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Exploring Exclusion: Understanding Marginalisation in the Third Gender Community of Haryana

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Abstract

To understand the marginalisation of the Third Gender community, examining the ongoing exclusion despite getting legal recognition and constitutional rights in India in 2014 is essential. They are still confronted with deep-seated expressions of stigma and discrimination. This paper aimed to investigate these challenges experienced by the Third Gender community of Haryana. A Mixed-method approach was employed in the study, combining focus group discussions with 20 respondents and a survey of 105 respondents. The analyses revealed the depth of exclusion, which was shaped by interpersonal rejection and institutional barriers. Findings supported the implementation of awareness programmes for mainstream people alongside welfare schemes or interventions for the Third Gender community to reduce misconceptions and biases towards them. This paper advocates for social acceptance of the Third Gender community, which is crucial for inclusion; without it, these interventions will not achieve their intended goals.

Keywords: exclusion, marginalisation, third gender, stigma, discrimination

Introduction

The Third Gender, commonly known as hijra, is a sexual minority integral to Indian and South Asian societies. This gender-nonconforming group includes transsexuals, transvestites, intersex, and transgender individuals (Nanda, 1999; Reddy, 2005). Many Third Gender individuals experience a conflict between their gender identity and the sex assigned at birth, challenging binary male/female classifications (Guss et al., 2015; Polderman et al., 2018). Their identities can manifest as nonbinary, genderqueer, or gender-nonconforming roles (Caenegem et al., 2015; Tordoff et al., 2019). In heteronormative societies, deviations from gender norms often lead to stigma and discrimination.

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The research in South Asia and globally revealed that transgender marginalisation is an outcome of structural and cultural barriers that perpetuate exclusion. Khan et al. (2009) found that stigma and economic deprivation hinder access to education, employment, and healthcare, resulting in social exclusion of hijras in Bangladesh. Stigma, violence, and systemic exclusion resulted in health consequences, such as poor mental health, stress and strain in transgender individuals (Bradford et al., 2013). Structural barriers forced hijras into precarious livelihoods and limited their social mobility, while rejection by family and society resulted in socioeconomic vulnerability of transgender community (Sifat & Shafi, 2020; Kumar et al., 2022).

The two most critical aspects of marginalisation of the Third Gender community are stigma and discrimination. Recent studies highlighted that cultural marginalisation and economic hardships due to stigma and discrimination persist in society, restricting their access to health, education, and employment (Chaudhary & Shukla, 2017; Mondal et al., 2023). Even in legally progressive societies, transgender individuals face significant stigmatisation worldwide (Clark et al., 2018). Transgender individuals in Odisha are pushed to informal labour like begging and sex work because of systemic barriers, which resulted in socioeconomic marginalisation of the community (Rout, 2018).

Discrimination exacerbated the psychological distress among transgender community (Thompson et al., 2019). Social strain and gender dysphoria revealed how heteronormative norms and rigid gender binaries reinforce their exclusion and compel them to take refuge in alternative spaces like *Deras* (Arvind et al., 2021). Goffman's (1963) stigma theory helped in understanding these findings, which demonstrated how societal labelling and prejudice stigmatised the gender identity of Third Gender individuals and made them marginalised in society.

The historical roots of marginalisation of the Third Gender community illustrated how colonial legacies continued to shape the perceptions and attitudes of society and reinforced the exclusion (Meher & Acharya, 2022). Despite the NALSA judgement (2014) and the Transgender Persons (Protection of Rights) Act (2019), societal attitudes are still a significant barrier to the inclusion of the Third Gender community in mainstream society (Jaddidi & Sharma, 2021). There is a significant gap, as noted by Bhattacharya et al. (2022), between the legal rights and the actual support system available, which highlights the ongoing discrimination and abuse in society.

Although there has been considerable research on the marginalisation of the Third gender community in India. Region-specific studies are needed,

especially in states like Haryana, which have focused on lived experiences after gaining constitutional rights. Moreover, most existing studies on the Third Gender have employed qualitative approaches. There is a lack of mixed-method research that provides a holistic understanding of marginalisation issues. The study sought to address these gaps by addressing the following research questions:

1) What are the lived experiences of marginalisation among Third Gender individuals in Haryana?
2) How do familial, societal, and institutional structures contribute to their exclusion?
3) What role does social stigma play in shaping their socioeconomic vulnerability?

Historical Overview of the Third Gender Community

The ancient Vedic period, also known as the Vedic age, was when the Vedas, comprising the Rigveda, Samaveda, Yajurveda, and Atharvaveda, were written. These are the primary sources of this period. Vedic society at that time was all-encompassing, with each person considered an essential component of the larger system. Human sex or gender is classified into three distinct types based on prakriti, or nature, in all of the Vedic literature. These are classified as *stri-prakriti* (female), *pums-prakriti* (male), and *tritya-prakriti* (third sex). Fundamental rights were not denied to or discriminated against third gender citizens. They received a special position and were accepted into the refined Vedic culture. The term *"shandha"* encompassed various Third Gender identities, often describing those fully identifying as transgender. In Vedic culture, gender nonconformity was acknowledged and integrated into society.

The Mahabharata and Ramayana feature Third-gender characters like Brihannala and hijras, who are respected and granted blessings (Wilhelm, 2008). Legal and medical texts from the 2nd to 5th centuries CE, including the *Manusmriti* and *Shusruta-samhita*, used terms such as *panda, shanda, kliba,* and *napumsaka* to describe Third Gender individuals (Pattanaik, 2014). Eunuchs, distinct from *hijras,* historically served as guards and advisors in Middle Eastern and Chinese courts (Andrews, 1898; Ringrose, 2007). Eunuchs in royal harems often wielded influence over rulers, rising to positions of power (Encyclopaedia Britannica, 2024).

Unlike Middle Eastern traditions, castration was uncommon in ancient India due to Vedic prohibitions against bodily mutilation. The goddess *Sri Bahuchara-devi,* associated with gender transformation, was worshipped by those seeking alternative gender identities. The ritual of *Nirvaan*, a form of castration, granted hijras spiritual and social authority (Wilhelm, 2008).

The migration of Persian, Turkish, and Arabic rulers in the 11th century introduced the practice of keeping castrated servants in India (Wilhelm, 2008). While the Vedic terms *shandha, kliba,* and *panda* referred to gender-diverse individuals, they were distinct from eunuchs, who served in harems and state administration (Doniger, 2003).

The British colonial period marked a significant decline in the status of the Third Gender community. The British viewed hijras as "habitual sodomites," disregarding their gender identity and associating them with immoral behaviour (Hinchy, 2019). Section 377 of the Indian Penal Code (1860) criminalised sodomy, while the Criminal Tribes Act (CTA) of 1871 designated hijras as a criminal tribe, aiming to erase their presence (Biswas, 2019). The British saw hijras as a threat to public morality, linking them to filth, disease, and disorder (Verma, 2024). These laws, rooted in colonial ideology, exacerbated the marginalisation of Third Gender individuals and reinforced societal discrimination.

The following excerpt presents compelling evidence that discrimination based on gender was nonexistent prior to the emergence of British colonial rule. During the ancient Vedic and Mughal eras, the hijra community enjoyed social respect and prominence. However, the British Empire created a hostile and discriminatory environment for the Third Gender community, which continues to impact them in India and other South Asian countries today. The Criminal Tribes Act (CTA) was abolished on 31 August 1952, but the hijra community continued to face stigma and discrimination due to the ideologies imposed by the British authority.

The landmark NALSA case of 2014 gave constitutional rights and recognised *hijras* as the Third Gender. However, this did not result in widespread societal acceptance. In 2019, another positive step was taken with the passage of the Transgender Persons (Protection of Rights) Act, which aimed to protect the rights of the broader Third Gender community (Kulshrestha, 2021; Chatterjee, 2022). Despite the pervasive presence of entrenched biases and discriminatory practices, individuals from the third gender community still experience rejection or non-acceptance and marginalisation within society.

Sociological Perspectives on Marginalisation of the Third gender

The present study examined the exclusion of the Third Gender community in society, despite ten years of gaining constitutional rights. In Haryana, which has a patriarchal society and a preference for sons, respondents expressed that in their families and in society, males have significant issues with their gender identity. The Social Exclusion Knowledge Network (SEKN) Model served as the core theoretical framework to understand the various

dimensions of exclusion faced by the Third gender community in society. Stigma theory helps understand how society labels and discriminates against individuals or groups based on perceived differences. At the same time, social reproduction theory and the concept of symbolic violence elucidated how inequalities and dominating social norms delegitimise the gender identity of the Third Gender community. Furthermore, social exclusion theory provided insight into systemic barriers that excluded the community from fully participating. These theories offered a multidimensional lens to analyse the complexities faced by the Third gender community.

Stigma

Goffman (1963) defined stigma as an "attribute that is deeply discrediting" and as something that reduces its bearer "from a whole and usual person to a tainted, discounted one." It provides a conceptual framework to understand how individuals and groups are socially excluded or marginalised due to attributes that seem to be undesirable or incongruous with the stereotypes of what a given type of individual should be. He discussed three distinct types of stigmas: First, there are physical deformities, classified as abominations of the body. Second, there are blemishes of individual character, which encompass mental disorders, incarceration, substance dependence, alcoholism, homosexuality, unemployment, suicide attempts, and radical political behaviour. Third, there are the tribal stigmas of race, ethnicity, and religion (Goffman, 1963).

Link and Phelan introduced a distinctly sociological approach to studying stigma in their 2001 review of stigma in the Annual Review of Sociology. They built upon Goffman's (1963) work, and the broader focus is on the power dynamic of society, conceptualising stigma as the co-occurrence of four processes: (1) labelling; (2) stereotyping; (3) dividing between the labelled group and the other; and (4) loss of status and discrimination. By integrating power dynamics and discrimination into their definition, Link and Phelan (2001) developed an approach that examines how stigma relates to the creation, perpetuation, and consequences of social inequalities. In the realm of gender studies, the concept of stigma has been crucial in examining the marginalisation of the Third gender community. Stigma manifests as social rejection, stereotyping, and exclusion from various sectors such as employment, healthcare, and education. These challenges align with Goffman's (1963) perspective on the relational nature of stigma and Link and Phelan's (2001) emphasis on systemic discrimination.

Social reproduction and symbolic violence

The concept of symbolic violence was introduced by Bourdieu (1977) to explain how power dynamics and social inequalities exist within

society. Symbolic violence refers to the subtle and often unnoticed ways of dominating and controlling through social norms, values, and cultural practices. It works through manipulation of symbols, ideas, and beliefs rather than through physical force. Bourdieu (1977) believed that symbolic violence is particularly effective because individuals internalise it, which means they accept and keep reproducing the social inequalities. One of the main aspects of symbolic violence is who experiences and internalises it. Social reproduction is a comprehensive framework that helps understand how social inequality is passed down through generations. Both symbolic violence and social reproduction are important for explaining how societal norms keep certain groups marginalised.

According to Bourdieu (1991), the concepts of habitus, cultural capital and field helped in understanding the barriers that obstruct the social mobility of the Third Gender community. Habitus referred to the deeply ingrained habits, skills and dispositions shaped by social structures. Third Gender individuals lived the experiences of rejection and discrimination in society. Habitus shapes their attitudes, perceptions and actions, often leading to self-exclusion and reflecting their marginalisation in society. Bourdieu's (1991) theory argued that social hierarchies are maintained through cultural capital, habitus, and field, and reinforce the unequal power dynamics. The stigmatisation of the Third Gender community is perpetuated through symbolic violence and habitus, cultural capital, and field dynamics, which maintain the social exclusion.

Social Exclusion

According to Rene Lenoir (1974), "social exclusion" was initially introduced in French social policy to refer to *les exclus*, or vulnerable and deviant populations, as a substitute for the Anglo-Saxon liberal focus on poverty. During the presidency of Francois Mitterrand, social exclusion was viewed as a break in the social bond and a lack of solidarity. Giddens (1998) characterised it as mechanisms that separate groups from the social mainstream, rather than differences in inequality. According to Silver (1994), literature reflects the exclusion of individuals from various aspects, such as employment, earnings, property, education, and cultural capital. Additionally, exclusion can extend to citizenship, democratic participation, public goods, family, social interaction, and basic human dignity.

Exclusion occurs through intersecting processes that emerge from the economy, politics, and society. These processes gradually push individuals and communities away from centres of power and resources, leading to a disadvantage in relation to prevailing values (Estivill, 2003). The SEKN model, developed by Popay et al. (2008) under the World Health Organisation, provides a comprehensive framework for analysing social exclusion as the

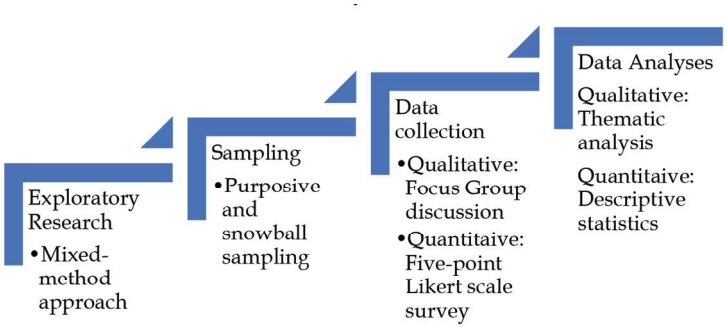
systematic denial of resources, rights, and opportunities necessary for full societal participation. Social exclusion operates at four interconnected and relational dimensions: social, political, cultural and economic. De Haan (2008) discussed that power dynamics create a continuum that ranges from inclusion to exclusion along the lines of interrelated and interdependent factors such as economic, cultural, political, and social factors.

Economic exclusion encompasses barriers to employment opportunities, limited access to commodities, and restricted livelihood opportunities, including income, housing, land, and work conditions. The social aspects of exclusion refer to limited or no access to social, educational, legal, and health services resulting from disrupted social protection and social cohesion, such as kinship, family, neighbourhood, and community. The cultural aspects of exclusion involve the subordination of certain norms, behaviours, cultural practices, and lifestyles, which exclude specific individuals or groups. Exclusion's political aspects entail depriving citizens of rights, including restricted access to organisations, voter rights, legislation, and decision-making in policy. This multidimensional model of social exclusion also frames the analysis of the experiences of third gender (as cited by Khan et. al., 2009).

People or communities who find themselves marginalised are often socially excluded. Marginality is typically studied in socioeconomic, political, and cultural domains where underprivileged individuals struggle to obtain resources and fully participate in society (Gurung & Kollmair, 2014). Third Gender individuals, because of their gender identity, are particularly vulnerable to social exclusion. Consequently, they are denied social opportunities and encounter negative public attitudes. The present study also highlighted the same issues faced by the Third Gender community of Haryana, which put them in a marginalised condition in society. The SEKN model of social exclusion identified Third Gender individuals as socially and culturally excluded through discrimination (Popay et al., 2008).

Research Method and Respondents

The present research employed an exploratory approach to examine the social exclusion and marginalisation faced by the Third Gender community in Haryana. A mixed-method approach helped me get a holistic understanding of the problem. In order to investigate the Third Gender community, a purposive and snowball sampling was used to recruit the respondents. There is a lack of formal data about the Third Gender population. Therefore, in the initial phase, snowball sampling was employed, and then purposive sampling was employed to access the individuals from 13 districts of Haryana.



The study has a mixed-method research design, so qualitative and quantitative data were collected. Informed consent was obtained first from the respondents, and confidentiality was ensured, which helped establish trust and facilitated open communication. Qualitative data were collected through two focus group discussions (FGDs), with 10 respondents in each group. These focus group discussions allowed respondents to articulate their experiences and challenges; they facilitated rich, in-depth conversations. A structured questionnaire was designed using a five-point Likert scale to collect the quantitative data. This questionnaire was administered to 105 respondents. The illiterate respondents had difficulty completing the questionnaire independently, and the researcher assisted in ensuring the accuracy of the data. Each interview lasted 10 to 15 minutes, which reflects the challenges in convincing the respondents to be part of the research. Data collection was concluded while reaching the point of data saturation, where no new themes were emerging and no new insights were gained.

Braun & Clarke (2006, 2021), Thematic analysis was applied to analyse the qualitative data, an inductive, respondent-centred approach was adopted, beginning with familiarisation with the data through an iterative process. Initial codes were systematically generated to identify patterns, which were then synthesised into broader themes reflecting the narratives of exclusion and marginalisation in the Third gender community. Simultaneously, quantitative data were analysed using descriptive statistics, and frequency and percentage were calculated for sociodemographic data. At the same time, Likert scale responses were interpreted through median scores to evaluate central tendencies in perception of marginalisation.

Results

Socio-demographic Profile of respondents

Among the survey respondents, the age distribution was relatively balanced, ranging from 20 to 59 years of age, as shown in Table 1. Notably, the largest group comprised 62.9 per cent of respondents within the 20-29 age bracket, whereas the 50-59 age group accounted for only 3.8 per cent of the total.

About socioeconomic status, 40 per cent of the respondents belonged to the unreserved category, 24.8 per cent to the other backwards class, 34.3 per cent to the scheduled caste, and merely one per cent to the scheduled tribe. In terms of religion, an overwhelming 94.3 per cent of respondents followed the Hindu faith, while only 5.7 per cent adhered to the Islamic faith. Among the educational attainments, 49.5 per cent were dropouts, followed by 20 per cent who had completed their twelfth, 15.2 per cent who had graduated, 11.4 per cent who had completed their tenth, and 3.8 per cent who had pursued postgraduate studies. In terms of occupation, a significant 26.7 per cent were involved in prostitution, trailed by 23.8 per cent engaged in begging and 13.3 per cent engaged in traditional work. Only 10 per cent were involved in other forms of work, such as performing in clubs or serving as outreach workers for NGOs. Regarding living arrangements, 83.8 per cent of respondents were renting accommodations, while only 16.2 per cent were residing in *deras*. Lastly, 83.8 per cent of respondents were single, 13.3 per cent were married, and a mere 3 per cent were divorcees.

Table 1: Socio-demographic information

Respondents	Frequency	Percentage
Age		
20-29	66	62.9
30-39	25	23.8
40-49	10	9.5
50-59	4	3.8
Caste		
Unreserved	42	40.0
OBC	26	24.8
SC	36	34.3
ST	1	1.0
Religion		
Hindu	99	94.3
Muslim	6	5.7
Qualification		
Dropout/below 10^{th}/ Illiterate	52	49.5
10^{th}	12	11.4
12^{th}	21	20.0
Graduate	16	15.2
Postgraduate	4	3.8
Occupation		
Traditional work	14	13.2
Bus/Toll/Train begging	25	23.8
Prostitution	28	26.7
All three	9	8.6
Other	10	9.5
Traditional work and Begging	5	4.8
Prostitution and Begging	7	6.7
Traditional Work and Prostitution	7	6.7
Accommodation		
In-dera	17	16.2
On rent	88	83.8
Marital Status		
Married	14	13.3
Unmarried	88	83.8
Divorce	3	2.9

n = 105

Table 2: Familial and Social Rejection

Items	Statements	Median Score
S01	Violence and abuse by family	5.00
S02	Felt socially excluded or isolated	4.00
S03	Positive interactions outside the community	2.00
S04	Violence, harassment and threats at public places	4.00
S05	Discrimination and harassment by the Police	3.00
S06	Teasing and bullying by peers in school	4.00
S07	Discrimination by doctors and hospital staff	1.00
S08	Difficulty in getting formal identification documents	0.00

Scale Points for statement S01 to S08 are:

Never- 1 Rarely- 2 Sometimes- 3
Often- 4 Always- 4

No Awareness - 0 (This code was assigned to the responses of respondents who did not have awareness about rights)

Table 3: Nonacceptance and stigma

Items	Statements	Median
S01	Finding a job is difficult	4.00
S02	Finding a house for rent	5.00
S03	Level of acceptance	1.00
S04	Third Gender people are still stigmatised	5.00

Scale Points for statement S01 & S02 are:

Very Easy- 1 Easy- 2 Neutral- 3
Difficult-4 Very Difficult-5

Scale Points for statement S03 are:

Totally Unacceptable-1 Unacceptable-2 Neutral- 3
Acceptable- 4 Totally Acceptable-5

Scale Points for statement S04 are:

Not at all stigmatised- 1 Slightly Stigmatised- 2
Somewhat Stigmatised- 3 Moderately stigmatised- 4
Highly Stigmatised- 5

Table 4: Abuse and avoidance

Items	Statements	Median
S01	Societal misconceptions and biases	5.00
S02	Dera is the perfect home for Third Gender children	4.00
S03	Legal recognition reduced the stigma and discrimination	0.00
S04	Third Gender people are treated with respect and dignity in society	4.00

Scale Points for statement S01 to S04 are:

Strongly Agree- 1	Agree-2	Neutral- 3
Disagree-4	Strongly Disagree- 5	

No Awareness- 0 (This code was assigned to the responses of the respondents who did not know about rights)

Marginalisation Issues

Despite legal recognition and constitutional protections, respondents shared personal accounts and survey responses that reflected persistent rejection, abuse, and neglect both within their immediate social environments and through systemic structures. Third Gender individuals face exclusion from mainstream society, often internalising feelings of low self-worth, insecurity, and frustration due to societal indifference (Pande, 2018). As reported by the respondents, there is no support and acceptance within their own families.

Quantitative findings in Table 2 show that the highest median score was for the statement on violence and abuse by family members. During focus group discussions, respondents expressed how their fathers and brothers would beat them in an attempt to correct their feminine behaviour and mannerisms. They reported that their parents did not understand or accept their gender identity, and siblings often avoided contact altogether. This familial hostility led several individuals to leave their homes and seek refuge in deras, which are community spaces belonging to the Third Gender, to escape the emotional and physical abuse they faced.

Social interactions outside the community were also marked by exclusion and abuse. Respondents noted that they were often harassed or questioned without reason by police, and in some cases, subjected to inappropriate physical contact. They were regularly ridiculed or verbally abused in public spaces, with derogatory language and vulgar comments. Table 2 supports these accounts, showing a lack of respect and dignity experienced in daily life. These findings indicated that social rejection is not limited to the personal sphere but also widespread in public settings.

Institutional discrimination was another recurring theme in both survey and qualitative responses. As shown in Table 1, 49.5 per cent, nearly half of the respondents, were dropouts or had minimal formal schooling. This was attributed to teasing and bullying by classmates, and the absence of any supportive intervention from teachers or family members. The lack of educational attainment directly impacted their employment opportunities. According to Table 1, only 9.5 per cent were working in the formal sector. At the same time, a significant respondents were involved in prostitution, 26.7 per cent and 23.8 per cent in begging to earn their livelihood. Even if they

were qualified, employers were unwilling to give them jobs because of social stigma and prejudice.

Housing was another primary concern among the Third Gender community. The data in Table 1 showed that 83.8 per cent of respondents lived in rented accommodation, primarily because they were uncomfortable with the rigid rules enforced in *deras.* However, securing rental housing was itself a challenge. Respondents spoke about landlords charging them excessive rent and neighbours expressing discomfort with their presence, often viewing them as immoral or unsafe. These accounts reflect how housing insecurity is driven not just by poverty but by active exclusion from community life.

Although Table 2 suggests low reported discrimination in healthcare settings, qualitative accounts painted a different picture. Respondents reported that they prefer over-the-counter prescriptions or self-medication rather than going to doctors for treatment. Those who had undergone surgery expressed frustration at the lengthy and complicated procedures to change their gender identity in official documents. The respondents reported paying bribes or encountering officials who had no idea how to handle their requests. Incomplete documents often prevented them from accessing government welfare schemes or essential services that require updated identification.

Finally, the overarching issue of social acceptance emerged across discussions and survey responses. As indicated by the data in Tables 3 and 4, Third gender individuals are still widely viewed as unacceptable in mainstream society. Respondents shared that they are primarily accepted in roles of beggars and prostitutes, but not as equals or as human beings. This deep-rooted stigma and lack of dignity further reinforced their marginalised position, cutting them off from opportunities to live with respect and dignity.

Discussion

According to the findings, the Third Gender community face multidimensional marginalisation in Haryana. This exclusion has roots in societal stigma, heteronormativity, and structural barriers. They collectively caused their economic, social, and cultural vulnerabilities. Social Exclusion Knowledge Network (SEKN) Model (Popay et al., 2008), stigma theory (Goffman, 1963), and Bourdieu's social reproduction and symbolic violence (1977, 1991) helped in understanding the complexities of their marginalisation.

As highlighted in Table 2, Third Gender children face severe violence and abuse by their families. Their families do not try to understand their gender identity; their siblings were also not supportive. Respondents from uneducated families in the focus group discussion expressed that they

were physically and verbally abused to correct their gender. However, respondents from educated families noted that they were taken to doctors and psychiatrists; in some cases, they were also taken to tantriks. However, nothing has changed; their parents still do not understand them and think that they are a stigma to the family's honour. This mirrors Pande's (2018) findings related to societal stigma, which reinforces the rejection of Third Gender children by their families, and they lose the critical support system.

The social exclusion framework by Silver (1994) explained that estrangement by family causes the disruption of social bonds, which initiates the surging effect of marginalisation in all aspects of life. According to Arvind et al. (2021), research, Third Gender children face harassment or threats from family members when they behave in a manner that deviates from their expected gender behaviour. They always have this fear that their family will abandon them, leaving them with no option except taking refuge in *Deras*. The study found that the third gender community in India often experiences a profound sense of isolation and rejection from their own families.

The findings demonstrated that respondents rarely engaged in positive interactions outside their community. The respondents reported social exclusion and a lack of respect and dignity in society, as indicated in Table 4. This was due to their gender identity. They face violence and harassment; this issue was also brought to light in research by Jesus et. al (2020), in which a wide range of violence incidents were reported by the Third Gender community. Multiple forms of abuse include family members, police, sex clients, people on the streets and occasional and stable partners. Stigma theory elucidated how societal labelling of Third Gender individuals as deviant causes their exclusion from family structures and broader social networks (Goffman, 1963).

According to the sociodemographic data in Table 1, 49.5 per cent of respondents are either dropouts, illiterate, or have completed below the 10th grade. This is because they were teased and bullied by their classmates and peer group, as depicted in Table 2. In their adolescent period, when they were not aware of their gender identity or what was wrong with their body, or why other people treated them like that, they felt isolated and excluded. No one was available to answer their questions at school or at home. The existing literature suggests that Third Gender children often encounter difficulties in completing their education due to their gender identity (Sifat & Shafi, 2020; Kumar et al., 2022).

Education plays a vital role in addressing marginalisation, as discussed above; nearly half of the population could not complete their studies. This resulted in precarious livelihood choices, as the data illustrated in Table 1, the

most significant 26.7 per cent of respondents, were engaged in prostitution, followed by 23.8 per cent who were involved in begging. Only 9.5 per cent of respondents reported engaging in other forms of work, like clubbing and being an outreach worker for an NGO. Thompson et al. (2019) claimed that this community is negatively impacted by the stigma associated with their gender identity, as reflected in Table 3, where respondents found it challenging to get a job. They reported that no one is willing to hire them because of a lack of qualifications and the necessary skills required for that job. Even educated respondents are not able to secure jobs or a respectable livelihood, which forces them to join the *Dera* or prostitution, as reported by them.

A substantial majority of respondents, 88.3 per cent, as depicted in Table 1, live on rent. They refrained from living in Dera because of the strict rules and regulations. Some respondents reported that the guru treats them like a slave, as shown in Table 4; they disagree that Dera is a perfect place for Third Gender children. Consequently, they decided to live on rent independently. However, it is tough to find a house for rent, according to Table 3, owners charge them twice or three times the amount. Respondents expressed that nobody wants them as their neighbours, because of gender stereotypes that Third Gender individuals are indecent, immoral and habitual criminals. The findings are aligned with the study by Mehar and Acharya (2022), who explored the historical roots of marginalisation of the Third Gender community, which illustrated how colonial legacies continued to shape the perceptions and attitudes of society and reinforced the exclusion.

As noted in several studies, the nonbinary identity of the Third Gender community prevents them from accessing healthcare services (Bradford et al., 2013; The Lancet Public Health, 2020). Table 2 indicates that they have never experienced discrimination or mistreatment from medical professionals or hospital employees; however, the fact is different, as respondents expressed. They prefer to take counter prescriptions to avoid going to hospitals for checkups. If it is necessary to go to the doctors, they treat them out of fear of curse, their indecent behaviour and threat of disrobing. During the focus group discussion, some respondents noted that doctors behaved rudely with them, so they avoid going to the hospitals. Here, stigma and symbolic violence provide critical insights into how societal norms and discriminatory practices devalue Third Gender identities and discourage them from accessing healthcare facilities (Goffman, 1963; Bourdieu, 1991).

According to Table 2 and Table 4, the majority of respondents have no awareness of their rights, government facilities, and welfare schemes available to them. Additionally, there is a gap between these rights and their practical implications, and many Third Gender individuals continue to face severe discrimination and abuse, which emphasises the structural exclusion

(Bhattacharya et al., 2022; Popay et al, 2008). According to the respondents, it is difficult to get legal documents with this identity because, before identifying themselves as Third Gender, their documents had a male gender identity. After surgery, it is a cumbersome process when they want to rectify their identity in documents. The respondents said that if they get involved in paperwork, they will earn what they will eat, and without having complete documents, they cannot access the government facilities and benefits.

Mondal et al. (2023) highlighted how a cycle of poverty is sustained by exclusion from work, housing and legal safeguards. The socioeconomic problems of transsexuals stemmed from the cultural stigma that restricts their chances to be part of the mainstream. Based on the findings of focus group discussions and the data shown in Tables 3 and 4, it can be concluded that the Third Gender community is highly stigmatised and still unacceptable in society. Misconceptions and biases surrounding their gender identity are one of the reasons for negative attitudes towards them. Sexuality is a matter of personal choice; it is fluid, but societal rigidity regarding the sexual binary (Meher & Acharya, 2022) further exacerbates the issue. Respondents reported that society reduces them to mere sex objects; they often face dehumanising behaviour, as highlighted by Rout (2018) in his study, that Third gender individuals face numerous challenges in meeting their basic needs due to non-acceptance. It results in limiting their access to resources; consequently, for survival, they resort to begging and prostitution, which further degrades their social status.

The overall findings showed that the Third gender community face multidimensional marginalisation due to cultural stigmatisation, systemic exclusion, and heteronormativity in Haryana. In line with the SEKN model (Popay et. al., 2008), restricted access to economic, social, political, and cultural resources negatively impacts every aspect of their lives. The rigid gender binary obstructs the inclusion of those who do not conform to societal gender norms. The study provides actionable insights for policymakers, practitioners, and researchers. There is an urgent need for sensitisation programs for addressing the deep-seated stigma against the Third Gender community and inclusive policies regarding education, employment, healthcare and housing. Furthermore, community-based awareness programs should be conducted to make them aware of their rights, and the process of getting legal documents should be simplified.

In addition to practical and policy relevance, the present study contributes to the existing theoretical framework by signifying how structural exclusion works. SEKN model (Popay et al., 2008), stigma theory (Goffman, 1963) and social reproduction and symbolic violence (Bourdieu, 1991) helped in understanding the lived experiences of Third Gender individuals. These insights demonstrated the importance of context-specific sociological

research and highlighted the areas for future exploration, such as regional disparities and the impacts of long-term policies.

Limitations

Third Gender people have experienced abuse and shame during the adolescent period. They often feel embarrassed and apprehensive while expressing their feelings, as they perceive it as further social stigmatisation. This makes it very difficult to access, convince and interview them. This is because the sample is small and the study cannot be generalised.

Conclusion

The Third Gender community, because of their gender identity, faces a cycle of exclusion and marginalisation. The findings underlined the constant rejection by society, stigma, and discrimination shaping the lives of Third gender individuals despite constitutional recognition and legal protections. There are laws and welfare programs to protect the community, but they are still ineffective due to the sexual rigidity of society (Jadidi & Sharma, 2021). To address this issue, it is important to introduce awareness and gender sensitisation programs to help tackle the prevailing misconceptions and biases in mainstream society. A lack of awareness contributes to biased attitudes; therefore, it is crucial to educate people regarding nonbinary gender and sexual orientation.

Qualitative and quantitative findings revealed the layered exclusion, which also gave insight into the critical role of cultural, economic and social factors in reinforcing the marginalisation as per the Social Exclusion Knowledge Network (SEKN) model. At the same time, the Third Gender community were accepted and respected in the ancient Vedic period and the Mughal period. Colonial laws like the Criminal Tribes Act (1871) and Section 377 initiated their marginalisation (Hinchy, 2019; Biswas, 2019). This stigma is perpetuated and reflected in challenges faced by Third gender individuals in accessing education, healthcare, housing and employment.

This study examined the lived realities of Third-gender individuals in Haryana, contributing methodological value to the existing literature, as most prior research in this area relied heavily on qualitative approaches. Using a mixed-method design, this research provided narrative depth and empirical breadth, helping to capture the multifaceted nature of marginalisation. The study focused on everyday experiences of exclusion, particularly concerning societal institutions. The research tried to add to the current understanding of how legal rights often fail to translate into real inclusion. The findings contribute to ongoing conversations around stigma, social inequality, and structural barriers.

Unless the cultural and structural barriers are addressed through sensitisation, education, and policy implementation, it is difficult to dismantle the biases and ensure integration. The Third Gender rights will remain symbolic rather than transformative, making it difficult to make them part of the mainstream social fabric. Future research should focus on strategies to enhance their societal inclusion, give place to Third-generation voices in policy-making, and achieve substantive equality and dignity for all.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interest concerning this article's research, authorship, and/or publication.

Notes

1. As per the law, Transgender person is a person whose gender does not match the gender assigned to that person at the time of birth, and includes: Trans-men, Trans-women, Persons with intersex variations, Gender-queer persons, Persons with socio-cultural identities such as kinnar, hijra, aravani and jogta.
2. The people who follow the culture do not like to be called Transgender in Haryana; they call themselves 'Kinnar' or 'mahant', and they take pride in it.
3. The Third Gender term used in this paper, according to ancient texts, Tritya-prakriti, because it comprises all who follow the hijra culture and who do not follow the culture and identify themselves as transgender. So, Third Gender/Transgender/Hijra/Kinnar are all used in the same sense in this paper.

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