

## Empowerment of transgender people through intervention and food skill training

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### Abstract

Gender is a term that is used when referring to social, cultural, and psychological characteristics that affect and pertain to stereotypes, norms, traits, and roles of men and women "Gender diversity exists in every culture and geographic context. Transgender people are people whose gender identity is different from the gender they were thought to be at birth. "Trans" is often used as a shorthand for transgender. Transgender is an umbrella term for people whose gender identity or gender expression differs from the sex they were designed at birth.

**Aim and Objectives:** To empower the transgender through intervention and food processing training. To collect the socio-demographic profile of the transgender population. To provide the entrepreneurship skill training on food processing. To provide the intervention on reproductive health.

**Materials and Methods:** In this study, 100 transgender persons were selected by a random method. Variables including age, anthropometric factors, food habits were recorded for each case. The socio-demographic variables, anthropometric, clinical assessment, dietary pattern, and associated factors of transgender are evaluated using an appropriate questionnaire. Statistical comparison of means among different groups was performed using SPSS version 17.0. Before and after without control design was adopted for this study, such as design a single test group or area is selected and the dependent variable is measured before the introduction of the treatment. The treatment is then introduced and the dependent variable is measured again after the treatment has been introduced. And provide skill training on food processing-malted foods, Vegetable preservation, and processing, Bakery products development.

**Results:** There were significant differences in anthropometric factors including height, weight, and BMI among the literacy levels ( $p < 0.01$ ). And acquired knowledge on food processing skills, trained to prepare various food products, empowered to start self-employment, Improvement of transgender population living standard.

**Keywords:** Transgender; Nutritional profile; Food processing; Skill training

### 1. Introduction

Gender is a term that is used when referring to social, cultural, and psychological characteristics that affect and pertain to stereotypes, norms, traits, and roles of men and women. The term transgender can also be distinguished from intersex, a term that describes people born with physical sex characteristics "that do not fit typical binary notions of male or female bodies". The degree to which individuals feel genuine, authentic, and comfortable within their external appearance and accept their genuine identity has been called transgender congruence. Many transgender people experience gender dysphoria, and some seek medical treatments such as hormone replacement therapy, sex reassignment surgery, or psychotherapy.

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In ancient Tamil culture, transgender persons were considered as human beings with special powers. A particular group of transgender- shiv sakthis were dancers in Hindu temples and thought to be the part of Lord Shiva himself. During the Mughal Empire, they were employed as royal servants and bodyguards for the kings and were found to be close confidants of the emperors. Transgenders are a part of the society and they have an equal right to everything in the world that is available to all other persons

Transgender is an umbrella term for people whose gender identity or gender expression differs from the sex they were designed at birth. Transgender people may or may not decide to alter their bodies hormonally and or surgically. Transgender persons face many unique challenges in life including stigma, discrimination, harassment, and violence. In April 2014, the Supreme Court of India declared transgender to be a 'third gender' in Indian law.

### **1.1. Population overview of transgender**

Transgender people are those whose assigned sex at birth differs from their current gender identity or expression, and they represent a diverse population across regions and within countries worldwide. Although accurate data about the size of the transgender population globally are absent and numbers depend on the definition of transgender used, estimates suggest a prevalence of 0.3–0.5% for people who identify as transgender.

Indian Census has never recognized the third gender i.e. Transgender while collecting census data for years. But in 2011, data of Transgenders were collected with details related to their employment, Literacy, and Caste. In India, the total population of transgender is around 4.88 Lakh as per the 2011 census. The data of Transgender has been cubbed inside "Males" in the primary data released by the Census Department. For educational purposes, separate data of Transgender has been carved out from that.

Transgender health issues are beginning to come to the attention of many health practitioners and researchers. The desire to improve the treatment experienced by transgender individuals led the American Public Health Association to pass a resolution on transgender health issues during its 1999 annual meeting. Gender variations have been documented for many years. Generally, female-to-male gender transgression has been described as resulting from the inequality found between women and men and women's desire for status and resources, whereas male-to-female transgression has been explained as resulting from the need to express an inner desire or has been eroticized.

### **1.2. Global health burden and needs of transgender populations: a review**

Transgender people are a diverse population affected by a range of negative health indicators across high-income, middle-income, and low-income settings. Studies consistently document a high prevalence of adverse health outcomes in this population, including HIV and other sexually transmitted infections, mental health distress, and substance use and abuse. However, many other health areas remain understudied, population-based representative samples and longitudinal studies are few, and routine surveillance efforts for transgender population health are scarce. The absence of survey items with which to identify transgender respondents in general surveys often restricts the availability of data with which to estimate the magnitude of health inequities and characterize the population-level health of transgender people globally. Despite the limitations, sufficient data are highlighting the unique biological, behavioral, social, and structural contextual factors surrounding health risks and resiliencies for transgender people.

### **1.3. Need and scope of the study**

It is imperative to note the participation of transgender in economic activities as self-employed individuals. The transgender population usually involve in sexual working and other unrecognized sectors. The economic need, isolation from family and community, induces the transgender people to push an unfavorable selection of occupation. The economic deprivation and ignorance lead to move towards begging and other societal issues. Transgender people are unable to complete their academics due to poor families as well as support.

The transgender people require social reorganization through their economic enrichment. The economic independence will acquire through education and occupational status. The government has implemented various programs to improve the economic status. Hence the economic level of the transgender community is poor, the self-employment through food process skill training will facilitate to provide employability as well as empower their social status. Economic enrichment reduces the poverty in transgender people and reduces the rate of people involved in sex workers. It will reduce sexually transmitted diseases and empower their living standards.

*Objective:*

To empower the transgender through intervention and food processing training

- Specific objectives
  - To collect the socio-demographic profile of the transgender population
  - To provide the entrepreneurship skill training on food processing
  - To provide the intervention on reproductive health

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## 2. Materials and methods

As per the 2011 census, there are 4, 90,000 transgender people in India, and about 21000 are in Tamilnadu. For the first time in India, the transgender library has been opened as part of the transgender research center in Vishwanathapuram, Madurai. Programs for alternate sex children should be announced in the National children's policy and transgender subject should be included in the school education system, said Priya Babu, director of the transgender resource center in Madurai.

### 2.1. Sample selection

Transgender population (100 Nos).

**Data analysis:** Appropriate quantitative and qualitative analysis will be applied appropriately

### 2.2. Workflow of the proposed work

#### 2.2.1. Phase I: Selection of the area and the samples

- Selection of area
- Selection of subjects
- Socio-demographic profile

#### 2.2.2. Phase II provides skill training on food processing

- Millet processing
- Malted foods
- Fruit preservation and processing
- Vegetable preservation and processing
- Bakery products development

#### 2.2.3. Phase III Intervention on reproductive health

- Guide reproductive health
- Sexually transmitted diseases
- Foods for better health

#### 2.2.4. Anticipated Outcomes and Proposed Outputs from the Research

- Acquired knowledge of food processing skills
- Trained to prepare various food products
- Empowered to start self-employment
- Improvement of the transgender population living standard.

#### 2.2.5. Tools used for the study

A pre-designed interview schedule was used as a tool for the present study, the interview schedule appended in the appendix. The interview schedule consisted of the following sections,

- General information
- Anthropometric Profile
- Clinical Profile
- Dietary Pattern

- Education and economic status
- Health status

### 2.3. General information

The general information included details on the age of the respondent Name, Age, Sex, Area of residence, Religion, Educational status, types of family, Size of family, and Family monthly income.

- The areas of residency show, majority 42 percent were stayed rural, 35 percent were residing in semi urban area, and 23 percent were stayed in urban.
- The among the respondents majority 90 percent were Hindus, 5 percent were Muslim, 5 percent were Christian.
- Based on the educational qualification, , 2 percent were graduates, 33 percent of the respondents were completed education up to high school level, 48 percent were finished up to middle school level, 15 percent of were completed only primary level and rest of them were illiterates.
- The data from the majority of 93 percent were isolated, 5 percent were staying with their family, and rest of them were staying with others. From the table it is found that among the respondents 95 percent were from nuclear families, 5 percent were from joint families.
- 80 percent were from small families comprising of 2-4 members, 17 percent were from medium sized families comprising of 5-7 members and 3 percent were from large sized families comprising of above 8 members.
- The 3 percent were from families having an income of below 5,000, 10 percent were from families having an income of Rs.5, 000-Rs.10, 000, 53 percent were from families earning an income ranges between Rs.10, 000-Rs.20,000 , 33 percent were from earning an income range Rs. 20,000- Rs.30,000 and rest of them were from families having an income of above Rs.30,000.

### 2.4. Anthropometrical profile

The second part of interview schedule intended to collect the Anthropometrical data on the respondents such as Height, Weight, BMI, and BMI range of respondent it depending the respondent has obesity or not.

#### 2.4.1. Height

Height is measured of nutritional status of community hence the height was measured using a stadiometer which was well mounted. A stadiometer is a piece of medical equipment used for measuring.

#### 2.4.2. Body weight

Any accurate portable weighing machine was used for the study to take the weight of the transgender people. The subject was asked to stand straight on the balance and the weight was recorded in kg with an accuracy of 0.01kg.

#### 2.4.3. Clinical profile

The fourth part of the interview schedule was to study clinical profile of the respondents it was observing from the help of nurse. Clinical status is the most essential part of all nutritional surveys to get information of the signs and symptoms of dietary deficiency

- The above table show the Clinical Assessment of the transgender, 13% of them pale face and 87% have normal face. 83 % with dryness 17% sows cracks lips. 1% holds cavity teeth and the rest shows normal. 77 % with hair fall and 23% with normal hair. .Among the skin type 1% shows dry skin and 7 % with pale in appearance 6% with wrinkle and the rest of them possess normal .pale lower eyelid is among 57% and 43% remains normal.

#### 2.4.4. Dietary pattern

The fifth part of the interview schedule demanded data on the dietary pattern on the respondent such as type of diet, the meal pattern per day, skip the meals, reason for skipping meals, nutrient intake by 24- hours recall method.

- It shows that, the majorities (99) of the respondents were non-vegetarian and rest of them were vegetarian.
- The 2 percent of the respondents were taking 2 meals/ day, 97percent of the respondents were taking 3 meals/day, and rest of the respondents were followed 4 meals / day respectively.
- The results found that, the majority 95% of the respondents were skipping meals and rest of them were not skipping the meals.

- The majority (95%) of the respondents were skipped their meals due to lack of appetite, 3% did so for lack of time, 1% skipped their meals due to lack of interest and rest of them did so for over eating.

#### 2.4.5. Education and economical status

The selected respondent economic and educational status was collected such as School dropout, job problems, instalment facility, loan facility, untouchability, rent house problems, safety.

- The 3 percent dropout their studies due to criticize and the majority 96 percent due to sexual harassment.
- The 100 percent job problems due to sexual harassment, and 90 percent due to criticize.
- The majority 97 percent of common problems due to bathroom facility, 4 percent due to instalment facility and rest of them due to loan facility.
- The untouchability in temple is 15 percent and in festival is 13 percent.
- The rent house problems is due to neighbours is majority (100) percent, 90 percent is due to high cost and boy cot
- The safety in work is 97 percent, in travel is 18 percent and in education is 1 percent.

#### 2.4.6. Health status

The selected respondent economic and educational status was collected such as integrated counselling and testing center for HIV, Raleigh methadone treatment center.

- The health check up by RMTC and ICTC is 100 percent.
- The health problems due to thyroid is 2 percent, 1 percent due to diabetes, 99 percent due to stress and 2 percent due to sexual transmitter issue.

### 2.5. Statistical analysis of the study

#### 2.5.1. Analysis of data

The data collected was processed and analysed in accordance with the outline laid down for the purpose at the time at developing the research plan. The collected data were classified, tabulated and analysed in order to facilitate comparison to pin point the significant features of data.

The data was analysed using the following method

- Arithmetic mean
- Chi-square test
- T-test

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### 3. Conclusion

In our study transgender people were mainly focused to develop knowledge on entrepreneurship and food skills training. Among 100% of transgender people around 99% of people having stress. Due to the ignorance of parents, teachers and society their educational status become inadequate.

They drop their school because most of the transgender adults are suffered from sexual harassments and criticise. Now a days in the society the transgender people are mainly suffered from bathroom facility. In our study we conduct the intervention and food skill training so they occurred adequate knowledge on entrepreneurship and various food processing methods.

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### Compliance with ethical standards

#### *Disclosure of conflict of interest*

No conflict of interest to be disclosed.

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