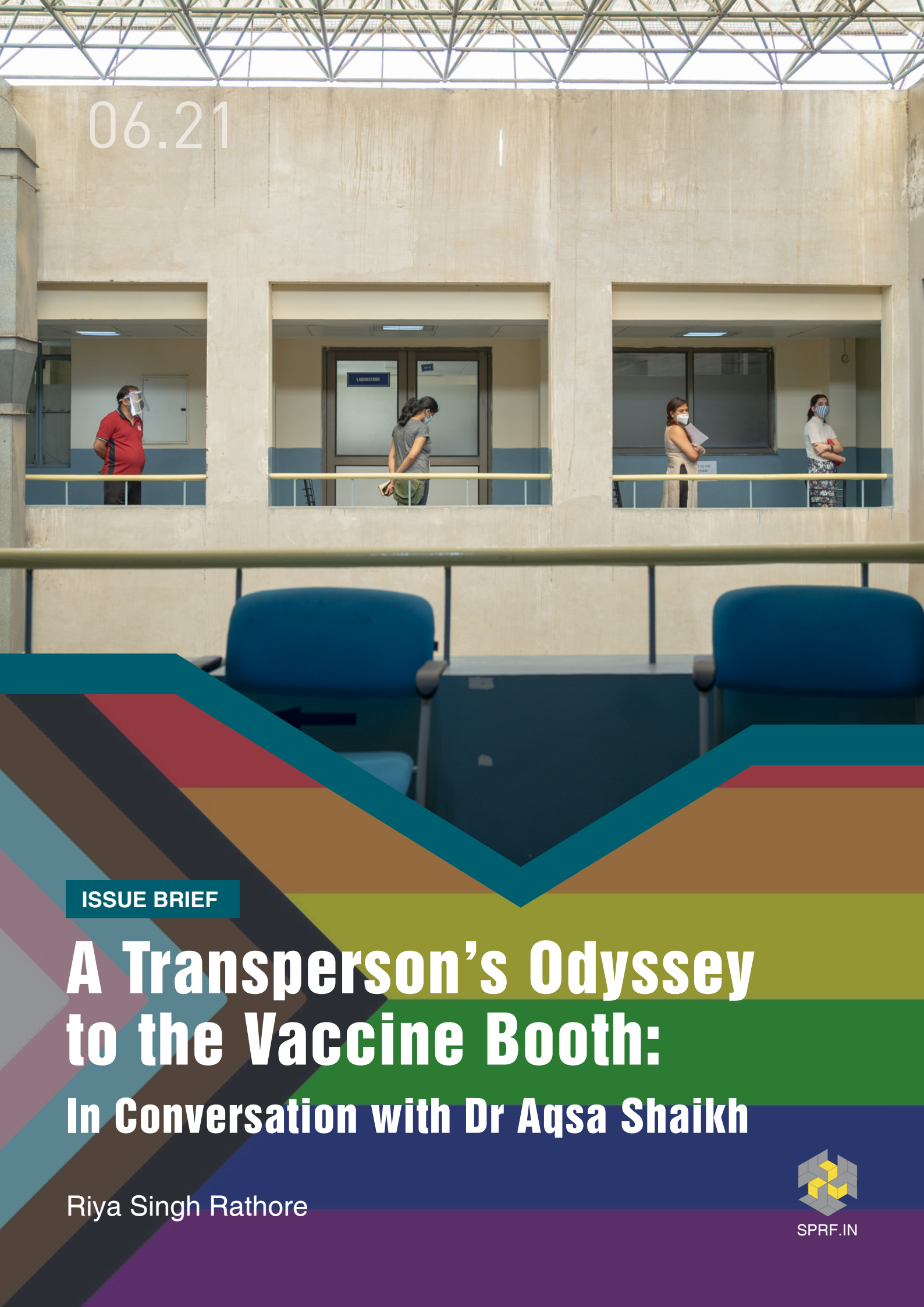


06.21



ISSUE BRIEF

# A Transperson's Odyssey to the Vaccine Booth: In Conversation with Dr Aqsa Shaikh

Riya Singh Rathore



SPRF.IN

# TABLE OF CONTENTS

1. ABSTRACT	03
2. AN ODYSSEY TO THE VACCINE BOOTH: TRANSGENDER EXPERIENCE OF INDIAN HEALTHCARE	04
3. EPIDEMIC WITHIN A PANDEMIC: PRIORITISING HIV-POSITIVE TRANSPERSONS' IMMUNISATION	12
4. UNDERSTANDING THE GOVERNMENT RESPONSE	13
5. POLICY RECOMMENDATIONS	14
6. CONCLUSION	16
7. BIBLIOGRAPHY	17

*If you have any suggestions, or would like to contribute, please write to us at [contact@sprf.in](mailto:contact@sprf.in)*

*© Social and Political Research Foundation™*

June 2021

ISSUE BRIEF

# A Transperson's Odyssey to the Vaccine Booth: In Conversation with Dr Aqsa Shaikh

Riya Singh Rathore

Photographs by Poshali Goel

**As of 18<sup>th</sup> June 2021, the National Co-WIN Statistics (2021) recorded 21 crore citizens vaccinated in total. Of these, trans persons form 38,080, which is only 0.017%.**

## ABSTRACT

The month of June, also known as international pride month, marks half a year since the start of India's vaccination programme. It is pertinent to place the world's largest vaccination drive under a queer lens to examine how inclusive the nation's vaccine policy is, particularly for trans persons.

As of 18th June 2021, the National Co-WIN Statistics (2021) recorded 21 crore citizens vaccinated in total. Of these, trans persons form 38,080, which is only 0.017%. Meaning that only 7.80% of the total

transgender population has gotten their doses. However, the percentage of non-cis Indians vaccinated is likely lesser than reflected here since the latest count of transgender persons dates a decade back to the 2011 Indian Census. Then, the census recorded 4,87,803 trans-individuals, a number which has undoubtedly increased since, thereby changing the count.

This paper attempts to understand a transperson's experience with the vaccination process by breaking down each step and identifying the obstacles therein. The barriers span from vaccine awareness to lack of documentation. Dr Aqsa Shaikh, an Associate Professor at Hamdard Institute of Medical Sciences and Research and India's first and only trans woman serving as a nodal officer at a vaccination centre, qualitatively enriched this research through her inputs during an interview with the author on 7 June 2021. Dr Shaikh holds an MD in Community Medicine and has worked on over 20+ research projects in Medical Education and Humanities, and is currently lending her expertise to Sangath and Thakur Foundation on TransCare Covid-19, a qualitative research seeking to document the healthcare experiences of transgender persons during the COVID-19 pandemic.



Dr. Aqsa Shaikh at Hamdard Institute of Medical Sciences and Research (HIMSR)

## AN ODYSSEY TO THE VACCINE BOOTH: TRANSGENDER EXPERIENCE OF INDIAN HEALTHCARE

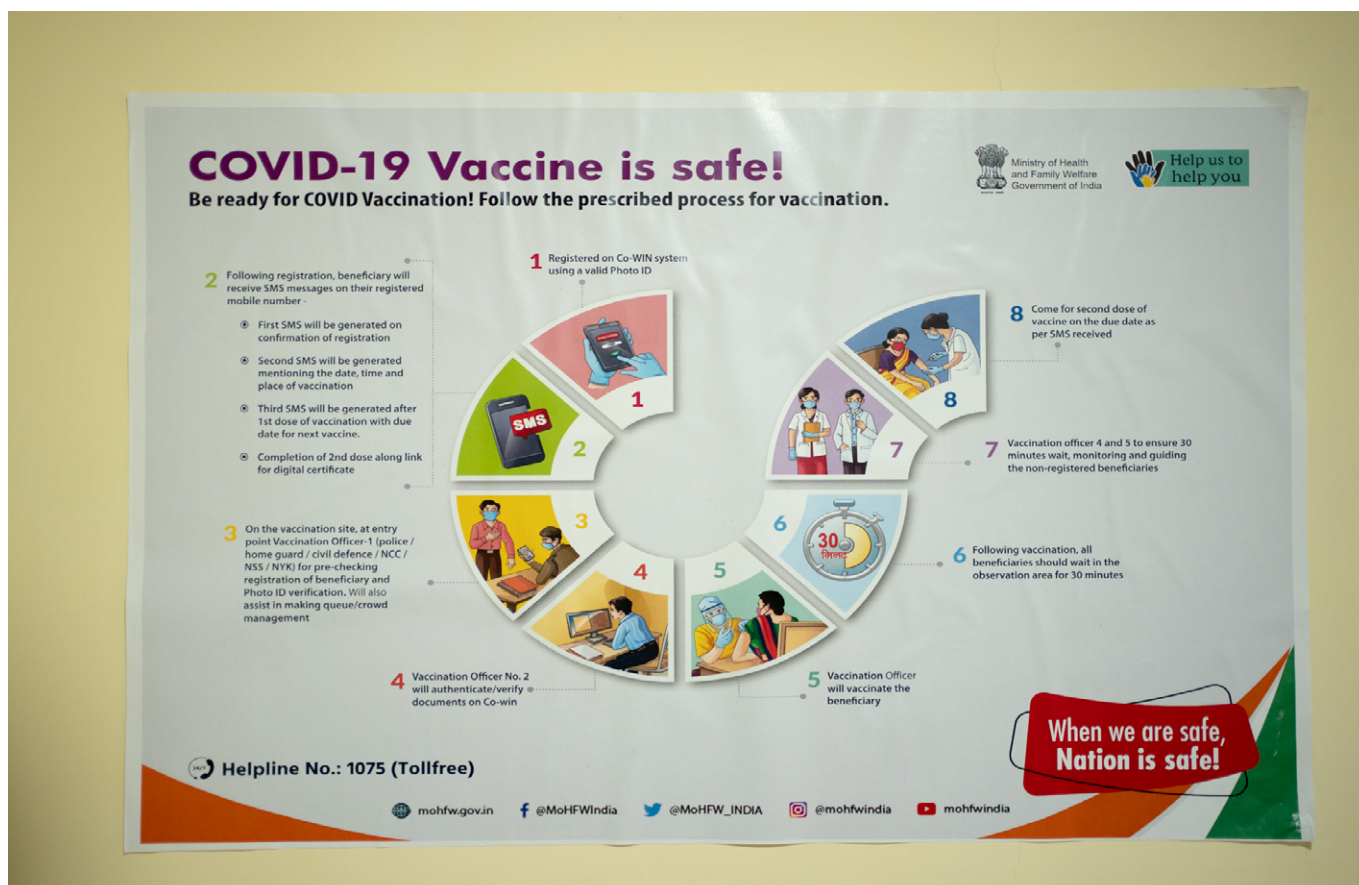


The CoWIN home page decrees three broad steps to register oneself. Register yourself using your mobile number, Aadhaar card, or any other government ID, choose vaccination location, and confirm your slot. Though it seems simple, immunisation of the world's second-largest population is bound to run into obstructions. Vaccine shortages, quick booking of online slots, glitches in the CoWIN system (Sawant 2021; Pullanoor 2021) are inconveniencing many beneficiaries, that too those on the right side of the digital divide.

Such obstructions are secondary battles for the transgender community. Their primary battle is getting vaccinated with dignity in a system that chalked them into the procedure as an afterthought. Currently, each step is replete with challenges, from self-registering through the CoWIN portal with a valid government identity card to accessing preferred washrooms at the vaccination centre.

### Step 1: Vaccine awareness and healthcare optimism

The start towards immunisation is the willingness to get injected in the first place. However, scepticism about healthcare is rampant amongst the trans-community, increasing their hesitancy to get vaccinated. Many experts from the community identify vaccine hesitancy as the tallest hurdle between an Indian trans person and their two doses (Dr Shaikh, personal communication, 7 June 2021; Choudhary 2021; Deol 2021).



A MoHFW poster at HIMSR centre illustrating the steps involved in the vaccination process

Historically, almost all trans individuals have horrific anecdotes from their experiences with the Indian healthcare system, justifying their suspicion of any medical system in general. While seeking medical aid, trans persons drudge through several layers of restrictions. Chakrapani (2013) outlines them as “personal and social barriers” in the form of financial, societal, internalised or family stigma; “community-level barriers” such as discrimination of HIV-positive trans persons within Kinnar communities; and finally “health care system barriers” such as hostile medical staff, treatment denials, inferior service, and insensitive registration procedures.

Another factor contributing to vaccine hesitancy within the trans community is the lack of trans-representation in medical trials. The lack of representation suggests that trans-bodies are treated as anomalies in the healthcare system, further sowing mistrust of the Covid-19 vaccine. The absence of clinical trials on the trans-community overlooks different variables such as hormone supplements, gender affirmative surgery, STIs or HIV-AIDS treatments that must be considered while developing a vaccine that can be used by everyone.

Dr Shaikh points out that even those educated on the vaccine’s benefits and side effects hesitate from taking it. She mentions that there is great worry, especially regarding Covishield doses, that vaccines may cause blood clots and interfere with their hormone supplements or cause thrombosis<sup>1</sup>. Since there are no studies

<sup>1</sup> Thrombosis is a condition where the patient’s blood clots inside their blood vessels. As a result, it blocks the blood flow in the affected area.

on how trans-bodies with pre-existing conditions react to Covid-19 doses, many choose to err on the side of caution. Alisha, a transwoman from Rajasthan, told Choudhary (2021): “Didi we already are keeping ourselves indoors and what if something happens after vaccination? Even normal people are not getting beds in hospitals, who will bother about saving an orphan kinnar?”

Dr Shaikh sheds light on why there is a gap in vaccine research for trans persons. She explains that since the trans community is marginalised it is considered a special group in clinical trials. So if someone wishes to do a clinical trial or conduct any research, they must specifically mention to the ethics board that they will be testing on trans persons and assure the board that they will take all the additional precautions. But unfortunately, COVID-19 clinical trials happened in such a hurry that no one thought to include transpersons. However, she is hopeful that towards the end of 2021 research around COVID-19 vaccines' effect on non-cis bodies will be available which may expel medical myths spreading amongst the queer community. Many studies, especially those being done in western countries, are focusing on conducting trials for special groups such as the trans-community to better understand side-effects.

## Step 2: Registration on CoWIN app or website

The CoWIN system has recently come under fire for perpetuating a digital divide during the vaccine registration. The gap only amplifies pre-existing problems within the transgender community. In addition to digital knowledge, lingual literacy rates within the trans community are abysmal. Government census data reveals that 54% of the community cannot read and write (Nagarajan 2014). The low literacy rate combined with inaccessibility to smartphones draws a line differentiating the digitally privileged and those who aren't. A representative from the community told Deol (2021), “our community does not know how to do online registration. They don't know where to go, what to do. Very few people from the trans community have smartphones.”

Even if a trans person has both technological and formal education, they run into the obstacle of having to correctly fill in their gender. Currently, the vaccine registration form doesn't offer a transgender category. Instead, the application crowds anyone who doesn't identify as cisgender into the 'others' category. Dhananjay Chauhan, a transgender activist, told Choudhary (2021), “I am not others. Why can't they write transgender instead of this 'others' and all? It is so sad.”

On the matter of othering, Dr Shaikh maintains that language matters. She cautions that language is a matter of life and death, a matter of who will get vaccinated and who will not, solely because of their gender. She also points out that all official government IDs from Aadhar Cards to IRCTC bookings mention the legal term 'Transgender Persons'. Therefore, it is unclear why the vaccination process uses the word 'others' instead.



**Register for Vaccination**

Your Photo ID will be verified at the time of your vaccination appointment. Please provide the details of the Photo Id you will carry for vaccination.

Photo ID Proof ▼

Photo ID Number

Name

Gender

Male  Female  Others

Year of Birth

**Add**

The CoWIN website's gender registration section directly disregards 2014 NALSA judgement which advises using the term "Transgender Persons".

Classifying gender categories as simply 'female, male, and other' goes against the 2014 NALSA judgement. The National Legal Services Authority v. Union Of India and Ors (2014) case asserts that the State must undertake all necessary measures to mention a person's self-affirmed gender correctly. This is particularly crucial in all contexts wherein gender-based identification or disaggregation is law or mandated policy (ibid). Dr Shaikh suggests that if the State cannot accurately account for an Indian citizen's gender and sex, they should remove the column altogether. After all, "the vaccine is gender neutral," she notes.

### Step 3: Travelling to the vaccination centre

Dr Shaikh comments that although the vaccination programme is not deliberately built to exclude the transgender community, inadvertently it does. Things that cisgender<sup>2</sup> Indians take for granted before they consider going for their jobs are significant concerns for trans persons. One such worry is around travelling to the vaccination centre and availing the facilities of the centre. "Many of them have had very transphobic and traumatic experiences. To expect them to wait for 3-4 hours, mingle with the general public from whom they often face abuse and stigma, use gender-separated washrooms, and still take the shot with dignity is unrealistic," Dr Shaikh emphasises.

<sup>2</sup> A person who identifies with the gender and sex assigned to them at birth.





Post vaccination waiting area at HIMSR vaccination centre, Delhi

### Step 4: Verifying government identifications to get vaccinated





Currently, the CoWIN app only accepts the following documents: Aadhaar card, driving license, PAN card, passport, pension passbook, NPR Smart Card, and Voter ID Card [EPIC].

A trans-Indian with a valid government document is a rarity. Only 2% of trans individuals live with their parents (National Human Rights Commission and Kerala Development Society [NHRC and KDS] 2017). Most, especially those facing domestic stigma and abuse, flee their parent's house at an early age and therefore don't possess any birth certificates or address proofs (Press Trust of India 2018).

Limited education, lack of awareness, and no social exposure to the social, political, and legal system result in trans persons not owning any identity cards such as voter card, ration card, or even bank accounts (NHRC and KDS 2017). This is a significant problem that prevents trans persons from voting, opening bank accounts, availing government schemes, accessing basic facilities, and now getting vaccinated.

According to the NHRC and KDS (2017) field survey in UP and Delhi, 15.4% of trans persons in India have voter cards, 16.6% Aadhar card, 1.6% PAN card, and 2.1% driving licence in their own name (Table 1 below).

Table 1: Possession of Identity Cards of Transgender (TG) Indians

Category of ID	TG in Delhi Number of Responses	TG in Delhi (%)	TG in UP Number of Responses	TG in UP (%)	TG Total (Number)	TG Total (%)
Election Voter ID Card in the name of TG	67	14.88	72	16	139	15.4
Election Voter ID Card in the old name	14	3.11	8	1.78	22	2.4
Aadhar Card in the name of TG	72	16	77	17.11	149	16.6
Aadhar Card in the old name	2	0.34	9	2	11	1.2
PAN Card in the name of TG	9	2	5	1.11	14	1.6
PAN card in the old name	0	0	0	0	0	0
Driving License in the name of TG	5	1.11	14	3.11	19	2.1
Driving License in the old name	3	0.66	5	1.11	8	0.9

Source: National Human Rights Commission and Kerala Development Society (2017:36)Gol

Generally, those who don't possess documents prefer not to attempt getting one. Most identification cards simply do not accept one's self-affirmed gender identity without a certificate of identity from the District Magistrate or a revised certificate from a Medical Superintendent post-surgery. Press Trust of India (2019) reports that the "insensitivity of the officials and the herculean paperwork can double or triple the pain of transgender people if not heighten their anxiety, social humiliation and dysphoria. Thus many prefer not to undergo this ordeal."

The Transgender Persons (Protection of Rights) Act (2019) further complicates the matter of attaining government identification. Though the Act states that transgender persons have the right to self identify, it also mandates proving one's gender identity to a District Magistrate. Furthermore, to change one's gender on their identity card, a trans person must provide proof of undergoing sex reassignment surgery, better known as gender affirmative surgery, to the District Magistrate. The Act places a trans person's entire legal existence in a District Magistrate's hands.

However, not all trans-individuals wish to undergo gender affirmative surgery. Many who want to go through the process, wish to do so according to their own timeline while many cannot afford the surgery. A majority of the Kinnar community live on insufficient funds, relying on begging, sex work, or *badhais*<sup>3</sup>

<sup>3</sup> Badhai is the act of receiving payment from hosts in exchange for blessings during auspicious occasions like weddings, blessing newborns, or dancing in ceremonies. This is a profession for transgender persons since they are believed to possess spiritual powers that can wards off any evil.

to get by.. Expecting those from the lower income communities to undergo expensive surgeries to access basic welfare services, such as getting vaccinated, is a tall order.

Even if trans persons brave the above detailed hurdles to the vaccination booth, prevailing social stigma diminishes their chances at getting vaccinated successfully. In many cities, such as Hyderabad, “members of the community were even discriminated against and denied vaccination” (Special Correspondent 2021).

## **EPIDEMIC WITHIN A PANDEMIC: PRIORITISING HIV-POSITIVE TRANSPERSONS’ IMMUNISATION**

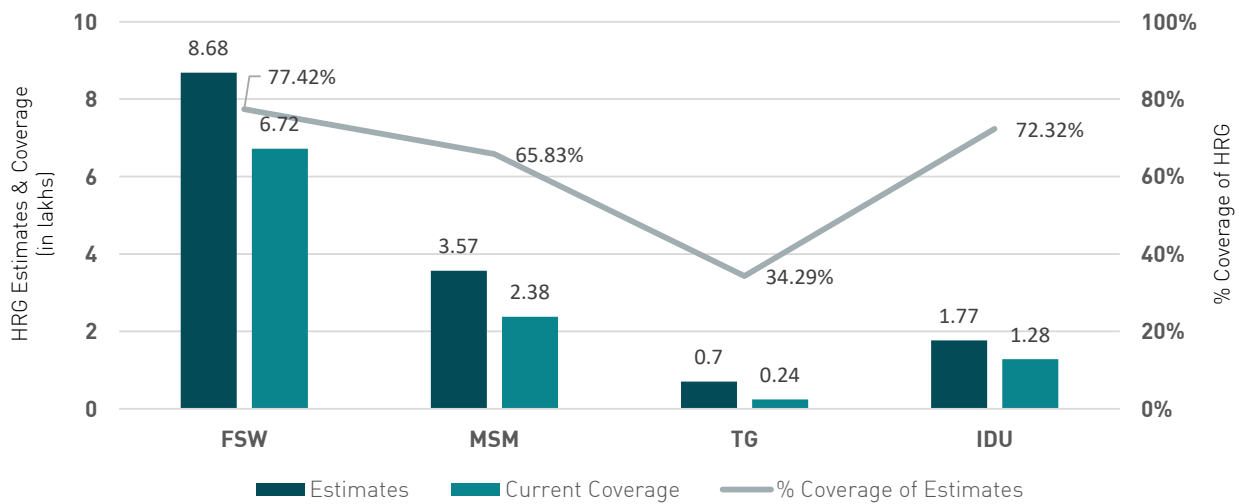
With the second wave receding, it is time to revamp the process of immunising those most vulnerable to the COVID-19 virus. Currently, the government’s revised guidelines prioritise health care workers, front line workers, citizens above 45 and those whose second dose is due. A case must be made for the prioritisation of the transgender community’s immunisation at large.

The Ministry of Health and Family Welfare [MoHFW] recognises the transgender community as a high-risk group, indicating the vaccine drive’s vital need to increase its inclusion of trans individuals. The prevalence of HIV (Human Immunodeficiency Viruses) alone is a significant concern for transgender Indians. Through weakening the immune system, HIV makes an individual more vulnerable to other viruses allowing deadly infections to thrive in one’s body for longer periods than average.

As noted earlier, there isn’t sufficient medical research detailing COVID-19’s impact on persons with HIV-AIDS. However, Guenot (2021) reports that recently a woman with advanced HIV took 216 days, nearly seven months, to test negative. During this period, the COVID-19 virus had mutated an upward of 30 times while in her system.

Currently, trans persons record the highest HIV infection rate among all high-risk groups in India, with an 8.82%, while the general population records a 0.40% rate (National AIDS Control Organisation [NACO] 2014: 9). To put this into context, there are 22 HIV-positive transpersons for every cisgender HIV-positive individual. Some STI clinics report these numbers to be even higher with numbers as significant as 44-45% (Chakrapani 2013), raising the ratio to 1 HIV-positive cisgender individual to 1100 transpersons tested positive. Despite this, trans persons receive the least preventive target intervention coverage in all high-risk groups with an abysmal 0.24% while female sex workers receive 6.72% (Figure 1 below).

All aforementioned factors combined erect numerous barriers between transgender persons and them getting their vaccines.

**Figure 1: Coverage of Core High Risk Groups during 2015-16<sup>4</sup>**

Source: Department of Health and Family Welfare (2016: 338)

## UNDERSTANDING THE GOVERNMENT RESPONSE

On 20th May, the Assistant Director of the Ministry of Social Justice and Empowerment penned a letter to the Principal Secretaries in all states and union territories regarding the vaccination of trans individuals. In it, Dixit (2021) recommends making the vaccination drive a more transgender-friendly process. This acknowledgement from the government arrives as a much-needed respite, by finally addressing that transpersons may be strongly discouraged to get themselves vaccinated due to social stigma.

Furthermore, MoHFW released a standard operating procedure for vaccinating those without government ID cards. Although the SOP doesn't mention transgender persons, its definition: "eligible persons, aged 18 years or more, and not having any of the seven prescribed individual Photo ID Cards" (MoHFW 2021) covers individuals from the transgender community.

The document from MoHFW (2021) advocates for forming a district task force that will identify communities needing vaccinations but not in possession of documents. Officers will collect this data at the state level to estimate the special dispensation doses required. The responsibility of preparing a vaccination schedule and mobilising its beneficiaries lies with the district nodal officers. The Key Facilitators would verify the identities of the beneficiaries. Finally, the District Immunisation Officers would coordinate doses for the special identified groups such as the trans community. The document also anticipates receiving special help from the CoWIN system (ibid).

Though these directives from the central government were much awaited, it's the state-level efforts that are truly impacting trans-Indian lives. For instance, the

<sup>4</sup> Acronyms in the report are as follows: Female Sex Workers (FSW), Men who have Sex with Men (MSM), Transgenders/Hijras, Injecting Drug Users (IDU).

All Assam Transgender Association and Assam's State Directorate of Health Services organised vaccinations at a Guwahati shelter home where transgender individuals felt safe to arrive (Special Correspondent 2021). Nearly 300 trans persons came from Assam's Kamrup (Metropolitan) district. One of them expressed: "I thought we would be left out of the vaccination programme [...] It is nice to be counted as one of millions of Indians worthy of being vaccinated" (Ibid).

In another instance, Haryana also succeeded in giving around 190 transgender persons their shot. The government set up a special post in a government school for transgender persons and sex workers in Dundaheera, Haryana. The data also reports registration from 750 more members of the community (Behl 2021).

## POLICY RECOMMENDATIONS

The community's exclusion from the world's largest vaccination drive boils down to a nexus of long-term and intersectional factors combined with socio-economic disadvantages. Therefore, this paper offers only immediate policy recommendations<sup>5</sup> which may assist the government in curbing COVID-19 infections within the trans community.



"If you see, there were special awareness drives for trans persons, showing trans characters on hoardings and billboards exercising their right to vote. But in the vaccination advertisement, you don't see any transgender person, differently-abled individual, people of diverse religions. You only see cisgendered males and females." To overcome vaccine hesitancy in the community, Dr Shaikh points out, strategic communication is needed from the government targeting the vulnerable groups (Dr Shaikh, personal communication, 7 June 2021).

### 1. Vaccine Awareness/Registration Programmes

Dr Shaikh states that vaccine awareness programmes with trans person representation could be the government's most concrete step towards immunising the community. Such healthcare interventions would save countless Indian lives by immunising those who are most vulnerable amongst us. The Ministry of Social Justice and Empowerment shares this sentiment, advising the states to run a vaccine awareness drive in vernacular languages while explicitly targeting the transgender community to ensure they get their shots and avail all services without hindrance (Dixit 2021).

<sup>5</sup> Please see the National Human Rights Commission (n.d.) advisory for a more comprehensive recommendation list.

Any trans person's representation in the vaccination awareness would be very effective in battling vaccine hesitancy. An illustration of this arrived when Azizur Khan, a 25-year-old transwoman, told Special Correspondent (2021) that she was in two minds about getting her dose. However, seeing Swati Bidhan Baruah, the first transgender judge in north-east India, advocate for vaccinations convinced Azizur to get her Covaxin shot.

## **2. Home to Home Vaccination Drives**

Recently the government came out with a notification for near-to-home vaccination campaigns for early and differently-abled persons. A similar drive for trans persons would prove immensely beneficial, completely overcoming barriers of travelling to the centre, availing gendered facilities, social stigma, inconvenient hours, and so forth. Dr Shaikh anticipates that this would drastically increase immunisation in the community as it would allow the community to get its doses within the safety, privacy, and security of its home.

## **3. Special Officers Responsible for Transgender Community**

The government's initiative to appoint District Immunisation Officers [DIOs] and Nodal Officers to oversee the vaccination of special groups, such as transgender persons, is an important step with the right intent. Although, this might be a setback given how much work both officers already have, especially as officers in charge of the world's largest vaccine drive. For instance, a single DIO in North West Delhi district has to manage 36,56,539 citizens. Not to mention this is a conservative census estimate from a decade ago. "60% of that is the eligible population for Covid, and for that, you have one DIO. Out of a hundred things they have to do, do you think they will prioritise persons from the trans-community? Practical implementation is very difficult." Dr Aqsa Shaikh points out. Therefore, appointing officers solely there to advocate for the speedy vaccination of trans persons would be a helpful policy measure.

## **4. Separate and Safe Vaccination Centres**

Dixit (2021) from the Ministry of Social Justice and Empowerment recommended a vaccine awareness drive that specifically targets the transgender community, since the lack of vaccine awareness and social stigma is impacting trans individuals getting their shots. The letter also suggests making all vaccination centres transgender friendly and following Assam's and Haryana's example in opening separate vaccination camps for the community. Dr Shaikh told Basheer (2021), "We need to acknowledge that access to healthcare itself is not easy for many trans people. For instance, for someone from the Hijra community, the very act of entering a hospital, going past security, the reception and visiting the vaccination centre and using the washrooms in the facility will be a daunting task."

## CONCLUSION

For every Indian trans person overcoming vaccine hesitancy, subduing trauma from the healthcare system, registering on the portal with a valid government ID that reflects their gender, arriving at the centre without knowing the facilities available, coexisting with the general public, getting their dose, and repeating the process a second time around, is a trial by fire. Furthermore, it's only a trial for those who are privileged enough to navigate the process in the first place. Although the possibilities of trans persons getting vaccinated alongside the general public are dismally low, the state's growing interest in the community's vaccination alongside civil society's grassroots efforts are a hopeful sign. Dr Shaikh quips on a more uplifting note, "If we survived the British, we can survive anything. We are a resilient community."



## BIBLIOGRAPHY

Basheer, Intifada P. (2021). "Meet The Only Trans-Woman Heading A Covid Vaccine Centre In India." *Outlook India*, 6 March 2021. Accessed 5 June 2021, <https://www.outlookindia.com/website/story/india-news-the-pandemic-had-a-disastrous-impact-on-the-trans-community-dr-aqsa-shaikh/376293>.

Behl, Abhishek. (2021). "200 transgenders, sex workers vaccinated at special camp in Gurugram." *The Hindustan Times*, 31 May 2021. Accessed 8 June 2021, <https://www.hindustantimes.com/cities/gurugram-news/200-transgenders-sex-workers-vaccinated-at-special-camp-in-ggm-101622395242435.html>.

Chakrapani, Venkatesan. (2013). *Health Care System Barriers Faced by Indian Transgender People In Accessing HIV/STI Prevention and Treatment, & What Can Be Done?*. Bangkok, Thailand: Centre for Sexuality and Health Research and Policy (C-SHaRP).

Choudhary, Preeti. (2021). "Less than 4% vaccinated – Transgender Indians have been 'othered' by vaccines and forms." *The Print*, 16 May 2021. Accessed 4 June 2021, <https://theprint.in/opinion/less-than-4-vaccinated-transgender-indians-have-been-othered-by-vaccines-and-forms/659091/>.

Deol, Taran. (2021). "India's trans community is getting left out of the Covid-19 vaccine drive. This is why." *The Print*, 18 May 2021. Accessed 5 June 2021, <https://theprint.in/india/indias-trans-community-is-getting-left-out-of-the-covid-19-vaccine-drive-this-is-why/660440/>.

Department of Health and Family Welfare. (2016). *ANNUAL REPORT 2015-16*. New Delhi, India: Ministry of Health and Family Welfare. Accessed 4 June 2021, <http://naco.gov.in/sites/default/files/Annual%20Report%202015-16.pdf>.

Dixit, Shantanu. (2021). *Vaccination of Transgender Persons-reg*. New Delhi, India: Ministry of Social Justice and Empowerment. Accessed 8 June 2021, [http://socialjustice.nic.in/writereaddata/UploadFile/Vaccination\\_Transgender.pdf](http://socialjustice.nic.in/writereaddata/UploadFile/Vaccination_Transgender.pdf).

Guenot, Marianne. (2021). "A woman with HIV had the coronavirus for 216 days. The virus mutated at least 30 times inside her." *Business Insider*, 4 June 2021. Accessed 4 June 2021, <https://www.businessinsider.in/science/news/a-woman-with-hiv-had-the-coronavirus-for-216-days-the-virus-mutated-at-least-30-times-inside-her-/articleshow/83236008.cms>.

Ministry of Health and Family Welfare. (2021). *SOPs on COVID-19 Vaccination of Persons without prescribed Identity Cards through CoWIN*. New Delhi, India: Ministry of Health and Family Welfare. Accessed 8 June 2021, <https://www.mohfw.gov.in/pdf/SOPforCOVID19VaccinationofPersonswithoutPrescribedIdentityCards.pdf>.

Nagarajan, Rema. (2014). "First count of third gender in census: 4.9 lakh". *The Times of India*, 30 May 2014. Accessed 5 June 2021, <https://timesofindia.indiatimes.com/india/first-count-of-third-gender-in-census-4-9-lakh/articleshow/35741613.cms>.

National AIDS Control Organisation. (2014). *State HIV Epidemic Fact Sheets*. New Delhi, India: Department of AID Control, Ministry of Health and Family Welfare. Accessed 4 June 2021, [http://naco.gov.in/sites/default/files/STATE\\_HIV\\_EPIDEMIC\\_FACT\\_SHEET.pdf](http://naco.gov.in/sites/default/files/STATE_HIV_EPIDEMIC_FACT_SHEET.pdf).

National Co-WIN Statistics. (2021). "National Co-Win Statistics Dashboard." Accessed 18 June 2021, <https://dashboard.cowin.gov.in/>.

National Human Rights Commission. (n.d.). *Human Rights Advisory for the Protection of the rights of LGBTQI+ community in Context of the Covid-19 Pandemic*. New Delhi, India: National Human Rights Commission. Accessed 10 June 2021, [https://nhrc.nic.in/sites/default/files/Advisory\\_for\\_the\\_Protection\\_of\\_the\\_Rights\\_of\\_LGBTQI%2B\\_Community\\_0.pdf](https://nhrc.nic.in/sites/default/files/Advisory_for_the_Protection_of_the_Rights_of_LGBTQI%2B_Community_0.pdf).

National Human Rights Commission and Kerala Development Society. (2017). *Study on Human Rights of Transgender as Third Gender*. New Delhi, India: National Human Rights Commission. Accessed 4 June 2021, [https://nhrc.nic.in/sites/default/files/Study\\_HR\\_transgender\\_03082018.pdf](https://nhrc.nic.in/sites/default/files/Study_HR_transgender_03082018.pdf).

National Legal Services Authority v. Union Of India and Ors, 2014, AIR 2014 SC 1863.

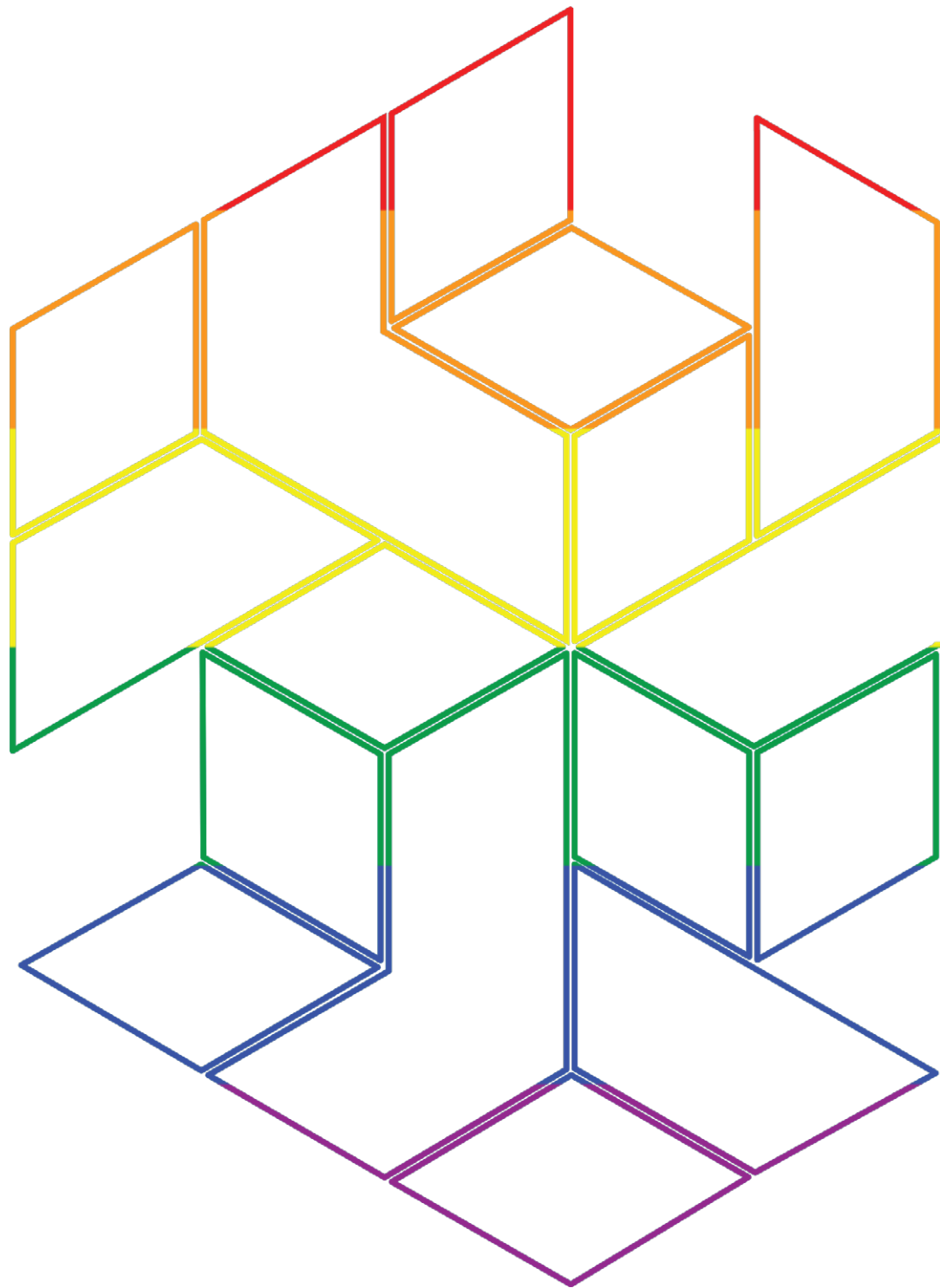
Press Trust of India. (2019). "Others' voters increase by 15,306 in 5 yrs; activists blame paperwork, insensitive officials." *The Economic Times*, 17 March 2019. Accessed 4 June 2019, <https://economictimes.indiatimes.com/news/elections/lok-sabha/india/others-voters-increase-by-15306-in-5-yrs-activists-blame-paperwork-insensitive-officials/articleshow/68449930.cms>.

Pullanoor, Harish. (2021). "CoWIN Crashed, Complain Many As Vaccine Registration For 18+ Begins". *NDTV*, 28 April 2021. Accessed 17 June 2021, <https://www.ndtv.com/india-news/cowin-servers-down-complain-many-as-registration-for-above-18-vaccination-begins-2423705>.

Sawant, Nimish. (2021). "GLITCHES IN COWIN APP SLOW DOWN COVID-19 VACCINATION DRIVE, FIXED FOR NOW". *Firstpost*, 21 January 2021. Accessed 17 June 2021, <https://www.firstpost.com/tech/news-analysis/glitches-in-cowin-app-slow-down-covid-19-vaccination-drive-fixed-for-now-9223881.html>.

Special Correspondent. (2021). "Assam starts vaccinating transgender persons against COVID-19." *The Hindu*, 14 May 2021 . Accessed 4 June 2021, <https://www.thehindu.com/news/national/other-states/assam-starts-vaccinating-transgenders/article34560990.ece>.

The Transgender Persons (Protection of Rights) Act, 2019, act no. 14.



SPRF.IN