

EXCLUSION AMPLIFIED

A REPORT

Covid-19 and the Transgender Community



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A REPORT

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It has been edited and reviewed by Jayna Kothari, Executive Director, CLPR

Acknowledgements:

We would like to thank all the Respondents who have given us their valuable time, energy, and patience despite the pressing conditions of this pandemic and their own personal commitments.

The Respondents: Anindya Hajra, Karthik Bittu, Daniel, Grace Banu, Kiran, Priya, Santa Khurai and Vyjayanti Vasanta Mogli

GiveOut provided financial support for the design and dissemination of the Report.

Cite as:

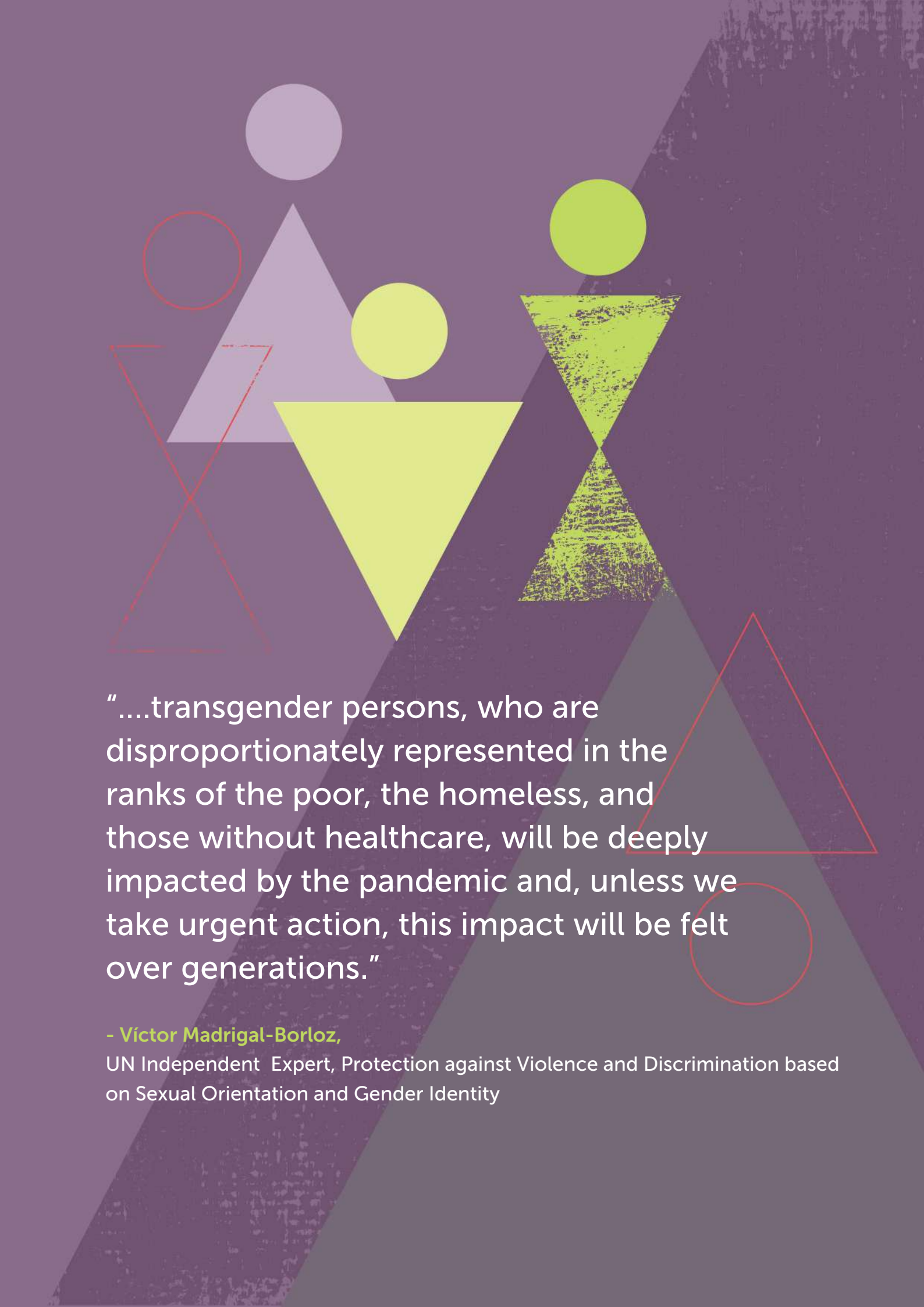
Vikramaditya Sahai, Aj Agrawal and Almas Shaikh, 'Exclusion Amplified: COVID-19 and the Transgender Community (CLPR, Bangalore, 2020).

Design and Layout: Design Brew, Bangalore

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An abstract graphic design featuring a dark purple background with large, overlapping geometric shapes. A prominent yellow triangle points downwards, partially overlapping a purple triangle that points upwards. To the right, a yellow triangle points upwards, overlapping a purple triangle that points downwards. A red triangle points upwards on the right side. Several circles in purple, yellow, and red are scattered throughout the composition. The text is overlaid on the lower-left portion of the graphic.

“...transgender persons, who are disproportionately represented in the ranks of the poor, the homeless, and those without healthcare, will be deeply impacted by the pandemic and, unless we take urgent action, this impact will be felt over generations.”

- **Víctor Madrigal-Borloz,**

UN Independent Expert, Protection against Violence and Discrimination based on Sexual Orientation and Gender Identity

SECTION I

Introduction

Trans and intersex persons are one of the most marginalised communities in India. It is no surprise then that when the lockdown to contain COVID-19 was announced on 24th March 2020 by the Prime Minister, hours before it was scheduled to begin, trans persons found themselves terribly unprepared for what was to come. After many extensions, the lockdown has only recently been lifted partially. In these months, the trans community has suffered enormously, yet there have been few attempts to ameliorate their condition.

Disasters, natural or otherwise cause widespread and pervasive damage to societies and the communities that constitute it. The social, economic and political impact of such disasters not only has immediate ramifications but is felt continually in the post-disaster reconstruction of a society.¹ For those communities that experience severe disenfranchisement even outside of a situation of disaster, the disruption is even more dire. For the transgender community in India, this has meant that the existing barriers in access to justice, healthcare, housing, food security and assertion of rights and dignity had become virtually insurmountable during this period.

There is irrevocable evidence that LGBTQIA+ minorities are disproportionately affected by natural and man-made disasters, conflicts and war which compound their pre-existing vulnerabilities and put them at risk of severe harm.² Gender identity-based-discrimination in particular, permeates into policy decisions during and in the aftermath of disasters, having a direct impact on the nature and

extent of the relief made available to transgender persons.³ Even before the Covid-19 pandemic, disaster management programs, governmental relief efforts and aid have been largely inadequate or inaccessible to trans persons. The 2004 Indian Ocean Tsunami that ravaged lives and homes in the Southern Indian Peninsula particularly impacted the *Aravani* and trans communities across Tamil Nadu who were completely excluded from post-disaster relief, rehabilitation or reconstruction packages.⁴ This holds true even today in the present time of the COVID-19 pandemic.

The right to life and dignity of trans persons, guaranteed by the *NALSA* judgment⁵, 2014, have been far from secured during this lockdown. Even as the lockdown has been partially lifted, trans persons have not recovered from its effects. As Víctor Madrigal-Borloz, the UN-appointed independent expert on protection against violence and discrimination based on sexual orientation and gender identity stated, *“transgender persons, who are disproportionately represented in the ranks of the poor, the homeless, and those without healthcare, will be deeply impacted by the pandemic and, unless we take urgent action, this impact will be felt over generations.”*⁶

This Report documents the specific vulnerabilities of the trans community in India in these times and suggests ways to address them. It is an attempt at presenting the needs, and rights of the trans community as enshrined in our constitution, to enable a just and dignified life during the COVID pandemic.

SECTION II

Methodology

This Report has been prepared by using qualitative interviews and secondary research. In total, we have conducted in-depth qualitative interviews with 8 trans and intersex persons from all across India. The Respondents are well-known trans and intersex persons' rights activists. An effort was made to ensure that they were from different regions geographically so that inputs could be received from experiences across the country such as from Maharashtra, Karnataka, West Bengal, Manipur, Andhra Pradesh, Telangana, Tamil Nadu and Delhi. The Respondents also represented trans and intersex persons from the intersections of caste and disability. We used a purposive sampling method where we identified each of the interviewees because our objective was not to obtain representational narratives but have the opportunity to interact with persons who were aware of collective concerns as well as the power dynamics which were likely to have affected their life experiences. We used a semi-structured interview method by having a set of guideline questions which were open-ended, allowing for the Respondents to share their personal experiences and expand on their perspective on access, equality and discrimination. The interviews were conducted over phone calls and video calls which were recorded with the verbal consent of the interviewees and translated by an internal translator where necessary. One interviewee responded through email. The inclusion of the Respondents' names, experiences and consequent publication of the Report has been done with the express consent of the interviewees.

The secondary literature review included a review of court orders, newspaper reports and news coverage available in the public domain. It involved the evaluation of COVID-19 governmental responses at the State and Central level in the context of addressing the needs of the trans community as well as the active efforts of civil society groups, activists and organizations seeking judicial interventions.

METHODOLOGICAL LIMITATIONS:

Due to the shortage of time, this report is based on qualitative interviews and secondary research. Owing to time constraints and with a view to having an immediate study detailing the problems of the trans community in the COVID-19 situation in India, a larger number of respondents could not be interviewed. Additionally, the internet restrictions in Kashmir posed a problem in getting access to Respondents from that region. Despite these limitations, common key findings have emerged from all the interviews which have been provided in the Report.

SECTION III

Background

Although COVID-19 had made its impact in late 2019, India took action against the pandemic only in March 2020. Starting with an initial single day “test” curfew on 22nd March, 2020; there was a sudden 21-day lockdown which was extended multiple times, with the complete lockdown remaining until 17th May 2020. Since then, there has been staggered lockdowns restricted to zones which have a high number of cases.

The lockdown was unprecedented in Indian history, with a sudden halt on the movement of 1.3 billion people. This, as reported on a daily basis, had a specifically high impact on migrant workers and persons from SC/ST communities. While the media glare focused on the mass exodus of migrant workers from urban spaces, food scarcity in certain regions of India as well as insufficient relief for the poor population, the issues of the trans community went largely underreported.

Although the pre-pandemic status of persons belonging to the trans community in India was already one of difficult conditionalities, this crisis amplified the economic and socio-cultural vulnerabilities faced by them.

Whether that was in access to justice, health, education, employment, food, housing or other services, the challenges to the community were specifically severe. Making small incomes through

mostly begging, sex work or in the informal sector, trans persons barely have enough to meet their basic needs let alone have savings that can carry them for weeks and months. To add to these woes, were unforeseeable natural disasters like the cyclone on the East coast and the exceptional powers given to the police in these times – which added to the vulnerabilities during this period.

The Government of India chose this lockdown as an appropriate time to invite comments on their Draft Rules to the Transgender Rights (Protection of Persons) Act of 2019. Multiple petitions (including one by CLPR) challenging this Act are currently pending before the Supreme Court of India. Despite this, the Government chose to invite comments on the Draft Rules, in utter disregard to the ability of the community and stakeholders to give their inputs in the midst of a complete loss of livelihood, indefinite lockdown and global pandemic.

This Report presents certain key findings on how the trans community was excluded and marginalised during this time by the State. Its aim is to portray the lived realities of trans and intersex persons from all over India and to capture some of the issues faced by the community during the pandemic. Trans persons responded by raising their voice against their abandonment by the state as citizens of the country. The call to the state was built on the belief of trans persons as equal and worthy citizens of this country and that as part of their dignity and rights. This perhaps was the most meaningful celebration of the NALSA judgement of 2014 which paved the way for the recognition of constitutional equality and dignity of trans persons in the country.

SECTION IV

Key Findings

The main issues raised during the COVID lockdown and the period that followed can be categorized broadly around the crisis of rations and food security, homelessness, devastation of livelihood, inaccessibility to healthcare and alarming increase in vulnerability to violence and abuse at the hands of society and State. These themes are explored further below:

(i) RATIONS AND FOOD SECURITY

“I would die of hunger before I would die of COVID.”

- Daniel

Due to the announcement of the lockdown only hours before it was to commence, there were no arrangements put in place by the government to help people access food and rations. Within a few days food, rations, medicines and essential items started drying up, leaving people to borrow and to call upon various organisations, collectives, activists to help⁷.

During the lockdown, several central and state government relief packages and efforts were deployed, almost none of which were targeted at trans persons or endeavoured to be accessible to the community. The *Pradhan Mantri Garib Kalyan Yojana* was announced to provide free rations and food grains, free LPG gas cylinders to the poor, and other benefits to health workers, migrant workers and others.⁸ This welfare scheme was not of much use to trans persons as most trans persons did not possess ration cards or other registrations and IDs

needed to avail these benefits. Trans persons who approached ration shops during the lockdown were denied free rations and subjected to harassment for not having their ration cards.⁹ Thus the main scheme for providing free food grains was completely inaccessible by the trans community as it was dependant on ration cards which a large number of them did not possess.

Some state governments and municipal authorities provided free ration kits. Free ration kits and cash relief of Rs.1000/- were issued to trans persons in Kerala¹⁰ & Tamil Nadu.¹¹ These ration kits did not cover the entire trans population in the States. Kerala only distributed kits to around 1000 trans persons. In Tamil Nadu these reliefs were only issued to trans persons who were able to produce transgender ID cards issued by the State government.¹² As Grace Banu pointed out, ultimately these free ration kits were only accessible to those trans persons living in cities or larger districts – effectively excluding rural trans persons. The limited ration kits were also issued only once or twice over a period of 52 days of lockdown.

Lack of ration cards: In a petition filed by Vyjayanti Vasanta Mogli, the Telangana High Court passed an order directing the State Government to ensure that the members of the trans community have ready availability of food grains, consumable items, and medicines as per their need and requirements, which are given to the members of the trans community free of cost and without insisting on the production of ration card/white card.¹³ The response of the State to this order was to provide free ration kits to trans persons through the police, rather than enable them to avail free rations from the public distribution shops under the National Food Security Act 2013, which are accessible even in remote areas. By providing free ration kits, which were given only once or twice during the 2 month lockdown, only a few limited number of trans persons received it. By making the police distribute ration kits with the media for photo-ops, few trans persons felt safe in accessing the welfare measures.¹⁴ According to official figures, Telangana has about 58,264 trans persons¹⁵ but only around 2000 of them received any free rations from the state. In Telangana, the State government also provided Rs. 1500 as a one-time cash relief.

In Karnataka, the urban local bodies were distributing free ration kits with 5 kgs rice and 2 kgs dal and this was given only twice during the lockdown which was hardly sufficient. The Karnataka State Government refused to provide free rations from the PDS shops. Due to an on-going high court monitored litigation, the Government agreed that those who did not have ration cards could collect free rations from PDS shops for 2 months of May and June alone.¹⁶ This ration provided by the government was terribly insufficient to meet the needs of trans persons for the length of the lockdown.¹⁷ Such measures are also ad hoc and do not make for sustainable relief which trans persons need. In places where the PDS and other state networks were functioning, Anindya also shared how the food distribution by the state was only up to a point and often in trying to reach great distances, it would disappear midway.

The Patna High Court in a PIL also passed an order directing that all welfare schemes framed either by the Central or State government should be implemented and no member of the trans community shall be deprived of Ration only on account of such status or not possessing the Ration Card.¹⁸ Similarly, the Jharkhand High Court directed the State Government to ensure basic necessities to trans persons during the lockdown and the Court ordered to provide immediate relief in the context for providing a meal to them.¹⁹ A petition filed in Kerala High Court in May 2020, sought relief for trans persons in form of guaranteed rations without the requirement of ration cards. In this case, the Court gave directives for the speedy issue of ration cards and gender identity cards and also directed district authorities to address other grievances of trans persons.²⁰

A similar issue of identity documents blocking access was faced by Daniel in Mumbai when she tried to access the relief but was told that it was exclusively for trans persons and not intersex persons. In July, more than 3 months after the lockdown, the central government announced that it would extend the PM Garib Kalyan Anna Yojana to provide free rations for those without ration cards till November 2020. LPG gas cylinders for cooking were not accessible at all, despite one cylinder being promised to be provided free under the PM Garib Yojana scheme as trans persons had not registered under the LPG scheme which again required a ration card for registration.

While there were many hurdles in accessing free rations from the government, a whole charity and relief apparatus had already sprung into action by citizens and civil society. Despite this, relief was hard to come by and short lived, if one could access it.

Karthik Bittu from Delhi confirmed that most relief work remained in the cities. For persons living in smaller towns and villages away from the cities, the only option was to transfer money which required bank accounts and access to internet which many

trans persons did not have. In regions of the country where internet access was difficult such as North East, the relief was limited. Grace Banu reiterated that the relief remained in the big cities and never made it to the rural areas. If it did make its way out of cities, it landed merely till the district headquarters. In the rural areas, especially Dalit and Adivasi folk were mostly left to their own devices and with no access to relief. Santa Khurai from Manipur shared how there were no trans-friendly lawyers she could access to file PILs in the High Court in order to ask the state to take cognizance of the deprivation she saw around her. In the absence of such pressure, relief has been abysmally low and restricted to the capital city of Imphal.

(ii) LOSS OF LIVELIHOOD AND INCOME

“With no livelihood most trans persons’ and communities’ lives came to a grinding halt.”

–Vyjayanti

According to recent data, 92% of the transgender population in India does not have access to regular employment.²¹ Most trans women rely on sex work, begging and *badhai-toli* for livelihood²². Trans men on the other hand rely on ad-hoc employment or setting up roadside shacks. Others almost exclusively work in the unorganised sector, depending on daily-wage categories of jobs, begging, manual labour and sex work.²³ Most of this work involves engagement with other people and public spaces and so trans persons found themselves without work as soon as the lockdown was announced. The physical distancing requirements, ban on weddings and gatherings and the complete lockdown, made these jobs untenable and unsafe, essentially cutting off the few sources of income available to transgender persons.²⁴ Those trans persons engaged in folk practices and cultural forms are mostly needed from March to May, which was also the period of the lockdown. They were thus left without any source of livelihood since the festival season passed with the lockdown in place.

Trans people who are from the migrant worker community, such as domestic workers, casual labour, dancers, lost their jobs. Households that employed trans people as domestic help dropped them immediately. Many knew that they could find jobs in assigned genders and made the difficult decisions to present themselves in assigned gender to find work, even though jobs were hard to come by. Daniel, shared with us that she relied on speaking in conferences and talks to make a little income to live by but the restrictions on mobility had left her without income and soon even these resources dried up. Trans women who were mostly engaged in sex work or begging had no source of livelihood. Grace told us that some members of the trans community had moved to online sex work who had access to internet connectivity and smart phones. Even those who moved online to do sex work were cheated by their clients and were often not paid.

Some trans persons who are lucky to have some form of employment at the base of the hiring ladder in retail shops found themselves working with 90% of their salaries cut. Many of these also have HIV and other medical needs and a meagre income was of no use in such situations.

In the absence of all forms of livelihood and earnings, receiving any cash financial package or even pensions from the state was not available. Kiran Nayak, a trans person with disability from Chikballapur stated that there were more than 4000 trans persons in their area who were struggling to make ends meet. Even with the High Court insisting that relief be provided²⁵, it had not reached their area. The Government had not released the social security pensions, though the amount given is rather meagre. Even disability pensions were not released in Karnataka. Priya shared how the trans community repeatedly reached out to the Bruhat Bangalore Mahanagara Palike (BBMP) for release of funds and also to the Deputy Commissioner to distribute the necessary relief urgently but there was no response.

"My biggest fear was just for the heightened police brutality for trans people found homeless or trying to access medicines."

- Anindya

"We had to beg for money to keep a roof over our head"

- Priya

"And one reality that is associated with this pandemic is fear, to manage this reality the community needs mental health counselling support which we are doing right now in Manipur"

-Santa Khurai

The Karnataka High Court thereafter passed an order directing that two months pension amount would be released to the trans community under the Mythri scheme in light of the COVID situation and persons who had not registered under the pension scheme could also register and receive the same.²⁶ Despite this order, not everyone received their pensions. In Manipur, many trans persons could not get the monetary support provided by the Ministry of Social Justice and Empowerment (MSJE) through the National Institute of Social Defence (NISD) due to the lack of proper documents. Moreover, this required fluency in banking and other related areas, skills lacking among many people in non-urban places. Activists wrote to several State and Central ministries and District Collector Imphal East and Thoubal, to track the process of the money transfer and status of the submitted list. However, they have failed to get any appropriate response from all these authorities. Upon intervention by trans activists, the Ministry of Social Justice & Empowerment provided Rs.1,500/- to around only 4,500 trans persons (less than 1% of the recorded trans population).²⁷

Before the lockdown period, a few trans women who had applied for employment in the police found themselves excluded, as the government hurriedly completed the recruitment on the pretext that more police personnel were needed for COVID duty, and the High Court refused to interfere with the recruitment process in light of the COVID urgency.

(iii) HOUSING & SHELTER

“We had to beg for money to keep a roof over our head”

- Priya

Safe housing and shelter have always been and continue to remain one of the most significant dimensions in the denial of rights to trans persons and the ultimate failure of the state to prevent social exclusion.²⁸ Most trans persons are either thrown

out of families at a very young age or they run away to lead their lives in their chosen gender.²⁹ As such, they rely mainly on rented accommodation. Due to large scale stigma and rampant discrimination, trans persons often pay much more than cis persons for the same accommodation. With no documents in place, these are almost never formal agreements and thus perpetuate the exploitation even further, with no remedies possible.³⁰

Due to the sudden and seemingly indefinite lockdown, a difficult housing environment became a full-blown crisis of homelessness, with multiple reports of transgender persons being denied entry to their usual places of residence.³¹ Even as governments asked landlords not to collect rent for some time³², this was never executed. Trans persons soon found themselves homeless when they could not pay rent. The harassment by landlords was rampant – sometimes with verbal threats and others by switching off essential services like electricity and water.

Many trans persons had to live together due to lack of housing, compromising on physical distancing and making themselves more vulnerable to the corona virus. Others found themselves in shelter homes which were already suffering under the weight of this unplanned lockdown. No adequate shelter homes were available or provided for by the government for trans persons who became homeless and needed temporary housing.

In urban areas, the marking out of areas as covid infected areas were often areas where trans people live. Anindya remarked that while the containment zones were lifted periodically, the bastis where most of the trans community was living, had been barricaded for months. There were whisper campaigns that these areas are particularly affected. Those who lived in colonies had a tough time too given how Residential Welfare Associations (RWAs) had set up so much surveillance and trans persons found themselves particularly scrutinised.

The East coast, especially West Bengal, was severely hit by Cyclone Amphan while the lockdown was in place³³. Adding to the deprivation, many trans persons lost homes and land they worked on to its devastation. Those near Sundarbans managed to save their lives but lost all their belonging and homes.³⁴ The loss of network made relief work also difficult. People found themselves in camps, with the COVID-19 still raging.

From an intersectional perspective, trans persons were already marginalized under the lockdown, but with the compounded effect of natural disasters like these, they found themselves abandoned and struggling to make sense and facing uncertain futures.

(iv) ACCESS TO HEALTHCARE

“HIV positive persons need proper nutritious food not just basic rations because their immunity is already compromised”

- Grace

Early on in the Covid-19 pandemic, the United Nations High Commissioner for Human Rights pointed out that in the inevitable fall out of the pandemic, governments must make sure that marginalized groups have unimpeded access to healthcare and that lockdowns and quarantine measures should be in strict compliance of human rights standards relating to health.³⁵ Similarly, UNAIDS identified key populations particularly vulnerable to the effects of the Covid-19 virus i.e. trans folx, particularly trans sex workers, who are immunocompromised due a high incidence of HIV.³⁶ Despite these recommendations and India’s protracted work on HIV prevention³⁷, the lockdown saw unprecedented inaccessibility to healthcare – particularly in regard to the availability of antiretroviral (ART) medication and access to ART Centres.³⁸

With the overloaded hospitals, HIV treatment and testing, hormonal treatment and gender affirming treatments for trans people were completely interrupted and not provided. Vyjayanti Vasanta Mogli characterized the lockdown as being particularly harsh on trans folx seeking ART treatments from private centres, fearing the stigma associated with registration at the government ART centres.³⁹

With loss of livelihood, trans persons were no longer able to afford access to private centres and had to go to the government treatment centres. Due to sharp rise in demand for healthcare workers, a number of ART Centres were understaffed making it difficult to register new persons. The effects of missing out regular dosages of ART medication has severe and fatal impacts on the lives of HIV positive persons, and the indefinite lockdown and containment zones created large gaps in treatment. Access to free HIV treatment at government hospitals was only provided for those trans persons who had registered with the hospital and not others. Many trans persons could not go to the ART centres due to the lockdown and were put at risk.

Many trans persons had to stop hormone medications because they were not affordable or accessible. Trans persons who had to go for other treatments such as dialysis could not go to hospitals as transportation was not available and often health centres were not open. Thus there was not just the worry of being able to resist the virus but even access to the medicines one needed daily for diabetes and blood pressure.

There have been no numbers released of how many trans persons were infected with the corona virus, and the concern that there are no quarantine centres or isolation wards in hospitals was raised by Vyjayanti

and Santa Khurai. Due to this trans persons who were infected were placed in quarantine centres with men, which made them feel extremely unsafe.⁴⁰ Gradually, in some states the government agreed to provide for wards within government hospitals for transgender persons.⁴¹ In Telangana it was done by way of a high court order and Kolkata also announced separate beds for transgender persons.⁴²

(v) MENTAL HEALTH

“And one reality that is associated with this pandemic is fear, to manage this reality the community needs mental health counselling support which we are doing right now in Manipur”

-Santa Khurai

The lockdown took a toll on people’s mental health in a serious way. Activists shared stories of helping trans and gender non-conforming persons get out of abusive situations at home. With the lockdown, Daniel expressed how a lot of trans people suffered because they could not express their chosen gender at home. Some people were outed in the middle of the lockdown and so had to be rescued from their abusive households. There was a lack of community around and people to talk to, which added to the anxiety and fear. A lot of people’s dysphoria worsened and with no access to salons or other services, many trans persons became suicidal. Due to stay-at-home restrictions, many LGBTI youth are confined in hostile environments with unsupportive family members or co-habitants. This can increase their exposure to violence, as well as their anxiety and depression.

Both Anindya and Santa testified to a looming and deep sense of uncertainty and insecurity for many trans persons. The suicide of a trans person in Mumbai⁴³ and another in Kerala⁴⁴ are the evidence of both the material and psychic abandonment that trans and queer persons were struggling against.

The latter was particularly illuminating of the routine violence of familial spaces – forcing outlawed conversion therapy on the one hand and isolating any networks for support, on the other.

With no access to friends, lovers and community; many trans persons found themselves particularly lonely. Access to consistent internet is a privilege in many parts of the country, without which many trans persons could reach out to no one in difficult times or even to have a conversation.

(vi) POLICE BRUTALITY, VIOLENCE & STIGMA

“My biggest fear was just for the heightened police brutality for trans people found homeless or trying to access medicines.”

- Anindya

Structural violence whether by institutions or police against trans persons is well documented in India.⁴⁵ Trans persons routinely face human rights violations in the form of harassment, abuse and physical and sexual violence – most of which go unreported and undocumented.⁴⁶

The enhanced police powers during the lockdown in India saw a steep escalation in police brutality.⁴⁷ This violence against transgender persons has increased during the pandemic due to the lockdown with police powers being increased under the guise of enforcing the lockdown. Recently, the UN Secretary General called for an end to violence against trans persons during the Covid-19 pandemic and recognized the potential for police to misuse lockdown directives in targeting minority populations.⁴⁸

In India, the trans community witnessed heightened police brutality for trans people who were found homeless or were trying to access medicines. They were violently removed from streets and faced

physical violence as well.⁴⁹ Trans activists also cited a constant looming threat of police violence and abuse disrupting their food distribution.⁵⁰

In Telangana, trans activists testified to malicious propaganda against trans persons as the harbingers of COVID-19. Posters were stuck outside malls, on bus stops and metro stations saying that much like HIV/AIDS, trans persons have brought the virus.⁵¹

In areas where trans persons were living, media campaigns were marking these areas as unhygienic and vectors of the virus which led to many barricades around these neighbourhoods. In residential colonies, there was much local vigilance which had the same effect.

Privacy rights violations were also serious concerns during this time. Often when relief was being given by NGOs, there were photographs taken of trans persons receiving aid on social media that accompanied relief work by various networks and activists. In some cases, trans persons desperately needing relief decided not to take it as relief workers were photographing people who they were giving aid to.

One of the anxieties a Respondent shared with us was the collection of data by the state in providing relief. Many trans persons were asked to share personal details such as bank accounts and other information with state authorities to access welfare schemes. This emphasised again the need for policies that respect the fundamental rights of privacy of trans persons and their dignity.

The litigation and advocacy measures to provide relief to the trans community have been taken up in only a few states of India. While implementation of the court orders have been sporadic, the non-representation of trans community through COVID-19 related litigation in other states leaves their rights in a more precarious condition.

SECTION V

Recommendations

In light of the above findings, the following recommendations are proposed:

1.

The central and state governments have to recognize that the transgender and intersex community is among those particularly vulnerable in this crisis and must take targeted steps to ensure that they are included when addressing the pandemic.

2.

All welfare schemes and relief measures should take into account gender diversity, especially in terms of eligibility requirements and should take an intersectional approach. Welfare schemes and measures should consider the particular vulnerabilities of the trans and intersex community and ensure that transgender persons are fully covered under these schemes. Schemes such as LPG eligibility etc. which is made in the name of the woman in the family, should not be restrictive based on sex.

3.

Food and Rations are urgently needed at a large scale and should be provided free of cost from the PDS shops without reliance on ration cards. The PDS system needs to take into account that vulnerable populations such as the trans community, migrant workers and other marginalised groups are unable to get ration cards and hence basic food and nutrition security should be enabled with any other government identity card.

4.

Cash incentives: The government needs to make a monthly cash transfer to trans persons atleast for the next six months as they have no means of livelihood to bear the most basic expenses and since sex work and badhai toli and other forms of labour will remain unsafe for a long while.

5.

Housing: Trans persons need access to safe and affordable housing. In the short term, they need rents to be absolved. Shelters and temporary housing is needed.

6.

Health: Many trans persons have suffered physically and mentally. They have not had access to basic health care as many suffer from ailments like blood pressure, vitamin deficiencies, diabetes and the like. It is urgent that services to check such ailments be put in place since hospitals are out of bounds and medicines for the same be provided. HIV treatment and hormonal therapy also needs to be provided as these treatments cannot be interrupted. There is a need for isolation and quarantine centres for transpersons. Mental health services need to be provided by the State.

7.

Awareness campaigns and literature should be made available in multiple languages and through various media. This should also include court and government orders, announcements of local administration and welfare policies.

8.

It is important that more lawyers be encouraged to work with marginalised communities like trans persons to allow them to access their fundamental rights and constitutional remedies. Such lawyers should be adequately compensated for their work by the state.



9.

There is a growing need for an anti-discrimination law in place with regards to access to welfare measures of the state so that trans persons can rightfully remedy any discrimination they may be facing in accessing their due in a substantive way.

10.

Police excess and brutality should also be taken seriously and all complaints of the same should be prioritised. Law enforcement officials should be instructed and trained not to discriminate against this population.

11.

There is a need for building solidarity within trans networks and this should include class and caste-based solidarity. The need for such sustained networks is especially crucial for those disenfranchised in cities and districts.

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