

*After being alive for a couple of decades and some more, I was finally in a position with enough autonomy and knowledge to access gender-affirming healthcare at the age of 20-something. The privileges I was born with and have accumulated along the way ensured that I was able to knock on the doors of some doctors, medical service providers and the like. But, I slowly realised that the struggle had just begun.*



*Maybe I'm getting ahead of myself. Let me start at the beginning.*

*To begin with, one has to decide if they will head to a government hospital or a private one, to get a gender dysphoria certificate. Going to a government hospital means subsidised services, but long queues and not the best patient service. Broadly speaking, if one can afford to, one would prefer going to a private hospital in India.*

*This is not a steadfast rule, however. The botched surgery and resultant institutional murder of trans-woman and public figure from Kerala, Anannyah Kumari Alex, goes to prove that private hospitals are not the safest bet either. She was a radio jockey and the first trans-person to file her nomination papers for the Kerala state elections.*

*Just a regular woman with a hint of something special... gone, nay, snatched from us too soon.*

*Her boyfriend died by suicide soon after. Is this what we have to offer trans people, and by extension their loved ones, in India? This when our health services are regularly advertised as an attraction for international, medical tourists. But, aren't we still failing to provide life-saving healthcare and dignity to our own (trans) citizens?*

*Make this make sense to me.*

*Given that hospitals operate according to their own convenience when it comes to trans medical care, we have whisper networks to warn each other of such hospitals. By that I mean, hospitals who look at you as a way to maximise their profits and don't care about your comfort at all.*

*Those who have access to other trans-people, legal aid and the language of transness, have access to some of this acquired knowledge. But those of us who aren't privileged enough, socio-economically and otherwise, often get left out of these tightly gatekept (sometimes for security and confidentiality reasons) circles.*



*I can fight back because I know I deserve to be treated equally, but for those of us who have no idea what that feels like, how are we supposed to ask for it? In theory, sure, we may have an inkling about equality. But what about practice? I am armed with all that the Internet has to offer and yet, I was helpless when I first visited a hospital.*

*The thing you have to do as soon as you make it to any hospital is to fill out all your biographical details on a form. The hospital uses these to maintain a record i.e., your medical history. The name I wrote was the name I gave myself and not the name that was given to me.*

## *Accessing Gender-Affirming Healthcare Services In India*

*Oct 2021*



*Little did I know that this would cost me dearly. Once the mental health department discovered that my documents still had my deadname, they forced me to run from pillar-to-post to change my chosen name back to my deadname.*



*I did this while having an out-of-body experience of sorts. I kept deadnaming myself, with a smile on my face, as though I wasn't talking about me. I was performing. It was a play. A theatre of the bizarre.*

*One thing is for sure, I definitely didn't feel like the hero of this story.*

*I wasn't calling the shots. My psychologist withheld her reports of our session, saying she wouldn't give it to me till I got my name changed. So, of course, I was going to do what was 'required of me' to move on to the next step of my physical transition.*

*What an adarsh balak! The whole experience was traumatic, to say the least.*

*Lots of trans people go by names which are different from the ones on their legal documents. But many-a-time, hospitals will insist on officially referring to you using your deadname. They treat their trans clients differently even though we pay the same money.*

*"If you prick us, do we not bleed? if you tickle us, do we not laugh? if you poison us, do we not die? And if you wrong us, shall we not [seek] revenge?"*

*Since we are supposedly seeking 'medico-legal' care, hospitals want to protect their interests by erring on the side of supposed caution, whatever that means. This is to be understood as them willing to err on the side of caution even if it means causing emotional distress to their trans clients.*

*I almost broke down in the hospital, but I didn't want to give them the satisfaction of seeing me cry. How am I supposed to feel safe in a space that fails to address me by my name? Doesn't that mean that they are refusing to see me for me?*

*By way of explanation, I was told that the reason the hospital has such a policy is not for people 'like me', but because they can't trust the "uneducated, trans-women" who come there... seeking help, might I add.*



*The audacity of cis-people to talk down to a trans person about other trans people! I was neither shocked nor saddened, given that I'm used to hearing ignoramuses spew such venom on the daily.*

*I need a healthcare system that centers my needs. Providing healthcare is not just limited to medical interventions such as testosterone injections and mandatory counselling sessions. It is about the all-important little things that go a long way in making us feel seen and heard.*

*If the hospitals are dismissive of our realities, how are we supposed to fight back? They cite formalities, but fail to see beyond the physical form of the person in front of them. The courage and conviction it takes to assert yourself as a trans person is inexplicable.*

*It is like swimming upstream when one doesn't know how to swim and while the tide is high.*

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