Journal of Namibian Studies, 33 S1 (2023): 3172-3187 ISSN: 2197-5523 (online)

Transgender Ageing: Issues And Concerns

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Abstract:

As the world is aging fast, the numbers of elderly transgender have also been increasing. In order to give cognizance and empathizing the necessities and apprehensions of the elderly transgender population not much consideration has been there. With the increasing age, they often bear a combination of various risks of stigma and social disconnection which adds more vulnerability during their golden older days. The dual burden of "age" and "gender" intensifies new difficulties and multi-faceted survival threats especially in social, emotional and financial dimensions. In this realm of analysis, this study is centered on the specific objective of exploring the milieu of various problems encountered by the elderly transgender persons of Kashmir. The analysis and outcome of this paper will be analyzed from a sequence of focus group discussions and in-depth interviews with MTF (Male to Female) transgender elderly persons who belong to Kashmir. There were nine main areas of concerns which were of foremost significance for the Kashmiri transgender elderly populace (family support, housing, income deprivation/economic uncertainty, legal rights, mental and physical health, religiosity and spirituality, and last of all social networks) as was observed through content analysis of the expressed beliefs, attitudes, and opinions from the participants. The attitudes, concerns, needs, opinions, perceptions, range of issues and shared problems expressed across the focus groups are discussed and recommendations are provided.

Key Words: Ageing, Issues, Kashmir, Transgender.

INTRODUCTION

Gender denotes socially constructed peculiarities allied to male or female such as norms, roles and relationships (**Little et al., 2012**). Transgender or third gender or TG refers to individual who do not fall beneath the classification of male or female dichotomy (**Talwar, 1999**). It is an umbrella term used to include those individuals whose distinct personality, gender behavior, activities and life styles seem to struggle with the standards and gender norms of society (**Whittle et al., 2007**). The term "transgender" is used inclusively to describe individuals who have "gender identities, expressions, or behaviors not traditionally associated with their birth sex" (**Mayer et al., 2008**). As per United Nations Development Programme report, the term refers to 'individuals whose gender identity, uniqueness and gender expression differs from social norms correlated to their gender of birth. The term defines a varied array of behaviors, expressions, identities, roles and experiences which differ significantly from one culture to another' (**UNDP, 2010**). Although, gender is assigned at birth according to visible sex characteristics, gender identity is an individual's psychological sense of self as male or female; gender expression is how a person expresses gender and how others perceive gender through clothing, grooming, speech, body language, social interactions, and other behaviors (**FORGE, 2007**). Gender is most often dichotomized along a single dimension (**Clarkson-Freeman, 2004**), though gender identity and expression are multidimensional constructs (**Alegria, 2011; Grant et al., 2011; Persson, 2009**). Therefore, this widespread taxonomy encircles an extensive diversity of people who ascertain themselves as male, as female, as genders outside these two, or categorize them in ways that go beyond gender. Those who are contented with their bodies and consequently sense no requirement for essential hormones, surgical procedures/treatments or new bodily modifications as well as those persons who strive for to change their bodies are included here. Transgender people face abuse, discrimination, disgrace, embarrassment, exploitation, mistreatment, neglect, shame and violence because of their gender identity and expression. In Kashmir, the trans community encounters injustice in all the life phases be it in

legal recognition, right to use social resources including education and employment, living a decent standard of life, or easy ease of accessibility to healthcare/medical facilities. The non-conformity to their prescribed gender roles makes them more helpless leading to oral and corporal cruelty by their parents, siblings and other relatives which adds more miseries and makes them the most vulnerable lot of society. The threatening scary atmosphere and hostile bullying surroundings equally exists at all educational institutions compelling them to leave their studies in the midway so as to escape insults and harassment which affects their psychological stability and inducing high mental trauma. National Institute of Epidemiology in India had conducted a study observing 60,000 transgender people transversely from 17 states of the country that revealed 60% of transgender highlighted that they confronted various cruel practices of harassment. The existence of their life is filled with all sorts of exploitation and the most horrible stage of their lifetime is old age as ageing is the universal phenomenon and everyone on the earth undergoes the process of ageing. Ageing can generally be described as an intricate part of the life cycle. Ageing is natural, inevitable and ubiquitous phenomenon. Commonly speaking, it means various adverse effects or manifestations of old age. Ageing is one of the most neglected issues mainly because aged people are considered as disempowered and non-resourceful persons. Visibility for transgender and gender non-conforming people and the elderly is growing (**Singh and Bower, 2018**). Old age is utmost difficult and challenging for trans community in Kashmir as they are either rejected or denied ties by their family members and other relations. Working in old age is probably impossible for them and particularly no return to their families; they prefer to struggle all alone against the day-to-day challenging life circumstances like loneliness, poor health, ailment and poverty (**Bund, 2017**). The unique needs and realities of this extremely marginalized, isolated and excluded elderly population have been unknown and largely ignored by most institutions in our society (**Cahill, South & Spade, 2000; Dorfman, Walters, Burke, Hardin, Karanik, Raphael & Silverstein, 1995; Quam & Whitford, 1992**). As well quoted by **World Health Organization** (**1967**), old age

is — the period of life when impairment of mental and physical function becomes increasingly manifest by comparison with previous periods of life. It is considered an assortment of diseases and disabilities leading to dependency in later life. The majority of disorders occurring in the elderly people are not solely due to ageing process which would minimize the pathogenicity and incidence of ailments (**Fried and Bush, 1988**). Also, — older people face the same stigma, prejudice, and stereotyping that people who are disabled encounter (**Benedict and Gankos, 1981**). The main objective of this study was to ascertain and observe the diversity of sensitivities and multiplicity of perceptions concerning the apprehensions, needs, necessities, concerns, fears and issues impacting the particular selected focus group of self-identified elderly transgender persons exceeding beyond the age group of 60 years. The purpose of this study is to generate the outcomes from a sequence of in-depth interviews with transgender elders from selected areas in Kashmir valley.

DESIGN AND PROCEDURES

The researcher gained access into the established transgender elderly community through personal contacts and links. In order to keep the essence of integrity, morals, ethics and right code of conduct every single effort was prepared to follow that included concealment and secrecy of the participants, informed consent, nature of partaking and sharing the information, empathy and responsiveness. The informational data was collected on the basis of fifty (sample size) transgender elderly persons who partook and shared their personal experiences in the focus group discussions. The participants ranged in age from 60 to 85 years. The three focus groups comprised of elderly transgender persons of different topographical parts of the valley (urban [n = 20], rural [n = 19], semi-urban [n = 11]), socio-economic statuses (low-income [n = 33], middle-income [n = 9], upper-income [n = 8]), and educational levels (less than 8th grade education [n = 43], high-school graduates [n = 7], college graduates [n = 0], advanced degrees [n = 0]). The focused group discussion areas/places were already identified prior to the meeting so as to have

trans-friendly environment/spot which possibly will keep them secure and provide serenity for the participants.

ANALYSIS

The data analysis was condensed on the basis of content analysis to enrich the reliability that was drawn through the articulated beliefs, communicated view points and diversified perspectives of participants which focused on seven themes of significance for elderly transgender population in Kashmir. These specific themes are discussed here:

Family Support

One of the significant area of debate for all the focused group participants was family relations. Mostly they were either abandoned by their family fellows or were denied any relations with them. They carry a social stigma of unacceptability particularly from their family. Because of such social stigma, they experience loneliness, ill-treatment and isolation from their family. In family ties, they face extreme inequity in terms of affection, love, care and respect. The emotional want of having a family was intensely sensed and articulated. Family support was described as being tremendously significant for their sense of contentment, ease, joy, bliss, security and well-being. All focused group participants emphasized that during the course of their life they have had to form their own “families of choice” with other transgender people. The majority of participants also specified that their social networks are composed of predominantly by other transgender individuals, but with the passage of time this distinctiveness has lessened throughout the years. One of the focused group participant asserted that “I don’t want to be old and lonely. When I lost all my transgender friends, I understood that my social circle was quite small. I cannot just have someone around”. “Children and family members are actually supposed to take care of their elder ones. But what occurs while one does not have children and family members?”

Housing

The life-threatening corporeal, emotional, oral, mental and sexual cruelty enforced participants to abandon their home. The choice of parting away from family for few selected participants was decided when they were already associated with certain friends who had left their families. On the other side, many of those who left their home were not linked with anybody and are endlessly struggling to find a secure, nontoxic and budget-friendly place to live. Getting a space for shelter on rent has not been stress-free for MTF Transgender in Kashmir. The oppressive traditional society has been tabooing down upon them and their existence. Very rarely house proprietors give them accommodations merely if they obey the terms and conditions and have a proper conduct. In the valley, they are confined to the secluded areas. Living in secluded areas especially which are far from the city hub but located in the periphery also make them deprived of the necessities of life like good food, pure water, sanitation and healthcare facilities. They mostly settle down in unconstructed houses or the places under construction. In most of the cases they fail to pay rent on prescribed times either because of the absence of employment (occupation) or dearth/shortage of income and mostly at these times they are displaced homeless. Shelter is constantly a never-ending quest for them in order to live a dignified, safe and secure life. All focus group participants articulated their fears and worries while discussing about housing essentials and necessities particularly their apprehensions that their rented homes could not meet especially their needs when they developed some major physical limitations. Also all participants communicated that they choose to “age in place” and continue to stay in their own homes; they also accepted that they essentially require help, support and assistance. One of the participant revealed “My family did not care for me so I left home thirty years back. Now I am living on a rental shelter. The increasing rent and my helplessness to pay it because of my pitiable health conditions which as a result is raising the stress, strain and pressure between me and my owner who frequently threatens to throw me out.”

Income Deprivation/ Economic Uncertainty

Income deprivation and economic uncertainty were two major issues that were correlated with other problems in the lives of transgender community in Kashmir. From the field work analysis, it was observed that seventy-three percent of focused group participants never attended school and twenty-to percent of participants had just completed the primary level of school education only as they faced enormous level of harassment in schools like bullying, disgrace, disrespect, exploitation, exclusion, harm, humiliation, ill-treatment, neglect, verbal abuse, physical and sexual harassment by their classmates, teachers, non-teaching staff and as well as higher authorities of the institution. This imposed on them to withdraw from their education in the middle. Widespread illiteracy is visible in them. Consequently, they were inevitably bound to be the prime victims of unemployment as they lack education to find jobs for suitable living. Since ages, traditionally there occupation has been limited to match making (mazimyaraz) and singing and dancing (gywun ti nachun) at marriage ceremonies. None of the Kashmiri household employs them as domestic help because of the stigma and shame associated with their existence. Majority of the focus group participants are unemployed because of either lack of education or social support thus they face income shortage. Nowadays, the occupations like match making and singing/dancing is vanishing its essence because of the preferences of choice marriages and existence of different famous bands and disc jockeys (DJs). In addition to all these circumstances, the state of being old, weak and incapable to work adds fuel to their miseries. Income insecurity and extreme poverty troubles them more exclusively to those who are elderly as they are thrown out of their original/ancestral homes and thus they are deprived of their birthright property and other resources as well for their survival. One of the participant lamented in grief that 'Young generation transgender is far more secure in economy through traditional work and prostitution because of being confident and being in touch with new technological tools like mobile phones, internet usage, video making as YouTubers while older generation like me either are dependent on younger ones or begging either because we are weak and our health conditions are deplorable, or we

have no know how of technological tools or else lastly we are of no use for our own self as well'.

Legal Rights

Legal issues were also a different acknowledged cause of alarm for all fifty focused group transgender elderly participants. The participants loudly uttered their frustrations that there is no official and approved recognition of their gender beyond hetero-normative identity of male and female dichotomy. They also specified the concern that there is no social security for the transgender community of Kashmir. Life insurance and insurance coverage allied to health and other social contingencies was an additional concern of the participants. Participants revealed that they are being deprived of various benefits like social security or pension plan mainly when their positioning is as subsequent kin for hospital visits and medical decisions; domestic violence and human rights violation safeguard orders; attributed birthright of mutually possessed real and personal property; legacy, property rights, handover of property and adoption from guru to chela; multiparty contracts; and lastly decision-making authority and supremacy with respect to funeral, burial or cremation. As per the Constitution of India, we have fundamental right of equality, civil and customary laws relating to inheritance and land ownership, but still in the valley there exists a large gap between the legal measures and applicable practicality owing to the rigid attitude towards them. Therefore, they are not the part of any welfare scheme **(Bund, 2013)**. As stated by one focus group participant concerning about the importance of suitable legitimate legal protection: "We are not even provided the space in the graveyard because we do not have the ownership. After the demise of any community member who had lived with us for ages the family comes to claim over the property and that is pathetic! We cannot adopt nor have anything for our security."

Mental and Physical Health

All the focus group participants highlighted that their needs

and concerns for health care were of prime basis of concern. All the fifty participants assessed their present-day health status as worst deteriorated and expressed to have plea of immense medical needs for which they were not receiving any sort of attention, timely aid, care and cure. Pathetic housing facilities and insufficient nourishment and diet have adversely affected the health conditions of the transgender community of Kashmir. The participants revealed that they also face psychological complications and thus they suffer from spontaneous psychological issues that are often being ignored. As such volatile concerns further add indications of psychiatric illnesses like depression, anxiety, sleeplessness, substance dependence and incidence of suicides. Besides this, the continuous harassment, violence and discrimination have amplified in the poor mental health. Further, the ailments like arthritis (n=19), diabetes (n=22), gastro-intestinal infection (n=11), hypertension (n=16), physical numbness (n=13), skin infections (n= 7), upper respiratory tract infection (n=9) and urinary tract infection (n=5) were also reported. It was also affirmed that transgender people of Kashmir are having less awareness about safe sex and are therefore greatly susceptible to HIV/AIDS and other venereal infections; hence they can be taken as a High Risk Group. The incidence of HIV/AIDS patients among the numbers of transgender in Kashmir is unidentified. The participants admitted that they do not go for the testing of sexually transmitted diseases transmission fearing stigma either because of any/no awareness about safe sex or about the ailments related to STD's. Since, transgender community of Kashmir is already socially ostracized, availing amenities and services associated with safe sex for example counseling, advocacy, screening/testing and familiarizing about use of condoms turn out to be tremendously challenging. Among all the participants, merely nine have information and understanding about sexually transmitted diseases and safe sex. No transgender have knowledge about any Integrated Counseling and Testing Centre (ICTC's) and the allied treatment facilities, procedures and plans in such instances where someone is infected. None of the focus group participant has ever gone for the HIV screening/testing or the screening/testing of any other venereal disease.

Religiosity and Spirituality

All the focus group participants specified that their religious faith and mystical beliefs have grown out to be more significant and stronger to them with proceeding age. One participant said “When you come nearer to meeting your Creator, you want to be assured that the Almighty knows who you are.” Most of the participants showed that all through their teenage years and initial maturity, they struggled to be treated as equals with organized religion’s undesirable attitudes on diverse gender identity. They revealed that profusely they faced numerous difficulties all over the valley due to the dogma of male superiority and religious denial. They further added that the oppressive traditional society has been tabooing down upon them and their existence. One of the participant narrated “Different religion clerics/clergymen enforce many constraints on our life and behavior here in Kashmir be it on our dressing patterns, life styles or even mere existence. We suffer having from limited freedom to participation in auspicious, religious and social gatherings.” All participants shared that they would be more enthusiastic within religious groups if prejudice contrary to them did not exist. Focus group participants also briefed how they anxiously are looking for such spaces but which have transgender friendly atmosphere. Many of the participants shared their experiences about visiting shrines, which are a kind of gender inclusive spaces. Though, their presence is actually barred on visiting the mosques. All the participants with great emotional quintessence expressed that rather than religiosity, devoutness was a true portrayal of their beliefs. One participant said, “I have every time acknowledged that Allah loves me, regardless of what the Muslims have said about my sexual orientation and gender identity. I have stopped going to mosque because I am not received there, but I never stopped having faith and trusting in Allah.”

Social Networks

All focus group participants praised the importance of their relationship and connection within the community. Most of the participants acclaimed that it was only because of the

encouraging, supporting and welcoming approach of the community that they were able to be comfortable and at ease with their own sexual orientation and gender identity. They never suppressed their feelings within the community as they were forcefully compelled to do by their own family including siblings, relatives, neighbors and other members of the society as the questions were posed on their existence even. They reminisced that all the members of the community be it the younger generation or the middle-aged ones overwhelmingly treat and behave with them nicely and politely. They consider the older/elderly ones like the heads of their family in every way. This was apparent and well explained by these gestures: "Without the transgender community, I would have assumed this entire valley as a place of enmity and hatred towards us (transphobia). Being old, weak and helpless does not matter in our community. In fact, it is appreciated as being an accomplishment. Each person in our community looks out and takes care of me selflessly." Few of the elderly participants added, "We are given outstanding veneration in every manner and equivalent status and due prominence especially while decision making on any matter. This exemplifies our worth than any other."

DISCUSSION & CONCLUSION

Participants of the three focus groups shared their lived experiences as transgender elders. They shared noteworthy information about some particular concerns of significance for elderly transgender women. For various participants, old age is the terrifying stage which is discernible with abuse, cruelty, dependency, exploitation, helplessness, isolation, mistreatment, vulnerability and pitiable physical and mental health. As per **Human Rights Watch (2016)**, transgender people reported that they are demeaned and degraded whenever this befits evidence that their appearance does not match the gender marker on their official papers. They are deprived of accessing to education, employment, housing and other facilities. Male to Female (MTF) transgender face several difficulties such as obstacles to healthcare services, deficient familial and social support, gender discrimination and are greatly susceptible to a wide-ranging of mental health issues such as anxiety, depression,

hopelessness, sleeplessness, uneasiness and suicidal ideation as well as physical health problems like HIV/AIDS, STDs and substance abuse (**Keatley and Iniguez, 2004**). The bigotry that many of them experience personally, veraciously and/or through the media that adds to their internalized fears (**Green, 2004**). Transgender people face multidimensional challenges that may undesirably impact their vigor, health and well-being (**Kenagy and Hsieh, 2005**). These comprise the experiences of discrimination and stigma that contribute to feelings of anxiety, despair, depression, embarrassment, misery and shame (**Ellis and Erikson, 2002**) as well as lessened educational and employment chances (**Nemoto et al., 2004**). Most of the transgender people experience of social exclusion that manifests obstacles in right to use the health and social services (**Namaste, 2000**). They seem to experience high intensities of hate crime, hate incidents and hate speech. It was reported that 62 per cent had experienced trans phobic harassment from unfamiliar person in public spaces those who perceived them to be trans: often this had taken up the practice and usage of verbal abuse but 40 per cent had experienced trans phobic threatening behavior also, 17 per cent had been physically and mentally attacked and 4 per cent had been sexually assaulted (**Morton, 2008**). **Whittle, S. (2007)** also found that a majority of trans people had faced nuisance in public places. They noted that '73 per cent of respondents experienced vulgar remarks, nasty behavior, physical abuse, verbal abuse or sexual abuse while in public places'. Transgender people were hesitant to report such happenings to the police for fearing that they will not be treated aptly, fairly, impartially, objectively or in dignified modus (**Whittle, 2001**).

Old age is undoubtedly the most awful stage in the lifespan of a transgender. This is the utmost difficult period for them as either they are rejected and abandoned by their family members or they are denied and deprived of any kind of relationships with their family and relatives. Working in an elderly age and in feeble conditions is not possible for any transgender person. The transgender community cannot return to their families and thus decide to fight against the ailment, dependency, inaccessibility, loneliness, miserable

health and poverty on their own. Old age for a transgender is filled with recurrent misfortunes, sufferings and tribulations. Transgender community encounters a range of social security concerns. As many transgender individuals either escape or are compelled to move out from their homes, therefore, they cannot imagine any form of support from their biological family in the end. Consequently, they face several hardships specifically when they are in a position to earn or are not able to earn due to their poor health conditions, absence of employment opportunities or old age. The most domineering concern encountered by transgender community with respect to social security includes absence of means of support, lack of livelihood possibilities, prohibition from political participation, deficiency of specific social welfare schemes and presence of hindrances in use of existing schemes. Though, the social welfare department provides a variety of social welfare schemes for socially and economically underprivileged groups. Mostly transgender people are not acquainted with much about social welfare schemes if any available for them. Unfortunately yet, so far, no particular scheme is existing for the Transgender community of Kashmir.

This study contributes to understand the exclusive concerns, issues and needs faced by elderly transgender persons. Based on the results presented few remarkable suggestions for future are put forward here: The members of the society are in an excellent position to address the ostracism of transgender elderly persons, but first they must recognize and address their own internalized transphobia, institutionalized transphobia, heterosexism and ageism that disturbs their capability to positively work with them. Continuous awareness and effective outreach strategies for the concerns, issues and needs faced by transgender elderly persons are needed. Outcomes of this study postulate that transgender elders would be profited from programs and services that are exclusively meant for addressing their unique needs and concerns.

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ACKNOWLEDGEMENT

Farah Ashraf is the awardee of the ICSSR Post-Doctoral Fellowship under the supervision of Prof. (Dr.) Aneesa Shafi, Head of the Department, Department of Sociology, University of Kashmir, Dargah-Hazratbal, Srinagar (190006), UT of Jammu and Kashmir, India. This research paper is mainly an outcome of the Post-Doctoral Fellowship sponsored by the Indian Council of Social Science Research (ICSSR), New Delhi. However, the responsibility for the facts specified, opinions expressed and the conclusions drawn is exclusively of the author.