

CHAPTER VI

SUGGESTION

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6.0 SUGGESTIONS

The findings of the study shares evidence to presence of severe Transgender Identity Stigma, Sex Worker Stigma and HIV related Stigma among the Aravanis. It also portrayed that income and acceptance by family members affected their quality of life. Importance of social support, good self-resilience and need to address the mental health issues were some of the major findings of the study. It is glaring that stigma has a great impact on the mental health of the respondents and mental health is closely associated to condom usage. Having these findings in hand the researcher has tried to put forth suggestions that could minimise these three stigmas faced by the community, improvise the support system and mental health. It is not only essential to work at the individual level but also with the families, educational institutions and the society at large. The researcher has presented the suggestions in the four major levels, the Micro, Meso, Exo and Macro level

Micro Level

- During childhood, transgender children face fundamental unease and dissatisfaction with biological sex. This results in anxiety, depression and restlessness. Self-stigma related to one's sexuality or gender identity lowers one's self esteem and can lead to disturbance in mental health. Emotions such as confusion, anger and shame, self-stigma needs to be addressed.
- Respondents of this study did experience self-induced stigma. So measures should be taken to promote self-acceptance. This would work towards decreasing self-stigma, and thus the self-resilience of the individuals would be enhanced. As they struggle to come to terms with their gender identity, they should be provided with appropriate, comprehensive and non-judgemental counselling and information so that they can understand about themselves. The management of schools can do this by appointing counsellors.

- Government should initiate steps to ensure that every school had appointed counsellors to work closely with the transgender children. If needed the CBOs can also render a hand and can send their trained counsellors. CBOs can work with the college having department of Social Work, who in turn can work in close association with the students.
- Psycho Education programs can be organised to assist the children to accept the changes in their body. These programs would escalate the acceptance of their body esteem. Adolescent transgender face personal conflicts and distress, this can be dealt by planning intervention programs. This would sharpen their coping mechanism and prepare them to face stress of living as transgender. Their ability to cope up with the stigma faced by them at home and bullying at school should be enhanced.
- Special workshops and session could be organised to shape their coping skills and problem solving skills.
- Motivation to continuing education is very essential.
- Therapies like art therapy and storytelling can be used to assist the children in being expressive. They should be exposed to yoga and meditation.
- For individuals who are living alone or with their community friends, steps should be taken by the CBOs to contact their parents and try to place them back in their homes. Placing them back at home may create situation suitable to continue their education.
- Even after leaving the homes, transgender do have desire to continue their education. They are unable to do so as they do not have the necessary documents and the gurus do not have the financial ability to support their education. CBOs should work with government and provisions should be made to admit the students with minimum documents and free education could motivate the community to empower themselves with education.

Meso Level

Families

- Respondents during their in depth interviews shared that it is lack of awareness on the parents' side and inability to face the stigma from the society, the parents were not supportive of the transgender children. So it is very essential to address the negative emotions of the parents.
- Awareness and information should be given for parents to support their gender-nonconforming or transgender children, setting aside their discomfort and deeply heal normative attitudes.
- The siblings of the transgender children should also be sensitised. They can act as a great support to the transgender children. Information on these children could be made available in health settings (paediatric, child development specialities and also with general physicians), as well as through educational institutions.
- The ASHA workers and ANMs could be trained to address the informational needs, psychological support needed for the family members of transgender. This would minimise the abuse faced by the children at their homes. Thus leaving of homes can also be minimised.
- Parents and siblings should be alerted to the risk of the children facing bullying and other violence outside the home. They also need to be aware of cognizance of the escalation in stress faced by the transgender child as he/she grows into adolescence.
- As the child grows he/she experience dysphoria when he/she develops secondary sexual characteristics at odds with his/her sense of gendered self. The social worker/counsellors in school should assist the parents to handle the pressure they receive from the society.
- Parent energy should be positive and thus support the transgender children in dealing with the stigma and dysphoria. This could reduce the conflict faced

by the children and assist in continuing their education. Existing government forums such as the Anganwadi Centres and Self Help Groups may be oriented on transgender issues and involved in providing information to parents of gender- non-conforming youth.

- The model of parents' support groups facilitated by the Centre for Counselling in Chennai should be intensified. The support groups would help parents
 - i. to overcome misconceptions, understand the difference between sex, sexuality, gender and intersex variation
 - ii. realize that they, as parents are not alone
 - iii. that their children's gender-nonconformity is not the result of bad parenting
 - iv. be able to work through their negative feelings of anger, disbelief, shock or disappointment in a safe space.

Schools

- All the respondents in the qualitative interview shared their negative feelings towards school environment. It is very essential to create a facilitating environment to continue their education and to lead their life in a dignified manner. Work should be done more closely with transgender community and different educational committees like school management committee and college management committees. Proper sensitization and capacity building programmes about the issues and needs of transgender children should be organised in the school for both the teachers and the students on the issues faced by the transgender children. Dealing with these children needs understanding them and their needs. Sessions for teachers could facilitate this process.
- Schools should ensure safety of the transgender children as they may face physical, mental and emotional violence. Appointing of school counsellors is

a must for every educational institute. Schools could provide separate washroom as one of the steps to provide stress free environment.

Gurus

- Guru plays a major role in influencing the life of the transgender in regard to occupation and life style. Sensitisation workshops could be organised for the gurus in bridging the gap between the transgender and the biological parents.
- Steps could be taken by gurus with help of CBOs to place the transgender back in their families. They could play a major role in sensitizing the parents. Gurus can guide their Chelas and many of them influence the condom usage pattern of Chelas. This would reduce acquiring of new infections as well as spreading of infections.

Community Based Organisations (CBOs)

- They should work with the educational institutions and involve the students in supporting the transgender empowerment. This would not only reduce the stigma but also make the student community become active in playing a role in reducing stigma in the society.
- They should widen their network with all NGOs, which work in the communities. These NGOs could be able to identify transgender children and can refer CBOs, who in turn could work on the prevention.
- CBO could work with the private sectors and thus create new opportunity for employability of the community. CBO could tie up with private hospitals or NGOs (e.g. SCARF, Banyan) which work on mental health. This would be of assistance to the individuals who have confusion over their gender identity, depression, anxiety, sexual abuse, gender based violence, domestic violence.
- The counsellor working in CBO should be trained to identify suicidal thoughts and to address these thoughts to prevent suicides.

- Gender based violence and Partner violence was common in this community. CBO should sensitize the general community to reduce stigma which in turn would reduce violence. At the same time individual should be taught to handle these situations.

Trained Counsellors

- Aravanis reported inconsistent or lack of condom use with male regular partners when compared with male casual or paying partners. This needs to be addressed.
- While the HIV programmes seemed to have created awareness among Aravanis to use condoms with casual and paying partners, as trust and intimacy are some of the reasons behind non-usage of condoms with male regular partners. This not only puts them under risk of HIV, but also may place the male partners and their family to risk. Interventions need to explicitly address these issues and promote condom use with all types of partners.
- Counsellors need to explore both partners' specific and context-specific reasons for inconsistent condom use and accordingly tailor sexual risk reduction counselling.
- CBOs can provide training program for mental health professionals (e.g. counsellors, social workers, psychologist and psychiatrists) to increase their abilities to work with transgender youth. Mental health care training to be provided to professionals to recognize and treat transgender. CBOs should work with police department to enable them to understand the different issues faced by transgender and in prevention of sexual abuse.
- Interventions among transgender community mostly involve BCC model. BCC model states that an individual is seen as solely, seems to ignore or not taking account of the contextual factors such as the interpersonal factors and structural factors. Thus improving sexual communication skills and condom

negotiation skills, changing the structural factors such as legal barrier would minimise risky behaviour.

- Transgender are often involved with direct interventions and contributions by health care providers, judicial officials, the criminal justice system and others who are involved with the process of transition and gender recognition. Therefore, it is important for the CBOs to build meaningful partnerships with individuals in a vast array of capacities in order to successfully realise their rights.
- Hospitals could provide more transgender friendly environment. All medical and the para medical staff members should be made sensitive to the needs of the transgender. Separate wards and washrooms should be provided to the transgender.
- Currently Rajiv Gandhi Government General Hospital and Kilpauk Government Hospital provides free SRS. Thus individuals seeking SRS are forced to wait for a long time. Government hospitals also request for documents.
- Many transgender do not have the requested documents. This forces them to visit quack if not visit the senior transgender to opt traditional method as they do not request for any document. The respondents also felt that the waiting period for their turn in the government hospital was also long, as only two government hospitals offer free SRS. This can be prevented if all the government hospitals are able to provide free SRS. Collaborative work with de addiction centres could be fruitful to individuals who wish to quit substance abuse.
- When it comes to occupation, majority had taken up begging or sex work. So banks can play vital role in empowering them. Banks should encourage entrepreneurs by providing loans and make the community sustainable. Transgender women have good physical strength and courage and thus can

be employed as cab drivers for women during night shift. They can be appointed as physical fitness instructors for women.

- Helpline which already exist for career guidance and online placement support can be intensified. A telephonic helpline can be set up to provide the information regarding opportunities related employment, jobs, existing schemes of the government, financial schemes of banks. The helpline can also work as crisis management centres to record complaints of any harassment at work place and report it to the concerned agencies for necessary actions.

Development of Entrepreneurship

- This program could include imparting of knowledge, confidence and skills for entrepreneurship development and functional education. Simple maths, language and life skills can be given to the community. It should be planned in such a way to improve their income and microfinance activities, market understanding, market linkages, retail and business development strategies.

Exo Level

- Social support has shown to act as cooling agent against confusion, isolation, bullying, stigmatisation, anxiety, depression and sexual risk. Efforts could be taken by the CBOs and the government to sensitise the public on the challenges faced by the transgender community. Reduction in stigma and discrimination would assist in the inclusion of the transgender in the main stream.
- Absence of stigma and discrimination would reduce the stress on the family. Majority of the parents fail to accept the transgender children due to the fear of stigma faced from the society. This could reduce the transgender children to leave their home. This could facilitate the continuation of their education.

- Mass media can be one major tool in reducing the stigma among the public. Well known political leader, media person and sports persons could be involved in sensitising the public on the challenges faced by Aravanis.
- Within their Aravani community they are being discriminated based on one's HIV status, engagement in sex work, SRS status and marital status. Community based organisation could take proactive steps in addressing these issues. Solidarity should be promoted within the community. Society should be made aware of the sexual diversity and changing social norms.

Macro Level

- A chapter on Transgender can be included in the adolescent education curriculum in the school to sensitize the larger society on Transgender. This can be effective step to address stigma /discrimination at the school.

Establishment of anti- discrimination cell

- Respondents shared that they were scared of schools due to the discrimination showed by the students and the teachers. So, Anti-Discrimination policy in schools and colleges are needed to prevent discrimination of students on the basis of their presumed or actual same sexual orientation and gender. Similarly anti-discrimination policy against sexual minorities can be introduced in health care setting and work places.
- All the educational institutions/universities should establish an anti-discrimination cell to monitor any form of discrimination against the transgender community. On the line of strict anti-ragging cell, there should be zero tolerance towards any incidence of the discrimination or complaints.
- 'Orinam' is a support and advocacy group for transgender and other sexual/gender minority group in Chennai. This intervention include formation of groups of transgender children for meetings, holding film screenings, setting up of resource centre, augmenting libraries with books and audio-visual materials on transgender issues, holding periodical

sensitization events and adopting policies for preventing sexual harassment and bullying of transgender children.

- Qualitative study reveals that education is the very powerful tool that can empower the respondents. State and Central Education Board (ICS/CBSE) and the University Grants Commission (UGC), National Council for Vocational Training (NCVT) and other relevant authorities should be encouraged to evolve a system to sensitize their schools/ universities/ educational institutions with respect to the need of the community and mainstream them in to the system.
- Government schemes which are mentioned below can be made flexible and it can be adapted to assist the transgender

Government Schemes

- ***Sarva Shiksha Abhiyaan (SSA)*** - This is a scheme which offers free and compulsory education up to the age of 14 is the responsibility of the state. Proper instructions should be issued to states and districts level to include the transgender community under Economically Weaker section (EWS) category to provide them necessary benefits as per the Right to Education Act (RTE). State level data can be collected to assess the gaps. Advocacy with the concerned authorities at the state/district level could make special provisions for the community. Efforts to increase awareness and community mobilisation on SSA program in the context of RTE is vital.
- ***Rashtriya Madhyamik Shiksha Abhiyaan. (RMSA)*** - RMSA aims to widen access to SC/ST women. Schemes like Model schools and ICT @school can also assist the Aravanis. The financial incentive could also be given. This scheme could be made available to transgender community.
- ***Vocalization Secondary Education*** - This sponsored scheme would enhance transgender employability and to could provide alternative for those pursuing higher education.

- ***Adult Education-Sakshar Bharat*** - This could be expanded to give different focus – life skills and meeting other felt needs of the community e.g. life skill, coping mechanism, counselling etc.
- ***Jan Shiksha Santhan*** - Development of community friendly customized pedagogy for skilled based learning. They do not provide just skill development, but link literacy with vocational skills and provide large doses of Life Enrichment Education. This could be integrated with other projects for the community. Special directives can be issued to have special provision for the community.
- ***Open Schooling*** - The community members can continue their education while doing other things. There are courses for dropouts to finish their schooling (XII) and then opt for higher education through institutional based education or distance education.
- ***Distance education*** - This can be made useful medium for continuing education.
- There is a need to harmonize different schemes available for children to make them suitable and accessible to transgender children. The Juvenile Justice Act (JJA) should address the concern of the transgender children and should be suitably modified/amended.
- Develop advocacy, social mobilization and communication strategies at various levels such as society, transgender community, and government to address the structural barriers to improve utilization of existing educational schemes/courses and create an enabling environment for the community.
- Government could arrange for fee-waiver, fee-reimbursements, scholarships, free textbooks, free hostel accommodation and other facilities at subsidized rates for students belonging to this group in order to make higher education and professional education accessible by the community.

- Special coaching should be provided at free of cost to the candidates for competitive examinations and National Eligibility Test (NET) examination.
- Swarnajanthi Shahari Rozgar Yojana, Urban Self-Employment Programme and Urban Wage Employment Programme could be made available. Formulating National Health Policy for sexual minorities that also address mental health needs is essential. India's 12 Five year plans articulate that health and livelihoods of lesbian, gay, bisexual and transgender (LGBT) people must be addressed. Thus, there is a need for a specific national policy to respond to the health (especially mental health) need of sexual minorities. In the meantime, the existing or the forth coming national health policy needs to specifically articulate how the government will address the mental health needs of sexual minorities.
- ***Indian Penal Code:*** According to section 317 of the IPC: Abandonment of child is punishable offence under Section 317 of the IPC if the child is abandoned under the age of twelve years. However, the abandonment of the transgender children takes place usually between the age of twelve to eighteen years. The Ministry of Home Affairs (MHA) may be requested to consider enhancing the age of child for this offence to eighteen years.
- Some of the other forms of discriminations experienced by Aravanis are legal marriage, lack of provision for adoption, rights to property. The right to marry is contingent on the question of gender with only men and women entitle to enter in to the relationship of marriage. There is also a heterosexual specificity to relationship of marriage with only men entitled to marry women. As the community is recognized as third gender, technically one stands disentitled from entering into relationships of marriage until and unless there is simultaneously an amendment of the Hindu Marriage Act, It should be noted that the Christian Marriage Act and Special Marriage Act recognizing the third gender as capable of entering into marital relationships.
- ***Rights of adoption under the Hindu Adoption Act:*** (Section 7) any male/female of sound mind and not a minor has the capacity to take a son or

daughter in adoption. Again unless there is an amendment to this law there will be no possibility of this right accruing to those of the third gender. Inheritance- Again the law is clearly gendered. The India Succession Act which governs the devolution of property among Christians is less clear. Interestingly the statute only uses the language of survive children without getting into the notion of gender of the child.

- ***Labour Law-Employees Compensation Act 2011-*** The definition of a dependent who is entitled to compensation of the employee is gendered. Insurance Law- In terms of the understanding of both family as well as dependents, the categories of gender are inescapable. As the person is classified as third gender the individual will not be considered as spouse, daughter, a son or a widow effectively disentitling the person from any benefits under the said Act. It is very essential to make the necessary amendments.
- Government need to work on the gaps that exist between that the welfare schemes and transgender community. Government need to make the CBOs and the community members aware of the available welfare schemes and should also assist them in getting the necessary documents that are necessary to utilise the welfare schemes.
- Respondents shared about the stigma faced by them in the health setting. This needs to be addressed at the earliest. Discrimination showed by the health setting staff members affect the treatment seeking behaviour of the respondents. They also felt that doctors do not understand their special medical needs. Chapter on the special medical needs of transgender should be included in the medical syllabus.
- Government of Tamil Nadu has taken many initiatives to bring the transgender to the main stream, but it should be noted that there is a wide gap between the schemes and the accessibility by the respondents.

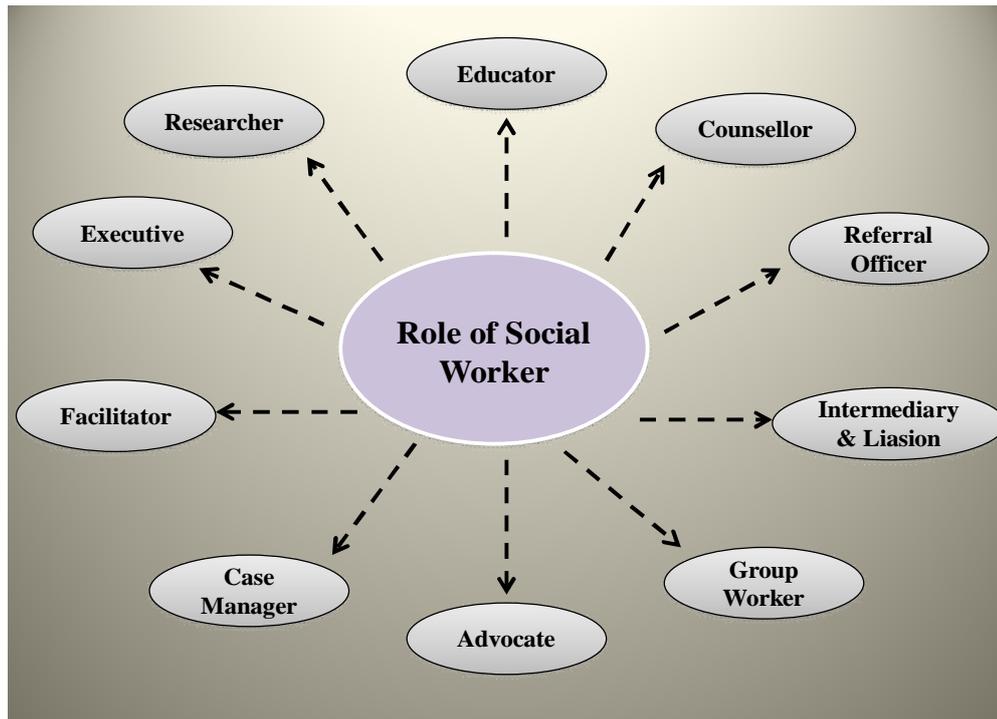
- Research should be done to analyse these gaps and necessary steps to be taken to minimise the gap and thus make the welfare schemes accessible.
- Many of the schemes were not accessible to the community as they were not equipped with the required documents. Government should assist the community to create or have access to the required documents.

Research

Generate more data/information to identify, understand the problems related to various aspects of their life, and help frame policies through research and academic programmes that would bring an effective and long-term change in their lives. More efforts are needed by researchers, government and NGOs to work in collaboration to explore ways to combat HIV, particularly in places where their legal rights are not respected. Initiatives should be developed in partnership with the transgender community and in combination with a range of behavioural and structural interventions.

Role of Social Worker

Social workers pursue social change adhering to the tenets of social justice, particularly with and on behalf of vulnerable and oppressed individuals and groups of people (**NASW Code of Ethics, 2008**). Social workers should equip themselves with knowledge on the sexual minorities and their challenges. This enables better understanding of the community and also their needs. Assistance is required both by the individual who is transgender and by the family. The individual needs information about his sexuality, handling of emotional trauma, guilt, shame. Social workers should assist the individuals through the schools or CBOs. Social Workers can take up roles of educator, counsellor, referral officer, intermediary, group worker, advocate, case manager, facilitator, executive and researcher.



Roles of Social Worker

As an *educator*, a social worker can provide information about sexuality, stress management, positive life style choices, safe sex practices and treatment. They can also provide crisis interventions, brief and time limited therapeutic intervention through which a client is helped to learn to cope with or adjust to extreme external pressure.

Social Workers can also provide individual and family counselling as a *counsellor*, in which they help the person to discuss issues with other family members. Just as clients themselves must learn to cope, so must significant others and family members. Their feelings and fears must also be elicited so that they can be addressed.

Social Worker can take up the role of *intermediary and liaison*, between groups especially when working with parents, NGOs and government. They can help the clients to get connected with the needed resources and services. Aravanis may need services concerning health, income maintenance, housing, mental health care and legal assistance.

Social Workers as *referral officers* may refer clients with HIV/AIDS and substance abuse to support group, where they can identify themselves with others who are undergoing similar problems. The support group would eventually help in reducing the feeling of isolation and loneliness. Additionally, such groups provide excellent channel for gaining information on how others have coped with similar problems.

Social Workers can also facilitate support or educate groups by serving as group workers and keeping the group focused on pertinent issues.

Advocacy may be necessary for several reasons. Advocacy can target unfair treatment when Aravanis are stigmatised, discriminated, denied services, jobs, housing. Advocacy can also be used to seek necessary resources such as health care or financial assistance when it's not readily available. By acting as advocates, social workers can provide critical services to people with AIDS by helping them gain quick access to financial resources, housing, legal, medical and mental health services. As part of advocacy, workshops need to be organised for college and university students. Sensitisation is essential for Doctors, Industrial workers, the Police, Lawyers and Journalists.

In addition, Social workers can provide *case management* service to people living with AIDS. Care management involves assessing a client's needs developing plans to meet these needs, linking the client with the appropriate services, monitoring service delivery and advocacy – the act of stepping forward and speaking out on the behalf of clients in order to promote fair and equitable treatment or gain needed resources,.

The social worker can be a *facilitator* of programs in educational institutions between the teachers and parents. Also arrange for meeting within jammat, with NGOs, CBOs and banks for providing alternative employment.

The role of an *executive* is carried out by the social worker by involving in the planning of the activities of the tie up programme between the educational institution and parents.

Scope for future studies

In India, with the number of people disclosing their sexual orientation increasing it calls for additional efforts to find and summarise facts regarding the several facets of sexual minorities. This opens a lot of opportunities for research in the field.

- ✓ 'Scope of Social Work Intervention with particular reference to sexual minorities at school and college level'.
- ✓ 'Comparative studies on the services, functions, effectiveness, intervention programmes provided and the related out comes by different NGOs working with sexual minorities in different states'
- ✓ 'Challenges faced by the families and their coping strategies of Transgender communities'.
- ✓ 'Impact of discrimination on the spread of HIV among sexual minorities'
- ✓ 'Knowledge, attitude, behaviour, practice and network of transgender in different parts of the country'
- ✓ 'Impact of stigma on mental health'

6.1 CONCLUSION

Though this research portrays various types of stigmas, we cannot ignore those tremendous efforts taken towards recognition and social acceptance. In spite of these efforts, they remain invisible in this society. It is essential that Aravanis should enjoy their fundamental rights. This would safe guard them from physical, emotional and sexual abuse. Enhancing the safe environment not only minimise the individual risk but also reduces the risk of society as a whole. India must take more efforts to modify the current discriminatory laws and enact equal opportunity legislation on the basis of gender and sexuality.

Efforts should be taken at all level. It can include the efforts of the government, the society and the family. Stigma is greatest threat to self-esteem and mental health. The area of mental health needs more attention. Considerable attention is needed to strengthen the support system and also to sensitise the society. Acceptance of the transgender community not only minimises the stigma but enhances the quality of life and would bring a decline in the risk behaviour. This would enable to country to handle to HIV epidemic in an efficient manner.