in the year 2008 and Association of Transgender/Hijra in Bengal (ATHB). She was earlier a member of West Bengal transgender Development Board and a member of National Task Force. Turning to the pages, some notable works can be marked with her name. She is being associated with 11 organizations like Bandhan, Birbhum Samporko, Anandam, Uttarayan, NatunAloo, Sampoorna and Collective Soul.working in different parts of Bengal where FTM and MTF all are to be noted in organizations

Another notable milestone attributed to Ranjita Sinha is celebration of Transgender Day, in the history of Bengal. At a time in 2008 when the supreme court verdict was also out, she along

with some other leading agencies of India as like NACO, UNDP, VHSDIVA, ALLIANCE INDIA etc. had celebrated Transgender Day in Bengal. She always turned her words into action and the project of Skills development for the transgender community under the government of India leading to the empowerment of Transgender community, which is an ongoing work dealing with various courses like Software Development, Sewing Model Operator, Hospitality Management, General Duty Assistant etc. courses. Another initiative taken by Ranjita in the field of empowerment was the project 'Snehonir' where the inert talent was expelled from the view that Transgender Community only deals with begging, sex work, etc. leading to a creation of Self-Made group displaying wonderful collection of handicraft, jewelry and other creative things made by the community people.

We know that the work always waits for the pages to be written about them in history. So



even the ongoing work which was started for the development of community and which will be going on in the coming times has been honored by numerous awards. She is also working with the TG intervention leading with the SRS process of the community. She is also a member of TRG group of NACO.

Currently, she is serving as a board member secretary of Gokhale Road Bandhan. She has been one of the most vocal TG activists who have never minced a word when it comes to raising voices against indifference, apathy, systemic corruption and failure in dealing with causes of the community by the mainstream or even the community members who hold positions, but don't contribute enough.

She has been a part of numerous academic forums where she has spoken vehemently against systemic marginalization, inferiorization and discrimination prevailing in spite of the legal recognition by the supreme court of India. She believes that virtue comes as a result of ethical practices, and has been able to bolster and give a reality check to several politically backed-up community initiatives which have failed to contribute much to the needs of those who are deprived of their basic rights. Ranjita is an orator, and a critical spokesperson of the whole TG community of the West Bengal. Ranjita has also spoken of efforts to marginalize the TG community by their effort at underrepresentation. She spoke to us "The first basic flaw is conducting a proper census of people from TG community, which include Transwomen, Trans-men and Hijras or eunuchs & Intersex people. According to the board's record, the number is just 700. But as per figures compiled by different activist groups, the number is at least 30,000, and I think, it is even higher if a proper census is conducted".

Ranjita has also made enormous efforts for social inclusion and acceptance of TG community by mainstream society by participating and organizing activities such as DurgaPuja, Chat Puja, Rath Yatra, Christmas, Bhai Dooj wherein large

numbers of Transgender and Kinnars took part, and felt recognized as an important part of the society.

Lastly, before we scroll down just few words that explains Ranjita Sinha is that "Ranjita sinhais the VOICE of the Community" which means the only words that we hear is not of Ranjita Sinha alone, but thousands of community people.

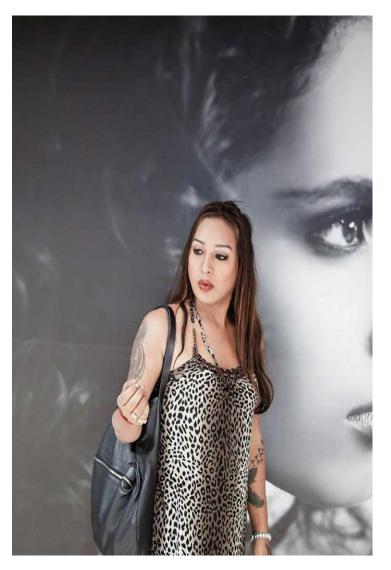
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Rudrani Chhetri (Kolkata, West Bengal-East India)

Rudrani is otherwise known as the first 'Transgender Model Maker', and is a role model for many aspiring fashion models. She is also an owner of a group for TG modeling known as Bold Transgender Modeling Agency. Rudrani is a managing the trustee at Mitr Trust (MSM/TG CBO) based at New Delhi.

She has been instrumental in the HIV program



for the NACP-III and NACP-IV by NACO and has played a crucial role in getting the TG community recognized as a high-risk population group. Moreover, Rudrani has played a major role in highlighting the issues faced by sexual minority in a male dominated north Indian society and has represented India several times at different forums. She has had her part of the struggle just like any other TG activist, but, she in our opinion is one of those most vocal and care free souls that India has ever seen. She has gone on to extreme ends to convince the bureaucracy to include community members in decision making, planning, and implementation, and therefore deserves recognition for inclusion and partnership of communities for changing mindsets. Rudrani has also made several initiatives to sensitize the mainstream society at educational institutions in Delhi and NCR regarding sexual minorities, and their rights.

Her current efforts are geared towards training and preparing many TG aspiring models, who would want to have a slice of their dreams, in the dream cities. She has made brilliant momentum in bringing TG models to the frontline of modeling profession, and has made financial success. She has also been a champion of animal rights besides her passionate engagement in human rights for past 2 decades.

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