

Living Conditions and Quality of Life of Transgender in Kurnool district, Andhra Pradesh, India

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Extended Abstract

Background

Transgender as an umbrella term for all people whose internal sense of their gender (their gender identity) is different from the sex they were assigned at birth (WHO, 2010). The term “transgender” has been derived from the Latin word ‘trans’ and English word ‘gender’ different sorts of individuals come under this category. No particular form of sexual orientation is meant through the term transgender. The way they have behave act differs from the ‘normative’ gender role of men and women, leading a life as a transgender is far from easy because such people can be neither categorized as male nor female and this deviation is “unacceptable” to society’s vast majority. Trying to eke out a dignified living is even worse (Sathasivam, 2001).

Transgender choose different terms to describe themselves. Around the world many terms are used for transgender in like Kathoey (Thailand), Muxe (Mexico), Travesti (Argentina, Brazil) and Waria (Indonesia), more typically to describe trans- women or those who identify as a third sex. United States and Brazil have the highest trans-gender population in the world followed by Philippines and Thailand. More trans-gender people are found in the cities of Rio De Janeiro and San Francisco than anywhere else in the world. The Philippines has over-all more transgender people than Thailand, but they are spread all over the country while in Thailand they are concentrated in the Capital Bangkok (Hill. B, 1997).

Historians have identified evidence of cross-dressers thought out most of the history of the Western world; especially in early Greek and Roman mythology, medieval times, and 16th and 17th century Europe (Bullough, 1993). Bullough, (1976) also documented the long history of transsexuals, and garber (1992) provided a diverse and lengthy history of transvestitism. Drawing on a wide base of anthropological and historical research, transgender theorists have concluded there is a long history of transgender identities in cultures across the world (Feinberg,1992; Herdt,1994).

In India, the transgender community has been categorized as non-conformant of the dual gender code using terms like ‘tritiyaprakriti’ or third gender. There has been a historical and traditional reference to transgender gender-variant males, commonly called ‘Hijra’ accorded with powers of luck and fertility as per ancient Indian myths (Kalra, 2012; Khan et al., 2009; Agoramorthy, 2014).

Transgender people live in a separate community and they lead their life by begging and dancing. It is reported that some of them earn their livelihood by begging or prostitution, which is neither prestigious nor hygienic for their safe living. Barriers to health care experienced by trans communities include discriminatory treatment by health care providers, a lack of providers who

are trained to offer appropriate health care to trans people, and refusal by many national health systems and health insurance programs to cover services for trans people. Accordingly, these might have adverse consequences on their life and their quality of life (QOL).

This aspect needs to be explored. In this context, the present study was conducted to assess the QOL among transgender people and to find its association with their socio-demographic characteristics in Kurnool area of Kurnool district, Andhra Pradesh. The study aims to understand the effect of socio-economic status, working and living conditions and Quality of life of Transgender in Kurnool, Andhra Pradesh, India.

Methods

The study is mainly based on primary data of transgender ($n=110$) and for the understanding to the issue secondary data from census of India 2011.

Both quantitative and qualitative methods were used for collecting data. Thus, quantitative information a semi structured interview schedule was used to collect 110 transgenders were interviewed for this study. The schedule collected a range of issues such as socio-economic and demographic characteristics of the respondents (such as age, education, working status, occupation, and income), and their health seeking behavior (source of treatment, and type of treatment etc.), discrimination and quality of life. Key informant interviews (KII) and In-depth interviews (IDI) with the transgender were conducted purposively. The in-depth interview primarily gathered information on living conditions, educational conditions, economic conditions, livelihood, working conditions etc. The Key informant interviews primarily gathered information on lifestyle of transgender, arrangements of participation in social and political organization, etc.

The questionnaire was constructed in English language and there were six sections, which included 66 questions on Socio-economic conditions, factors related to migration pattern, working and living conditions, and Health seeking behavior and Quality of life. In addition to quantitative data collected, a few in-depth interviews and key informant interviews (KII) were also collected by visiting the houses of the Transgender. Before conducting the survey, the consent was taken.

We used World Health Organization's Quality of Life (WHOQOL) to study quality-of-life Transgenders. The WHOQOL-BREF contains 26 questions. All these questions deal with physical health, psychological, social relationship p and environment of an individual's life in the last four weeks. Therefore, it is possible to derive four domain scores, which denote an individual's perception of quality of life in each particular domain.

Results are presented in terms of distribution, percentage, average. For qualitative data analysis, total 10 in-depth interviews and 1 Key Informant Interviews (KII) translated into English and added with quantitative findings as a supportive narrate. Univariate and bivariate analysis is carried out in qualitative data. All the analysis is carried out by using SPSS, STATA and Atlas.ti. Primary survey is done during January 2018 to February 2018.

Results

Table 1. Background characteristics of transgender, Kurnool, Andhra Pradesh

Characteristics	Percent	Number
Age group		
<24	14.5	16
25-29	30.9	34
30-34	35.4	39
35 and above	19.0	21
Religion		
Hindu	29.1	32
Muslim	65.5	72
Christian	5.5	6
Caste		
SC	24.5	27
ST	26.4	29
OBC	32.7	36
Others	16.4	18
Level of Education		
Illiterate	21.8	24
Primary	26.4	29
High School	20.0	22
Higher Secondary	17.3	19
Bachelor degree and above	14.5	16
Type of place birth		
Rural	62.7	69
Urban	37.2	41
Occupation		
Self-Employed*	33.6	37
Begging	66.4	73
Income/Month		
Less than 1000	1.8	02
1000-4999	35.0	39
5000-9999	41.8	46
10000 and above	20.9	23
Mean Income		7545.4545(S. D -1805.37)
Saving		
Yes	60.0	66
No	40.0	44

Type of Accommodation		
Single	5.5	6
Double	73.6	81
Dormitory	20.9	23
Types of Festivals		
Bonalu	60.9	67
Christmas	12.7	14
BrakarEid	26.4	29
Total	100	110

We found Trans gender people faced discrimination at every aspect of their life. It is found that majority of transgender in the age group of 30- 34 years. Most of the transgender are migrants and helped by transgender friends to Kurnool. In this study, we found there is not much difference among social groups. However, in Kurnool, it was found that transgender is more among Muslim religion. It has been found that social exclusion is the main factor for leaving home and come to stay with the same gender people. Transgender were engaged mostly in occupation like begging and ceremonial collection by dancing and singing on auspicious occasions like marriage or childbirth. We found they do not earn sufficient to live a good life. Majority of them reside rented house.

Many participants reported that the society members abused them. In addition, they lack access to quality health care and no specific public health cover was provided for trans gender. Besides, we found transgender people live in a separate community and survive on begging and dancing. We found 56 % of total participants experienced poor physical quality of life. About 66% and 39% of total participants reported poor psychological health and unhappy relationship with society members respectively. There is a need to highlight the Physical and Psychosocial problems that are being faced by Transgender in India and strategies for bringing about an improvement in their quality of life. The highest 66.4 percent of transgender found in begging. It shows that maximum number of people are monthly earning between rupees 5,000-9,999 (41.8 percent) whereas a few numbers of people are earning less than Rs.1,000 (1.8 percent). A higher than 60.0 percent Trans gender save money. and more about 73.6 percent found that two rooms house. Around 60.9 percent of Trans gender celebrates festival like found Bonalu. Transgender were engaged mostly in occupation like begging and ceremonial collection by dancing and singing on auspicious occasions like marriage or childbirth.

Table 2. Migration characteristics of transgender, Kurnool

Characteristics	Percent	Number
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Residential status (POB)		
Migrant	80.9	89
Resident	19.1	21
Reason of Migration		
For living with own gender identity	54.5	60
For staying with community	10.0	11
Do not want to stay with family	11.8	13
For getting job	23.6	26
Duration of stay in Kurnool (in years)		
<=4	28.1	31
5-9	62.7	69
10 and above	9.0	10
Mean Years		2.4000 (S.D- .86946)
Agents of migration		
Transgender friends and acquaintances	63.6	70
Migrated alone	18.2	20
Guru	12.7	14
Relative	5.5	6
Total	100	110

Table 2 shows reasons for migration among transgender. Nearly, 80.9 percent of transgender are migrant. The main - reason behind this large number of migrants could be living with own gender identity. 62.7 percent are transgender are staying in Kurnool for less than less than 10 years. Majority of transgender migrated with their friend's help. Transgender migrate to places where they can be more anonymous away from family scrutiny, or to places with more progressive legislation and greater social acceptance.

Table 3. Quality of life in four major domains of transgender in Kurnool

Domains	Bad (%)	Good (%)
Physical Domain	56.4	43.6
Psychological Domain	65.5	34.6
Social Relationship Domain	39.0	60.9
Environment Domain	33.6	66.4

N = 110

Table 3 shows quality of life of transgender in Kurnool, Andhra Pradesh in four major domains is physical, physiological, social relationship and environmental. The quality of life in physical domain of transgender scored highlights that 56.4 percent have bad quality of life, whereas 43.6 percent have good quality of life.

In psychological domain, 65.5 percent of transgender experienced bad quality of life. In social relationship domain, 39.0 percent of transgender experienced bad quality of life. In environmental domain, 33.6 percent of transgender experienced bad quality of life.

Conclusions

There is a need to highlight the physical and psychosocial problems that are being faced by Transgender in India and strategies for bringing about an improvement in their quality of life. The study among the Transgender in Kurnool, Andhra Pradesh, India, as there is a rapid expansion in the Transgender population, there is an urgent need to develop Gender dysphoria (GD) in the developing countries like India and provide training to health care providers to manage the commonly existing health problems in the community.

We concluded that State Government of Andhra Pradesh have failed to implement the social welfare scheme, which was announced by state government. The state's failure to guarantee these fundamental protections has resulted in continued hardship faced by transgender communities.

We suggest

For an evaluation committee to examine whether transgender community is able to access to the rights and policies given to them. Government should empower Transgender to boost their self-esteem and quality living.

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