



कार्यालय निदेशक अकादमिक  
राजस्थान तकनीकी विश्वविद्यालय

अकेलगढ, रावतभाटा रोड, कोटा

फोन: 0744-2473015, फेक्स 0744-2473857

Website : www.rtu.ac.in Email: rtu.dir.acad@gmail.com

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स्पीड पोस्ट

निदेशक/प्राचार्य  
राज0 तक0 विश्वविद्यालय, कोटा से  
सम्बद्ध समस्त संस्थाएं

**विषय :** माननीय सर्वोच्च न्यायालय के निर्णय के परिप्रेक्ष्य में तकनीकी शिक्षा विभाग द्वारा ट्रांसजेण्डर समुदाय के हितों के संबंध में गठित कमेटी के सुझावों की पालना हेतु।

**संदर्भ :** पत्र क्रं0 1(26) त.शि./2007, दिनांक 18.11.2014.

महोदय,

माननीय सर्वोच्च न्यायालय के निर्णय सिविल रिट याचिका 400/2012 के परिप्रेक्ष्य में गठित एक्सपर्ट कमेटी के द्वारा ट्रांसजेण्डर समुदाय के हितों के संबंध में तकनीकी शिक्षा विभाग द्वारा प्रेषित सुझावों की छायाप्रतियाँ पालनार्थ सलंगन है।

इस संबंध में प्रस्तावित कार्यवाही को सीधे ही सामाजिक न्याय एवं अधिकारिता विभाग तथा तकनीकी शिक्षा विभाग को अवगत करवाते हुए विश्वविद्यालय को सूचित करें।

सलंगन : मान0 सर्वोच्च न्यायालय के निर्णय सिविल रिट याचिका 400/2012 के परिप्रेक्ष्य में गठित एक्सपर्ट कमेटी के सुझावों की छायाप्रतियाँ

भवदीय

निदेशक अकादमिक

## ANNEXURE-I

## DIRECTIONS OF SUPREME COURT IN WRIT PETITION NO. 400/2012

- (i) Hijras, Eunuchs, apart from binary gender, be treated as "third gender" for the purpose of safeguarding their rights under Part III of our Constitution and the laws made by the Parliament and the State Legislature.
- (ii) Transgender persons' right to decide their self-identified gender is also upheld and the Centre and State Governments are directed to grant legal recognition of their gender identity such as male, female or as third gender.
- (iii) Centre and the State Governments to take steps to treat them as socially and educationally backward classes of citizens and extend all kinds of reservation in cases of admission in educational institutions and for public appointments.
- (iv) Centre and State Governments to operate separate HIV Sero-surveillance Centres since Hijras/ Transgenders (TGs) face several sexual health issues.
- (v) Centre and State Governments should seriously address the problems being faced by Hijras/Transgenders such as fear, shame, gender dysphoria, social pressure, depression, suicidal tendencies, social stigma, etc. and any insistence for SRS for declaring one's gender is immoral and illegal.
- (vi) Centre and State Governments should take proper measures to provide medical care to TGs in the hospitals and also provide them separate public toilets and other facilities.
- (vii) Centre and State Governments should also take steps for framing various social welfare schemes for their betterment.
- (viii) Centre and State Governments should take steps to create public awareness so that TGs feel that they are also part and parcel of the social life and be not treated as untouchables.
- (ix) Centre and the State Governments should also take measures to regain their respect and place in the society which once they enjoyed in our cultural and social life.

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# Chapter Thirteen Summary of Conclusions & Recommendations

## Definition of Transgender

1. The Committee recommends that the term 'transgender' (not trans\*) will be used, as an inclusive term and will cover various gender identities and expressions, as described in paragraph 6 of chapter one. It will not be confined to any one of the specific socio-cultural identity groups, such as hijras, kothis, etc but will include all such persons who fall under the generic definition of transgender persons as follows:

Transgender persons: All persons whose own sense of gender does not match with the gender assigned to them at birth. They will include trans-men & trans-women (whether or not they have undergone sex reassignment surgery or hormonal treatment or laser therapy, etc.), genderqueers and a number of socio cultural identities, such as kinnars, hijras, aravanis, jogtas, etc. The term 'transgender' shall be construed accordingly.

2. A compilation of all known transgender socio-cultural groups should be prepared & circulated for guidance of all concerned, with a disclaimer that the said compilation is "suggestive and not exhaustive and all such persons who qualify as transgender as per the generic definition above and pass the mandatory psycho social assessment (see paragraph 5 of Chapter Four) should be categorized as transgender persons." The criterion/test for qualifying as a transgender person will apply on individual basis and the fact such a person belongs to a known transgender socio-cultural group will act a corroborative evidence and not conclusive. As a starting point, a compilation of various transgender socio-cultural groups has been prepared by the Committee, based on available information, and is at Appendix-2.

3. The terms 'sex' and 'gender' should not be used interchangeably (as are often used presently) and only the term 'gender' should be used in various official documents including identity documents, application forms, returns, reports, etc.

## Constitutional protection

4. In essence, the Constitution of India is 'sex blind', that is to say, the basic premise of equality before the law and equal protection of the law is based on a Constitutional mandate that the sex of a person is irrelevant save where the Constitution itself requires special provisions to be made for women.

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5. A harmonious reading of the Constitutional provisions as well as the provisions of the Citizenship Act, 1955 and the General Clauses Act, 1897 Act would show that in fact there is no conflict or limitation imposed on the concept of 'person' by any of these laws and a Transgender person would undoubtedly fall within the definition of 'person'. It is evident that the Constitution of India guarantees right to equality and non-discrimination for all including transgender persons.

#### Transgender Identity

6. In this regard, the Committee recommends:

- i) Transgender should be declared as the third gender, and a Transgender person should have the option to identify as 'man', 'woman' or 'transgender' as well as have the right to choose any of the options independent of surgery/hormones. Only the nomenclature 'transgender' should be used and nomenclatures like 'other' or 'others' should not be used.
- ii) Certificate that a person is a transgender person should be issued by a state level authority duly designated or constituted by respective the State/UT on the lines of Tamil Nadu Aravanis Welfare Board, on the recommendation of a District level Screening Committee headed by the Collector/District Magistrate and comprising District Social Welfare Officer, psychologist, psychiatrist, a social worker and two representatives of transgender community and such other person or official as the State Govt/UT Administration deems appropriate.
- iii) The certificate issued as at (ii) above should be acceptable to all authorities for indicating the gender on official documents like ration card, passport, birth certificate, aadhaar card, etc.
- iv) The third 'gender' identity known as 'transgender' may be recognized by a Government order and for the long run; it may be examined whether a separate law will be desirable for this purpose. For this purpose, Government may refer the matter to the Law Commission.

#### Inclusive Approach

7. The genesis of the problems of Transgender persons in India lie in the stigma and discrimination they face in the society, resulting in their exclusion from socio-economic-political spectrum. They are one among the marginalized sections of the society. The solution of their problems will, therefore, require concerted efforts to mainstream them and adoption of an inclusive approach in all spheres of life.

8. The Committee is of the view that inclusive approach should be the bedrock of Government's strategy to mainstream the transgender Community. The Ministry of Social Justice & Empowerment should take up with all concerned Ministries/Departments of Government of India and State Governments to include development of transgender community in their policies, programmes and schemes.

**Convergence Approach**

9. The Twelfth Five Year Plan (2012-17); Social Sectors, Volume III has a section on transgender communities as follows:

"23.71. The Twelfth Plan proposes empowerment of the transgender community by advocating that line Ministries support their education, housing, access to healthcare, skill development, employment opportunities and financial assistance. Identification will be provided for transgendered persons in all Government and non-Government records by introducing a separate column to include the third gender. The Ministry of Social Justice and Empowerment along with the Ministry of Statistics and Programme Implementation will determine the number of transgendered persons in India, map their socio-economic status in order to create a law to protect interests of the community and improve their living conditions."

10. In keeping with above intent, the Committee recommends to the Ministry of Social Justice & Empowerment to seek convergence with other Ministries and their existing schemes for a more targeted and focused approach towards welfare of TG community, while considering an Umbrella Scheme for direct targeted intervention in certain areas.

11. Various Ministries/Departments of the Government of India are implementing a number of schemes which target a variety of beneficiaries. In most of such schemes, special emphasis is given to cover the weaker sections of the society and other disadvantaged groups. The Expert Committee is of the view that these schemes could be effectively utilized for providing benefits to such transgender persons who are eligible under those schemes. Some of such schemes/programmes are mentioned below (list is not exhaustive):

- MGNREGA
- National Rural Livelihoods Mission (NRLM) – AAJEEVIKA
- National Social Assistance Programme (NSAP)
- National Urban Livelihood Mission (NULM)
- Healthcare facilities
- Rashtriya Swasthya Bima Yojana (RSBY)
- National Health Mission (NHM)
- National Policy on Skill Development, 2009
- Indira Awas Yojana

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## Addressing Stigma, Discrimination and Violence faced by Transgender People

*Addressing stigma, discrimination and violence against gender-nonconforming and transgender children and adolescents:*

12. *Families:* Awareness and information are needed for parents to support their gender-nonconforming or transgender children, setting aside their discomfort and deeply held normative attitudes. Such information could be made available in health settings (pediatrics, child development specialties), as well as through educational institutions.
13. Counseling and other mental health services that affirm the child's gender identity are needed for the children and their parents alike. The model of parents' support groups facilitated by the Center for Counselling in Chennai and Swabhava in Bangalore may be examined for replication by government and civil society groups working for transgender welfare.
14. Besides a supportive family environment, gender-conforming and transgender youth need counseling and support for their self-stigma, and for coping with the trauma of violence and abuse. To cope up with trauma and violence crisis counseling services could be set on the model of RCICs (rape and crisis Intervention Centres). Such support could be made available in schools, through various child-welfare services, Childline services and through youth and suicide prevention helplines. Additionally, existing forums such as the Anganwadi Centres and Self-Help Groups may be oriented on transgender issues, and involved in providing information to parents of gender-nonconforming youth.
15. *Educational institutions:* Awareness of gender diversity and the need to safeguard transgender youth from hostile school environments is a dire need. The recommended interventions include formation of groups of transgender children for meetings, holding film screenings for sensitization of students and staff, setting up of resource centre, augmenting libraries with books and audio-visual materials on transgender issues, holding periodical sensitization events by collaborating with organisations working with transgender, and adopting policies for preventing sexual harassment and bullying of transgender children. Some schools in Tamil Nadu have initiated efforts in this direction by inviting transgender spokespersons and counselors to educate their students and staff. The Committee recommends that these recommendations may be studied by Governments and suitably adopted for creating a conducive environment for transgender children in educational institutions.
16. *Healthcare:* Interventions to reduce discrimination against transgender persons in the healthcare system have been described in Chapter 10. The authors emphasize here the need to prevent physical and psychological violence inflicted on gender-nonconforming and transgender children and adolescents through conversion therapy attempts such as electric shock treatment.
17. *Shelter and Residence:* While it is imperative that every effort be made to provide gender-nonconforming and transgender children safe residence within their natal homes, there is a need to ensure that short-stay homes, orphanages, adoption and fostering services are sensitive to the needs and concerns of such children. There is also a need for sensitization and capacity building of the caregivers for addressing the concerns of Transgender children in the institutional setting.

*Addressing stigma, discrimination and violence against transgender adults*

18. *Workplace:* In consultation with community groups and human resource professionals experienced in the area of Diversity and Inclusion, workplaces in public and private sector need to sensitize employers and employees on issues of transgender persons. Anti-discrimination policies must be instituted and meaningfully applied to the processes of hiring, retention, promotion, and employee benefits. Workplace sexual harassment policies should be made transgender-inclusive.

19. *Law and Law Enforcement:* The legal and law-enforcement systems need to be sensitized on issues of transgender people and be empowered to take actions such as:

- (i) Criminal and disciplinary action against delinquent police official in cases of violations of human rights of transgender persons.
- (ii) Taking action against parents who neglect or abuse their gender-nonconforming or transgender children and against doctors who practice electro-shock or other kinds of unethical "conversion" therapy.
- (iii) Making free legal aid available to transgender individuals seeking redress against discrimination and violence.
- (iv) Where transgender individuals need to be incarcerated, care must be taken to ensure they are not in circumstances where they are vulnerable to sexual assault.
- (v) Sexual assault, sexual harassment and domestic violence laws must be made transgender-inclusive. Presently, Section 375 of IPC, as amended doesn't cover the transgender persons as victims of sexual assault (only cis women can be the victims of sexual assault). Alongside Section 375, another section should be included to cover the cases of sexual assault on transgender persons.
- (vi) Slurs based on real or perceived gender identity may be included in Section 153A of the Indian Penal Code.
- (vii) Bureau of Police Research & Training (BPR&D) may undertake a study on crime against transgender persons, including alleged excesses by Police, with a view to investigate their causes and suggest preventive measures.
- (viii) National Crime Records Bureau may, from now on, collect and compile statistics of crime against transgender persons, as also about cases registered against them as accused.

20. For the long run, the possibility of a law to prevent discrimination and atrocities may be considered.

21. *Social Welfare:* Policy and institutional reforms that enable access to social protection schemes, targeting the poor and other at-risk groups, must be made transgender inclusive.

22. *Community strengthening and involvement:* The capacity of community organizations to monitor, document and respond to discrimination and human rights violations must be strengthened. Training in legal literacy, and public speaking for advocacy are needed. Transgender representation in dialogues around social and legal protection, policy and legal reform, and public sensitization is necessary.

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23. *Housing:* Given the poverty experienced by many transgender people, and discrimination encountered in finding housing, it is imperative that the Ministries of Rural Development and that of Housing and Urban Poverty Alleviation ensure that housing assistance schemes help transgender people to obtain non-discriminatory and safe housing.

24. *Media and Society:* Transgender human rights issues must be highlighted in the media and other public forums so as to improve public awareness, and increase transgender people's ability to realize those rights. Stigmatizing coverage in the media must be curbed.

#### *Elderly Transgender People*

25. There is a need for pension scheme for elderly transgender people regardless of gender assigned at birth, adopting a model such as that available for MtF transgender people in Tamil Nadu, as well as non-discriminatory and affordable housing schemes.

#### **Suggested Approach to Mainstream Transgender People with Education System**

26. There is an urgent need for addressing the community's concerns in education sector in a holistic way that implies giving attention to Access, Equity, Environment and Employment. Addressing stigma and discrimination at early stage will help in bringing transgender children to school and retaining them upto the higher level. The following strategies can be considered:

- Ensure equal access to educational opportunities at all levels without stigma and discrimination: Affirmative actions are needed to reduce stigma and discrimination associated with the community. Schools and colleges need to play a supportive role in such instances. There has to be proper sensitization of society in general and particularly parents, teachers and students.
- The fulfillment of the obligations under Right to Education (RTE) Act is critical for the improvements in the educational conditions of transgender community.
- Enhance understanding on transgender issue: Better understanding of socio-cultural and human rights aspects would help in attitudinal shift towards the transgender community.
- Dropout of transgender persons from schools - not by choice but by force: Dropout has to be seen from different perspective. The transgender persons do not dropout from schools not by choice but by force due to acute discrimination and abuse. The perception of dropout may require review and reform of structural constraints, legal procedures and policies that impede access to mainstream education.
- Ensure safety of transgender children in educational institutions: Transgender children face physical, mental and emotional violence forcing them to leave. Proper mechanism has to be evolved to ensure their safety. This also requires fixing the responsibility
- Sensitization towards transgender community should be an integral part of student counselling at schools. The transgender persons also feel that their student community should be given adequate opportunity to interact with trained counsellors as they undergo a lot of gender dilemmas.



- Contents on transgender can be included in the curriculum of adolescent education in schools to sensitize children. This can become an effective step to address the stigma/discrimination at schools.
- Activities organized at schools to be inclusive to ensure participation of all children. This will enable other children to understand better and give space for the transgender children in their friendship. School Management Committee (SMC) members in their training programmes should include separate sessions on the issues/challenges faced by transgender. SMC members should also talk to community members to create greater awareness.
- Mainstreaming of transgender persons can also be done by institutions and individuals working in the education sector, particularly NGOs and activists through advocacy and capacity building.
- Review the existing schemes (Education and Training): Educational and training schemes/programmes like Sarva Shiksha Abhiyan (SSA), Rashtriya Madhyamik Shiksha Abhiyan (RMSA), Jan Shikshan Sansthan (JSS) at various levels i.e. primary, secondary and senior level need to be reviewed to include the concerns of transgender persons. M/o Human Resource Development (MHRD) may take up this with the States. MHRD through National Council for Teacher Education may take up sensitization of teachers through a series of training programmes for which a separate module can be prepared. Since SSA is a vehicle for implementation of RTE Act, as per the mandate all children 6-14 years of age have a right to education. States can include transgender children among disadvantaged groups so that they are also admitted in private schools under section 12(1) (c) of the RTE Act.
- There is a need to harmonize different schemes available for children to make them suitable and accessible to transgender children. The Juvenile Justice Act (JJA) should also address the concerns of transgender children and should be suitably modified/amended.
- Development of community friendly customized pedagogy for skill based learning Vocational skill development training should be provided to the community for introduction of new skills or providing additional skills for those who have skill in a particular vocation which can enable them to look for better job opportunities and economic empowerment. The tailor-made skill based training programmes need to be developed with the help of Jan Shikshan Sansthans, NSDC and lifelong learning programmes of universities and colleges.
- Financial incentives/scholarship for the transgender persons: Government should provide scholarship/entitlements, fee-waiver, free textbooks, free hostel accommodation and other facilities at subsidized rates for students belonging to this group.
- Establishment of anti-discrimination cell: All the educational institutions/universities should establish an anti-discrimination cell to monitor any form of discrimination/harassment against the transgender students.
- Create an enabling environment: There is a need to work closely with community and different school based committees like School Management Committee (SMC), village management committee as recommended under the RTE Act.

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- Section 317 of the IPC: Abandonment of child is a punishable offence under Section 317 of the IPC if the child is abandoned under the age of twelve years. However, the abandonment of transgender children takes place usually between the age of twelve & eighteen years. The Ministry of Home Affairs (MHA) may be requested to consider enhancing the age of child for this offence to eighteen years.

- Research: Generate more data/information to identify and understand the problems related to various aspects of their life and help frame policies through research and academic programme that would bring an effective and long-term change in their lives.

**Suggested Approach for Improving Employment opportunities for transgender persons**

27. Following approach is suggested:

Create opportunities for Information and counselling

- Establish Helpline for Career Guidance, Promotion and online Placement Support
- Capacity Building and Entrepreneurship Development
- Liberal credit facilities and other needed support for economic activities
- Provision of social entitlement to the community
- Convergence with existing schemes of Ministry of Social Justice & Empowerment (MSJE): MSJE may explore the possibility of widening the mandate of one of the Corporations for providing the economic support to transgender community.
- Vocational Skill Building: Design customized vocational training programmes for the transgender community as per their needs and interest and establish effective linkages with vocational training centers run by private and government agencies.
- Create a supportive Environment: The efforts should be made to sensitize all concerned stakeholders like government officials in relevant departments, banks, private employers, corporate, community leaders like Gurus.
- Convergence with existing schemes: Mention of transgender community across all existing schemes specially centrally sponsored schemes like National Livelihood Mission, NREGA, NFDC will help in giving them due recognition.
- Adopt good model/intervention: There are some good models like Transgender Welfare Board in Tamil Nadu which helps through Self-Help Groups for economic security of this community. The Board provides 25% subsidy to such SHGs for starting self-employment. The proven models can be adopted by other States also.

**Transgender Adolescents, Youth and Young Adults**

28. The international and therefore the nationally accepted formula for looking at issues pertaining to children, adolescents and young adults remains the best interests of the child, in

the expectation that no child, adolescent or young adult is allowed to fall through the cracks. The right to education framework entitles that they stay in schools which have a supportive and nurturing environment, with adequate training and protection given to the system to ensure that the high instances of reported bullying, abuse and coercion into accepting forced gender roles are removed from that young person's life. World over, in countries where research and studies have been done, there is documented evidence that young transgenders are at considerable risk to many things - loss of family, loss of education, bullying, depression, assault, violence and the risk of suicide because supporting frameworks do not exist or because they are unable to access it.

29. The Medical Council of India along with leading mental health institutions and organizations working on transgender issues should develop practice protocols for the care of transgender adolescents/ youth under the age of 18. This would also involve development of detailed protocols for counseling of family members of adolescents and SRS related guidelines for adolescents. It is also pertinent to note that in India, for any surgery to be done on an individual, the age of consent for that person is 18 years, and if younger, parental/ guardian consent is necessary. International guidelines and best practices lessons learned will also help our country achieve this standard when setting the age threshold. Some of the other issues are:

- Deliberately incorrect and disrespectful use of names and pronouns
- Lack of access to appropriate restroom facilities
- Privacy and Confidentiality
- Highest standards of health care - including psycho
- Lack of role models; lack of accurate information
- Transgender awareness training for faculty, staff, and administrators from a qualified community-based trainer

**Access to Healthcare: General Health Services (Physical/Mental), and Gender Transition Services (including Sex Reassignment Surgery)**

*Improving access to and use of general health services for male-to-female transgender people*

30. All public hospitals need to have hospital policies on registration and admission of transgender people, training and sensitization of the health care providers about transgender people and their health issues, and the need to educate the general public (here, co-patients and relatives/care-givers in hospitals) about transgender people.

31. As a transgender person can be a sex worker and HIV-positive, within the health care settings, steps need to be taken to decrease stigma faced by transgender people in relation to these intersecting stigmas (stigma related to being transgender, sex work and HIV status).

*Improving access to and use of gender transition-related health services for transgender people*

32. The common gender transition-related service needs of transgender people are summarized in the Table below:

**Table 10.1: Gender transition-related needs of transgender people**

Gender transition-related needs	MtF transgender people	FtM transgender people
<b>Common needs</b>	<ul style="list-style-type: none"> <li>• Proper counselling about options available in relation to gender transition</li> <li>• Proper post-operative follow-up counselling and support</li> </ul>	
<b>Types of surgical procedures required</b>	<ul style="list-style-type: none"> <li>• Neovagina creation (construction of a vagina)</li> <li>• Penectomy (removal of the penis)</li> <li>• Orchidectomy (removal of the testes)</li> <li>• Clitoroplasty (construction of a clitoris)</li> <li>• Breast augmentation (breast enlargement)</li> <li>• Rhinoplasty (reshaping the nose)</li> <li>• Hair transplants</li> </ul>	<ul style="list-style-type: none"> <li>• Bilateral mastectomy (removal of the breasts)</li> <li>• Hysterectomy (removal of the uterus)</li> <li>• Oophorectomy (removal of the ovaries)</li> <li>• Phalloplasty (construction of penis)</li> </ul>
<b>Types of non-surgical procedures required</b>	<ul style="list-style-type: none"> <li>• Female hormone therapy</li> <li>• Hair removal: Electrolysis and laser therapy</li> <li>• Voice modulation: Vocal therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Male hormone therapy</li> <li>• Voice modulation: Vocal therapy</li> </ul>

33. The following recommendations are made for consideration of the Ministry of Health:

1. To prepare a policy statement (and/or an executive government order) on providing essential gender transition services, including SRS, in suitable public hospitals
2. To prepare national clinical guidance (standards of care) document in line with the international WPATH guidelines
3. To provide penectomy/orchidectomy (removal of male external genitalia) for people who are confirmed to be '[MtF] transgender people', based on clinical diagnostic criteria

4. To prepare policy guidelines for providing gender transition services in public hospitals (e.g., which hospitals, whether gender transition services will be free or subsidized)
5. To train relevant health care providers on offering gender transition services
6. To develop national guidelines on clinical management of people with intersexed conditions (now called 'Disorders of Sex Development')

*Enabling better understanding and enhancing competency among health care providers (HCPs) in dealing with some transgender-specific health issues*

34. To improve better understanding of the health issues of transgender people and to make health care settings welcoming and non-discriminatory, the following steps need to be taken:

- Curriculum and Training on transgender health
- Transgender-friendly hospital policies/guidelines
- Non-discrimination policy/guidelines
- Research and evidence-base to promote transgender health

#### The Role of Ministry of Social Justice & Empowerment (MSJE)

35. The Department of Social Justice & Empowerment in the Ministry of Social Justice & Empowerment should be the nodal agency of the Government of India for the transgender persons. The Department of Social Justice & Empowerment should coordinate with various line Ministries/Departments of the Government of India and State Governments for ensuring welfare measures for the transgender persons.

36. For the above purpose, the Ministry may set up a Standing Coordination Mechanism in the form of an Inter-Ministerial Committee comprising representatives of Ministries of Social Justice & Empowerment, Human Resource Development, Health & Family Welfare, Housing & Urban Poverty Alleviation, Rural Development, Labour & Employment and the Department of Financial Services. The Committee may also associate representatives of State Governments by rotation, representing different regions of the country. The representatives of the transgender community and experts may also be included as members of the Committee or be invited as special invitees. This Committee should ensure preparation of time bound action plans by all concerned Ministries, monitor their implementation status and suggest measures for removing bottlenecks, if any, encountered during their representation.

37. A National Council for Transgender Persons may also be considered on similar lines as that of the National Council for Senior Citizens.

38. With a view to ascertain a quick estimate of the population of transgender persons in the country as also their socio-economic condition; the Ministry may, in collaboration with the Ministry of Statistics & Programme Implementation, carry out a survey. This may also

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help the concerned Ministries in preparing appropriate schemes for improvement of their socio-economic status. This is also mentioned in the Twelfth Five Year plan document.

39. To begin with, the Ministry may consider launching an Umbrella Scheme for the benefit of transgender persons with following components:

- (i) Scholarship for transgender persons on the lines of similar scholarship schemes for SC students;
- (ii) Loan with 25% subsidy for transgender persons to enable them to take up self-employment ventures;
- (iii) A pension scheme for transgender persons above 40 years up to 60 years, who for some reasons cannot be assisted under any scheme of economic empowerment, for ensuring financial security; and
- (iv) Grant-in-aid to Voluntary and other Organizations working for Empowerment of Transgender People, particularly for providing them vocational training.

(S.C.D.C. Corporation)

40. As discussed in Chapter seven, the press and media have to play an important role in sensitizing the society and families on the issues of transgender persons. The Ministry, in concert with the Ministry of Information & Broadcasting, may carry out an intensive publicity campaign for this purpose.