
Report of the Study of Impact of the COVID 19 and Lockdowns on the Transgender Community in Karnataka

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I. INTRODUCTION

Sexual Minorities in India including the transgender communities have lived under the cloud of exclusion, facing several social and health challenges such as violence, stigma, discrimination, social rejection and inadequate specialised healthcare facilities. In recent years however there has been a growing recognition of the discrimination and the need to accord basic rights to the trans communities and much of the progress achieved in the last decade can be attributed to successful campaigning by trans groups in various parts of the country. However, the unfolding COVID 19 crisis and the lockdown exposed the tremendous schism that still continues to exist between policy and practice that has pushed vulnerable groups and minorities to suffer more than mainstream society. In particular, the ongoing pandemic has amplified already existing stigma and discrimination towards the transgender community. While the whole world combats one on one against Covid-19, once again they lay ghettoised and ignored.

According to Census 2011, India has a transgender population of 4.88 lakh, though the actual numbers are said to be much higher. The Criminal Tribes Act of 1871 had put them into the category of declared criminal tribes and it was much later in 2014 that the Hon'ble Supreme Court of India in NALSA verdict recognised transgender as the third gender in India. Since then, situations are changing for a better tomorrow for them, but the tomorrow always seems too far.¹

Some recent Judgments that paved the way for Trans Rights in India

While the Supreme Courts Judgements of 2014 (also called the NALSA judgement) and 2018 (Navtej Singh Johar vs Union of India) have been the driving forces behind many legislative changes ensuring rights and affecting a wider awareness of the lives of sexual minorities and transgender communities in official and public realms there have been other equally important judgements and policy initiatives in different States impacting on their lives. Some of these are detailed below.

a. Decriminalisation of Section 377

The Section 377 of the Indian Penal Code (IPC) introduced in the year 1861 during the British rule of India is an act that criminalises homosexuality referring to it as 'unnatural offences' and says that whoever voluntarily has carnal intercourse against "the order of nature" with any man, woman or animal, shall be punished with imprisonment for life. This law was the basis of the criminalisation of sexual minorities and the transgender communities.

This colonial-era law was first challenged by the NGO Naz Foundation and AIDS Bhedhbhav Virodh Andolan, in the Delhi High Court in 2001. Portions of the section were first struck down as unconstitutional with respect to gay sex by the Delhi High Court in July 2009. That judgement was unfortunately overturned by the Supreme Court of India (SC) on 11 December 2013 in [*Suresh Kumar Koushal vs. Naz Foundation*](#). The Court held that amending or repealing section 377 should be a matter left to Parliament, not the judiciary. On 6 February 2016, a three-member bench of the Court reviewed curative petitions submitted by the Naz Foundation and others, and decided that they would be reviewed by a five-member constitutional bench.

¹<https://www.dailyo.in/variety/covid-19-transgender-hijras-health-risk-social-stigma-aadhaar-coronavirus-in-india/story/1/32608.html>

On 24 August 2017, the Supreme Court upheld the right to privacy as a fundamental right under the Constitution in the landmark [Puttaswamy](#) judgement. The Court also called for equality and condemned discrimination, stated that the protection of sexual orientation lies at the core of the fundamental rights and that the rights of the LGBT population are real and founded on constitutional doctrine. This judgement was believed to imply the unconstitutionality of section 377.

In January 2018, the Supreme Court agreed to hear a petition to revisit the 2013 *Naz Foundation* judgment. On 6 September 2018, the Court ruled unanimously in *Navtej Singh Johar v. Union of India* that Section 377 was unconstitutional "in so far as it criminalises consensual sexual conduct between adults of the same sex".² The SC ruled that consensual adult gay sex is not a crime saying sexual orientation is natural and people have no control over it.

b. The NALSA Judgement, 2014

On April 15, 2014, the Supreme Court of India made history by giving legal recognition to the transgender persons as "third gender". This move by the Supreme Court of India was a stepping stone to embark on a journey of defining gender and transgender in the Indian context.

The National Legal Services Authority v. Union of India, nicknamed NALSA judgement recognises the third gender (male wanting to be recognized as female and females wanting to be recognized as men) and affirms that the fundamental rights of Right to Life (Article 21), Right to Equality (Article 14) and Right against Discrimination (Article 15 and 16) guaranteed under the Constitution of India is equally applicable to transgender people as it is applicable to any male or female. The judgement also recognized the right to self- identification of their gender. The *NALSA* judgement is particularly innovative in its understanding of what freedom of expression means. In the judges' opinion:

Gender identity, therefore, lies at the core of one's personal identity, gender expression and presentation and, therefore, it will have to be protected under Article 19(1)(a) of the Constitution of India. A transgender's personality could be expressed by the transgender's behaviour and presentation.

The Court held that public awareness programs were required to tackle stigma against the transgender community. It also directed the Central and State Governments to take several steps for the advancement of the transgender community, including:

1. Making provisions for legal recognition of "third gender" in all documents
2. Recognising third gender persons as a "socially and educationally backward class of citizens", entitled to reservations in educational institutions and public employment.
3. Taking steps to frame social welfare schemes for the community³

c. Transgender Persons (Protection of Rights) Act, 2019

Pursuant to the SC judgement, the Government of India introduced the Transgender Persons' (Protection of Rights) Bill in 2016 which was passed in Rajya Sabha in 2019, despite many reservations and criticism from the transgender community among which the primary reservation

²<https://www.escri-net.org/caselaw/2009/naz-foundation-v-government-nct-new-delhi-and-others-wpc-no-74552001>

³<https://translaw.clpr.org.in/case-law/nalsa-third-gender-identity/>

revolves around the process of certification that goes against the principle of self certification as encapsulated in the NALSA judgment.

In July 2020, after facing flak from the transgender community, the Centre has done away with the requirement of a medical examination for trans persons applying for a certificate of identity in its latest draft rules framed under the Transgender Persons (Protection of Rights) Act, 2019. The draft of the Transgender Persons (Protection of Rights) Rules, 2020, published in the gazette stated that a District Magistrate would issue a transgender identity certificate and card based on an affidavit by the applicant, “but without any medical examination”.

In case of change of gender, the application for new identification certificate would require a certificate from the medical superintendent or chief medical officer of the medical institution where the applicant underwent the intervention, the rules stated. In an annexure to the rules, the Ministry has proposed a series of welfare schemes, including making at least one hospital in each State equipped to provide “safe and free gender affirming surgery”, counselling and hormone replacement therapy; providing medical insurance cards; giving scholarships to trans persons; facilitating accommodation and schooling for trans, gender non-conforming and intersex children at government-run schools and colleges; and universal access to food security.

d. Karnataka Transgender Policy, 2017

The State Governments of Kerala, TamilNadu and Karnataka were the first to set up institutional mechanisms for the welfare of the TG community that sought to provide welfare measures to ensure socio-economic security of the community. (Details of some successful measures by States have been attached to the report as ANNEXURE-1.)

The Karnataka Government Policy was introduced in 2014 and finally came in to effect in 2017. The State policy covers under the term “Transgender” Hijras, Jogappas and intersex persons. The Policy sets down the following:

- Setting up a cell for Transgender persons under the Directorate of Women and Child Department, that will operate at State and District levels, to ensure implementation of the policy and is empowered to issue ID cards, initiate welfare schemes, conduct sensitisation programs through mass media etc.
- Setting up counselling cells for parents to reduce family rejection of gender non-conforming children, but also for children to cope with the trauma of violence and abuse.
- Mandates that workplace sexual harassment policies should be made transgender inclusive.
- To ensure there is no misuse of the benefits granted through the Policy, it provides for a detailed identification and certification process at the District level in collaboration with NGOs to make the process more transparent, efficient and accessible.⁴

Under the Chief Ministership of Shri Siddaramaiah, the Karnataka Government had sanctioned a pension amount of Rs.600 monthly for transgender persons above the age of 60.

e. Tamil Nadu government orders age relaxation for transgender persons applying for police posts in 2018

⁴<https://clpr.org.in/blog/karnataka-introduces-a-state-policy-for-transgender-persons/>

The Tamil Nadu government's home department has issued an order granting age relaxation for transgender persons applying for posts in the state's police subordinate services. The order states that the guidelines will be similar to the age relaxation provided to Scheduled Caste and Scheduled Tribe candidates who apply for recruitments through the Tamil Nadu Uniformed Services Recruitment Board. The government order comes following a writ petition filed by K Aradhana, a trans woman in 2018. She was 29 years old when she attempted to apply for recruitment online, but her application was not accepted because she was above the prescribed age of 26. The High Court in its interim order directed the recruitment board to keep one post vacant, and to entertain the application of the petitioner regardless of the age, subject to the result of the writ petition.

The Supreme court order had stated that since the transgender community faces discrimination, prejudice and violence from various sections of the society, they should be given age relaxation similar to what marginalised groups get.

The order on June 29 stated, "The government has carefully examined the proposal of the Director General of Police/ Head Police force. It is observed that though certain privileges have been made for the welfare of third gender candidates, the observation made by the Honourable High Court of Madras in its order for the upliftment of the third gender candidates has been considered and accordingly, in compliance with the Honourable High court of Madras, the government hereby direct that the third gender candidates shall be granted age relaxation as provided to the SC/ST candidates for the recruitments through Tamil Nadu Uniformed Services Recruitment Board for the posts included in Tamil Nadu police subordinate services."

And while the move to introduce relaxations has been welcomed, trans rights activist Grace Banu, says the community requires a more lenient age relaxation.

"This is a very welcome move in the right direction. But at the same time, the transgender community is not the same as SC/ST. We are more oppressed than anybody else on a socio-economic and gender basis. Our community deserves a greater age limit because our community members tend to drop out of school due to gender-untouchability harassment meted out to us," says Grace Banu. "Moreover, the confirmation of appointment for the petitioner is yet to come," she adds.⁵

f. No medical examination required for trans ID certificate, 2020

In response to a plea (2019) moved by a transgender person, seeking to do away with the full body medical screening to recognise a person as transgender and that it ought to be through self-determination, the Madras High Court sought to know as to how the misuse of benefits meant for transgenders could be thwarted if self-determination is the norm as many would pretend to be transgenders.⁶

A division bench comprising Justices M Sathyanarayanan and N Seshasayee raised this concern while hearing a PIL filed by activist, Grace Bhanu, calling for issuance of government identification cards to transgender and intersex persons in accordance with the principle of self-identification. The plea also sought for horizontal reservation for transgender persons in public employment and educational institutions instead of clubbing them with Most Backward Classes. Appearing for the petitioner, Senior Advocate Jayna Kothari, submitted that all government orders passed by the Tamil

⁵<https://www.thenewsminute.com/article/tn-govt-orders-age-relaxation-transgender-persons-applying-police-posts-128332>

⁶<https://www.thehindu.com/news/national/no-medical-examination-required-for-trans-id-certificate-say-draft-rules/article32076579.ece>

Nadu government indicate that a person would only be recognised as a transgender person only after a medical screening.

Pointing out that this was completely against the principles laid down by the Supreme Court in the NALSA case, she argued that gender identity is based on one's own mental perception and not whether the person opts for a Sex Reassignment Surgery. While this is the case, Tamil Nadu has set up district and State-level screening committees, which conduct medical screening tests before according recognition to transgender persons, she said. Senior counsel submitted that medical SRS is expensive, and many do not have access to it and if it one undergoes, it is humiliating to the person as she/he is stripped naked before a Board and every part of their body is examined.

g. Transgenders get right to inherit agricultural land in Uttar Pradesh

In 2020, transgender people in UP can now inherit ancestral agricultural land under a new law that has come into force after the Adityanath cabinet cleared an amendment to the UP Revenue code of 2006, removing the limitations of nomenclature in inheritance laws that only mention 'sons', 'daughters', married, unmarried and widow.⁷

The proposal for a law acknowledging the inheritance rights of the third gender, as recognised by Supreme Court, had been submitted by the State Law Commission to the Chief Minister in March 2019. Commission Chairperson Justice AN Mittal had pointed out that all inheritance laws leave out the transgender people who as it is face social ostracism despite measures to protect them.

In the UP Revenue Code (Amendment) Act, 2020, changes have been made to sections 4(10), 108(2), 109 and 110 to include people of the third gender as members of a landowner's family to give them succession and physical rights to the property. This will accord equal rights and social recognition to the community, the cabinet note says.

II. The COVID CRISIS AND IMPACT ON THE TRANSGENDER COMMUNITY

Despite all these legislative and policy changes at the state and national levels it is clear that apart from the stigma and discrimination faced by the community there is much more that needs to be addressed in terms of securing basic needs of livelihood, housing, health and food security. The lack of access to basic needs became painfully apparent during the period of Corona pandemic that still rages unabatedly and the four-month continuous lockdown. While the past months have been difficult for the poor and the marginalised at large, the social stigma, and exclusion made the impact of the times acutely disastrous for the transgender communities.

While various States in the country has extended laudable steps for the daily wagers, migrant workers et al by providing relief packages, there is no separate mention of transgenders as beneficiaries in any of these propositions. It could be because the States are yet to have a record of the actual population of transgenders and an official database that could perhaps facilitate any such welfare scheme for transgenders. But categorising them along with the BPL and other such schemes may fail to recognise the specific needs of the community, and deprive them of actual welfare. Apart from the Kerala government, no State had thought to secure the rights of the transgenders even as they promised assistance to other vulnerable sections of the population. Even the Pradhan Mantri

⁷<https://timesofindia.indiatimes.com/india/transgenders-get-right-to-inherit-agricultural-land-in-up/articleshow/77644874.cms>

Garib Kalyan Yojana, announced by the Finance Minister, did not make any reference to the transgender community. “This is an invisibilisation of us, even amidst a lockdown,” a trans person said.⁸

This approach is not only negligent of the community-specific welfare, but also a threat to national health. National Centre for Transgender Equality (NCTE), a US-based non-profit social equality organisation, reflects on the vulnerability of trans people regarding coronavirus in its Covid-19 guidelines. The vulnerability is due to the ‘compromised immune system’ since trans people are prone to HIV and cancer. Since most of them are habitual smokers, they are at high risk of respiratory problems and due to social stigma, they are reluctant to visit a doctor.

National level reports reconfirm that since most transgenders are daily-wage earners forced to subsist on begging and sex work, social distancing has hit them hard. A large number of them do not have basic documentation, including Aadhaar, ration card, voter ID or bank account in their self-identified name and gender and therefore remain outside the coverage of government social security schemes like rations and pensions, making it impossible to survive in these difficult times of lockdown. Many of them still await their Transgender Cards, for which states are still drafting policies. They can neither show domicile nor residential proofs as most of them either live within a hijra basti or in rented portions where the landlord generally denies them a rent agreement document that makes it easier for them to be thrown out for non payment of rent in the times of COVID without any recourse to justice. .

Alongside the lack of access to basic elements of life, the community is also battling with hostile families during the lockdown and dealing with stress and trauma, especially those who have recently undergone sex reassignment surgery or are taking hormones. Sasha (20), a freelance writer who lives with their family in Bangalore and identifies with the pronoun ‘they’, takes hormones once a month, and has been transitioning since September last year. They were supposed to go for a review with their doctor but were unable to do so due to the lockdown. “The hospital is 20 km away, so I can’t go and I don’t know what is going on in my body and if it is reacting well to the dosage,” they say. Sasha is worried that the chemists might run out of their medication or may not stock it due to the lockdown. “If I don’t take it, I will have intense dysphoria, sadness and anger,” they say. With a history of depression and anxiety, Sasha finds it challenging to spend all day with their family. Before the COVID-19 outbreak, they found solidarity in members of the queer community, with whom they spent most of their time. “Now at home, when I talk about my medication or that I won’t find it in time to come, my parents make a face, don’t show sympathy or don’t want to talk about it,” they say.⁹ (Source: The Hindu).

III. KARNATAKA: LEGAL PROTECTION FOR TRANSGENDER PERSONS DURING THE COVID-19 LOCKDOWN

In April 2020, the Karnataka High Court has taken up public interest litigation in the case of Mohammed Areef Jameel & Anr. v. Union of India & Ors. on relief measures during the lockdown ranging from access to food and essential items, access to medicines, animal welfare and parole for prisoners. In these ongoing PILs, CLPR has filed an Intervention Application on behalf of **Ondede**, a registered public charitable trust working for the rights of transgender persons, and the Centre for

⁸<https://frontline.thehindu.com/dispatches/article31463945.ece>

⁹<https://www.thehindu.com/news/cities/mumbai/covid-19-lockdown-transgender-community-pushed-further-to-the-margin/article31265535.ece>

Study of Social Exclusion and Inclusive Policy, a Research Centre at the National Law School of India University, Bangalore (“NLSIU”), which works closely with SC/ST communities especially manual scavenging groups, tribal and forest-dwelling communities, slum dwellers and other vulnerable groups.

Ondede submitted that members of the transgender community are unable to pay rents for their accommodation as they have no earnings and are thus being threatened with eviction. Many have taken private loans and unable to repay the interest to the money lenders. Many persons from the trans community are taking hormone therapy and during this period they do not have the means to purchase their medications due to which they are facing ill-health. The most vulnerable are those who are elderly, with diabetes, HIV and other health conditions who are most in need of medication but are unable to afford them due to the lockdown and complete loss of earnings.

The reliefs sought for by the trans community included:

- State Government to provide free of cost rations, food and nutrition and provisions including vegetables and fruit to members of the transgender community from ration shops and also from other outlets.
- Free of cost medicines to HIV positive persons from the transgender community to be made available at government health centres.
- Free of cost other medicines including hormone therapy medicines, diabetes and other medications to be made available to transgender persons from government and public hospitals.
- Respondent State government to be directed to pay monthly financial support and cash transfer of Rs. 5000/- per month for six months to transgender persons, to enable them to cover their rent, loans, look after their family members and other expenses. This can be provided from the PM Garib Kalyan Yojana and the State Government.
- Government to provide free LPG cylinders, rations and waive electricity bill for 6 months to transgender persons. These measures are also assured for 3 months under the PM Garib Kalyan Yojana.

In an order dated 09.04.2020, the Karnataka High Court passed several orders beneficial to the vulnerable communities:

- The Order stated that two month’s pension to be paid to the transgender community under the Mythri scheme in light of the COVID situation. The order also extended the benefits under the Mythri Scheme to all the eligible members of the transgender community.
- The Order provided measures for the Devadasi community in a village near Koppal Town which was completely cut off from ration shops. A suggestion has been made to establish a sub-branch of ration shop near the colony which will facilitate the Devadasis to approach the said sub-branch and take their ration.
- The Order directed the State Government to take a decision on the question of providing ration to beggars, transgenders, sex workers and the category who have been deprived of their daily earnings, on production of an authenticated proof of identity.

- It directed the State Government to immediately address itself to the issue of supplying ration on the basis of the identity documents and to the issue of supplying ration free of cost to those who could not afford to pay for the ration nor have BPL cards.

Through these orders, the Government has given orders to eliminate certain difficulties of the most vulnerable community.

IV. PURPOSE OF THIS STUDY

It is in the above context that to assess the ongoing impact of COVID related events on the transgender community in Karnataka towards finding long terms solutions, a short study was undertaken by **Gamana Mahila Samuha**, Bangalore at the request of **Ondede**, the Karnataka based transgender rights organisation. This survey is also meant to improve existing policies and practices that will challenge transphobia and support trans people.

Gamana Mahila Samuha is an initiative of the Society for Informal Education and Development Studies (**SIEDS**) Bangalore, that addresses issues of gender based violence and discrimination and seeks to work towards violence free communities, and works in Bangalore, Anekal Taluk and Kolar District.

Ondede is a transgender led organisation based in Bangalore that focuses on gender based sexual and domestic violence faced by transgender community. It is also concerned with the protection of human rights of Transgender community and a broadening of the understanding of sexual and domestic violence through the transgender lens.

V. DEFINING 'TRANS' OR 'TG'

The terms 'trans people' and 'transgender people' are both often used as umbrella terms for people whose gender identity and/or gender expression differs from their birth sex, including transsexual people (those who intend to undergo, are undergoing or have undergone a process of gender reassignment to live permanently in their acquired gender), transvestite/cross-dressing people (those who wear clothing traditionally associated with the other gender either occasionally or more regularly), and others who are defined as gender variant.

For the purpose of clarity, throughout this report the term '**trans or TG**' will be used when referring to people of all categories of transgender, i.e. Jogappas, Jogtis, Hijaras, Kothis, Shivshakthis, and Aravanis, intersex people, female to male, male to female transgender.¹⁰

VI. METHODOLOGY

The study was conducted primarily through telephonic interviews between July and September 2020 keeping in mind the current pandemic difficulty of face to face meetings. In collaboration with **Ondede**, a sample of thirty-two respondents from 15 districts of Karnataka were selected and a questionnaire drafted to gather their experiences according to which interviews were conducted

¹⁰https://www.equalityhumanrights.com/sites/default/files/research_report_27_trans_research_review.pdf

between March to July 2020. . The respondents included male to female and female to maletransgender persons, Jogappas¹¹ and Kothis¹². Secondary information included published literature and interview with the chief welfare officer of Bruhat Bangalore Mahanagara Palike.

Districts from where the respondents were selected included Bangalore, Mandya, Tumkur, Davangere, Mysore, Shivamogga, Hubli-Dharwad, Kalburgi, Bijapura, Raichur, Yadgiri, South Kanara, North Kanara, Bellari and Gadag

Profile of the Respondents:

The age of the respondents ranged widely from an 18 year old to a 68 year old, while majority were in the age range of early 20s to 40 years. Five of the respondents were singers/dancers - four jogappas who sing “Padas” at religious or social functions and one dancer at social events. Thirteen respondents earn their living through begging (or *collection*, as some of them prefer to term it) and/or sex work. Seven respondents are employed in NGOs and four are employed in commercial establishments. One of the respondents is unemployed and living with her family while another is perusing her PhD work at Hampi University.

VII. FINDINGS

To start with, there were general findings that were common to most respondents and also some specific experiences due to lack of mobility and of proper information regarding the lockdown terms.

General Findings

- a) In the first lockdown period, there was not much concern, presuming that the lockdown would last a month or two and one could manage with available resources that one had or could borrow or share. With extension of lockdown a second time, then again third and fourth time, came insecurity about the future and loneliness set in.
- b) Twenty seven of the 32 respondents either had no schooling at all or had not gone beyond 10th standard. Being poor and ill informed, they depended on organisations like **Ondede** to help them to access relief.
- c) Except one student and one PHd scholar, others were working. After lockdown many had no option but to return to their parental or family homes, which they had left or were sent out due to their choice of gender non-conforming identity, as they could not sustain themselves when their means of earning were lost.

Specific Findings

Our specific findings are classified under impact of COVID related events and times on four major axes:

- 1) Food and Shelter
- 2) Health and Medical Treatment

¹¹<https://in.boell.org/2015/08/10/jogappa-gender-identity-and-politics-exclusion>

The Jogappas are one of the least known transgender communities in South India. They are “caught”, possessed, by the goddess Yellamma: as such, they are regarded as holy women, and their gender identity and expression reflects this.

¹²kothis (men who have sex with men whose gender expression is feminine)

- 3) Livelihood and Insecurity
 - 4) Future is a Question Mark
-

1. Food and Shelter

With the total lockdown in the first two months and the strict policing preventing any one moving out for food, a transgender person comparatively would face even more trouble than anybody else. Many testified that they survived only with relief ration kits from NGOs, and other private donor agencies. If the Transgender support organisations and other charity organisations and donors had not stepped in at that stage when the Government was yet to wake to the extreme seriousness of the situation and put in to place systems of relief distribution, the situation would have been worse. Dry rations were distributed in each area for months varying from one to two months consistently by Non- Government organisations, Charitable Trusts and a few individual local leaders. The names that recurred of distributor organisations were Sangama, Solidarity Foundation, Ondede, Rotary Club, Ashakirana Samajika Samsthe and other local charities and social organisations. The Government relief packages distribution was done through District Administration and Panchayats. Those who shared vouched for hardly any support that came from Government agencies such as Department of Women and Child Development and if there was, it was done after much pressure and with both the quantity and quality of ration poor. In some places ration kits were distributed to only ration card holders, depriving the others of relief. Support from the local govt structures such as gram panchayats, taluk administration was minimal.

There were however some rare moments of humanity. In Bangalore one of the respondents shared:

“... to be frank the police themselves helped us with good ration kits (list of ration items received by the police: Sugar, rice 50kg, mustard seed, jeera, pepper, oil, toor Dal, flattened rice, green gram, ragi flour, wheat flour, rava and soap and the same ration items were given by the police from Kumbulugudu area to 10 transgender’s). Since, we were 10 people in the house they gave the kit to one person and asked us to share. And even our neighbors helped with rations during the lockdown time since we live far away from our families. .

The general feeling was that the distribution of food kits from the Government was not done satisfactorily. Ration kits were inadequate in number and quality of ration, distribution and identification of the needy was poorly planned. For instance, some of those who received the ration kits, could not use them for non-availability of a refill gas cylinder. In another case, for a group of 10 community people who lived together some support came from political parties, individual MLAs but this too was nominal and not all such support was spontaneous but was only for gaining publicity. In the words of one who was driven to desperation during the lockdown:

... “Firstly Tahsildar from the taluk office gave us 5kg of rice for 10 people and nothing apart from that. So we said to him that the rice only wouldn’t help us, we are facing difficulty to pay our rent so please help us with that for which there was no response from the officer. And after that we didn’t get much help from the Government, if they give one item, they wouldn’t give the other. Later after a month of lockdown, the gram panchayat along with the Congress political party somehow contacted us to give relief kits according to ward wise

and area wise. But all these was done for publicity sake, the kit had only 1/4 kg packets of provisions (Dal, chilli powder, coriander powder etc)."

"Three among us were HIV positive, so during the lockdown they had gone to Government hospital which is in Kengeri and got their tablets. But the only difficulty was that the police near the check post wouldn't let them go out so, we had to request them for giving us permission by saying we are in medical emergency and saying about HIV. We always wanted to keep our HIV hidden because of the social stigma but during the lockdown we were made to disclose."

Even in Bangalore where one would expect better management of relief systems it being state capital, the quality of the ration was poor.

"BBMP gave us ration kit which was in such a bad state that the vegetables were all rotten on the same day when we received it. Even the quality of the rice and dal was bad."

"Local parties gave 2Kg rice and took photos. I was angry and so asked them why when you have crores of amount you only give two kgs and extract publicity. So our community rejected ...we have dignity, we have to protect ourselves. I have Ration card with which I will take 1 kg rice every month with dignity. People and society should allow us to live as a human beings, with humanity, as normal people."

A community, a large section of which works and earns in public space suffers doubly if restriction on mobility becomes a rule. The lockdown initially was for a month or little more and the many were prepared to stay put and manage on savings or help from friends. But as the period of lockdown continued and lack of earnings and resources dwindled, the need was primarily to stay alive while being safe from the virus. Almost all the respondents live in rented houses except two. The pandemic also brought on pressure from house owners to evict or pressurise them to vacate the rented premises. This was despite a public plea from the Chief Minister not to insist on immediate payment of rental and evict tenants. It is a known fact that getting rented premises anywhere for a single person is difficult and for a person who is a transgender who is not seen as "normal" generally, it is almost impossible to get rented accommodation. Even when they do find a place, it is known that they are made to pay more than the normal rates. This being the reality, losing a rented place can be no less trauma than being homeless. Those who could, shifted to their parental homes and shared in the family struggle to manage during the lockdown through agricultural work or coolie work. Others who had no family support, managed to live in groups of friends from the community and managed with the relief ration kits. Organisations like **Solidarity Foundation** and **Sangama** met rentals of a few but most reported feeling insecure and helpless. As stated by a *Jogappa*:

"In Gajendraghada, I have friends in the Orchestra and other friends circle, who supported me lot given ration and money. But still I am facing difficulty to bear the house rent. I took support from political leaders, rich people shop owners etc from who I begged for money. "

A Case Study: Evicted from Home During Lockdown

Name: Samika S Meharwal

Age: 26

Native of Hubli and settled in Harihara Tq, Davangere District

Earns by Begging in Trains

She lives in a rented house in Harihara and managed with the stock of ration in the house when lockdown was announced in March 2020. Her problem was paying the rent as she could not go out. The due date of her rent payment was 20th of every month. In April, as she had no income, she requested the owner for exemption of payment for April and he agreed. But the lockdown extended and she could not pay in May also. The owner was angry and evicted them, and threw all her belongings on the street. She and her house mate were homeless.

Her question is *“Modiji said that we don’t have to pay rent for 3 months but it is not implemented anywhere. The government should have informed us earlier about the lockdown. We would have saved money and made arrangements for our livelihood and would not have faced such kind of humiliation or difficulties.”*

After meeting the District Collector for help, they managed to get ration kits. But the ration kits from the Department of Women and Child Development were useless and unusable with bad quality ration. They received 5 kg from local MLA (INC) but nothing else from either the Taluk administration or the Panchayat.

She is a B.Sc graduate but since her documents are at her parental home, she cannot apply for a loan to start a business or get a proper job. She cannot even give proof of address as it is a shared rented house. She says she will continue to beg in trains.

2. Health and Medical Treatment

In early stages of the lockdown, detailed information about the virus was almost nil from Government sources like the Health Department except that there was this virus that was infecting people everywhere and to stay safe, one had to stay home. The media and stray cases around spread more fear than information. The local administrations like the Corporations and the Tahsildar and the District Collectorate were insisting only on use of sanitisers and masks and frequent washing of hands etc, which, in the absence of any official action and information of how the administration would meet the crisis of immobility and resultant loss of access to food or to treatments seemed not only inadequate but also insensitive.

The persons who were on regular Antiretroviral Therapy medication (ART) were the worst affected, as they had to stay without medication for one or two months till the Government systems started working on the issue, thus adding to the insecurity and fear. Once again it was the HIV prevention organisations and NGOs that came to their aid, through pressurising the concerned Government agencies and Health units to see that ART medication was released and reaching it to the community users. The Government distribution hospitals and systems started regular distribution after the lockdown was relaxed partially and people could access the medication.

A positive change in procedure for making ART available that made life easier for community was that the Government eventually made ART medications available at every district level while prior to the pandemic one had to travel to Bangalore or other major cities for the same.

There were however, pockets of positive action in the state like ASHA (Accredited Social Health Activist) workers of the National Health Mission who went all out to help the most backward areas even as the pandemic spread. These workers who are largely women and work at ground level across cities, towns and villages proved to be the only connect to health when other health systems were struggling to meet the surge of demand for health support. In Manguli village, in Basavanabagewadi Taluk of Bijapura District for example, ASHA workers worked through the lockdown periods, spreading awareness in this remote village. The Panchayat of Basavanabagewadi

was proactive and conducted a health camp in Masuti village, while many other panchayats remained inactive, waiting for Government directions.

From every district that was covered in this survey, the response was that there was no information of any community person having tested positive or sent to quarantine, except in Bangalore and Tumkur, where 15 to 20 members were infected and were treated in nearby hospitals. However, one incident is reported from Davangere, when the local police used a quarantine centre as a holding place for a community member against whom they had filed a FIR.

“There were no positive cases in our area.... I don’t know the exact condition of the quarantine centre but there was an incident that had happened among our community people, regarding a case matter that the police had arrested one of our member and filed an FIR. Before sending her to jail, they had kept her in a quarantine centre for a week, after testing. Within a week they shifted her to jail. She went through depression and for a month we were not able to contact her. She could not get bail, as only emergency cases were taken up in courts and that too online. This was not right.”

A Case Study: No Access to Medicines

Nandhana.N - born in Maddur taluk, Mandya district.

Age: 45 years old

She has lost connection with family and relatives for years now. After having worked in Sangama, Karnataka Sexual Minority Forum, Bangalore until 2016, she subsequently migrated to and settled in Davangere where her current occupation is collection work and sex work.

Living in Davangere for over 15 years, during the lockdown she was staying in a community house with 15 other Transgender friends. .

She does not know of any community member who tested positive for CORONA 19 virus. However, one TG was held at the quarantine centre for a week by the police who had filed a case against her. After a week she was shifted to the jail. Since her case had not yet come up in the courts which were only hearing emergency cases, online, she was in a state of depression as she could not get bail,

When lockdown was announced suddenly in March 2020, they were taken by surprise as they had supplies only for about 10 to 15 days. They could not go out to beg or to get more supplies as the city was sealed and all movement was restrained. After some days, help came from Organisations with rations and medicines. There was no information on the virus from the health department and information they got was from TV and media.

They found it very difficult to get ART medication initial days of the lockdown and due to sudden imposition of the lockdown they were forced to skip the ART for many days.

She is a diabetic and was stressed as she could not get the medicines for diabetes and for a cold that she developed. Her friend Nethra also had high fever and she went to a private hospital on 23rd March for check up where she was told that she had contracted Jaundice. She was also HIV positive so she was sent to Bapuji Hosital, Davangere and from there to NFI Hospital, Mangalore. After 7 days she was sent back to Davangere and on her way back, she passed away. Nandhana tells that lack of proper care had claimed Nethra’s life during the Pandemic.

Nandhana has resumed her work which is collection (begging) from shops and businesses. Her income has reduced from Rs.300-500 to Rs. 40 to 100 per day. She feels she has no option but return to sex work, even though there is a big risk of contracting the virus from an infected client due to physical proximity. She is told that people with HIV or Diabetes are highly susceptible to CORONA virus and that she is at high risk. All she knows is she needs to sustain herself with the only work she can do – earlier they were receiving food support from NGOs in Bangalore but now that has stopped. “We are not prepared for the coming days” is what she states simply.

Without any money, Samika and her house mates were dependent only on relief in the TG house they shared. Here too, one housemate who was HIV+ developed upset stomach and vomiting due to lack of ART tablets. They took her to the Government hospital but she could not be admitted since it was a dedicated COVID hospital. They had to take her to a private Hospital. The entire cost was borne by the inmates of the house and they got no help from any Government agency.

In a community centre at Mysore Road, Bangalore 64 members underwent tests for the virus at their own cost of Rs.1500 per person, at a private hospital since they were not sure whether the Government Hospital tests were accurate. If the Health Department had reached out to all marginalised groups earlier in the pandemic period, more people would have benefited by not spending large amounts at private test centres that also may or may not be reliable.

In Bangalore, Mysore and surrounding districts, the awareness about CORONA 19 was actively spread through programs of organisations like Sangama and Azim Premji Foundation which spurred the Department of Women and Child Department Mysore to also to reach out to the community with support.

From a community activist, Mysore:

“Sangama COVID relief group did good work with our community along with Adalitha Tharabethi Samasthe, another good organisation in Karnataka that also does government programmes. When the lockdown started we got a circular from them which told us how to maintain social distance, what to do when you have physical contact with the person who is affected with corona, what kind of food we should eat, whom to approach in case of developing symptoms etc., I even shared this list in the whatsapp group. And during the lockdown we started to look for Mysore district leaders who could support the community. When we get to know that the leaders are going to give the ration kits we formed a group of 10 people in different place where they give the rations kits. Ten minutes before that we gave as much information and awareness as we could - like washing hands often, using hand sanitizer, eating hot food and egg every day, avoiding the eating of cold items, come out only if it's necessary, avoid sex work for some days, etc. Some representative from the WCD also came with a sponsor and helped in Mysore district. The Development Officer too met with different community people and gave them awareness on how they should take care of themselves in this epidemic situation. Only then our community people took this issue seriously and started to follow the safety measures.”

3. Livelihood and Insecurity

Lockdown also locked them out of all means of earning, whether it was begging and sex work or employment. The Government initiatives and SC judgements on protection of their civil rights have

had little impact on the small community groups scattered across the State. With public spaces out of bounds, the community was left to find its own ways to survive. Even the meagre pension for senior transgenders of Rs.600 was held up during the lockdown or delayed.

Renuka, is a 23 year old jogappa, and is night blind. She has been helped by friends to continue her Phd program in Hampi University. She sustains herself and her studies by sex work and begging and lives with her family.

Sanchana, who had managed to set up a business against all odds as a beautician that sustained her, lost confidence with the continued lockdown. With no scope for continuing her business, she says,

“Even after achieving so much in fashion and beautician field I had to get back to my old business of sex work or begging on road by wearing a mask during the lockdown. It was really difficult for me to do this work because I was not be able to know whether the customer was affected by the virus or not, but I had no other option except to do sex work to earn money to sustain myself.”

The following statements from various members of the community speak of their hopelessness and desperation for basic living needs.

“Living in Navalagundamy whole family of 4 members including parents and younger brother used to go do coolie for daily wages as agricultural labour. Each one of us got Rs.150 per day without food.”

“I was in Mangalore, I come back my home town Ballari where I am living with my Family (Mother, elder sister, younger brother). Begging is not allowing in Ballari so we all went for coolie work on agricultural land,getting Rs.100 per day. My mother is not well”.

“During the lockdown I was at home in Naragalu along with two of my community people. We had saved some money with which we somehow managed to pay our rent and sustain for some days. After this it was really difficult for us and we didn’t know what to do. Even our house owner asked us to vacate out house but we requested them to adjust the rent with the advance given for some days and we promised to pay the rent when we started going for collection. But we weren’t getting much collection either and people hesitated to give us money and would chase us away when we came near the shop asking us not to come.”

“During the lockdown it was difficult for us to even go out. We were not even able to do sex work because of corona situation. All these days we were able to earn Rs. 300 – 200 and in that we somehow sustained our living and were able to pay our rent. But during the lockdown it was very difficult, even our family didn’t support us so to sustain my livelihood or to pay my house rent I sold some of my jewels as I was in need of money.”

“During the lockdown I was in Bangalore in a rented house along with my 10 makkalu (chelas) but during lockdown if we didn’t get any ration it could have been really very difficult. We faced difficulty to pay our rent for 3 months. I had saved some gold and during the lockdown, despite no mortgage shops being open, with the help of some people I managed to mortgage my gold and took some money. That is how I and 10 others sustained during the lockdown.”

“In the beginning days it was very difficult since the police used to humiliate us for going out. They used to think that we come out of home deliberately on purpose and with bad intention. There are almost 10 Transgender houses in Davanagere in each of which there are

more than 10 to 15 people staying. When we go out for begging, people in the market used to give us free vegetables and dals. But the police would allow only two out of the 10 people to go. So, our collections were not enough for all of us”.

4. What is our Future?

“ನಮ್ಮ ಸಮುದಾಯದ ಜೀವನ ಖತ್ತಿಯ ಮೇಲೆ ಕಾಲಿಟ್ಟ ಆಗೇ ಹಾಗು ಸೆರಗಿನಲ್ಲಿ ಕೆಂಡಕಟ್ಟಿದ ಆಗೇ- Those of us from the trans communities live on the knives edge with burning embers tied in the pallu of our sarees.”

These lines from one of the respondents summed up the extreme insecurity with which the community survives with little or no hope in a positive future. The often repeated answer to a question on plans for future was a despondent “I do not know Akka”

A community where every member has a history of rejection from family and/or mainstream society, and yet has acquired the capacity to manage deprivation and neglect with grit and garnering support from each other within the community, has almost been broken totally by a pandemic that continues to spread after a poorly planned lockdown. Many expressed hopelessness about their future.

“It is a very hard situation for even basic food and rent. When we come out to beg for money people tease and curse us. Some people think we are spreading the virus. We are ashamed to live like this in the community.”

“For a few days in the middle of it the lockdown lifted briefly at which point we went for collection and sex work. I have no plans. All I know is that I have to fill my stomach and live with dignity.”

Many expressed the need for substantial support from the Government, as their tradition of sex work and begging may not be easy after the pandemic scare. It would be difficult to get clients, shop keepers who willingly gave them money every week may not do so, the religious and social functions where jogappas sing and earn, may be far and few in near future and even the small inroads made by a few into mainstream work such as small business or office work, may find blocks in employment. With doors closing on all sides they are clear that their life choices are difficult, but they are determined to demand equality and rights from the State and demand that time has come to fulfil promises made by the Government for their welfare and meet their immediate crisis of survival.

“With the situation around me now I feel like dying. Because there is no proper collection happening as how it was before and also, financially difficult for us so we didn't prepare anything for the coming days...”

“If we had a house to stay we would not have to struggle so much during the lockdown. Only serious reason for me to sell my gold and come to my native is because I couldn't pay Rs. 5000 as rent. But three years back when I was in Mangalore we requested the government to give our community people house to stay and the government then accepted our request promising free houses for 50 people and even showing us the land in Kavoora. But nothing has happened after that. . They just conduct meetings regarding that issue and take photo for publicity purpose but later they don't take any action”.

And yet, a clear articulation of what the State can and should do comes through their suggestions.

- *Increase in the current monthly pension of Rs.600 to all Transgender persons (In TamilNadu, Government has allotted free houses and Kerala gives pension of Rs.2000 PM).*
- *Ration cards in our names. They say if we live in India for 5 years you are entitled to citizenship. We are born somewhere but live elsewhere. Give us Aadhaar, ration cards, voter ID.*
- *You need a place to return to, to sleep, you have to have a place of your own. Build houses for us. They throw us out of homes. And as long as we have money, they will use us and later discard us.*
- *Recognise our talent and help us set up suitable business or give us jobs.*
- *Do not insist on caste certificate. Treat us as OBC and give us same facilities.*
- *Support us to further our studies for those of us that want to study beyond 12th standard.*
- *For us who live in villages and do not understand Government schemes make it easier for us to access those schemes that are made in our name.*
- *Help us during this year with rent of 6 months.*

VIII. RESPONSE FROM THE OTHER SIDE

We spoke to Mr. B Ravindra, Welfare Officer, Bruhath Bangalore Mahanagara Palike(BBMP), to understand how the Metropolitan Corporation views the situation that transgender community is in consequent to the pandemic and the lockdowns and the programmes and schemes proposed to tide over the present crisis.

He admitted that they could not conduct a proper survey of the number of transgenders in the jurisdiction of BBMP. However a whatsapp group had been created including welfare officers and Joint Directors from 8 sectors for smooth implementation of welfare schemes for transgender communities in the city. During the lockdown period, 2500 ration kits were distributed to the community members. A grant of 2 crores was made in 2018 for the welfare schemes for transgender community but the amount was not utilised because of two factors:

- a) The responsible officials in BBMP in the post of Joint Directors and others do not have any knowledge of the challenges and problems that this community faces.
- b) The community leaders also did not respond or come forward to discuss on how the funds could be utilised.

He claims that the allocation for 2019 has been reduced to Rs.1 crore in 2019. He also informed that applications have been called for housing under the PM AVAS YOJANA and community should respond and take benefit. He also said that a meeting for the use of 1 crore welfare fund grant is necessary and will be held in a week's time.

IX. OBSERVATIONS AND RECOMMENDATIONS

The sudden imposing of the Lockdown in march 2020 and continuing of the same further, has been traumatic for the entire community. The community seems to have reacted with desperation and fear and confusion. The lockdown was therefore seen as forced confinement to a community most of who survived through work in public places like begging, sex work, singing etc.

Lockdown is now withdrawn but the trauma of having to meet basic needs of food, health and means of earning continue to haunt the community. The new normal of social distancing and wholesale sanitisation is also increasing the fault lines in the caste-class-gender divisions, creating further 'othering' in an already fractured society.

Hearing the voices of the community, it cannot be denied that while the virus infection is a matter of being conscious of the need for caution for all, the cost and the means of staying safe is beyond the reach of the poor and the marginalised, the already socially excluded community like the transgender community among others. To ignore their right to a life of security and dignity in the light of the pandemic and not initiating the needed support systems by the State is not just unethical and unjust, but also is an extreme short sightedness that will have a backlash effect on the wellness of the entire country and indeed society.

In this context, based on the feedback from the respondents we make the following recommendations to the State Government towards both short term and long term relief for trans people who need to be able to access those basic rights and entitlements that are due to all marginalised and vulnerable communities:

- a. In light of the need for immediate action required as the pandemic continues, the following measures to be taken at the earliest:
 - Free Group Health Insurance for all Transgender communities District/ Taluk wise that would cover their special needs for a healthy and safe life.
 - Though there exists a State Policy for protection of Rights of the Transgender persons that primarily seeks to draw them into mainstream and raise public awareness about the community, there are huge gaps and large number of Transgender persons are yet to get IDs for availing state schemes. Immediately set up a **single window facility** to begin issue of Aadhar Cards, Voter IDs and other documentation in the name of their chosen identity. A number of the poorest transgender persons are unable to access any support for want of documents.
 - Extend the benefits under the Mythri Scheme to all the eligible members of the transgender community.
 - In view of the fact that most transgenders and especially the older ones will not be able to earn anything from sex work or of performing in religious or social functions, increase monthly pension to all from present Rs,600 per month to Rs.5000 per month.
 - Set up shelters exclusively for transgender persons who have been evicted from rented places, or from their homes at District level.
- b. Set up a Welfare Board or Commission for the welfare of the transgender Community on the lines of Tamil Nadu. (Annexure -1). The Board/Commission should formulate and implement programs for addressing the lack of food security, housing as well as programs to raise public awareness of the concerns of the Community. The policies and institutionalised systems of both Tamil Nadu and Kerala are exemplary in this respect and should be emulated in Karnataka also.
- c. Include transgender communities in all schemes that are in force under State Women's Commission, SC/ST Commission, Minorities Commission and the Social Welfare Department.
- d. Scheme for free Housing under Prime Minister AVAS Yojana to be extended to all transgenders in places of their residence and for those who already have a site, extend subsidised loans to construct houses.

- e. At every District and Taluk level, create reserved slots for jobs for transgenders with less schooling, in D category in Rural development Department or Social Welfare Department or Panchayat Raj Institutions or related Government Agencies.
- f. Hold employment Jathas at Taluk level for transgender communities, including Government and Private employers to increase the spectrum of their choice of work.
- g. Include transgender people in villages in the MGNRGA scheme that guarantees 100 days of paid work in the village.
- h. For landless rural transgender persons who are jobless or are working as agricultural labour grant agricultural land and schemes for group farming, or collective agri enterprises such as poultry, dairy etc with initial cost inputs from the Government.
- i. The Jogappa community of north Karnataka Districts has several self-taught and very talented singers of folk songs, who have been earning through singing *chowdki padas* at religious and social functions. In order to enhance their reach and talent, involve Janapada Academy and Department of Art and Culture to impart needed training and wider exposure.
- j. Institute Skill Development Trainings and loans with subsidy for setting up small businesses as per the aptitude and capacity of each member of the community.
- k. This being a community where a majority do not have access to formal education the State must establish Standard Operation Procedures within all welfare programmes and schemes, protocols to reach out information to the remotest and the poorest and not just depend on government notifications that most may not even read let alone respond to.
- l. The Government, through the State Women's Commission and other related departments related to social welfare should take responsibility to have a public awareness campaign to address misconceptions and stereotypes that stigmatise and criminalise the community. These awareness campaigns should highlight the diverse identities that are adopted within the trans communities including trans men who maybe smaller in number and yet have issues related to social acceptance, stigma and lack of sustainable livelihoods.
- m. Recognise that living as they do in non traditional family structures, they too can also be victims of domestic violence from partners and natal families that increased during the lockdown and pandemic and accordingly ensure that Protection Officers under the PWDVA are sensitised to take up their issues through the OSCCs and other crisis intervention centres.

End Note:

The interviews of this study were done by activists from Gamana Mahila Samuha well experienced in working with women and violence and community outreach work and counselling. Gamana Mahila Samuha has collaborated with transgender and sexual minority rights organisations such as Ondede, Sangama and Payana in the past on issue-based actions relating to human rights violations and violence against women. These collaborations were more in terms of solidarity actions and not deeper involvement with learning about life worlds of the TG community. For many of the interviewees therefore this was the first instance when direct one to one exchange with transgender persons was undertaken. The experience has been a learning and transformatory process and we thank Ondede for offering this opportunity to Gamana Mahila Samuha and its parent organisation, Society for Informal Education and Development Studies, Bangalore to carry out the study. Special thanks also to Akkai Padmashali, Madhushri and Priya for providing all the back up support including drawing up list of respondents and helping us to access them.