

AIDS BUZZ

New Delhi June 2007

Transgender Special



More than a Woman



No less than a Man

Laxmi is well-educated, career-oriented, confident and unapologetic about her status as a *hijra*. Social activist and founder member of Dai Welfare Society, a community based organisation of *hijras*, she now has her own society Astitva that works on AIDS control-related programmes.

By **SADHNA MOHAN** in Mumbai

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She touches a raw chord in men, is always sexily turned out and when she talks, the bureaucracy listens

LYING IN LOVE'S LAP: In the lap of her companion Shaheen, Laxmi smiles contentedly



More than a woman.....' went the soft, flowing lyrics eulogising a woman in the 70s hit film *Saturday Night Fever*. Surprisingly, these words spring to mind as you seek to describe, no, not a woman, but a sensational new age *hijra* – Laxmi.

"I feel like I am a *Gannika* (a woman who in medieval times taught noble women how to touch a man to keep him curled around one's fingers)," Laxmi tells me and expands, "Amrapali and Chitrlekha were *Gannikas*."

You believe that if you see her in action. Five feet eleven inches tall, dressed to kill and carrying herself with élan, her bright, innocent eyes turn deeply seductive and her voice takes on an inviting purr as she sensuously strokes any which man strikes her fancy. And she touches a raw chord, the men admit.

Laxmi Narayan Tripathi comes across as an attractive socialite, turned out to sexy perfection in Western or Indian attire. "I came across the phrase 'She was a face in the crowd' in Class V and that's what I set out to be — a face that stands out in a crowd. I hate being lost in a crowd. I'm extra trendy, love to wear micro minis and go topless or backless, love make up and know how to handle my face (my canvas)," she guffaws when asked about her penchant for dressing up.

"It is a method to attract people," she concedes. "Presentation plays an important role in everyone's life and brings down stigma by 95 per cent," she says. Add to that brains, confidence and the power of being articulate and you have the ingredients of the Laxmi persona that radically changes the common perception of what a *hijra* is.

Laxmi looks bit-man and bit-woman. The hint of a shave and the baritone voice that can turn rough and domineering like any man's are male features in what is presented as a feminine persona.

A *hijra*, according to her, is someone who is feminine but not a woman, masculine but not a man, a person beyond the boxes of man and woman. The person follows the rules and regulations of the community, has a guru, lives in saris or feminine attire, may or may not be castrated.

Laxmi hops in and out of airports and got a \$500 braiding job done on her hair in Washington en route to the Toronto World AIDS Conference 2006. She visits happening places in Mumbai or anywhere in the country, totally comfortable with herself. In fact, as I talked and walked with her on Mumbai's Carter Road, she jumped into a kids' football game by the side of the sea, later stretching out her hand to say goodbye. And they took her hand without much thought to her gender.

What makes Laxmi this fantastic bridge between the marginalised *hijra* community and the wider society? How is it that when she talks, the bureaucracy working on AIDS control listens? When did she discover that she was a *hijra* and how did she handle it? I



IN AMRAPALI'S FOOTSTEPS: Laxmi feels that she follows the footsteps of *Gannikas* of yore like Amrapali, a courtesan who knew how to keep a man curled round her fingers through her seductive art

asked her all this and more in an interview spanning several hours for Laxmi is easily distracted (keeps coming up with comments such as "look at that man—he walks like a *kothi*..."), loves to play the fool and also loves the camera. So while I asked the questions, she answered to the camera, changing her face angle or position as she thought best.

Now 27, Laxmi was born to a Brahmin couple from Uttar Pradesh. Her father worked as a production manager with the JK Group, her younger brother works with The Business Standard's advertisement department in Mumbai while the eldest sibling, a sister, is married to an Indian Air Force officer.

English-medium educated, Laxmi went to Thane's Smt Sulochana Devi Singhania High School until Class IV and then to Bim's Paradise School. She graduated in commerce from Mumbai's Mithibai College, is a post-graduate in Bharatnatyam, set up a chain of nine Bharatnatyam and contemporary dance schools called Lucky Chaps Dance Academy in Thane, worked as a model coordinator for a while and has appeared in films, music videos and TV serials (*X-Zone*). She was one of the main characters in the award winning German documentary on the third gender *Between the Lines: India's Third Gender* and is 'Cleopatra' in a current photo exhibition in Mumbai. Aware of her value, she charges a fee for photo shoots and on-screen interviews by commercial enterprises.

Eight years ago, she turned to social activism by becoming a founder member of Dai Welfare Society (DWS), a Mumbai-based community based organisation (CBO) of *hijras*, which she later led as President until last year when she and a break away group of DWS set up a new CBO, Astitva. Laxmi is now Chairperson and Project Director of Astitva. She continues to give dance performances, about once a month, and the dance schools are being managed by others. Involvement with other performing arts is rare as community work takes precedence. Occasionally, she offers *badhai* in homes. Interestingly, VIPs seek her out and pay exorbitant sums for offering *badhai* at their homes.

A dancer first, then a *hijra*, is how Laxmi is perceived. Stigma..? There's none of it. Outside Thane's Town Hall, where her dance classes are held,

WORLD BYTES

Rapid HIV Test in the Offing?

An oral test for HIV is emerging as an effective and preferred alternative to blood tests and could become the standard in rural settings of developed countries. In clinical trials conducted on 450 patients in a rural hospital in Sevagram, Maharashtra, the oral test OraQuick HIV1/2 was shown to be 100 per cent accurate, while standard blood tests reportedly have an accuracy of 99.7 per cent. The research was published in the April edition of PLoS ONE, an online, open-access publication of the Public Library of Science.

The test is simple and the result can be obtained in less than 20 minutes.



Swabs of oral fluid are taken and tested for the presence of antibodies against HIV. The study also found that 66 per cent of those who did a blood test for HIV complained of discomfort, while

only 8 per cent of those who submitted to the oral test had complained. The authors conclude that the test could greatly enhance the control of HIV in rural, resource-limited areas in Africa, China, India and Russia.

PLoS ONE

Ethics of AIDS Vaccine in Question

Scientists and medical ethicists are raising disturbing questions about the HIV/AIDS vaccine trials in the country.

The critics question the justification of starting Phase I safety trials for an AIDS vaccine in India days before the release of the results of the same trial in

Belgium and Germany. International AIDS Vaccine Initiative (IAVI) and National AIDS Research



we saw her rubbing shoulders with all and sundry and being greeted with immense warmth.

Her parents' love and acceptance has played an important role in keeping societal stigma at bay and building her confidence. "If your parents back you, outsiders soon shut up," she says. Her mother would get ferocious if people outside the house teased her.

Her father was angry and upset when she opted to be a *hijra* but her mother took on a strong supportive role and insisted their child remained their child, no matter what. They told her she could do anything but she had to continue living in the house. "I can go back home in the wee hours of the morning but even then am served a hot chappathi by my mother or *bhabi* (brother's wife)," says she.

"What was I? I was confused about this since I was in Class II as people would call me 'homo', 'mamu', etc." This was the time she was enthralled by Bharatnatyam, its costumes, make up and jewellery. Despite their initial discomfort, her parents allowed her to pursue her passion.

At this time, she was exposed to sex. "It gave me strength to fight back, I became mature and couldn't allow men to use me," she says.

Passing Class IV, she went to Ashok Row Kavi, journalist-cum-gay activist: "Mama, there's something wrong with me, I only like men and crotches." He said: "Baby, you are perfectly normal, the world around you is abnormal."

But the gay circle, she discovered, was not really her scene. "They were so like men, I was so woman like. They felt I was too loud for a gay. A blind man could tell my presence. I was known as a drama queen, the Queen of Thane."

"I felt I was not a gay. There was a new word going around, 'drag queen'. I thought I was a drag queen," she says. From Class VIII onwards, she was always in women's clothes — kurtis, lungis and hot pants.

In Class IX, she met Shabina Frances, a *hijra*, sister of Laxmi's dance student Gloria. Laxmi was sending models for a film shoot to Hyderabad and had arranged to meet Shabina at Victoria Terminus to see if she could hire her as an assistant model coordinator. Her queer status turned out to be an asset and Shabina got the job.

Shabina told her about the historical background of the *hijra* community, the religious acceptance they enjoyed and the fact that a *hijra* had a guru and chelas — 'her own family'. "It sounded attractive and mingling with *hijras* was a soothing experience." Within eight months of meeting Shabina, Laxmi joined the *hijra* community with Shabina now her guru. Shabina, along with some other *hijras*, was the founder and initial President of DWS.

"We (*hijras*) are different from gays," Laxmi often underscores the point for the Indian government's AIDS programme officials. The fact that they live as a community with its particular structure and rules and the community is therefore a point of access to the AIDS programme is clear. Basically, barring those born with ambiguous genitals, being a *hijra* today, I surmise, seems to be a lifestyle option that a gay or anyone might exercise. Right? I ask Laxmi. "Yes," she agrees.

How many *hijras* today live in their familial homes? "About 20 per cent," says Laxmi. Quite a few of them span the *hijra* world and the mainstream by living like a *hijra* in the day and going back home in pants and shirt



COFFEE, TEA OR ME? Heena, attired bride-like in red and gold awaits customers at a dhaba

Educated *Hijra* with an Accent on Selling Sex

Photo: Zishaan Latif

I can speak English, I am doing my bachelors in education (B Ed)," young Heena spoke in flawless English at Vitawah, in Maharashtra's Thane district, where she was engaged in sex work.

Her credentials, to say the least, were startling. So was her appearance and the incongruous setting where we spoke — a dhaba by the side of a police check post where nearly 100 trucks entering Thane were lined up.

The time was 10 pm or so. Looking pretty much a woman, bride-like in fact, in bright red and gold, she had, that evening, serviced 10-15 clients in the bushes on the sides of the Mumbai-Thane highway.

"I taught as an untrained teacher in a Thane school for three years and left this year when they didn't give me a permanent position. I enrolled for B Ed but to support myself I opted for sex work two months ago when I entered the *hijra* community," says she.

Heena had been living with her parents in Thane. Two months ago, her father retired and went back to his native place in Gorakhpur, Uttar Pradesh. That was when she joined the *hijra* community, living with her guru Muskan and others.

"Before entering sex work, I enjoyed having multiple partners," she lets on. Each evening, she stands at a particular place along the

highway from 7 pm to 1 am. A minimum of 15-20 clients are serviced.

The charges vary from Rs 50-100. If she stays the night with a client, she charges Rs 500.

Is she scared about HIV? "Yes, I know it is risky to have sex even with a condom. I use a condom always and have tested for HIV three-four times already. We avoid having anal sex and touch a client only after he wears the condom," she states. Do clients ever mistake her to be a woman? Apparently they do and 10 per cent walk away on finding she is not a woman.

Is she aware of the female condom that she herself can use to protect herself? "I don't know about it," says Heena.

Will Heena return to teaching after completing her B Ed? The question which rose to mind remained unasked.

Hijras like Heena have the potential of being new role models for the community. Our brief foray into the *hijra* world showed that quite a few of them had gone to school before opting to join the community.

Does the community submerge them into its fold of sex work, begging and *badhai* dance? Heena- and Laxmi-like role models can perhaps inspire others to new occupations provided society and familial homes too support, instead of hound, them.

at night or being with *hijras* in the night and at home in the morning, she adds.

Does she consider a sex change? "Yes, but my astrologer has asked me to wait for 10 years. If he suggests a way out, I will go for a breast implant in the meantime."

But that, she is sure, will not make her a transsexual: "That is a Western concept. I will still be a *hijra*."

Institute (NARI) in Pune collaborated to undertake Phase I trials in Pune in tgAAC09, a recombinant adeno-associated viral vector-based candidate against HIV infection.

The vaccine was developed, with IAVI funding, by United States-based Targeted Genetics (TCG).

The Indian Express, Chennai

AIDS Virus Hides Quickly Inside Babies' Blood

Drugs-resistant versions of the AIDS virus passed from mother to child can quickly hide inside the infant's immune system and lurk for years, researchers have reported.



Photo: PealDezine

This will limit what drugs children can take to control their infection, Dr Deborah Persaud of the Johns Hopkins University School of Medicine in Baltimore and colleagues said. Dr Persaud's team studied 21 HIV-infected

infants in 10 states.

They found that five of them were infected with drug-resistant HIV from their mothers.

Reuters

60 pc of HIV Infected Living in Rural India: WHO

As much as 60 per cent of the estimated 5.2 million HIV-infected adults in India are living in rural areas, according to a WHO report.

The report found HIV among intravenous drug users increased markedly from seven per cent in 2002 to 23 per cent in 2005.

"The HIV epidemic of Manipur, once

concentrated among IDUs, is now considered a generalised epidemic," the report said. In 2005, 7 of the 10 antenatal clinic sentinel surveillance sites in



Photo: PealDezine

Manipur recorded an HIV prevalence of 1 per cent or above, indicating the spread of the infection from high-risk to low risk populations, the report added.



Photos: Zishaan Latif

Living on the Edge

PRETTY WOMAN: A hijra, Shaheen, sending an SMS on her mobile phone while setting off for her evening business while another one seems a bit apprehensive about what the future has in store for her

With a sizable number of *hijras* taking up sex work to supplement their earnings, they form a high risk group for HIV/AIDS. Pained at the utter neglect of the society in addressing their concerns, *hijras'* organisations like Dai Welfare Society (DWS) and Astitva are trying to raise awareness about such issues within the community in Mumbai and Thane. By **SADHNA MOHAN** in Mumbai and Thane



Guru Manisha

Why aren't *hijras* issued ration cards and given jobs and education, asks Manisha

Entering the *hijra* world can be grossly unnerving and confusing! There is mutual mistrust and sizing up in the air and they let you in, quite clearly, only because a senior person of their fraternity is accompanying you.

One interaction is not sufficient to establish a comfort level. Most seek the senior person's approval for what they tell me either through a glance or explicitly: "*Theek kaha, na?*" (Did I say the right thing?) But the fact that this mysterious community is living on edge comes through loud and clear.

Anju, 27, somewhat typifies the stories of other *hijras* I met in Mumbai's slums in Mahim and Bandra. She (as she would like to be addressed), though dressed as a man during our interview, lives in a Thane slum (where a few other *hijras* live too) on weekdays and in Virar with her parents during weekends. The Sunday we met, Anju was returning from Virar and therefore in men's clothes reserved for Virar wear. She has completed school and used to dance in girls' clothes in school.

How did she enter the *hijra* community? "I used to roam around aimlessly. Ten years ago I met Guru Subhadra in a Mumbai toilet. She asked me to become her chela (follower) and I agreed."

What exactly did Guru Subhadra tell 'him'? "She told me that she was into *badhai* work, begging and sex work. The work profile that appealed to me was as follows: begging from roughly 100 shops a day to yield about Rs 125 a day, sex work to generate another

Rs 400-500 a day and *badhai* and dancing at private functions to throw up more income 5-6 times a month."

"I go to Vashi for sex work between 8-11 pm daily because my area of operation there is 'fitted' with the police. I see 7-8 customers each evening at a rate of Rs 50-100," she says. Nearly 50 per cent of her earnings go to her guru.

Subhadra disappeared while at sex work and her body was later found in a pond, says Anju. "She was murdered," elaborates Laxmi.

"No sex without condom for me," states Anju, something echoed by all the *hijras* I met.

'Home' is where Dai Welfare Society (DWS), a community based organisation (CBO) of *hijras*, contacted *hijras* to educate them on HIV/AIDS and also motivate them to visit health camps that checked for sexually transmitted infections (STIs). The areas where *hijras'* homes were visited were Bhandup Sonapur, Mahim, Bandra, Kamathipura, Mulund and Sion Koliwada, informs Shaheen, former Field Coordinator, DWS.

Making our way through Ramgarh, a crammed high-rise slum in Mahim with less than three-foot wide winding lanes, we make a hazardous climb, propped by several helping hands, on a railing-less iron staircase to reach the one-room house of Sweetie and two other *hijras*.

Sweetie, 22, looks completely like a woman. Her delicate, fair face and body give no clue to her *hijra*

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We, as a society, don't know much about hijras. Look up Wikipedia for a quick reference and it tells you the term refers to a 'third gender' in Bangladesh, India and Pakistan.

"Most are physically male or intersex, but some are female. Hijras usually refer to themselves as female at the language level and usually dress as women. Census data does not exist, but estimates range from 50,000 to 50,00,000 in India alone.

Although they are usually referred to in English as 'eunuchs', relatively few have any genital modifications. A third gender has existed in the subcontinent from the earliest records, and was clearly acknowledged in Vedic culture, throughout the history of Hinduism, as well as in the royal courts of Islamic rulers.

An older name for hijras is **kinnar**, which is used by some hijra groups as a more respectable and formal term. In Tamil Nadu, the equivalent term is **aravanni**, **aravani** or **aruvani**. In Urdu, both in Pakistan and India, the term **khusra** is used. All these names are now considered preferable to the English term 'eunuch'," says Wikipedia.

This issue of **AIDS BUZZ** attempts to bring you a bit closer to hijra (transgender) lives. While broadly the term transgender (TG) refers to people born one sex but who feel more like another, this issue applies it to those who live always or mostly as a gender other than that assigned at birth. We moved along with hijras in Mumbai's swanky Carter Road area, visited their homes in Bandra and Mahim, as well as Thane, and drove around with them from Mumbai to Thane and back in the middle of the night, seeing them through different moods and situations.

It was fun to see how people reacted to them too. The incredulous look on the face of the ber walla (vendor selling a small yellow fruit) at Carter Road when Laxmi (who is on our cover) dressed as a chic woman, took a manly leap over a small wall to grab a handful of bers was an interesting sight to watch. There were several moments and revelations that we relate to you in this issue.

For example, we asked Laxmi whether there were any women hijras. Dropping her voice to a whisper, she replied there were many of them. Chunar, near Varanasi, has a woman-hijra nayak (leader higher than a guru) named Ramsakhi Mai. There have been women-hijras in whose names gharanas have been named, she told us. But this, she said, is not talked about because women are respected. Read on for more.

Resource Centre For Sexual Health And HIV/AIDS (RCSHA), a DFID funded project, closes in June. The project has provided invaluable support to **AIDS BUZZ'** pursuit for interesting information throughout the country.

A new entity called Sexual Health Information Centre (SHIC) has been set up by RCSHA to perform the knowledge management functions of RCSHA. SHIC will execute its mandate over a period of five years and looks forward to funding support for its initiatives.

Sadhna Motan
Editor-in-Chief



LETTERS

We request our readers to respond to this letter.

I would like to raise the issue of condom promotion and utilisation in the community through the platform provided by **AIDS**

BUZZ. I personally feel that despite awareness about the protective benefits of a condom, an individual feels shy to procure it either from the public distribution system or the vendor/chemist. In fact, the act of buying/procuring a condom by an individual depends on factors such as his overall confidence level, attitude, socio-economic and literacy status, decision making ability and introvert/extrovert nature.

But unlike the purchase of vegetables or fruits, the client feels inhibited in verbally communicating his intention to buy a condom. Till such time when its use is like any other product in our society, the policy maker/planner/other stakeholders should address the need for verbal communication by developing and disseminating an appropriate 'signal' indicating a person's desire to get a condom. The common understanding of a 'signal' between client and provider would facilitate easy transfer of the condom. This would also help women to come forward to buy condoms for their partners. This suggestion has already been discussed in various forums. I would like to invite your readers' opinion in this regard. Looking forward to feedback on this.



Dr Sandeep Sachdeva
Public Health Specialist
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AIDS BUZZ is certainly a remarkable, praiseworthy and highly educative newsletter. While going through the contents, I was reminded of a dark chapter in my life when I got involved with a handsome youth.

After our two-year-old relationship ended, I was overcome with feelings of fear and guilt. As I did not want his marital life should get affected, I cut off all

ties with him. I underwent a series of tests and was relieved to know that I was HIV-free. I decided to put the incident behind me and concentrate on my studies. I completed my Ph D in Medical Sociology and worked in different projects of ICMR, the Population Council and NACO. At present, I am working as a lecturer and health education officer in a medical college.

Your organisation is doing tremendous work in the field of HIV/AIDS. It is because of publications such as this that the misguided can come back on track. I am interested in doing voluntary work and would be obliged if you could send me **AIDS BUZZ** and keep me informed of any symposia, seminars and

conferences on HIV/AIDS. I feel that the issue of MSM is a burning issue and needs a collective response to combat the AIDS menace. Please send me any CD, newsletter, bulletin or reading material on MSM and HIV.

Name Withheld

I am President of Vivekananda Welfare Association, an NGO that undertakes welfare activities for the HIV/AIDS affected people. We would like to subscribe to **AIDS BUZZ**.

B Parida
President, Vivekananda Welfare Association
Ralaba, Hinj Illicut, Ganjam, Orissa - 761 102

Greetings from SEEDS resource centre. Thank you for sending us **AIDS BUZZ** which is a source of information giving hands on knowledge for social workers, project designers, non-Government organisations, civil society organisations, university students and government functionaries. Kindly note the change of our mailing address to enable us to receive the newsletter.

D Roshan Kumar,
Director
Social Educational and Economic Development Society (SEEDS)
P O Box 249, Door No 4-16-25/3
Bandlamundi Complex, near Andhra Bank branch
Amravathi Road, Guntur - 522 002, Andhra Pradesh





A PRECARIOUS EXISTENCE: A hijra standing on the doorway of her unpainted room in a high-rise slum in Mahim, Mumbai. Inside the room (pic below) Laxmi logs on to her laptop



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status. She is a *nirvan* (castrated) *hijra*, Laxmi tells me when I look at Sweety incredulously.

Moving into the *hijra* world with a mentor, Simran, 11 years ago, Sweety left her parental home in Andheri. What does she like about living with *hijras*? She likes her freedom to live as she wants. She can live with a boy friend or *chelas* and can change her guru at will — all this while having bonds with the community, she and Laxmi explain.

Having been into sex work for a year and then into bar dance, Sweety now goes for *badhai* (in the wedding season, she goes for *badhai* daily) and dance programmes organised by her guru, who gets a cut of the profits. *Badhai* homes are selected by *hijra* groups of various *gharanas* on the basis of first come first served, that is, the group that first makes a particular sign outside a house from between 8.25 am to 6.25 pm, gets to offer *badhai* in that house, she says.

At sex work, she used to pick up clients at Churchgate and go to a hotel, charging them anything between Rs 500-5,000. Proud of her good looks, Sweety announces she had a lot of boy friends pursuing her. She has a steady boy friend since eight years, a driver in Saudi Arabia, who recently married but still visits her.

Alisha, living along with a few others in a similar one-room set up below Sweety's house at a monthly rent of Rs 2,500, has been into sex work since 10 years and says she doesn't like sex without condoms and therefore insists on their use.

Karan, now Kareena, is 20 and has passed Class X from Ahmedabad. His father beat him on finding that he loved wearing girls' clothes and dancing like a girl. Karan opted to leave home and his father gave him Rs 3,000 to do so.

Wearing pants and a T-shirt and sporting long hair and kohl, Kareena appeared to be in 'switch mode' from man to woman (she was the only *hijra* there not in women's clothes). Karan came to Mumbai and stayed in a hotel, where he also later worked. He originally had a gay identity. During his stay at the hotel, he got to know *hijras*; four months ago he joined them with Simran as guru.

"I have short hair and am therefore teased in women's clothes. When I go to Haji Ali, a temple or a public place, I wear pants and shirt," says Kareena. At Rs 500-2,000 per client, she claims to have sex with 2-3 men a day. She solicits at Colaba and scares unwilling clients into condom use by telling them she has sex with several men. She works as a peer educator with Humsafar Trust.

Built immediately above a massive sewer pipe outside the Bandra railway station is a row of tin shanties, where 30-40 *hijras* reportedly live. You have to walk on the sewer pipe to enter these homes.

Gaining from Loss: Castration Means Recognition for *hijras*

On the 22nd day of the castration, 'she' lay in bed in a loose petticoat, legs held awkwardly apart. She sat up in bed with some difficulty to talk to me.

Kajal (name changed) had gone to Cudappah, the source of granite for kitchen counters in Andhra Pradesh, for the castration upon the advice of Mumbai *hijras*. They gave her the name of the doctor she was to visit and told her to hail any rickshaw puller once she got down from her train.

The doctor checked her blood and gave her anaesthesia. "The surgery felt like an ant bite," recounted Kajal. She says she paid Rs 5,000 to the doctor; those HIV-positive have to pay more. Was she in pain now? "No, I am off pain killers and only use some cream for local application," she replied, adding, "I will not be working for 40 days, others of my fraternity will take care of me."

"I am happy and rid of tension following the castration. Now I won't be ashamed going in front of big gurus (leaders), most of whom are castrated," revealed Kajal.

Not so long ago, said Kajal's friend and senior Laxmi, there was a fight between Kajal's group and another *hijra* group. The squabble was about which group had 'real' *hijras*. The other group's members dropped their clothes to reveal they were castrated. This incident apparently incited Kajal to undergo castration. Peer pressure often works in this direction, explained Laxmi.

With castration being illegal in the country, a person like Kajal cannot visit any regular doctor in the city in case of a problem. And so, when Kajal developed difficulty in urination, it was Laxmi who helped out at 2am one night.

— SADHNA MOHAN in Thane, Maharashtra



Illustration: Rana

Manisha and Maharani, gurus of the *hijras* living here, say the *hijras* have been here since 1995. They are mainly into begging but also resort to sex work for survival, according to Manisha.

Manisha questions *hijras*' survival on the fringes of society – why aren't they issued ration cards, given employment and education? "We can't have a bank account without a ration card nor can we be bailed out from police detention if caught begging without showing some proof of residence," she protests.

But yes, HIV tests and STI check ups have been undergone regularly by these people at the health camps organised by DWS, says she. Manisha is well-informed about the use of anti-retroviral therapy.

More than 60 per cent of the nearly 2,00,000 strong *hijra* community in Mumbai and Thane districts is into sex work, says Laxmi, former President of DWS who now heads Astitva, a newly formed CBO of *hijras* in Thane. About 15 per cent of them are into *badhai* work while the remaining 25 per cent, according to her, are into begging. There can be fluidity across this categorisation. In Northern India, according to her, *hijras* are mainly into *badhai* work. What is the source of these figures? "The community tells us," responds Laxmi.

The first exclusive sentinel surveillance on *hijras* conducted at Mumbai's Sion Hospital in 2004 showed a prevalence of 43 per cent among Mumbai *hijras*. However, the correct sample size was not achieved in this case. Last year, with the correct sample size, the prevalence was found to be 29.6 per cent, as per Mumbai District AIDS Control Society.

"HIV-affected *hijras* face double stigma at hospitals," asserts Laxmi, pointing out they prefer death to facing insult in medical settings. Being a visible minority, they are mocked by ward boys and other medical staff. They are also unable to submit necessary documents (either they don't have them or they can't understand the requirements) and therefore stay away, she elucidates. At times, those admitted were neglected and not given medicines until a massive protest was made, she adds.

"Lack of support in the homes (living on the margins, each fend for herself and is unable to extend much help) has meant people leaving homes to die of AIDS elsewhere," says Laxmi, giving the example of Shakil who went away and died in Hyderabad and mentioning some other *hijras* who died or committed suicide because of AIDS.

"Seeing my friends die of AIDS reinforced in me the importance of working in the social sector," recalls Laxmi, who initially wasn't comfortable moving away from the glamour world.

"I've made National AIDS Control Programme III acknowledge the *astitva* (reality) of *hijras* (being different than gays and needing separate attention)," says Laxmi when asked to list some of her achievements.



HOLE IN THE WALL: A *hijra* trying to reach out from the small doorway of her basement-like dwelling in Bandra

"Lack of support in the homes has meant people leaving homes to die of AIDS elsewhere" – Laxmi

Only 2 of India's 1,000 targeted interventions funded by NACO work to prevent HIV exclusively among *hijras*. The community's existence has not been mapped adequately until now, points out Laxmi, who feels the mapping needs to be done by the community for best results.

"Proper mapping of *hijras* is essential for National AIDS Control Programme III both to gauge numbers and identify the community set up all over the country to facilitate intervention," she says.

Astitva, for its part, is planning to revive health camps for STI treatment (earlier run by the now closed Astha project of DWS) and also research the barriers to *hijras*' care and support. For now, it is helping NARI Foundation conduct a behavioural surveillance survey on *hijras* in Mumbai and Thane districts.



GETTING READY FOR THE SHOW: A *hijra* being helped to dress up for walking the streets in the evening

Photos: Shashi Sahai



TRANSCENDING GENDER DIVIDE: Sulastree from Malaysia

GENDER BENDER: Transgenders Crave Recognition

Transgender people find themselves unable to fit into the two sexes the society recognises and often end up ostracised or exploited. TGs from Malaysia and Thailand narrate their experience.

By **SHREE VENKATRAM** in New Delhi

I read it 10 times, may be 20, beginning to end, each word over and over again. Finally I understood why I am the way I am. I am very grateful to the professor who handed me the copy of *New Scientist* that had an article explaining why some people like me are transgender (TG). Every moment of my life I used to think, 'Why am I they way I am? What is wrong with me?' This article explained it so well. It said a person's gender is determined in the mother's womb. Certain conditions in the womb lead to a foetus with a male

organ but a 'feminine brain'. It is natural," says a 45-year-old Malaysian who would rather be known as Sulastree, the feminine name she has chosen for herself.

"It was many years ago. The article was called *Two Sexes Are Not Enough*. I learnt that we are not abnormal. Every society has TG people. In Malaysia, we are estimated to be about 20 to 30,000. People need to be educated about us," Sulastree adds.

Tall and slim Sittiphan is an attractive 26-year-old Thai TG. Her straight shiny black hair and figure could



GENDER-BENDER: Sittiphan from Thailand could give many a model a run for their money with her pretty looks and poise

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CATCHING UP WITH THE NEWS: A transgender takes a look at an AIDS BUZZ copy at the Risks and Responsibilities conference

Violence begins in the family, forcing many TGs to run away from home and get involved in sex work

be a model's envy. Over six feet tall, she wears a short skirt, displaying her long legs. When she walks into a room, heads turn.

Both were participants at the *Risks and Responsibilities* conference held in New Delhi last year.

In a green kurta, jeans and dangling earrings, Sulastree is a picture of studied elegance. You could easily mistake her for an attractive, well-preserved woman. Her mannerisms – the way she sits, flicks back her hair or uses her hands to express a point – are feminine. She says she learnt to dress like a woman and carry herself from a senior TG person. She now teaches young TGs how to dress and behave as women. She is like a mother figure to them... guiding and nurturing in her role as an organiser with Pink Triangle Foundation, an association which works with men who have sex with men, TGs and people living with HIV/AIDS in Malaysia.

It is as children that TGs come to know that they do not fit into the two sexes that society recognises. Sittiphan was about seven when she realised she did not like being a boy. However, it was only when she went to the university to pursue a course in advertising, that she took the first steps of coming out – taking hormone injections, growing her hair and dressing like a girl.

Sulastree recalls: "When I was around five, I realised I liked wearing my mother's clothes. I was constantly fighting myself, trying to be a normal man. I would often go into depression and feel isolated at home and in school."

At 19, she fled to Kuala Lumpur to live like a woman. Away from the prying eyes of neighbours and relatives, Sulastree began her transformation journey. She took hormone injections and started dressing like a woman. She took to sex work to support herself. Life was tough. It meant being chased by gangsters, harassed by passersby and running into problems with the police. But she got the space she craved to be herself.

The Malaysian government though does not recognise Sulastree as a woman. Her passport carries the male name given by her parents.

Both Sittiphan and Sulastree are peer leaders now. Coming in contact with support groups changed their calling. While in college, Sittiphan had got involved in supporting TGs and when an opportunity came to run a support centre for TGs in the tourist city of Pattaya, being sponsored by Population Services International, she took it up.

For Sulastree, the turning point came after some years in Kuala Lumpur when an outreach worker from Pink Triangle Foundation talked to her about HIV/AIDS. "I was very naive, I knew nothing about HIV/AIDS and sexually transmitted infections. At first, I refused to distribute condoms to TGs. But when I was contacted again, I gave it a try. As a social worker, I found society seeing me differently than when I was a sex worker. I did not like sex work. I had been to school and knew how to read and write. And I knew English."

The Foundation offered her training in outreach and communications. By then, she had seen the serious problems some of her friends were getting into with drugs and felt the need to do something for them. When the Foundation offered her a full-time position, she accepted and now does outreach and administration work.

The Foundation is based in Kuala Lumpur, but Sulastree says the TG community has a strong network all over Malaysia and it is easy to reach out to them. "The best way to get them to come together is to organise a social event. They love participating in beauty contests," she says.

She lists violence as the biggest problem faced by the TG population. The violence begins in the family. This forces many of them to run away from home and get involved in sex work. Those that stay on get bullied in schools. Therefore, the Foundation provides counselling to parents of TG children.

"Our work is to empower the child and educate society about TGs," says Sulastree. "In the past 10 years of our work, we can see some changes. Many young TGs are now seeking us out for support. They want to know how to inform their parents and how to deal with an employer. Some want a sex change and we guide them on it.

While non-Muslims in Malaysia can get a sex change operation, Muslims cannot. They go to neighbouring Thailand for this purpose, Sulastree informs. Muslim TGs are contacting lawyers to take up the cause in Malaysia.

According to her, TGs are in danger of getting HIV because 60 per cent of them are into sex work. The rest work as make-up artistes or in show business. A few have managed to get jobs in private companies, but because of the stigma attached, such jobs are not offered to them even if they are qualified.

In Pattaya, Sittiphan and her band of 12 outreach workers try and get TGs engaged in sex work or employed in bars and TG cabarets to drop in at the centre where they are provided knowledge on safe sex. A vending machine at the centre makes it convenient for them to pick up condoms. A health clinic at a nearby government hospital provides tests and dispenses medicines. The programme is called Sisters and its main aim is to prevent HIV infection through awareness generation.

The centre has 250 registered members. But as the TG population in Pattaya tends to be mobile, one of the biggest challenges is retaining contact with them over time. It conducts classes on beauty, cooking and sports and promotes sharing of experiences to keep the group involved.

Though Thai society is more accepting of TG people, Sittiphan says they still find it difficult to get jobs. Those who do work outside the sex work system are in the beauty and entertainment business.



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