

# Technical Report

## Mapping and Size Estimation of Hijras and other Transgender Populations in 17 States of India

*A study conducted under the aegis of NIE-ICMR, UNDP and NACO*

### *Executive Summary*



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# Executive Summary

## **1. Introduction:**

Hijras and other transgender populations have been recognized by National AIDS Control Organisation (NACO) as important core populations for whom appropriate HIV intervention programs need to be developed. In NACP-III strategic plan and in the draft report of the NACP-IV working group on Hijra/TG populations, NACO has clearly articulated the need to ‘saturate’ the coverage of ‘key populations’ by scaling up prevention interventions in all the states in India. For effective planning and strategy building for up-scaling targeted interventions to the core group of Hijras/TG populations, it is necessary to have evidence-informed planning (NACO Annual Report, 2012-2013).

## **2. Research Objectives:**

The mapping and size estimation study aimed to create an unanimous and specific database of locations and population size of the TG/Hijra communities in 17 states of India, selected on the basis of key parameters of HIV prevalence and the presence of targeted interventions. NACO and UNDP played the lead at this stage of formulation of strategies and selection of states.

The specific research objectives are:

- a) To map the areas in which Hijras and other (male-to-female) transgender people reside and/or where they can be potentially reached.
- b) To estimate the size and population of Hijras and other (male-to-female) transgender people, in all 17 states.
- c) To understand the dynamics (sexual and social networks and HIV-related vulnerability) faced by Hijras and other male-to-female transgender populations in these 17 states.

## **3. Mapping and Size Estimation Methodology:**

A participatory approach was used for the mapping purpose. In this approach, information in regard to the sites in a particular geographical area was taken from both community and non-community key informants. Information was collected from only those key informants with adequate knowledge / experience of being associated with the Hijra/ TG communities. All sites in a particular location were first listed and then validated through site visits. This methodology of

mapping allowed for consensus among informants may or may not be necessary as site visits helped in deciding active sites.

Delphi consensus method was adopted for the size estimation of the Hijra/TG communities. It involved identifying local experts, which in this case were NGO/CBO staff and other key informants. This was followed by independent and anonymous estimates by a minimum of 2 local informants (mainly community key informants) whose estimates were revised and a consensus was reached.

The methodology for mapping and size estimation was finalized in consultation with NACO, UNDP, NIE-ICMR, and members of National Advisory Committee constituted for this study.

#### **4. Data Collection:**

Representatives from the hijra/TG communities were involved at the planning and execution level of data collection. Community coordinators were appointed by NIE, ICMR in each state and community liaison persons were appointed by IMRB in the field during the entire tenure of data collection to make it community-supported process.

A mapping team for data collection comprised of:

- *Field team coordinator*
- *Community Liaison*
- *Data collector*

A total of 204 teams of three members each (Field coordinator, Data Collector and Community liaison) were deployed across the 17 states.

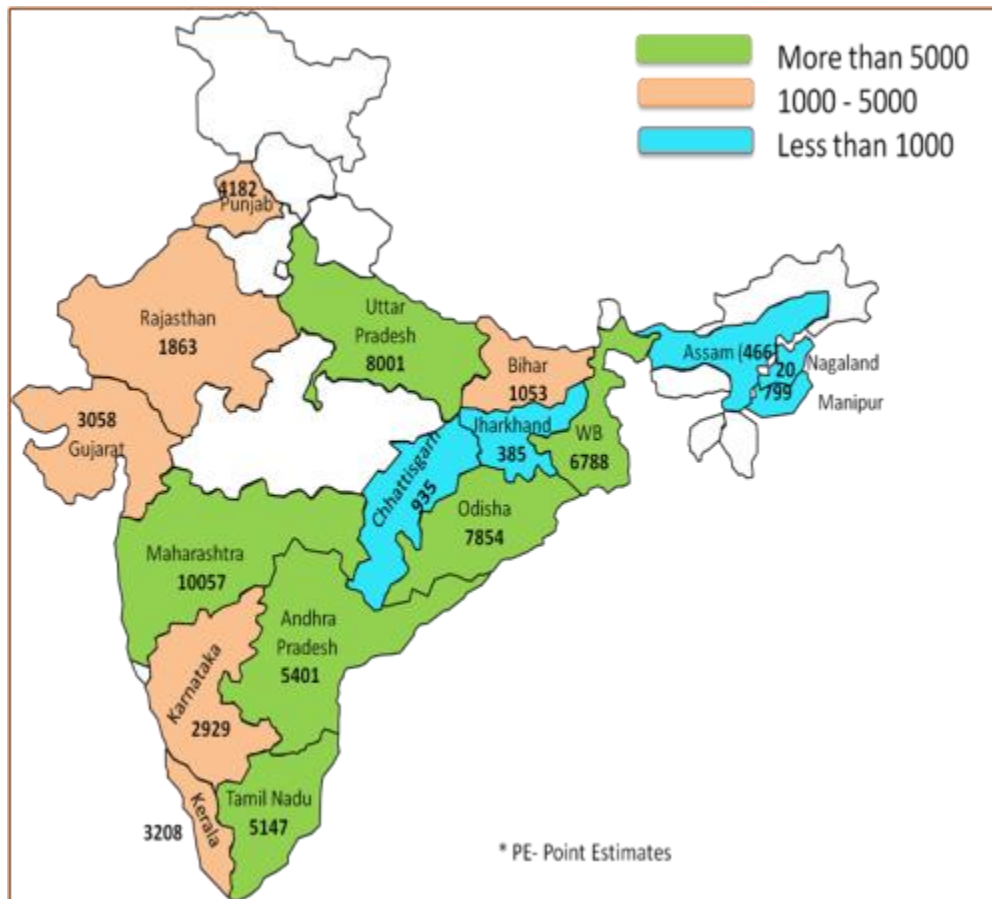
## 5. Ethical Considerations:

- Written Informed consent was obtained before using any kind of tools (interviews, FGDs, etc.) to gather information for the study. Every person participating in this study was explained about the study so that he/she could make an informed decision about whether to participate or not.
- Confidentiality and anonymity have been maintained about all individuals spoken to or interacted with during the study. The information shared by such individuals was used for research purposes only, maintaining anonymity.
- The data collectors were trained to be non-judgmental and unbiased while dealing with the TG/Hijra communities as the nature of the study involved sensitive issues like sex work engagement and sexual behaviors.

## 6. Summary of key findings:

- A total of 5821 TG sites were mapped in the 17 study states. A total of 1664 (around 28.6%) were located in the rural areas and 4157 (around 71.4%) were located in the urban areas.
- Top five states which reported the highest number of sites were Uttar Pradesh (825), West Bengal (752), Odisha (696), Tamil Nadu (649) and Maharashtra (586). These five states combinedly had about 60% of all the sites that were mapped in the 17 states.
- Of all the states, only Odisha reported to have more rural sites than urban. In the state, of the total of 696 sites that were mapped, 391 sites were located in the rural areas (around 56.2%) and the rest 305 sites were located in the urban areas (43.8%).
- Close to 45% of all sites across the study states were public sites and only around 1.4% sites were Brothels/hamams. The presence of brothels/hamams of hijras/TG people was reported high in Karnataka (14.8%).
- The total hijra/TG population (point estimate) across the 17 states was 62137, with the lower level of the estimate at 53280 and the upper level of estimate at 74297. Around 21% of the overall TG population was mapped in the rural areas and the rest (79%) in the urban areas.

- The top five states with highest number of TG/Hijras were Maharashtra (10057), Uttar Pradesh (8001), Odisha (7854), West Bengal (6788) and Andhra Pradesh (5401). Together, these five states comprised of a total of 38101 TGs/Hijras across the 17 states - 61% of the estimated total TG population.
- A pictorial representation of the size estimates of Hijra/TG populations in the study states is shown below:



STATES	TG/Hijras Identified		Size Estimate		
	Districts Covered	Sites Mapped	LL	UL	PE
17	466	5821	53280	74297	62137

\*LL: Lower Limit UL: Upper Limit PE: Point Estimate

- Close to 47% (29097) of all TG population was reported to be Gharana-based across the 17 states and the rest (53%) were reported to be Non-Gharana based.

- Among the 17 states, the highest proportion of TG/hijras associated with Gharana was reported in Maharashtra (around 77%, N=7762)<sup>1</sup> and the lowest proportion was in Bihar (around 13%, N=138).
- Overall, around 62% of the TG population was reported to be involved in sex work. The top five states that reported highest proportions of TG/Hijras involved in sex work include Uttar Pradesh (84%), Rajasthan (73%), Karnataka (72%), Jharkhand and Chhattisgarh (66%)<sup>2</sup>. Overall, around 72% of all Gharana-based TG/Hijras was reported to be involved in sex work.

## **7. Inferences and Implications:**

- State level variations in the population size of Hijra/TG communities are evident. States such as Uttar Pradesh, West Bengal, Odisha and Maharashtra share the majority of estimated Hijra/TG populations..
- Among the 17 states, 41 cities/towns have at least 200 hijra/TG people. Many of these clusters are also congregated in few large states where the population is high for the community. If we consider 200 as the minimum number of TG people needed to start an exclusive HIV intervention, then the data reflects that at least 41 exclusive targeted interventions are needed across these 17 states. Also, considering the fact that the population of Hijra/TG is a dispersed group, locations with less than 200 TGs could be included under existing TIs for key populations as composite targeted interventions.
- Across the 17 states covered in the current mapping and size estimation exercise, a total of 466 districts were covered. Of these, 29 districts have a point estimate of at least 400 TG people, thus at least 29 potential districts/domains can be 'IBBS sites' for TG people.

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<sup>1</sup> The estimate is second to Nagaland, where 80% of the TGs were Gharana-based but the overall number of TGs is 20 only.

<sup>2</sup> This estimate excludes Nagaland, where the overall number of TGs is only 20

- Close to 3/5<sup>th</sup> of the Hijra/TG population is involved in sex-work. Thus, while setting targets for coverage, one target can be to cover 100% of all the hijras/TG people who engage in sex work.