

Sharing Spaces

Perceptions and Experiences from within and without about the LGBTQI community in India's middle class.



SHB Social Foundation, 1, Siddarth Building, Gaikwad Nagar, Aundh, Pune. [www.saathihaathbadhana.org](http://www.saathihaathbadhana.org).

email: [reachus@saathihaathbadha.org](mailto:reachus@saathihaathbadha.org), Ph: +919373339162

Qualitative Data analysis: Kalindi Kokal

Quantitative Data analysis: Padmaja Pore

Fieldwork & Data Collection: Alisha Kamat (Symbiosis School of Economics), Nirali Hamirwasia (ILS law College), Sunetra Khandke (Christ University, Bengaluru), Uma Parasuram (Symbiosis School of Economics)

10-15-2018

## **Introduction**

Article 377 of the Indian Penal Code after being debated in the Indian courts, legislature and society for almost a decade was finally decriminalised on September 6, 2018 by a judgement to this effect from the Supreme Court of India.

But living as equals requires compassion, understanding, and awareness from all segments of society, including the LGBTQI community which is but one part of society. This can enable each of our members the opportunity to explore, express and experience our potential to the best of our capacities.

Amidst a colourful celebration of the final verdict, what the debates in court also stirred were discussions in society over the subject that had somehow become a topic of social taboo. But the nature of these discussions, their variety and form remain under researched, thus, providing us with very little information on the overall perceptions of society towards the issue of diversity in sexual orientation and the LGBTQI community generally, who now have a right to live as equals in Indian society. This paper, based on two months of fieldwork in the city of Pune, explores this gap and attempts to provide an insight into how people perceive, understand and respond to the issues surrounding the LGBTQI community in India.

## **Methodology:**

This study was facilitated by SHB Social Foundation, a non-profit organisation, that is actively engaged in social justice interventions. The study comprised of two types of questionnaires. One set of questions was created to gain an insight into how society at large approached, perceived and responded to the LGBTQI community as part of it. A second format of questions was developed for those who identified as LGBTQI, specifically to understand their experiences with emotional support systems during their adolescence and teen-age. Such an understanding is meant to aid the identification of areas for advocacy and institutional interventions to improve the support extend this community.

In terms of data collection, two formats were adopted and carried out by a group of student researchers with backgrounds in law, psychology and economics. A questionnaire comprising of quantitative and qualitative questions was used to collect data from 342 respondents through circulation over google forms and in person through active interviews. Eighteen respondents to interviews amongst those gathered through an electronic format identified themselves as belonging to the LGBTQI community.

The responses to the google forms, we observed, were greater in number and more detailed than expected. Given that, the subject of LGBTQI-s is a socially and legally sensitive one, the perceived anonymity that electronic formats of data collection enable is possibly a reason for this disparity.

In order to ensure a variety in the socio-economic, education and profession related indicators of the respondents, the in-person interviews were conducted at three different locations that

allowed data collection at random from the wide variety of respondents. These locations included a shopping mall, a bookshop and a weekend market. A total of 40 interviews were collected in this manner. While the researchers had hoped that the in-person interviews would allow them an opportunity for discussion and facilitate observation of the impact of external factors on the nature of responses, if any; it turned out that the length of the questionnaires deterred respondents from engaging in in-depth interviews. Retrospectively, the researchers also felt that the task-oriented nature of the locations as well as their characteristic of being 'public spaces' were reasons why respondents may have hesitated to spend or 'to be seen spending' much time on such a questionnaire. In some instances, such as the weekend market, the researchers experienced rejection of their presence to the extent of denial of permission to conduct interviews because the subject of research was considered 'suspicious'.

Given these methodological constraints, most of the in-person interviews resulted in monosyllabic responses to the questionnaire. While these responses have nevertheless contributed to the quantitative analysis of the data, findings based on the qualitative responses are largely limited to the data collection through google forms.

The remaining part of this paper is divided into two main parts that are based of the two sets of questionnaires developed for this study.

Part one focuses on understanding how society generally perceives, receives and responds to the presence of the LGBTQI community as part of itself. The evidence in this part is based on interviews with respondents who did not belong to the LGBTQI community. In part two, the paper analyses the responses of individuals who identified as LGBTQI within the context of the evidence in the first part of this paper to examine further whether and how perceptions about LGBTQI community actually interfere with the experiences of this community in living as equal members of society at large. The term LGBTQI as used in this study is not limited to its obvious abbreviation of lesbian, gay, bi-sexual, transgender, queer and intersex, and is meant to be all-inclusive to refer to all sexual and gender minorities that are not heterosexual or gender-binary.

### The Data in Context

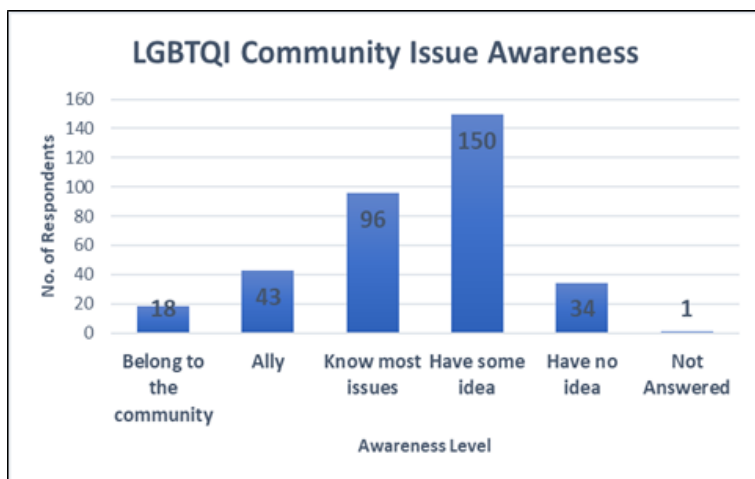


Fig 1: Classification of Respondents

Based on perceptions of their own awareness of the issue, respondents were asked to classify themselves as 'allies', 'people who knew most issues', 'people who knew some issues', 'people who had no idea about issues concerning the community'. While the questions asked to all groups of respondents were the same, such a classification allowed us to

analyse the impact of knowledge, awareness and interaction on social attitudes and sensitivity towards the LGBTQI community.

Broadly, based on the empirical data, it can be said that most of the perceptions and prejudices about the LGBTQI community were based on lack of interaction with this community,

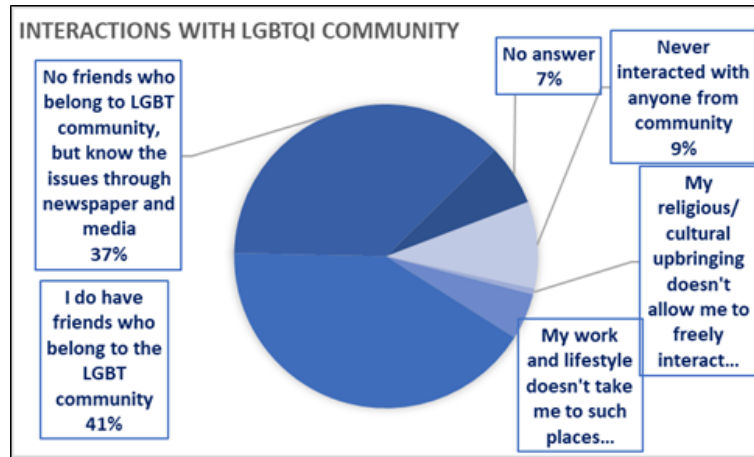


Fig 2: Classifying interactions with the LGBTQI community

popular images through media encounters and the absence of easily accessible information and awareness about this community. For instance, in response to a question about, whether diversity in sexual orientation is a culturally accepted phenomenon in Indian society, the responses oscillated between the two extremes of “yes” our culture in the past was more accepting of diverse sexual orientations and “no” cultural

subjectivity should not be important because culture has been a ground to reject the acceptance of this community. While part of the reason why the range of answers leaned only towards the extreme may have been dependent on the manner in which respondents understood the term ‘culture’, a greater probability for this was also the absence of sufficient awareness about this issue. Answers that reflected substantial reading and knowledge about the issue became evident through their references to the role of Shikhandi in Hindu mythology and its existence in ancient sculptures, thus establishing cultural acceptance of sexual diversity in past societies or through explanations of the “purificatory impact of Christian influences during the colonial rule” leading to popular rejection of this community after independence. But such respondents were few and amongst the majority, many chose not to respond to this question at all, and the few who did, either responded with a clear “no” or subscribed to popular images of societies of the past being backward and therefore unaccepting with some hope for support to the LGBTQI community increasing in ‘modern’ society because of increased awareness.

Was homosexuality a fad? Allies of the community were unanimous in their assertion that sexual orientation was not a fad. They differentiated between experimentation with different orientations, phases of orientations and fads. While some of the respondents in the group of allies felt that experimenting with sexual orientations was valid and totally justified because sexuality was an extremely “wide spectrum marked with fluidity”, the idea it being a fad seemed almost repulsive to them. Amongst respondents who claimed to know most issues many,<sup>1</sup> like the allies, felt that it was not a fad, even though a few clarified that given the socio-cultural context on Indian society, coming out and being open about one’s sexuality may be a

<sup>1</sup> 139 out of the total of 324 respondents classified themselves as allies or people who knew most issues. Of this group, 95 stated that being LGBTQI was not a fad.

fad, although as allies explained it: a fad resulting from necessity. In the Indian context, social illegitimacy (and the at the time of the research, also the illegal nature) of homosexuality was explained as the reason why people probably felt the need to be open and speak publicly about their sexuality. Those who felt it was a need justified it as necessary to increase social acceptability or to deal with issues of the insecurity they experienced. Exhibitionism on the other hand was differentiated from the need to come out and like members of the heterosexual community, was pointed out to possibly occur because of certain hormonal or psychological issues which of course were separate from one's LGBTQI status. Sexual orientation, on the whole, was perceived by most respondents "to be matter of (informed) choice" or a result of "being born in a particular way". The pattern of responses to the question on whether sexual orientation was a fad, however reveals that respondents with absolutely no idea about diverse sexual orientations tended to view homosexual, bisexual and transsexual orientations as a fad or a passing phase, possibly resulting from "trends" or curiosity. Interestingly many among those with such an opinion were interviewed in person, but it is difficult to say to what extent the method of data collection had its impact on the nature of responses. Coming out, correspondingly was also viewed to be an influence of social media trends or a popular culture of being bold, with one respondent even attributing it to nature of upbringing and another diagnosing it as a mental disorder.

Respondents who had never interacted with anyone from the LGBTQI community rested their justification in religious or cultural restrictions on their interactions, lack of opportunity because of the nature of their work. The majority of respondents lay within a range of those who had some knowledge to those who perceived themselves as allies of the communities. As the quantitative data reveals, almost half of the respondents who answered a question on sources of their information about the LGBTQI community, attributed their knowledge to information from newspapers and other media sources.<sup>2</sup> Interestingly, this reliance on secondary sources of information included people who stated they knew most issues or considered themselves as allies of the community.

Experiences of interaction with the community, however, were not the primary determinant of how people felt about the LGBTQI community. "Logically/Rationally, I empathize with the issues faced by this community, but I find that my responses often stem from years of conditioning that might cause me to have inhibitions preventing interacting freely with people from this community," explained one respondent. While allies of the community saw absolutely no reason to be uncomfortable with members of the community, many others despite limited interaction stated that the "mere fact that this community also comprised of humans, just like themselves, was reason enough to remain comfortable with them". Since sexual orientation was perceived to have little or no connection with a person's personality, some respondents stated that it did not interfere with relationship formation and therefore resulted in no sort of discomfort. Largely, reasons for experiencing no discomfort with the community or its members ranged from not finding them threatening to interviewees themselves being uninterested in the sexual

---

<sup>2</sup> Only 255 out of 324 respondents chose to answer a question on sources of information. Out of this number, 121 respondents (almost 50%) stated to have known about issues concerning the LGBTQI community through newspapers and other media sources.

orientations of people because it was a 'private matter'. Some respondents admitted that their comfort was conditional and extended so long as "they were not the ones getting attention" or "being stared at in the wrong way", and in situations where people were "speaking freely about sex and other topics". Overall, respondents who knew issues about the community, treated them as equal to other members of society and therefore were not prejudiced towards the community which they felt was perhaps the reason they did not feel uncomfortable.

As compared to respondents who were comfortable or saw no reason to be discomfited around the LGBTQI community, only 13 out of 324 respondents stated that they were uncomfortable interacting with members of the community and explained why they felt so or the nature of such discomfort. An articulate respondent remarked that questions of 'comfort' and 'discomfort' were unjustified given that the LGBTQI community, as they perceived them, were more sensitive than the general public. Closer inspection revealed that people who claimed to have some idea about this community and expressed their discomfort, based their responses on their knowledge of the 'hijra' community. Without naming them as *hijras*, many respondents referred to begging practices of the LGBTQI community as being a cause of annoyance and irritation. The hijra community, until the announcement of the Supreme Court's decision, was the only publicly known LGBTQI community in India. Reasons for experiencing displeasure and discomfort with this community, which falls within the broader spectrum of the LGBTQI community, were related to certain mannerisms and behavioural patterns observed as specific to this community and especially feeling imposed by these when they "came physically too close". Being widely discriminated, the hijra community in India finds little to no space in respectable income earning opportunities and are thus compelled to resort to beggary (Kalra 2012; Mal 2015; Satpathy 2016). Many times, exploiting society's rejection (or repulsion) to their own sexual orientation, some members of this community may resort of aggressive begging practices by increased physical contact with prospective donors or engaging in vulgar conversations compelling people to give them some money in an attempt to make them leave.

The peculiar behavioural practices attributed to some members of the LGBTQI community however, were not perceived to be a definite consequence of the nature of their sexual orientation. Not just allies of the community, but many others including those who had only some idea about this community stated that such a belief was only based on misconceived notions and confirmed stereotypical ideas about the LGBTQI community. While 'behaviour' and 'character' were grouped together in one question, some respondents did make a difference explaining that while they remained unsure of the impact of sexual orientation on a person's behaviour which could be a result of hormonal changes, they disagreed with the connection between a person's sexual orientation and his/her character which was viewed to be nurtured in the context of people's socio-cultural experiences. Differentiating between behaviour and character, some respondents made reference to the prominent effeminate characteristics of some gay men, which they stated could be observed about lesbian women. Behaviour of course was also interpreted more broadly to include the LGBTQI community's behaviour towards society at large, which was attributed by some respondents to upbringing or the experiences they have made in society due to their different sexual orientation. Social

expectations, voiced through pop culture and social media, about a certain type of behaviour from members of this community were also seen to be possible compelling sources on members of this community to adopt certain behavioural patterns. At the same time, some responses revealed an observation about how such social expectations and attitudes caused members of the LGBTQI community to become introverts.

The majority of respondents opined that the LGBTQI community did not pose a threat of any sort to public health or safety. In fact, some of them, particularly those who perceived

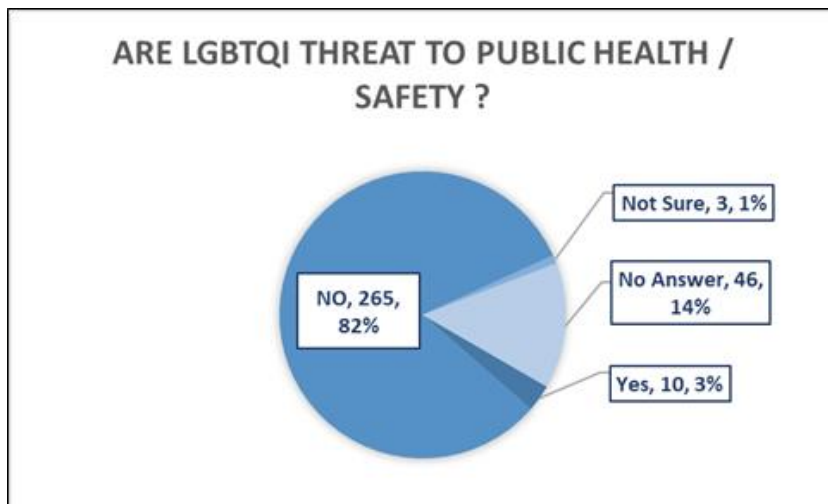


Fig 3: Perceptions about public safety

themselves as allies of the community, even felt that making such a determination was “discriminatory in itself”. Amongst respondents who asserted that members of the LGBTQI community were equal to the rest of society, some argued that they were likely to “pose a threat public health and safety for the same reasons and in the same

circumstances as non-LGBTQI individuals”. Concerns about public health, as we shall see in more detail in a later section of this paper, were limited to ‘physical harassment by gay men in public urinals’, the spread of HIV/AIDs due to unsafe sex or in connection with aggressive begging practices by *hijras*. Only three respondents out of 324 expressed a general concern about feeling threatened by the very existence of a community like the LGBTQI and the pattern of their responses revealed that they possibly perceived same sex unions to be socially objectionable. Their responses to our question, therefore, about whether the LGBTQI community posed a threat to of any sort to society at large could be contextualised within this background. For instance, one respondent stated that ‘he was not agreeable for tax money to be diverted towards sex change surgeries’ and another one highlighted that this community’s non-acceptance in society could be the very reason why they could become a threat to society.

In order to gauge the sensitivity of people towards the LGBTQI community, the study also enquired into the whether and how people perceived the challenges faced by the LGBTQI community. The study categorised challenges into four spheres: emotions, health, mental health and sexual wellness. This paper will take each one of them up individually:

### **Emotional Challenges:**

The LGBTQI community was perceived to have several challenges on the emotional front in Indian society. All of them stemmed from the shunning of and discrimination against this community as a result of stereotypes, socio-cultural prejudices and state criminalisation of their

sexual acts.<sup>3</sup> Loneliness, suicidal tendencies, inferiority complexes, conflicts with their own self, isolation and mental illnesses resulting from all these experiences were highlighted as the most probable emotional difficulties members of this group were tackling. Highlighting the causes of people feeling challenged emotionally, respondents who knew most issues pointed out: backlash simply for being who they are which was perceived to be tough to deal with but also isolating behaviour, rejection, insult, fear of not being understood, and the challenges faced in doing small tasks like finding a job and finding a partner. Respondents in this group also listed the absence of support groups and role models that could leave members of this community feeling confused or guilty about themselves and without information about how to handle their sexual orientation. Similar concerns were raised also by people who viewed themselves as having some idea of the issues. The fear of being isolated, feeling confused and anxious because of bottled up emotions and a possible lack of understanding about oneself, low self-esteem and the emotional trauma caused by legal and social difficulties were issues that were prominently highlighted. Most people who stated that they had no idea about the community stated that they were unaware about the emotional challenges that the LGBTQI could face, except for whatever challenges one would face because of their unacceptance in society.

#### **Health related challenges:**

Responses to perceived health-related challenges faced by the LGBTQI community could be divided broadly into two categories: access to health facilities and health problems that could be experienced by the group. It can be observed from the responses that there was a concern about proper access to health care being hindered by societal prejudices, a feeling a shame resulting from discrimination and isolation, lack of knowledge on part of stake holders in the health sector or family members of the individual which could lead to compelling treatment through alternative methods like healing, hormonal therapy, ritualistic practices and so forth. The health problems that members of this community could be exposed to include sexual diseases, the threat of physical attack from those biased against the community, depression arising from discriminatory and isolating practices in the society at large. Health related challenges were largely seen as a cause of emotional stress caused by societal attitudes towards this community. Insufficient or improper access to health care as a result of the reluctance of medical institutions to treat this community or lack of knowledge regarding them was also pointed out as a health-related challenge. Respondents who knew most issues also highlighted, like allies, the threat of being exposed to AIDS and STDs within this community and pointed out their possibility of taking recourse health treatments and gender change surgeries in poorly sanitized conditions due to social taboos. Most of the respondents in the category of having some idea about LGBTQI issues did not answer this question of health-related challenges. Those who did either left it at a 'yes' or stated to have no idea about this. One respondent felt that the question itself was subjective, as health of a person depended on him/her. This respondent elaborated his response explaining how it was upon the concerned individual to be happy or unhappy in the situation that he/she is. People with no idea did not

---

<sup>3</sup> This study was conducted before the announcement of the judgement in Navtej Singh Johar and therefore references to state criminalisation of homosexuality stand nullified to the extent of the context of the nature of decriminalisation declared by this judgement.



answer this question at all, except for one who stated hormonal imbalance as a possible health issue faced by this community.

### **Mental health related challenges:**

In the questionnaire, some of the responses to perceived health problems included mental health issues as well. Broadly, once again, the mental health issues that the LGBTQI community was perceived to be facing were all contended to be a consequence of the popular unacceptance of this community at the societal level. Forms of taunting, physical abuse and the lack of safe spaces for expression and support could possibly lead to depression, low self-esteem, body dysphoria causing eating disorders and suicidal tendencies. "A lack of acceptance usually leads to a lack of self-confidence, which can affect many other areas in life and could eventually lead to mental health issues such as anxiety and depression. It is important that they should feel free to talk about their own preferences and feel welcomed by the people around them, especially the people who matter to them most like their friends and family," said one respondent who knew most issues about this community.

Mental health related issues were seen by respondents who knew most issues to arise out of taunting, bullying, unacceptance and, continuous reiteration of how members of the LGBTQI community were different from mainstream society. Anxiety, depression, inferiority complexes, suicidal tendencies, low self-esteem and body image related complexes were listed as the mental health challenges they could have. One respondent is quoted to have said that "standing up to society requires a lot of courage." Clearly not everyone from within this community is equipped to do that, thus leading to challenges of emotional, physical and mental health. People who knew some of the issues concerning LGBTQI explained that mental health issues, health issues, emotional issues were all a grape vine. One issue led to the other. Again, here too the explanation for mental health included societal rejection of the community, "poking fun" at them and abusing them. The primary issues highlighted were anxiety, a feeling of being different, depression and self harm tendencies. Most people in the category of having no idea did not answer this question. The few who did, highlighted depression and anxiety as the most probable mental disorder, once again as a result of social stigma and unacceptability. One respondent even predicted aggression as a consequence of depression.

### **Sexual wellness related challenges:**

Many respondents, despite being allies, admitted to being unaware of the challenges related to the sexual wellness of the LGBTQI community. Most commonly, the responses highlighted, the concern of members of this community being exposed to risks of sexually transmitted diseases, AIDS, HIV and sexually transmitted infections because of the absence of groups where they can socialise and find partners; the compulsion to fulfil their sexual desires in secret and therefore sometimes with complete strangers. Tamping down of sexual desires which could be a result of social stigma attached to being LGBTQI was also pointed out as an issue that could cause mental health related concerns. Interestingly, most of the respondents who knew most issues avoided this question and left it blank. Amongst respondents who only had some idea regarding LGBTQI issues, sexual wellness related challenges were expected to be

concerned with the spread of sexual diseases as a consequence of having multiple partners, the lack of information regarding how to maintain sexual health and wellness within such groups, the inability to explore their bodies in a proper manner leading to harming oneself and the absence of sexual activity altogether because of social stigma. Respondents in the group with no idea reflected their earlier pattern of not answering this question at all.

### **Relationship related challenges:**

The overarching challenge that members of the LGBTQI community were believed to face was the inability and fear to come out in the open about their sexual orientation. This basic difficulty was seen to result in several relationship related challenges for the LGBTQI community: the inability to find partners, no opportunity to publicly display of their affection for one another, the inability to enjoy LGBTQI relationships in the same way that heterosexual couples find happiness and enjoy their relationships, forceful engagement into heterosexual alliances that end up causing difficulties for both partners. With regard to relationship related challenges, several responses from persons who knew most issues overlapped with respondents who were allies. Limitation to find a partner, the inability to make friends easily because of trust issues related to their LGBTQI status, the absence of an environment where they can enjoy their relationships in the same way as heterosexual couples are examples of this. One respondent in this category articulated that acceptance of one self (and one's sexual orientation) was the key towards having fulfilling relationships. Since this basic fact was often missing amongst LGBTQI people, fulfilling relationships of any sort with other people were perceived as almost impossible. People with some idea about the community also felt that relationship related issues were mostly related to the inability to find partners easily and talk about their relationships openly because of the unacceptance in society of such relationships. Marriage being illegal, the necessity to validate and clarify such relationships and meeting partners clandestinely were other issues highlighted. Loneliness, the difficulty in pursuing relationships, the hesitancy to commit, and ostracism by their loved ones were mentioned as relationship related difficulties by people who had no idea.

That the LGBTQI community faced challenges was agreed upon by almost everyone. Of course, as is evident from the pattern of responses, every respondent perceived these challenges to occur in different forms. Despite this however, not many respondents were willing to participate formally in the improving the social situation of this community. Responses to how one could better the experiences of this community in society therefore were limited to opinions that were recommendatory rather than experiential in nature.

Almost all of the allies articulated that acceptance of the LGBTQI community was the most prominent way in which they could contribute to the well-being of the community. Most allies were either students or already employed in some sort of job or business. Therefore, probably they felt that any form of contribution more than different forms of acceptance and inclusiveness would have been demanding on their time. A part of the acceptance also included recommendations to modify the law that criminalises homosexuality, which of course in light of the judgement have been met with.

The people who knew most issues were willing to contribute to the cause of the LGBTQI community more actively than the allies. Responses to the manner in which they could contribute included volunteering to spread awareness, creating spaces where people from the LGBTQI community could talk about or discuss issues or be peers willing to listen to them and stand in solidarity. As one respondent clearly articulated, the first step would be to accept of the community at an individual level, then encouraging others to be more accepting followed by a change in laws and more sensitisation through education about these issues. The willingness to contribute was evident in the category of respondents who has some idea about these issues. The methods in which they thought they could contribute were related to efforts in everyday life, largely to do with being more accepting, increasing awareness and social acceptance of this community, educating themselves and others about this community and challenging stereotypical notions about the community. Depending on their professional practices, some felt that they could contribute by writing about this community, funding research and projects related to this community and standing up to injustices against them.



## **PART TWO: EXPERIENCES FROM WITHIN THE LGBTQI COMMUNITY**

Since the study carried out at random, a section of the study also explored the experiences of people belonging to the LGBTQI community to cover instances in which the questionnaire happened to reach members of this community as well. Many questions corresponded with those that were asked to understand perceptions. This helped us to examine perceptions in context of experiences and to also understand to what extent perceptions about the community stood confirmed.

In the study a total of 18 persons confirmed their status as belonging to the community and 16 of them who identified as LGBTQI could categorize themselves as identifying with a specific sexual orientation. Most people seemed to have realised that they were differently oriented in their teenage and a few respondents stated that they realised it when they were as young as 7 years.

The most common challenges articulated by LGBTQI members coincided with those prominently highlighted by allies and people who knew most issue. Non-disclosure and the inability to speak about one's sexual orientation placed individuals in a Catch 22 situation. Members often did not reveal their sexual orientation because they expressed concerns about being distanced by those who loved them; and at the same time also explained how the inability to come out made them feel "suffocated" and isolated. Feeling depressed and anxious, having panic attacks about coming out and its repercussions, a constant feeling of sadness could be analysed as the most common articulation of their social experiences. One respondent also narrated how life had changed for him from a time when he was homophobic himself, to a time when he discovered himself as LGBTQI and began to become apprehensive of homophobic attitudes of those around him.

LGBTQI respondents listed eating disorders, self-harm, over eating, fatigue, mental issues taking a toll on physical health, feeling suicidal, clinical depression, bipolar, manic depression, and fear of abandonment as health-related difficulties. "Being told you are unnatural makes you feel hopeless, helpless and scared that you will be ousted by society" stated one respondent. Confirming such an experience, another respondent stated how "being unacceptable of your own self" made him feel constantly uncomfortable.

Societal attitudes were also perceived to interfere negatively with intra-partner relationships and LGBTQI relationships with close relations like their own parents and friends. Feeling suppressed, lack of information about different sexual orientations and the absence of opportunities to meet others like themselves were seen as consequences of societal unacceptance of their sexuality.

Given that the majority of respondents to the study realised that they were LGBTQI while they were in school, the absence of secure environments for opening up, discussing and dealing with the self-recognition of one's LGBTQI identity in such educational institutions is prominently highlighted. The inability to share their feelings with a person they were attracted to or with teachers and friends in school for fear of being ostracised because of the dominance of a

singular understanding of 'normality' are observed as the pattern of experiences in the narratives of this community.

Respondents from the LGBTQI community stated that they were comfortable coming out only in front of a trusted circle of friends or family. Most respondents spoke about having come out to friends and counsellors for the first time, with the exception of one or two who mentioned having spoken to their family members and another who came out the first time to her present partner. Only three respondents stated that they were open about their sexual orientation to family and extended family relations. Some stated that the comfort lay in the friendship itself, or the reassurance that such person would be accepting. Reasons for feeling the need to come out to the persons they chose varied. Some did it because they felt they were living a lie and some others chose to come out because they felt bottled up and frustrated. A few mentioned that trustworthy relationships gave them the confidence to come out. Some other felt the need to come out in order to be able to express their feelings of attraction or to stand up for their rights and in order to raise awareness.

On having an opportunity to speak to people, members felt reassured that not everyone is homophobic, felt accepted, felt okay about not knowing where they fell in the spectrum, realised that they had a group of people they could be comfortable with, did not feel alone, got medicines and therapy, and were generally more peaceful to know that they were not the only ones who felt like this. Coming out was unanimously experienced as freeing and liberating. It helped individuals accept themselves better and was relieving. A few respondents, however, also expressed the anxiety of having to deal with homophobic people and sadness of not being able to come out to everyone, especially their parents. Likewise, while nobody felt not supported on coming out, data also reveals that the majority of such a supportive group was the friends of these respondents. Clearly everyone had spoken about this to people they were sure would be accepting and therefore the reactions to speaking out were more comforting than disturbing. Simultaneously, what is also telling is that several respondents expressed the hope of families being more supportive.

Amongst respondents who had come out publicly to society at large, there were experiences of mixed reactions. Consequently, there was an expression of feeling disappointed by the reactions of people to their coming out. Anxiety, surprise, the reluctance to accept, shaming, poking fun, being bullied and not being believed were highlighted as troubling reactions. These were related to have been received from parents, relatives, siblings and even friends.

There were mixed answers about why respondents did and did not visit therapists. Those who did not approach a therapist, cited reasons of the financial expenditure involved, of insurance not covering mental health treatment and because they did not feel the need because they had accepted themselves. Some were hesitant also because they thought their parents would feel they are seeking attention or because they were uncomfortable discussing this. Those who did, did so under family pressure to become 'normal' or because they were finding it difficult to come to terms with this reality.

## **In Conclusion:**

The judgment (Navtej Singh Johar & Ors. Vs. Union of India & Ors) decriminalising homosexuality was a victorious day for the LGBTQI community in India. It was a victorious day for India as a society and most importantly, as many have already articulated, a victorious day for love. Indeed, these victories must be applauded, but what we can celebrate now is the constitutional recognition of the fluidity of sexual orientation, for an individual's right to choose whether one wants to be a man, a woman, trans, intersex or plain non-binary and whom to love and have physical intimacy with.

But what does such a choice mean for our society? Already diverse, or superdiverse if Steven Vertovec (2007) were describing it, the recognition of sexual fluidity will add another layer of plurality to society. Amongst the axes of different identities at which people exercise agency, this will be one more. Society and forms of relationships will become multifarious and complex and structures of patriarchy are likely to deal a blow. Our understandings of rape, domestic violence, marriage and parenthood will require myriad transformations in order for us to become a truly inclusive social community.

The Supreme Court, in its judgement, recognizes the right of adult individuals to consensual 'unnatural' sex and in that recognizes the enforcement of the right to life of the LGBTQI community that was so long denied. But with this our work as a society has only begun. The right to life also promises the upholding of dignity and this will entail several more debates in the legislature, in court rooms, media houses and living rooms. As Justice Chandrachud succinctly articulated:

“The case is about an aspiration to realise constitutional rights. It is about a right which every human being has, to live with dignity. It is about enabling these citizens to realise the worth of equal citizenship. Above all, our decision will speak to the transformative power of the Constitution. For it is in the transformation of society that the Constitution seeks to assure the values of a just, humane and compassionate existence to all her citizens.”<sup>4</sup>

Let us as a society be open to remaining conscious that each debate, each discussion will become spaces of productive tension that will of course constitute and reconstitute our understandings of gender. And this will allow the generation of a discourse that will wake the foundations of a much awaited, although challenging, societal transition.

---

<sup>4</sup> This quote is at para 24 of the judgment in Writ Petition (Criminal) No 76 of 2016

## BIBLIOGRAPHY

- Kalra, Gurvinder. 2012. "Hijras: The Unique Transgender Culture of India." *International Journal of Culture and Mental Health* 5 (2): 121–26.  
<https://doi.org/10.1080/17542863.2011.570915>.
- Satpathy. 2016. "Lives and Stories of Transgender Population in India (Expert Resource Document on Sensitizing High Level Government Stakeholders on TG Human Rights Issues)." [https://www.researchgate.net/profile/Maheswar\\_Satpathy/publication/311614187\\_Lives\\_and\\_Stories\\_of\\_Transgender\\_Population\\_in\\_India\\_Expert\\_Resource\\_Document\\_on\\_Sensitizing\\_High\\_Level\\_Government\\_Stakeholders\\_on\\_TG\\_Human\\_Rights\\_Issues/links/5850e02c08ae4bc8993b7352/Lives-and-Stories-of-Transgender-Population-in-India-Expert-Resource-Document-on-Sensitizing-High-Level-Government-Stakeholders-on-TG-Human-Rights-Issues.pdf](https://www.researchgate.net/profile/Maheswar_Satpathy/publication/311614187_Lives_and_Stories_of_Transgender_Population_in_India_Expert_Resource_Document_on_Sensitizing_High_Level_Government_Stakeholders_on_TG_Human_Rights_Issues/links/5850e02c08ae4bc8993b7352/Lives-and-Stories-of-Transgender-Population-in-India-Expert-Resource-Document-on-Sensitizing-High-Level-Government-Stakeholders-on-TG-Human-Rights-Issues.pdf).
- Mal, Sibsanakar. 2015. "Let Us to Live: Social Exclusion of Hijra Community." *Asian Journal of Research in Social Sciences and Humanities* 5 (May): 108–17.  
<https://doi.org/10.5958/2249-7315.2015.00084.2>.
- Vertovec, Steven. 2007. "Super-Diversity and Its Implications." *Ethnic and Racial Studies* 30 (6): 1024–54. <https://doi.org/10.1080/01419870701599465>.

## Acknowledgements

SHB Social Foundation wishes to thank everyone who helped us in putting this effort together. Our thanks to Bobby Zachariah, who helped at the brainstorming stage to enable us to identify the issues to be studied. Numerous others, many who cannot be named because of the very nature of the survey. To all of you, a big THANKS. We hope that interventions such as these into middle class homes will help create conversations on these taboo topics and pave the way for a brighter future for all of us.