

Editorial

Trans-Genders: Social Status in Psychological Perspective

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The 2011 Census of India counted transgenders in the category of 'Others' and found 4.88 lakh adult and 55,000 children (identified by their parents) as transgenders.¹ They are the people who experience a gender identity that is inconsistent with their assigned sex. They have a consistently strong desire to change their anatomical gender; they are also referred as 'third sex.'

Hirschfeld coined the term 'Trans-sexualismus' in 1923 in Germany and later, David Cauldwell introduced the terms, 'Trans-sexualism' and 'Trans-sexual' in 1949 and 1950 in England. He used these terms for the first time for those who strongly wished a structural and functional change in their assigned sex.² Harry Benjamin in 1966 used the term 'trans-sexual' in his book, 'The Trans-sexual Phenomenon' and described 'true trans-sexuals' as those who feel that they belong to 'other sex', want to be and function as members of opposite sex. Male to female trans-sexualism is also known as Harry Benjamin syndrome.³

Trans-sexualism was included in DSM-III in 1980 for the first time, and again in DSM-III-R in 1987, under disorders, 'usually first evidence in infancy, childhood and adolescence. John Oliven coined the term 'trans-gender' in 1985 and the trans-sexuals came under its ambit.⁴ Trans-sexuality was replaced by 'Gender Identity Disorder in adolescents and adults in DSM-IV.⁵

Trans-sexualism is no longer a mental disorder in International Classification of Diseases (ICD). ICD-11 defines 'trans-sexualism' as desire to live and be accepted as a member of opposite sex, usually accompanied by a sense of discomfort with, or inappropriateness of, one's anatomical sex and wish to have surgical or hormonal treatment to make one's body as congruent as possible with the preferred sex.⁶

Trans-sexualism as a diagnosable category has been removed from DSM-V and a category, Gender dysphoria was created. American Psychiatric Association believes that trans-sexualism is not a disorder and trans-sexuals should not be stigmatized with a psychiatric label. However, they can seek treatment for gender dysphoria.⁷

But irrespective of its nosological status in the classificatory system, stigma does exist. They live on the fringes of the society, often in poverty, ostracized and subjected to discrimination. They have played

an important role in Indian culture and historically they were treated with great respect as described in the Vedic and Puranic literatures. They played a prominent role in Royal Courts and many rose to powerful positions. During the Mughal period, they were put in charge of *harems* due to their emasculation.^{8,9}

Their fall from grace began during the British Period in the 18th century when they were deprived of their civil rights. They were categorised as a separate caste or tribe as kidnappers who castrated children and danced and dressed-like women. The Criminal Tribes Act of 1871 classified the entire community of trans-genders into criminals and they were often arrested for their socially inappropriate behavior in the public place.¹⁰

The Criminal Tribes Act of 1871 was repealed in 1949 but the mistrust against trans-genders continued in independent India. Even now the public perception has not changed and they are treated as socially ostracized. They live at the fringes of the society, in ghettoized communities often harassed by police and abused by general public.

In 2009, India's Election Commission allowed trans-genders to choose their gender as 'others'. Nepal has already done so in 2001 and Bangladesh in 2013. They have recognized trans-genders as 'third sex.'¹¹ Supreme Court of India in 2014 referred trans-genders as a human rights issue. The Court passed a unique judgment in April 2014 stating one's sexual orientation as the integral part of personality, dignity, and freedom and identified transgender as a third gender. In the National Legal Services Authority (NLSA) versus Union of India case, the apex court provided the transgender a legal identity.¹²

Recently, the Delhi High Court has affirmed the application of Section 354A of IPC (1860) to transgender (women) victims of sexual harassment. Now, transgenders can also pursue criminal case of sexual harassment against their perpetrators.¹¹ The Court, in an inclusive move, has ruled that section 354A of the Indian Penal Code can now be used by transgender persons to register complaints of sexual harassment.

In another case, Madras High Court gave the verdict that a marriage between a cisgender man and a transgender woman is valid. The Madurai-based bench of the Court held the term "bride," as used in Section 5 Hindu Marriage Act, 1955, to be inclusive of transgender women. This came in response to State registration authorities' refusal to recognize and register the marriage of a cisgender man and a transgender woman, arguing that a transgender woman cannot be a "bride" under the Hindu Marriage Act. The couple approached the Court, claiming a violation of fundamental rights guaranteed by Article 14 of the Constitution.¹³ They are the citizens of the country and

entitled to equal opportunities to grow and attain their potentials.

Gender dysphoria is the central feature of the phenomenon which can manifest as early-onset or late-onset. *Early-onset* is visible in childhood and the individuals may be identified as gay or homosexual for some period, followed by recurrence of gender dysphoria. This group is usually sexually attracted to members of their natal sex in adulthood. *Late-onset* gender dysphoria does not include visible signs in early childhood. Trans women who experience late-onset gender dysphoria, get sexually attracted to women and identify themselves as lesbians. Those who are assigned male sexual organs at birth have late-onset gender dysphoria. They engage in cross-dressing with sexual excitement. In those assigned female sex organs at birth have early-onset gender dysphoria as the most common course. This group of subjects is usually sexually attracted to women. Trans men who experience late-onset gender dysphoria will usually be sexually attracted to men and may identify themselves as gay.¹⁴

Symptoms of gender dysphoria in children include preferences for the toys, games and activities which are liked by the children of opposite sex. They great dislike their own genitalia and have a strong preference for playmate of opposite sex children.¹³ Some children experience social isolation from their peers, suffer anxiety, loneliness, and depression. Transgender children experience more harassment and bullying in school, residential treatment centres, homeless centres and juvenile justice programs than other children.¹⁴

They suffer more because they are stigmatized and victimized; and that, if society had less strict gender divisions, transsexual people would suffer less.

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