1.1. Introduction

In the late 1990s when I got engaged in HIV/ AIDS intervention programme among the *hijra* population in Mumbai through a Community Based Organization (CBO), the term eunuch was used for *hijras* and they were placed within the men who have sex with men (MSM) umbrella. However over a period of time the term *hijra* has been replaced with the western term ‘transgender’ and the transgender population is no more considered a part of the MSM umbrella (United Nations Development Programme [UNDP] 2008, 2010; National AIDS Control Organisation [NACO] 2011: 2).

One important discussion that arises while discussing MSM and transgender issues in India is their convergence and divergence within the larger LGBT\(^1\) spectrum. MSM is a behaviour related to same sex orientation and transgender issues are vast as they pertain to gender identity and transgender rights issues. According to UNDP (2010) and NACO (2011) transgender and MSM are two different issues and should be dealt separately. While having consultation meetings with members of transgender community in India by UNDP and NACO, community members expressed that they wanted to be identified as transgender and not as MSM. Transgenders usually do not associate themselves with homosexual orientation (like MSM). Much of the discussion on transgender in India is with respect to the male-to-female (MtF) gender transition and its association with femininity and woman’s identity. Moreover MtF transgender sexuality is viewed from a heteronormative perspective.

One more interesting discussion in India is the existence of *hijra* identity, which is largely based on religious-cultural background and their class position because of their profession and lifestyle (in the subsequent sections I have discussed this more in detail). However there are also issues related to various trans(gender) identities which counter with the *hijra* ‘third gender’ identity and their sexuality. The purpose of highlighting ‘(gender)’ within trans(gender) is to explain that though transgenders transgress gender (in this case MtF), it is also their sex assigned at birth that is (not) in question with their gender transitioned body.

Transgender bodies transgress both sex/ gender norms, and it is this politics that brings transgender bodies into discussion. Social and cultural construction of sex and gender has

\(^1\) Lesbian; Gay; Bisexual; Transgender.
been a long feminist debate and transgender bodies help us to understand fluidity of transgender bodies in India.

The western term transgender is an umbrella term used to group several different kinds of people who do not conform to their expected gender, and are living the gender that was not assigned to them at birth, and also those who live genders which is not the traditional conception of gender (Bettcher 2009). Transgender is both male-to-female (FtM) and female-to-male (FtM) gender transgression.

Though the term transgender is an umbrella term used for people who transgress their gender, in recent times it is also being used for hijras in India. The hijra population is the most visible (MtF) population in India and other (MtF) transgender identity/identities are associated with the hijra identity. The hijra identity is often mistaken for other MtF transgender identities. There is a dearth of literature on transgender in India and the available literature is more within a socio-religious and cultural context with emphasis on the socio-economic and political situation of the hijra and MtF transgender population. Both MtF and FtM transgender categories/identities are not adequately covered and discussed in the available literature.

The hijra population in India is a closed group with a religious-cultural and rich historical background. The term hijra is derived from the Urdu word meaning ‘impotent ones’ (Lal 1999; Basu 2001; Mukherjee 2004). Within the Indian context the term hijra is used for people who identify themselves as ‘neither man nor woman’, ‘kinnar’ (a Sanskrit term) or ‘third gender’ (Nanda 1996; Mukherjee 2004; Kalra 2011). They are also known as eunuchs, transvestites, hermaphrodites, androgynes, transsexuals, and gynemimetics and are also referred to as intersexed, emasculated, impotent, transgendered, castrated, effeminate or sexually anomalous or dysfunctional in Indian society (Lal 1999). Hijras are born biological male or intersex (in some cases) and join the hijra community at some point in their life and (may or may not) live with the hijra community as hijras for the whole life.

The hijra population is scattered across India. There is no data available at the national level to know their exact population. During the census operation in India, which is administered once in 10 years, the population data was enumerated only for two sexes i.e. male and female (Nanda 1996). Till a few years ago hijras were enumerated under the male category. Since there was no separate census count for transgenders in India it was difficult to know their exact number.
However during 2011 census, transgenders were included under the ‘others’ column. Division of sex/ gender as a third category is also visible in only few governmental institutions like the Passport application form or on some Centralized Banks application forms. However there is no clarity on the difference between hijras, and other MtF transgender categories.

Though hijras fall under the western definition of the term transgender because of their MtFness, what differentiates them with western transgenders is the traditional hijra jamaat subculture (refer section 1.2.2 in this chapter) that exists in India, especially in the Western-and-North Indian states and few East Indian states. The hijra identity is unique because of its ‘third gender’ identity preference, jamaat subculture, and acceptance of third gender within the India society because of their religious-cultural background. Since ages, hijras are considered a part of the Indian society.

The term transgender is also problematic in India. Firstly because of its western origin, secondly because of the Male-to-Female (MtF) and Female-to-Male (FtM) binary, and thirdly because of the various other categories that fall under the umbrella term. Moreover western sex/ gender binaries are rigid and existence of a body outside the rigid/ fixed binaries is not easily accepted. This is one of the major differences between the hijra identity in India and other MtF transgender identities in the western countries. Hijras are accepted as third gender in India, whereas transgenders/ transsexuals in the western countries are expected to fit under the rigid sex/ gender binary.

The HIV/ AIDS intervention programme in India opened up spaces for discussion on sexuality and brought visibility to the hijra community in India along with other high risk groups (Menon 2009). Over a period of time access to information on transgender has increased through internet sources. There is a rise in use of term transgender in India by those MtF who undergo gender transition, those who may or may not have undergone complete sex change operation (in other words Sex Reassignment Surgery [SRS]), and also by those who place themselves under the larger western transgender definition of categories/ identities.

The term transgender is also used by various scholars, academicians, researchers, Non-Governmental Organizations (NGOs), Community Based Organizations (CBOs), funding agencies, government agencies etc. for hijras in India and aravanis in Tamil Nadu. Krishna and Gupta (2002), Chakrapani et al. (2004, 2007, 2008a, 2008b), Project Parivartan (2006), Kavi (2007), The Humsafar Trust & Population Services International (2007), Asia Pacific Coalition on Male Sexual Health (APCOM) (2008), Puri (2008), and Chakrapani (2009) have
loosely used the term transgender to address hijras and aravanis who fall under the MtF category.

The term aravani is used for hijras in Tamil Nadu (Mahalingam 2003; Chakrapani et al. 2004, Chakrapani 2009; Saravanamurthy et al. 2010; UNDP 2010; Kalra 2011; NACO 2011). As the research study is focused on aravanis in Tamil Nadu, more discussion on aravanis is given in the subsequent sections in this chapter.

1.2. Hijras and MtF Transgenders/ Transsexuals in India

In this section I give a brief overview on the religious-cultural background of hijras, the hijra jamaat subculture, hijra situation during the Mughal and colonial rule, followed by section on situation of transgenders in Independent India and their health situation.

1.2.1. Religious-cultural background.

The hijra population in India is a (in)visible population that is embedded in the Indian society from a very long time. Hijras are linked with the religious-cultural background and are considered demi-gods. Descriptions of hijras are in epics like Ramayana and Mahabharata (Nanda 1996; Krishna and Gupta 2002) and references of third gender are in Kamasutra also.\(^2\)

Few characters mentioned in the epic Mahabharata include Arjuna as Brihannala (a eunuch teacher), Shikhandi (reborn as a man) who confronted Bhishma during the Kurukshetra war, and Lord Krishna as a woman marrying Arjuna’s son Lord Aravan.

Hijras worship Goddess Bahuchara Mata (Barbara 1994; Nanda 1996; Lal 1999; Bakshi 2004; Hill and McBride 2007) and the temple is situated in Bahucharaji, Mehsana district, Gujarat, India.

Hijras relate themselves to the Mohini avatar (a woman form) of Lord Krishna and Lord Shiva (in the form of Ardhanarishvara) (Nanda 1996; Lal 1999). Lord Ayyappa is said to been born to Lord Shiva and Lord Vishnu. Lord Vishnu took Mohini avatar (Goudriaan

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\(^2\) According to hijra folklore, in the epic Ramayana when Lord Rama leaves for exile with Sita and Lakshmana, he is followed by people and at the banks of the river, at the edge of the forest he turns and appeals to his followers to wipe their tears and says ‘men and women please go back and perform your duties’. He turns and never looks back. While returning back after fourteen years he finds a group of people still waiting for him. Upon questioning he realizes that the words ‘men and women’ were not meant for the group and hence they stayed back. This was the hijra group that waited for Lord Rama for fourteen years. Lord Rama blessed hijras for their devotion as they waited for his return for fourteen years (Lal 1999; Krishna and Gupta 2002).
1978; Doniger 1999) and Lord Ayyappa was born (Krishna and Gupta 2002; Kalra et al. 2010).

Lord Shiva is represented in the image of *Ardhanarishvara*, or ‘the Lord who is half woman’. Lord Shiva and Parvati together in one body are called as *Ardhanarishvara* (Krishna and Gupta 2002; Kalra et al. 2010).\(^3\) In various paintings and sculptures Lord Shiva’s half body is female and half is male.

### 1.2.2. Hijra Jamaat.

The *hijra* community is also referred to as *hijra jamaat*. The *hijra jamaat* is a properly structured top-down power-control hierarchical community system which mostly exists in the Western-and-North Indian states (and few eastern states also). Kalra (2011) has very well described the structure and hierarchy within the *hijra* community (refer Figure 1).

![Figure 1: The hierarchical system in a hijra gharana (Kalra 2011: 3)](image)

According to Nanda (2000) and Reddy (2006) there are various *gharanas* (clan/houses) in the *hijra* community, which have their own name. Each *gharana* has its own ancestor known\(^3\) In one of the myths of the Hindu religion, Lord Shiva breaks off his phallus and tosses it and the phallus breaks in pieces and extends fertility over the entire earth. Though Lord Shiva loses the power to procreate, his phallus becomes a symbol of ‘universal fertility’ and therefore one can trace the cult of *lingam* (phallus) worship. This is seen as an exact description with *hijras* who themselves are impotent but bless others for fertility (Lal 1999).
as Naik/ Nayak who acts as head of the gharana, and under her are many gurus who have many chelas under them (refer Figure 1) (Nanda 1996, 2000; Mukherjee 2004; Reddy 2006; Kalra 2011). The Nayak is the head of the gharana who is the primary decision maker and policy maker of the hijra community. This tree spreads and there is a web of chelas, nati-chelas (grand daughters) under the same house.

The term jamaat is an Islamic term (Reddy 2006). Hijra jamaat can be viewed as a typical example of local/ traditional village panchayat system seen in Indian villages. Thorner (1954), Mathew (2003), and Sharda (2010) highlight that the local/ traditional village panchayat system in Indian villages is a council of elders from the same village who function for the welfare of their village. These local/ traditional panchayat systems exhibited domination by the upper-class and upper-caste men on people from lower-class and lower-caste background.

The hijra jamaat is no different from this local/ traditional panchayat system as it has its own rigid jamaat norms, and any violation of jamaat norms leads to expulsion from the jamaat or payment of fine.

Within the hijra jamaat system, the guru is a guardian of her chela. Chelas earn and give full or partial amount of their earnings to their respective guru. The guru has the right to keep the entire amount (Nanda 1996; Mukherjee 2004) in return the guru provides food, clothing and shelter to the chela. Young hijras get moral and emotional support from the community. Because of their feminine identity, hijras follow matrilineal relationship like sister, aunt, niece, grandmother, granddaughter etc. amongst themselves (Nanda 1996; Lal 1999; Toumey 2008; Kalra 2011).

1.2.3. Mughal rule and the colonial period.

In the pre-colonial stage, hijras experienced dignified status. During the Mughals rule hijras were regarded as the most trust worthy servants and were employed as harem guards. One such example is the Nizams of Hyderabad who employed and honoured hijras. The sixth Nizam Mahboob Ali Pasha employed hijras as confidantes and advisors, domestic supervisors and menial domestics. Even the Hyderabad State had an Inspector for hijras in the Police Department to look after their welfare and assured that they not be harassed (Krishna and Gupta 2002). Hijras had claims on the public revenues through grants of cash and land and in some places they possessed an official and codified right to beg in India (Lal 1999).
However many laws were introduced against *hijras* which led to their miserable situation. According to the Andhra Pradesh (Telangana Area) Eunuchs Act 1329 F. Act No. XVI of 1329 F., which is a State statutory law, the term eunuch was used for those who admitted to be impotent or was proved impotent after undergoing a medical inspection. Though the term eunuch was used to refer *hijras*, impotency was necessary to be eligible to be called as a eunuch. As per this Act the Government was required to keep a register to keep record of names of *hijras* and their resident details. Restriction was also placed on *hijras* engaged in *badhai* or any other kind of street entertainment activity carried out secretly. There was also restriction on self emasculation and emasculation performed on others. The Act thus had a close surveillance on the lives of *hijras*, their traditional occupation, and also on their rituals (Kannabiran 2009; Kannabiran 2013).

Thus the situation of *hijras* started deteriorating when British colonial rulers came with their ideologies of sex/ gender binaried bodies and heteronormative sexuality perspectives. The *hijra* body was problematic because of its ambiguity and its difference with the abled procreative/ heterosexual body (Kannabiran 2009). Gradually various laws against *hijras* were introduced due to which the *hijra* community were deprived of their privileges provided by the Kings and Mughals.

*Hijras* were classified under the list of criminal caste/ tribes during the colonial rule (Reddy 2006; UNDP 2010). The Criminal Tribes Act (Act 27) of 1871 stated ‘registration, surveillance and control of certain tribes and eunuchs’. This Act was applicable in all states of India. This was the Act that was written on the bodies of the so-called criminal castes. Thus the bodies and labour of *hijras* were controlled. The lands given to *hijras* during the kings and Mughal rule were also taken back by the colonial rulers.4

Like the Criminal Tribes Act, Section 377 of the Indian Penal Code (IPC) was also introduced during the colonial period since 1860. The Section banned same sex sexual relationship and is often referred to as ‘Anti sodomy Law’. In the year 2009 consensual same-sex acts between adults in private was decriminalized by the Delhi High Court (An Activist’s Guide to The Yogyakarta Principles 2010). However the Law is not always used against *hijras*/ transgender in India. There are reported cases from Bangalore where *hijras* were booked under Section 377 (Peoples’ Union for Civil Liberties, Karnataka [PUCL-K] 2003).

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4 These lands were given by the previous rulers as *inam* lands or granted by royal decree.
Since the British colonial rule the *hijra* community remained underground and led an isolated life. They primarily resided in the outskirts of the villages and remained a closed group for a long time.

### 1.3. Situation of Transgenders in Independent India

The *hijra* community is scattered all over India and majority of them are found in the Western-and-North Indian states though some live in few south Indian states also (Nanda 1996; Krishna and Gupta 2002). Large number of *hijra* population lives in Western-and-North Indian states as compared to southern India due to availability of livelihood sources. Livelihood is one of the main reasons for migration from southern India to other Indian states. UNDP (2010) and Kalra (2011) mention that *hijras* migrate from smaller towns to larger metropolis in search of their identity and to escape from their families. They are forced to leave the house resulting in expulsion from property rights and other family entitlements. In the absence of family support many *hijras* join the *hijra* community for security. Bhugra et al. (2011) too mention that livelihood is also an important factor for migration.

Traditionally *hijras* are engaged in the profession of dancing (*badhai*), begging and sex work (Nanda 1996; Mukherjee 2004; Reddy 2006; Toumey 2008; Kalra 2011; NACO 2011). *Hijras* perform at rituals like childbirth and marriages. People believe that *hijras* have the power to bless or curse because of their religious-cultural background (Barbara 1994; Lal 1999). This is the primary reason for people to become *hijra*-phobic (transphobia) and the ambiguous sex/gender of a *hijra* is another confusion that leads to stigma, discrimination and denial of rights at various levels.

Puri (2008) and UNDP (2008) highlight that *hijras*/transgenders are booked under Section 268 IPC (causing public nuisance) or under Section 294 (Obscene Acts and songs). The complaint is also registered under Section 269 and 270 Act (likely to spread infection), or under the Bombay Police Act, 1951. Puri (ibid.) further mentions that *kinnars* are booked under the public nuisance (Sections 268 and 290 IPC) and Sections 7 and 8 of the Immoral Traffic (Prevention) Act of 1956 and these criminalizes *hijras* soliciting having sex in public places and not under Section 377 (UNDP 2010). There is no stringent action taken against rape on a transgenders and many of these sexual assaults goes unreported and unaccounted (Puri ibid.).

The HIV/AIDS intervention programmes have opened spaces for *hijras*, *aravanis*, and transgenders to work in NGOs and CBOs (Kalra 2011) on HIV/AIDS and transgender rights.
issues. The UNDP (2010) report highlights that skilled transgenders are denied employment opportunities because of their transgender status. However there are examples of few transgenders who have had created an impact through media activism.

Not only socio-economic problems, *hijras* also face problems in exercising their citizenship rights. Though *hijras* have contested and have had won local, state and national elections (Mukherjee 2004) and were Mayors and MLAs, in the absence of a national policy, they do not enjoy basic fundamental rights. Moreover those contested in elections in the woman category were turned down on the basis that they were not biological females (UNDP 2010).

Kamla Jaan was elected as the first eunuch mayor of Katni, Madhya Pradesh (Chakravorty 2007). She resumed her position in the year 2000 but gave up in the year 2003. The reason was that the political opposition filed a petition at a lower court, and then later at the Jabalpur High Court stating that Kamla Jaan had lied about her gender. The opposition won the case stating that the election had been illegal.5

Here the binary position of the body was brought into question and it was set as a parameter for eligibility to contest and take part in election. The body became problematic because of its gender non-conformity, and it was excluded from a political process which is one of the political rights of an Indian citizen.

Some basic rights denied to *hijras* include ration (family) card, Right to vote (Bhan 2006; UNDP 2010; Kalra 2011), right to marriage, child adoption6, opening a bank account and many other fundamental (transgender) rights. UNDP (2010) lists some of the legal issues faced by transgenders in India such as legal recognition of their gender identity (difficulty in getting legal recognition as a woman or a transgender woman), inheritance, wills and trusts, immigration status, employment discrimination, and access to public and private health benefits. The change of name and gender on the credentials is also an issue. The sex assigned at birth mentioned on their birth certificate and other school/college documents do not match with the gender identity and hence transgenders are denied admission in colleges for higher education.

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5 Shabnam Mausi too became India’s first *hijra* MLA in the year 1999 from the state of Madhya Pradesh (Chettiar 2009).
6 Some *hijras* adopt children and look after their education, marriage etc. However child adoption procedure for *hijras* is not clear. The adopted children address them as mother or aunt or by any other feminine pronoun and not as father.
*Hijras* also face physical and sexual violence from police and local hoodlums/ extortionists due to the nature of their work. *Hijras* are harassed by police in many ways and many of these go unreported as they fear that their complaint will be seen as a false story (Puri 2008; UNDP 2010). According to a UNDP study in the year 2007 on MSM and *hijras* (n=75) 46 per cent reported forced sex, 44 per cent physical abuse, 56 per cent verbal abuse, 31 per cent blackmail for money and 24 per cent threat to life (UNDP 2010). In the NACO (2011) report 57 per cent respondents mentioned that they have faced violence from police, anti-social elements and others while in their profession. There are incidents of gang rape and domestic violence, clients force *aravani* sex workers for unprotected sex and some physically assault them after the sex act. Many of these violent episodes and violation of transgender rights go unreported.

According to a NACO (2011) survey, 41.2 per cent transgender/ *hijra* were not accepted by their family members due to their gender status, 75.2 per cent of the respondent’s family mentioned that the transgender/ *hijras* status was not accepted and as a result they were forced to leave their parents house, because of this 48.8 per cent were drop-outs between 6th-12th standard, and 18.4 per cent remained illiterate.

### 1.3.1. Health situation.

Apart from these socio-economic and political issues, *hijras* also face health problems such as STI/ HIV/ AIDS, sexual health, mental health, alcohol, and substance abuse UNDP (2010). The HIV prevalence rate among transgender (*hijra*) sex worker in Mumbai (in the year 2005) was 40 per cent and in Chennai was 45 per cent (NACO 2011). Some of the common health problems faced by *hijras* include obesity, blood pressure, diabetes, heart problem and urinary tract infection (Pisal 2006; Ranade unpublished).

Kalra (2011) highlights that the mental health issues of *hijras* are largely ignored. Some of the mental health issues faced by *hijras* include coming out (about their sexual identity) and dealing with family pressures. There is very little research done on the mental health of *hijras*. There is lack of knowledge on the prevalence of mental illness, help seeking behaviours, pathways to mental health care, coping mechanisms and methods of dealing with stress and anxiety.

The health seeking behaviour of transgenders is very poor. *Hijras* do not visit government hospitals fearing stigma and discrimination, harassment and lack of sensitivity among health care staff and counsellors (Pisal 2006; Ranade unpublished). Lot of money is spent in private
hospitals and clinics. Ranade (unpublished) in her study has highlighted that *hijras* in rural and urban areas rely on self-medication or *hakims* (traditional medical practitioners) for STI treatment.

Castration is of utmost importance in the life of a *hijra* (Kalra 2011). The process of emasculation is known as ‘*Nirvan*’ (Krishna and Gupta 2002; Reddy 2006; Kalra 2011). In the process of castration male genitals are removed surgically by unqualified quacks (Ranade unpublished; Winter 2009) or in a traditional method performed by *daima/ dai amma/ thaiamma* (an older *hijra*). In the traditional method no anesthesia is given. There are many health risks associated with castration. It is a common belief among *hijras* that emasculation by *thaiamma* (in a traditional method) will make a *hijra* more beautiful like a woman (Chakrapani 2009). Because of unsafe and unhygienic non-surgical procedures *hijras* develop post-operative urological complications. Pisal (2006) mentions that because of the urological complications there is blockage of the urination path and reproductive tract infection and *hijras* go for a second operation to rectify problems associated with mutilated genitals.

There is also a hierarchy of operated/ non-operated (castrated/ non-castrated) status (Reddy 2006) within the *hijra* community. Castrated *hijras* are highly respected as compared to non-castrated ones. Within castrated, those who have done in a traditional method are highly respected as compared to those who have gone to quacks. SRS is hardly available to many transgenders in India (Winter 2009). One of the reasons is the heavy expenses associated with proper SRS.

From a legal perspective, castration (either by force or by voluntary) is illegal (Bakshi 2004) under Sections 320 (Puri 2008; UNDP 2010), and under Section 322 of the Indian Penal Code (IPC) ‘emasculating’ (castrating) can be punished under Section 325 of the IPC. Even if it is a voluntary emasculation the doctor is liable for punishment and the person undergoing emasculation can also be punished for ‘abetting’ this offence. However under Section 88 of the IPC there is an exception made in case an action is undertaken if good faith (if the person undergoing emasculation gives consent to suffer that harm).

There is a changing trend in castration pattern and many *hijras* and MtF now opt to go for sex change operation. In many western countries insurance plays an important role in access to

7 Winter (2009) highlights that *hijras* undergo a crude and hazardous procedure which includes castration and penectomy which does not include construction of a vagina.
8 Emasculation is considered as causing ‘grievous hurt’ to somebody.
transgender health care services and especially for SRS. Ehrbar et al. (2010) mentions that because of transsexual is diagnosed as a mental disorder, there is insurance coverage for SRS in many western countries. Health insurance coverage helps to provide effective treatment to transgenders and hence public and private health insurance should include medically necessary transition treatment.

However so far in India there is no provision for any life or health insurance schemes for *hijras* and transgenders. The reason ranges from lack of knowledge, inability to pay premiums or not able to enroll in insurance schemes because of their ambiguous sex/ gender status (UNDP 2010). The Life Insurance Corporation (LIC) agent training given to transgenders in Tamil Nadu is a good initiative for transgender employment. However it is not clear whether transgenders can automatically get insurance as a female because of their male anatomical sex which does not match with their ambiguous gender identity.

### 1.2. HIV/ AIDS and Hijra & Transgender/ Transsexual Activism In India

In the late 1990s, the (former) deputy Municipal Commissioner Mr. G.R. Khairnar formed a core group of *hijras* transgenders to help him in his raids on brothel (Chakravorty 2007). Along with brothel raids, Mr. Khairnar had also initiated few transgender welfare and development activities. Few transgender activists after working with Mr. Khairnar initiated their own CBO for transgender welfare and development and received funds for HIV/ AIDS intervention programme among the *hijra* community. This act of a government officer working for transgender welfare and development was highly publicized by media and since then and after that transgender CBOs have mushroomed in various parts of India.

Thus in the late 1990s there were funds available for HIV/ AIDS intervention projects among *hijras* and since then there is a visibility of transgender activism and many transgender and *hijra* groups have raised their voices through various collectivization (Bhan 2006; Mahajan 2008). HIV/ AIDS intervention among *hijras* is an important event for opening an entry into the closed *hijra* community.

According to a study by APCOM (2008) the largest concentration of CBOs in India are seen in the states of West Bengal and Tamil Nadu followed by Karnataka. Transgender activism has a very strong history in the states of Maharashtra, Tamil Nadu, and West Bengal. These states also have high numbers of transgender CBOs/ NGOs. One of the reasons for this is

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9 I had an opportunity to work with Mr. Khairnar in his transgender welfare projects.
because transgender community is more organized and mobilizes community members for rights and services in these states.

Though transgender welfare activities and rights activism have had their origins in Mumbai and there were isolated transgender voices from various states either collectively or through organizations working for sexual minorities, the state of Tamil Nadu remains an exception. Tamil Nadu is considered progressive in terms of transgender welfare and development.

Various transgender welfare reforms are introduced and implemented in Tamil Nadu. The state was first state in India to form a Transgender Welfare Board which has government officials, *aravani* and MtF transgender activists, and non-transgender advocates as members. The Board has introduced various transgender welfare schemes across Tamil Nadu.

Some of the welfare schemes introduced in Tamil Nadu include free housing scheme; free Sex Reassignment Surgery (SRS) in the Government Hospital (GH); admission in (co-education and men’s college) government colleges with full scholarship for higher studies; issuance of various documents; formation of Self-Help Groups (SHGs) to develop the habit of savings; and Income Generation Programmes (IGPs) as alternative sources of livelihood through the SHGs (Government of Tamil Nadu 2006, 2008, 2009, 2010, 2011a, 2011b, 2012).

All these welfare schemes all-together have not been introduced by any other state in India. Many states in India have slowly started introducing similar transgender welfare schemes (UNDP 2010, nd; *Daily Bhaskar* 2012; *Deccan Herald* 2012; *The Hindu* 2012; Vishwanathan 2012).

1.3. *Aravani* Activism in Tamil Nadu

Till a few years ago *aravanis* were mocked, harassed, and ridiculed in public places in Tamil Nadu. Their rights were highly violated. Violence against transgenders went unreported and unaccounted as the police did not co-operate with them when they went to the police station to file a complaint against the accused. They were also not allowed to live in villages and as a result many migrated to bigger cities, neighbouring states, and Western-and-North Indian states (and elsewhere in India) in search of a safer place for gender transition and livelihood options. The *hijra* community in the Western-and-North Indian states became a safe haven for *hijras* from the South Indian states.
HIV/AIDS intervention programmes carried out in Tamil Nadu by mainstream NGOs in the 1990s highlighted MSM and transgender issues. Beauty contests as part of HIV/AIDS awareness programmes organized during Koovagam festival brought attention to the situation of transgenders and violation of their rights.

Depiction of transgenders as beautiful bodies through beauty contest for HIV/AIDS awareness among MSM and transgender population was a strategy used by mainstream NGOs to attract and pull larger crowd which also included cisgender men who were primarily the clients of MSM and transgenders engaged in sex work during their visit to attend Koovagam festival event. The beauty contest also became a platform for raising transgender rights issues.

The body of transgender is also in question in Tamil Nadu because of expression of varied trans(gender) identity/ identities such as aravani, transgender/transsexual, and ‘woman’ category, which do not necessarily fall under the traditional hijra ‘third identity’ definition. This differentiates Tamil Nadu aravanis/ MtF transgenders with hijras in the Western-and-North Indian states.

There is a rise in transgender activism in Tamil Nadu from past one decade (Govindan and Vasudevan 2011) and a rights-based approach is used by multiple actors in Tamil Nadu to raise transgender issues.

As a result, the marginalized transgender population in Tamil Nadu has received a positive response from the state as compared to their counterparts in the Western-and-North Indian states.

What prompted transgenders to raise their voice collectively? Why did the state government respond to transgender queries? Why were transgenders efficient in raising transgender rights issues? These are some questions that laid foundations of the research study.

The state of Tamil Nadu has a history of various movements such as the non-Brahmin, dalit, tribal (adivasi), and women’s movement (Pillai 1982; Pandian 2000; George 2002, 2003).

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10 The term cisgender was coined by the transgender community to define people whose gender was matching with their birth sex (Drescher 2009). A biological male will identify himself a man, and a biological female will identify herself a woman.
The state government has responded to these movements and introduced and implemented various welfare reforms for these diverse groups.

Many political parties in Tamil Nadu follow a liberalist view of Periyar (Pillai 1982) who strongly advocated for women’s empowerment and also upliftment of the marginalized population. E. V. Ramsamy Naicker known as Periyar was the founder of the Dravida Kazhagam (DK), a social movement which emerged during the British colonial rule in the 1930s (George 2003). Periyar connected women’s subordination to colonial oppression, and also focused on Brahmin dominance in religious, economic, and political affairs which were responsible for women’s and Tamil subordination. What Periyar also advocated was for women’s equality by promoting their education, paid work and widow remarriage and also argued against caste-based arranged marriages.

Periyar’s ideology let to expression of women’s issues through initiatives such as the ‘Self-Respect movement’ (George 2003) which organized Self-Respect marriages in which rituals and symbols of women’s enslavement to men were rejected. The movement also advocated for divorce, widow remarriage, abortion, equal rights, and women’s control over reproductive process (Dhara 2006).

Political parties such as the DMK and many others in Tamil Nadu are followers of Periyar’s teachings (Pillai 1982; Dhara 2006) and it was during their political rule that various transgender welfare reforms were introduced and implemented.

The research study commenced with an assumption that transgender development in Tamil Nadu was an outcome of transgender rights activism and a strong advocacy and lobbying by various transgender collectives within the transgender movement. Further, the nature of the state in Tamil Nadu also is an area of enquiry.

While looking at the historicity of transgender movement in the West, it is realized that it emerged (especially the United States) in the 1960s and 1970s and addressed various transgender issues ranging from access to transgender health care services (especially SRS), transgender rights and legal aid, issues related to identity, change of sex in legal documents (Meyerowitz 2004; Currah 2006; Denny 2006; Minter 2006), problems associated with medicalization and pathologization of transgenderism and transsexualism, the medicalization of transsexualism and access to hormones and sex reassignment surgeries, transgenders emergence as a self-conscious social and political group, it was this labeling of transsexual as a distinct group that gave rise to the politicized transgender movement. The 1996 riots at the
Stonewall Inn in New York, U.S. is recognized as the birth of gay rights movement, the class-based conflict over the gender created a divide and resulted in the emergence of the transgender movement (Minter 2006). Transgender rights and access to health care services formed the core set of values for political mobilization in the west.

However in India, HIV/AIDS have a larger contribution for LGBT activism. With the introduction of HIV/AIDS programmes in India in the late 1990s, LGBT activists were able to indirectly address the issue of their human rights violations (Bhan 2006) and queer politics became visible in India from past decade both in academic as well as within the activist circles (Narrain 2011).

Within an Indian context, George (2010) discusses decriminalization of Section 377 by the Delhi High Court’s decision in July 2009 and explains the important role and efforts of the LGBT community in India within the social movements’ context which forced the state to bring policy changes and social transformation.

Historicity of queer movement in India also exhibit expression of identity politics and issues related to same-sex orientation. According to Creating Resources for Empowerment in Action (CREA) (2006: 1) the queer movement in India is visible since the 1990s and voices were raised for rights of hijras and same-sex desiring people. In the late 1980s gay issues in India came out from the closet and many groups were formed to highlight gay rights issues, there was a rise in LGBT activism since the 1990s and many organizations have contributed in raising issues of sexuality, gender, and rights (Misra 2009).

LGBT issues fall under the New Social Movements (NSM) because of bringing the question of identity and the binary especially related to sex and gender, and sexuality. Few examples of NSM include feminist movement, the gay movement, the environmental movement, movements among racial minorities and anti-nuclear-weapons efforts (Plotke 1995).

Traditionally social movements follow a Marxist framework or non-Marxist framework of analysis (Plotke 1995; Monteiro and Lingam 1998; Singh 2000, 2001; Crossley 2002; Shah 2002, 2004). The traditional social movements are closely associated with orthodox Marxist ideologies like class-party-socialism schemas. There is a rise in NSM and they lack ideologies of (old) social movements (Plotke 1995). The discussion on NSM raises the question whether it has an element of class conflict within it (Crossley 2002). Secondly, Marxist discourse on social movements was basically focused upon issues of state and
revolution, while it is argued the NSM focuses its attention on change in culture, symbolic
and sub-political domains (either collectively) and also by way of self-change.

NSM are also new because of their extensive cultural concerns. There are two elements in
NSM, one is culture and the other definition and maintenance of identities for individuals.
Identities are central in NSM and that is what differentiates between old social movements
and NSM (Plotke 1995; Singh 2000; Crossley 2002).

According to Bernstein (2005) identities play an important role in social movements.
Identities form an important part of understanding the relationship between personal
experience and political stance. Bernstein (ibid.) mentions that there are three approaches to
defining identity politics: Neo-Marxist Approaches to Identity politics; The New Social
Movement Approach to Identity Politics; Social Constructionist, Postmodernist, and
Poststructuralist Approaches to Identity Politics.

The first approach discusses issues related to power and class equality. In the second
approach NSM does not fit into the Marxist frameworks and is not exactly around social class
issue. The NSM theory tries to explain mobilization, i.e. why and when people act. NSM are
new because they address issues outside the class concept and economy, but they also tend to
seek recognition for new identities and lifestyles. Furthermore NSM does not explain the
reason of culture to became a major focus of movement concern (since the 1960s), and the
relationship between culture and politics in the new movements. At the same time NSM does
not properly answer the relationship between identity, culture and the political economy.
That is the reason why social constructionism, postmodernism and queer theories have
evolved.

Within the third approach Social Constructionist, Postmodernist, and Poststructuralist
Approaches to Identity Politics, Bernstein (ibid.) mentions that identity politics is a response
to the emergence of the ‘queer politics’ which emerged in the late 1980s and as a function of
postmodernist and poststructuralist theories. Identity politics emerged from these theories.
Queer politics emerged as a response to the lesbian and gay movement which was dominated
by the middle-class gay white male and single-issue, gay-only politics. What was also
important in the queer politics was the deconstruction of the hetero/ homo binary.

There are three different analytic levels to understand the concept of ‘identity’ within the
social movement paradigm. Firstly, a shared collective identity is necessary for mobilization
of any social movement. Secondly, expressions of identity can be deployed at the collective
level as a political strategy, which can be aimed at the traditionally thought as cultural and/or political goals. Thirdly, identity can be a goal of social movement activism, either gaining acceptance for a hitherto stigmatized identity or deconstructing categories of identities such as gender binary (man/ woman), sexual identity (gay/ straight), and racial identity (black/ white) (Bernstein 2005: 58). What is important in a social movement is an identity. Without identity issue the social movement will not have a meaning.

Identity politics is not a theory of social movements as it does not explain the emergence of social movements or other aspects of their development. However it has emerged through scholars’ efforts to identify a particular political practice that is cultural, symbolic, or psychological in nature (which is different from class politics and class movements). What is important to study while studying identity politics is to understand the influence of social, political and cultural factors of those identities. Relationship between experiences, culture, identity, politics, and power should be analyzed while studying identity politics.

Identity also involves ‘me’ and it is related to individual’s sense of self and also collectivization (Cerulo 1997). Collectivization involves ‘we-ness’ of a group which is based on similarities or shared attributes around which group members come together. These qualities are considered ‘natural’ or ‘essential’ characteristics of a group. The social constructionist approach to identity rejects the category of collectivity. Social constructionism is mostly around gender identity. Gender reconstructionism problematizes the gender-sex link. The body as a biological entity i.e. both male and female have biological distinctions which are purely seen from a reproductive lens. Gender is inscribed on the body. Postmodern-identity scholars have deconstructed established identity categories. What postmodern gender theorists have done is they have challenged the dualistic, oppositional nature by which gender is traditionally framed. Apart from social constructivists, queer theorists have also advocated for an inclusive approach.

Queer theorists focus on heterosexual and homosexual identity construction, and they focus on the identities that are excluded on the basis of this hetero/ homo duality i.e. the bisexual or transgender identity. Identity politics is also related to formation and experiencing of social class. For e.g. groups such as animal protectionists, environmentalists, health conscious, homeless, the 1960s student counterculture etc. demonstrate collectivization on the basis of collective definition, signification, and power. In this process what identity-based movements do is they act rather than react, they fight to expand freedom and not to achieve it, and they mobilize for choice rather than emancipation.
In this process identity politics create ‘new social movements’ in which collective initiatives are self-reflexive and sharply focused on the expressive actions of collective members. What identity politics and NSM suggest is a self-conscious ‘collective agency’. As identities emerge, movements emerge as collectives coordinate action, group members develop offenses and defences, insulate, differentiate, mark, cooperate and compete, persuade, and coerce. The shift of identity has moved from individual to the collective. Identity is a source of mobilization rather than a product of it. Actors, collectives, and broader social institutions should be seen through lived experiences and the culture and rituals associated with such experiences.

The discourse on social movements in India is very new and has not been encouraged by many (Shah 2004). Though the topic of social movements comes under political science, the focus of political scientists in India had been on political institutions such as the executive, legislature, parties and election. However the agenda of the politics of masses had been largely ignored by political science academia.

Mostly political scientists and sociologists do not view ‘social’ and ‘political’ movements as two different entities. Sociologists view that social movements have objectives that concentrate to bring about a political change. There is always a debate whether the ‘political’ aspect is included in the social movements as the term social movement itself is self-explanatory which means it has a ‘social’ element in it (Akoijam 2010).

Social movements include a sense of belongingness and hence collective identity becomes a precondition for the creation of new and different identities, or provides a continuous rise of mobilization under the same heading (Diani 1992).

However there is no clear cut or precise definition for social movements (Shah 2002, 2004). Terms such as ‘organization’, ‘union’, ‘analytic movement’, ‘empiricist movement’, ‘lobbying or advocacy’ etc. are used by few to define the social movements (Shah 2002). Some important components of social movements are objectives, ideology, programmes, leadership, and organization. However Shah (2004) mentions that objectives of movements change during the development of the movement, and some movements do not have objectives at all.

Some other important aspects of social movements include leadership (Shah 2002), characteristics, strengths and limitations of the movement (Frank and Fuenes 2002). According to Singh (2000) movements are not made but they are launched and led by leaders.
Leadership plays an important role within the movement (Shah 2004) and there are various issues related to leadership within a movement. There are also issues related to membership within social movements (Bhatia 2005). There are various style and strategies used by social movements to address issues. Some strategies explained by Bhatia (2005) include strikes, dharnas, roadblocks, gheraos etc. There are also external and internal factors that give rise to social movements (George 2010). Moreover social movements are of temporary nature and rarely link up with autonomous movements (Mohanty 2004) and the conjoining of the movements dissolves once the issues are resolved or addressed.

Women’s movements related literature reveal that the women’s movements in India have questioned oppression of woman and have addressed wide range of issues such as literacy, employment, discrimination, water, electricity and participation of women in general democratic struggle, violence against women, sexual harassment, safe contraception and amniocentesis (Ray 1999), issues addressed by rural women and ‘autonomous’ urban feminists highlight patriarchy, class, ‘inclusion’ and ‘exclusion’ of women’s group on the basis of caste and communal groups, dowry, rape, domestic violence, mass organization, issues related with tribal women and their livelihood and the environment (Omvedt 1993), campaigns, experiences, struggles, ideological debates and functioning of the women’s movements, relationship of women’s movement with the left parties, inclusion of issues such as caste, gender and ecology in the literature, the strengths and limitations of the women’s movement, issue based campaigns, women’s studies various campaign groups, support groups, research groups, organizations engaged in income-generation programmes, party-based women’s wings, voluntary organizations, self-help groups, empowerment groups etc. (Lingam 2002), questions raised on existence of an overarching women’s movement in India, fragmented campaigns that can be called as a movement, definition of women’s movement on the basis of women’s participation or only those who raise only women-specific issues, formation of alliances with individual groups, separate petitions filed and separate demonstrations over an issue, distinction between gender and sex, understanding the category ‘woman’ as problematic (Akerkar 1995). However women’s movements in India have failed to capture issues related to gender fluidity and inclusion of transgender (especially related to MtF as a woman within its agenda).

The participation of MtF transgenders during the Seventh National Conference of the Women’s Movements in Kolkata in the year 2006 and the questions raised on inclusion of MtF transgender within the women’s category (Mahajan 2008), exhibit the gender ‘woman’ problematic for MtF transgenders.
Various MtF transgender bodies which do not confer to the traditional hijra jamaat system in India give an opportunity to discuss their inclusion and exclusion within the category woman (a gender construct), and this research study raises many of these issues related to transgender activism, transgender rights, transgender movement emergence, transgender identity and body politics, aravani subculture, and their welfare and development in the state of Tamil Nadu, India.

The following are research objectives of this research study:

The research study aimed to understand the ‘why’ and ‘how’ of transgender (hijra/aravani) activism in Tamil Nadu, India. The research study commenced with an assumption that transgender welfare and development was result of strong advocacy and lobbying by the transgender movement. The objective of research study was to explore the origins of transgender movement and issues around it.

The research study thus broadly interrogates the three key areas for discussion viz: transgender body politics; transgender collectivization/ mobilization; historicity of transgender movement emergence in Tamil Nadu.

In the thesis within the Tamil Nadu context the terms hijra, aravani and transgender are used interchangeably for MtF people. One major reason for using the terms interchangeably was because it emerged from field data and also because authors have also described the interchangeable nature of these terms (Govindan and Vasudevan 2011). The research is focused only on MtF transgenders. FtM transgenders are not covered in the research study.

1.4. Research Questions

Following are the research questions:

1. What is the historicity of transgender activism, collectivization, and movement emergence in the state of Tamil Nadu?
2. What are the objectives, ideology, activities, programmes, leadership, membership, and inclusion and exclusion issues within the transgender movement in Tamil Nadu?
3. What are the campaigns, experiences, struggles, strengths, and limitations of the transgender movement in Tamil Nadu?
4. What is the character of transgender movement in Tamil Nadu and what is unique about the Tamil Nadu state that makes it possible for politicians and the executives to respond?
5. What are the various transgender welfare schemes introduced and implemented in Tamil Nadu?

6. What are the various trans(gender) identities that exists in Tamil Nadu and discussion around preference for identity/identities?

7. In what ways does bringing the transgender body to the core of the debate question the construction of gender and the binary?

1.5. Research Design

The present study is a qualitative study using an exploratory and explanatory research design. This kind of design is used to gain familiarity with a phenomenon that is not adequately explored and explained. The focus of the study was to explore and explain ideas and insights through Group Discussions (GDs), in-depth unstructured interviewing method, in-depth structured interviewing method, content analysis of Government Orders (G.O.s), filing of Right to Information (RTI) Act, 2005, and referring other secondary sources.

1.14. Sources of Data Collection

The research study consisted of primary respondents which included hijras/aravanis and MtF transgenders/transsexuals. Secondary category of respondents (multiple stakeholders/actors) included cisgender men and women (also referred as non-transgender advocates at some places in the thesis) from various backgrounds such as NGOs, academicians, researchers, human rights activists, and civil society members (and also few government officials) engaged in raising transgender issues.

Secondary sources of data included internet sources, newspaper articles, NGO reports etc. RTI was also filed with various state government departments. Documentary films were also seen.

1.15. Selection of Sample

There is no exact data available at the National level to know the universe of transgender population. Transgender population in Tamil Nadu is scattered, many migrate to other states, districts, and cities. In the absence of the universe and also because of the inaccessible transgender population a purposive sampling method was used. A snowball sampling technique was also used to contact primary and secondary respondents.
The researcher has prior experiences of working with few leading aravani and MtF transgender/ transsexual activists. The researcher contacted them for getting details of important key primary and secondary respondents. A snowball sampling technique was also used for secondary respondents. Heads of many transgender CBOs suggested names of secondary respondents. Similarly many secondary respondents also suggested names of few transgender CBOs working at grassroots level in villages and small towns.

Transgender population is not easily accessible, and there were chances of refusal to participate in the study. Aravanis at the grassroots level were hesitant to share information because of the jamaat system where they are not allowed to share details about their community. Hence the researcher had no other choice other than to interview only those people who were willing to participate in the interview process according to their convenient time and setting. A written and signed consent was taken from both primary and secondary respondents.

Non-transgender activists and advocates were selected on the basis of their experiences of working with the transgender community in Tamil Nadu. Many state officials were transferred to other departments and hence many state officials were not available for the interview. However the G.O.s gave a clear picture of various transgender welfare schemes introduced in Tamil Nadu. The G.O.s are easily accessible on the Government of Tamil Nadu website http://www.tn.gov.in/policynotes/default.htm.

The researcher visited Chennai, Tiruchirappalli, Madurai, Salem, and Villupuram districts and interviewed hijras/ aravanis and MtF transgenders/ transsexuals and community members. Leading MtF transgender activists from the districts Kancheepuram, Tothukkudi, and Coimbatore were interviewed in Chennai as they were available in Chennai for the interview.

Secondary respondents (non-transgender advocates) were basically working and living in Chennai and many of them have had experiences of working with various transgender groups from across Tamil Nadu.

The researcher managed to interview 32 MtF individuals (hijras, aravanis, and MtF transgenders/ transsexuals) through one-to-one interview and group discussions. Out of these 32, one-to-one interviews were conducted with 14 individuals and four group discussions with the remaining 18 MtF community members (group discussions were conducted in the districts of Salem, Madurai, Villupuram, and Tiruchirappalli).
Interview with cisgender people included nine individuals and two state officials. Table 1 gives details of districts visited and numbers of respondents interviewed. In Table 2 details of both primary and secondary respondents are given.

**Table 1**

**Districts visited and number of respondents**

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name of Districts</th>
<th>Hīra / aravani, and MtF Transgender/ transsexual activists</th>
<th>Group Discussion (GD) with community members from various transgender CBOs</th>
<th>Non-transgender advocates (Cisgender people)</th>
<th>Government Officials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Chennai</td>
<td>7</td>
<td>-</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>2</td>
<td>Coimbatore</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>Kancheepuram</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>Madurai</td>
<td>1</td>
<td>1 group discussion (5 members)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>Salem</td>
<td>1</td>
<td>1 group discussion (5 members)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td>Thoothukkudi</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>7</td>
<td>Tiruchirappalli</td>
<td>1</td>
<td>1 group discussion (4 members)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>8</td>
<td>Villupuram</td>
<td>1</td>
<td>1 group discussion (4 members)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>14</td>
<td>4 group discussions (18 community members participated)</td>
<td>9</td>
<td>2</td>
</tr>
</tbody>
</table>
Table 2
Details of primary and secondary respondents

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Date of Interview</th>
<th>Name of respondent/s (changed)</th>
<th>Organization</th>
<th>District</th>
<th>Type of respondent</th>
<th>Type of interview</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sep 8, 2010</td>
<td>Ms. Shilpa</td>
<td>Action Aid</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Working in the area of HIV/AIDS, transgender rights, and minority communities</td>
</tr>
<tr>
<td>2</td>
<td>Sep 10, 2010</td>
<td>Dr. Jayaraman</td>
<td>KMC Hospital</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Government officer, Head plastic surgeon for SRS in the Government Hospital</td>
</tr>
<tr>
<td>3</td>
<td>Sep 13, 2010</td>
<td>Mr. Kumar</td>
<td>Lions Club</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Civil society member, initiated few welfare activities for transgenders, wants to do social service for marginalized population</td>
</tr>
<tr>
<td>4</td>
<td>Sep 14, 2010</td>
<td>Mr. Prakash Raj</td>
<td>Praxis</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Working in the area of HIV/AIDS, transgender rights, and minority communities</td>
</tr>
<tr>
<td>5</td>
<td>Sep 14, 2010</td>
<td>Mr. Kannan</td>
<td></td>
<td>Chennai</td>
<td>Primary</td>
<td>GD</td>
<td>Self-identified MSM</td>
</tr>
<tr>
<td>6</td>
<td>Sep 14, 2010</td>
<td>Ms. Sunita</td>
<td>Centre for Counselling</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Counselor, experience of working with LGBT community</td>
</tr>
<tr>
<td>7</td>
<td>Sep 15, 2010</td>
<td>Mr. Gurumurthy</td>
<td>SAATHI (ex-staff)</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Experience of working in the area of HIV/AIDS</td>
</tr>
<tr>
<td>8</td>
<td>Sep 17 &amp; Nov 15, 2010</td>
<td>Prof. Sita</td>
<td>Stella Marie's College</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Professor, experience of working with transgenders through theatre activities</td>
</tr>
<tr>
<td>9</td>
<td>Oct 21, 2010</td>
<td>Mr. Ravi (IPS)</td>
<td>Police department</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Government Officer. Introduced the term ‘aravani’ for hijras during Koovagam festival</td>
</tr>
<tr>
<td>10</td>
<td>Oct 29, 2010</td>
<td>Ms. Sheela</td>
<td>President, THAA</td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, Transgender Welfare Board member</td>
</tr>
<tr>
<td>11</td>
<td>Oct 31, 2010</td>
<td>Ms. Shaheen</td>
<td></td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Individual transgender rights activist</td>
</tr>
<tr>
<td>12</td>
<td>Nov 1, 2010</td>
<td>Mr. Senthil</td>
<td>ICWO</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Working in the area of HIV/AIDS, experience of working with MSM and transgender issues and other minority communities</td>
</tr>
<tr>
<td>13</td>
<td>Nov 2, 2010</td>
<td>Ms. Nikhila</td>
<td></td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender/ transsexual rights activist, first transsexual in India to host a TV chat show, media celebrity</td>
</tr>
<tr>
<td>14</td>
<td>Nov 3, 2010</td>
<td>Ms. Reshma</td>
<td>SIP+</td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, working for PLHA, Transgender Welfare Board Member</td>
</tr>
<tr>
<td>15</td>
<td>Nov 14, 2010</td>
<td>Ms. Ramya</td>
<td>Former President of THAA</td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, experiences of working for HIV/AIDS among transgender population</td>
</tr>
<tr>
<td>16</td>
<td>Nov 15, 2010</td>
<td>Mr. Balaji</td>
<td>SIAAP</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Individual interview</td>
<td>Working in the area of HIV/AIDS for MSM, transgender and other high risk groups</td>
</tr>
<tr>
<td>Sr. No.</td>
<td>Date of Interview</td>
<td>Name of respondent(s) (changed)</td>
<td>Organization</td>
<td>District</td>
<td>Type of respondent</td>
<td>Type of interview</td>
<td>Comments</td>
</tr>
<tr>
<td>---------</td>
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</tr>
<tr>
<td>17</td>
<td>Nov 16, 2010</td>
<td>Ms. Madhu</td>
<td>TRA</td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, Transgender Welfare Board member</td>
</tr>
<tr>
<td>18</td>
<td>Nov 16, 2010</td>
<td>Ms. Rosemary</td>
<td>Anbu Trust</td>
<td>Thoothukkudi (interviewed in Chennai)</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, Transgender Welfare Board member</td>
</tr>
<tr>
<td>19</td>
<td>Nov 17, 2010</td>
<td>Ms. Sumitra</td>
<td>Shahodhari Foundation</td>
<td>Chennai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, theatre personnel</td>
</tr>
<tr>
<td>20</td>
<td>Nov 18, 2010</td>
<td>Ms. Gayatri</td>
<td>ACE</td>
<td>Gingee, Vilupuram</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, Transgender Welfare Board member</td>
</tr>
<tr>
<td>21</td>
<td>Nov 18, 2010</td>
<td>Ms. Rupa, Ms. Savitri, Ms. Pushpa, Ms. Suhassini</td>
<td>ACE</td>
<td>Gingee, Vilupuram</td>
<td>Primary</td>
<td>GD</td>
<td>Members of ACE, aravanis at grassroots level</td>
</tr>
<tr>
<td>22</td>
<td>Nov 21, 2010</td>
<td>Ms. Sneha</td>
<td>Sudder Foundation</td>
<td>Kancheepuram (interviewed in Chennai)</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist, theatre personnel</td>
</tr>
<tr>
<td>23</td>
<td>Nov 23, 2010</td>
<td>Ms. Kanamma</td>
<td>AIAARC</td>
<td>Tiruchirappalli</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Aravanji jommavat nayak, head of AIAARC, Transgender Welfare Board member</td>
</tr>
<tr>
<td>24</td>
<td>Nov 23, 2010</td>
<td>Ms. Latha, Ms. Ponammal, Ms. Vimla, Ms. Kamla</td>
<td>AIAARC</td>
<td>Tiruchirappalli</td>
<td>Primary</td>
<td>GD</td>
<td>Members of AIAARC, aravanis at grassroots level</td>
</tr>
<tr>
<td>25</td>
<td>Nov 24, 2010</td>
<td>Ms. Jaya</td>
<td>Challenge Foundation</td>
<td>Salem</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist</td>
</tr>
<tr>
<td>26</td>
<td>Nov 24, 2010</td>
<td>Ms. Radhika, Ms. Ambika, Ms. Sunita, Mr. Pramod, Ms. Shankari</td>
<td>Challenge Foundation</td>
<td>Salem</td>
<td>Primary</td>
<td>GD</td>
<td>Members of Challenge Foundation, aravanis at grassroots level</td>
</tr>
<tr>
<td>27</td>
<td>Nov 25, 2010</td>
<td>Ms. Renuka</td>
<td>Bharathi Kannama Trust</td>
<td>Madurai</td>
<td>Primary</td>
<td>Individual interview</td>
<td>Transgender rights activist</td>
</tr>
<tr>
<td>28</td>
<td>Nov 25, 2010</td>
<td>Ms. Rekha, Ms. Savitri, Ms. Sridevi, Ms. Champa, Ms. Sultana</td>
<td>Bharathi Kannama Trust</td>
<td>Madurai</td>
<td>Primary</td>
<td>GD</td>
<td>Members of Bharathi Kannama Trust, aravanis at grassroots level</td>
</tr>
<tr>
<td>29</td>
<td>Nov 28, 2010</td>
<td>Ms. Asha</td>
<td>CSI Church</td>
<td>Chennai</td>
<td>Primary</td>
<td>Telephonic interview</td>
<td>Individual transgender rights activist</td>
</tr>
<tr>
<td>30</td>
<td>Dec 18, 2010</td>
<td>Dr. Rakesh</td>
<td>Researcher</td>
<td>Chennai</td>
<td>Secondary</td>
<td>Telephonic interview</td>
<td>Professional doctor, experiences of working on HIV/AIDS and LGBT population, and researcher</td>
</tr>
</tbody>
</table>

1.16. **Data Collection Method and Tools for Data Collection**

The following research methods and tools were used for data collection:

- **In-depth unstructured interviewing method** – (by using an Interview guide)
- **In-depth structured interviewing method** – (by using an Interview guide)
- **Group discussion (GD)** – (by using a Set of Questions)
A detailed **in-depth unstructured interviewing method** was used to collect data from primary respondents. In order to be focused on the research objectives and research questions an interview guide was used to conduct the interviews. All interviews were tape recorded and a signed consent form was taken from the respondents before commencing the interview.

An **in-depth structured interviewing method** was used to collect data from secondary respondents. In order to be focused on the research objectives and research questions an interview guide was used to conduct the interviews. All interviews were tape recorded and a signed consent form was also taken.

A Set of Questions was used to conduct group discussion with community members from transgender CBOs.

**1.16.1. Process used during the group discussions.**

The researcher assured the group members that confidentiality and anonymity will be administered. Permission of the group to tape record the discussion was taken. The entire process of group discussion was administered by the researcher. The researcher travelled alone to all the districts and moderated and took notes of the group discussion sessions. Community members from CBOs showed their interest in the study and shared their problems, experiences, and personal stories.

**1.17. Data Analysis**

All one-to-one interviews with both primary and secondary respondents and group discussions with community members were tape recorded. After completion of interview process, a verbatim transcription of all tapes was done by the researcher. The researcher has previous experiences of working in a non-voice based Business Process Outsourcing (BPO) and knew the process of transcription. She used those skills to transcribe the audio tapes. The audio tapes were transcribed manually by using the Express Scribe software. Few telephonic interviews were also administered. All the interviews were conducted by the researcher in English, Hindi, and Tamil languages. All Hindi and Tamil language interviews were translated and transcribed in English.11

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11 The researcher can read, write and converse in English and Hindi language. The researcher can only understand and converse in Tamil language. This was a challenge for the researcher. However it became a positive strength of the researcher to converse and collect data in the field.
Data analysis was done manually. No data analysis software was used to analyze the data. Transcribed data was coded according to major concepts and themes. After coding the data, raw data under specific headings were clobbered together. Relations between concepts and their significance with other concepts emerged while analyzing and interpreting the data.

In the pre data collection stage, the researcher focused on the ‘why’ and ‘how’ aspects of transgender activism, collectivization, emergence of transgender movement, and transgender welfare and development. However in post-data collection stage while analyzing data, themes such as nature of the state, dynamics of aravani jamaat system, various trans(gender) identities, multiple transgender sexualities and transgender body politics emerged as important point for discussion.

1.18. Limitations of the Research Study

There is a dearth of literature on transgenders within an Indian context. One of the major limitations of the study was getting primary respondents for the interviews. The researcher completely relied on the interview tapes of both primary and secondary respondents to understand the field situation. However secondary sources such as newspapers, internet sources, G.O.s, RTI, documentary films etc. helped throughout the research study.

Primary respondents extended their complete co-operation during the data collection process. Similarly secondary respondents also extend their support and co-operation, but there were some aspects of the transgender community that the secondary respondents were not aware about. Some examples include the jamaat system, issues related to transgender sexuality, government schemes introduced and implemented etc.

1.19. Thesis Chapters

In Chapter 2 ‘Labels and Definitions’, historicity of the western term transgender is given and the difference between transgender and transsexual is explained. Medicalization and pathologization of transsexualism as a mental disorder by the American Psychiatric Association (APA) and the World Health Organization (WHO) is critiqued. Importance of Sexual Orientation and Gender Identity (SOGI) of LGBT from a human rights perspective as mentioned in the Yogyakarta Principles (An Activist’s Guide to The Yogyakarta Principles 2010), and the United Nations (UN) Declaration (2011a; 2011b) is also highlighted.
Link between feminism, Queer Theory, and transgender theory is shown. Though feminist discourse critiques the heteronormative nature of sex, gender, and sexuality construction, it has failed to capture the lived sex, gender, sexuality, identity, and bodily experiences of transgenders.

Moreover, Queer Theory is critiqued for its misrepresentation of transgender issues as it is more focused on gay and lesbian binary. Recent transgender theory captures issues related to transgender gender, sexuality, and identity through lived experiences of transgenders/transsexuals and this is what differentiates transgender theory with feminist critique on sex, gender and sexuality and Queer Theory.

Transgender Theory gives an opportunity to understand the politics of transgender/transsexual identity which challenges the hegemonic assumptions about gender and also transgender body politics. Social and cultural construction of sex and gender has been a long feminist debate and transgender bodies in India help us to understand fluidity of transgender bodies from a religious-cultural background.

In Chapter 3 ‘Aravani Activism, Collectivization and Movement Development’, various aspects of the emerging transgender movement in Tamil Nadu are highlighted. The historicity of transgender activism, collectivization, and movement formation in Tamil Nadu is explained. Transgender movement-related aspects such as aims and objectives, programmes and activities, various events of transgenders collectives are also given.

Transgender welfare reforms and transgender welfare schemes introduced and implemented by the Tamil Nadu state are explained in detail.

In Chapter 4 ‘Aravani Movement, Jamaat, and the State’, response of state/nature of the state and its Periyar driven ideological perspectives is touched upon. Leadership vis-a-vis the aravani jamaat, and membership issues within various transgender collectives are explained. Inclusion and exclusion of members within various transgender collectives related to jamaat affiliation and transgender sexuality is also highlighted.

In Chapter 5 ‘Politics of Passing and Body Modifications’, issue related to preference for use of terminologies and various trans(gender) identities are covered. Issues related to multiple transgender sexualities are also explained. Multiple positionality of various trans(gender) identities and multiple transgender sexualities within the aravani jamaat and mainstream society are explained. Reflection on transgender body modification and its relation with
transgender passing as a woman are also explained. Body modification and transgender passing as a woman can be viewed within the class-cultural context. The social construction of transgender body as a ‘woman’ and its incompleteness in the absence of procreation is critiqued. Non-heternormative citizenship of transgenders in Tamil Nadu is also explained.

In Chapter 6 ‘Summary and Conclusion’, I summarize the discussion and conclude the research study.