

**Socio-Cultural Implications
of COVID-19 on
Transgenders: A Study**

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Abstract

Transgender persons are one such group of people who have been marginalized and excluded from general society and the COVID-19 pandemic has amplified these socio-cultural problems for them. Therefore, it is imperative to protect such vulnerable populations from this pandemic particularly considering they are at an increased risk for a wide range of issues. Telephonic Interviews were conducted with 20 participants, from April 1, 2021, to May 12, 2021. The findings of the study revealed that their lived experiences as transgenders made it apparent that they had been socially excluded and marginalized at many stages of their lives from performing normal social functions and roles and the COVID-19 pandemic has added to their miseries. Due to this health crisis, transgender people are struggling to manage the financial, mental, physical, and social issues it has created for this vulnerable group. Using a qualitative approach, this study aimed to examine the changing nature of the socio-cultural implications of COVID-19 on transgenders in Kashmir. Besides it is important to address the special needs of transgender people during this pandemic of COVID-19 and beyond.

Keywords

COVID-19, transgenders, Kashmir, qualitative approach, pandemic

Introduction

The COVID-19 outbreak influences every segment of the population, including the poor as well as the rich, young and elderly, people with

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(out) disabilities and native people in one way or the other (United Nations, 2020). COVID-19 is defined as an 'illness caused by a novel coronavirus now called severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2),' which was first identified amid an outbreak of respiratory illness cases in Wuhan City, Hubei Province, China (Centers for Disease Control and Prevention, 2019 as cited in Cennimo et al., 2020). COVID-19 is infecting both animals and humans, causing a series of respiratory illnesses from the common cold to lung lesions, pneumonia and finally leading to death (Bhat et al., 2020). The reach of COVID-19 has by now taken on pandemic proportions (Remuzzi & Remuzzi, 2020) influencing more than 200 countries in the world and two international conveyances, the Diamond Princess cruise ship and MS Zaandam cruise ship in a matter of weeks and months (Bhat et al., 2020). A pandemic is defined as 'an epidemic occurring worldwide or over a vast area, crossing international boundaries and usually affecting a large number of people' (Heath, 2011; Last, 2001). There have been several significant pandemics recorded in human history, including smallpox, cholera, plague, dengue, Acquired immunodeficiency syndrome (AIDS), influenza, severe acute respiratory syndrome (SARS), west Nile disease, and tuberculosis. In the 20th century, 'The Spanish flu' in 1918-1919, 'The Asian flu' in 1957-1958, and 'The Hong Kong flu' in 1968-1969 were the three influenza pandemics that have impaired both human life and economic development (Qiu et al., 2016-2017). Recent years have seen at least six large-scale outbreaks-hantavirus pulmonary syndrome, severe acute respiratory syndrome, Avian influenza (H5N1), Swine flu (H1N1 influenza), Middle East respiratory syndrome, and Ebola virus disease epidemic (Gostin et al., 2016 as cited in Qiu et al., 2016-2017). The COVID-19 pandemic is the most recent one on the list. As the novel virus transcends the global barriers, it results in severe illness, death, and disturbs familiar life (United Nations, 2020). The COVID-19 pandemic is likely to keep on spreading extensively all through the year 2020. To lessen the effects of COVID-19, safety measures such as social distancing and restrictions on visitations in healthcare institutions have been commonly put into practice (Wallace et al., 2020). In the Union Territory of Jammu and Kashmir (J&K) the first COVID-19-positive case was detected on 9th March 2020. As of 17 May 2021, Jammu and Kashmir have reported 244608 positive cases, and 3149 have lost their lives so far; 1439 in the Jammu division and 1710 in the Kashmir division. To control the spread of COVID-19 infection, restrictions were imposed in many parts of the Kashmir valley on March 19, 2020. However, a complete lockdown was then announced across J&K on March 22, 2020 (Hamid & Jahangir, 2020).

However, there is no information or data available about the Covid-19 positive cases and deaths related to transgenders in Jammu and Kashmir

Methodology

The current study used a qualitative research approach to investigate the impact of the COVID-19 pandemic on the transgender population in Kashmir. The qualitative approach was deemed to be most appropriate in the quest for a deeper understanding of the phenomenon under investigation. A purposive sampling technique was employed to recruit participants. Amid the risk of contracting the infection, lockdown and restrictions on movement, it was difficult to conduct face-to-face interviews with the participants. Hence, telephonic interviews were conducted with all 20 participants. A semi-structured interview guide was prepared to collect data from the participants. The questions were mainly open-ended in order to avoid forcing data into any presumptions of the researchers. During the first phone call, the participants were informed about the purpose of the study and permission was sought from them. After getting consent to participate, the time and date for an interview were decided mutually. Apart from the interviews, secondary sources were also used for data in this study. Data was then analyzed using the techniques of Braun and Clarke (2006) which included getting familiarized with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and finally producing the report. The analysis of data resulted in the generation of five themes that described the participants' experiences of how COVID-19 affected their daily lives in Kashmir. Consequently, Interviews were transcribed, qualitatively coded and analyzed using thematic content analysis. Formal consent was received from all the participants before starting of interview. To maintain privacy, every participant was assigned a number and names were not disclosed.

Therefore, this study is an attempt to understand and highlight how COVID-19 has impacted the lives of transgender in Kashmir. In doing so, the results of this study can provide insights into the lived experiences of transgenders and their struggle to live a normal life in this pandemic situation where they feel isolated, neglected and abandoned by the administration, family as well as by the general society and can offer both theoretical and practical implications.

Results and discussion

The concerns of sexual minorities in our society always remained undiscussed both socially and academically. As Dr. Aditi Hegde rightly

proposes, research on the impact of COVID-19 on transgender individuals must be addressed by academic and government institutions by investing in gender-conscious, gender-responsive research (Hegde 2020 as cited in Pandya, 2022). The plight of transgenders based on sexual identity is multifaceted and suffers almost unchallenged and unquestionable. They have confronted gender-based violence, loneliness and social exclusion and multidimensional factors are responsible for the discrimination they are facing in everyday life and the COVID-19 pandemic has increased it manifold. Yet, they showed courage and strength of character and tackled problems. Key themes that emerged from the data collected are healthcare and health issues, stigma, fear, discrimination, psychological reactions, food and job insecurity, isolation and neglect.

Healthcare and health issues

The majority of transgenders are illiterate in Kashmir. Most of the transgenders in the present study were not aware of precautions for preventing COVID-19 infection, the correct source of information for COVID-19 and treatment centers. And many respondents were suffering from diabetes, hypertension, stress/depression and the majority of respondents are smoking cigarettes or hookah (water pipe) which makes them more susceptible to the COVID-19 infection.

“Aes chi aani pad, asi chani payi yi bamaer keecha khatarnakh cha, aath kya yalag chu ti kot chu gasun yalaj karni.” P1 (we are illiterates we don't know how dangerous this virus is nor we are aware of its treatment or place to visit for treatment)

Accessing healthcare services, even for common ailments, is traumatic for transgender people because they do not fit traditional gender roles. The quality of treatment is badly affected by heterosexist norms and fear of a negative experience keeps transgender from seeking help. And COVID-19 pandemic makes it more worse for transgenders to visit healthcare centers for treatment besides the entry of a transgender person in any healthcare center is not welcomed not only by doctors but by other staff too.

“be gayas dispensary path yalaj karnavni, mai aes sarsi panas dag basaan magar temo kormai tati janwar send paeth bartav”. P2 (I went to the primary health care center for treatment because I was feeling body ache but the staff in the center treated me like an animal).

“mai oes sahi zukaam magar be gayas ni doctors chi ni asei goer karaan teman chi aes haivaan basaan.” P3 (I had cold and flu but I did not visit doctor because they are not treating us well and they think we are animals)

None of the respondents in the present study have been vaccinated so far nor there is any program or policy formulated by the administration or health department for the vaccination of transgender people in Kashmir. And the reluctance to visit hospitals is adding to their vaccine hesitation. Moreover, lack of identity proof and poor internet access has made it tougher for transgender people to get vaccinated. Besides, there is a lack of transgender-inclusive health care in our society and most of the respondents said they had chosen the old traditional methods of cure sometimes when a problem is grave they send another person to a local chemist to get medicine rather than going themselves to doctors even in this pandemic when they need more care and treatment like any member of the society.

Psychological reactions

Due to frequent lockdowns and isolation because of COVID-19 most of the respondents revealed that they are facing psychological issues like fear of COVID-19 infection, loneliness, Hypertension, anxiety, helplessness, and ideation of suicide.

“mai chu vahami agar mai Khuda rachin COVID gov mai kya bani”. P4 (God forbid if I get infected what will happen to me)

“ghare behit gov van tension na rood kaem kah na kar.” P5 (sitting at home leads to tension we have nothing to do now)

“ghare behit khutis manz aayas be tang mai chu manzi khayal yivaan be kari khud-kushi van.” P6 (I feel so isolated in my room that sometimes I think I should commit suicide).

Due to a lack of family and social support during this pandemic most of the respondents face discrimination and victimization which leads to anxiety, depression and behavioral issues among them.

Food and job insecurity

There is evidence that economic status (e.g., poverty, living in overcrowded conditions, homelessness) shapes one’s risk for infection and poor outcomes. Due to a legacy of education discrimination, employment discrimination, and family rejection, many transgender individuals experience economic instability (Woulfe & Wald, 2020). The occupational scenario of the respondents illustrates that respondents are mainly involved in matchmaking, dancing and singing, and it has been their major occupation for earning a livelihood, followed by begging. Even those who are working as matchmakers or others who are singing and dancing mostly at marriage parties which are considered as the traditional occupation of transgenders are not able to earn regularly as marriages in Kashmir are seasonal because of weather conditions and

other situations. And due to the present pandemic, most of marriages are cancelled which hit hardly the income of transgenders. This has left transgenders unable to earn any money.

“Aesi aes kamavaan thoda bohut khandri seasons manz van gov suti band covid seet, suti gov van band parashaan gai aes”. P7 (we used to earn some money during marriage season but that too has stopped now we are worried about what to do now).

“aes narhav bachi ni van magar de kus sori chu band ghare ti kus de aaz achni andar.” P8 (even if we went to beg who will give us everything is closed and who will let us enter their houses)

“aes chi lukan guzarish karaan asi karev madad asi ti chi insaan asi ti cha zaroriyat.” P18 (we are appealing people please help us we are also human beings we too have necessities of life)

“bakiyan jayan chi toti NGOs kah madad karaan laanchan, magar kasheer manz chuni asi kiheen prichaan.” P19 (outside Kashmir NGOs are helping transgender people but here in Kashmir, there is no one to help us).

“asi haz routh ni kiheen vunuktam.” P9 (we have received nothing so far).

“asi chani payi kunich kiheen chuni asi help karaan.” P10 (we are not aware of such initiatives nobody is helping us).

With little or no savings and a lack of social security for transgenders in Kashmir leads to food and job insecurity among the transgender community. They are facing starvation and diminishing food supplies. Even though some NGOs and local administration have started providing food kits and other items to people in need but nothing has been done for transgender people so far. And none of the respondents in the present study have received any food from the NGOs or administration. Besides they were unaware of such provisions.

Fear and stigma

Due to fear and stigma most of the transgenders regardless of education, age, profession and income background stated that they had experienced stigma due to their transgender identity. It was observed during the conversation that respondents were stigmatized right from the family to the general society; there is no place in society where transgenders do not face stigma. And the present ongoing pandemic makes it more difficult for transgenders to live and survive in society because fear of stigma does not allow them to venture out for asking help or work in any household to earn some money. Nobody allowed them to enter their homes because of the fear that they may be COVID-positive. They are being considered

sex workers irrespective being a sex worker or not which is considered stigmatized in our society.

“kiheen chuni divan asi ghare achni teman chu basaan yiman aasi COVID infection.” **P11** (nobody allowed us to enter their houses they think we are Covid positives).

“ghare vael chi khochan asi andar chanas teman chu basaan yim chi kharaab yiman aasi COVID.” **P12** (people are scared to allow us to enter their houses because they think we are bad (sex workers) so we may have Covid infection).

Discrimination, social isolation and neglect

The COVID-19 pandemic has diminished transgender individuals' access to the critical emotional and instrumental social support networks that are vital to their well-being. Transgender people do not always have support from their families of origin and consequently, many rely on peer networks and transgender-affirming organizations for social support (e.g., university-affiliated LGBT centers, Community LGBTQ centers, Meet up groups). Peer and community support are essential to one's sense of wellness and especially critical to transgender people as they work to navigate identity development, stigma, and discrimination (Woulfe & Wald, 2020). Most of the transgenders in the present study felt isolated, neglected and subjected to discrimination of many sorts. Transgenders especially young ones are often rejected, neglected and abused by family members and other people. Simultaneously, it also reflects the isolation and exclusion transgenders are facing from the larger society. In order to contain the spread of COVID-19 many guidelines were issued by concerned authorities like social distancing, frequent hand washing and wearing masks and ultimately worldwide strict lockdowns were imposed which leads to isolation and restricted the movement of the people. This lockdown has created mental health issues among people and transgender people were no exception to this problem. They felt anxious, angry, sad, depressed and, even respondents thought of committing suicide.

Most of the respondents were discriminated and neglected by their immediate family members during this pandemic. They were confined to small rooms and did not allow to venture out and they were discriminated against in terms of food, health, etc. They were also discriminated against by the local administration also because there is no comprehensive policy or plan to help transgender people in this crisis. No initiatives were taken by the government to help them either economically or to provide some essential commodities for their survival.

“ghare chini divan asi narnai zan chi chus be COVID positive.” P13 (the family did not allow me to come out of the room as if I am a Covid-19 positive case).

“be chus ghare khuthes manz band zan chu mai fhalomut yi Virus.” P12 (I have been locked in my room as if I am the person who spread this virus).

“be chus kirai khutis manz kunizon mai chu zan yati dam gasaan.” P14 (I am all alone in my rented room, I feel suffocated).

“ hukumat chani kiheen kadam tulan sani khatri.” P15 (local government is doing nothing for us).

“Khudayas baaz chuni kiheen, be chas kunizan ti alag thalag.” P16 (there is no one except God for me, I am alone and isolated).

“khutis manz beh beh gov van tension yem labi cha zan khani yivoaan van.” P17 (sitting idle and isolated leads to depression now, it seems these walls of the room will eat us now)

“agar be manzi nabar chas naraan lukh chi asaan mai vichaan te asaan, bai asaan vanan pathkin yamis hai COVID gasi ha van kya oes yamis yati karun zinde roozeth.” P20 (whenever I came out of home people are looking at me and laughing and saying at my back why don't she get this virus otherwise what she has to do with her life here).

Conclusion

The COVID-19 pandemic has severely changed people's daily lives and restructured social order, and social practices and transgenders are most affected by this pandemic. Social conditions play an important role in COVID-19 vulnerability. The soaring rate of homelessness among transgender puts them at substantial risk for COVID-19. Further, unemployment due to COVID-19 may push transgenders even deeper into poverty, intensifying job and food insecurity and likely involved in sex work for survival. Even though many initiatives and programs formulated by the government, NGOs and activists, the transgender community of Kashmir continue to experience discrimination and neglect of many sorts and on many fronts which are more augmented during emergencies like COVID-19. Eventually, their right to live a dignified life is neither respected nor protected. The actions by the governments, the international community, the private sector, civil service organizations, and individuals will certainly shape the trajectory of the epidemic and its impact on vulnerable people, especially transgender persons worldwide (Pandya, 2020) Transgender community requires immediate attention from the concerned because they are struggling to cope financially, mentally and physically with this crisis created by the pandemic.

Financial help, healthcare facilities, and essential commodities like food, etc. to the transgender population are important in the fight against COVID-19 among the transgender community.

Implications

The present study reveals that COVID-19 has inflicted sociocultural issues on transgenders in Kashmir which leads to problems of health, psychological, financial, discrimination, isolation and neglect. It also leads to the denial of quality and immediate treatment to transgender people with ailments other than COVID-19. One feasible strategy to tackle the problems of transgender people is to expand welfare initiatives by incorporating the transgender population as well. Fear of being stigmatized during COVID-19 has aggravated the problems of transgender people, especially problems related to their health in Kashmir. So, there is an urgent need to make people aware of COVID-19 and do away with the stigma so that Covid-19 symptomatic transgenders are encouraged to visit hospitals for treatment. It was also found that the family members of transgender people discriminate and isolated them within the home which leads to psychological reactions among transgenders. Therefore social support is important for transgender individuals and people like relatives, friends, colleagues and other acquaintances need to know that despite being not able to have face-to-face interactions with them but there are ways to be in continuous contact with them through cell phones or online spaces. A better understanding of the problems and challenges faced by transgenders will help in bringing about changes in policies and give them their due rights.

Furthermore, the present investigation reveals that it is imperative to formulate a policy on transgender people who are the most backward and marginalized sections of our society. Constitutional safeguards and promotional measures should be extended to transgender people who are deprived of their fundamental rights and opportunities. The government should also create a special database of transgenders that would help deal with their problems and demands. There is also scope for Non-governmental Organizations (NGOs), Self Help Groups (SHGs) and Local committees to come forward and provide every possible support to the transgender community amid this critical situation

Laminations

Although this study provides deep insights into how COVID-19 is reshaping the lives of transgender people in Kashmir, however, the exigency of the situation incurs some limitations to the study. First, we used telephonic interviews with participants which generated many

concerns like challenges in establishing rapport, missing the facial expressions of the participants, and the potential loss of contextual data. To overcome this limitation, future researchers could use face-to-face interviews with the participants so that to ensure that data/message is not lost during communication. And second, we carried out this research on a small sample size, which reduced the generalizability of the results. Thus, the findings of this study need to be interpreted in the study context only specifically within the Transgender community in Kashmir. Future research should be replicated with a larger sample to enhance the generalization of results and chances of getting diverse responses.

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