HEALTHCARE SEEKING BEHAVIOUR OF EUNUCHS: A QUALITATIVE STUDY

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ABSTARCT

Background: Eunuch is a broader term and include hermaphrodites, transsexuals and transvestite. In the subcontinent, they called Hijra, Khusra or Khwaja sara. Their peek era was Mughal empire when they were exalted as guardians, military personnels and courtiers. They lost their esteem during the British empire. This study was conducted to know the healthcare seeking behavior of eunuchs.

Methods: This qualitative study was conducted in district Abbottabad of Khyber Pakhtunkhwa from December 2014 to April 2015. Two Focus Group Discussions and Five indepth Interviews were conducted. Each Focus Group Discussion had six eunuchs. Content analysis was done to identify different patterns.

Results: All key informants and participants of first Focus Group Discussion were illiterate and poor while participants of second Focus Group Discussion were educated and well off. Self medication and fear of male hospital staff was largely reported.

Conclusion: Eunuchs have developed miserable healthcare seeking behaviors just because of the societal response.

Key words: Eunuch, Transgender, Healthcare Seeking Behavior.

INTRODUCTION

Eunuchs or third gender are those individuals who don't come under the definition of male and female. They can be classified into three types¹. Hermaphrodites are those born inter sex or with mixed genitalia, Transsexual are those who are castrated and become eunuchs while those males having feminine sexual orientation and hence wear like women are called transvestites. Eunuchs are commonly called as Hijra, Khusra or Khwaja Sara in the subcontinent². Khwaja sara is the name given to eunuchs in Mughal era; the golden period of eunuchs where they enjoyed highest esteem through guarding harems, powerful positions in military and courts and being the intimates of rulers^{1,3}. After the downfall of Mughal dynasty, British government regarded them as a threat to the society and their status was deteriorated through laws like Criminal Tribes Act and the Dramatic Performance Act4. And so they were

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Cell: 0321-9103569 Email: abrardr@yahoo.com thrown into a state of Social Exclusion⁵ preventing them from full participation in social, economic and political life and from asserting their rights. Eunuchs used to earn their living by dancing at weddings, births and carnivals but due the advent of modern trends in celebrations, beggary and sex work remains their only professions in majority of cases¹

Almost every Pakistani city has a number of Eunuch communities living together in the traditional commune arrangement of five or more disciples called "Chelas" supervised by a leader called "Guru"1,3,6. In Pakistan, eunuchs are registered as third gender and supreme court has ordered the National Database and Registration Authority to issue them National Identity Cards and enlist them as voters^{3,7}.

Social exclusion has lead eunuchs to be involved in sex work; increasing their vulnerability to Sexually Transmitted Diseases(STDs)⁸. Sex trade make them an essential link in the chain of transmission of HIV in Pakistan⁹. Many studies have regarded them as a potent source of HIV infection^{10,11,12}. This study is conducted to know the healthcare seeking behavior of eunuchs in district Abbottabad of Khyber Pakhtunkwa, where a sizeable number of this community is present, in order to help and protect them and general public from diseases.

METHODOLOGY

This qualitative study was conducted in district Abbottabad of Khyber Pakhtunkhwa, Pakistan from December 2014 to April 2015. Two Focused Group Discussions (FGD) and Five in depth interviews were conducted. Each FGD included six eunuchs identified by the key informants (who were also eunuchs and interviewed) and through snow ball sampling as well, from different areas of Abbottabad like Upper Kehal, Malikpura, Supply and Jinnah Abad. Interviews were semi structured and a moderator used to initiate discussion during FGDs. All the proceedings of FGDs and interviews were audio and video recorded. Transcripts obtained were qualitatively analyzed for emerging themes and subthemes through manual coding. Study plan was approved by the Ethical Review Committee of the Women Medical College Abbottabad.

RESULTS

All the participants of one FGD were illiterate and poor while those of the second FGD were literate and well off. Key informants were eunuchs and mostly beggars.

Common Health Problems

According to the study participants, common health problems among them were anxiety, depression, body aches, high blood pressure, low calcium level, stomach disturbances, anemia, common cold and cough.

One of the well off eunuchs stated:

"we are more depressed as compared to a common man because neither our own families nor this male dominated society accepts us".

A poor eunuch stated,

"I want to go back home but my family doesn't allow me saying I am a stigma which makes me mentally disturbed".

One of the poor eunuch regarded old age as her greatest problem,

"I have many health problems and the greatest of all is my old age, which substantially reduced my income".

Healthcare Seeking Behavior

Self medication is practiced by the eunuchs.

According to one of the poor eunuchs:

"I never visit a doctor but recite Sura Yaseen instead. Most of the times, I directly get medicine from pharmacy without any prescription".

A well off eunuch said:

"I am physically fit as I take care of myself. I eat a balanced diet and do regular exercise. I am educated enough to guard myself against common illnesses".

One of the well off eunuchs stated:

"When I am ill, I go to Ayub Medical Complex (a teaching hospital) or any private clinic. I am always satisfied with the treatment I get there. If you have money then you can avail any facility with dignity and respect".

A poor eunuch said:

"I prefer to visit my Guru for spiritual healing".

A poor eunuch said:

"I go to a private female doctor because she does detailed check up and doesn't laugh at us. She is kind and could understand our problem better than a male doctor".

A well off eunuch said:

"I never go to a psychologist for counseling because people will think that I am psychic"

Potential Barriers to Proper Healthcare Seeking Behavior

A poor eunuch said:

"I am poor and cant afford a private doctor. I avoid government hospitals because people mock us for our gender and male doctors treat us like aliens"

A poor eunuch said:

"I used to go to the nearby DHQ (District Head Quarter Hospital) but tries to avoid it after an incident. Once I was locked in a room by the male staff of the hospital and was forced to dance. After that I developed fear against hospitals and doctors"

A poor eunuch said:

"In hospital, people make fun of us and we are so embarrassed that we forget our illness. Male doctors ridicule us too much".

A well off eunuch said:

Table 1: Description of the Study Participants

Participants	Education	Profession	Monthly Income (PKR)
FGD:01	Illiterate	Beggar, Badhai, Dancer,	Median: 8000 Range: 6000-12000
FGD:02	BA,BSc,MA,MBA	Guru	Median: 60,000 Range:45000-85000
Key Informants	Illiterate	Dancer, Guru, Banker	Median:10000 Range :5000-10000
		Beggars	

"I don't face any social embarrassment anywhere because I have concealed my identity and always wear male clothes"

Suggestions by the Eunuchs

One of the poor eunuchs said:

"Though I am satisfied with the treatment but there should be separate hospitals for eunuchs where we could evade social embarrassment at the hands of hospital staff. If not a hospital, at least a separate unit should be established at DHQ Hospital".

A well off eunuch said:

"There is no need of separate hospitals because it will further alienate us in the society, Government should appoint she male doctors in the hospital."

A poor eunuch stated:

"There should be some NGO (Non Governmental Organization) for our treatment, health awareness and financial support"

A well off eunuch said:

"We need psychologists more than physicians. Government should provide us the opportunities of psychological counseling and therapies."

DISCUSSION

Multiple health problems were reported by the eunuchs. Well off group reported anxiety and depression while poor group reported body aches. None of the group liked to discuss sexuality and sex related diseases. Self medication and fear of hospital and male doctors were evident from the discussion and interviews. Poor eunuchs, who said that they were afraid of male doctors, were uneducated. We cant rule out the possibility that they might have considered all the male hospital staff as doctors.

Factors that lead to the poor healthcare seeking behavior among eunuchs were poverty, illiteracy, and social alienation. Educated eunuchs had good jobs while illiterate eunuchs were either beggars or dancers. Many irrelevant and very few relevant suggestions were put forward by the eunuchs. It was suggested that mental health of eunuchs should also be ensured along with their physical health.

Health Care Workers need to consider eunuchs as a part this society and respect them as other human beings. They should not be exploited for being a third gender. NGOs should work for their health education and promotion, treatment and rehabilitation. The government should also ensure their health and education as a fundamental right.

This study has some limitations as well. Most of the eunuchs in Abbottabad were reluctant to talk with the research associates due to their bad experiences in the past. Only two FGDs and five interviews could not be regarded as representative of all the eunuchs. It was very difficult to decide a venue for FGDs and interviews because they would easily stand out. No enquiry was made into their sex related habits due to their reluctance.

CONCLUSION

As a third gender, eunuchs are socially excluded and denied their rights as human beings. They have developed miserable healthcare seeking behaviors just because of the societal response. Lots of health activities needs to be done for this unfortunate gender.

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