

Mental Healthcare of Transgender Community- A Study concerning Initiatives in India.

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Abstract

Transgender persons have been ostracized in our societies for ages due to the stigma associated with their sexual orientation and Gender Identity. Barriers related to health care are identified at an individual level (poverty, self-stigma), institutional level (registration process, lack of policies), and structural level (societal stigma) which prevents many transgender people from accessing health care services. The lack of free Sexual Reassignment Surgery (SRS) in public hospitals, the lack of national guidelines on gender transition services, and the lack of training amongst healthcare providers further aggravate the situation. The Manual on Mental Health Care of Transgender Persons in India –NIMHANS(2021) specifies the various mental health issues prevalent among transgender persons as Depression and anxiety, Schizophrenia and bipolar disorder, Suicide, Substance Use Disorder, Infections, Violence, and Medical co-morbidities. The manual also provides different guidelines to be followed by psychiatrists while dealing with various groups like children, adolescents with gender dysphoria, adult gender dysphoria, guidelines for referring individuals for hormonal therapy, sex reassignment therapy, psychotherapy/counseling, etc. But how far this initiative has been able to address the issue of mental healthcare of transgender persons deserves attention. With this aim through this paper, an earnest attempt is made to understand the scenario of mental healthcare for transgender persons in India.

Key Words: Mental Health, Transgender, Healthcare.

Introduction

Mental health by far is one of the crucial issues among the transgender community. The community has come a long way physically to be able to make a transition from one gender to the other through medical intervention, but things are otherwise when one takes into consideration the psychological side of it. Especially the mental stability of transgender youth is the most sensitive and difficult issue.

The transgender community is least considered especially in terms of mental health provisions. Ostracization from society at large and many times the long process of transition in aligning one's gender identity through hormone therapy or surgical intervention (*Sex Reassignment Surgery*), needs good mental health care to help deal with his/her feelings and the acceptance of the new identity. Being transgender is

not a mental health condition but the discrimination, violence, and marginalization that a transgender person has to endure from society has a negative and tormenting effect on the mental wellbeing of a transgender person.

When one lives in a society that sees a person as something different, strange, and abnormal, it can be an alienating and traumatic experience for the person concerned and may lead to a lot of stress, anxiety, depression, and other personality disorders. Every transgender person faces discrimination, prejudice, stigma, and violence. These manifest in high rates of mental illness like depression, anxiety, suicidal tendencies, panic attacks, self-harm, eating disorder, chronic personality disorder, substance abuse, and confusion to name a few.

A survey done in 2017 on the students of National Medical College, Kolkata found that around a sixth of respondents believed that homosexuality is a disease, over a quarter considered LGBT individuals to be promiscuous and nearly a tenth felt that they pose a threat to children. Studies have shown that a large majority of psychiatrists in India still consider diverse sexual orientations and gender identities as a disorder and practice “correctional therapy.”¹

Stigmatization of a trans person is a daily affair and part of their existence. Taunting, labeling, bullying, name-calling, etc., begin quite early in age as they are different from their peers and cannot fit into the group. This led to a high rate of dropouts in schools because of assault, verbal abuse, ridicule, and isolation. This process of discrimination starts first in the family environment itself where they become a subject of joke and ridicule among cousins and relatives. This continues throughout and in every aspect of their life.

Persistent lack of recognition, discrimination, lack of a support system, disrespect, humiliation, and biases push them away from the mainstream population and peer groups to a life of seclusion, neglect, and loneliness, which leads to various physical and mental illnesses. There are instances where transgender people are denied access to public urinals because of confusion concerning their gender identity. They have to face similar biases while using public transport, standing in queues, availing housing services, etc.² A report noted that transgender persons did not have the option of choosing their gender during vaccination. Another instance notes that a transgender person, who was a victim of a train accident died

¹ <https://lawschoolpolicyreview.com/2022/11/21queering-the-right-to-health-marginalisation-equal-citizenship-and-social-determinants-of-healthcare/>.

² *ibid*

unattended because for 3-4 hours the doctor could not decide as to which ward the person should be admitted.

Such ostracism, rejection, and prejudicial treatment can make a person extremely stressed, and significant psychological distress may lead even to suicidal tendencies. The World Health Organisation (WHO) dropped being transgender from the list of mental disorders in 2019. WHO has ever since coined a new designation i.e., ‘gender incongruence’ to describe people whose gender identity is different from the gender they were assigned at birth.³ The new standard of classification appears in the 11th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-11), which was adopted by the 72nd World Health Assembly held in Geneva, Switzerland in 2019 and implemented in 2022.

The Yogyakarta Principles provide a list of rights ensuring bodily integrity, non-discrimination, and freedom. Principles dealing with the right to health⁴ and protection from medical abuse⁵ stated that “everyone has the right to highest attainable standard of physical and mental health, without discrimination based on sexual orientation or gender identity. Sexual and reproductive health is a fundamental aspect of this right. Similarly, right is guaranteed about bodily and mental integrity, autonomy, and self-determination irrespective of sexual orientation, gender identity, gender expression, or sex characteristics.⁶ Additionally, the right to be free from torture and cruel, inhuman, and degrading treatment or punishment based on sexual orientation, gender identity, gender expression, and sex characteristics⁷ is also guaranteed that no one shall be subjected to invasive or irreversible medical procedures that modify sex characteristics without their free, prior and informed consent, unless necessary to avoid serious, urgent and irreparable harm to the concerned person. However, these right can be better exercised and protected only when the victims are provided with appropriate remedies and redress.

The latest WHO Guidelines for health of transgender people are clear: gender-affirming care is a fundamental part of guaranteeing the health of diverse people. The Guidelines are a part of the directives on HIV, viral hepatitis and other STI’s focused on particularly vulnerable communities like gay, sex workers, drug addicts, prisoners and such other people who are bound in other closed settings like trans

³ <http://www.cnn.com/2019/05/28/health/who-transgender-reclassified-not-mental-disorder/index.html>

⁴ Principle 17, <http://yogyakaratapinciples.org>.

⁵ Ibid, Principle 18.

⁶ Ibid, Principle 32.

⁷ Ibid, Principle 10.

and trans-diverse people. Their goal is to promote evidence-based healthcare for all people, irrespective of gender identity or health conditions.⁸

In an article published in the Journal of the International AIDS Society⁹ on 12 October 2022, the authors of the WHO Guidelines asserted that the WHO Guidelines included 'gender incongruence' in its diagnostic toolkit not to pathologies of gender dysphoria, but with the intent of ensuring that gender-diverse people have access to dedicated health resources, with specific attention to gender-affirming care, such as hormonal treatment and surgery.

The Guidelines stress the importance of establishing national programs and providing gender-affirming care or providing effective linkage and referral to services that can provide such care. The guideline also highlights the importance of financial support for such intervention, with the United Nation's commitment to universal healthcare access. The Guideline also emphasizes on the importance of recognizing transgender identity in official documents.

In India the landmark cases of *Naz Foundation v. Government of NCT of Delhi*¹⁰; *NALSA v. Union of India*¹¹; and *Navtej Singh Johar & ors v. Union of India*,¹² have to a certain extent been successful in reducing the misconception with respect to the transgender community and highlighting the disparity faced by them, thus creating awareness in society. The general ignorance with regard to the condition of the transgender persons have been dispelled to some extent. The society now even if not by choice but out of compulsion is bound to recognise and respect the new identity bestowed upon the transgender community by these path breaking cases.

However, in spite of the initiative taken by the various international organisations and the respective domestic laws of different countries to uplift the condition of transgender persons and to include them to the mainstream population, the effort has not been very successful yet. The transgender community to a great extent continued to be stigmatised and marginalised almost in every aspect of their lives.

Though on papers much progress has been made in terms of giving them more rights and protection, however in the practical aspect it is far from being the truth. Several laws have been enacted to safeguard and protect the interest of the transgender community, but its implementation is far from

⁸ <http://qz.com/the-who-says-gender-affirming-care-is-essential-to-trans-1849654213>

⁹ Virginia Macdonald, et al., 'The World Health Organization's work and recommendations for improving the health of trans and gender diverse people', 2022 Oct;25 Suppl 5(Suppl 5): e26004, <https://pubmed.ncbi.nlm.nih.gov/36225136/>.

¹⁰ 160 Delhi Law Times 277.

¹¹ AIR 2014 SC 1863

¹² AIR 2018 SC 432.

satisfactory. In practical world their rights are violated every day and the laws have not been able to safeguard their interest.

The transgender community continues to be pathologized and marginalized and cannot expect to work in a normal setting without being stigmatized. Very recently in the year 2022, a transgender person who was working as a school teacher in U.P. was forced to resign from her job owing to her gender identity. The complicity of the school management and staff in the loss of business and reputation pushed the transgender person toward unemployment. This incident clearly shows that the various laws and landmark judgments giving rights to trans persons have failed in their attempt to protect their interests.

However, amidst this gloomy scenario, a section of free-thinking individuals in our society have been persistently working to safeguard the interest of the transgender community and to give them their basic rights by taking various initiatives. Some of the measures taken by various institutions, organizations, schemes, policy-making bodies, individuals, etc., towards trans-inclusivity in general and their mental health in specific, can be summarized as follows:

- a. NIMHANS has taken the initiative of drafting the first manual on the mental health assessment of transgender persons health to effectively address the medical and psychological needs of transgender persons in India.¹³ The manual highlights the various mental health issues among transgender persons and provides guidelines for their assessment and treatment. It also doubles as an awareness measure to spread knowledge about various mental health issues and find possible solutions for them.

The manual is intended to assist in delivering mental health services (eg., assessment, counseling, psychotherapy) and serves as a guiding document for psychiatrists for referring TGNC individuals for hormonal therapy and sex reassignment surgery. The literature on the care and the needs of these individuals came from the World Professional Association for Transgender Health (WPATH), formerly known as 'The Harry Benjamin International Association for Gender Dysphoria.'¹⁴ The Indian Psychiatric Society (IPS) stands in solidarity with WPATH and other international and national organizations involved in the health, rights, and well-being of transgender and gender-diverse individuals and is committed to creating and providing gender-affirming practice towards the TGNC individuals. Since the transgender persons are subjected to

¹³ Navin Manohar Pai et al., "Manual on Mental Healthcare of Transgender Persons in India- For Practising Phychiatrist ", 1st Edition, NIMHANS, Bangaluru (2021).

¹⁴ Idbi pg 4

various forms of abuses and discriminations they are more vulnerable to the risk and mental issues. The various mental health issues prevalent among transgender persons are discussed as follows:¹⁵

Depression and anxiety (45,46)

- Approximately 30-70% of the individuals had a lifetime diagnosis of Depression
- Approximately 3-30% of the individuals had a current diagnosis of Anxiety disorder.
- Two to threefold increase the risk of depression and anxiety compared to the general population.
- The majority of individuals had some form of Psychological distress or adjustment issues.
- Risk is more than the general population

Schizophrenia and bipolar disorder (46)

- Risk no more than general population

Suicide (36,37,47)

- Rates of suicide range from 32-50% across studies
- Rates of suicide 20 times higher than in general population.
- 50% of the individuals had attempted suicide at least once by their 20th birthday.
- In India, the rate of completed suicide among Transgender's is around 30%

Substance Use Disorder (40,42- 44)

- The prevalence of substance use was 2.5-4 times higher for transgender youth compared with their non-transgender peers.
- Approximately 10-66% transgender individuals had a lifetime diagnosis of Substance use disorder.
- Strong correlation between a history of abuse and substance use disorder

Infections (32,33,48,49)

- 17.5 – 41% of transgender persons were HIV positive.
- Transgender women had a 50 times higher risk of contracting HIV than others.
- Studies have also shown an increase risk of other sexually transmitted infections like Syphilis (3%-79%), Gonorrhoea (4%- 14%), Chlamydia (2%- 8%), Herpes (2%-6%), Human papillomavirus (3%- 7%)

¹⁵ Idbi pg 14

Violence (31,33,38,39)

- 65-98% had faced verbal abuse.
- 25-79% had faced some form of Physical abuse.
- 20-33% had a history of sexual abuse.
- Social stigma and other factors may lead to under-reporting of acts of violence committed towards transgender individuals.

Medical comorbidities (42,43)

- Increased propensity to develop obesity, metabolic syndrome, and diabetes.
- Hormone therapy in transgender men associated with increased risk of-
- Elevated liver enzymes
- Decreased Bone mineral density
- Increased risk of ovarian cancer

The manual provides different guidelines to be followed by psychiatrists while dealing with different groups like children, adolescent with gender dysphoria, adult gender dysphoria, guideline for referring individuals for hormonal therapy, sex reassignment therapy, psychotherapy/ counselling etc.

- b. SMILE (Support for Marginalised Individuals for Livelihood and Enterprise)¹⁶**- On 12 February 2022 the Ministry of Social Justice and Empowerment launched an umbrella scheme called 'SMILE - Support for Marginalised Individuals for Livelihood and Enterprise'. The Ministry has allocated a fund of Rs.365 crores for the scheme from 2021-22 to 2025-26. The scheme covered amongst others various welfare measures for the transgender communities and persons engaged in the act of begging. The focus of the scheme extensively is on rehabilitation, provision of medical facilities, counselling, education, skill development etc., with the support of State Government, Local and Urban Bodies, Union Territories, Voluntary Organisations, Community Based Organisations (CBO's), Institutions, NGO's and others.

The scheme includes measures like –

- Financial assistance in the form of scholarships to transgender students studying in classes Ninth till post-graduate.
- Skill development training and livelihood.

¹⁶ <https://socialjustice.gov.in/schemes/99>.

- Composite medical health for availing gender reaffirmation surgeries, pre and post-operative procedures
- Setting up of **Gramin Grehs** in each state for providing shelter facility for abandoned and orphaned transgender persons.
- Setting up of **transgender protection cells** in the entire country for providing quick redressal of crimes against transgender persons.

b.i. Composite Medical Health Under SMILE

The Composite Medical Health is a component under the SMILE scheme the objective of which is to provide health insurance coverage to all transgender persons living in India to improve their health condition through proper treatment. The health benefit packages is provided under Ayushman Bharat Yojana in the form of Ayushman Bharat TG Plus. Each transperson receives an insurance cover of Rs.5 Lakhs per year under the scheme.

The insurance package cover all aspects of transition related healthcare for transgender person such as gender reaffirmation surgery, sex reassignment surgery inclusive of post-operation formalities which can be redeemed at all private and government healthcare facilities.

c. National Portal for the Transgender persons

On 25th November 2020, The Ministry of Social Justice and Empowerment launched the National Portal for Transgender Persons. It is a hassle free way of obtaining a certificate of identity and identity card online without physical interference with the officer of issue. The person who has been issued a certificate of identity is entitled to change the first name of the birth certificate and all other official documents relating to the identity of such person.

d. Empowerment of transgender person through Education measure under National Education Policy 2020 (NEP)

The National Education Policy is a comprehensive measure which aims at universalisation of education from pre -school to secondary level with 100% Gross Enrolment Ratio (GER) in school education by 2030. Such a vision cannot be a success by neglecting and discarding a certain section of the community from its benefits. The transgender children which constitute a large segment of the population has to be included within the scheme to realise the grand vision this scheme. With this purpose in view the NEP 2020 included provisions for assisting transgender children in gaining access to education and support community based intervention to assist transgender

children's participation in education., thereby aiming to eliminate any form of disparity in access to education. NEP 2020 identifies transgender children as Socio-Economically Disadvantage Groups (SEDGs) and provides for equitable quality education for all such students. NEP 2020 also has provisions to set up a Gender-Inclusive Fund to provide equitable quality education for all girls as well as transgender students.

e. Empowering the transgender community through Skill Development, Vocational Training and Livelihood

e.i. Skill India Mission

The Ministry of Skill Development and Entrepreneurship (MSDE) through the Skill India Mission has been initiating various schemes and programmes like Pradhan Mantri Kaushal Viksa Yojana (PMKVY), Jan Shikshan Sansthan (JSS) Scheme and National Apprenticeship Promotion Scheme (NAPS), for providing short term Skill Development training and Craftsman Training Scheme (CST), for long term training to the youth belonging to all sections of society including transgender persons across India.

e.ii. Skill Training through PM-DAKSH (Pradhan Mantri-Dakshta Aur Kushalta Sampann Hitgrahi)

The Ministry of Social Justice and Empowerment is imparting Skill development training to the Transgender beneficiaries of the SMIL Scheme through PM-DAKSH- a skill development scheme for both short term and long term training programme for the transgender persons to enable them to get market- oriented skills for getting livelihood.

Mental Healthcare Services to transgender persons under the MHA, 2017

The transgender persons represents a diverse set of groups and subgroups, with unique assets and gifts. Therefore, the challenges they face are also unique. They are often marginalized in terms of accessing mental healthcare as their gender identity, socioeconomic status plays a contributing role. Even for accessing basic mental healthcare needs, this community faces problems like discrimination, prejudice, denial of civil and human rights, harassment, family rejection and more. A compassionate, empathetic approach and an all-inclusive attitude from the mental healthcare providers form the primary basis for accessible mental health for the LGBTQ community can play a crucial role.

Mental health is an important social issue, with significant negative consequences for individual and social welfare. The enactment of the Mental Healthcare Act, 2017 by the Indian Legislature has been

a significant approach in addressing their vulnerabilities in the context of discrimination, social security, health care and sexual offences against them.¹⁷ Barriers related to health care are identified at individual level (poverty, self-stigma), institutional level (registration process, lack of policies) and structural level (societal stigma) which prevents many transgender people to access health care services. The lack of free Sexual Reassignment Surgery (SRS) in public hospital, lack of national guidelines on gender transition services and the lack of training amongst health care providers further aggravates the situation. The Manual on Mental Health Care of Transgender Persons in India –NIMHANS (2021) specifies the various mental health issues prevalent among transgender persons as- Depression and anxiety, Schizophrenia and bipolar disorder, Suicide, Substance Use Disorder, Infections, Violence and Medical co-morbidities. The manual also provides different guidelines to be followed by psychiatrists while dealing with different groups like children, adolescent with gender dysphoria, adult gender dysphoria, guideline for referring individuals for hormonal therapy, sex reassignment therapy, psychotherapy/ counselling etc.

The Transgender Persons (Protection of Rights) Act 2019 also encompasses healthcare provisions. Section 15(d) further stresses on the need for a health manual but the law is silent on the need of mental healthcare of the transgender community.

A review on their mental health reported that the transgender youths are at higher risk of suicidal tendencies, self-harm, depression, disorder, anxiety etc.¹⁸ A study conducted in India (Naskar Prosenjit et al) reported that 98.6% of the individuals were verbally abused, 79.2% were physically abused, 33.3% were sexually abused and 18.1% faced childhood abuse at least once in their lifetime.¹⁹

Another Survey report titled “Injustice at Every Turn: A Report of the National Transgender Discrimination Survey 2011” stated that out of more than 6400 respondents 415 have attempted suicide.

In India the LABIA survey report 2013 found that stigma, control and violence at home pushes the transgender respondents to attempt suicide. The report also states that depression, self-harm, staying away from home, running away from home were common responses to family violence among respondents.²⁰

Since transgender youth are at higher risk for multiple psychological problems including family and peer rejection, harassment and bullying, trauma, abuse, lack of legal support, lack of financial support,

¹⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4887282/>

¹⁹ Naskar Prosenjit et al., “An assessment of quality of life of transgender adults in an urban area of Burdwan district, West Bengal”, International Journal of Community Medicine and Public Health. 2018 Mar;5(3):1089-1095, <https://www.ijcmph.com/index.php/ijcmph>.

²⁰ <https://socialjustice.gov.in/writereaddata/UploadFile/Binder2.pdf>.

lack of education etc., makes it problematic for transgender person to find a comprehensive medical and mental health service.²¹

It is evident from several reports that the transgender persons had to face horrific experiences while accessing healthcare services in the country. The situation became bleaker as during the COvid-19 crisis certain services are rendered 'non-essential' and is deprioritized in order to deal with Covid-19 cases (including SRHR, ART and HRT medication).²² While many challenges were pre-existing like high rate of unemployment, poverty, family abuse, and homelessness etc. the restrictions on mobility and access peer support has adversely affected the mental health of LGBT+ individuals with growing feelings of anxiety, stress and depression.²³ They are also at high risk of not receiving treatment even if they are infected with corona virus. Moreover, since a large population of transgender people does not have Government ID cards, they could not access relief care packages and other services provided by the State.²⁴

There must be special focus on the right to access healthcare (including general health services (physical/ mental) as well as Gender Transition Services (including sex reassignment surgery). Initiatives must also be taken to improve competency among health care providers in dealing with transgender specific health issues.

Key challenges to mental health care services amongst transgender persons in India

Stigma and discrimination within the healthcare sector impacts transgender person's desire and ability to access appropriate healthcare services. Barriers including financial soundness, incompetency of health care providers, lack of infrastructure within the health care system further magnifies their plight. This leads to unprecedented difficulties with mental, physical and social well-being. Some of the primary issues and challenges specific to the transgender persons are summarized as follows:

- i. Discrimination and lack of equal civil and political rights
- ii. Lack of protection for their gender identity and expression
- iii. Lack of access to comprehensive healthcare services
- iv. Lack of inpatient psychiatric units, shelter homes, and residential treatment programs.
- v. Paucity of competent healthcare providers.

²¹ Nath, Prof (Dr.) Hiren Ch and Islam, Dr. Parveen, Transgender Rights and the Modern Society, HD International Educational Publishers (2024).

²² Ibid.

²³ Ibid.

²⁴ Ibid.

- vi. Lack of insurance coverage for their treatment.
- vii. Hostile environment for indoor and outdoor patients.
- viii. Lack of separate wards for them.
- ix. Insufficient bed capacity.

Conclusion

Delivery of mental health care services to the transgender community requires the efficient and effective collaboration of entities from different departments and organizations. There is an urgent need for intervention from family, community, government and voluntary organizations that aims at the rehabilitation and reintegration of transgender individuals with mental health problems. Owing to the socio-economic situation of the transgender persons it is also necessary that not only access to mental healthcare services should be ensured but it must also guarantee mental health safety in the service centers. Moreover, subsidized or free of cost medication and treatment would give an impetus to the noble initiative undertaken by NIMHANS for the transgender people. It would be credit worthy if at the State level and the District level these guidelines can be implemented in all mental healthcare service centers. This would bring a paradigm shift in address mental healthcare issues in India. Lastly, the Government at the center and the State should work out on implementing effective schemes, sensitization programmes, and provide insurance coverage for mental healthcare of the transgender community.