

Sri Lanka: Invisible lives: Transgender communities during the economic crisis

Monday 13 June 2022, by [ARIYARATHNE Dr. Kaushalya](#) (Date first published: 12 June 2022).

It is a genuine question whether there is enough pride left to celebrate, but the LGBTIQ+ Pride Month has begun in the midst of a severe economic crisis in Sri Lanka.

Gendered impacts of the crisis

Even though popular narratives of the economic crisis articulate that it has treated the poor and the lower middle classes in a similar manner, the situation has had starkly different effects on women and other gender/sexual minorities.

The impacts manifest in various yet intersectional ways among women and transgender communities. For instance, for women, especially trans women who bear the primary caregiving responsibility of their families, the lack of access to food security and nutrition is exacerbated under the economic crisis, particularly in families with children, the elderly, and the disabled, who need special care and assistance.

Often the responsibility of feeding the children and the elderly, sharing food, collecting subsidies, cooking essentials, and even home gardening has been imposed on women during the crisis. Due to the reality that a woman/mother is the family member who often consumes the least in instances of inadequate food supply, it will inevitably cause physical and mental health problems for them in the long run.

In addition, due to the fact that women's health issues including sexual and reproductive health, family planning, personal hygiene, and menstrual sanitation are considered as lower priority during a crisis, the adverse effects may not only be short-term but also long-lasting.

Problems are not new

Meanwhile, one of the main issues that transgender community members have faced since the advent of Covid-19 has been the loss of livelihoods. Many of these community members have migrated to Colombo for work and to escape the social stigma faced in their villages. They often live in boarding houses and rented rooms in urban, lower middle class settings, and therefore, the 'stay at home' slogan during the pandemic was not feasible for them.

Daily wage earners lost their income for several months and were not eligible to receive the Government-provided Rs. 5,000, while some transgender persons faced practical difficulties of receiving said Government allowance due to the lack of NICs. In addition, it was also reported that HIV-positive transgender persons who were undergoing hormonal treatments had problems of access to healthcare due to the low priority given to such treatments in Government hospitals.

Loss of income and medical health services

These unresolved issues since the pandemic have worsened with the current economic crisis.

National Transgender Network Executive Director Bhoomi Harendran stated: "There are multiple problems that transgender persons have been suffering due to the current crisis. Due to the fact that they are mainly engaged in the informal economic sector, several people have lost their means of income/jobs. Some of them have been chased away from their boarding places. Also, many of them cannot afford the high prices of hormones that they have to purchase from pharmacies every month. We are struggling to support them, since there is no proper institutional mechanism in place to provide them hormones and other medical requirements."

Currently, female hormones cost approximately Rs. 3,000-5,000 and male hormones can be purchased at around Rs. 1,500-2,000. While female hormones can be found at a higher cost, male hormones are difficult to find in the market, as one transgender person revealed. Imports have been limited to essential medicines, and hormones are not considered as an essential drug that should be readily available. Even when hormones are available in the market, those with limited incomes have to prioritise food and rent over hormones.

National Transgender Network Executive Director Thenu Ranketh said: "Gender reassignment surgeries are currently not performed at Government hospitals due to shortages of medicine and other facilities. Several trans persons who take hormones have had to limit their hormone intake due to high prices. The psychological harm they undergo during the crisis is not measurable. We used to refer trans persons to psychologists or counsellors, but our organisations do not have sufficient funds to provide this service anymore. Even our organisations run on minimum funds and sometimes we have to terminate employment contracts of our own employees."

Jaffna Sangam Coordinator Sathurshan Kannan stated: "The primary issue faced by Jaffna transgender communities in this crisis is lack of income. Their main sources of income, which included dancing at social and private events, cooking, cleaning, and elderly care work, have come to a standstill in the Jaffna Peninsula due to the impact of the economic crisis. We try to provide meals for the LGBTIQ+ community members with the greatest need, but we too are struggling with money and therefore our efforts are ad hoc."

In Colombo and its suburbs, there is a high number of transgender persons engaged in informal sector economic activities, such as commercial sex work, cooking, cleaning, and elderly care work. Since these informal sectors are highly affected by the crisis, hundreds of transgender persons have lost their source of income. "My client base is mainly from drivers and vendors in the market. They have no money in their pockets these days, so how can they pay for our services?" a transgender sex worker from Colombo questioned.

Elaborating on the psychological issues they face, another transgender person from Kandy lamented: "My sex reassignment surgery was postponed. I do not know when it will take place again. I have no proper income, therefore even travelling to the hospital for my clinic is challenging for me. I have no family to support me or friends in my neighbourhood who listen to me - several times I thought of suicide. How long will I have to live like this?"

These conversations provide a hint of how the Government, civil society organisations, and citizens can best celebrate this Pride Month.

Aragalaya and trans lives

The writer was unable to interview an adequate number of transgender persons to obtain their views on the Aragalaya, and therefore, will not try to generalise the views. However, while one activist

stated that GotaGoGama, the main site of the Aragalya, was a place where trans people could also voice their concerns, another activist rejected the idea. "The chants and slogans at GotaGoGama do not connect with the realities of our everyday lives," she asserted.

Meanwhile, another transgender activist from Colombo shared: "We should own this space by making our voices louder. Ultimately, we are asking for a system change, where inequality and discrimination against transgender persons will not take place anymore."

However, the writer has also observed that a transgender woman has written about the harassment she faced at GotaGoGama in one of her social media posts.

Trans issues: Secondary issues?

The depth of the economic crisis has exacerbated the problems faced by all marginalised groups in society. However, the problems faced by transgender communities, sex workers, and other severely marginalised groups in the lower middle class are considered secondary to other 'major issues'.

As a doctor who works at a Government hospital stated: "Even patients with heart attacks or cancers don't have enough medicine in hospitals, therefore, transgender people will have to 'tolerate' their issues until things are settled." This may not be the view of all doctors; however, we should not forget that hormones and other treatments that are considered 'secondary' or 'insignificant' are issues of equal importance in the lives of transgender persons.

In terms of the Government's support mechanisms, it is necessary to mention that transgender persons, especially sex workers, are not included in any of the proposed suggestions for support. They are excluded from the already available Samurdhi or other social security systems and considered 'non-residents' in Grama Niladhari lists.

Some transgender persons recalled the unpleasant experience they had faced when they went to request the Rs. 5,000 during the pandemic, noting that they were therefore not willing to request any official support from the Grama Niladharis in their areas. Some had been ridiculed for being sex workers, while others were excluded for not having a permanent living space (with a rent agreement) in the village. The only support mechanism they trusted and were willing to request was NGO support, even though these were not regular nor adequate enough to cover their expenses.

Thus, the crisis and its gendered impacts have provided an opportunity for us to critically rethink and evaluate the validity of the patriarchal cis-heteronormative social institutions that have continuously failed to include and protect marginalised communities in the system of governance.

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