

Challenges and Issues in Health Care Utilization among Transgender Community in Tamil Nadu

OPEN ACCESS

Volume: 8

Issue: 2

Month: March

Year: 2020

P-ISSN: 2319-961X

E-ISSN: 2582-0192

Received: 13.01.2020

Accepted: 19.02.2020

Published: 01.03.2020

Citation:

Sangamithra, A. and Arunkumar, P. "Challenges and Issues in Health Care Utilization among Transgender Community in Tamil Nadu." *Shanlax International Journal of Economics*, vol. 8, no. 2, 2020, pp. 24-28.

DOI:

<https://doi.org/10.34293/economics.v8i2.2178>



This work is licensed under a Creative Commons Attribution-ShareAlike 4.0 International License

A. Sangamithra

Professor, Department of Economics, Bharathiar University, Coimbatore, Tamil Nadu, India

P. Arunkumar

*Research Associate, Department of Economics
Bharathiar University, Coimbatore, Tamil Nadu, India*

Abstract

Transgender is a wide-ranging expression functional to a diversity of individuals, behaviors, and groups concerning tendencies to deviate from the normative gender roles. In India, till very recently, transgender was not recognized as human beings. This is a huge violation of Human Rights. The lack of recognition has segregated them from society, and above all, in the matter of Civil Rights, they have been destitute from many rights and privileges that the common Indian people enjoy. Transgender people have a gender identity or gender expression that differs from their assigned sex. Some transgender people who desire medical assistance to transition from one sex to another identify as third gender person. Transgender peoples normally prone to health hazards, and they undergo many physical and mental difficulties or problems in obtaining medical treatments and general medical treatment in hospitals. The Medical Council of India should issue guidelines to the medical professionals and avoid discrimination in the medical treatment of the transgender community. The medical curricula in various medical colleges should be reformed to prevent seeing transgenderism as a disease and deviance.

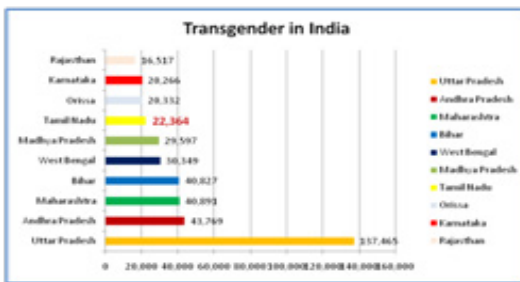
Keywords: Transgender, Identity, Hazards, Health care, Dignity, Adequate, Aravani, Thirunangi, Utilization, Community, Human Rights.

Introductions

Transgender is a wide-ranging expression functional to a diversity of individuals, behaviors, and groups concerning tendencies to deviate from the normative gender roles. The name 'Transgender' is popularized in the 1970s recounting group who required living as cross-gender exclusive of sex reassignment surgical treatment. Transgender usually prone to health hazards and struggle to reconcile their physical visibility with the invisibility of their community as a whole. These services, on the one hand, reduce pain or sufferings associated with an illness or a disease by providing medical treatment, and on the other, keep human beings physically and mentally fit by preventing the occurrence of illness/disease. As such, they undergo many physical and mental difficulties or problems in obtaining medical treatments in hospitals. Health has a multi-dimensional angle to it, which is responsible for both the beginning and end of development strategy. Health and development are interconnected to each other as good health leads to economic development, in turn, contributes to improved health status. An attempt has been made to explain the health care utilization of the transgender based on reviews like health care, discrimination at hospitals, and sex reassignment surgery, to name some.

Transgender in Tamil Nadu

In India, till very recently, transgender was not recognized as human beings. This is a huge violation of Human Rights. The lack of recognition has segregated them from society, and above all, in the matter of Civil Rights, they have been destitute from many rights and privileges that the common Indian people enjoy. Transgender is not part of social and cultural participation in public and neglected by own family and society. In India, the total population of transgender is in the order of 4.88 Lakh as per the 2011 survey.



Source: Indian 2011 Census Report

Estimation of 2015 onwards in Tamil Nadu 16,380 transgender identified themselves as LGBT (Lesbian, Gay, Bisexual, and Transgender). Transgender in Tamil Nadu identify as “**Aravani.**” Several Aravani activists wish for the public and media to use the name ‘**Thirunangi**’ to pass on to Aravanis.

Objectives of the Study

The following are the objectives of the study;

- To understand the Right to Health Care utilization and Equity to transgender.
- To review the challenges and issues in healthcare utilization of the transgender in Tamil Nadu.

Methods and Material

The methodology is an extremely vital part of the study effort. A researcher has to follow a normal way of investigation to know the observable fact under study. Hence, trust this article in mind, a systematic method of reviewing the literature available has conducted. A review of the presented literature on the challenges and issues in healthcare utilization of transgender and associated were taken into analyses of the similar are done in a logical method.

Right to Health Care utilization and Equity to transgender in Tamil Nadu

In February 2014, the Supreme Court conceded a pointer ruling, paving the system for enshrining the privileges of transgender in law, in this judgment that also observed that this community faces “large and pronounced discrimination” in healthcare. The apex court deemed that persons had the precise to the self-identification of their sexual direction. It ruled that the fundamental rights settled by the formation are equally applicable to transgender who comprises the ‘third gender.’ The decision also called for positive achievement in education, primary health care, and transgender is recognized as beneficiaries of community wellbeing schemes. The Madras High Court issued a cursor decision on 22 April 2019 to keeping the marriage rights of transgender women under the Hindu Marriage Act, 1955, and directing the state to ban sex-selective surgeries on intersex infants. The plan for transgender rights legislation draws from the court’s orders. Tamil Nadu government has given free health insurance and free sex reassignment surgery in select government hospitals. In India, Tamil Nadu is the first state to establish a transgender welfare policy, in which transgender individuals can access free sex reassignment surgery in government hospitals and various other benefits and rights.

Challenges and Issues in Healthcare Utilization to Transgender

Stress caused by the fear of being treated wrongly, worries about abuse, and administrative hurdles is preventing many of the country’s two million transgender people from seeking medical care. “If a transgender client comes to the institution, how should the hospital take care of them?” Dr. Jahagirdar posed a question that in his mind and accordingly worked in the hospital every day. At the same time, as government hospitals recommend economic health care, hospitals frequently not educated on how to deal with transgender people. Transgender people who seek out Sex Reassignment Surgeries (SRS) are normally required to confer with private medical providers, where anxiety power is of higher quality, but the process is costly. Stack on top of the fact that SRS is well thought-out a decorative surgical

treatment, which renders it outside the purview of insurance policies that can subsidize expenses. Accessing healthcare services, even for common ailments, is traumatic for transgender people because they do not fit traditional gender roles. An enter problem transgender people face is unawareness of gender identity issues among medical staff, who acknowledge only saree-clad “Hijras” Tamilnadu’s traditional male-to-female transsexuals who live as a third gender community.

While the Tamil Nadu government has pioneered efforts to address the safety needs of transgender people, still a lot of challenges are not solved on healthcare. They are discriminated against, and sexual harassment against receiving medical treatment, and they want a separate medical facility for third parties. Transgender has been asking for safety and dignity to take medical treatment in hospitals. Chitra A. et al. (2018) showed that 17.6 percent of the transgender had delayed going to the hospital, fearing discrimination. Harassment either in physical or verbal form experienced by 41.2 percent and 37.5 percent faced discrimination in the form of judgmental looks or comments, while 5.9 percent of the transgender was denied treatment altogether in the hospital. Denial of equal treatment experienced by 52.9 percent of the study participants. The study highlights that transgender, even today, face considerable discrimination, which refrains them from assessing health care facilities.

Sylvia Karpagam (2018) observed in “The news minute”, the relationship of the transgender community with the healthcare system is less satisfactory. The healthcare system in India generally does not have a good record of treating persons from marginalized communities. At the same time, as the private healthcare system is unfair, excessively commercialized, and disapproving of any meager patients, the government healthcare scheme is underfunded, understaffed, and well-worn. Dreadfulness stories flourish of healthcare staff asking preventable questions about sex, fake and genitalia, constant once a transgender person goes for isolated health issues.

Venkatrama Raju and Beena (2015) have been explained in his study on “A Study on Socio-Economic Issues of Third Genders in Tamil Nadu”. The study aimed at the socio-economic

background of the transgender issues faced by them and suggestions to recover their stipulation in Tamil Nadu. This study has been collected secondary data, which concluded that if India removed discriminatory law and passed equal opportunity legislation based on sexuality and gender, the transgender community would get the required human rights that they deserve and save from HIV/AIDS.

The study “Factors Associated with Health Care Discrimination Experiences among a National Sample of Female to Male Transgender Individuals,” by Deirdre A. Shires and Kim Jaffee (2015) aimed at studying the harassment and violence faced by the transgender and discrimination faced by them in the health care system. Cross-sectional data has collected from 1,711 female to male transgender individuals. In this analysis part, a two-step logistic regression and chi-square test has run. The findings suggested that 41.8 percent of female to male transgender individuals reported having faced denial of equality in hospitals, physical assault, and harassment.

The health-seeking behavior of transgender is very meager. Transgender does not visit government hospitals fearing disgrace and discrimination, harassment, and lack of sensitivity among health care staff, and counselors (Pisal 2006). A Lot of money is spent in private hospitals and clinics. Ranade, in her study, has highlighted that transgender in rural and urban areas rely on self-medication or hakims (traditional medical practitioners) for STI treatment.

The medical establishments are progressively being measured of more holistic health care in the right to entry. The occurrence of these rights clinics that offer affordable health care exclusively to transgender people has been cropping up in Tamil Nadu. But, Dr. Sameera Jahagirdar (critical care specialist at the Mahatma Gandhi Medical College and Research Institute (MGMCRI) in Pondicherry), has said: “most of the country’s hospitals lack an organized standard of care for trans patients”.

The Study “Transgenders in Tamilnadu: Violations and Challenges” by Mathew Arumai et al., (2014), observed that a Few transgender people expressed that their parts were screened and examined in front of the medical students at government hospitals. These incidents contain lead to mental pain. Female doctors in government hospitals are

diffident to see the male to female transgender. These problems and challenges observed that the medical squad in government hospitals, together with doctors and nonmedical personnel, have a harmful approach towards transgender and often ill-treat them.

Conclusion

For allowing Transgender people to access existing schemes of the Healthcare schemes of the central government, need additional money is necessary. A central government regulates adequate if it states that transgender people are allowed to use the accessible central government schemes about health care. A method for the right of entry ought to, however, needs to be determined. For securing resources in the long-term, a costed transgender specific plan should submit to the National Planning Commission, and other ways also need to be identified. From the present study, it is clear that still at present, transgender peoples face significant intolerance in health care services. Even though we in Tamil Nadu have pioneered the development of the transgender boards, free sex reassignment surgery in government health care facilities, the utilization by the transgender is extreme from at the back. This is recognizing due to the unfairness faced by transgender. There is a need for reforming health care institutions in India. The Medical Council of India should issue guidelines to the medical professionals and avoid discrimination in the medical treatment of the transgender community. The medical curricula in various medical colleges should be reformed to prevent seeing transgenderism as a disease and deviance. Adequate health communication programs are also necessary to provide proper orientation to the general public and medical professionals concerning the protection of the rights of transgender. Suitable action plans should be drawn for the rehabilitation of transgender through health awareness programs and providing health education opportunities.

References

- Baba, R. and Sogani, R. "Transgender Health and Healthcare in India: A Review." *Journal of Health Systems*, vol. 3, no. 1, 2018, pp. 4-8.
- Chitra, A. et al. "A Cross Sectional Study to Assess the Discrimination Faced by Trans Genders in Health Care Facilities - Chennai, Tamil Nadu." *International Journal of Community Medicine and Public Health*, vol. 5, no. 2, 2018, pp. 662-666.
- Ding, James M. et al. "A Model for Improving Health Care Quality for Transgender and Gender Nonconforming Patients." *The Joint Commission Journal on Quality and Patient Safety*, vol. 46, no. 1, 2020, pp. 37-43.
- Felix, Elango. "Transgender and our Society." *The Companion Voicing Together*, <https://thecompanion.in/transgenders-and-our-society/>
- "Growing recognition of transgender health." *Bulletin of the World Health Organization*, vol. 94, no. 11, 2016, pp. 790-791.
- Iyer, R. et al. "Understanding the Mental Health Issues and Service Needs of the Transgender Community in Delhi, India." *Sexually Transmitted Infections*, vol. 95, 2019, pp. A157-A158.
- Karpagam, Sylvia. "Why Transgender Persons Bill 2018 is a Healthcare Nightmare for the Community." *The News Minute*. 2018, <https://www.thenewsminute.com/article/why-transgender-persons-bill-2018-public-health-nightmare-community-94206>.
- Mathew Arumai, M. et al. "Transgenders in Tamilnadu: Violations and Challenges." *Cognitive Discourses International Multidisciplinary Journal*, vol. 2, no. 2, 2014, pp. 42-50.
- McCann, E. and Danika Sharek. "Mental Health Needs of People Who Identify as Transgender: A Review of the Literature." *Archives of Psychiatric Nursing*, vol. 30, no. 2, 2016, pp. 280-285.
- Palve, S.B. et al. "Health Issues among Transgenders in Urban Pondicherry." *Indian Journal of Community Health*, vol. 30, no. 4, 2018, pp. 323-33.
- Pethuru Devadason, et al. "Medical Practitioners' Knowledge about and Attitude towards Transgenders in India." *Texila International Journal of Public Health*, vol. 5, no. 4, 2017, pp. 1-11.

- Pisal, H. *Culture and Health of Hijras in India - Study of a Marginalized Community in Pune and Mumbai*, University of Basel, 2006.
- Safer, J.D. et al. "Barriers to Healthcare for Transgender Individuals." *Current Opinion in Endocrinology, Diabetes, and Obesity*, vol. 23, no. 2, 2016, pp. 168-71.
- Sethi, Sujita. "Transgender Health and their Rights in India." *International Journal of Research in Social Sciences*, vol. 8, no. 10(1), 2018, pp. 279-288
- Shires, D.A. and Jaffee, K. "Factors Associated with Health Care Discrimination Experiences among a National Sample of Female-to-Male Transgender Individuals." *Health & Social Work*, vol. 40, no. 2, 2015, pp. 134-141.
- Venkatrama Raju D. and Beena K.S. "A Study on Socio-Economic Issues of Third Genders in Tamil Nadu." *International Journal of Science and Research (IJSR)*, vol. 4, no. 7, 2015, pp.1354-1357.

Author Details

Dr. A. Sangamithra, Professor, Department of Economics, Bharathiar University, Coimbatore, Tamil Nadu, India,
Email ID: sangamithra@buc.edu.in.

P. Arunkumar, Research Associate, Department of Economics, Bharathiar University, Coimbatore, Tamil Nadu, India,
Email ID: aruncinna89@gmail.com.