



“PANDEMIC OR NOT, WE HAVE THE RIGHT TO LIVE”

THE URGENT NEED TO ADDRESS STRUCTURAL BARRIERS UNDERMINING TRANSGENDER PEOPLE’S RIGHTS ACROSS ASIA AND THE PACIFIC ISLANDS

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TERMINOLOGY

Transgender and gender diverse people across Asia and the Pacific Islands have a range of indigenous identities, and a rich social and cultural history in their countries and regional contexts. This diversity, which spans faith, language and culture, is also reflected in the use of various culturally specific terms, including self-identification as a third gender.¹

This document uses the umbrella term “transgender” or “trans” as encompassing of the wide range of identities represented within these terms. This is purely for accessibility to the widest possible audience and should not be seen as a negation of those culturally relevant terms or identities.²

Additional terms used in this report are described below for ease of understanding. Amnesty International is aware that many of these terms are evolving and endeavours to keep learning from transgender and gender diverse colleagues and partners across the world about the most appropriate language, and how to provide allyship through its research, campaign, advocacy, lobbying and communications work.

¹ The Asia Pacific Transgender Network (APTN) has described some of the indigenous terms for transgender and gender diverse people as follows: “For people assigned male at birth who identify as female or as a third gender, some terms include: hijra, mangalamukhi, kinnar, aravani, and thirunangai (India), khwaja sira (Pakistan), meti (Nepal), katoey (Thailand), waria (Indonesia), mak nyah (Malaysia), transpinay (the Philippines), kwaa-sing-bit (Hong Kong), fa’afafine (Samoa, American Samoa and Tokelau), fakaleiti/leiti (Tonga), fakafifine (Niue), akava’ine (Cook Islands), mahu (Tahiti and Hawaii), vakasalewalewa (Fiji), and Palopa (Papua New Guinea). For people assigned female at birth and who identify as male, some terms include: thirunambi (India), kua xing nan (Malaysia), trans laki-laki (Indonesia), transpinoy (the Philippines), bandhu (Bangladesh)”, “APTN Fact sheets: Being trans in Asia and the Pacific”, 2016, <https://lgbt.wisc.edu/wp-content/uploads/sites/175/2017/10/BeingTransinAP.pdf>

² Health Policy Project, Asia Pacific Transgender Network (APTN), United Nations Development Programme (UNDP), “Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific”, 2015, www.undp.org/asia-pacific/publications/blueprint-provision-comprehensive-care-trans-people-and-trans-communities-asia-and-pacific.

GLOSSARY



Cisgender people are individuals whose gender expression and/or gender identity accords with conventional expectations based on the sex they were assigned at birth. In broad terms, “cisgender” is the opposite of “transgender”.



Gender identity is a very personal and subjective matter. It refers to each person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth, including the personal sense of the body (which may involve, if freely chosen, and modification of bodily appearance or function by medical, surgical or other means).



Gender expression refers to the means by which individuals express themselves, including but not limited to their dress, make-up, speech, mannerisms.



Gender-affirming intervention refers to a range of medical or non-medical steps that a transgender person may wish to undergo. These steps may include hormone therapy, sex or gender confirmation surgery including facial surgery, chest surgery, genital or gonad surgery, and can include sterilization. In some states, certain forms of gender-affirming medical care may be compulsory for legal gender recognition. Not all transgender people feel a need to undergo gender-affirming treatment.



Gender-affirming surgeries are not a requirement for gender affirmation, but some people choose to undergo one or more surgical procedures. This may include operations such as those aimed at modifying genital characteristics and/or top (chest) surgeries to accord with a person’s gender identity. In some cases, these surgeries result in irreversible sterilization as they entail the removal of reproductive organs.



Lesbian, gay, bisexual, transgender and intersex persons (LGBTI) is a term which encompasses the wide variety of terms currently used to address and refer to people with diverse sexual orientation, gender identity, gender expression or sex characteristics. This report uses this term unless a different term is used or preferred by partner organizations referred to in a particular instance. Terms including LGBT, LGBTI, LGBTIQ, LGBTIQ+ and LGBT+ are therefore used interchangeably throughout the text.



Non-binary is a term used to describe a person who does not identify exclusively as a man or a woman. Non-binary people may identify as being both a man and a woman, somewhere in between, or as falling completely outside these categories. While many also identify as transgender, not all non-binary people do. Non-binary can also be used as an umbrella term encompassing identities such as agender, bigender, genderqueer, gender diverse or gender-fluid.



Sex characteristics refer to chromosomal, gonadal and anatomical features of a person, such as their chromosomes, hormones, reproductive organs, genitalia and secondary sex characteristics (body hair, etc).



Sexual orientation refers to each person's capacity for profound emotional, affectionate and sexual attraction to, and intimate and sexual relations with, individuals of a different gender or the same gender or more than one gender.



Transgender or trans people are individuals whose gender expression and/or gender identity differs from conventional expectations based on the physical sex they were assigned at birth. A transgender woman is a woman who was assigned the “male” sex at birth but identifies as a woman; a transgender man is a man who was assigned the “female” sex at birth but identifies as a man. Not all transgender individuals identify as a man or a woman – the term “transgender” includes members of third genders, as well as individuals who identify as more than one gender or no gender at all. Transgender individuals may or may not choose to undergo some, or all, possible forms of gender-affirming interventions.

1. EXECUTIVE SUMMARY

“We have been oppressed not just because of Covid, but for a very long time. Our suffering has now become visible and has shown everyone how vulnerable the system is”.

A transgender woman in Bangladesh in an interview with Amnesty International, April 2021

The Covid-19 pandemic caused widespread, and often deeply damaging disruptions to the health, economic and social lives of millions of people across the world. But these impacts were not experienced equally. Transgender people – who were already subject to deep-rooted and persistent structural inequalities - found their pre-existing marginalisation exacerbated by the pandemic and related public health measures and suffered disproportionately.

The impact of the pandemic and of governments’ responses to it have laid bare the multiple risks and entrenched systems of discrimination, violence, and marginalization that transgender people have to navigate in their everyday lives. Ever present barriers to access to healthcare, employment, education, housing, essential goods and services, and social support are experienced against a backdrop of lack of legal gender recognition, stigma, discrimination, violence and criminalization. These structures underpinned the enhanced precarity experienced by transgender people during the pandemic, gave rise to significant disparities in their access to Covid-19 healthcare services and relief measures, and exacerbated psychological impacts.

In many countries in Asia and the Pacific Islands, transgender people were not able to access the relief measures made available by governments during the pandemic. In fact, a 2022 multi-country assessment of the extent to which pandemic related relief measures responded to the needs of marginalised groups highlights as a key finding that the extent to which social protection systems were able to include marginalised groups during the pandemic was strongly linked to how inclusive these were prior to it.³

The pandemic also heightened the systemic inequities and structural discrimination faced by transgender individuals with intersecting identities - for example, transgender sex-workers, transgender women of colour, those with disabilities, transgender refugees and migrants, and those living in poverty.⁴

Alongside confronting the Covid-19 global health emergency, in 2021 transgender people around the world also lived through what was termed the “deadliest year on record for transgender and gender diverse people”.⁵ The continued use of violence by state and non-state actors⁶ and the broad application of criminal laws to arrest, intimidate and harass transgender people has been documented by Amnesty International and others in numerous countries globally as a key feature of the longstanding marginalization and discrimination that transgender people face.⁷ The 2022 Trans Murder Monitoring Report revealed that between 1 October 2021 and 30 September 2022, 327 transgender and gender diverse people, including 40 people in Asia, were reported to have been killed.⁸ These numbers stood at 375

³ Roelen, K. and Carter, B., ‘Social Assistance and Covid-19: Reaching the Furthest Behind First?’, 2020, Institute of Development Studies (IDS), Brighton, <https://www.ids.ac.uk/publications/social-assistance-and-covid-19-reaching-the-furthest-behind-first/>.

⁴ Burgess, C. M. et al., “Impact of the COVID-19 pandemic on transgender and gender diverse health care”, September 2021, The Lancet Diabetes & Endocrinology, Volume 9, Issue 11, [www.thelancet.com/journals/landia/article/PIIS2213-8587\(21\)00266-7/fulltext#bib3](http://www.thelancet.com/journals/landia/article/PIIS2213-8587(21)00266-7/fulltext#bib3), pp.729-731. (Data related to the USA).

⁵ Transrespect versus Transphobia Worldwide (TVT), Trans Day of Remembrance 2021, 11 November 2021, <https://transrespect.org/en/tmm-update-tdor-2021/>.

⁶ For instance, see Perez-Brumer, A. and Silva-Santisteban, A., “COVID-19 Policies can Perpetuate Violence Against Transgender Communities: Insights from Peru”, 2020, AIDS and Behavior, Volume 24, pp. 2477-2479, link.springer.com/article/10.1007/s10461-020-02889-z#citeas; Radusky, P. D. et al., “Mental Health, substance use, experiences of violence, and access to health care among transgender and non-binary people during the COVID-19 lockdown in Argentina”, July 2021, International Journal of Transgender Health, pp. 1-14, www.tandfonline.com/doi/full/10.1080/26895269.2021.1943593.

⁷ See, for example, Amnesty International, LGBTI Rights, <https://www.amnesty.org/en/what-we-do/discrimination/lgbti-rights/>

⁸ Transrespect versus Transphobia Worldwide (TVT), Trans Day of Remembrance 2022, 8 November 2022, <https://transrespect.org/en/tmm-update-tdor-2022/>

killed globally, with 44 in Asia, in the previous year.⁹ The actual numbers – both regionally and globally – are likely much higher as cases often go unreported, are under investigated or are not recorded correctly at the national level.¹⁰

The research for this report includes a literature review, including reports by UN agencies, Non-Government Organizations (NGOs) and LGBTI organizations. Interviews with 35 transgender people in Bangladesh, India, Japan, Mainland China, Pakistan, Philippines, Singapore, South Korea, Sri Lanka, Taiwan, and Tonga were also undertaken remotely by Amnesty International researchers between March 2020 and August 2022. A survey was also undertaken with transgender people in Southeast Asia in August 2022.

Amnesty International recognises that there is significant contextual diversity across the countries in the region with regards to legal systems; social, cultural and religious norms; levels of stigma against transgender people; transgender peoples' access to services and channels for redress and accountability; and their engagement in decision- and policy-making processes. The examples of transgender people's experiences in different countries in the region provided in this report aim to illustrate key differences and commonalities.

“They said the virus was the great equalizer but in fact it – as well as the response to it – has greatly exacerbated existing inequalities. Systems that were already often inaccessible for trans people became almost impossible to access.”

A transgender man in the Philippines in an interview with Amnesty International, March 2021

As was the case for many marginalised groups globally during the pandemic, this report demonstrates consistent trends across the Asia and Pacific Islands relating to the loss of income, food insecurity, decreased access to general healthcare and gender-affirming treatment, housing instability, and domestic violence experienced by transgender people, particularly during periods of lockdowns. The impacts for transgender people, who are subject to high levels of stigma, violence in the public and private sphere, exclusion from health services and social isolation, were far-reaching and severe.

The report documents, for example, that transgender people in the region work predominantly in the informal sector, and as a result are often excluded from the job security, labour protections and welfare benefits associated with the formal sector.¹¹ During the pandemic, the precarity of their employment status and reliance on occupations that require personal contact meant that transgender people were disproportionately impacted by the movement restrictions imposed by governments to curb the spread of infection.

In many countries, official identity documents (ID) were required to access relief measures, Covid-19 vaccines, and even public spaces to buy essential goods during times of lockdown. Often unable to produce an ID or one that reflected their gender expression, transgender people found themselves largely excluded from measures introduced to mitigate the effects of loss of income, and vulnerable to harassment and abuse when they tried to do so. Already affected by long-standing poverty linked to discrimination and stigma, this had the effect of pushing transgender people even further into poverty, often losing their homes, and access to essential services.

Existing challenges in accessing general and gender-affirming healthcare in most countries across Asia and the Pacific Islands were also exacerbated during the pandemic as governments reprioritised healthcare in favour of Covid-19 related services. Amnesty International's research found that past and ongoing experiences of discriminatory treatment also resulted in a reluctance among many transgender people to seek healthcare services.

⁹ Transrespect versus Transphobia Worldwide (TVT), Trans Day of Remembrance 2021, 11 November 2021, (previously cited).

¹⁰ For example, in Samoa the death of fa'afafine Jeanine Tuivaki in June 2016 was reported by the coroner as a suicide and a photo of her body was published in the local newspaper. Family members maintained that she had injuries at the time of her death consistent with being beaten (see: Samoa Observer, "Coroner rules in 'Jeanine's' Inquest", 15 September 2016, <https://www.samoobserver.ws/category/samoa/16030#:~:text=The%20Coroner%20in%20the%20Inquest,was%20the%20cause%20of%20death.&text=The%20death%20of%20loane%20Ipinui,Jeanine%20Tuivaiki%2C%20shocked%20the%20nation.>

¹¹ OHCHR, "COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States", 14 May 2020, <https://www.ohchr.org/en/statements/2020/05/covid-19-suffering-and-resilience-lgbt-persons-must-be-visible-and-inform>

Transgender people also told Amnesty International how the chronic stress and poor mental health caused by the everyday discrimination, exclusion and violence they face worsened during the pandemic.¹² Many spoke of experiencing anxiety, depression and at times drug dependence and suicidal ideation.¹³ The loss of their livelihoods, housing, and access to support networks, as well as the increase in violence experienced by some transgender people forced many of them to return to hostile or unsupportive family environments during lockdowns - where they were often subjected to further harassment and violence.

“The reason why trans people cannot access a lot of services, including the support given during the pandemic, is because they are not visible in the eyes of the law. Whether it’s during the pandemic or not, the one thing I am asking the government for is to give us the bare minimum. Treat us as equals. We don’t even have the bare minimum of what our cisgender counterparts have.”

A transgender man in Singapore in an interview with Amnesty International, June 2021

The recommendations below reflect the imperatives that, in “building back better”, governments make efforts to address the structural conditions and inequalities that shape transgender people’s everyday lives, choices and opportunities, which, if left unchanged, will continue to make them particularly vulnerable to future crises. This should include prioritising and delivering evidence-based, accessible and trans-inclusive social protection schemes, public healthcare, education, employment and housing systems, and ensuring that transgender people and their organisations are engaged in decision-making processes.

An urgent shift is also needed in governments’ attention to the specific needs and realities of transgender, gender diverse and LGBTI people during crises. Governments should closely consider and act on the critical lessons learnt from the pandemic, and put in place better trans-inclusive protections, needs assessments processes and partnerships in preparation for future environmental, health or conflict emergencies.

AMNESTY INTERNATIONAL’S KEY RECOMMENDATIONS TO GOVERNMENTS IN THE REGION

- Ensure that transgender people can obtain legal recognition of their gender through accessible and transparent procedures based on self-determination, while preserving their right to privacy. Governments should make sure that all documents are issued with correct gender markers, and gender-related information stored in state-run registries is updated.
- Include transgender people, along with all other self-employed and informal workers, without discrimination, in unemployment assistance and other financial and social security programmes.
- Ensure access to quality healthcare for all people, including the specific therapies that transgender people need, including hormone therapy, gender-affirming surgeries, and free mental health counselling support.
- Provide affordable and safe housing, and appropriate emergency housing for those who need it, including for transgender sex workers.
- Ensure that prevention and response measures for gender-based and domestic violence form an integral part of state crisis responses, and that these recognise the specific needs of people of diverse genders and sexualities. This means ensuring that policy responses are informed by an understanding of which transgender and gender diverse people are at heightened risk of different forms of gender-based violence and how these risks may vary across settings.

¹² Amnesty International’s interviews with transgender people in Sri Lanka, Pakistan, India, Bangladesh, and the Philippines between March 2021 and August 2022

¹³ Ibid.

- Ensure that transgender and gender diverse survivors have access to police protection, healthcare and justice services, shelters, helplines, and community-based support, including by designating these as essential services and ensuring they receive the necessary support and resources to continue operating during future emergency situations.
- Ensure that crisis response measures are informed by data and evidence-based needs assessments that take into account the realities of transgender and gender diverse people according to their local contexts.
- Ensure that governments form robust and meaningful partnerships with transgender organizations and activists to support their responses to future crises – including by identifying needs, designing and implementing safe, dignified and effective registration approaches, and developing safeguarding and accessible and confidential grievance mechanisms.

2. METHODOLOGY

This report documents the experiences of transgender people in 15 countries in South, Southeast and East Asia, and the Pacific Islands during the Covid-19 pandemic. The challenges highlighted are not unique to the countries referred to; but reflect many of Amnesty International's concerns about the ongoing structural and systemic barriers to accessing human rights that exist for transgender people around the world – and that were exacerbated during the pandemic.

The countries studied in this report -- Bangladesh, India, Indonesia, Japan, mainland China, Malaysia, Pakistan, Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Thailand, Tonga and Viet Nam -- were identified on the basis of two main criteria: a) the strength of existing networks through which Amnesty International could reach transgender individuals and organizations for its research; and b) the availability of existing data on the impact of Covid-19 on transgender people.

The research for this report was carried out between March 2020 and August 2022 and included interviews with transgender people, an extensive literature review, and participation in several conferences. Two roundtable discussions were also conducted – one co-organized by Amnesty International and the United Nations Office of the High Commissioner for Human Rights, Pacific Regional Office with 41 trans activists and held in a hybrid online and in-person format on 31 March 2022 in Fiji to mark the Trans Day of Visibility; and the 2021 East and Southeast Asia Trans Communities Forum organized by the Lingnan University Hong Kong in July 2021. A survey was also undertaken with transgender people in Southeast Asia in August 2022.

The literature review included reports by UN agencies, non-governmental organizations (NGOs), news reports and interviews with transgender activists by LGBTI organizations, which were then assessed and cross-checked against similar accounts told directly to Amnesty International. It also included information provided by LGBTI organizations to the UN as part of the Universal Periodic Reviews for Samoa, Timor-Leste and Papua New Guinea in 2021.

Amnesty International wrote to the governments of Bangladesh, India, Indonesia, Malaysia, Pakistan, the Philippines, and Thailand (as the countries that feature most prominently in this report) outlining its key findings and requesting information about the human rights protections available to transgender individuals in pre-pandemic and pandemic conditions. Only the government of the Philippines responded, and their response is discussed in section 4.2 of this document.

Amnesty International would like to express its sincere gratitude to all the transgender people and activists who gave their time and shared their experiences and insights for this report. The organization expresses its particular thanks to transgender activist Brenda R. Alegre, PhD, Lecturer at the University of Hong Kong and Board Member of STRAP (Society of Transwomen of the Philippines), researcher Mehlab Jameel from Pakistan, and the Asia Pacific Transgender Network (APTAN) for reviewing drafts of the report and providing valuable feedback which has informed this final version.

3. BACKGROUND: STRUCTURAL DISCRIMINATION AGAINST TRANS PEOPLE

Like most people, transgender people's lives and experiences across Asia and the Pacific Islands are diverse and contextualised - shaped by the spaces and times they live in, their age, and their social and economic positioning. Many lead fulfilling lives, within safe and loving relationships. However, even in those countries where transgender and gender diverse people are historically rooted within the cultural landscape¹⁴, their lives are often characterised by deep-rooted structural marginalisation, and high rates of discrimination, poverty, harassment, violence and exclusion – which is often manifested on an everyday basis.

Discriminatory colonial laws, conservative interpretations of religion, patriarchal and heteronormative structures, and a deep-seated othering based on class, race, disability, social and economic status, sexual orientation and gender identity underpin the structurally violent, exclusionary and hostile political, economic and social environments that transgender people across the Asia Pacific region have to navigate. The compounded effects of historical discrimination, a lack of social, economic and legal protections, and limited access to formal education, employment opportunities, housing and healthcare are long-term social vulnerability, high levels of poverty, poor health outcomes, stigma, transphobia, and high levels of violence and isolation.¹⁵

A detailed discussion of these factors is beyond the scope of this report, but they play a key role in curtailing the rights of transgender, gender diverse, and indeed more widely LGBTI people across the region. The overview below outlines how these issues exacerbated the vulnerability of transgender and gender diverse people during the Covid-19 pandemic, put them at higher risks of violence, and led to many falling further into poverty, homelessness, ill-health and social isolation.

ACCESS TO EMPLOYMENT

“Trans people face a huge issue with finding employment due to lack of relevant qualifications. Sometimes if they do have the qualifications, when the companies [they are applying to] find out they are trans, they don't get past the initial interview. If they somehow make it to the workplace itself, they are forced to conform to discriminatory policies”.

A transgender woman in the Philippines in an interview with Amnesty International, February 2021

Transgender people are often systematically excluded from the formal economy and the job security, tenure, protections and welfare benefits available to people in formal employment. The reasons for this are complex, combining social stigma, lack of educational attainment and lack of the necessary documentation, amongst other factors.

In most countries across Asia and the Pacific Islands, transgender people find it difficult to access formal education

¹⁴ For a background on local terminology see: David, E., “Transpinay: A Genealogy of a term”, 2021, Sexualities, Volume 0, Issue 0, journals.sagepub.com/doi/10.1177/13634607211024563; Peletz, M. G., “Transgenderism and Gender Pluralism in Southeast Asia since Early Modern Times”, April 2006, Current Anthropology, Volume 47, Issue 2, www.journals.uchicago.edu/doi/abs/10.1086/498947.

¹⁵ United Nations Development Programme (UNDP), “Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific”, 2017, <https://www.undp.org/vietnam/publications/blueprint-provision-comprehensive-care-trans-people-and-trans-communities-asia-and-pacific>.

due to poverty, discrimination, bullying and harassment¹⁶ in the school and home environments, as well as institutional discrimination through non-inclusive school cultures,¹⁷ facilities, rules and curricula.¹⁸ A 2018 study in Malaysia, Singapore, Thailand and Viet Nam found that on average transgender applicants were only half as likely as cisgender applicants to receive positive responses to job applications.¹⁹ As a result, many transgender people find themselves restricted to a narrow range of occupations in the informal sector which are more likely to be exploitative, low paid and insecure.²⁰

According to testimonies collected by Amnesty International, the main forms of livelihood for transgender women in the Philippines, Malaysia, Indonesia, Thailand, Viet Nam²¹ and South Korea were performing in various entertainment venues, working in the hospitality industry, engaging in sex work, and participating in beauty pageants.²² In Bangladesh, India and Pakistan, transgender women often earn a living by performing ceremonial functions at weddings and births, engaging in sex work or begging on the streets.²³ In the Pacific Islands, many transgender women²⁴ are employed in the hospitality and tourism industries, but also work in the informal sector, including as sex workers.²⁵ In Viet Nam, reports suggest transgender men have difficulties in accessing and retaining formal and permanent employment.²⁶ When they can find jobs, these are usually in the more traditionally male sectors, such as manual labour and construction,²⁷ often as informal and low paid workers.

The situation of transgender men is particularly precarious. In countries such as Bangladesh, India and Pakistan, most transgender men do not benefit from the cultural kinship networks that support transgender women to find work. Transgender activists and individuals in India and Pakistan told Amnesty International that older transgender women often play an important role in taking responsibility for younger transgender women, including through helping them to find performance opportunities at weddings and other events. Transgender men are more likely to be left to fend for themselves in patriarchal societies that consider them to be women.²⁸

¹⁶ Goldie, P. D. and Chatterjee, I., "Examining the elevated risk of Covid-19 in transgender communities with an intersectional lens", *SN Social Sciences*, 1(10), 2021, p. 249, <https://link.springer.com/article/10.1007/s43545-021-00255-x>; also emphasised in a number of Amnesty International's interviews.

¹⁷ Alegre, B.R., "From bakla to transpinay: Transgender students in Philippine schools", in Kennedy, K.J. and Lee, J.C. (editors), *Routledge International Handbook of Schools and Schooling in Asia*, 2018, pp. 864-871 <https://www.taylorfrancis.com/chapters/edit/10.4324/9781315694382-82/bakla-transpinay-brenda-alegre>; Health Policy Project, Asia Pacific Transgender Network (APTAN), United Nations Development Programme (UNDP), "Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific", 2015, www.undp.org/asia-pacific/publications/blueprint-provision-comprehensive-care-trans-people-and-trans-communities-asia-and-pacific, pp. 22-24; Kabir, N. and Binte Ahsan, K., "Transgender-Specific Politics and Policy in Asia", January 2021, *Oxford Research Encyclopedia of Politics*, oxfordre.com/politics/view/10.1093/acrefore/9780190228637.001.0001/acrefore-9780190228637-e-1278

¹⁸ United Nations Educational, Scientific and Cultural Organization (UNESCO), "From Insult to Inclusion: Asia-Pacific report on school bullying, violence and discrimination on the basis of sexual orientation and gender identity", 2015, <https://unesdoc.unesco.org/ark:/48223/pf0000235414> (refers to LGBTI people more broadly)

¹⁹ Winter, S. et al., "Denied Work: An audit of employment discrimination on the basis of gender identity in Asia", 2018, Asia Pacific Transgender Network and UNDP, Bangkok, https://www.undp.org/sites/g/files/zskgke326/files/migration/asia_pacific_rbp/RBAP-HHD-2018-Denied-Work-An-Audit-of-Employment-Discrimination.pdf

²⁰ Health Policy Project, Asia Pacific Transgender Network (APTAN), United Nations Development Programme (UNDP), "Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific" (previously cited), p. 10; also reported in a number of Amnesty International's interviews.

²¹ Hoang, T-A and Oosterhoff, P. "Transgender at Work: Livelihoods for Transgender People in Vietnam", Institute for Development Studies/Center for Creative Initiatives in Health and Population, 2016, <https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/8869>

²² Amnesty International interview with transgender activists in the Philippines, Malaysia and Indonesia in 2020 and 2021.

²³ Al-Mamun, M. et al., "Discrimination and social exclusion of third-gender population (Hijra) in Bangladesh: A brief review", October 2022, *Heliyon*, Volume 8, Issue 10, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9547216/>; Reuters, "India's 'invisible' trans community struggles as coronavirus shuts life down", 25 March 2020, <https://www.reuters.com/article/us-health-coronavirus-lgbt-india-idUSKBN21C098>.

²⁴ See Amnesty International, "Governments have failed to protect trans people from murder – and from COVID-19", 20 November 2020, www.amnesty.org/en/latest/news/2020/11/governments-have-failed-to-protect-trans-people-from-murder-and-from-covid19.

²⁵ Amnesty International interview with transgender woman from Tonga, 2020

²⁶ Hoang, T-A and Oosterhoff, P. "Transgender at Work: Livelihoods for Transgender People in Vietnam", (previously cited)

²⁷ Ibid.

²⁸ Amnesty International's interviews with transgender activists in India and Pakistan, May 2021.

“Many trans people believe they shouldn’t waste their time trying to access healthcare, as they cannot get it without harassment and discrimination.”

A transgender man from Pakistan at the 2021 East and Southeast Asia Trans Communities Forum²⁹

Transgender people find it difficult to access quality healthcare. Transphobia among healthcare staff, a lack of medical professionals trained in the specific health requirements of transgender people - including the regulation of hormones and other related medicines,³⁰ many transgender people’s inability to afford private healthcare,³¹ and the out of pocket costs of public healthcare are key barriers.³² Most transgender people rely on the internet, other trans people in their communities, and/or clandestine market sellers for advice about medication, transitioning and associated side-effects.³³ As a result, many have high levels of unmet health needs.³⁴

According to academic and news reports, transgender people across the region have reported that they experience “disrespect, lack of privacy and confidentiality and in many cases outright refusal of care” when they seek medical care.³⁵ This was also reiterated by transgender people in interviews carried out by Amnesty International in the Philippines, Japan, Pakistan and India. In Pakistan, transgender people have reported discrimination, humiliation, stigma, and hostility at every stage of the medical process, including at registration desks during medical consultations and when admitted in hospitals.³⁶

“There is no understanding of the bodies of transgender men in local healthcare.”

A gender queer activist in India in an interview with Amnesty International, April 2021

The chronic stress caused by ongoing societal discrimination, exclusion, and violence also creates a higher risk of adverse mental health outcomes.³⁷ In Malaysia, for example, a 2019 study of transgender people in Kuala Lumpur and Selangor by SUHAKAM found that over 70% of respondents said they experienced anxiety and stress; 31% faced suicidal ideation and 21% had attempted suicide.³⁸ In some communities, being subjected to “so-called conversion therapy” or practices has also impacted transgender people’s mental health.³⁹

²⁹ 2021 East and Southeast Asia Trans Communities forum organized virtually by the Lingnan University Hong Kong, July 2021

³⁰ Asia Pacific Transgender Network (APTN), “The Cost of Stigma: Understanding and Addressing Health Implications of Transphobia and Discrimination on Transgender and Gender Diverse People: Evidence from Community-led Research in Nepal, Indonesia, Thailand and Vietnam”, 2020, www.aidsdatahub.org/resource/cost-stigma-understanding-and-addressing-health-implications-transphobia-and.

³¹ Health Policy Project, Asia Pacific Transgender Network (APTN), United Nations Development Programme (UNDP), “Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific” (previously cited).

³² Ibid.

³³ Ibid.

³⁴ National Center for Transgender Equality and National Gay and Lesbian Task Force, “*Injustice at Every Turn: A Report of the National Discrimination Survey*”, 2011, https://transequality.org/sites/default/files/docs/resources/NTDS_Report.pdf.

³⁵ Human Rights Watch, “‘People Can’t Be Fit into Boxes’: Thailand’s Need for Legal Gender Recognition”, 15 December 2021, www.hrw.org/report/2021/12/15/people-cant-be-fit-boxes/thailands-need-legal-gender-recognition; Rutgers International, “Barriers to the Provision and Access to Quality Healthcare for Transgender Population of Pakistan: A Presentation of Findings from Two Operational Researches for RHRN”, 2018, <https://rhrntools.rutgers.international/tools/barriers-to-the-provision-of-and-access-to-quality-healthcare-for-transgender-population-of-pakistan/>; Singh, S., “*Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic*”, 14 December 2020 (APTN), www.weareaptn.org/resource/trans-resilience-report-stories-of-hope.

³⁶ The Express Tribune, “No hospital big enough for transgender people: Death of activist Alisha in Peshawar hospital sparks debate over equal rights to healthcare”, 13 June 2016, tribune.com.pk/story/1121639/no-hospital-big-enough-transgender-people (trigger warning for disturbing image); UCA News, “Covid-19 death highlights mistreatment of Pakistan’s transgender people”, 08 March 2021, <https://www.ucanews.com/news/covid-19-death-highlights-mistreatment-of-pakistans-transgender-people/91669>.

³⁷ Lin, Y. et al., “The mental health of transgender and gender non-conforming people in China: a systematic review”, December 2021, The Lancet Public Health, Volume 6, Issue 12, [www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(21\)00236-X/fulltext](http://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(21)00236-X/fulltext).

³⁸ “Leave No One Behind: Malaysian Transgender at Risk” - A Spotlight Report on SDGs Implementation in Malaysia (Drafted by a Coalition of Transgender and Cisgender Individuals), 2021. Quoting the study by Suhakam: <https://suhakam.org.my/publications/research-thematic-reports>

³⁹ Human Rights Watch, “Malaysia: State-Backed Discrimination Harms LGBT People”, 10 August 2022,

www.hrw.org/news/2022/08/10/malaysia-state-backed-discrimination-harms-lgbt-people; Outright International, “The Global Reach of So-Called

ACCESS TO HOUSING AND SAFE SPACES

“One of the biggest challenges for trans people is finding a safe place to stay. There is a lot of housing discrimination. Rents for trans people are much higher than those for others.”

A gender queer activist in India in an interview with Amnesty International, April 2021

Those transgender people whose birth families do not accept their identities are often forced to leave home.⁴⁰ Many of them move to urban centres and into rented accommodation, which is often temporary, communal and overcrowded.

The United Nations Development Programme (UNDP) noted in May 2020 that transgender tenants in the Asia and the Pacific Islands region have frequently experienced harassment and violence by landlords, neighbours and the local community.⁴¹ A transgender activist in Hong Kong told Amnesty International that renters are required to submit national IDs which include their sex assigned at birth, thus disclosing their transgender status to landlords. Several transgender activists in rented accommodation in India told Amnesty International that the lack of general rent control means that transgender people are often asked to pay higher rents than cisgender people in the same area.⁴²

ACCESS TO LEGAL GENDER RECOGNITION

“A transgender person’s ability to live in dignity, equality and security is severely compromised without the option of legal gender recognition. The discrimination and exclusion they face is exacerbated when they are required to use an identity document that does not match their gender identity or gender expression”

A *Legal Gender Recognition: A Multi-Country Legal and Policy Review in Asia*, UNDP & APTN⁴³

While there is some variation in the legal and policy frameworks on legal recognition in countries across Asia (and currently no avenues for legal gender recognition in the Pacific Islands⁴⁴), most transgender people across the region are unable to obtain legal identification (ID) documents that reflect their gender identity.

Having to present an ID that includes their sex assigned at birth - for example when accessing health, housing or

Conversion Therapy”, 12 August 2019, outrightinternational.org/our-work/human-rights-research/global-reach-so-called-conversion-therapy.

⁴⁰ UNDP, “COVID-19 amplifying inequalities for transgender people”, 15 May 2020, <https://www.th.undp.org/content/thailand/en/home/blog/2020/covid-19-amplifying-inequalities-for-transgender-people.html>

⁴¹ Ibid.

⁴² Amnesty International interview with trans activist in India, April 2021; CNBC TV18, “Evicted from homes, transgender community fights for survival amid coronavirus lockdown”, 20 April 2020, www.cnbctv18.com/healthcare/evicted-from-homes-transgender-community-fight-for-survival-amid-coronavirus-lockdown-5723661.htm.

⁴³ UNDP, *Legal Gender Recognition: A Multi-Country Legal and Policy Review in Asia* (previously cited).

⁴⁴ Equality & Justice Alliance, “A fairer future: Law reform and advocacy opportunities for women’s and PIDSOGIESC+ rights in the Commonwealth Pacific”, September 2019, https://www.pgaction.org/pdf/Opportunities_for_women_and_LGBTI_rights_Pacific.pdf; A recently published study by Asia Pacific Transgender Network found that gender diverse people support legal reforms that would allow for gender recognition in Fiji (see: Asia Pacific Transgender Network (APTN), “Legal Gender Recognition in Fiji: a Legal and Policy Review in The Context of Human Rights”, 26 April 2022, <https://weareaptn.org/resource/legal-gender-recognition-in-fiji-a-legal-and-policy-review-in-the-context-of-human-rights/>)

social protection - brings real and considerable risks of stigma, discrimination, harassment and violence.

Legal gender recognition in Asia – A snapshot

In **Bangladesh**, there is a “third gender” classification in official government forms (for example, for bank applications), an ‘Other’ category for passport applications and a ‘Hijra’ category for national identity card applications. However, the methods and processes of recognition and implementation are often unclear and inconsistent.⁴⁵

In **India**, the Transgender Law enacted in 2019 and the 2020 corresponding rules mandate the production of medical certificates along with a bureaucratic procedure in order to obtain a certificate for change of gender.⁴⁶

In **Indonesia**, legal gender recognition is not regulated by a specific law and is dependent on the courts. In practice, it can be achieved on the basis of medical opinion, proof of gender reassignment surgery and family testimony.⁴⁷ It has been reported that transgender people are now applying for and obtaining civil documents at the Citizenship and Civil Records Agency (Dukcapil).⁴⁸ These documents are, however, still issued on the basis of people’s sex assigned at birth.⁴⁹ Indonesian Law No. 23/2013 categorises gender only as male and female, with no option for a third gender category.

Japan⁵⁰ and **Vietnam** allow legal gender recognition only on the basis of lengthy, invasive and often irreversible medical interventions, including surgeries.⁵¹ These procedures are not only difficult to go through but are also not always wanted by people affirming their gender identity.⁵²

In **Malaysia**, the Court of Appeal issued a decision in 2017 prohibiting registration details being changed from those assigned at birth.⁵³

In **Nepal**, a 2007 Supreme Court judgment ruled that the government should establish a legal gender recognition procedure on the basis of ‘self-feeling’, and a ‘Third Gender’ category. Nepali authorities have implemented and marked the category in official documents as ‘Third Gender’, ‘Other’, or ‘Sexual and Gender Minority’. However, the procedures provide no option for transgender people to be legally recognised with a different binary gender than the sex assigned at birth.⁵⁴

In **Pakistan**, the Transgender Persons (Protection of Rights) Act was enacted in 2018. The Rules of the Act notified in 2021 mandate that transgender people will only be able to obtain identity documents with an ‘X’ gender marker, thereby restricting legal gender recognition in Pakistan to a non-binary identity. At the time of publishing this report, the Pakistan government is under increasing pressure by right-wing religious and political parties to amend the law and restrict the rights of transgender and gender diverse people in the country.⁵⁵

In **Taiwan**, a 2021 court ruling stated that a government requirement obliging transgender people to provide proof of reproductive organ removal surgery in order to affirm their legal gender is unconstitutional, thereby allowing legal gender recognition without medical intervention.⁵⁶ However this ruling cannot stand as a precedent for future cases. In the meantime, the same court has applied for a constitutional interpretation on the issue.

There are currently no avenues for legal gender recognition in Thailand⁵⁷ the Philippines,⁵⁸ and the Pacific Islands.⁵⁹

⁴⁵ Bangladesh Legal Aid and Services Trust (BLAST), “From Recognition to Realising Rights: Legal Protection of Gender Identity in Bangladesh Law”, December 2019, <https://www.blast.org.bd/content/publications/Policy-Brief-Hijra-and-GDC-Rights.pdf>.

⁴⁶ Human Rights Watch, “India’s Transgender Rights Law Isn’t Worth Celebrating”, 05 December 2019, www.hrw.org/news/2019/12/05/indias-transgender-rights-law-isnt-worth-celebrating.

⁴⁷ Stonewall, Global Workplace Briefing 2019, https://www.stonewall.org.uk/system/files/global_workplace_briefing_indonesia_final.pdf

⁴⁸ Direktorat Jenderal Kependudukan Dan Pencatatan Sipil, “Dunkapi gives KK and e-KTP to Transgender with Male or Female Gender”, 02 June 2021, dukcapil.kemendagri.go.id/berita/baca/755/dukcapil-beri-kk-dan-ktp-el-pada-transgender-dengan-jenis-kelamin-laki-laki-atau-perempuan.

⁴⁹ DetikNews, “What is the Gender Column on the Transgender KTP? This is what the Ministry of Home Affairs said”, 25 April 2021, news.detik.com/berita/d-5545429/bagaimana-kolom-jenis-kelamin-di-ktp-transgender-ini-kata-kemendagri.

⁵⁰ Human Rights Watch, “The Law Undermines Dignity”: Momentum to Revise Japan’s Legal Gender Recognition Process, 25 May 2021, <https://www.hrw.org/report/2021/05/25/law-undermines-dignity-momentum-revise-japans-legal-gender-recognition-process>.

⁵¹ Legal Gender Recognition in Japan is overseen by the Gender Identity Disorder Special Cases Act of 2003; Human Rights Watch, “The Law Undermines Dignity”: Momentum to Revise Japan’s Legal Gender Recognition Process (previously cited); Hoai Thuong, M., “Protecting Human Rights to Adoption of Lesbian, Gay, Bisexual and Transgender People (LGBT) - Practice in Some Asian Countries and Vietnam”, 2022, International Journal of Law Management & Humanities, Volume 5, Issue 1, p. 764, [https://heionline.org/HOL/LandingPage?handle=hein.journals/ijlmhs15&div=69&id=&page=](https://heionline.org/HOL/LandingPage?handle=hein.journals/ijlmhs15&div=69&id=&page=;).

⁵² Hartline, F. R. & Ishimaru K., “The struggle to belong: Trans and gender-diverse experiences in Japan and Norway” in Ishii-Kuntz, M., Korsnes Kristensen, G. & Ringrose, P., Comparative Perspectives on Gender Equality in Japan and Norway: Same but Different?, 2022, 157-172.

⁵³ UNDP, Legal Gender Recognition: A Multi-Country Legal and Policy Review in Asia, December 2017, https://www.asia-pacific.undp.org/content/rbap/en/home/library/democratic_governance/hiv_aids/legal-gender-recognition--a-multi-country-legal-and-policy-review.html; Malay Mail, Court reversal on transgender ruling shows ‘wilful ignorance’ rights group says, January 2017, <https://www.malaymail.com/news/malaysia/2017/01/11/court-reversal-on-transgender-ruling-shows-wilful-ignorance-rights-group-sa/1290557>

⁵⁴ International Commission of Jurists (n.d), Sunil Babu Pant and Others v. Nepal Government and Others, Supreme Court of Nepal, December 21, 2007.

⁵⁵ The Wire, “Pakistan: 4 Years After Transgender Rights Act was Enacted, Religious Parties Call it ‘Un-Islamic’”, 1 Oct 2022, thewire.in/south-asia/pakistan-transgender-rights-act-religious-parties.

⁵⁶ Amnesty International UK, “Taiwan: Landmark moment for transgender rights as court rules against surgery requirement”, 25 September 2021, www.amnesty.org.uk/press-releases/taiwan-landmark-moment-transgender-rights-court-rules-against-surgery-requirement.

⁵⁷ Human Rights Watch, “People Can’t Be Fit into Boxes”: Thailand’s Need for Legal Gender Recognition”, 15 December 2021 (previously cited)

⁵⁸ UNDP, Legal gender recognition in the Philippines: A Legal and Policy Review (previously cited).

⁵⁹ Asia Pacific Transgender Network (APTAN), “Legal Gender Recognition in Fiji: a Legal and Policy Review in The Context of Human Rights”, 26 April 2022 (previously cited).

4. TRANSGENDER PEOPLE'S EXPERIENCES OF COVID-19

4.1 THE IMPACT ON LIVELIHOODS

"The pandemic has destabilized already unstable lives, and transgender people's lives particularly, as our job opportunities are limited to begin with. Transgender people have a difficult time becoming reemployed, so losing a job is a bigger blow for us than for non-trans persons."

A transgender woman from Japan in an interview with Amnesty International, July 2021

Like most governments around the world, governments across Asia and the Pacific Islands sought to curb the spread of the virus by implementing physical distancing requirements, lockdown measures, and restrictions on hospitality, entertainment and tourism industries at various points during the pandemic.⁶⁰ In the Pacific Islands, many countries closed their borders to international visitors for almost two years, which along with curfews, occasional stay at home orders, and the closure of international borders in other countries had a profound impact on tourism and hospitality.⁶¹

As entertainment and hospitality venues – significant employers of transgender people – were required to close or operate reduced hours, and tourist flows were disrupted, many transgender people told Amnesty International they were put out of work entirely and effectively cut off from their only source of income, often without access to the compensatory relief measures provided (see section 4.2).⁶²

A transgender activist from Thailand, for example, reported that the country's nightlife, which supports many local transgender women as well as those from neighbouring countries, came to a standstill during the different lockdowns which lasted for several weeks, and sometimes months at a time.

People who work in the entertainment and hospitality sectors often do so informally. Informal workers are more likely to be poor⁶³ and tend to not receive unemployment protections, health insurance, paid leave and severance pay. They are thus particularly vulnerable to collapses in their income.⁶⁴

⁶⁰ For example, Thailand implemented social curtailment measures in April 2020 which included a national lockdown, curfews and a 14-day mandatory quarantine for international travellers. There was an easing of some of these restrictions from the summer of 2020, only to be followed by another period of this time targeted lockdowns from December 2020. Indonesia imposed restrictions on the functioning of entertainment and other spaces of social gatherings on and off at different periods during the pandemic.

⁶¹ International Labour Organisation, "COVID-19 and employment in the tourism sector in the Asia-Pacific region", November 2021, https://www.ilo.org/wcmsp5/groups/public/---asia/--ro-bangkok/documents/briefingnote/wcms_827495.pdf; Kaushal, V. & Srivastava, S., "Hospitality and tourism industry amid COVID-19 pandemic: Perspectives on challenges and learnings from India, January 2021, International Journal of Hospitality and Management", volume 92, <https://www.sciencedirect.com/science/article/pii/S0278431920302590>.

⁶² See, for example, Goel, I., "Impact of Covid-19 on Hijras, a Third-Gender Community in India", 04 May 2020, Society for Cultural Anthropology, <https://culanth.org/fieldsights/impact-of-covid-19-on-hijras-a-third-gender-community-in-india>. Also confirmed in Amnesty International's interviews with transgender people between March 2020 and November 2021 in various countries within the region.

⁶³ International Labour Organization (ILO), Women and men in the informal economy: A statistical picture (third edition), 30 April 2018, www.ilo.org/global/publications/books/WCMS_626831/lang--en/index.htm.

⁶⁴ Gender in Humanitarian Action, The COVID-19 Outbreak and Gender: Regional Analysis and Recommendations from Asia and the Pacific, May 2020, p.3, <https://reliefweb.int/sites/reliefweb.int/files/resources/GiHA%20WG%20analysis%20%20brief.pdf>

“Most of the customers in clubs and bars were from China or other countries, so when flights stopped, there were no customers, and clubs could not stay open as a result.”⁶⁵

A transgender woman from Thailand at the 2021 East and Southeast Asia Trans Communities Forum



 ↑ THAILAND - MARCH 10: A very quiet scene as a transgender cabaret actress waits for customers who pay for photos at the Pattaya Floating market popular with Chinese group tours Pattaya, Thailand on March 10, 2020. Thailand depends on tourism, currently tourist arrivals have plunged more than 50% and are expected to continue for months ahead. Photo by Paula Bronstein/Getty Images.

A 2020 survey of hijras in Dhaka, Bangladesh, for example found that 82% of the respondents had not earned a “single penny in the last two weeks”, and that 59% “did not get any support from aid programmes.”⁶⁶ In another survey conducted across the eight divisions of Bangladesh, respondents reported that they experienced roughly a 95% drop in income.⁶⁷ For many, this meant homelessness, inability to cover basic needs including food and medication, the aggravation of pre-existing medical issues, and increased exposure to violence and abuse.⁶⁸

⁶⁵ Transgender women from Thailand at the East and Southeast Asia Trans Communities Forum, held online in July 2021. A similar point was made in this article: [How COVID-19 Has Affected The Lives Of Thai Sex Workers](https://thesmartlocal.com) (thesmartlocal.com)

⁶⁶ Innovision, “Digest 2: Economic impact of COVID-19 crisis on Third Gender community in Bangladesh”, 2020, https://innovision-bd.com/wp-content/uploads/2022/08/COVID-19_Digest-2_Third-Gender.pdf. (The survey conducted was of 80 respondents (10 from each division) in Bangladesh)

⁶⁷ Bandhu Social Welfare Society, “Quick Survey for Community Response for TG and Hijra”, 18 May 2020, www.bandhu-bd.org/covid-19-quick-survey-for-community-response-for-tg-and-hijra-2.

⁶⁸ Bangkok Post, “Being trans in a pandemic”, 18 January 2021, <https://www.bangkokpost.com/life/social-and-lifestyle/2052739/being-trans-in-a-pandemic>; United Nations Development Programme (UNDP) Regional Bureau for Asia and the Pacific (RBAP), “COVID-19 amplifying inequalities for transgender people”, 15 May 2020, www.undp.org/asia-pacific/blog/covid-19-amplifying-inequalities-transgender-people.

“We were more afraid of starving rather than the virus”

A transgender woman in Bangladesh in an interview with Amnesty International, April 2021

The evidence shows that transgender people adopted a range of coping strategies in response to the decline in their incomes. In the survey in Bangladesh cited above, nearly 70% of respondents reported having borrowed money to survive during the pandemic.⁶⁹ A 2021 study from India found that many transgender people relied on and exhausted their savings, sold their jewellery, and took out high interest loans, often on top of pre-existing debt.⁷⁰

Transgender women in India and Pakistan told Amnesty International that, unable to perform at events due to social distancing and lockdown measures, they had resorted to begging on the streets, often risking infection.⁷¹ Even then, ever-present stigma, and the fear of contracting Covid-19 made people reluctant to come close to them to give money.⁷² In March 2020, an Indian newspaper reported that posters had appeared in Hyderabad saying: “If you talk to transgenders, you will get Corona.”⁷³

“To gain a livelihood, trans women usually solicit alms from the streets and shops and engage in sex work. Neither has been possible since the pandemic started due to social distancing and lockdown measures. They have been left without any income whatsoever, barring some minimal support from churches, religious charities and political groups.”

A gender queer activist in India in an interview with Amnesty International, April 2021

TRANSGENDER SEX WORKERS

Transgender and cisgender sex workers in many parts of the world, including in the Asia Pacific region, were particularly adversely affected by lockdown and social distancing measures.⁷⁴

A UNAIDS study found that the use of lockdown measures in Thailand at different points from March 2020 led to the closure of more than 23,000 entertainment venues across the country and rendered an estimated 100,000 sex workers unemployed.⁷⁵ As with many other countries where sex work is illegal and hence not recognized as “labour”,

⁶⁹ Innovision, 2020, “Economic Impact of Covid 19 Crisis on Third Gender Community in Bangladesh (previously cited).”

⁷⁰ Bandhu Social Welfare Society, Quick Survey for Community Response for TG and Hijra, 18 May 2020 (previously cited); Chakrapani, V. et al., “The impact of COVID-19 on economic well-being and health outcomes among transgender women in India”, *Transgender Health*, Volume 7, Issue 5, October 2022, <https://www.liebertpub.com/doi/abs/10.1089/trgh.2020.0131>, pp.381-384

⁷¹ Amnesty International interviews with transgender women in India and Pakistan, 2020 and 2021; Bangkok Post, “Being trans in a pandemic”, 18 January 2021, www.bangkokpost.com/life/social-and-lifestyle/2052739/being-trans-in-a-pandemic; Deutsche Welle (DW), “Pakistan: Coronavirus makes life harder for transgenders”, 09 April 2020, www.dw.com/en/pakistan-transgender-coronavirus/a-54817362; United Nations Development Programme (UNDP) Regional Bureau for Asia and the Pacific (RBAP), “COVID-19 amplifying inequalities for transgender people”, 15 May 2020 (previously cited).

⁷² Amnesty International, “Governments have failed to protect trans people from murder – and from COVID-19”, 20 November 2020, www.amnesty.org/en/latest/news/2020/11/governments-have-failed-to-protect-trans-people-from-murder-and-from-covid19.

⁷³ Amnesty International, “There is no help for our community”: The Impact of States’ COVID-19 Responses on Groups Affected by Unjust Criminalization (Index: POL 30/5477/2022), 31 May 2022, www.amnesty.org/en/documents/pol30/5477/2022/en; The New Indian Express, “Transgenders shocked by hate posters in Hyderabad amid coronavirus fear”, March 2020, <https://web.archive.org/web/20200402111813/https://www.newindianexpress.com/cities/hyderabad/2020/mar/30/transgenders-shocked-by-hate-posters-in-hyderabad-amid-coronavirus-fear-2123284.html>.

⁷⁴ For instance, see Brouwers, L. and Herrmann, T., ““We Have Advised Sex Workers to Simply Choose Other Options”—The Response of Adult Service Websites to COVID-19”, *October 2020, Social Sciences*, Volume 9, Issue 10, www.mdpi.com/2076-0760/9/10/181, p. 181; Lam, E., “Pandemic sex workers’ resilience: COVID-19 crisis met with rapid responses by sex worker communities”, *October 2020 (online publication), International Social Work*, Volume 63, Issue 6, journals.sagepub.com/doi/full/10.1177/0020872820962202, pp. 777-781; Shareck, M. et al., “Double Jeopardy: Maintaining Livelihoods or Preserving Health? The Tough Choices Sex Workers Faced during the COVID-19 Pandemic”, *July 2021, Journal of Primary Care & Community Health*, Volume 12, <https://journals.sagepub.com/doi/full/10.1177/21501327211031760>.

⁷⁵ The same survey also noted that the highest “interpersonal abuse” is said to have been experienced by transgender sex workers (12%), Oxford

sex workers were not eligible for government relief support for workers suffering economic hardship because they had lost their jobs.⁷⁶ A 2020 survey of 230 sex workers in Thailand (of whom 170 were cisgender and 26 were transgender women) found that 91% reported that they were unemployed due to Covid-19 and 74% reported not earning enough money to cover their daily expenses.⁷⁷

“About 98% trans women [in the country] are engaged in sex work and begging. No mainstream companies hire us. We are seen as ‘cursed’ and ‘taboo’. There is no data from the government about trans people. NGO and activists talked to about 1500 trans women [during Covid-19] and they [mostly all] told us that they are living a very miserable life, have no money and are starving”.

A transgender woman in Bangladesh in an interview with Amnesty International, April 2021

Project X, a not-for-profit group in Singapore that supports sex workers reported that, as was the case for irregular migrants globally,⁷⁸ migrant transgender sex workers, who in countries such as Thailand make up a significant proportion of sex workers, found themselves unable to return home, or to access relief measures in their host country due to their irregular migration status.⁷⁹

Some sex workers continued working despite lockdown and stay-at-home orders, at great risk to their health, lives and safety.⁸⁰ Several transgender sex workers told Amnesty International they risked exposure to the virus, often meeting clients in unsafe locations, in order to continue making a living.⁸¹ There are anecdotal reports of sex workers who turned to other ways of earning a living to survive the pandemic, including selling drugs.⁸² Similarly, a rapid assessment survey in Viet Nam found that transgender sex workers who had lost their income and were unable to pay their rents were resorting to high interest loans on the clandestine market,⁸³ likely at significant risk of violence and exploitation.

In future crises which require emergency measures such as those imposed by the pandemic, states should consider the impacts of restrictions and closures on marginalised groups and informal workers who face ongoing discrimination, and work and live in precarious situations. States must identify and address barriers that exclude marginalized and at-risk groups including transgender people from accessing relief support (see more on this in the following section), and ensure that any efforts to provide food security, economic stimulus and relief packages for future emergencies are informed by an understanding of the needs of transgender people and use the appropriate delivery modalities.

To fulfil transgender people’s right to work, states must also put in place measures to ensure that they do not face

Policy Management, “Social Impact Assessment of Covid-19 in Thailand”, p.137, <https://www.unicef.org/thailand/media/5071/file/SocialImpactAssessmentofCOVID-19inThailand.pdf>; NSWP, Global Network of Sex Work Projects, “COVID-19 and Sex Workers/Sex Worker-led Organisation”, https://www.nswp.org/sites/default/files/covid-19_sw_cg_prf01.pdf

⁷⁶ Australia Broadcasting Corporation (ABC) News, “Sex workers have long been disapproved of in Thailand. Now they are calling for their billion-dollar industry to be recognised”, 12 November 2021, www.abc.net.au/news/2021-11-12/why-thailand-s-sex-workers-want-the-industry-legalised/100556522; Janyam S. et al., “Protecting sex workers in Thailand during the COVID-19 pandemic: opportunities to build back better”, September 2020, WHO South-East Asia Journal of Public Health, Volume 9, Issue 2, pp. 100-103, <https://pubmed.ncbi.nlm.nih.gov/32978340/>.

⁷⁷ Service Workers in Group Foundation (SWING), The Planned Parenthood Association of Thailand (PPAT) and Bangkok Health and Development Community Volunteer, Sadao District, Songkla province, “A Community-Led Rapid Assessment of the Impact of the Covid-19 epidemic on Sex Workers in Thailand”; UNAIDS, May 11, 2020, as cited in Gender in Humanitarian Action, “The COVID-19 Outbreak and Gender: Regional Analysis and Recommendations from Asia and the Pacific” (previously cited).

⁷⁸ OpenDemocracy, “COVID-19 shines a red light on sex workers’ lack of protection in Europe”, 22 April 2020, www.opendemocracy.net/en/beyond-trafficking-and-slavery/covid-19-shines-a-red-light-on-sex-workers-lack-of-protection-in-europe.

⁷⁹ Nikkei Asia, “Sex Workers from Singapore to Bangkok feel COVID chill”, 5 August 2020, asia.nikkei.com/Spotlight/Coronavirus/Sex-workers-from-Singapore-to-Bangkok-feel-COVID-chill; Oxford Policy Management, Social Impact Assessment of Covid-19 in Thailand (previously cited).

⁸⁰ Amnesty International, “Include sex workers in the COVID-19 response: public statement”, 28 July 2020, <https://www.amnesty.org/download/Documents/POL3027882020ENGLISH.pdf>

⁸¹ Amnesty International interviews in Pakistan, India, and Bangladesh, 2020 and 2021

⁸² Amnesty International interview with trans woman in Pakistan, October 2020

⁸³ Viet Nam Network of Self-Help Groups of Sex Workers (VNSW) and UNAIDS (2020), “Community-led quick assessment on the impact of Covid-19 on sex workers in Viet Nam”, quoted in United Nations Viet Nam, UN Analysis on Social Impacts of Covid-19 and Strategic Policy Recommendations for Viet Nam (previously cited) p.3.

“PANDEMIC OR NOT, WE HAVE THE RIGHT TO LIVE”

THE URGENT NEED TO ADDRESS STRUCTURAL BARRIERS UNDERMINING TRANSGENDER PEOPLE’S RIGHTS ACROSS ASIA AND THE PACIFIC ISLANDS

discrimination in trying to access formal employment, and/ or within their workplaces once employed.



👁️ ↑ NEW DELHI, INDIA MAY 13: Persons from the transgender community seen pleading for financial assistance in order to buy tickets for a train home, outside New Delhi Railway Station, on May 13, 2020 in New Delhi, India. Photo by Biplav Bhuyan/Hindustan Times via Getty Images.

4.2. ACCESSING RELIEF MEASURES

“Most trans women work as freelance entertainers and could not register for social support because they did not fall under any ‘category’ for work.”

A transgender activist from Thailand at the 2021 East and Southeast Asia Trans Communities Forum

THE RIGHT TO SOCIAL PROTECTION

The ability to access social security and social protection schemes is a right that should be accessible to everyone without discrimination, including on the basis of sexual orientation or gender identity.⁸⁴

The Committee on Economic, Social and Cultural Rights (CESCR) has called on States to ensure social protection measures⁸⁵ including “measures aimed at reducing poverty; access to affordable food, clean water and sanitation facilities; universal access to the necessary health services, including sexual and reproductive health care;⁸⁶ basic social security guarantees and basic income security (for example in cases of sickness, death, unemployment and loss of livelihood); shelters for victims of violence; and adequate housing and bans on evictions”.⁸⁷ The CESCR has also called on States to ensure that “benefits cover all marginalized and disadvantaged individuals, particularly those who are severely affected by the Covid-19. In case of severe lack of resources, State parties should ensure minimum benefits for the selection of a core group of social risks and contingencies, made following a wide process of consultation.”⁸⁸

Social protection – that is, regular and adequate government assistance provided over the medium- to long-term to everybody who needs it – is critical for helping people to manage the consequences of crises affecting their livelihoods. The global evidence shows that social assistance programmes can ameliorate people’s economic vulnerability to crises, help them meet their basic needs, reduce the need for coping strategies that put them at increased risk of violence and vulnerability, lessen stress and improve well-being, and promote a sense of autonomy and dignity.⁸⁹ Social assistance/ relief measures were thus a key feature of many government responses to the pandemic.

However, many transgender people in countries across Asia and the Pacific Islands, who were often already struggling to access social protection programmes prior to Covid-19, and whose incomes were particularly affected by social distancing and lockdown restrictions, found themselves unable to access pandemic-related relief schemes. In fact, a 2022 multi-country assessment of the extent to which pandemic related relief measures responded to the needs of marginalised groups highlights as a key finding that the extent to which social protection systems were able to include

⁸⁴ The Yogyakarta Principles, Principle 13 (previously cited).

⁸⁵ Committee on Economic, Social and Cultural Rights, general comment No. 19 (2008) on the right to social security, E/C.12/GC/19, paras. 4(b), 6 and 59(a); The Universal Declaration of Human Rights (1948), art. 25(1); Concluding observations for Israel (2019), E/C.12/ISR/CO/4, para. 35.

⁸⁶ CEDAW Restrictions on freedom of movement must not undermine women’s access to health care, including sexual and reproductive health services and information (Women’s Right to health (arts. 10 (h), 12 and 14 (2) (b)); note also ICCPR “The right to life, as a non-derogable right, must be upheld in all responses to COVID-19, including the provision of healthcare to those infected by COVID, as well as to those whose life could be impacted by restrictions on other forms of health care, including abortion services”

⁸⁷ OHCHR, Internal HRTB toolkit of treaty law perspectives and jurisprudence in the context of COVID-19, 15 July 2020, [HRTB_toolkit_COVID_19.pdf \(ohchr.org\)](https://www.ohchr.org/HRTB_toolkit_COVID_19.pdf)

⁸⁸ CESCR General Comment No. 19 on the right to social security, 2008, UN Doc. E/C.12/GC/19, paras. 31 and 59(a) and citing Concluding observations for Israel, 2019, UN Doc. E/C.12/ISR/CO/4, para. 23(c); also quoted in Amnesty International, “There is no help for our community”: The Impact of States’ COVID-19 Responses on Groups Affected by Unjust Criminalization (Index: POL 30/5477/2022), 31 May 2022, www.amnesty.org/en/documents/pol30/5477/2022/en.

⁸⁹ Rohrwerder, B., 2022, ‘Inclusion of marginalised groups in social assistance in crises’, Better Assistance in Crises (BASIC) Research programme, Institute of Development Studies (IDS), Brighton, www.ids.ac.uk/publications/inclusion-of-marginalised-groups-in-social-assistance-in-crises.

marginalised groups during the pandemic was strongly linked to how inclusive these were prior to it.⁹⁰

Many governments, including in the Asia and Pacific Islands region, prioritised rolling out relief measures aimed at reaching a wide population as quickly as possible. In addition to the need to move quickly, a lack of national- and local-level government data on transgender people made it difficult to identify transgender groups, understand and respond to their needs, and establish appropriate delivery modalities.⁹¹

There are thus few examples of schemes that were either specifically targeted or sensitive to the needs of those of diverse sexual orientations, gender identities, gender expressions, and sex characteristics (SOGIESC). Of the 3,112 social protection and cash programmes recorded in the UNDP and UN Women Covid-19 Global Gender Response Tracker in the second year of the pandemic⁹² just eight mentioned diversity of SOGIESC. One of these examples was Pakistan's Eid Relief scheme – a needs-based distribution of 120 ration bags to transgender persons in the cities of Islamabad and Rawalpindi.⁹³

Interviews conducted by Amnesty International as well as data reported by other organisations has found that multiple barriers relating to understanding eligibility, registering for, and receiving benefits made it very difficult for transgender people to access even those measures which were targeted to informal workers, daily wage earners, or those living in poverty.⁹⁴

LIMITED COVERAGE AND ADEQUACY OF SUPPORT

There is evidence that some governments in the Asia and Pacific Islands region made small relief packages available for groups in particular need,⁹⁵ including specific schemes for transgender people.⁹⁶ However, in most cases, these did not provide sufficient support and coverage, reaching only a fraction of those who were eligible.

In India, for example, the National Institute of Social Defense (NISD) reportedly issued a one-off relief payment of Rs1,500 (approximately US\$20) to transgender people.⁹⁷ In February 2021, the Social Justice Minister of State reported that 5,711 transgender people had received the payment.⁹⁸ A 2011 government census had recorded the transgender population of India at a little under 490,000⁹⁹ (with the actual number believed to be six to seven times higher),¹⁰⁰ Thus, transgender activists had previously argued that the NISD scheme was only reaching a small proportion of the country's transgender population¹⁰¹ Distribution of ration kits by state governments in Kerala and Tamil Nadu were also reported to have only reached transgender people in large cities, and only 1,000 transgender people in total in the state of Kerala.¹⁰²

⁹⁰ Roelen, K and Carter, B, 2022, 'Social Assistance and Covid-19: Reaching the Furthest Behind First?', Institute of Development Studies (IDS), Brighton, www.ids.ac.uk/publications/social-assistance-in-response-to-covid-19-reaching-the-furthest-behind-first.

⁹¹ Ibid.

⁹² UNDP Data Futures Platform, "COVID-19 Global Gender Response Tracker", 2021, <https://data.undp.org/gendertracker/#:~:text=The%20COVID%2D19%20Global%20Gender.policy%20measures%20taken%20by%20governments>.

⁹³ Edge Effect, "We Don't Do A Lot For Them Specifically", August 2021, www.calpnetwork.org/wp-content/uploads/2021/08/WDDALFTS_FullReport_Web.pdf.

⁹⁴ Amnesty International, "There is no help for our community": The Impact of States' COVID-19 Responses on Groups Affected by Unjust Criminalization (Index: POL 30/5477/2022), 31 May 2022, www.amnesty.org/en/documents/pol30/5477/2022/en.

⁹⁵ Ibid.

⁹⁶ For example - the transgender community's inaccessibility to food and medicines was acknowledged by the courts across India particularly in Tamil Nadu and Kerala. In May 2020, the Kerala High Court directed the state to supply medicines free of cost when a trans person produces a medical prescription and identity and ration card. In December 2020, the Supreme Court of India directed all states to immediately issue identity cards and ration cards to sex workers. Bar and Bench, "Towards a gender-inclusive future: Judicial developments recognising rights of the transgender community in India", 12 February 2022, www.barandbench.com/columns/towards-a-gender-inclusive-future-judicial-developments-recognising-the-rights-of-the-transgender-community-in-india-and-the-road-ahead.

⁹⁷ Hindustan Times, "Transgender activists write to Centre demanding support during Covid-19 crisis", 6 May 2020, www.hindustantimes.com/india-news/transgender-activists-write-to-centre-demanding-support-during-covid-19-crisis/story-v8vV8kEQuqfjXX3YEvODM.html.

⁹⁸ As reported by the Social Justice Minister of State in a statement to the Indian Parliament: The Hindu, "Social Justice Ministry to give financial aid to trans people", 20 May 2021, www.thehindu.com/news/national/social-justice-ministry-to-give-financial-aid-to-trans-people/article34601201.ece. Amnesty International wrote to the government of India to request information on support offered by them to people during the pandemic; we did not receive a response. We are unable to provide a more up to date figure given the lack of data available on this.

⁹⁹ Census 2011, "Transgender in India", www.census2011.co.in/transgender.php.

¹⁰⁰ Gay & Lesbian Alliance Against Defamation (GLAAD), India's census counts transgender population for first time, www.glaad.org/blog/indias-census-counts-transgender-population-first-time.

¹⁰¹ Hindustan Times, "Transgender activists write to Centre demanding support during Covid-19 crisis", 6 May 2020, www.hindustantimes.com/india-news/transgender-activists-write-to-centre-demanding-support-during-covid-19-crisis/story-v8vV8kEQuqfjXX3YEvODM.html.

¹⁰² Centre for Law & Policy Research (CLPR), "Exclusion Amplified: A Report", 2020, translaw.clpr.org.in/reports-and-policies/exclusion-amplified-a-report-on-how-the-pandemic-has-impacted-the-trans-and-intersex-community-in-india.



 ↑ *DHAKA, BANGLADESH; 2020: People from the transgender community wait to collect relief material from volunteer organisation during a government-imposed lockdown as a preventive measure against Covid-19. Photo by Ahmed Salahuddin/NurPhoto via Getty Images.*

In Thailand, a 2020 UNDP/APTN survey of 55 LGBT individuals across Thailand found that 60% had not received any government assistance.¹⁰³ In Indonesia, a survey of 300 LGBTI people conducted by the Crisis Response Mechanism (CRM) Consortium found that 51% of respondents had not received any social support from the government; and those who tried to access even basic food aid, faced challenges relating to stigma, discrimination, and lack of gender-affirming legal identification.¹⁰⁴

There are also reports that even where support was provided it was not appropriate or sufficient for transgender people's needs. In India, transgender people reported that they received government rations only once or twice during the entire lockdown period.¹⁰⁵ A 2020 survey undertaken with 80 hijras¹⁰⁶ from across the eight divisions of Bangladesh found that nearly 74% of respondents had received food aid after the first lockdown - usually a package of rice, pulses and oil.¹⁰⁷ Despite this, 81% of respondents said they had had to reduce the size of their meals and 76% reported reducing the number of meals they ate.¹⁰⁸ A 2021 report cites the founder of a Bangladeshi transgender organisation who stated that the monthly food aid provided was not sufficient and lasted only one week.¹⁰⁹ Interviews conducted by Amnesty International with transgender people in Bangladesh confirmed this. In interviews accompanying a 2020 survey with transgender persons in Dhaka, Bangladesh, respondents stated that they needed money (and access to work opportunities), and not just food.¹¹⁰

The low levels of coverage of these relief measures were likely driven by a range of factors - relating to transgender

¹⁰³ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited). www.ohchr.org/sites/default/files/Documents/Issues/SexualOrientation/IESOGI-COVID-19/CSOs/APTN.docx.

¹⁰⁴ UNAIDS, "How the LGBTI community is surviving the COVID-19 pandemic in Indonesia", 25 May 2021, www.unaids.org/en/resources/presscentre/featurestories/2021/may/20210525_vanessa-chaniago-indonesia.

¹⁰⁵ Centre for Law & Policy Research (CLPR), "Exclusion Amplified: A Report", 2020 (previously cited).

¹⁰⁶ Local term, for instance see Kalra, G., "Hijras: the unique transgender culture of India, International Journals of Culture and Mental Health", Volume 5, Issue 2, pp. 121–126, www.tandfonline.com/doi/full/10.1080/17542863.2011.570915?journalCode=rccm20.

¹⁰⁷ Edge Effect, "We Don't Do A Lot For Them Specifically", August 2021, www.calpnetwork.org/wp-content/uploads/2021/08/WDDALFTS_FullReport_Web.pdf.

¹⁰⁸ Ibid.

¹⁰⁹ Ibid.

¹¹⁰ Bandhu Social Welfare Society, Quick Survey for Community Response for TG and Hijra, 18 May 2020, <https://www.bandhu-bd.org/covid-19-quick-survey-for-community-response-for-tg-and-hijra-2/>.

people’s awareness of the support available, unclear or restrictive eligibility criteria, the need for identity documents, an emphasis on centralised databases, and a reliance on digital systems that excluded those without legally recognised identities and access to mobile phones and bank accounts. These are discussed below.



↑ NEPAL, 2020 – Relief drives being organised by transgender organisations as part of the APTN Covid-19 Community Support Fund. Photo APTN

UNCLEAR OR DISCRIMINATORY ELIGIBILITY REQUIREMENTS

In some cases, the eligibility criteria for relief measures were unclear and/ or discriminatory. Transgender men in India, Pakistan and Sri Lanka, for example, told Amnesty International that transgender men were not explicitly recognised in government support schemes for daily wage workers.¹¹¹

“...there is confusion about who qualifies as trans and who does not. For example, if I have not had surgery, can I still get support? The government’s inability to come up with unambiguous definition of trans has made it very confusing for them.”

A gender queer activist in India in an interview with Amnesty International, April 2021

¹¹¹ Amnesty International’s interviews with trans activists in India, Pakistan and Sri Lanka, 2020 and 2021

APTN partners in the Philippines reported that the government's Social Amelioration Programme (SAP) – which aims to support poor families, people with disabilities, older people, pregnant women, single parents and displaced informal workers – requires recipients to be legally married. This excluded transgender people (as well as people who were single, unmarried cis couples, and people in same sex relationships).¹¹²

“I have friends living together, they’re a group of trans people and gays who jointly own a salon. They didn’t receive their SAP [The Social Amelioration Programme]¹¹³ because they were not [considered to be] a unit. According to the barangay [local administrative unit] official, a family is composed of a man and a woman and children.”

A transgender woman in Bangladesh in an interview with Amnesty International, April 2021

¹¹² Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

¹¹³ The Social Amelioration Program (SAP) is the Philippine government's emergency subsidy programme for families from low-income and most vulnerable sectors that are severely affected by Covid-19, for instance see: The Borgen Project, “How COVID-19 has affected poverty in the Philippines”, 5 April 2021, borgenproject.org/tag/social-amelioration-program-sap.

Philippines: National and local government initiatives

Amnesty International wrote to the governments of Bangladesh, India, Indonesia, Malaysia, Pakistan, the Philippines, and Thailand requesting information on the long-term and crisis-focussed social protection measures available to transgender people. Only the Philippines government provided a response, and some of the information provided is noted below.

The Philippines' Department of Labour and Employment (DOLE) highlighted two initiatives - temporary employment schemes; and vocational training grants for displaced, underemployed and seasonal workers in the informal sector, including LGBTI individuals, who were impacted by the pandemic.

According to the DOLE, both programmes reached a total of over 5.2 million beneficiaries from when pandemic-related restrictions began in 2020 until the first quarter of 2022. However, no data on the transgender people who benefited, or information on programmes targeted to transgender people and other LGBTI individuals was provided.

The Association of Southeast Asian Nations (ASEAN) recorded a number of relief initiatives offered by local government units for LGBTI people in three smaller jurisdictions in the country. These include:

- Including same-sex partners with children in the SAP for families in Pasig City (National Capital Region);
- Providing LGBTI people cash grants if they were ineligible for SAP because they did not have spouses or children in Iloilo City (Western Visayas, Region VI); and
- Reopening the Protection Centre facilities of the Quezon City General Hospital to respond to the increased cases of domestic violence experienced by women, children, and LGBTI people in Quezon City (National Capital Region)".¹¹⁴

However, no further information on the extent to which these initiatives actually reached LGBTI and transgender people is provided.

IDENTITY DOCUMENT REQUIREMENTS AS A KEY BARRIER

In many countries in the region, Covid-19 relief measures were linked to official ID documents, creating an almost insurmountable barrier for the many transgender people without such documents.¹¹⁵ As with social protection schemes more generally, transgender people - who often don't have ID cards at all, or only have those which show their sex assigned at birth, are often estranged from their families, living away from their birthplaces, and working in the informal sector - were unable to meet eligibility requirements. Transgender people, along with others working in the informal sector, were often also unable to provide documented proof of income.¹¹⁶

According to some reports from Indonesia, transgender people not living at their registered place of residence found they could not access local relief initiatives.¹¹⁷ In Pakistan, where emergency cash transfers were delivered after registration via mobile phone, transgender persons who did not have the ID documents required to obtain mobile

¹¹⁴ ASEAN SOGIE Caucus (ASC), "Submission for the thematic report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity for the October 2020 session of the UN General Assembly", 2020, www.ohchr.org/sites/default/files/Documents/Issues/SexualOrientation/IESOGI-COVID-19/CSOs/ASEAN.docx.

¹¹⁵ APTN, COVID-19's Impact on Human Rights (previously cited); Divya Trivedi, "COVID-19 and the plight of the transgender community", Frontline, 29 April 2020, <https://frontline.thehindu.com/dispatches/article31463945.ece>

¹¹⁶ United Nations Development Programme (UNDP) Regional Bureau for Asia and the Pacific (RBAP), "COVID-19 amplifying inequalities for transgender people", 15 May 2020 (previously cited).

¹¹⁷ Coconuts Jakarta, "Please, don't underestimate us': Community-led initiatives are helping Indonesian transwomen survive", Undated, coconuts.co/jakarta/features/please-dont-underestimate-us-community-led-initiatives-are-helping-indonesian-transwomen-survive-covid-19.

phones and SIM cards were excluded.¹¹⁸

A transgender man in India explained that many transgender men in the country do not apply for legal gender recognition due to the fear of stigma and violence associated with ‘coming out’ and therefore still have their sex assigned at birth registered on their ‘Aadhaar’ identity cards.¹¹⁹ The APTN’s partners in India, Indonesia, Nepal, the Philippines and Sri Lanka reported that many transgender people there were unable to register for relief support because of the difference between their identity documents and the way they physically presented.¹²⁰

Some local and national governments recognised these difficulties, and waived ID requirements. In Indonesia, the requirement for a national ID card to access the Village Cash Transfers Scheme was waived on condition that local teams could verify the applicant’s identity.¹²¹ In Nepal, after lobbying by a group of NGOs that included transgender organisations, the Supreme Court decided that government relief distribution would not require citizenship or other legal documents.¹²²

THE RISK OF VIOLENCE, HARASSMENT AND DISCRIMINATION

The impact of enhanced police powers to enforce public health measures, scapegoating of transgender people, and increase in the harassment of LGBTI people during the pandemic have been documented globally as well as in Asia.¹²³ Thus, the risks involved in trying to access social assistance measures drove many transgender people to exclude themselves to ensure their safety.¹²⁴

In Malaysia, for example, a 2021 report¹²⁵ notes that the government’s *Prihatin* and *Penjana* support packages required applicants to be physically present in order to enrol, creating risks for transgender people who were regularly subject to discrimination and humiliation by government officials.¹²⁶ A Filipino transgender activist Amnesty International spoke to alleged that officials withheld basic relief items from transgender people because of prejudice or disapproval.¹²⁷ In India, there were multiple reports of transgender persons being harassed at ration shops and denied free rations when they were unable to present ration cards.¹²⁸

The emphasis on registering people’s details on centralised databases in order to enrol them onto relief schemes created specific risks of surveillance, monitoring, and police harassment of transgender people. In the Philippines, the government’s roll out of a national ID registration system intended to support access to government services, including pandemic support, required transgender people to use their name and sex assigned at birth.¹²⁹ Many transgender people were reluctant to register their details for fear that the paperwork and police checks involved would expose them to discrimination, harassment and possibly violence.¹³⁰

¹¹⁸ HelpAge International, “A Review of Inclusion of Older People in Ehsaas Emergency Cash Programme”, April 2020, https://socialprotection.org/sites/default/files/publications_files/Review%20of%20Inclusion%20of%20Older%20People%20in%20Ehsaas%20Emergency%20Cash%20Programme.pdf.

¹¹⁹ Identity document in India. As noted in the APTN’s submission to UN Independent expert’s report: “The Central government has issued several relief packages, however, access to an Aadhaar card is a prerequisite to receive the relief support and food rations. Many transgender people do not have legal identity documents and an Aadhaar card, and therefore, are not able to access the public relief support. Even in normal circumstances, lack of access to Aadhaar cards serves as a huge barrier to access basic services including health”, APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited). The quote provided by a transgender man in India was to Amnesty International in an interview conducted in April 2021.

¹²⁰ Sangita Singh, “Trans Resilience Report – Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

¹²¹ Roelen, K and Carter, B, 2022, ‘Social Assistance and Covid-19: Reaching the Furthest Behind First?’, Institute of Development Studies (previously cited).

¹²² Nazariya: A Queer Feminist Resource Group, “The impact of COVID-19 on the human rights of LGBT persons, communities and/or populations”, 2020, www.ohchr.org/en/calls-for-input/report-impact-covid-19-pandemic-human-rights-lgbt-persons-0 (submission to UN report); UN Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity, Report: Violence and discrimination based on sexual orientation and gender identity during the coronavirus disease (COVID-19) pandemic, 28 July 2020, UN Doc. A/75/258.

¹²³ Human Rights Watch, “Global Trends in LGBT Rights During the Covid-19 Pandemic”, 24 February 2021, www.hrw.org/news/2021/02/24/global-trends-lgbt-rights-during-covid-19-pandemic.

¹²⁴ Khan, S.I. et al., “Living on the Extreme Margin: Social Exclusion of the Transgender Population (Hijra) in Bangladesh”, August 2009, Journal of Health, Population, and Nutrition, Volume 27, Issue 4, p. 449, www.ncbi.nlm.nih.gov/pmc/articles/PMC2928103.

¹²⁵ “Leave No One Behind: Malaysian Transgender at Risk”, 2021 (previously cited).

¹²⁶ Ibid.

¹²⁷ Amnesty International interview with a transgender activist in the Philippines, 2021

¹²⁸ Centre for Law & Policy Research (CLPR), “Exclusion Amplified: A Report”, 2020 (previously cited).

¹²⁹ Privacy International, “My ID, my identity? The impact of ID systems on transgender people in Argentina, France and the Philippines”, 15 January 2021, privacyinternational.org/long-read/4372/my-id-my-identity-impact-id-systems-transgender-people-argentina-france-and.

¹³⁰ UNDP, “COVID-19 amplifying inequalities for transgender people” (previously cited). This was also reported to Amnesty International in our interviews with trans activists in India in 2021.

A 2020 APTN briefing reports that the National Institute of Social Defense (NISD) in India required transgender people to register their bank details and biometric data in order to receive the payment. Local transgender organisations voiced concerns to the government that this data might be used against transgender people in the future, with particular risks for those of intersectional identities – such as refugee, Dalit and Muslim transgender people.¹³¹

Also in India, in response to the Telangana High Court's order that transgender people be provided food and medicines without the requirement of a ration card, the Telangana state government directed that ration kits be provided to transgender people through the police (often with media present) rather than through the public distribution shops that were present in hard-to-reach areas – adding to a climate of fear. Of Telangana's 58,000 transgender persons, only 2,000 were reported to have received free rations provided by the government.¹³²

In Malaysia, there are also reports that the government's Islamic Department offered some transgender activists relief funds that they could disburse to their communities in return for personal data about transgender people, including information about their sexual orientation or gender identity.¹³³ "Ex-LGBTI" people and LGBTI people living in poverty were also offered relief support by local religious departments on similar conditions. ASEAN's submission to the United Nations Independent Expert on Protection against Violence and Discrimination based on Sexual Orientation and Gender Identity notes the use of financial incentives in Malaysia to "rehabilitate" LGBTI people.¹³⁴

A lack of effective and confidential grievance and accountability measures meant that many transgender people were also unable to voice their needs or complaints safely.¹³⁵ An Amnesty International report published in May 2022 notes that in Indonesia LGBTI people did not demand support for fear of compromising their identity and incurring further stigma and discrimination.¹³⁶

Transgender people's exclusion from accessible and adequate relief measures highlights the need to strengthen data systems and evidence-based understanding of the needs of transgender people so that in future crises, governments are better able to respond to their needs, identify and reach them in a timely manner, anticipate challenges in implementation, and put in place risk mitigation strategies.

This should include developing robust partnerships and collaboration with transgender organisations and activists on identifying changing needs, designing and implementing safe, dignified and effective registration approaches, and establishing accessible and confidential grievance mechanisms. In particular, governments should consider and build on examples of good practice in key areas – such as waiving ID requirements for transgender groups. Payment modalities should not be overly reliant on digital financial services and ensure that transgender people can receive payments in other ways, such as vouchers, prepaid cards or cash distribution.

¹³¹ Asia Pacific Transgender Network (APTN), "Written Submission in response to the Joint Questionnaire by the UN Special Rapporteurs" (previously cited).

¹³² Centre for Law & Policy Research (CLPR), "Exclusion Amplified: A Report" (previously cited).

¹³³ Malaysia Dateline, "Minister of Religion donates aid for LGBT", 26 March 2020, <https://malaysiadateline.com/menteri-agama-sumbang-bantuan-untuk-lgbt/>

¹³⁴ Such state-sponsored anti-LGBT programs have been recorded such as in the Universal Periodic Review of Malaysia in 2019. This has been widely reported: Europe Solidaire Sans Frontières, "Malaysia: Evidence of state-sponsored discrimination against LGBT persons", April 2019, <http://www.europe-solidaire.org/spip.php?article45639> / <https://www.malaysiakini.com/letters/472951> / <https://www.queerlapis.com/evidence-of-state-sponsored-violence-and-discrimination-against-lgbt-persons-in-malaysia/>

¹³⁵ Roelen, K and Carter, B, 2022, 'Social Assistance and Covid-19: Reaching the Furthest Behind First?', Institute of Development Studies (previously cited).

¹³⁶ Amnesty International, "There is no help for our community": The Impact of States' COVID-19 Responses on Groups Affected by Unjust Criminalization (Index: POL 30/5477/2022) (previously cited).

4.3 ACCESS TO HEALTHCARE

THE RIGHT TO HEALTH

International human rights law and standards establish that States must respect, protect and fulfil the right to life and the right to health.¹³⁷ Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) recognizes “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.”¹³⁸

General Comment 20 of the Committee on Economic, Social and Cultural Rights (CESCR) relating to non-discrimination also notes that “sexual orientation should not be a barrier to realising Covenant rights” and lists gender identity as being recognized “among the prohibited grounds of discrimination”.¹³⁹ General Comment 22 of the CESCR notes that “the right to sexual and reproductive health is an integral part of the right to health enshrined in article 12 of the International Covenant on Economic, Social and Cultural Rights.” The Yogyakarta Principles¹⁴⁰ also reflect the right to the highest attainable standard of physical and mental health, “without discrimination on the basis of sexual orientation or gender identity”. Sexual and reproductive health is listed as being a “fundamental aspect of this right.”¹⁴¹

States must abide by principles of non-discrimination and equal access in the enjoyment of all rights. In the context of providing non-discriminatory and equal access to healthcare for transgender people, this applies to treatment that discriminates, excludes and stigmatizes people because of their physical characteristics, chromosomes and hormones.¹⁴² Each state must use the maximum of its available resources to take deliberate, concrete and targeted actions for ensuring equal and non-discriminatory access to healthcare and gender-affirming treatment.¹⁴³

Prior to the onset of the pandemic, many transgender people already faced disparities in access to healthcare because of higher poverty rates and cost barriers, discriminatory attitudes and behaviours by healthcare staff, and a lack of gender-affirming care and appropriately trained providers.

In a 2020 study on the impact of transphobia on health more than half the survey respondents in Viet Nam, and more than a third of participants in Nepal and Thailand reported delaying general healthcare treatment due to anticipated discrimination in healthcare settings.¹⁴⁴ Evidence from Nepal and Indonesia shows that particular groups, such as transgender people living with HIV were more likely to report that they had experienced what is described as “gender minority stress”¹⁴⁵ - that is, exposure to the unique social stressors such as stigma and prejudice that gender

¹³⁷ Amnesty International, “How’s your country’s Covid-19 vaccine roll-out? Five questions to check for equality and non-discrimination”, 17 December 2021, <https://www.amnesty.org/en/documents/pol30/5114/2021/en/>

¹³⁸ International Covenant on Economic, Social and Cultural Rights, <https://www.ohchr.org/en/professionalinterest/pages/cescr.aspx>

¹³⁹ General Comment no. 20 (2009) - Non-discrimination in Economic, Social and Cultural Rights - E/C.12/GC/20

¹⁴⁰ The Yogyakarta Principles were drafted in Yogyakarta, Indonesia, by a group of international human rights experts. As international principles, they pertain to sexual orientation and gender identity (SOGI). They arose as a response to the documented cases of abuse on the grounds of SOGI. In November 2017, the Yogyakarta Principles plus 10 were adopted to include the intersections between sexual orientation, gender identity and sex characteristics. See: Brown, D., “Making Room for Sexual Orientation and Gender Identity in International Human Rights Law: An Introduction to the Yogyakarta Principles”, 2010, Michigan Journal of International Law, Volume 31, Issue 4, pp. 821-879, <https://www.heinonline.org/HOL/LandingPage?handle=hein.journals/mjil31&div=24&id=&page=:> “The Yogyakarta Principles”, <https://yogyakartaprinciples.org/>

¹⁴¹ The Yogyakarta Principles, Principle 17, <https://yogyakartaprinciples.org/principle-17/>

¹⁴² International Commission of Jurists (ICJ), “The Yogyakarta Principles Plus 10 - Additional Principles and State Obligation on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Expression and Sex Characteristics to Complement the Yogyakarta Principles”, 10 November 2017, yogyakartaprinciples.org/principles-en/yp10_

¹⁴³ Ibid.

¹⁴⁴ Asia Pacific Transgender Network (APTAN), “The Cost of Stigma: Understanding and Addressing Health Implications of Transphobia and Discrimination on Transgender and Gender Diverse People. Evidence from a TransLed Research in Nepal, Indonesia, Thailand, and Vietnam. Bangkok: Asia Pacific Transgender Network (APTAN), 2020.

¹⁴⁵ “Gender Minority Stress and Resilience frames negative health outcomes for transgender and gender diverse people as the direct and indirect result of stress specifically associated with belonging to a gender minority”. For a more detailed explanation of this phrase see: Asia Pacific Transgender Network (APTAN), “The Cost of Stigma: Understanding and Addressing Health Implications of Transphobia and Discrimination on Transgender and Gender Diverse People: Evidence from Community-led Research in Nepal, Indonesia, Thailand and Vietnam” 2020, <https://www.aidsdatahub.org/resource/cost-stigma-understanding-and-addressing-health-implications-transphobia-and->

minorities face - likely as a result of discriminatory treatment in the health sector.¹⁴⁶

There is limited data on the impact of the pandemic on transgender groups' access to healthcare globally as well as in Asia. However, transgender activists as a key area of concern in Amnesty International's interviews with them, emphasised that the effects on transgender people in countries across Asia and the Pacific have been profound.¹⁴⁷ Older transgender people, those living with HIV,¹⁴⁸ in poverty, or those that fall under multiple medical risk categories were among those most severely impacted.¹⁴⁹

Most governments around the world reassigned health resources at different stages of the pandemic to respond to Covid-19-related cases. This re-prioritization of resources adversely impacted access to care for other health conditions.¹⁵⁰ The impact on livelihoods also made healthcare less affordable for many groups in the region.

Transgender people often carry a higher burden of health conditions such as HIV¹⁵¹, need ongoing gender-affirming care, and are exposed to multiple mental health stressors. The loss of income that they experienced during the pandemic, their exclusion from social protection measures, existing discrimination in healthcare settings, and the lack of family and support systems, meant that this curtailment in the availability of affordable care created significant risks to their general and Covid-19 related health outcomes.¹⁵²

ELEVATED RISK FROM COVID-19 AND LIMITED ACCESS TO CARE

The pre-existing disadvantages of transgender groups put them at significant risk of contracting Covid-19 and experiencing adverse health outcomes.¹⁵³ A global study of over 5,000 transgender people from 63 high income and upper middle income countries found that more than 50% of respondents had a pre-existing condition associated with a severe Covid infection.¹⁵⁴ In India, the prevalence of chronic conditions such as diabetes, TB, asthma and HIV, as well as high levels of tobacco and alcohol consumption amongst transgender women in India were reported to have made Covid-19 related complications more likely.¹⁵⁵

Low levels of literacy amongst transgender people in some countries also made many of them less able to access health information, including on how to avoid Covid-19, and how and where to access health services.¹⁵⁶ Crowded and unsanitary living conditions also made it difficult for many transgender people to avoid infection. Livelihoods that require spending time in public spaces or in close proximity to others such as engaging in sex work made social distancing and recommended handwashing practices impossible, increasing their risk of contracting Covid-19.¹⁵⁷

A lack of data on transgender people meant that their health needs remained invisible and overlooked. Currently most Covid-19 surveillance systems only reflect binary cisgender identities, and so it is not known whether Covid-19 testing

¹⁴⁶ Ibid.

¹⁴⁷ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

¹⁴⁸ Data recorded in Asia and the Pacific shows that trans women are disproportionately affected by HIV; although similar data is unavailable for transgender men. UNDP, Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific (previously cited), p. 81

¹⁴⁹ Singh, S., "Trans Resilience Report – Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic" (previously cited).

¹⁵⁰ World Health Organisation, Essential health services face continued disruption during COVID-19 pandemic, 7 February 2022, <https://www.who.int/news/item/07-02-2022-essential-health-services-face-continued-disruption-during-covid-19-pandemic>

¹⁵¹ Stutterheim, S. E. et al., "The worldwide burden of HIV in transgender individuals: An updated systematic review and meta-analysis", December 2021, PLoS ONE, Volume 16, Issue 12, journals.plos.org/plosone/article?id=10.1371/journal.pone.0260063.

¹⁵² ASEAN SOGIE Caucus (ASC), "Submission for the thematic report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity for the October 2020 session of the UN General Assembly" (previously cited); Asia Pacific Alliance for Sexual and Reproductive Health and Rights, "Submission to the Report of the Special Rapporteur on the Right to Physical and Mental Health", 10 June 2021, https://www.ohchr.org/sites/default/files/Documents/Issues/Health/sexual-reproductive-health-covid/CSOs/ngo_apa.pdf; Mitini Nepal, "Elderly and Ageing LGBTI in Nepal and COVID-19- One Person's Story", <https://mitininepal.org.np/elderly-and-ageing-lgbti-in-nepal-and-covid-19-one-persons-story/>.

¹⁵³ For instance, see Goldie, P. D. and Chatterjee, I., "Examining the elevated risk of COVID-19 in transgender communities with intersectional lens", September 2021, Volume 1, issue 10, www.ncbi.nlm.nih.gov/pmc/articles/PMC8492083.

¹⁵⁴ Koehler, A. et al., "How the COVID-19 pandemic affects transgender health care - A cross-sectional online survey in 63 upper-middle-income and high-income countries", October 2021, International Journal of Transgender Health, pp. 1-14, www.tandfonline.com/doi/full/10.1080/26895269.2021.1986191.

¹⁵⁵ Pandya, A., and Redcay, A. "Impact of COVID-19 on Transgender Women and Hijra: Insights from Gujarat, India", June 2022, Journal of Human Rights and Social Work, Volume 7, Issue 2, pp. 148-157, link.springer.com/article/10.1007/s41134-021-00184-y#citeas.

¹⁵⁶ Chakrapani, V. et al., "The impact of COVID-19 on economic well-being and health outcomes among transgender women in India" (previously cited); Dasgupta, S., Sinha, S and Roy, R., "We Are Helpless, Hopeless and Living in Despair": Impact of COVID-19 on the Overall Health and Well-being and Participation of the Transgender Community in India", December 2021, The International Journal of Community and Social Development, Vol. 3, Issue 4, journals.sagepub.com/doi/full/10.1177/25166026211050743.

¹⁵⁷ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

strategies reached transgender and non-binary populations, particularly in contexts where those populations are stigmatised within healthcare systems.¹⁵⁸ In interviews with Amnesty International, transgender activists in India and Nepal (and a 2022 study in Bangladesh¹⁵⁹) reported that prior experiences of discrimination, distrust of health providers, the prospect of having to contend with the additional stigma of being Covid-positive, and the fear of demeaning treatment if hospitalisation was required deterred transgender people from accessing healthcare during the pandemic, thus reducing their access to Covid-19 testing, vaccinations and healthcare.¹⁶⁰

A 2020 study based on pre-Covid community led research conducted in Nepal, Indonesia, Thailand and Viet Nam found that more than half the survey participants in Viet Nam, and more than a third in Nepal and Thailand had delayed seeking care because of expected discrimination, and discomfort at being asked invasive questions. Sex workers, transgender women and older people were most likely to delay treatment for this reason.¹⁶¹

“One hijra I know got Covid early in the pandemic but she didn’t want to go to the hospital. You know how we’re treated there. They didn’t know if they should put her in the men’s ward or the women’s ward. The doctors treat us terribly and don’t check us properly. Nurses just throw the medicines on the side and refuse to hand them to us. Whenever we go to the hospital the doctors and nurses make faces when they have to look at us, and treat us like we’re the real illness. We just have to deal with it.”

A transgender woman in Pakistan in an interview with Amnesty International, September 2021

As with relief and economic hardship measures, the lack of legal gender recognition also proved a barrier to accessing Covid-19 related healthcare and services. A transgender activist speaking at the East and Southeast Asia Trans Communities forum in July 2021 said that in South Korea, many transgender people were unable to produce the required ID cards that matched their gender identities in order to access routine Covid-19 testing.¹⁶² For many transgender people, accessing Covid-19 vaccinations in Bangladesh without ID cards was similarly difficult.¹⁶³ There were also news reports that transgender people in Nepal had queued for hours only to be denied a vaccination for not being able to present the required identity documentation.¹⁶⁴

In Indonesia, accessing a Covid-19 vaccination required an electronic identity card (an e-KTP), which could only be obtained by presenting a Family Card, a document issued to the head of the family.¹⁶⁵ Data cited by the ICJ shows that between 50% to 60% of older transgender women do not have an e-KTP. Transgender people wanting their e-KTP to reflect their gender identity have to first obtain an affirmation of their gender from a court, as the e-KTP does not recognize transgender as a category. As stated earlier, this requires providing Indonesian courts with a medical certificate confirming that the applicant has undergone gender affirming surgery or other hormonal treatment, as well as a psychiatric evaluation and witness information.¹⁶⁶

¹⁵⁸ Restar, A. et al., “Prevalence and associations of COVID-19 testing in an online sample of transgender and non-binary individuals”, 2021, [BMJ Global health, Volume 6, Issue 9, gh.bmj.com/content/6/9/e006808.abstract](https://www.bmj.com/content/373/n10263/e006808).

¹⁵⁹ Sifat, R. et. Al., “Effects of COVID-19 on Livelihood, Health, and Psychology of Hijra Population: Insights from Dhaka, Bangladesh”, March 2022, *Journal of Homosexuality*, pp. 1-17, <https://pubmed.ncbi.nlm.nih.gov/35254949/>.

¹⁶⁰ Amnesty interviews conducted in India and Nepal, 2020 and 2021

¹⁶¹ APTN, “The Cost of Stigma: Understanding and Addressing Health Implications of Transphobia and Discrimination on Transgender and Gender Diverse People: Evidence from Community-led Research in Nepal, Indonesia, Thailand and Vietnam”, (previously cited).

¹⁶² South Korean participant at the East and Southeast Asia Trans Communities forum in July 2021

¹⁶³ The Straits Times, “Third in gender, last in line for Covid-19 vaccines? The Daily Star columnist”, 01 October 2021, www.straitstimes.com/asia/south-asia/third-in-gender-last-in-line-for-covid-19-vaccines-the-daily-star-columnist.

¹⁶⁴ Nepal Live Today, “With vaccination cards made mandatory, many women and gender minorities are deprived of public service: For people to receive a proper identification card such as citizenship, they need to have a vaccination card and vice versa, which keeps them in a never-ending loop”, 4 February 2022, www.nepallivetoday.com/2022/02/04/with-vaccination-cards-made-mandatory-many-women-and-gender-minorities-are-deprived-of-public-service.

¹⁶⁵ International Commission of Jurists, “Indonesia: trans women face discrimination in access to COVID-19 vaccines”, 17 May 2021, www.ici.org/indonesia-trans-women-face-discrimination-in-access-to-covid-19-vaccines.

¹⁶⁶ Ibid.



 ↑ DHAKA, BANGLADESH, 2022: Transgender community members wait in a queue to be vaccinated in Central Shaheed Minar, Dhaka. Photo by Sazzad Hossain/SOPA Images/LightRocket via Getty Images.

According to APTN, there are few examples of specific measures by governments to provide access to separate healthcare and quarantine units specifically for transgender people in cases of infection or when the need to self-isolate or seek medical help arose.¹⁶⁷ As noted earlier, often transgender people are discriminated against at the point of registration in hospitals. Transgender people told Amnesty international in interviews that having separate units may have made them more comfortable with seeking medical help for the virus.

DISRUPTIONS TO HIV-RELATED CARE

The pandemic also disrupted HIV treatment and care, with significant consequences for transgender people, who carry a high burden of HIV prevalence. A 2021 global study found that in Asia, transgender women were 68 times more likely to have HIV than the general population.¹⁶⁸

In its Written Submission in response to the Joint Questionnaire by the UN Special Rapporteurs in June 2020, APTN reported that transgender people and others living with HIV in Nepal found it extremely difficult to access antiretroviral (ARV) therapy and hormones because of supply issues, travel restrictions and lockdowns.¹⁶⁹ APTN's 2020 Trans Resilience Report also documented that in Indonesia, people living with HIV were receiving only two weeks' worth of ARV medication (as compared to a month-long dose before the pandemic). They were also required to travel to dispensing hospitals which were also treating Covid-19 patients in order to receive their medication, creating heightened risks of Covid-19 infection for people who were already immuno-compromised.¹⁷⁰

In Pakistan, transgender people living with HIV told Amnesty International that they had found it difficult to access

¹⁶⁷ APTN, "Written Submission in response to the Joint Questionnaire by the UN Special Rapporteurs" (previously cited).

¹⁶⁸ Stutterheim, S. E et al., "The worldwide burden of HIV in transgender individuals: An updated systematic review and meta-analysis", December 2021, PLoS ONE, Volume 16, Issue 12, journals.plos.org/plosone/article?id=10.1371/journal.pone.0260063.

¹⁶⁹ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

¹⁷⁰ Singh, S., "Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic" (previously cited).

antiretroviral therapy at the beginning of the pandemic,¹⁷¹ and were reliant on medical aid and relief efforts by community-based organizations and private charities.¹⁷² In Papua New Guinea the pandemic exacerbated existing challenges - including the inconsistent supply of medication, stock outs, high rates of HIV drug resistance and poverty - in ensuring regular access to antiretroviral medicines.¹⁷³

“Transgender people living with HIV have had a very difficult time. Retrovirals are given monthly. People living with HIV cannot miss out on their monthly dose because the virus can develop immunity which would make its management harder. When trans people had to move provinces or localities during lockdowns, they often found that their local community health clinics weren’t equipped to handle HIV/AIDS patients”.

A transgender woman in the Philippines in an interview with Amnesty International, August 2021

REDUCED ACCESS TO GENDER-AFFIRMING CARE

“The main difficulty transgender men have faced is getting hormone medicines. When their hormone stocks finished, they couldn’t go to the hospital to get medicines because of the curfews. At times they also couldn’t complete the process to get their gender officially recognized because clinics were closed, and surgeries got delayed.”

A transgender man in Sri Lanka in an interview with Amnesty International, March 2021

Access to a range of gender affirming services, including surgery and hormone therapy is critical for transgender people’s physical health and sense of self, particularly at a time of heightened vulnerability and crisis. Alongside other types of healthcare, these were significantly disrupted during the pandemic. In Sri Lanka for example, a 2020 APTN report highlights that gender affirming surgeries were postponed and cancelled, with no information provided about when they might resume.¹⁷⁴

Disruptions in gender-affirming treatment can include a return of features associated with the sex assigned at birth and/or trigger symptoms of depression and anxiety, particularly when experienced alongside social isolation and a lack of support networks, high levels of societal discrimination and harassment, and possibly existing mental health issues (see the section below for more on the impacts on transgender people’s mental health).¹⁷⁵ Various studies, as well as transgender people interviewed by Amnesty International in China, Japan, South Korea and Taiwan highlighted the raft of physical and mental health impacts of interruptions or delays to transgender people’s gender affirming healthcare

¹⁷¹ UNAIDS, “Keeping HIV treatment available in Pakistan during COVID-19”, 15 April 2020, [https://www.unaids.org/en/resources/presscentre/featurestories/2020/april/20200415_pakistan#:~:text=An%20emergency%20stock%20of%20antiretroviral,imports%20of%20medicines%20are%20disrupted.](https://www.unaids.org/en/resources/presscentre/featurestories/2020/april/20200415_pakistan#:~:text=An%20emergency%20stock%20of%20antiretroviral,imports%20of%20medicines%20are%20disrupted.;); Amnesty Interview in Pakistan with two transwomen, 2021

¹⁷² BBC News, “Lives of transgenders in Pakistan affected by coronavirus”, 15 June 2020, <https://www.youtube.com/watch?v=RU46oZ4iGzI>, referenced in APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

¹⁷³ Australian Broadcasting Corporation (ABC) News, “HIV drugs have transformed the lives of people in rich nations. In PNG, the virus is mutating”, 19 June 2020, <https://www.abc.net.au/news/2020-06-20/why-dont-hiv-drugs-work-on-some-people-in-png/12361846#:~:text=In%20PNG%2C%20the%20virus%20is%20mutating,By%20PNG%20correspondent&text=For%20much%20of%20the%20world,reduces%20the%20risk%20of%20transmission.>

¹⁷⁴ Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

¹⁷⁵ Koehler, A. et al., “How the COVID-19 pandemic affects transgender health care - A cross-sectional online survey in 63 upper-middle-income and high-income countries” (previously cited).

during the pandemic.¹⁷⁶

“For some of us who are undergoing medical transitioning or gender-affirming treatments, we have no access to doctors or clinics. Our health is de-prioritized. I was supposed to have my lab tests last year, but it’s almost been a year and I wasn’t able because there were no laboratories available that could cater to me. It’s also been difficult to access hormones and medicine. For those people who have no stock of hormones, they’re having trouble maintaining their transition.”¹⁷⁷

A transgender man in the Philippines in an interview with Amnesty International, March 2021

Hormone therapy is not regulated in many countries across Asia and the Pacific,¹⁷⁸ and people often rely on hormone and other related medicines brought in from other countries.¹⁷⁹ Disruptions in supply from India during the stages of lockdown, for example, affected the availability of hormones in Nepal and Sri Lanka.¹⁸⁰ The closure of community-based organizations in Nepal - often the only places besides private clinics where transgender people could access hormones – further restricted their access to necessary medication.¹⁸¹

Restrictions on travel also affected people who would otherwise have travelled to other countries to obtain gender-affirming healthcare - an important option for transgender people in countries where legal gender recognition is not possible and medical support is unavailable. Transgender people from several countries across Asia told Amnesty International that the closure of Thailand’s borders from 2020 till 2022 – a popular destination for those seeking gender-affirming care¹⁸² – denied them a critical avenue of care and was experienced as a source of significant physical, psychological and emotional distress.¹⁸³

SIGNIFICANT IMPACTS ON MENTAL HEALTH

“Another issue that spiked (during the lockdowns) was mental health. Pre-pandemic, there were already cases of depression and suicide. All these were amplified during the pandemic.”

A transgender woman in the Philippines in an interview with Amnesty International, June 2021

The impact of discrimination and stigma on the mental health of transgender people was a concern long before the arrival of the pandemic.¹⁸⁴ A pre-pandemic study in Nepal, Thailand, Indonesia and Vietnam found that transgender people reported high rates of symptoms of depression and anxiety, as well as a high prevalence of thinking about or attempting suicide. The study found that transgender men in Indonesia and Nepal experienced higher levels of anxiety and depression, and that rates of accessing professional counselling and mental health services were very low across

¹⁷⁶ Amnesty International’s interviews with transgender people in China, Japan, South Korea and Taiwan, 2020 and 2021; Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

¹⁷⁷ Amnesty International interview with a transgender person in the Philippines, March 2021

¹⁷⁸ Thu Anh, “Illegal hormone supply places transgender Vietnamese at risk” (previously cited).

¹⁷⁹ Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

¹⁸⁰ Ibid.

¹⁸¹ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

¹⁸² Bloomberg UK, “How Thailand Became a Global Gender-Change Destination”, 26 October 2015, www.bloomberg.com/news/features/2015-10-26/how-thailand-became-a-global-gender-change-destination?leadSource=verify%20wall.

¹⁸³ Activist in South Korea the East and Southeast Asia Trans Communities forum in July 2021

¹⁸⁴ Health Policy Project, Asia Pacific Transgender Network (APTN), United Nations Development Programme (UNDP), “Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities in Asia and the Pacific” (previously cited).

all four countries.¹⁸⁵

The deepening of structural vulnerabilities during the pandemic as described in this report have likely also acted as additional stressors.¹⁸⁶ Interruptions in gender affirming treatments also had detrimental effects on transgender people's mental health (see the section above for more on this).¹⁸⁷ A 2021 study of 63 countries found, for example, that since the beginning of the pandemic just over 35% of transgender respondents had had suicidal thoughts, and 3.2% had attempted suicide.¹⁸⁸

LGBTI and trans-specific organizations have also recorded further increases in individuals reporting suicidal thoughts, depression, anxiety and other mental health issues since the start of the pandemic.¹⁸⁹ Representatives of LGBTI and transgender rights organizations in Bangladesh, China, India¹⁹⁰, Indonesia, Malaysia, Pakistan, Singapore and Sri Lanka told Amnesty International in interviews that they received a higher volume of calls to their helplines about anxiety and depression amongst transgender people during the pandemic.¹⁹¹

The global evidence shows that transgender people's mental health needs stem from experiences of bullying in school, real or threatened violence in the home, public spaces or workplaces, homelessness, the stress of lifelong exposure to discrimination and harassment, or being forced to undergo conversion therapy.¹⁹²

It is also important to note that the key sources of well-being and resilience for transgender people are members of their own communities. However, transgender people's friends and community leaders and organizations were often subject to the same enhanced vulnerability and economic, social and health challenges during the pandemic. Evidence globally and from Asia shows that the loss of social support resulting from lockdown and social distancing measures deprived transgender people of a critical source of support in the face of discrimination.¹⁹³

It is likely that the continuing effects of Covid-related job and income losses, housing instability, healthcare disruptions, social isolation and the real and perceived intensification of stigma and discrimination will continue to pose barriers to transgender people's access to gender-affirming care and mental health services. This, alongside transgender people's deep-seated lack of trust in the healthcare system – that is borne of historic discrimination and abuse – will serve to magnify risks to their health outcomes.¹⁹⁴

The right to health encompasses non-discriminatory access to health facilities, goods and services, including “the right to seek, receive and impart information and ideas concerning health issues.”¹⁹⁵

¹⁸⁵ APTN, “The Cost of Stigma: Understanding and Addressing Health Implications of Transphobia and Discrimination on Transgender and Gender Diverse People: Evidence from Community-led Research in Nepal, Indonesia, Thailand and Vietnam”, (previously cited).

¹⁸⁶ Akhtar, M. and Bilour, N., “State of Mental Health Among Transgender Individuals in Pakistan: Psychological Resilience and Self-esteem”, December 2019, *Community Mental Health Journal*, Volume 56, pp. 626-634, <https://link.springer.com/article/10.1007/s10597-019-00522-5>; Mizock, L. and Mueser, K. T., “Employment, Mental Health, Internalized Stigma, and Coping With Transphobia Among Transgender Individuals”, 2014, *Psychology of Sexual Orientation and Gender Diversity*, Volume 1, Issue 2, pp. 146–158, psycnet.apa.org/buy/2014-26599-013.

¹⁸⁷ Jarrett B. A. et al., “Gender-affirming care, mental health, and economic stability in the time of COVID-19: a global cross-sectional study of transgender and non-binary people”, 2021, *PLoS one*, Volume 16, Issue 7, journals.plos.org/plosone/article?id=10.1371/journal.pone.0254215; Kia, H. et al., “Impacts of COVID-19 on trans and non-binary people in Canada: a qualitative analysis of responses to a national survey”, July 2022, *BMC Public Health*, Volume 22, Issue 1, link.springer.com/article/10.1186/s12889-022-13684-x.

¹⁸⁸ Koehler, A. et al., “How the COVID-19 pandemic affects transgender health care - A cross-sectional online survey in 63 upper-middle-income and high-income countries” (previously cited).

¹⁸⁹ LGBT Foundation, “Hidden Figures: The Impact of the COVID-19 Pandemic on LGBT Communities in the UK”, May 2020, lgbt.foundation/coronavirus/hiddenfigures; Ormiston, C. K. and Williams, F., “LGBTQ youth mental health during COVID-19: unmet needs in public health and policy”, December 2021, *The Lancet*, Volume 399, Issue 10324, pp. 501-503, [www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)02872-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)02872-5/fulltext); The Trevor Project, “Implications of COVID-19 for LGBTQ Youth Mental Health and Suicide Prevention”, April 2020, www.thetrevorproject.org/blog/implications-of-covid-19-for-lgbtq-youth-mental-health-and-suicide-prevention.

¹⁹⁰ India Ministry of Social Justice and Empowerment, “Government to give assistance of Rs.1500 to each Transgender person in view of Covid pandemic: 8882133897 Helpline number launched for mental health care of Transgender Persons”, 24 May 2021, www.pib.gov.in/PressReleasePage.aspx?PRID=1721277.

¹⁹¹ Amnesty International's interviews conducted with representatives of transgender organizations in Bangladesh, China, India, Indonesia, Malaysia, Pakistan, Singapore and Sri Lanka in 2020 and 2021.

¹⁹² China activist, 2021 East and Southeast Asia Trans Communities forum organized virtually by the Lingnan University Hong Kong, July 2021; Lombardi, E. et al., “Gender Violence: Transgender Experiences with Violence and Discrimination”, 2022, *Journal of Homosexuality*, Volume 42, Issue 1, pp. 89–101, www.tandfonline.com/doi/abs/10.1300/J082v42n01_05; Wilson, C. and Cariola, L. A., 2020, “LGBTQ+ Youth and Mental Health: A Systematic Review of Qualitative Research, *Adolescent Research Review*, 5, pages 187–211, <https://link.springer.com/article/10.1007/s40894-019-00118-w>.

¹⁹³ Burgess, C. M. et al., “Impact of the COVID-19 pandemic on transgender and gender diverse health care” (previously cited); Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

¹⁹⁴ Chakrapani, V. et al., “The impact of COVID-19 on economic well-being and health outcomes among transgender women in India” (previously cited); Columbia University Department of Psychiatry, “The Impact of the COVID-19 Pandemic on the Transgender and Non-Binary Community”, 22 September 2020, www.columbia.edu/psychiatry/news/impact-covid-19-pandemic-transgender-and-non-binary-community.

¹⁹⁵ CESCR, General Comment 14, The Right to the Highest Attainable Standard of Health (Article 12), para 12, <https://www.refworld.org/pdfid/4538838d0.pdf>

Therefore, as critical lessons are learnt about state responsibility during public health crises, states should prioritise issues of distrust and self-exclusion from healthcare by transgender people, and ethnic, racial and indigenous minority groups. This should include sensitising and training healthcare workers to ensure that transgender and gender diverse patients are treated without discrimination; providing health information to transgender people through culturally sensitive messages and appropriate communications channels during future health crises; and by ensuring the participation of people from these communities in designing and supporting health outreach and services that are responsive to the needs of transgender people.¹⁹⁶

¹⁹⁶ Smart, B. D. et al., “Transgender women of color in the U.S. South: A qualitative study of social determinants of health and healthcare perspectives”, 2022, *International Journal of Transgender Health*, Volume 23, Issue 1–2, pp. 164–177, www.tandfonline.com/doi/full/10.1080/26895269.2020.1848691; Vandrevalla, T. et al., “‘It’s possibly made us feel a little more alienated’: How people from ethnic minority communities conceptualise COVID-19 and its influence on engagement with testing”, 2022, *Journal of Health Services Research & Policy*, Volume 27, Issue 2, pp. 141–150, journals.sagepub.com/doi/full/10.1177/13558196211054961.

4.4. HOUSING INSTABILITY/ HOMELESSNESS

“Discrimination against trans people in housing is fairly common in Pakistan. Landlords often demand double the rent from transgender tenants as compared to others. We have documented cases in which real estate agents and landlords even demanded sexual favours or sexually assaulted/raped their transgender tenants. Due to these reasons and overall economic disenfranchisement, transgender people are often forced to live in run down neighbourhoods, industrial areas or squatter houses. This increases their vulnerability to violence. This situation worsened during the pandemic because many more people moved to urban centres to earn a living. Being unable to find housing, most transgender people were forced to live together in small and cramped quarters. This increased their chances of contracting the virus.”

A Pakistani transgender activist in an interview with Amnesty International, August 2022

THE RIGHT TO ADEQUATE HOUSING

Article 11 of the ICESCR recognizes the right of everyone to an “adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions”.¹⁹⁷

The Committee on Economic, Social and Cultural Rights (CESCR) has stated that the right to adequate housing should not be interpreted narrowly but should be seen as the right to “live somewhere in security, peace and dignity.”¹⁹⁸ Article 14 of the Yogyakarta Principles states: “Everyone has the right to an adequate standard of living, including adequate food, safe drinking water, adequate sanitation and clothing, and to the continuous improvement of living conditions, without discrimination on the basis of sexual orientation or gender identity”.¹⁹⁹ Article 15 states that: “Everyone has the right to adequate housing, including protection from eviction, without discrimination on the basis of sexual orientation or gender identity”.²⁰⁰

In 2020, the Special Rapporteur on the Right to Housing noted that the “right to housing must be central to any response to the pandemic, and such norms contain calls for a rights-based response in measures to tackle it. Under international human rights law, the right to adequate housing cannot be subject to any derogation, and thus exceptional circumstances do not allow States to ignore the prohibition on forced evictions or to flout their obligation to protect the right to adequate housing”.²⁰¹

Access to safe and decent housing proved critical during the pandemic, when governments regularly asked citizens to stay at home to protect themselves and others from exposure to infection. According to the Special Rapporteur on the Right to Housing, more than 3.9 billion people (or half of the world’s population), were asked to stay at home by their governments as a pandemic emergency response measure. However, 1.8 billion people were estimated as either not

¹⁹⁷ International Covenant on Economic, Social and Cultural Rights (previously cited) <https://www.ohchr.org/en/professionalinterest/pages/cescr.aspx>

¹⁹⁸ Committee on Economic, Social and Cultural Rights, General Comment 4, The right to adequate housing (Sixth session, 1991), U.N. Doc. E/1992/23, annex III at 114 (1991), reprinted in Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies, U.N. Doc. HRI/GEN/1/Rev.6 at 18 (2003) CESCR General Comment No. 4: The Right to Adequate Housing | Global Health & Human Rights Database globalhealthrights.org

¹⁹⁹ Yogyakarta Principles, Principle 14, <https://yogyakartaprinciples.org/principle-14/>

²⁰⁰ Yogyakarta Principles, Principle 15, <https://yogyakartaprinciples.org/principle-15/>

²⁰¹ UN Special Rapporteur on the right to adequate housing, Report, 27 July 2020 (previously cited).

having a decent home or as living in informal settlements where it was impossible to physically distance.²⁰²

Homelessness and housing instability are highly prevalent amongst transgender people. This is largely driven by stigma – with many families driving transgender or gender diverse individuals out of their homes, transgender people being refused rental accommodation, and being excluded from shelters. Often, they find shelter with other transgender or LGBTI people, where they also find safety, security and the opportunity to forge new relationships with non-traditional families.

Even so, many transgender people find themselves only being able to access inadequate housing. Interviewees told Amnesty International that those living in insecure housing are often at risk of forced evictions, arbitrary increases in rent, and discrimination and harassment from landlords and neighbours. In Jakarta, a rapid assessment conducted in March 2020 by the transgender organisation Sanggar SWARA as part of the civil society led Crisis Response Mechanism (CRM) Coalition²⁰³ indicated that 90% of the transgender women surveyed lived in cramped slums and areas, placing them, along with other residents of informal settlements, at high risk of contracting Covid-19.²⁰⁴

Transgender activists in at least three countries told Amnesty International that transgender people are charged more for accommodation than cisgender people in the same areas.

“Most hijras live in different communities in slums with their gurus. I have heard from some of them that the landlords of the slums take almost three times more money from them than cisgender people. If the price is 1000 taka, from hijras they take 3000 taka. When Covid started there were complaints that landlords weren’t letting them continue living there as they were considered ‘dirty’.”

A transgender woman in Bangladesh in an interview with Amnesty International, April 2021.

The pandemic aggravated the difficulties transgender people experience in accessing safe, affordable and adequate housing.²⁰⁵ Activists in India, Indonesia, the Philippines, Pakistan and Sri Lanka told Amnesty International that transgender people who found themselves unable to pay rent when their incomes declined during the pandemic were often evicted or had to give up their rented accommodation.

²⁰² UN Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context (UN Special Rapporteur on the right to adequate housing), Report, 27 July 2020, UN Doc.A/75/148.

²⁰³ A coalition focusing on crisis management for the LGBTIQI community in Indonesia, see UNAIDS, “Supporting transgender people during the COVID-19 pandemic”, 06 April 2020, www.unaids.org/en/resources/presscentre/featurestories/2020/april/20200406_transgender_covid19.

²⁰⁴ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

²⁰⁵ Oxfam, “Down by the river: Addressing the rights, needs and strengths of Fijian sexual and gender minorities in disaster risk reduction and humanitarian response”, 2018, www.preventionweb.net/publication/down-river-addressing-rights-needs-and-strengths-fijian-sexual-and-gender-minorities.

“ Haseena’s story

We were approached by a transgender woman called Haseena at our office during one of our relief drives during the pandemic.

Haseena used to earn a stable income through dancing at events but lost this income due to lockdowns and a ban on events during the pandemic. She was rejected from all the jobs she applied to due to “problems in her presentation”.

She fell behind on her rental payments and had to resort to occasional sex work. Even though the government had announced waivers on rent at the time, the landlord began harassing her for payment, even asking for sexual favours when she requested an extension. Once he appeared at her door in the middle of the night threatening to evict her. When she failed to pay rent for the third month, the landlord gave her one week’s notice to vacate the quarters, and at the end of the week, came to her quarter with five men who threw her belongings out on to the street.

She called some friends from the community for help. But the entire neighbourhood turned against her saying they did not want her living there as she was engaging in sex work.

She had no choice but to leave.²⁰⁶

A Pakistani transgender activist in an interview with Amnesty International, August 2022

Some transgender people found themselves evicted because landlords feared that groups of transgender people living together would cause the virus to spread. A transgender activist in India told Amnesty International that some people historically perceive transgender people to be “carriers of disease”, and landlords have terminated their rental agreements due to this stigma.²⁰⁷ There are also few avenues of redress and accountability in cases of evictions, further undermining transgender people’s right to housing and ability to live a life of dignity.

As a result, transgender people who were unable to find shelter with friends, family or their extended networks during the pandemic became homeless.²⁰⁸ The International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA) reported in July 2020 that homelessness and unemployment disproportionately affected queer youth during the pandemic.²⁰⁹

In many countries across Asia, transgender refugees, asylum seekers and migrants also faced particular barriers in accessing their rights to safe shelter, housing, and basic sanitation and hygiene facilities. These were heightened during the pandemic when restrictions were placed on movement and travel.²¹⁰

²⁰⁶ Transgender activist from Pakistan in an interview with Amnesty International in August 2022. She went on to tell us that Haseena was helped by other transgender people when she was evicted. Later she found accommodation in the outskirts of Lahore. The trans activist referred to organisation Have only Positive Expectations (HOPE), which she said provided assistance to over 300 trans individuals to make rental payments, buy food items during the initial COVID-19 lockdowns, and also distributed food packages.

²⁰⁷ Amnesty International’s interview with Indian transgender activist in April 2021. Some states, for example the state of Bihar in India were reported to have introduced schemes to provide shelter to transgender persons during the pandemic, but it is not known how many trans people actually benefitted from these schemes, The Wire, “The COVID-19 Pandemic has had a Debilitating Effect on Transgender People”, 18 July 2021, thewire.in/lgbtqia/the-covid-19-pandemic-has-had-a-debilitating-effect-on-transgender-people.

²⁰⁸ Adnan, H. and Esthappan, S., “Trans and hijra lives in the Covid-19 era”, March 2021, pp. 14–15, dspace.library.uu.nl/bitstream/handle/1874/415455/Hossain_et_al._2021_final.pdf?sequence=1; Ganguly D. and Singh, R., “‘Hum Bhi Hai Insaan’: The Transgender Humanitarian Crisis during the Covid-19 Pandemic in India”, April 2021, Intersections: Gender and Sexuality in Asia and the Pacific, Issue 45, intersections.anu.edu.au/issue45/ganguly.pdf.

²⁰⁹ ILGA, “Don’t let the pandemic marginalize LGBTIQ people further”, 21 July 2020, <https://ilga.org/dont-let-the-pandemic-marginalize-LGBTIQ-people-further>.

²¹⁰ APTN, “Written Submission in response to the Joint Questionnaire by the UN Special Rapporteurs”, pp. 3-4 (previously cited).



↑ NEPAL. Blue Diamond Society provided support to transgender refugees by providing food packages and taking part in an advocacy campaign “Enough is Enough”. Photograph provided by APTN.

Transgender people in insecure or inadequate housing are also at risk of a range of other human rights violations and abuses, including the risk of harassment and violence on the street and by state authorities. APTN’s 2020 Trans Resilience report notes that in Malaysia homeless transgender people were forced into temporary shelters by state authorities, from where they were unable to leave. The shelters were sex segregated and transgender women were placed with cisgender men and only allowed to use the male bathrooms.²¹¹

This cycle of precarious and informal housing; forced evictions; discrimination by landlords through unfair rental arrangements; homelessness and exposure to violence will continue to be repeated unless critical lessons are learned from this period and adequate protections put in place. These protections must include prioritising the right to housing generally, as well as by prioritising it as a key element of response and recovery measures to future public health, climate and conflict crises.²¹²

Amnesty International reiterates its previous calls,²¹³ as well as those made by transgender organizations on the right to adequate housing.²¹⁴ These are that governments must halt and outlaw forced evictions, make social housing available where required, provide emergency housing in situations of violence and abuse, and provide support to those struggling with housing costs.²¹⁵

²¹¹ Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

²¹² UN Special Rapporteur on the right to adequate housing, Report, 27 July 2020 (previously cited).

²¹³ Amnesty International, “COVID-19 and the Right to Housing: Submission to the UN Special Rapporteur on Adequate Housing” (Index: IOR 40/2626/2020), 1 July 2020, www.amnesty.org/en/documents/ior40/2626/2020/en.

²¹⁴ Boglarka Fedorko, Anwar Ogrm and Sanjar Kurmanov, Impact assessment COVID-19 and trans people in Europe and Central Asia (previously cited).

²¹⁵ Ibid.

4.5. DOMESTIC VIOLENCE DURING LOCKDOWNS

"Many trans people had to return home because of financial difficulties during the pandemic. This led to conflicts with their families, especially for trans youth who had been rejected by them previously."

A panellist from Viet Nam at the 2021 East and Southeast Asia Trans Communities forum.²¹⁶

Many transgender people experience high rates of violence – from the state, at work, within healthcare settings, on the street, and within the home. This report has already documented the risks of violence and harassment that transgender people faced in accessing relief support and services during the pandemic.

According to the International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA), quarantine, isolation and lockdown measures also put transgender people, and especially transgender youth, at increased risk of violence, harassment and abuse from family members and partners.²¹⁷ Violence and harassment within the home can take the form of beatings, verbal and psychological abuse, surveillance of their gender expression, isolation and pressure to marry.²¹⁸

The 2020 United Nations Development Programme (UNDP)/Asia Pacific Transgender Network (APTN) survey on the impact of Covid-19 on LGBT people in Thailand found that around 14% of respondents had experienced increased intimate family, gender-based or economic violence during the pandemic.²¹⁹ A 2020 survey of LGBTI adolescents and youth in South-East and East Asia, 65.4% of whom were still living at home with parents, found that many were concerned about backlash from families should their identities be disclosed to them, especially as they could not access outside support systems during the pandemic.²²⁰ A 2020 survey carried out in Viet Nam on the impact of Covid-19 on 923 Vietnamese LGBTI people, revealed that conflicts within the family were more likely to occur in situations where there were younger LGBTIQ and transgender women.²²¹

Transgender individuals who found themselves unable to afford rent and could not access shelters often had to return to their birth families, many of whom were not supportive of their gender identity. Those who were in the process of transitioning and had not yet disclosed this to their families, found themselves at particular risk of harassment and abuse by their families.²²²

"Those transmen who were working in the urban areas had to return to their homes to their parents. It was a problem because some of them hadn't told their parents they were going through the [physical transition] process. It was very difficult for them to go back home with their new appearance. Some of them were scolded and treated very badly. They called me and repeatedly told me I don't want to stay with my parents. I would rather kill myself."

A transgender activist in Sri Lanka in an interview with Amnesty International, May 2021

Transgender men interviewed by Amnesty International spoke of how there were few shelters for them, and so many had to go back to their birth homes, where they were still treated according to their sex assigned at birth, and as a

²¹⁶ 2021 East and Southeast Asia Trans Communities forum organized virtually by the Lingnan University Hong Kong, July 2021

²¹⁷ ILGA, "Don't let the pandemic marginalize LGBTIQ people further" (previously cited).

²¹⁸ Nazariya: A Queer Feminist Resource Group, "The impact of COVID-19 on the human rights of LGBT persons, communities and/or populations", 2020 (previously cited).

²¹⁹ APTN, Written Submission in response to the Joint Questionnaire by the UN Special Rapporteur (previously cited).

²²⁰ Bionat, J.F., "Reflections from #CopingWithCOVID: Lives of LGBTIQ youth during the lockdowns", UNICEF, 28 May 2020, <https://blogs.unicef.org/east-asia-pacific/reflections-from-copingwithcovid-lives-of-lgbtiq-youth-during-the-lockdowns/>

²²¹ United Nations Viet Nam, Safer Homes for LGBTIQ People (previously cited).

²²² Amnesty International's interview with transgender activist in Sri Lanka, May 2021

result, subject to additional patriarchal norms. A transgender man in India interviewed by Amnesty International said that “often expressions of masculinity within the home setting are seen as ‘character or personality issues’ that have to be corrected – at times by the use of violence.”²²³ The closure of transport systems during the pandemic in countries such as India also meant that transgender people found it even harder to escape abusive situations, or access support.²²⁴

“One trans man called me to ask for help in getting a job. He specifically asked for a job that had a travel time of more than 2 hours from his home, so he didn’t have to spend time at home. That is the extent of his trauma at home, especially during lockdowns. They forced them to get married, denied them their right to cut their hair or dress as they wanted to. There was a considerable increase in violence against women. Everything documented about women is also applicable to trans men because they’re still seen as women at home.”

A transgender activist from India in an interview with Amnesty International, March 2021

EXCLUSION FROM GENDER-BASED VIOLENCE SERVICES

Transgender people from Pakistan and the Philippines told Amnesty International that those facing domestic or intimate partner violence do not report their families to the police for a host of reasons, including negative past experiences with police and justice systems, fear of retaliation and expulsion from their homes, or the belief that their experiences will not be seen as a priority, especially during the pandemic.²²⁵ Across the region, transgender people also reported to Amnesty International a lack of adequate safe houses and reiterated that access was particularly limited during the pandemic.²²⁶

Transgender people’s fear of family violence is compounded by the lack of meaningful avenues for protection or justice,²²⁷ the possibility of police complicity, and the risk of exposing their identities to state authorities and incurring further harassment, social disapproval and violence.

“Trans people don’t report because they’re afraid of their families’ retaliation and the general lack of security in their situation. If they file a formal complaint and action is taken against their family members, where will they go? What will happen to them?”

A transgender activist in the Philippines in an interview with Amnesty International, October 2021

²²³ Amnesty International interview with a transgender man in India, 2021

²²⁴ Nazariya: A Queer Feminist Resource Group, “The impact of COVID-19 on the human rights of LGBT persons, communities and/or populations”, 2020 (previously cited).

²²⁵ Amnesty International interviews with activists in Pakistan and the Philippines in 2020 and 2021.

²²⁶ The lack of places to turn to for safety in the form of peer support systems, safe houses or shelters came up routinely in Amnesty International’s interviews with trans people across the region.

²²⁷ The YP foundation, “Input for the Report of The Independent Expert on Protection Against Violence and Discrimination based on Sexual Orientation and Gender Identity” (previously cited) and the South Korean Human Rights Network in Response to the COVID-19 (23 NGOs), Response to joint questionnaire of special procedures on protecting human rights during and after the COVID-19, OHCHR | Report on the impact of the COVID-19 pandemic on the human rights of LGBT persons.

DIMINISHED ACCESS TO CRITICAL SOCIAL SUPPORT NETWORKS

Transgender people are often highly reliant on peer networks and communities and trans-affirming organizations for psychological and practical support, community connection and solidarity – particularly in the absence of parents and families. This support is critical for transgender people’s well-being and ability to deal with ever present stigma and discrimination. However, during the pandemic, many of these sources of support and safety – friends’ homes, LGBTI social spaces, and entertainment venues – became inaccessible due to lockdown restrictions.²²⁸

“Within the community, a lot of people are looking for safe spaces as an immediate need. For a trans person who is exposed to a transphobic family member, you can only imagine how their mental health is affected.”²²⁹

A transgender activist from the Philippines in an interview with Amnesty International, March 2021

All people, including transgender people, have the right to State protection from violence and discrimination, whether this takes place in the home or outside. Transgender people’s experiences during the pandemic highlight how structural factors such as poverty, homelessness, housing instability and stigma are associated with higher risks of violence. States must turn their attention to these contextual conditions that make transgender people more vulnerable to violence.

In light of the harassment and violence faced by transgender people by state and non-state actors, and their distrust of police and healthcare services, there is an urgent need to establish and expand accessible, community-based, safe and trans-inclusive healthcare, shelter and counselling services, paying particular attention to the needs of transgender youth. States should ensure that trans people’s organisations are resourced, capacitated and supported to offer survivor-centred response services, as well as to support transgender people to report violence to police or other justice systems. States should also engage with transgender organizations in developing policies and programming on violence.²³⁰

²²⁸ Outright Action International, “Covid-19 through a Queer lens” 20 May 2020, <https://outrightinternational.org/insights/covid-19-through-queer-lens>

²²⁹ Amnesty International interview with a trans activist in the Philippines, March 2021.

²³⁰ International Commission of Jurists (ICJ), “The Yogyakarta Principles Plus 10 - Additional Principles and State Obligation on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Expression and Sex Characteristics to Complement the Yogyakarta Principles”, 10 November 2017, yogyakartaprinciples.org/principles-en/yp10.

4.6. THE DISCRIMINATORY IMPACT OF COVID-19 REGULATION ENFORCEMENT

Amongst the emergency regulations introduced by governments to curb the spread of the pandemic was the deployment of security forces to enforce lockdowns and impose punitive sanctions on those found to be breaching them.

The police and other security forces' power to target, arrest, and persecute people²³¹ created additional risks of human rights violations against LGBTI people, including transgender and gender diverse people, including criminalization, arbitrary detention, discrimination, extreme punishments, and excessive use of force for groups already subject to over policing.²³² The pandemic saw cases of increased surveillance, harassment from law enforcement officials, and arrests and fines being levied on LGBTI and transgender populations in countries across Asia and the Pacific islands. For example, in 2020 the APTN highlighted reports from Fiji, Indonesia and Malaysia that transgender sex workers and those rendered homeless due to a collapse in their incomes and financial security were being arrested by the police for breaching lockdown orders and other movement restrictions.²³³ APTN also reported that sex workers in Fiji who were arrested were forced to remain in police detention for longer than should have been necessary due to the closure of the courts during lockdowns.²³⁴

Transgender people who were homeless, out trying to buy groceries and medicines, or waiting in line to access relief support also found themselves increasingly subject to police brutality.²³⁵ As noted in Section 3, in most countries across Asia and the Pacific, many transgender people do not have official ID documents that reflect their gender identity. Transgender women in the Philippines and Singapore told Amnesty International how ID checks on people leaving their homes during periods of lockdown meant their identities were exposed to security personnel. This put transgender people at increased risk of verbal abuse, and potentially physical violence, every time they left home to buy essential goods.²³⁶

“To get groceries we have to show an ID. When I showed mine, the security guard said: “I thought you were a real woman”. I felt really helpless and upset that besides the Covid risk I was also having to go through this humiliation.”

A transgender woman in the Philippines in an interview with Amnesty International, November 2020.²³⁷

There are also various reports that transgender people were subjected to highly degrading and discriminatory treatment by officials enforcing these regulations. In the Philippines, for example, police forced three LGBTI people to perform humiliating acts as punishment for supposedly violating the curfew in April 2020. The punishment was recorded on video and posted on social media.²³⁸ The UNDP reported a case in May 2020 in which transgender people were accused by police in Bangkok, Thailand of soliciting sex as they tried to access relief food and water being offered by NGOs, and issued a fine.²³⁹ A 2021 report on the lived experiences of sex workers during Covid-19 found that in Indonesia, transgender sex workers were specifically targeted by officers, with reports of police chasing

²³¹ To see some examples of this taking place in other regions see Amnesty International, “There is no help for our community”: The Impact of States’ COVID-19 Responses on Groups Affected by Unjust Criminalization” (previously cited)

²³² Amnesty International, “There is no help for our community”: The Impact of States’ COVID-19 Responses on Groups Affected by Unjust Criminalization” (previously cited), p.27.

²³³ Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

²³⁴ Ibid.

²³⁵ Centre for Law & Policy Research (CLPR), “Exclusion Amplified: A Report” (previously cited).

²³⁶ Amnesty International interview with trans activist in the Philippines in November 2020.

²³⁷ Amnesty International interview with trans activist in the Philippines in May 2021.

²³⁸ Human Rights Watch, “Philippines Uses Humiliation as COVID Curfew Punishment”, 08 April 2020, www.hrw.org/news/2020/04/08/philippines-uses-humiliation-covid-curfew-punishment; Singh, S., “Trans Resilience Report: Stories of Hope, Pain, and Survival from the Trans Movement During the COVID-19 Pandemic” (previously cited).

²³⁹ UNDP, “COVID-19 amplifying inequalities for transgender people” (previously cited).

after them and beating them before arresting them.²⁴⁰

“Trans women were arrested for being out during the curfew. Most cisgender people just get fines but trans women are humiliated by the officers. There are even reports where trans women were asked to remove their wigs and/or clothes and provide their IDs. Law enforcement officers often go overboard with trans communities when they enforce these policies.”²⁴¹

A transgender activist from the Philippines in an interview with Amnesty International, May 2021

As has been previously noted by Amnesty International, coercive law enforcement measures should only be used as a last resort.²⁴² When they are used, governments must ensure that the public is aware of the reasons for the restrictions and that these are communicated in accessible formats and through appropriate channels for groups that may have limited literacy and access to digital technology. Governments must also put in place measures that support transgender people and other marginalized groups to comply with restrictions, whilst ensuring that their essential needs are met.²⁴³

²⁴⁰ Asia Pacific Network of Sex Workers, “Sex Workers’ lived experiences of sex workers during COVID-19 & community-led pandemic responses”, April 2021, <https://apnsw.info/wp-content/uploads/2022/09/Sex-Workers-Lived-Experiences-During-COVID-19-Community-Led-Pandemic-Responses.pdf>

²⁴¹ Amnesty International interview with trans activist in the Philippines in May 2021.

²⁴² Amnesty International, “There is no help for our community”: The Impact of States’ COVID-19 Responses on Groups Affected by Unjust Criminalization”, p. 31 (previously cited).

²⁴³ Ibid.

4.7. THE ROLE OF LGBTI AND TRANSGENDER ORGANIZATIONS

“Our main source of support is from LGBTI and trans-led organizations. We weren’t able to access our [government] social support programme,²⁴⁴ and local and international organizations have stepped in to provide financial assistance, help in accessing hormone replacement therapy, and mental healthcare.”

A transgender activist in the Philippines in an interview with Amnesty International, May 2021

In the absence of government support, there are numerous examples from across the countries in the region of the ways in which transgender activists, organizations and communities came together as part of localized efforts to support those most in need.²⁴⁵ Transgender activists in Bangladesh, India and Pakistan described to Amnesty International how transgender organizations had mobilised their local constituencies to provide hand sanitizers, masks and soap as well as information on how to maintain hygiene and safe sanitation during the pandemic, and how to reduce exposure to the virus.²⁴⁶

“We receive 50-75 calls and messages every week of people asking for food, shelter, diabetes medicines, hormone injections, and nutrition for people living with HIV.”

A representative of a local transgender organization in India in an interview with Amnesty International, April 2021

In Indonesia, communities of transgender women set up food banks, organized food distributions, volunteered as community health educators, and provided cash assistance. In Thailand, entertainment and sex workers set up online platforms hosting DJ sets and drag shows in order to generate income and keep queer-led entertainment businesses afloat.²⁴⁷

However, community-based transgender and LGBTI organizations are often chronically underfunded and understaffed. And yet they saw the need for their support increase at the same time as experiencing an ever-greater shortfall in resources. The APTN reported that all of their project partners – organisations that provide critical services for transgender people - had expressed concerns about their ability to meet the operational costs of their organizations during the pandemic ²⁴⁸.

The ASEAN SOGIE Caucus reported that the cancellation of agreed funding disrupted programmes and undermined the organisational stability of transgender organizations.²⁴⁹ Those in receipt of short-term, project-based funding tied to

²⁴⁴ The Social Amelioration Program (SAP) is the emergency subsidies programme for low-income families by the government of the Philippines.

²⁴⁵ ASEAN SOGIE Caucus, Submission for the thematic report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity for the October 2020 session of the UN General Assembly (previously cited); OHCHR, “COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States” (previously cited).

²⁴⁶ Amnesty International interviews with trans activists in Bangladesh (April and May 2021); India (April 2021); and Pakistan (November 2020, February 2021, May 2021).

²⁴⁷ Shin, H. B., Mckenzie, M. and Oh, D. Y. (eds). 2022. COVID-19 in Southeast Asia: Insights for a post-pandemic world. London: LSE Press.

²⁴⁸ Asia-Pacific Transgender Network, #SeeUsSupportUs: Covid-19 Rapid Assessment Findings, June 2020, www.weareaptn.org/covid-19-rapid-assessment-findings; UNICEF, UNWomen and Care, “Rapid Gender Analysis during COVID-19 Pandemic Mekong Sub-Regional Report Cambodia, Lao People’s Democratic Republic, Myanmar, Thailand and Viet Nam”, September 2020, <https://www.unicef.org/eap/media/6871/file/Rapid%20Gender%20Analysis%20during%20Covid-19%20Pandemic.pdf>

²⁴⁹ ASEAN SOGIE Caucus, Submission for the thematic report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity for the October 2020 session of the UN General Assembly (previously cited); ASEAN SOGIE Caucus, June 2020, Impacts of Covid-19 on LGBTIQ Organizations in the Southeast Asia Region (previously cited).

specific activities and outputs found themselves unable to reallocate funding to respond to emergency needs.²⁵⁰ A transgender activist in the Philippines who worked with transgender youth during the pandemic told Amnesty International how their small organisation started a crowd funding campaign in order to support 1,500 people during the lockdowns.²⁵¹ It is important to note that the staff of these organizations – often also subject to the same social, economic and health concerns as the communities they serve - were themselves impacted by the pandemic.



 ↑ THAILAND – Transgender organisation representatives distributing relief in the form of hormone packages as part of the APTN Covid-19 Community Support Fund. Photo provided by APTN.

Given many transgender people's mistreatment by, and distrust in, formal government institutions and services, transgender people's organisations provide a critical source of support. In times of crisis such as the Covid-19 pandemic, it is critical that NGOs and other organizations providing frontline support to minority communities receive sufficient and flexible financial and organizational support so they can respond to changing needs in a timely manner.²⁵²

However, the situation in which transgender and LGBTI organizations found themselves in during the pandemic also highlights that under-funded and under-resourced transgender organizations, which were profoundly affected by the pandemic themselves, cannot plug the gap left by the state. States must fulfil their obligations towards transgender, gender diverse and other minority groups and ensure their human rights and protections. This must include meaningfully involving civil society organizations, activists and local networks representing all individuals and groups

²⁵⁰ ASEAN SOGIE Caucus, Submission for the thematic report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity for the October 2020 session of the UNGA (previously cited).

²⁵¹ Amnesty International interview with a trans activist in the Philippines, November 2021

²⁵² UNICEF, UN-Women and Care, "Rapid Gender Analysis during COVID-19 Pandemic Mekong Sub-Regional Report Cambodia, Lao People's Democratic Republic, Myanmar, Thailand and Viet Nam" (previously cited), p.21.

whose rights and interests may be affected in full and meaningful consultation, decision-making and implementation of crisis response measures.²⁵³

²⁵³ CESCR, General Comment No. 14, The Right to the Highest Attainable Standard of Health (Article 12), UN Doc. E/C.12/2000/4 para. 11; also quoted in Amnesty International, “There is no help for our community”: The Impact of States’ COVID-19 Responses on Groups Affected by Unjust Criminalization”, 31 May 2022, p. 31 (previously cited).

5. CONCLUSION AND RECOMMENDATIONS

Transgender people enjoy a culturally rich history in many countries and communities across the Asia and the Pacific Islands, where they are valued members of society. However, this history has also been overshadowed, in many instances, by structural discrimination, violence and suffering.²⁵⁴

The pandemic has surfaced the severe pre-existing inequalities that transgender people across Asia and the Pacific Islands face, and the ways in which these made them particularly vulnerable to the Covid-19 crisis. If these inequalities are left unaddressed, future crises are likely to further compound transgender people's suffering and disadvantage. It is thus essential that transgender people's experiences during the pandemic serve as a wake-up call to governments to build more inclusive and sustainable economies and societies.²⁵⁵

An urgent shift is also needed in governments' attention to the specific needs and realities of transgender people during crises, particularly in terms of prioritising and delivering evidence-based, accessible and trans-inclusive social protection schemes, public healthcare, education, employment and housing systems.

States must also actively counteract discriminatory practices stemming from gender-based stereotypes and harmful social norms. This should include, as a matter of priority, action to enable individuals to change their legal name and gender, including the gender markers on official documents issued by the state through quick, accessible and transparent procedures, and in accordance with the individual's sense of gender identity.

States must ensure that their duty of care is extended to all those who are systematically discriminated against in their access to necessary services. It is also essential that governments consult with and mobilise the skills, resources and capacities of transgender people, activists and organizations in developing and implementing plans or programmes intended to serve them. The knowledge of transgender and gender diverse people about their own lives, experiences and priorities, and their agency in shaping their own choices, must be respected and built into the development of policies, programmes and crisis response measures.²⁵⁶

The recommendations outlined below urge governments to ensure that lessons are learned from the profound impact of the Covid-19 pandemic and the measures adopted to address it on the lives of transgender people. These recommendations reflect the urgent need to strengthen service delivery and reform legal systems so that these are more responsive to the needs of transgender people, and to ensure that adequate protections and safeguards are in place so that they do not suffer disproportionately during any future crises.

²⁵⁴ OHCHR, "COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States" (previously cited).

²⁵⁵ UNDP, "COVID-19 amplifying inequalities for transgender people" (previously cited).

²⁵⁶ OHCHR, "COVID-19: The suffering and resilience of LGBT persons must be visible and inform the actions of States" (previously cited).

AMNESTY INTERNATIONAL'S RECOMMENDATIONS TO GOVERNMENTS

UNDERTAKE LEGISLATIVE CHANGE TO ENSURE EQUALITY

- Ensure that transgender people can obtain legal recognition of their gender through accessible and transparent procedures based on self-determination, while preserving their right to privacy. Governments should make sure that all documents are issued with correct gender markers and gender-related information stored in state-run registries is updated.
- Put in place the necessary legal protections for transgender people, including specific anti-discrimination provisions. Ensure the removal or repeal of laws that criminalize consensual same-sex conduct, sex-work, “cross-dressing”, public nuisance or vagrancy.

PROVIDE EQUAL AND EQUITABLE ACCESS TO LIVELIHOODS

- Ensure that efforts to provide food security, economic stimulus and relief packages during future emergencies are equitably distributed among marginalized groups and those who face discrimination, including transgender people working and living in precarious conditions.
- Identify and remove barriers that exclude marginalized and at-risk groups including transgender people from accessing support; and explore innovative ways of ensuring support to people who are in informal work.
- Take steps to facilitate and empower transgender people and others facing discrimination to access support and enrol in social support programmes.
- Ensure that the minimum essential levels of food, water, healthcare, and housing are made available to all irrespective of gender, gender identity, nationality, nature of work, and employment, and always prioritizing those most in need.
- Ensure that transgender sex workers are not excluded or discriminated against in Covid-19 responses and recovery efforts, in line with international obligations to ensure that all state action is non-discriminatory, in order to effectively combat Covid-19 in line with human rights law and standards.
- Conduct a review and assessment of measures that were put in place during the pandemic to support transgender people and others living in poverty and build on these reviews to develop effective and inclusive support systems for future emergencies.

PROVIDE SOCIAL SUPPORT AND BENEFITS SPECIFIC TO THE NEEDS OF TRANSGENDER PEOPLE

- Include transgender people as well as all self-employed and informal workers, without discrimination, in unemployment assistance and other financial and social support programmes.
- Identify and remove barriers that exclude transgender people from government relief programmes, including unnecessary documentation requirements and processing, and the need to provide more information than necessary for the particular benefit.
- Ensure engagement with LGBTI communities in the development and implementation of responses to future disasters and emergencies, including by working in partnership with LGBTI people's associations and groups.
- Ensure that transgender, gender diverse and all other LGBTI people are able to access financial aid and other measures to help them recover from the Covid-19 pandemic, as well as during any future crises, including by broadening eligibility requirements.
- Provide transgender and gender diverse people with a non-discriminatory, timely and effective identification process for accessing social protection schemes. Ensure that this process caters for the most at-risk and marginalized people -, including those who lack permanent residence and/or ID documents and sex workers.

PROVIDE ACCESS TO HEALTHCARE

- Ensure transgender, gender diverse, and LGBTI people are not discriminated against while accessing healthcare services.
- Ensure access to quality healthcare for all, including hormone therapy, gender-affirming surgeries and mental health counselling support.
- Develop national, provincial and local level campaigns to increase awareness about mental health and reduce stigmatization and discrimination against transgender people, for example by partnering with professional medical and psychological support organisations to promote gender affirming care.
- Ensure that all people can access sexual and reproductive health care whenever they need to, including during public health emergencies and other crises.
- Ensure that people living with HIV are able to access necessary medical care without any interruptions.
- Develop robust accountability mechanisms in health systems, including the collection of data, disaggregated by all relevant prohibited grounds of discrimination; periodic monitoring and review of all initiatives, with the participation of service users; and access to effective remedies for violations of the right to health.
- Ensure the sensitization of medical workers and healthcare providers so that transgender and gender diverse people have equal access to healthcare.

ENSURE ACCESS TO HOUSING

- Consult with transgender people about their requirements for safe and appropriate emergency housing.
- Identify and address barriers that prevent transgender and other disadvantaged groups from accessing emergency housing.
- Ensure that the response and recovery measures to future crises are non-discriminatory and include those who are discriminated against based on their gender, race, ethnicity, nationality, socio-economic status or other grounds. Where relevant, take special measures to guarantee that groups who have been subject to systemic discrimination and marginalization benefit from response and recovery measures.
- End forced evictions and uphold the right to housing for all, including non-nationals resident in the country.
- Ensure that no one is left in a position of increased vulnerability to Covid-19, including by being evicted for their inability to pay rent or mortgage. Where landlords are dependent on the rent for their livelihood, ensure that they are adequately supported for the period of the crisis in a manner that does not negatively impact their right to an adequate standard of living.
- Urgently put in place adequate and safe water and sanitation facilities for those in homeless situations or living in inadequate housing such as informal settlements.
-

PROTECT INDIVIDUALS FROM DOMESTIC VIOLENCE AND PROVIDE SAFE SPACES

- Ensure provisions to support transgender people facing domestic violence to access support and services, including helpline facilities to access advice and report incidents of violence.
- Ensure that shelters are designated as essential services, are kept open and are easily accessible to LGBTI people facing domestic violence.

ENSURE NON-DISCRIMINATION IN ENFORCEMENT OF COVID-19 REGULATIONS

- Ensure any restrictions on the right to freedom of movement or liberty – such as curfews, isolation or lockdowns are proportionate to their aims or another legitimate purpose under international human rights law, and are necessary, non-arbitrary, evidence-informed and provided for by law.
- Put in place measures for people to be able to comply with any restrictions on freedom of movement, including by enabling them to satisfy their essential needs, and take into account the situation of marginalized groups who may require support in order to be in a position to comply with the restrictions.
- Ensure that measures restricting movement provide protection and appropriate consideration for transgender and gender diverse people. Law enforcement officials should be instructed and adequately trained not to discriminate against people based on their sexual orientation or gender identity

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“PANDEMIC OR NOT, WE HAVE THE RIGHT TO LIVE”

THE URGENT NEED TO ADDRESS STRUCTURAL BARRIERS UNDERMINING TRANSGENDER PEOPLE’S RIGHTS ACROSS ASIA AND THE PACIFIC ISLANDS

The Covid-19 pandemic caused widespread, and often deeply damaging disruptions to the health, economic and social lives of millions of people across the world. But these impacts were not experienced equally. Transgender people – who were already subject to deep-rooted and persistent structural inequalities – found their pre-existing marginalisation exacerbated by the pandemic and related public health measures and suffered disproportionately. This report documents the experiences of transgender people in 15 countries in South, Southeast and East Asia, and the Pacific Islands during the Covid-19 pandemic. The challenges highlighted are not unique to the countries referred to; but reflect many of Amnesty International’s concerns about the ongoing structural and systemic barriers to accessing human rights that exist for transgender people around the world – and that were exacerbated during the pandemic. The recommendations in the report reflect the imperatives that, in “building back better”, governments make efforts to address the structural conditions and inequalities that shape transgender people’s everyday lives, choices and opportunities, which, if left unchanged, will continue to make them particularly vulnerable to future crises.