

IN THE HIGH COURT OF KARNATAKA AT BANGALORE

(ORIGINAL JURISDICTION)

W.P. No. 11655/ 2026 (GM-RES)

**BETWEEN**

Akira Mujawar

...Petitioner

**AND**

Union of India and others

Respondents

**INDEX**

<b>SL. NO.</b>	<b>CONTENTS</b>	<b>PAGES</b>
1	Synopsis and List of Dates	1-7
2	Memorandum of Petitioner Under Articles 226 and 227 of the Constitution of India, 1950	8-49
3	Verifying Affidavit	50
4	<b><u>ANNEXURE - A:</u></b> Copy of the Petitioner's Birth Certificate Along with relevant portion of the typed Copy- <u>ANNEXURE-A.</u>	51-52
5	<b><u>ANNEXURE - B:</u></b> Copy of the Petitioner's SSLC certificate	53
6	<b><u>ANNEXURE - C:</u></b> Copy of the letter from [REDACTED] [REDACTED]	54
7	<b><u>ANNEXURE - D:</u></b> Copy of the letter from [REDACTED] Hospital [REDACTED]	55
8	<b><u>ANNEXURE - E:</u></b> Copy of the Petitioner's Certificate issued on [REDACTED] under the TG Act 2019 and Rules 2020	56

9	<b><u>ANNEXURE – F:</u></b> Copy of the Petitioner’s Identity Card as Female, issued on [REDACTED] under the TG Act 2019 and Rules 2020	57
10	<b><u>ANNEXURE – G:</u></b> Copy of the Petitioner’s Aadhaar card with her updated name and gender	58
11	<b><u>ANNEXURE – H:</u></b> Copy of the Petitioner’s PAN Card Along with relevant portion of the typed Copy-ANNEXURE-H.	59-60
12	<b><u>ANNEXURE – J:</u></b> Copy of the Petitioner’s current Passport	61-62
13	<b><u>ANNEXURE – K:</u></b> Copy of the Petitioner’s application to change name and gender in her passport dated [REDACTED]	63-66
14	<b><u>ANNEXURE – L:</u></b> Copy of the Transgender Persons (Protection of Rights) Amendment Bill, 2026 as introduced in the Lok Sabha on 13.03.2026, along with the Statement of Objects and Reasons	67-78
15	<b><u>ANNEXURE – M:</u></b> Copy of the Transgender Persons (Protection of Rights) Amendment Act, 2026 as published in the Gazette on 30.03.2025	79-83
	A copy of the Guidelines issued by the Ministry of Health and Family Welfare are annexed herein as <b><u>ANNEXURE – N.</u></b>	84-97
16	Vakalatnama	98
17	Interlocutory Application under Section 151 CPC, 1908 For Dispensation with the Requirement of Production of Certified Copy of <b><u>ANNEXURE-M</u></b> along with Verifying Affidavit of the Petitioner	99-101

**Place:** Bengaluru

**Date:**

**Counsel for the Petitioner**

1

**IN THE HIGH COURT OF KARNATAKA AT BANGALORE**

**(ORIGINAL JURISDICTION)**

**W.P. No. 116557 2026**

**BETWEEN**

Akira Mujawar

...Petitioner

**AND**

Union of India & Others

..Respondents

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**SYNOPSIS**

The Petitioner is a transgender person and identifies as a woman. She has an Identity Card issued to her as Female under the Transgender Persons (Protection of Rights) Act 2019 (TG Act). The present Writ Petition has been brought by the Petitioner challenging the Transgender Persons (Protection of Rights) Amendment Act, 2026 ("Amendment Act") as ultra vires and violative of Part III of the Constitution of India, 1950, specifically in violation of Articles 14, 15 (1), 16, 19 and 21 of the Constitution of India. The Amendment Act has completely changed the definition of "transgender person" under Section 2 (k) of the Transgender Persons (Protection of Rights) Act, 2019 ("2019 Act"), from " a person whose gender does not match with the gender assigned to that person at birth and includes trans-

man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities as *kinner, hijra, aravani and jogta*" to only mean (i) a person having such socio-cultural identities as kinner, hijra, aravani and jogta, or eunuch, or a person with intersex variations specified below or a person who, at birth, has a congenital variation in one or more of the following sex characteristics as compared to male or female development:— (a) primary sexual characteristics; (b) external genitalia; (c) chromosomal patterns; (d) gonadal development; (e) endogenous hormone production or response, or such other medical conditions; or a person who has been forced to present a transgender identity.

This excludes the Petitioner who is a transgender person and who has changed her gender identity to female under the TG Act 2019. The Petitioner is undergoing hormonal therapy and medical treatment for her gender identity and is also in the process of changing her legal documents to reflect her name and gender identity as female. The Amendment Act now completely removes her from the definition of 'transgender person' as she does not fall under the socio-cultural identities of *hijra, kinnar, arvani and jogta*, nor is she intersex and removed the right to self-perceived gender identity. This amounts to a complete violation of her fundamental rights to self-determine her gender-identity under Articles 14, 15, 16, 19 and 21 of the

constitution as held by the Hon'ble Supreme Court under *NALSA v. Union of India*, (2014) 5 SCC 438. Further, the Amendment Act also amends Section 7 of the 2019 Act by requiring the medical institution to report all surgeries and treatment to the District Magistrate. Finally, the Amendment Act also includes draconian criminal offences under section 18 that are extremely broad encompassing anyone who (i) kidnaps someone (ii) causes grievous hurt by procedures like emasculation, castration, surgery or hormonal therapy (iii) with an intent of 'compelling such person to assume, adopt, or outwardly present a transgender identity against the will or consent of such person, whether by force, allurements, deceit, undue influence or otherwise' with punishment up to life imprisonment. These provisions have led to the Petitioner being unable to even continue her medical treatment and hormonal therapy and would impede the changing of her legal documents like her passport, educational certificates and birth certificate, due to the changed definitions under the Amendment Act and violates her rights to equality, non-discrimination on the ground of her gender identity, freedom of speech and expression, and the right to life and autonomy to self-determine and legal recognition of her gender identity as a woman, and her right to health to have her medical treatment continued. On all these grounds, this petition is filed challenging the constitutionality of the Amendment Act and to set it aside as being unconstitutional.

**LIST OF DATES AND EVENTS**

Dates	Events
	The Petitioner is a transgender woman who was assigned male at birth. However from a very young age, she has felt that she wanted to express herself as a woman
[REDACTED]	The Petitioner wanted to identify herself as female and in this regard began to access counselling sessions at [REDACTED]. After her counselling sessions, she received a diagnosis of gender dysphoria from [REDACTED].
1 [REDACTED] 2 [REDACTED]	She also received a diagnosis of gender incongruence under the DSM-V criteria [REDACTED].
[REDACTED]	The Petitioner, proceeded to undergo gender-affirmation treatment, to affirm her gender as female, and for this she was first advised to undertake hormonal therapy, and she started taking hormonal therapy from November 2023, and has continuously been on hormonal therapy since that date.
[REDACTED]	The Petitioner also began the legal process for the legal recognition of her name and gender identity as

	<p>female, in her legal documents. The Petitioner underwent the legal process under the Transgender Persons (Protection of Rights) Act 2019 ("TG Act 2019") and received her transgender ID card and certificate affirming her legal gender as female on [REDACTED] and also changed her name to Akira.</p>
	<p>Thereafter she also applied and got her name and gender changed in her Aadhaar card, which has since been updated based on the TG ID Card. She has since also updated her PAN card on this basis.</p>
[REDACTED]	<p>The Petitioner has also applied for a re-issue of her passport, with the change in her name, gender, and photo. Her passport re-issue application is still under process and is pending. She is also undergoing the process of changing her name and gender in her educational certificates and all her other documents.</p>
13.0.2026	<p>The Transgender Persons (Protection of Rights) Amendment Bill, 2026 ("Amendment Act") was introduced by the Respondent Union of India which proposed to amend the 2019 Act substantially. The Amendment Bill was introduced in the Lok Sabha on 13.03.2026</p>

24.3.2026	The Bill was subsequently passed the Rajya Sabha on 25.03.2026.
30.3.2026	The Amendment Act received the president's assent on 30.03.2026 and published in the Gazette.
	<p>The Amendment Act completely changes the definition of "transgender person" under section 2 (k) in the TG Act 2019 which was earlier held to mean,</p> <p>" a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities as <i>kinner, hijra, aravani</i> and <i>jogta</i>"</p> <p><i>Now the definition of "transgender person" means:</i></p> <p><i>(i) a person having such socio-cultural identities as kinner, hijra, aravani and jogta, or eunuch, or a person with intersex variations specified below or a person who, at birth, has a congenital variation in one or more of the following sex characteristics as compared to male or female development:—</i></p> <p><i>(a) primary sexual characteristics;</i></p> <p><i>(b) external genitalia;</i></p> <p><i>(c) chromosomal patterns;</i></p> <p><i>(d) gonadal development;</i></p> <p><i>(e) endogenous hormone production or response, or such other medical conditions; or</i></p> <p><i>(ii) any person or child who has been, by force, allurement, inducement, deceit or undue influence, either with or without consent, compelled to assume, adopt, or</i></p>

*outwardly present a transgender identity, by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure or otherwise:*

*Provided that it shall not include, nor shall ever have been so included, persons with different sexual orientations and self-perceived sexual identities.*

The petitioner is now not covered under the present definition of the law, due to the Amendment Act 2026, and is at risk of not having her medical treatment continued, and of her documents not reflecting her name and gender identity as female for which she has been issued a Certificate and an Identity Card under the 2019 Act. All the provisions of the Amendment Act 2026 violate the Petitioner's' rights under Articles 14, 15 91), 16, 19, and 21 od the constitution.

Hence this petition.

Place: Bangalore

Date:

Counsel for the Petitioner

8

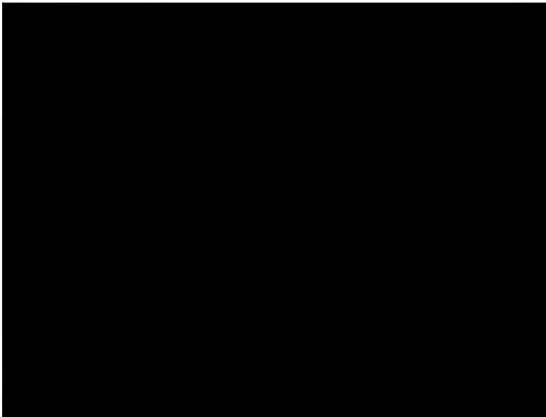
**IN THE HIGH COURT OF KARNATAKA AT BANGALORE**

**(ORIGINAL JURISDICTION)**

**W.P. No. 11655/ 2026**

**BETWEEN**

Akira Mujawar



...Petitioner

AND

1. Union of India  
Ministry of Law and Justice  
4<sup>th</sup> Floor, A Wing  
Shastry Bhawan  
New Delhi – 110001  
Represented by its Secretary

2. Union of India

Ministry of Social Justice and Empowerment

Room No. 622, A Wing

Shastri Bhawan

New Delhi – 110001

Represented by its Secretary

3. State Government of Karnataka

Department of Women and Child Development

Room No. 301 – 301A

Vidhan Soudha

Dr. Ambedkar Veedhi Building

Bangalore-560001

Represented by its Principal Secretary

Respondents

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**MEMORANDUM OF PETITION UNDER ARTICLES 226 AND 227 OF THE  
CONSTITUTION OF INDIA 1950**

The Petitioner submits as follows:

1. The address of the Petitioners for the purpose of issue of summons,

notice, etc. from this Hon'ble Court is that of their counsels, Naveen Chandra V., Saaneyya H., Aparna Mehrotra and Neha Vinod, Advocates, having their office at D-6, Dona Cynthia Apartments, 35 Primrose Road, Bangalore - 560025.

2. The present Writ Petition has been brought by the Petitioner challenging the Transgender Persons (Protection of Rights) Amendment Act, 2026 ("Amendment Act") as ultra vires and violative of Part III of the Constitution of India, 1950, specifically in violation of Articles 14, 15 (1), 16, 19 and 21 of the Constitution of India. The Amendment Act has completely changed the definition of 'transgender person' under Section 2 (k) of the Transgender Persons (Protection of Rights) Act, 2019 ("2019 Act"), from 'a person whose gender does not match with the gender assigned to that person at birth to only 'socio-cultural identities' such as *kinnar*, *hijra*, *aravani*, *jogta* or 'eunuch', an intersex person, or a person compelled to present as transgender, thus excluding the Petitioner who is a transgender person as a transgender woman and who has changed her gender identity to female under the TG Act 2019. The Petitioner is undergoing hormonal therapy and medical treatment for her gender identity and is also in the process of changing her legal documents to reflect her name and gender identity as female.

The Amendment Act now completely removes her from the definition of 'transgender person' as she does not fall under the socio-cultural identities of *hijra*, *kinnar*, *arvani* and *jogta*, nor is she intersex or a person compelled to present as transgender and removed the right to self-perceived gender identity. This amounts to a complete violation of her fundamental rights to self-determine her gender-identity under Articles 14, 15, 16, 19 and 21 of the constitution as held by the Hon'ble Supreme Court under ***NALSA v. Union of India***, (2014) 5 SCC 438.

Further, the Amendment Act also amends Section 6 and 7 of the 2019 Act requiring a medical board to make a recommendation and medical experts to be consulted and requiring the medical institution to report all surgeries and treatment to the District Magistrate. Finally, the Amendment Act also includes draconian criminal offences under section 18 that are extremely broad with punishment up to life imprisonment. These provisions have led to the Petitioner being unable to even continue her medical treatment and hormonal therapy and would impede the changing of her legal documents like her passport, educational certificates and birth certificate, due to the changed definitions under the Amendment Act and violates her rights to equality, non-discrimination on the ground of her gender identity, freedom of speech and expression,

and the right to life and autonomy to self-determine and legal recognition of her gender identity as a woman, and her right to health to have her medical treatment continued. On all these grounds, this petition is field challenging the constitutionality of the Amendment Act and to set it aside as being unconstitutional.

**Brief Facts:**

3. The Petitioner is a transgender woman who was assigned male at birth. However, from a very young age, she has felt that she wanted to express herself as a girl, and then a woman. She has socially transitioned in terms of her appearance, pronouns and clothes. The Petitioner completed her 12<sup>th</sup> standard and had to drop out of her university degree before finishing it because of a lack of support for her transgender identity and moved to another city, as she has escaped from because of lack of support from her family as well.

(A copy of the Petitioner's Birth Certificate is annexed herein and is marked as **ANNEXURE – A**)

(A copy of the Petitioner's SSLC certificate is annexed herein and is marked as **ANNEXURE – B**)

4. The Petitioner wanted to identify herself as female and, in this regard, began to access counselling sessions since May 2022 at the [REDACTED]. After her counselling sessions, she received a diagnosis of gender dysphoria from [REDACTED]. She has also received a diagnosis of gender incongruence under the DSM-V criteria [REDACTED] on [REDACTED].

5. Following this, the Petitioner, proceeded to undergo gender-affirmation treatment, to affirm her gender as female, and for this she was first advised to undertake hormonal therapy, and she started taking hormonal therapy from November 2023, and has continuously been on hormonal therapy since that date. Since then, the Petitioner has been on hormonal therapy for more than 2 years and has had to attend consultations to renew her prescription for the same.

(A copy of the letter from [REDACTED] dated [REDACTED] is annexed herein as **ANNEXURE - C**)

(A copy of the letter from [REDACTED] dated [REDACTED] is annexed herein as **ANNEXURE -D**)

6. At the same time, the Petitioner also began the legal process for the legal recognition of her name and gender identity as female, in her legal documents. The Petitioner underwent the process under the Transgender Persons (Protection of Rights) Act 2019 ("TG Act 2019") and received her transgender ID card and certificate affirming her legal gender as female on [REDACTED].

(A copy of the Petitioner's Certificate issued on [REDACTED] under the TG Act 2019 and Rules 2020 is annexed herein as **ANNEXURE - E**)

(A copy of the Petitioner's Identity Card as Female, issued on [REDACTED] under the TG Act 2019 and Rules 2020 is annexed herein as **ANNEXURE - F**)

7. Thereafter, she also applied and got her name and gender changed in her Aadhaar card, which has since been updated based on the TG ID Card. She has since also updated her PAN card on this basis (A copy of the Petitioner's Aadhaar card with her updated name and gender is annexed herein as **ANNEXURE - G**)

(A copy of the Petitioner's PAN Card is annexed herein as **ANNEXURE -H**)

8. However, the Petitioner's passport still remains in her dead name and old gender as male, and therefore, she has also applied for a re-issue of her passport, with the change in her name, gender, and photo which was done on [REDACTED]. Her passport re-issue application is still under process and is pending. She is also undergoing the process of changing her name and gender in her educational certificates. The Petitioner needs her name and gender in all her educational documents changed so that it reflects her gender identity as female so that she may apply to jobs without the fear of harassment or discrimination and is currently without full-time employment.

(A copy of the Petitioner's current Passport is annexed herein as **ANNEXURE -J**)

A copy of the Petitioner's application to change name and gender in her passport dated [REDACTED] is annexed herein as **ANNEXURE - K**)

9. While the Petitioner has been undergoing her gender affirming procedures and treatment and changing her name and gender in her legal documents in accordance with the provisions of the Transgender Persons (Protection of Rights) Act 2019, in March 2026, the said Act was proposed to be amended.

10. It is submitted that The Transgender Persons (Protection of Rights) Amendment Bill, 2026 ("Amendment Act") was introduced by the Respondent Union of India which proposed to amend the 2019 Act substantially.

(A Copy of the Transgender Persons (Protection of Rights) Amendment Bill, 2026 as introduced in the Lok Sabha on 13.03.2026, along with the Statement of Objects and Reasons is annexed herewith and marked as **ANNEXURE – L**)

11. The Amendment Bill was introduced in the Lok Sabha on 13.03.2026 and passed on 24.03.2026 and subsequently passed the Rajya Sabha on 25.03.2026. It received the president's assent on 30.03.2026 and published in the gazette.

(A copy of the Transgender Persons (Protection of Rights) Amendment Act, 2026 as published in the Gazette on 30.03.2025 in annexed herein as **ANNEXURE-M**)

12. The Impugned Amendment Act makes the following changes to the 2019 Act:

Section amending	2019 Act	Amendment Act 2026

Section 2(ii)	None	Section 2 '(aa) "authority" means a medical board, headed by a Chief Medical Officer or a Deputy Chief Medical Officer, as may be appointed by the Central Government, State Government or Union territory Administration;';
Section 2(iii)	Section 2(i) "person with intersex variations" means a person who at birth shows variation in his or her primary sexual characteristics, external genitalia, chromosomes or hormones from normative standard of male or female body;	Omitted
Section 2(iv)	Section 2(k) "transgender person" means a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities	Section 2(k) "transgender person" means—  (i) a person having such socio-cultural identities as <i>kinner</i> , <i>hijra</i> , <i>aravani</i> and <i>jogta</i> , or eunuch, or a person with intersex variations specified below or a person who, at birth, has a congenital variation in one or more of the following sex characteristics as compared to male or female development:— (a) primary sexual characteristics; (b) external genitalia; (c) chromosomal patterns; (d) gonadal development; (e) endogenous hormone production or response, or

	<p>as <i>kinner, hijra, aravani</i> and <i>jogta</i>.</p>	<p>such other medical conditions; or</p> <p>(ii) any person or child who has been, by force, allurements, inducement, deceit or undue influence, either with or without consent, compelled to assume, adopt, or outwardly present a transgender identity, by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure or otherwise: Provided that it shall not include, nor shall ever have been so included, persons with different sexual orientations and self-perceived sexual identities.</p>
Section 3	<p><i>Section 4(2) A person recognised as transgender under subsection (1) shall have a right to self-perceived gender identity.</i></p>	Omitted
Section 4(a)	<p>Section 6 (1) The District Magistrate shall issue to the applicant under section 5, a certificate of identity as transgender person after following such procedure and in such form and manner, within such time, as may be prescribed indicating the gender of such person as</p>	<p>Section 6 (1), for the words "District Magistrate", the words "District Magistrate, after examining the recommendation of the authority and, if he considers either necessary or desirable, after taking the assistance of other medical experts" shall be substituted;</p>

	transgender.	
Section 4(b)	No equivalent sub-section.	In section 6 - "(4) The person who has been issued a certificate of identity under sub-section (1) and is so declared as a transgender person within the definition under this Act shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person."
Section 5(a)	Section 7 (1) After the issue of a certificate under sub-section (1) of section 6, if a transgender person undergoes surgery to change gender either as a male or female, such person may make an application, along with a certificate issued to that effect by the Medical Superintendent or Chief Medical Officer of the medical institution in which that person has undergone surgery, to the District Magistrate for revised certificate, in such form and manner as may be prescribed.	(a) in sub-section (1), for the words "such person may", the words "such person shall" shall be substituted;
Section 5(b)	No equivalent clause	In section 7- "(1A) The medical institution in which the person who has

		<p>undergone surgery to change gender, either as male or female, shall furnish the details of such person to the concerned District Magistrate and the authority in such form and manner as may be prescribed."</p>
Section 5(c)	<p>Section 7 (2) The District Magistrate shall, on receipt of an application along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and on being satisfied with the correctness of such certificate, issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.</p>	<p>In section 7 - "(2) A person referred to in sub-section (1) shall also make an application to the District Magistrate who shall, on receipt of an application along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and on being satisfied with the correctness of such certificate, issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.";</p>
Section 5(d)	<p>Section 7 (3) The person who has been issued a certificate of identity under section 6 or a revised certificate under sub-section (2) shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person: Provided that such change in gender and</p>	<p>Omitted</p>

	the issue of revised certificate under sub-section (2) shall not affect the rights and entitlements of such person under this Act.	
Section 7	<p><b>Section 18.</b> Whoever,—</p> <p>(a) compels or entices a transgender person to indulge in the act of forced or bonded labour other than any compulsory service for public purposes imposed by Government;</p> <p>(b) denies a transgender person the right of passage to a public place or obstructs such person from using or having access to a public place to which other members have access to or a right to use;</p> <p>(c) forces or causes a transgender person to leave household, village or other place of residence; and</p> <p>(d) harms or injures or endangers the life, safety, health or well-being, whether mental or physical, of a transgender person or tends to do acts including causing physical abuse, sexual abuse, verbal and</p>	<p>Sections 18 (e), (f), (g) and (h) added:</p> <p><i>(e) kidnaps or abducts any adult person and causes—</i></p> <p><i>(i) grievous hurt to such person, whether by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure; or</i></p> <p><i>(ii) permanent or severe injury to the body or bodily functions of such person, with the intent of, or in the course of, compelling such person to assume, adopt, or outwardly present a transgender identity against the will or consent of such person, whether by force, allurement, deceit, undue influence or otherwise, shall be punishable with rigorous imprisonment for a term which shall not be less than ten years but which may extend to imprisonment for life, and shall also be liable to fine which shall not be less than two lakh rupees;</i></p> <p><i>(f) kidnaps or abducts any child and causes—</i></p> <p><i>(i) grievous hurt to such child, whether by mutilation,</i></p>

	<p>emotional abuse and economic abuse, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine.</p>	<p><i>emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure; or (ii) permanent or severe injury to the body or bodily functions of such child, with the intent of, or in the course of, compelling such child to assume, adopt, or outwardly present a transgender identity, whether by force, allurement, deceit, undue influence or otherwise, shall be punishable with rigorous imprisonment for life, and shall also be liable to fine which shall not be less than five lakh rupees;</i></p> <p><i>(g) by force, threat, coercion, allurement, deception, inducement, or undue influence—</i></p> <p><i>(i) compels any person, whether or not such person is a transgender person, to dress, present, or conduct themselves outwardly as a transgender person against the will of such person; and</i></p> <p><i>(ii) employs, uses, or causes such person to engage in begging, solicitation, servitude, or any other form of forced or bonded labour while so presenting, shall be punishable with rigorous imprisonment for a term which shall not be less than five years but which may extend to ten years, and shall</i></p>
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		<p><i>also be liable to fine which shall not be less than one lakh rupees; and</i></p> <p><i>(h) by force, threat, coercion, allurements, deception, inducement, undue influence or otherwise—</i></p> <p><i>(i) compels any child, whether or not such child is a transgender person, to dress, present, or conduct themselves outwardly as a transgender person; and</i></p> <p><i>(ii) employs, uses, or causes such child to engage in begging, solicitation, servitude, or any other form of forced or bonded labour while so presenting, shall be punishable with rigorous imprisonment for a term which shall not be less than ten years but which may extend to fourteen years, and shall also be liable to fine which shall not be less than three lakh rupees.”</i></p>
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13. As noted from the above changes, the Petitioner who is a transgender person and has identified her gender as female and also obtained a certificate of identity under section 7 of the 2019 Act as 'female' will now be deemed not to be covered by the Amendment and will not get any of the protections of the TG Act. This is because the new definition of 'transgender' only includes persons who belong to any socio-cultural identity or is intersex. The Petitioner does not belong to any of these.

14. Due to these exclusions, the Petitioner will also not be able to carry on with her medical treatment as the continuation of it would be seen as outside the defined scope of treatment for transgender persons, and the provisions for criminalization under section 18(e) to include 'hormonal procedures' is restricting medical health providers to restrict these services to the Petitioner due to the Amendment Act.
15. Further, the Petitioner's change of her name and gender in her legal documents, including her passport, educational certificates and birth certificate will also be at risk, as she would not fall under the coverage of the TG Act due to the Amendment Act 2026. This would put her entire existence and legal recognition at severe risk.
16. Even with respect to medical care for transgender persons, the Ministry of Health and Family Welfare has issued guidelines which clarify that access to hormones, surgery or other types of gender affirming care must be available to those who express a difference between their gender identity and their gender assigned at birth, and recognizes the diversity in kinds of persons who experience gender incongruence, which is not limited to the categories defined in the impugned Amending Act, but also include transgender men and women, among others. The Amending Act would stop all such

provision of healthcare by interfering with the nationally established and international best practices for the treatment of gender incongruence and recognition of transgender persons.

(A copy of the Guidelines issued by the Ministry of Health and Family Welfare are annexed herein as **ANNEXURE - N**)

17. Having no other alternative and equally efficacious remedy, the Petitioner has filed the present Writ Petition before this Hon'ble High Court under its original jurisdiction. The Petitioner has not filed any other petition before this Hon'ble Court in respect of this cause of action. The petition is filed on the following, among the other grounds.

### **Grounds**

18. **THAT** the Amendment Act 2026 amounts to a serious violation of the Petitioner's fundamental rights under Articles 14, 15(1), 16, 19 and 21 of the constitution and deserves to be held as ultra vires of the constitution and set aside.
19. **THAT** the Amendment Act under Section 2(k) completely changes the definition of 'transgender person' that has been used under the TG Act since 2019 and is now limited only to persons from "socio-

cultural identities" of *hijra, kinnar, aravani, jogta* and 'eunuch', persons with intersex variations and persons compelled to present as transgender. The definition completely excludes the Petitioner who was earlier included under the definition of 'transgender person' as "a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities as kinner, hijra, aravani and jogta" under section 2 (k) of the TG Act 2019. Such restriction completely negates the Petitioner's identity as a transgender person and a transwoman, from the coverage of the law, and thus the Amendment Act deserves to be set aside.

20. **THAT** the impugned Amending Act by amending the definition of 'transgender person' goes against the definition given to the same, by the Hon'ble Supreme Court in **NALSA v. Union of India**, (2014) 5 SCC 438 herein it was held that:

*"Gender identity 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 a freely chosen, modification of bodily*

*appearance or functions by medical, surgical or other means and other expressions of gender, including dress, speech and mannerisms. Gender identity, therefore, refers to an individual's self-identification as a man, woman, transgender or other identified category."* [para 19]

21. **THAT** the impugned Amendment Act by deleting Section 4(2) of the TG Act which protected self-perceived gender identity, is in complete violation of the judgement in ***NALSA v. Union of India***, (2014) 5 SCC 438, wherein the Hon'ble Supreme Court clearly held that self-identification is the basis of gender identity and held:

*"We therefore, hold that values of privacy, **self-identity, autonomy and personal integrity are fundamental rights guaranteed to members of the transgender community under Article 19(1)(a)** of the Constitution of India and the State is bound to protect and recognize those rights."* [para 66]

***"Self-determination of gender is an integral part of personal autonomy and self-expression and falls within the realm of personal liberty guaranteed under Article 21** of the Constitution of India."* [para 69]

***"(2) Transgender persons' right to decide their self-identified gender is also upheld** and the Centre and State Governments are directed to grant legal recognition of their gender identity such as male, female or as third gender."* [para 129]

Thus, by completely changing the definition of transgender persons to exclude from the definition which included persons who did not identify with the gender assigned to them at birth, amounts to a complete denial of the Petitioner's right to gender identity as held

by the Hon'ble Supreme Court under NALSA and deserves to be set aside.

22. **THAT** the definition by completely excluding transgender persons who do not belong to any socio-cultural identity, the Amendment Act has completely ignored a large section of the transgender community such as the Petitioner, who are transgender women and transgender men, and others, who were earlier covered under the TG Act, and were also clearly recognised by the Hon'ble Supreme Court in *NALSA v Union of India* where it held:

*"Discussion on gender identity including self-identification of gender of male/female or as transgender mostly focuses on those persons who are assigned male sex at birth, whether one talks of Hijra transgender, woman or male or male to female transgender persons, **while concern voiced by those who are identified as female to male trans-sexual persons often not properly addressed. Female to male unlike Hijra/transgender persons are not quite visible in public unlike Hijra/transgender persons. Many of them, however, do experience violence and discrimination because of their sexual orientation or gender identity.**" [para 46]*

23. **THAT** the definition is manifestly arbitrary and therefore in violation of Article 21 as per the test laid down in ***Shayara Bano v Union of India***, AIR 2017 SUPREME COURT 4609:

*"The test of manifest arbitrariness, therefore, as laid down in the aforesaid judgments would apply to invalidate legislation as well as subordinate legislation under Article 14. Manifest arbitrariness, therefore, must be something done by the legislature capriciously, irrationally and/or without adequate determining principle. Also, when something is done which is excessive and disproportionate, such legislation would be manifestly arbitrary." [para 55]*

The definition includes categories and excludes categories in a classification that is capricious, irrational and/or without adequate determining principle. First, there is no constitutional basis for excluding people from the definition of 'transgender persons' who were earlier covered under the 2019 Act, which included persons who do not identify with their gender assigned at birth, and included transmen, transwomen, and gender queer persons, particularly since this was the definition decided by the Supreme Court. Second, the definition includes within its scope those who were 'compelled' to present as transgender, thereby itself forcing people to identify as transgender without respecting their agency. Third, the definition includes intersex persons in the definition of transgender which is irrational since there are intersex people who are not transgender. Intersex persons may not know they are intersex for a large part of their lives and continue to live in the gender they were assigned at birth without any trouble unlike

transgender persons. Such exclusions and classifications are manifestly arbitrary and without application of mind and amounts to a violation of Article 14 and deserves to be struck down.

24. **THAT** the impugned Amending Act provides through the amended Section 6 gives the District Magistrate the discretion to refuse applications for change of gender identity only after obtaining a certificate from a medical board, and medical experts thus making the issuance of the identity certificate to transgender persons dependent on various undefined third parties, medical examinations and vague and arbitrary criteria which would amount to a violation of a person's right to self-determine their gender identity and autonomy guaranteed under Article 21 of the constitution.
  
25. **THAT** the impugned Amendment Act states in Section 7 that if a transgender person wishes to change their gender identity to male or female, it can be done only after medical reassignment. This amounts to a complete violation of the right to self-determination of one's gender identity upheld by the Hon'ble Supreme Court in **NALSA** which held that there is no need to undergo any medical procedure in order for a transgender person to exercise their right

to identify their gender under Articles 19(1)(a) and 21 of the Constitution:

*"Each person's self-defined sexual orientation and gender identity is integral aspects of self-determination, dignity and freedom and **no one shall be forced to undergo medical procedures, including SRS, sterilisation or hormonal therapy, as a requirement for legal recognition of their gender identity.**"*  
[para 22]

*"Gender identity as already indicated forms the core of one's personal self, based on self-identification, **not on surgical or medical procedure.**"* [para 82]

26. **THAT** the Supreme Court in **NALSA** has explicitly clarified the test for gender identity:

*"As already indicated, we cannot accept the Corbett principle of "Biological Test", rather we prefer to follow the psyche of the person in determining sex and gender and prefer the "Psychological Test" [para 75]*

27. **THAT** under the Yogyakarta Plus 10 Principles, Principle 31 mandates that no medical and psychological tests can be required for the legal recognition of one's gender identity. Principle 31 of the Yogyakarta Principles reads as under:

*"Principle 31 – The Right To Legal Recognition: Everyone has the right to legal recognition without reference to, or requiring assignment or disclosure of, sex, gender, sexual orientation, gender identity, gender expression or sex characteristics. Everyone has the right to obtain identity documents, including birth certificates, regardless of sexual orientation, gender*

identity, gender expression or sex characteristics. Everyone has the right to change gendered information in such documents while gendered information is included in them.

States Shall:

A. Ensure that official identity documents only include personal information that is relevant, reasonable and necessary as required by the law for a legitimate purpose, and thereby end the registration of the sex and gender of the person in identity documents such as birth certificates, identification cards, passports and driver licences, and as part of their legal personality;

B. Ensure access to a quick, transparent and accessible mechanism to change names, including to gender-neutral names, based on the self-determination of the person;

C. While sex or gender continues to be registered:

i. Ensure a quick, transparent, and accessible mechanism that legally recognises and affirms each person's self-defined gender identity;

ii. Make available a multiplicity of gender marker options;

iii. **Ensure that no eligibility criteria, such as medical or psychological interventions, a psycho-medical diagnosis, minimum or maximum age, economic status, health, marital or parental status, or any other third-party opinion, shall be a prerequisite to change one's name, legal sex or gender;**

iv. Ensure that a person's criminal record, immigration status or other status is not used to prevent a change of name, legal sex or gender."

28. **THAT** in *K.S. Puttaswamy v. Union of India*, (2017) 10 SCC 1, the Supreme Court upheld the right to privacy including the right to privacy over personal data, which would also encompass medical data:

"The sphere of privacy stretches at one end to those intimate matters to which a reasonable expectation of privacy may attach. It expresses a right to be left alone. A broader connotation which has emerged in academic literature of a comparatively recent origin

*is related to the protection of one's identity. Data protection relates closely with the latter sphere. Data such as medical information would be a category to which a reasonable expectation of privacy attaches."* [para 77]

The amended section 7 requires all medical institutions to furnish details of gender affirmative surgeries undertaken by persons to the District Magistrate. Such a provision is a blatant violation of the right to privacy under Article 21 by sharing personal data of persons who intend to undergo surgery with the State, without their consent and without any legitimate aim or compelling state interest.

29. **THAT** the Supreme Court has held that the right to privacy which includes autonomy is not within the 'private' sphere but also the 'public'. In ***Navtej Singh Johar v Union of India***, (2018) 10 SCC 1, in the context of sexual minorities, the Court held:

*"Citizens of a democracy cannot be compelled to have their lives pushed into obscurity by an oppressive colonial legislation. In order to ensure to sexual and gender minorities the fulfilment of their fundamental rights, it is imperative to 'confront the closet' and, as a necessary consequence, confront 'compulsory heterosexuality.' Confronting the closet would entail "reclaiming markers of all desires, identities and acts which challenge it." It would also entail ensuring that individuals belonging to sexual minorities, have the freedom to fully participate in public life, breaking the invisible barrier that heterosexuality imposes upon them. The choice of sexuality is at the core of privacy. But equally, our constitutional jurisprudence must recognise that the public assertion of identity founded in sexual orientation is crucial to the exercise of freedoms."* [para 60]

The exclusionary definition in amended section 2(k), as well as the new criminalisation provisions in amended section 18, produce an effect where transgender people who are not included under the definition will be forced to hide their identity and return to the 'closet', as the Petitioner fears. Without legal recognition of the Petitioner's identity, the Petitioner and other transgender people who are excluded from the definition are denied the right of the 'public assertion of identity'.

30. **THAT** in *Navtej Singh Johar v. Union of India*, (2018) 10 SCC 1, it was held that a classification, which discriminates against persons based on their 'intrinsic or core trait' such as their gender identity *ipso facto* fail the test of equality under Article 14 of the Constitution of India:

*"Section 377 creates an artificial dichotomy. The natural or innate sexual orientation of a person cannot be a ground for discrimination. **Where a legislation discriminates on the basis of an intrinsic and core trait of an individual, it cannot form a reasonable classification based on an intelligible differentia.***

*"In National Legal Services Authority v. Union of India & Ors. this Court **granted equal protection of laws to transgender persons.** There is therefore no justification to deny the same to LGBT persons and such classification has no rational nexus with the purpose of the law." [paras 14.3-14.4]*

The impugned Amending Act, by creating a distinction in the amended section 2(k) between transgender persons who fall within socio-cultural identities and are intersex, and other transgender persons who self-determine their identity, makes a classification

that is therefore unreasonable and bears no rational nexus with the purpose of the law, which is to protect and recognise transgender persons. Furthermore, the amended section 18, by introducing a series of crimes that include as an element 'presenting as transgender', fundamentally involves a core trait like gender identity in its definition. For these reasons, the impugned Amending Act violates Article 14 of the Indian Constitution.

31. **THAT** further, the provisions of amended sections section 18 (e), and (f) use extremely vague and broad terms including 'force, threat, coercion, allurement, deception, inducement or undue influence', and for sections 18(g) and (h), the terms 'force, allurement, deceit, undue influence or otherwise'. Such terms are not defined within the Act which run the risk of criminalizing even health care professionals as in the instant case for the Petitioner and leads to deprivation of fundamental rights. In ***State of Madhya Pradesh v. Baldeo Prasad***, [1961] 1 S.C.R. 970, the Supreme Court struck down the use of the phrase 'goonda' because it was too vague and undefined in the legislation, casting a chilling effect on the freedoms under Article 19 of the Constitution:

*"Incidentally it would also be relevant to point out that the definition of the word "goonda" affords no assistance in deciding which citizen can be put under that category. It is an inclusive definition and it does not indicate which tests have to be applied in*

*deciding whether a person falls in the first part of the definition. [...] After all it must be borne in mind that the Act authorises the District Magistrate to deprive a citizen of his fundamental right under Art. 19(1)(d) and (e), and [...] care must always be taken in passing such acts that they provide sufficient safeguards against casual, capricious or even malicious exercise of the powers conferred by them. It is well known that the relevant provisions of the Act are initially put in motion against a person at a lower level than the District magistrate, and so it is always necessary that sufficient safeguards should be provided by the Act to protect the fundamental rights of innocent citizens and to save them from unnecessary harassment.” [page 979]*

Thus, the provision is unconstitutional considering the potential ways in which it can be arbitrarily used to target and harass the members of the transgender community, as well as medical providers of care to transgender persons, without any sufficient safeguards, thereby violating Article 14 of the constitution.

32. **THAT** the Amendment Act by including criminal offences under Sections 18 (e) and (f) which criminalise anyone who kidnaps someone and causes grievous hurt by 'mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure' in order to compel someone to present a transgender identity, will amount to putting health care providers and medical professionals at risk of being charged with the criminal offence of grievous hurt, or kidnapping, which can result in a sentence of ten years to life imprisonment. This has led to the Petitioner being unable to get her medical treatment which she is undergoing

presently, and if there is no continual treatment and drugs accessible to her, which she is currently undergoing, it would lead to her gender affirming treatment being aborted, and would leave her in a situation where she would not be able to express her gender identity in the manner that she wishes to. It would also lead to several adverse health and medical consequences with hormonal effects reversing and leading to her right to life under Article 21 of the constitution being violated.

33. **THAT** the Supreme Court has affirmed the right to a relationship for transgender and queer persons in ***Supriyo v Union of India***, 2023 INSC 920:

*"While we agree, that there is a right - which we will characterise as a 'right to relationship' to avoid confusion - we squarely recognise it to fall within Article 21, as already recognised in the aforesaid cases. The right to relationship here, includes the right to choose a partner, cohabit and enjoy physical intimacy with them, to live the way they wish to, and other rights that flow from the right to privacy, autonomy and dignity. They are, like all citizens, entitled to live freely, and express this choice, undisturbed in society. Whenever their right to enjoyment of such relationship is under threat of violence, the state is bound to extend necessary protection. This is a natural consequence of this Court's judgments in Navtej Johar (supra), K.S. Puttaswamy (supra), Shafin Jahan (supra) and Shakti Vahini (supra)." [para 427, Justice Bhat]*

The impugned Amendment Act, by introducing vague and broad crimes cast a chilling effect on this established right to relationships

by potentially criminalising couples who run away with each other and where one is often accused of 'kidnapping' the other when one of them is a transgender person, which violates the right recognised under Article 21. This protection would also extend to all forms of alternative kinship structures and chosen families exercised by transgender persons in order to maintain community and support, but which this impending Amendment Act could interfere with through its vague definition of crimes.

34. **THAT** the 2019 Act itself was not fully implemented, and there was a case of a lack of bureaucratic will and 'legislative omission' in its implementation to all transgender persons. As the Supreme Court identified in ***Jane Kaushik v. Union of India***, 2025 INSC 1248:

*"At this stage, it would be apposite to discuss another facet of legislative omission, i.e., a situation in which the subject matter is not entirely unattended by legislation, yet discrimination still ensues owing to the gaps in the said legislation. Such gaps have the consequence of violating the constitutional mandate. In such cases, discrimination is not the result of an explicit act but of institutional legislative inaction. This is commonly known as, "relative legislative omission"."* [para 120]

Rather than address these gaps, the impugned Amending Act has in fact widened the legislative omission by further excluding more transgender persons from the definition, protections and

mechanisms of the 2019 Act, and would amount to omissive discrimination under Articles 14, 15 and 21 of the Constitution.

35. **THAT** the impugned Act systematically excludes gender non-binary and genderqueer persons from the protective umbrella of the law, thereby being in direct contravention of this Hon'ble Court's judgement in ***Jane Kaushik v. Union of India***, 2025 INSC 1248 wherein this Hon'ble Court has held that the State's failure to adapt administrative machinery to recognize and include non-binary identities constitutes omissive discrimination, and specifically directed this aspect to be considere. By removing the right to self-identify one's gender identity, the Amendment Act creates a procedural impossibility for non-binary and gender diverse citizens to access public employment, education, healthcare and all other entitlements and thus deserves to be set aside.
36. **THAT** the impugned Act is violative of Article 21 of the Constitution of India in as much as it violates the right to self-determination and therefore personal autonomy and personal liberty as guaranteed under Article 21 of the Constitution of India.
37. **THAT** in ***Arunkumar v Inspector General of Registration***, judgment dated 22.04.2019 in WP (MD) No. 4125 of 2019, the

Madras High Court held that a transgender or intersex woman who identifies as a woman can register her marriage with a man under the Hindu Marriage Act, 1955:

*"Seen in the light of the march of law, the expression 'bride' occurring in Section 5 of the Hindu Marriage Act, 1955 will have to include within its meaning not only a woman but also a transwoman. It would also include an intersex person/transgender person who identifies herself as a woman. The only consideration is how the person perceives herself."* [para 15]

Therefore, the Madras High Court has affirmed the right to self-determine gender extends to all legal entitlements including marriage. This was further affirmed unanimously by the Constitution Bench in **Supriyo**.

38. **THAT** the Hon'ble Karnataka High Court has also upheld and implemented the right to self-determine one's gender in the case of **Ms. X v State of Karnataka**, in judgment dated 20.12.2024 in WP No 55559 of 2017 (GM-RES), wherein the Court held that the Respondent State authorities are bound to change the name and gender on the birth certificate of the petitioner as per the intent of the 2019 Transgender Act and the rights under the Constitution. The Hon'ble Karnataka High Court recommended that the 2019 Act was a special enactment and other statute ought to be amended or read in compliance with it:

*"There is an obligation in terms of Section 8 of the Transgender Act on the government to safeguard the interest of the Transgenders, one of the modes and methodologies for such protection being the implementation of the mandate of Section 4 to 7 of the Transgenders Act, the Government would have to carry out necessary amendments to the Act of 1969 and Rules framed thereunder to give effect to the Transgenders Act and establish necessary procedures required to be followed, to give effect to the purpose and intent and mandate of the special laws, namely the Transgender Act." [para 42]*

The impugned Amendment Act removes the main thrust and purpose of the 2019 Act which was to implement and give shape to the constitutional rights of transgender persons, and therefore frustrates the established doctrines and principles of law on gender identity held in several cases across various High Courts and the Supreme Court.

39. **THAT** the Hon'ble Courts have held that the recognition of gender identity lies at the heart of the fundamental right to dignity and legal recognition of gender identity is, therefore, part of right to dignity and freedom guaranteed under Article 21 of the Constitution. The Hon'ble Court in ***K.S. Puttaswamy v. Union of India***, (2017) 10 SCC 1 to include gender identity and sexual orientation. It held,

*"Privacy of the individual is an essential aspect of dignity. Dignity has both an intrinsic and instrumental value. As an intrinsic value, human dignity is an entitlement or a constitutionally protected*

interest in itself. In its instrumental facet, dignity and freedom are inseparably inter-twined, each being a facilitative tool to achieve the other. The ability of the individual to protect a zone of privacy enables the realization of the full value of life and liberty. Liberty has a broader meaning of which privacy is a subset. All liberties may not be exercised in privacy. Yet others can be fulfilled only within a private space. Privacy enables the individual to retain the autonomy of the body and mind. The autonomy of the individual is the ability to make decisions on vital matters of concern to life. Privacy has not been couched as an independent fundamental right. But that does not detract from the constitutional protection afforded to it, once the true nature of privacy and its relationship with those fundamental rights which are expressly protected is understood. Privacy lies across the spectrum of protected freedoms. The guarantee of equality is a guarantee against arbitrary state action. It prevents the state from discriminating between individuals. The destruction by the state of a sanctified personal space whether of the body or of the mind is violative of the guarantee against arbitrary state action. **Privacy of the body entitles an individual to the integrity of the physical aspects of personhood. The intersection between one's mental integrity and privacy entitles the individual to freedom of thought, the freedom to believe in what is right, and the freedom of self-determination. When these guarantees intersect with gender, they create a private space which protects all those elements which are crucial to gender identity.** The family, marriage, procreation and sexual orientation are all integral to the dignity of the individual. Above all, the privacy of the individual recognises an inviolable right to determine how freedom shall be exercised" (para 169)

40. **THAT** the inclusion of the word 'eunuchs' in section 2(k) closely resemble the intention to criminalize and exterminate 'eunuchs' contained in the Criminal Tribes Act, 1871, a colonial legislation that was repealed in August 1949 by the Constituent Assembly sitting as Provisional Parliament as in contravention to the Founding values of the nation. The same is therefore prima facie

unconstitutional and the doctrine of presumption of constitutionality should not apply.

41. **THAT** in ***Vyjayanti Vasanta Mogli v State of Telangana***, judgment dated 26.07.2023 in WP (PIL) No 44 of 2018, the Telangana High Court held that the Telangana Eunuchs Act 1329, Fasli is unconstitutional because it used derogatory terms that are hostile to the transgender community such as 'eunuch', which has been used again the impugned Amending Act. They held:

*"[...] there can be no iota of doubt that such an enactment is anathema to our constitutional philosophy as explained by the Supreme Court in the above judgments. This is not only arbitrary and unreasonable but is, also manifestly arbitrary in as much as it criminalises the entire communities of eunuchs."* [para 48]

*"This legislation is violative of the human rights of the third gender community besides it is an intrusion into their private sphere as well as an assault on their dignity. It is thus offensive of both the right to privacy, and the right to dignity of transgender persons. It is not only violative of Article 14 but also clearly violative of Article 21 of the Constitutional of India. Such an enactment can no longer continue to find a place in our statute book. It is accordingly declared as unconstitutional."* [para 49]

42. **THAT** in ***Lt. Col. Nitisha v Union of India***, (2021) 15 SCC 125, the Supreme Court held that if any provision, even if neutrally worded has a 'disproportionate impact' on a certain protected category of persons, it is violative of Articles 14 and 15 of the

Constitution. Specifically, the Court endorsed the following two-part test:

*"First, the Court has to enquire whether the impugned rule disproportionately affects a particular group. [...] Second, the Court has to look at whether the law has the effect of reinforcing, perpetuating, or exacerbating disadvantage. Such disadvantage could be in the shape of: "[e]conomic exclusion or disadvantage, [s]ocial exclusion...[p]sychological harms...[p]hysical harms...[or] [p]olitical exclusion", and must be viewed in light of any systemic or historical disadvantages faced by the claimant group." [para 65]*

The amended sections 18 (e)-(h), while ostensibly neutral, will be disproportionately used against transgender persons who maintain households and provide shelter to other transgender persons who face social stigma and harm, including from their families. It will also affect the access to healthcare, support, shelter, and community for transgender people. The disproportionate impact is made out on the face of the impugned Amending Act itself which states that one of the elements of all of these crimes is when someone 'presents' as a transgender person or a transgender identity and will produce a disproportionate harm on transgender persons and engages in furthering stereotypes and physical violence against transgender communities.

43. **THAT** the impugned Act creates a chilling effect on fundamental rights and threatens to have the Petitioner de-recognised by the law resulting in losing access to healthcare, education and

employment opportunities that are all contingent upon the valid identity certificates issued under the 2019 Act.

44. **THAT** once rights are granted under Indian Constitutional law, they cannot be restricted or taken away. This follows from the doctrine of progressive realization which is contained in Article 2(1) of the International Covenant on Economic, Social and Cultural Rights, to which India is a state party, and held by the Supreme Court in **Navtej Singh Johar**:

*"The doctrine of progressive realization of rights, as a natural corollary, gives birth to the doctrine of non-retrogression. [...] The doctrine of non-retrogression sets forth that the State should not take measures or steps that deliberately lead to retrogression on the enjoyment of rights either under the Constitution or otherwise."*  
[paras 188-189]

Since the rights of self-determination and self-perceived identity were provided by the jurisprudence of the Supreme Court and section 4(2) of the 2019 Act, its explicit removal vide the impugned Amending Act defeats the principle of non-retrogression which is an aspect of the Indian Constitution including Article 14.

45. **THAT** in **Kerala State Beverages (M&M) Corpn. Ltd. v. PP Suresh and Others**, (2019) 9 SCC 710, the Supreme Court held

that when an authority makes an assurance as to providing some right that gives rise to a legitimate expectation, then it cannot be withdrawn without having firstly, provided for the opportunity to hear reasons why it should not be withdrawn and secondly, without having good reasons in public interest to change their policy:

*"[...] That the procedural part of legitimate expectation relates to a representation that a hearing or other appropriate procedure will be afforded before the decision is made. The substantive part of the principle is that if a representation is made that a benefit of a substantive nature will be granted or if the person is already in receipt of the benefit, that it will be continued and not be substantially varied, then the same could be enforced." [para 15]*

Therefore, those who already have received their rights and entitlements including, but not limited to, legal gender change, access to gender affirming care, schemes and benefits, should be able to continue accessing the same as per their legitimate expectation. In the instant case, the Impugned Amending Act has taken away the right of transgender persons who were previously recognized and are no longer within the definition. There was neither any consultation nor any clauses which provided a transition period, savings of previous rights or acknowledged that fact that the statute was in violation of a right granted by a constitutional court. The failure to retain these rights violates the legitimate expectation of benefit held by the Petitioner. It is

submitted that the impugned Amending Act has led to infringement of Petitioner's fundamental right to life guaranteed under article 21, right to equality under article 14 and the doctrine of legitimate expectation.

**GROUND FOR INTERIM RELIEF:**

46. **THAT** the Petitioner is a transgender person who has got her certificate of identity showing her gender as female under the TG Act 2019. She cannot now be excluded from the definition of 'transgender person' because she does not fall under the category of socio-cultural identity or intersex, as the same would remove her from the coverage of all the provisions and protections of the TG Act 2019.
  
47. **THAT** if the operation of the Amendment Act is not stayed, it would affect the Petitioner's health and medical treatment, which she is undergoing for the affirmation of her gender identity and the same would lead to a serious deprivation of her right to life under Article 21 of the constitution. The Petitioner has also sought for the change of her name and gender in her legal documents, which should not be affected. If the impugned Act is not stayed, access to safe and

accessible healthcare for the Petitioner will come to a complete halt denying her of her constitutional right to health and putting her safety and wellbeing at risk. The Petitioner herein will be put to grave danger as abrupt discontinuation of her treatment by medical practitioners

48. **THAT** the balance of convenience lies in favour of the Petitioner. Suspending the operation of the 2026 Amendment Act will merely restore the status quo of the 2019 Act under which Rules have been framed and systems operationalized, and protections for the Petitioner may continue.

### **PRAYER**

Wherefore, in light of the facts and circumstances stated hereinabove, it is most respectfully prayed that this Hon'ble Court may graciously be pleased to: -

- A. Declare the Transgender Persons (Protection of Rights) Amendment Act, 2026 issued by the Respondents No.1 and 2 Union of India, produced herein as **ANNEXURE – M**, as being unconstitutional and in violation of Articles 14, 15(1), 16, 19 and 21 of the Constitution of India and set it aside; and

B. Grant such other reliefs as this Hon'ble Court may deem fit and proper in light of the facts and circumstances of the case.

**INTERIM PRAYER**

Pending the disposal of this writ, the Petitioners pray that this Hon'ble Court be pleased to the stay the operation of the Transgender Persons (Protection of Rights) Amendment Act, 2026, produced herein as **ANNEXURE - M**, and direct that the Petitioner's medical treatment and change of name and gender in all her documents be permitted to continue, and the same may not be restricted in any manner, in the interest of justice and equity.

**Place:** Bangalore

**Counsel for the Petitioner**

**Date:**

**Address for Service:**

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**Bill No. 79 of 2026**

THE TRANSGENDER PERSONS (PROTECTION OF RIGHTS)  
AMENDMENT BILL, 2026

A

BILL

*to amend the Transgender Persons (Protection of Rights) Act, 2019.*

BE it enacted by Parliament in the Seventy-seventh Year of the Republic of India as follows:—

1. (1) This Act may be called the Transgender Persons (Protection of Rights) Amendment Act, 2026.

Short title and commencement.

5 (2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

40 of 2019.

2. In section 2 of the Transgender Persons (Protection of Rights) Act, 2019 (hereinafter referred to as the principal Act),—

Amendment of section 2.

(i) for clause (a), the following clause shall be substituted, namely:—

“(a) “appropriate Government” means—

(i) in relation to the Central Government or any establishment wholly or substantially financed by that Government, the Central Government;

(ii) in relation to a State Government or any establishment wholly or substantially financed by that Government, or any local authority within a State, the State Government;

(iii) in relation to a Union territory or any establishment wholly or substantially financed by the Central Government in that Union territory, the Administrator thereof appointed under article 239 of the Constitution or such authority as may be specified by the Central Government;’;

(ii) after clause (a), the following clause shall be inserted, namely:—

“(aa) “authority” means a medical board, headed by a Chief Medical Officer or a Deputy Chief Medical Officer, as may be appointed by the Central Government, State Government or Union territory Administration;’;

(iii) clause (i) shall be omitted;

(iv) for clause (k), the following clause shall be substituted, namely:—

“(k) “transgender person” means—

(i) a person having such socio-cultural identities as *kinner*, *hijra*, *aravani* and *jogta*, or eunuch, or a person with intersex variations specified below or a person who, at birth, has a congenital variation in one or more of the following sex characteristics as compared to male or female development:—

(a) primary sexual characteristics;

(b) external genitalia;

(c) chromosomal patterns;

(d) gonadal development;

(e) endogenous hormone production or response, or such other medical conditions; or

(ii) any person or child who has been, by force, allurements, inducement, deceit or undue influence, either with or without consent, compelled to assume, adopt, or outwardly present a transgender identity, by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure or otherwise;

Provided that it shall not include, nor shall ever have been so included, persons with different sexual orientations and self-perceived sexual identities.’.

3. In section 4 of the principal Act, sub-section (2) shall be omitted.

4. In section 6 of the principal Act,—

(a) in sub-section (1), for the words “District Magistrate”, the words “District Magistrate, after examining the recommendation of the authority and, if he considers either necessary or desirable, after taking the assistance of other medical experts” shall be substituted;

(b) after sub-section (3), the following sub-section shall be inserted, namely:—

5 “(4) The person who has been issued a certificate of identity under sub-section (1) and is so declared as a transgender person within the definition under this Act shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person.”.

5. In section 7 of the principal Act,—

10 (a) in sub-section (1), for the words “such person may”, the words “such person shall” shall be substituted;

(b) after sub-section (1), the following sub-section shall be inserted, namely:—

15 “(1A) The medical institution in which the person who has undergone surgery to change gender, either as male or female, shall furnish the details of such person to the concerned District Magistrate and the authority in such form and manner as may be prescribed.”;

(c) for sub-section (2), the following sub-section shall be substituted, namely:—

20 “(2) A person referred to in sub-section (1) shall also make an application to the District Magistrate who shall, on receipt of an application along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and on being satisfied with the correctness of such certificate, issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.”;

25 (d) sub-section (3) and the proviso shall be omitted.

6. In section 16 of the principal Act, in sub-section (2), for clause (f), the following clause shall be substituted, namely:—

30 “(f) representatives of the State Governments and Union territories Administration, by rotation, one each from North, South, East, West and North-East regions, not below the rank of Director in the concerned Ministry or Department, to be nominated by the Central Government, Members, *ex officio*.”.

7. For section 18 of the principal Act, the following section shall be substituted, namely:—

35 “18. Whoever,—

(a) compels or entices a transgender person to indulge in the act of forced or bonded labour other than any compulsory service for public purposes imposed by Government, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

40 (b) denies a transgender person the right of passage to a public place or obstructs such person from using or having access to a public place to which other members have access to or a right to use, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

45 (c) forces or causes a transgender person to leave household, village or other place of residence, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

Amendment of section 7.

Amendment of section 16.

Substitution of new section for section 18.

Offences and penalties.

(d) harms or injures or endangers the life, safety, health or well-being, whether mental or physical, of a transgender person or tends to do acts including causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine; 5

(e) kidnaps or abducts any adult person and causes—

(i) grievous hurt to such person, whether by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure; or 10

(ii) permanent or severe injury to the body or bodily functions of such person,

with the intent of, or in the course of, compelling such person to assume, adopt, or outwardly present a transgender identity against the will or consent of such person, whether by force, allurement, deceit, undue influence or otherwise, shall be punishable with rigorous imprisonment for a term which shall not be less than ten years but which may extend to imprisonment for life, and shall also be liable to fine which shall not be less than two lakh rupees; 15

(f) kidnaps or abducts any child and causes— 20

(i) grievous hurt to such child, whether by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure; or

(ii) permanent or severe injury to the body or bodily functions of such child, 25

with the intent of, or in the course of, compelling such child to assume, adopt, or outwardly present a transgender identity, whether by force, allurement, deceit, undue influence or otherwise, shall be punishable with rigorous imprisonment for life, and shall also be liable to fine which shall not be less than five lakh rupees;

(g) by force, threat, coercion, allurement, deception, inducement, or undue influence— 30

(i) compels any person, whether or not such person is a transgender person, to dress, present, or conduct themselves outwardly as a transgender person against the will of such person; and

(ii) employs, uses, or causes such person to engage in begging, solicitation, servitude, or any other form of forced or bonded labour while so presenting, 35

shall be punishable with rigorous imprisonment for a term which shall not be less than five years but which may extend to ten years, and shall also be liable to fine which shall not be less than one lakh rupees; and 40

(h) by force, threat, coercion, allurement, deception, inducement, undue influence or otherwise—

(i) compels any child, whether or not such child is a transgender person, to dress, present, or conduct themselves outwardly as a transgender person; and 45

(ii) employs, uses, or causes such child to engage in begging, solicitation, servitude, or any other form of forced or bonded labour while so presenting,

shall be punishable with rigorous imprisonment for a term which shall not be less than ten years but which may extend to fourteen years, and shall also be liable to fine which shall not be less than three lakh rupees.”.

8. In section 22 of the principal Act, in sub-section (2),—

Amendment of  
section 22.

5 (a) in clause (c), after the word, brackets and figure “sub-section (1)”, the words, brackets, figure and letter “and the form and manner of details to be furnished by the medical institution under sub-section (1A),” shall be inserted;

(b) in clause (d), the word “revised” shall be omitted.

## STATEMENT OF OBJECTS AND REASONS

It is the legislative policy to recognise a specific class of transgender persons, who face social issues and to create a regime for their protection. The legislative policy was and is intended to protect only those who face severe social exclusion due to biological reasons for no fault of their own and no choice of their own.

2. Over the course of time, during the implementation of this enactment, certain doubts and difficulties have arisen and are likely to arise with regard to the expanse of the definition of transgender persons and how the identification of such persons is to be done under the existing definition. This is critical to the implementation of the Act, as it is of prime importance that the enactment is utilised and works towards only those who are in actual need of such protection.

3. The intent, object and purpose of the Act is and was to protect a specified class of persons socially and culturally known as transgender people who face societal discrimination of an extreme and oppressive nature. The purpose was and is not to protect each and every class of persons with various gender identities, self-perceived sex/gender identities or gender fluidities.

4. The existing vague definition of the expression "transgender person" not only makes it impossible to identify the genuine oppressed persons to whom the benefits of the Act are intended to reach, but also makes the operation and enforcement of several provisions under penal, civil and personal laws unworkable. Such a vague and broad definition of the expression "transgender person" is found to have created complex issues in the working of statutory enactments, as this vague definition is not compatible with several statutory provisions of several enactments enacted both by the Parliament and the State Legislatures. Any enactment conferring rights, privileges and protections cannot have a definition clause whereby the status entitling such rights, privileges and protections can be acquired.

5. It is therefore imperative to give a precise definition for proper and definitive identification and protection of transgender persons to whom the benefits of the Act must reach. The protection and benefits that are provided under the Act are vast in nature, and therefore, care has to be taken that such identification cannot be extended on the basis of any acquirable characteristics or personal choice or claimed self-perceived identity of an individual.

6. The Bill also contains provisions for designation of an authority and provisions providing the relevant authorities the option to seek expert advice if required. The Bill also seeks to empower the transgender persons to make consequential changes in official documents. The Bill further provides for a change in the constitution of the National Council ensuring that persons, not below the rank of Director, form a part of the same as representatives of the State Governments and Union territories administration, by rotation, one each from North, South, East, West and North-East regions.

7. The Transgender Persons (Protection of Rights) Act, 2019 prohibits discrimination and abuse against transgender persons but its penal provision under section 18, as presently enacted, addresses only general wrongs and criminal offences and prescribes a maximum of two years' imprisonment. It does not adequately address offences of exceptional gravity that have been documented in practice. The abduction of adults and children, the infliction of reversible or irreversible bodily harm upon them through mutilation, emasculation, castration, hormone therapies / other similar therapies or chemical alteration, and their forced assumption of a transgender identity, frequently as a prelude to economic and other forms of exploitation including but not limited to begging or servitude has been observed. While scattered provisions of the Bharatiya Nyaya Sanhita, 2023 and the Juvenile Justice (Care and Protection of Children) Act, 2015 address individual

elements of these wrongs, no existing provision treats this conjunction of abduction, permanent bodily harm, and forced identity as a unified penal approach.

8. The Bill, therefore, also proposes to substitute section 18 of the principal Act, creating specific offences with graded punishments that reflect the gravity of the harm, the irreversibility of the injury, and the particular vulnerability of child victims. The proposed provisions operate cumulatively with the general criminal law and give legislative expression to the constitutional guarantees that every person's bodily integrity is inviolable, that no person may be subjected to forced labour or traffic in human beings.

9. The Bill seeks to achieve the above objectives.

NEW DELHI;

*The 12th March, 2026.*

DR. VIRENDRA KUMAR.

## FINANCIAL MEMORANDUM

The Transgender Persons (Protection of Rights) Amendment Bill, 2026, if enacted, is not likely to involve any expenditure of recurring or non-recurring nature from and out of the Consolidated Fund of India.

## MEMORANDUM REGARDING DELEGATED LEGISLATION

Clause 5 of the Bill seeks to insert sub-section (1A) in section 7 of the Transgender Persons (Protection of Rights) Act, 2019. The aforesaid sub-section of the said section empowers the appropriate Government to make rules to provide for the form and manner of details of a person who has undergone surgery to change gender, either male or female, to be furnished by the medical institutions.

The matters in respect of which rules may be made and notification issued are matters of procedure and administrative detail, and it is not practicable to provide for them in the proposed legislation itself. The delegation of legislative power is, therefore, of a normal character.

ANNEXURE

EXTRACTS FROM THE TRANSGENDER PERSONS (PROTECTION OF RIGHTS) ACT, 2019  
(40 OF 2019)

\* \* \* \* \*

Definitions.

2. In this Act, unless the context otherwise requires,—

(a) “appropriate Government” means,—

(i) in relation to the Central Government or any establishment, wholly or substantially financed by that Government, the Central Government;

(ii) in relation to a State Government or any establishment, wholly or substantially financed by that Government, or any local authority, the State Government;

\* \* \* \* \*

(i) “person with intersex variations” means a person who at birth shows variation in his or her primary sexual characteristics, external genitalia, chromosomes or hormones from normative standard of male or female body;

\* \* \* \* \*

(k) “transgender person” means a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities as *kinner*, *hijra*, *aravani* and *jogta*.

\* \* \* \* \*

CHAPTER III

RECOGNITION OF IDENTITY OF TRANSGENDER PERSONS

Recognition of identity of transgender person.

4. (1) \* \* \* \* \*

(2) A person recognised as transgender under sub-section (1) shall have a right to self-perceived gender identity.

\* \* \* \* \*

Issue of certificate of identity.

6. (1) The District Magistrate shall issue to the applicant under section 5, a certificate of identity as transgender person after following such procedure and in such form and manner, within such time, as may be prescribed indicating the gender of such person as transgender.

\* \* \* \* \*

Change in gender.

7. (1) After the issue of a certificate under sub-section (1) of section 6, if a transgender person undergoes surgery to change gender either as a male or female, such person may make an application, along with a certificate issued to that effect by the Medical Superintendent or Chief Medical Officer of the medical institution in which that person has undergone surgery, to the District Magistrate for revised certificate, in such form and manner as may be prescribed.

(2) The District Magistrate shall, on receipt of an application along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and on being satisfied with the correctness of such certificate, issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.

(3) The person who has been issued a certificate of identity under section 6 or a revised certificate under sub-section (2) shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person:

Provided that such change in gender and the issue of revised certificate under sub-section (2) shall not affect the rights and entitlements of such person under this Act.

\* \* \* \* \*

CHAPTER VII

NATIONAL COUNCIL FOR TRANSGENDER PERSONS

16. (1) \* \* \* \* \*

National Council for Transgender Persons.

(2) The National Council shall consist of—

\* \* \* \* \*

(f) representatives of the State Governments and Union territories by rotation, one each from the North, South, East, West and North-East regions, to be nominated by the Central Government, Members, *ex officio*;

\* \* \* \* \*

CHAPTER VIII

OFFENCES AND PENALTIES

18. Whoever,—

Offences and penalties.

(a) compels or entices a transgender person to indulge in the act of forced or bonded labour other than any compulsory service for public purposes imposed by Government;

(b) denies a transgender person the right of passage to a public place or obstructs such person from using or having access to a public place to which other members have access to or a right to use;

(c) forces or causes a transgender person to leave household, village or other place of residence; and

(d) harms or injures or endangers the life, safety, health or well-being, whether mental or physical, of a transgender person or tends to do acts including causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine.

\* \* \* \* \*

22. (1) \* \* \* \* \*

Power of appropriate Government to make rules.

(2) In particular, and without prejudice to the generality of the foregoing power, such rules may provide for all or any of the following matters, namely:—

\* \* \* \* \*

(c) the form and manner in which an application shall be made under sub-section (1) of section 7;

(d) the form, period and manner for issuing revised certificate under sub-section (2) of section 7;

\* \* \* \* \*

LOK SABHA

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A

BILL

to amend the Transgender Persons (Protection of Rights) Act, 2019.

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*(Dr. Virendra Kumar, Minister of Social Justice and Empowerment)*

ANN-M

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रजिस्ट्री सं० डी० एल०—(एन)04/0007/2003—26

REGISTERED NO. DL—(N)04/0007/2003—26



# भारत का राजपत्र The Gazette of India

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असाधारण

EXTRAORDINARY

भाग II — खण्ड 1

PART II — Section 1

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PUBLISHED BY AUTHORITY

सं० 8] नई दिल्ली, सोमवार, मार्च 30, 2026/चैत्र 9, 1948 (शक)  
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इस भाग में भिन्न पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।  
Separate paging is given to this Part in order that it may be filed as a separate compilation.

## MINISTRY OF LAW AND JUSTICE (Legislative Department)

*New Delhi, the 30th March, 2026/Chaitra 9, 1948 (Saka)*

The following Act of Parliament received the assent of the President on the 30th March, 2026 and is hereby published for general information:—

### THE TRANSGENDER PERSONS (PROTECTION OF RIGHTS) AMENDMENT ACT, 2026

(No. 3 OF 2026)

[30th March, 2026]

*An Act to amend the Transgender Persons (Protection of Rights) Act, 2019.*

BE it enacted by Parliament in the Seventy-seventh Year of the Republic of India as follows:—

1. (1) This Act may be called the Transgender Persons (Protection of Rights) Amendment Act, 2026. Short title and commencement

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

40 of 2019. 2. In section 2 of the Transgender Persons (Protection of Rights) Act, 2019 (hereinafter referred to as the principal Act),— Amendment of section 2.

(i) for clause (a), the following clause shall be substituted, namely:—

‘(a) “appropriate Government” means—

(i) in relation to the Central Government or any establishment wholly or substantially financed by that Government, the Central Government;

(ii) in relation to a State Government or any establishment wholly or substantially financed by that Government, or any local authority within a State, the State Government;

(iii) in relation to a Union territory or any establishment wholly or substantially financed by the Central Government in that Union territory, the Administrator thereof appointed under article 239 of the Constitution or such authority as may be specified by the Central Government;’;

(ii) after clause (a), the following clause shall be inserted, namely:—

‘(aa) “authority” means a medical board, headed by a Chief Medical Officer or a Deputy Chief Medical Officer, as may be appointed by the Central Government, State Government or Union territory Administration;’;

(iii) clause (i) shall be omitted;

(iv) for clause (k), the following clause shall be substituted, namely:—

‘(k) “transgender person” means—

(i) a person having such socio-cultural identities as *kinner*, *hijra*, *aravani* and *jogta*, or eunuch, or a person with intersex variations specified below or a person who, at birth, has a congenital variation in one or more of the following sex characteristics as compared to male or female development:—

(a) primary sexual characteristics;

(b) external genitalia;

(c) chromosomal patterns;

(d) gonadal development;

(e) endogenous hormone production or response, or such other medical conditions; or

(ii) any person or child who has been, by force, allurements, inducement, deceit or undue influence, either with or without consent, compelled to assume, adopt, or outwardly present a transgender identity, by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure or otherwise:

Provided that it shall not include, nor shall ever have been so included, persons with different sexual orientations and self-perceived sexual identities.’.

3. In section 4 of the principal Act, sub-section (2) shall be omitted.

4. In section 6 of the principal Act,—

(a) in sub-section (1), for the words “District Magistrate”, the words “District Magistrate, after examining the recommendation of the authority and, if he considers either necessary or desirable, after taking the assistance of other medical experts” shall be substituted;

(b) after sub-section (3), the following sub-section shall be inserted, namely:—

“(4) The person who has been issued a certificate of identity under sub-section (1) and is so declared as a transgender person within the definition under this Act shall be entitled to change the first name in the birth certificate and all other official documents relating to the identity of such person.”.

5. In section 7 of the principal Act,—

(a) in sub-section (1), for the words “such person may”, the words “such person shall” shall be substituted;

(b) after sub-section (1), the following sub-section shall be inserted, namely:—

“(1A) The medical institution in which the person who has undergone surgery to change gender, either as male or female, shall furnish the details of such person to the concerned District Magistrate and the authority in such form and manner as may be prescribed.”;

(c) for sub-section (2), the following sub-section shall be substituted, namely:—

“(2) A person referred to in sub-section (1) shall also make an application to the District Magistrate who shall, on receipt of an application along with the certificate issued by the Medical Superintendent or Chief Medical Officer, and on being satisfied with the correctness of such certificate, issue a certificate indicating change in gender in such form and manner and within such time, as may be prescribed.”;

(d) sub-section (3) and the proviso shall be omitted.

6. In section 16 of the principal Act, in sub-section (2), for clause (f), the following clause shall be substituted, namely:—

“(f) representatives of the State Governments and Union territories Administration, by rotation, one each from North, South, East, West and North-East regions, not below the rank of Director in the concerned Ministry or Department, to be nominated by the Central Government, Members, *ex officio*.”.

7. For section 18 of the principal Act, the following section shall be substituted, namely:—

“18. Whoever,—

(a) compels or entices a transgender person to indulge in the act of forced or bonded labour other than any compulsory service for public purposes imposed by Government, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

(b) denies a transgender person the right of passage to a public place or obstructs such person from using or having access to a public place to which other members have access to or a right to use, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

(c) forces or causes a transgender person to leave household, village or other place of residence, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

Amendment of section 7.

Amendment of section 16.

Substitution of new section for section 18.

Offences and penalties.

(d) harms or injures or endangers the life, safety, health or well-being, whether mental or physical, of a transgender person or tends to do acts including causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse, shall be punishable with imprisonment for a term which shall not be less than six months but which may extend to two years and with fine;

(e) kidnaps or abducts any adult person and causes—

(i) grievous hurt to such person, whether by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure; or

(ii) permanent or severe injury to the body or bodily functions of such person,

with the intent of, or in the course of, compelling such person to assume, adopt, or outwardly present a transgender identity against the will or consent of such person, whether by force, allurement, deceit, undue influence or otherwise, shall be punishable with rigorous imprisonment for a term which shall not be less than ten years but which may extend to imprisonment for life, and shall also be liable to fine which shall not be less than two lakh rupees;

(f) kidnaps or abducts any child and causes—

(i) grievous hurt to such child, whether by mutilation, emasculation, castration, amputation, or any surgical, chemical, or hormonal procedure; or

(ii) permanent or severe injury to the body or bodily functions of such child,

with the intent of, or in the course of, compelling such child to assume, adopt, or outwardly present a transgender identity, whether by force, allurement, deceit, undue influence or otherwise, shall be punishable with rigorous imprisonment for life, and shall also be liable to fine which shall not be less than five lakh rupees;

(g) by force, threat, coercion, allurement, deception, inducement, or undue influence—

(i) compels any person, whether or not such person is a transgender person, to dress, present, or conduct themselves outwardly as a transgender person against the will of such person; and

(ii) employs, uses, or causes such person to engage in begging, solicitation, servitude, or any other form of forced or bonded labour while so presenting,

shall be punishable with rigorous imprisonment for a term which shall not be less than five years but which may extend to ten years, and shall also be liable to fine which shall not be less than one lakh rupees; and

(h) by force, threat, coercion, allurement, deception, inducement, undue influence or otherwise—

(i) compels any child, whether or not such child is a transgender person, to dress, present, or conduct themselves outwardly as a transgender person; and

(ii) employs, uses, or causes such child to engage in begging, solicitation, servitude, or any other form of forced or bonded labour while so presenting,

shall be punishable with rigorous imprisonment for a term which shall not be less than ten years but which may extend to fourteen years, and shall also be liable to fine which shall not be less than three lakh rupees.”

8. In section 22 of the principal Act, in sub-section (2),—

(a) in clause (c), after the word, brackets and figure “sub-section (1)”, the words, brackets, figure and letter “and the form and manner of details to be furnished by the medical institution under sub-section (1A),” shall be inserted;

(b) in clause (d), the word “revised” shall be omitted.

Amendment of  
section 22.

DR. RAJIV MANI,  
*Secretary to the Govt. of India.*

AMM-N

84

F.No. Z.28017/43/2024-SAS-III (FTS 8281793)  
Govt. of India  
M/o Health & Family Welfare  
Dte. General of Health Services

Nirman Bhawan, New Delhi.  
Dated the August, 2024

Subject: Standard Operating Procedures for medical treatment of transgender persons

Sir/Ma'am

The Dte. GHS has prepared Standard Operating Procedures for medical treatment of transgender persons. The same is being enclosed for your information and wider dissemination.

This issues with the approval of competent authority.

Enclosure as above.

Yours sincerely

Signed by  
Amita Bali (Dr Amita Bali)  
Dy. Director General (Planning)  
Date: 03-09-2024 16:09:30

To

1. Secretary (Health) all States/UTs
2. Director, AIIMS, New Delhi
3. Director/EDs of all AIIMS.
4. Director LHMC and Associated hospitals, New Delhi.
5. Medical Superintendent, ABVIMS & RML Hospital, New Delhi.
6. Medical Superintendent, VMMC and Safdarjung Hospital, New Delhi.

Copy to-

1. PSO to Secretary (H)
2. PSO to DGHS

## Standard Operating Procedures for

### Medical Treatment of Transgender Persons

**Gender dysphoria** is defined as a marked incongruence between one's experienced or expressed gender and gender assigned at birth. This state can be understood as a misalignment between 'biological sex' (typically understood as sexual organ and genetic characteristics) and 'gender identity'. Gender dysphoria might occur at various developmental stages, but commonly escalates with development of secondary sexual characteristics.

As per ICD-11, **Gender Incongruence** is characterised by a marked and persistent incongruence between an individual's experienced gender and the assigned sex, which often leads to a desire to 'transition', in order to live and be accepted as a person of the experienced gender, through hormonal treatment, surgery or other health care services to make the individual's body align, as much as desired and to the extent possible, with the experienced gender.

Multidisciplinary input can improve outcomes when treating patients with gender incongruence. In this context, a multidisciplinary team commonly includes mental healthcare providers, sexual healthcare physicians, general practitioners (GPs), endocrinologists and surgeons (Urology, Plastic Surgery, General Surgery, Obstetrics and Gynaecology).

Gender Affirmation Surgery has an important role in the treatment of gender incongruence. Various surgical options are available to transgender individuals, which include facial reconstructive surgery, vocal surgery, chest or 'top' surgery, and genital or 'bottom' surgery.

The terms **Gender Incongruence and Gender Affirmation Surgery** are preferred to the terms Gender Dysphoria and Sex Reassignment Surgery respectively and will be used henceforth in the document.

#### Role of Mental Health Professionals (Psychiatrists and/or Clinical Psychologist as per availability)

The primary role of the mental health professionals would include assessment for gender incongruence, as per the current diagnostic system followed by World Health organization, and certification for the same. Before endocrinology treatment, certificate from one Psychiatrist is required. Before Gender Affirmation Surgery, 2 certificates are required- 1 by a Psychiatrist and 1 by a Clinical Psychologist/Psychiatrist.

Apart from that, the mental health professional would also assess for distress and co-morbid mental and/or substance use disorders and provide management of the same.

They would also provide support or therapy, if needed, to cope with issues related to gender incongruence, including participation in integrated cross-disciplinary care and intersectoral collaboration (as required) for clients and caregivers (if appropriate). The support would be provided pre-hormonal therapy/gender assignment surgery, during the period as well as post-surgery, if need be.

### **Endocrine Treatment Protocol**

1. Once the patient presents to the hospital, they/he/she would be referred to the departments of psychiatry/ psychology and Endocrinology.
2. The Endocrinologist would take relevant history (including history of intake of hormones or any previous surgeries), evaluate the individual and perform the necessary hormonal and biochemical investigations including metabolic profile, glucose, lipids LFT, KFT, and blood pressure. The hormones assessed would include a panel of gonadal sex steroids, gonadotropins and thyroid hormones.
3. They need to regularly meet a mental health professional during the hormonal therapy.
4. Individuals would be given hormonal therapy for a period of 1 year before planning for surgery.
5. Before initiating hormonal therapy, subjects would be explained regarding the adverse effects of hormones. They would be screened for obesity, hypertension, diabetes and dyslipidemia and treated accordingly.
6. Feminizing Therapy will include initiation of antiandrogens and estrogens (preferably estradiol valerate) or GnRH therapy (if needed). Masculinising therapy would include intramuscular testosterone therapy. During this period subjects would be monitored for adverse effects. Lipid profile and glucose would be assessed. Blood pressure and weight would be assessed at each visit.
7. Individuals would be in Endocrine follow up post surgery for long term hormonal therapy.
8. A certificate of being stable on endocrine treatment for 1 year and suitability for surgical procedure is required before Gender Affirmation Surgery

### SOP for Gynecologist

All health professionals use language that upholds the principles of safety, dignity, and respect. Also, they should enquire as to how the patient wishes to be addressed as in terms of name, and pronoun. The patient may be referred to the Obstetrics and Gynecology department for the purpose of Hysterectomy and bilateral salpingectomy/salpingoophorectomy.

1. A detailed history and examination is done in the OPD along with opportunistic pap's smear screening.
2. Patient is investigated for fitness for surgery and PAC performed.
3. Ultrasound Whole abdomen and pelvis done to rule out any abdominal and pelvic pathology.
4. Consent to be taken for risks and consequences of the surgery including irreversibility of the procedure.
5. Total Hysterectomy, salpingectomy /salpingoophorectomy performed laparoscopically or by laparotomy depending on patient's suitability.
6. Patient kept under follow up for 6weeks or longer if need be.

Patient will need lifelong hormonal therapy for bone health. They should also undergo medical screening which is appropriate for their age. Post Total hysterectomy and Bilateral salpingoophorectomy no cervical screening is needed. Lifelong monitoring is needed for evaluating hormone effectiveness and for side effects. They need to be made aware of need for active weight bearing exercise, healthy diet, calcium, and vitamin D supplementation.

### Fertility Preservation in Transgenders (Female to Male)

Established method for fertility preservation includes cryopreservation of embryo and oocytes for females. Ovarian tissue cryopreservation is also a successful technique for fertility preservation and no longer experimental, however, has limited availability and is possible only after attaining puberty. Transgender patient wishing for TAH and salpingoophorectomy should be informed about the option of fertility preservation and informed decision for surgery may be taken thereafter. Fertility preservation should be as per prevailing law/ Assisted Reproductive Technology (ART) Act. Transgender and gender diverse people with a uterus who wish to carry a pregnancy should undergo preconception care and prenatal counselling regarding need to stop temporarily gender affirming hormones like testosterone, labor delivery breast feeding and postpartum support. Contraception methods for those who engage in sexual activity that can result in pregnancy should be discussed.

### STD Clinics and Care

- There is a need to make STD clinics friendly to Gender Diverse patients
- Clinics should document gender identity and sex *assigned at birth* for all patients to improve sexual health care for transgender and gender nonbinary persons.
- Primary care providers should take a comprehensive sexual history, including a discussion of STI screening, HIV PrEP and PEP, behavioral health, and social determinants of sexual health.
- Clinicians can improve the experience of sexual health screening and counseling for transgender persons by asking for their choice of terminology or modifying language (e.g., asking patients their gender pronouns) to be used during clinic visits and history taking and examination.
- Options for fertility preservation, pregnancy potential, and contraception options should also be discussed, if indicated.
- The majority of transgender women have not undergone genital-affirmation surgery and therefore might retain a functional penis; in these instances, they might engage in insertive oral, vaginal, or anal sex as well as receptive oral or anal sex.
- Transgender women- Providers should have knowledge about the type of tissue used to construct the neovagina, which can affect future STI and HIV preventive care and screening recommendations. Transgender women who have had a vaginoplasty might engage in receptive vaginal, oral, or anal sex. Neovaginal STIs have infrequently been reported in the literature and include HSV and HPV/genital warts, *C. trachomatis*, *N. gonorrhoeae*
- Transgender Men- The few studies of HIV prevalence among transgender men indicated that they have a lower prevalence of HIV infection than transgender women. Recent data from the STD Surveillance Network demonstrated higher prevalence of gonorrhea and chlamydia among transgender men, similar to rates reported among cisgender. Transgender men who have not chosen to undergo hysterectomy with removal of the cervix remain at risk for cervical cancer. High-risk HPV testing using a swab can be considered; self-collected swabs for high-risk HPV testing has been reported to be an acceptable option for transgender men.

### Screening Recommendations

The following are screening recommendations for transgender and gender diverse persons:

- Because of the diversity of transgender persons regarding surgical gender-affirming procedures, hormone use, and their patterns of sexual behavior, providers should remain aware of symptoms consistent with common STIs and screen for asymptomatic infections on the basis of the patient's sexual practices and anatomy.
- Gender-based screening recommendations should be adapted on the basis of anatomy (e.g., routine screening for *trachomatis* and *N. gonorrhoeae*) as recommended for all sexually active females aged <25 years on an annual basis and should be extended to transgender men and nonbinary persons with a cervix among this age group.
- HIV screening should be discussed and offered to all transgender persons. Frequency of repeat screenings should be based on level of risk.
- For transgender persons with HIV infection who have sex with cisgender men and transgender women, **STI screening** should be conducted at least annually, including syphilis serology, HCV testing, and urogenital and extragenital NAAT for gonorrhea and chlamydia.
- Transgender women who have had vaginoplasty surgery should undergo routine STI screening for all exposed sites (e.g., oral, anal, or vaginal). The usual techniques for creating a neovagina do not result in a cervix; therefore, no rationale exists for cervical cancer screening.
- If transgender men have undergone metoidioplasty surgery with urethral lengthening and have not had a vaginectomy, assessment of genital bacterial STIs should include a cervical swab because a urine specimen will be inadequate for detecting cervical infections.
- Cervical cancer screening for transgender men and nonbinary persons with a cervix should follow current screening guidelines

### **Requirements for Gender Affirmation Surgery**

Gender affirmation surgery requires considered multidisciplinary input over a minimum of 1 year. An ideal candidate for referral to a reconstructive surgeon would:

- be psychologically stable; absence of psychosis, depression, alcoholism and intellectual disability
- have a strong support network
- have a clear idea of their desired type of surgery
- have begun or planned hormonal transition. Current recommendation is a minimum of 1 year prior surgery

- have undergone optimisation of modifiable surgical risk factors, including smoking cessation (recommended six months minimum), weight management (optimal body mass index [BMI] 21–29) and diabetes stabilisation. Elevated BMI is not an absolute contraindication to surgery, but would require a careful discussion of risks and benefits with the patient.

#### **Criteria for Gender affirming surgery**

All of the following criteria to be met:

- A. The individual is at least 18 years of age; **and**
- B. The individual has capacity to make fully informed decisions and consent for treatment; **and**
- C. The individual has been diagnosed with gender incongruence; **and**
- D. For individuals without a medical contraindication or intolerance, the individual has undergone a minimum of 1 year of continuous hormonal therapy when recommended by a mental health professional and provided under the supervision of an endocrinologist/physician\*; **and**
- E. Stable on their gender affirming hormonal treatment regime certified by the treating Endocrinologist/Physician (which may include at least 1 year of hormone treatment or a longer period if required to achieve the desired surgical result, unless hormone therapy is medically contraindicated); and
- F. Understands the effect of gender-affirming surgical intervention on reproduction and they have explored reproductive options; **and**
- G. If the individual has significant medical or mental health issues present, they must be stable on treatment. If the individual is diagnosed with severe psychiatric disorders and impaired reality testing (for example, psychotic episodes, bipolar disorder etc.), an effort must be made to improve these conditions with psychotropic medications and/or psychotherapy before surgery is contemplated; **and**
- H. Two referrals from qualified mental health professionals who have independently assessed the individual. Two separate letters, or one letter signed by both (for example, if practicing within the same setup) are required. The letter(s) must have been signed within 12 months of the request submission.

*\*Physician should be MD Medicine with adequate knowledge of the subject. This provision is kept due to the limited numbers of Endocrinologists and an Endocrinologist may not be available at all centres.*

### Role of Nodal Officer/ Coordinating person

The various departments involved in the process of Gender Affirmation procedures (medical/surgical) should identify nodal officer from their respective department who will facilitate the coordination with other departments.

### Role of Gender Affirmation Surgery Board

Before going for Gender Affirmation Surgery, the centers have an option to create a medical board, if required, which would comprise of a minimum of-

- 2 Mental Health Professionals (at least one Psychiatrist),
- one Endocrinologist,
- one Specialist from concerned surgery departments and
- one representative from Hospital administration (MS/AMS)

### List of Gender Affirmation Surgeries

#### I. Gender Defining Surgeries

##### A. Genital Surgery (MALE TO FEMALE)-

- i. Orchidectomy
- ii. Modified Penile Inversion Vaginoplasty including Labioplasty, Clitoroplasty, Penectomy, Vestibuloplasty
- iii. Feminizing urethroplasty
- iv. Sigmoid vaginoplasty
- v. Peritoneal vaginoplasty

##### B. Mammoplasty with implants

##### C. Genital Surgery (FEMALE TO MALE)-

- i. Metoidioplasty and similar procedures with urethral lengthening and scrotoplasty
- ii. Radial artery forearm flap and free phalloplasty
- iii. Anterolateral thigh (ALT) and similar procedures
- iv. Testicular prosthesis
- v. Open/ Lap- Hysterectomy, salphingo- oophorectomy and vaginectomy
- vi. Hysterectomy + oophorectomy + vaginectomy+ perineal procedures+
- vii. urethroplasty+ clitoral transposition

##### D. Mastectomy

#### II. Gender refining surgeries/ Ancillary Procedures

##### A. Aesthetic procedures (MALE TO FEMALE)-

- i. Forehead Feminization
  - ii. Feminizing rhinoplasty
  - iii. Cheek feminization
  - iv. Lip lift
  - v. Chin feminization
  - vi. Lipofilling of breast up to 5 sitting
  - vii. Facial bone reduction
  - viii. Blepharoplasty/ rejuvenation of lids
- B. Lower jaw contouring- V line surgery
- i. V line soft tissue jaw angle ( Masseter reduction) under chin liposuction, buccal fat pad removal
  - ii. V line surgery (bone contouring)
- C. Laser therapy# (only for facial hair removal per year)
- D. Hair transplantation (small, medium and large)
- E. Aesthetic Procedures (FEMALE TO MALE)
- i. Pectoral implants
  - ii. Blepharoplasty/ rejuvenation of lids
- F. Hair Transplantation (small, medium and large)
- G. Beard Hair Transplant

*# Hair removal with appropriate anti androgen therapy in TG female will have inadequate effect. Hence, a Laser hair removal procedure should be advised only after adequate therapy to reduce the end organ hypersensitivity that is seen in TG female. Also the frequency of hair removal will depend on the anagen growth phase which may necessitate frequent sitting in the absence of anti-androgen therapy*

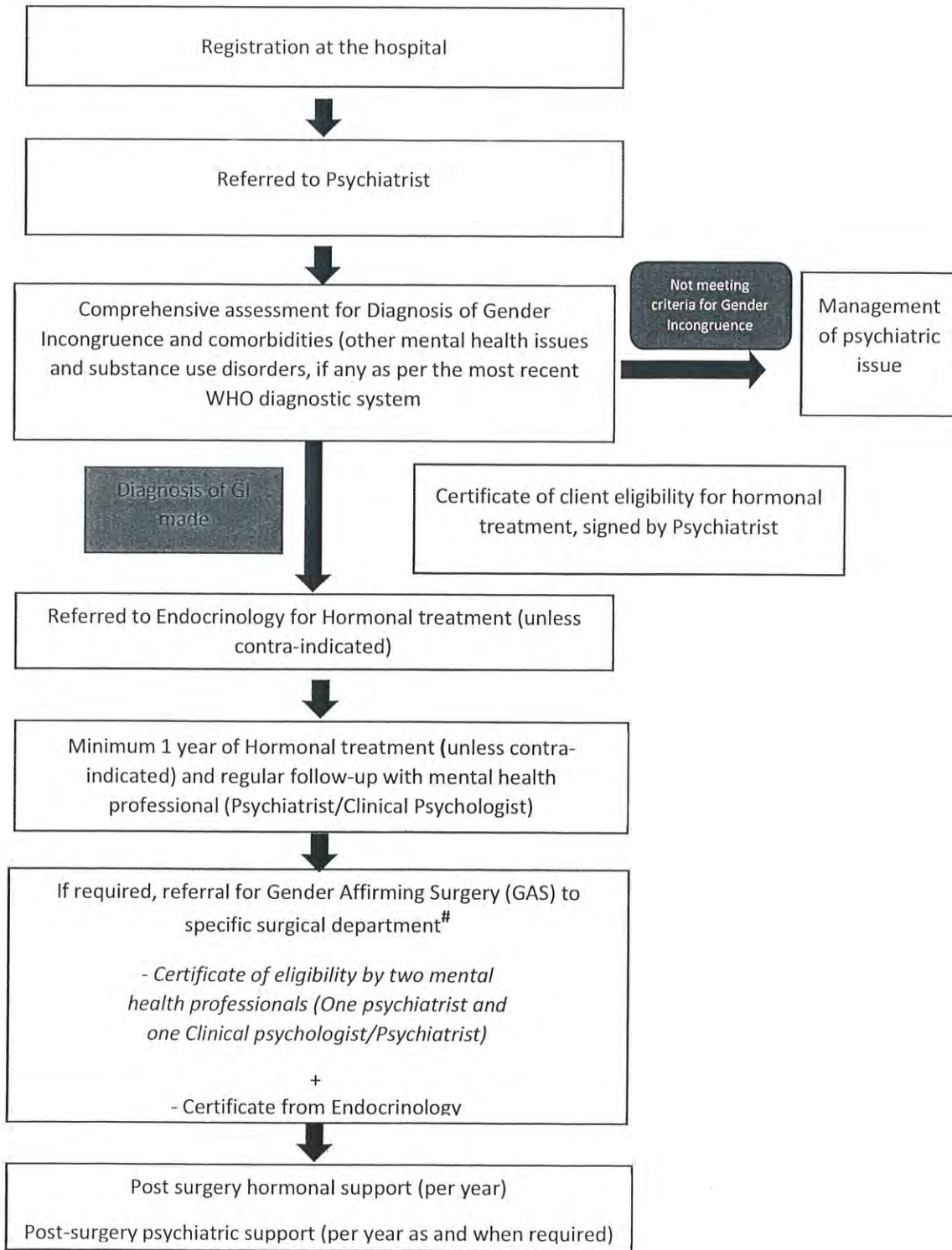
#### **List of Endocrine/Hormonal Treatments**

- A. Hormone Therapy (Pre Surgical for 1 years)
- B. Hormone Therapy (Post Surgical per year)

#### **List of Mental Health Procedures**

- A. Assessment of Gender Incongruence including Psychological Testing (if required)
- B. Psychological/Psychiatric support/therapy (Pre Surgical for 1 year)
- C. Psychological/Psychiatric support/therapy (Post Surgical per year)

**RECOMMENDED THERAPEUTIC FLOW**



# Option to create a Gender Affirmation Surgery medical board if required

**SAMPLE CERTIFICATAE**

*{Insert logo of the Institute}*

*[Name of Department, Institute and Address]*

**Certificate of Gender Incongruence for Hormonal Treatment**

This is to certify that \_\_\_\_\_ {name of client}, age \_\_\_\_\_ {years} has been under the follow-up of the Department of Psychiatry, \_\_\_\_\_ {name of hospital} since \_\_\_\_\_ {date of first registration}. Comprehensive clinical assessment confirm the diagnosis of Gender incongruence as per ICD-11 and the same has been duly documented (Ref.: \_\_\_\_\_ {File no./UHID/Identifying Number}).

The assessment reveals patient’s desire to live and be accepted as a Male/Female, including the need to transition to the desired gender. They/he/she has been living sometimes/mostly/all the time in their desired gender role.

Patient has been provided with necessary and relevant information to enable them/him/her to understand that their/his/her environment will be different after hormonal treatment. They/he/she are fully aware of the effects, risks and consequences of such treatment at a physical, emotional and social level and have the capacity to make informed healthcare decisions. There is no evidence of any external coercion on their/his/her decision.

In my clinical opinion, \_\_\_\_\_ {Name of client} meets the requirement for hormonal treatment and is psychologically ready for the same.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Place: \_\_\_\_\_

Name of the Psychiatrist: \_\_\_\_\_

Designation: \_\_\_\_\_

Department/Institute: \_\_\_\_\_

Registration No.: \_\_\_\_\_

**SAMPLE CERTIFICATAE**

*{Insert logo of the Institute}*

*[Name of Department, Institute and Address]*

**Certificate of Gender Incongruence for Gender-affirming Surgery (GAS)**

With regard to desire of \_\_\_\_\_ {name of client}, age \_\_\_\_\_ {years}, to undergo Gender-affirming surgery, it is certified that they/he/she has been under the follow-up of the Department of Psychiatry, \_\_\_\_\_ {name of hospital} since \_\_\_\_\_ {date of first registration}.

Comprehensive clinical assessment confirm the diagnosis of Gender incongruence as per ICD-11 and the same has been duly documented (Ref.: \_\_\_\_\_ {File no./UHID/Identifying Number}).

The assessment reveals patient's desire to live and be accepted as a Male/Female, including the need to transition to the desired gender. They/he/she has been living sometimes/mostly/all the time in their desired gender role.

They/he/she have undergone \_\_\_\_\_ {months} of Hormonal Therapy under the care of \_\_\_\_\_ {Name of treating Endocrinologist} in Department of Endocrinology, \_\_\_\_\_ {Name of Institute}.

The patient has been provided with necessary and relevant information to enable them/him/her to understand that their/his/her environment will be different post-surgery. They/he/she are fully aware of the effects, risks and consequences of such treatment at a physical, emotional and social financial level and have the capacity to make informed healthcare decisions. There is no evidence of any external coercion on their/his/her decision.

In my clinical opinion, \_\_\_\_\_ {Name of client} meets the requirement for Gender affirming surgery and is psychologically ready for the same.

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Name of the Psychiatrist: \_\_\_\_\_  
\_\_\_\_\_  
Designation: \_\_\_\_\_  
\_\_\_\_\_  
Department/Institute: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Registration No.: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Name of the Clinical Psychologist/ Psychiatrist: \_\_\_\_\_  
\_\_\_\_\_  
Designation: \_\_\_\_\_  
\_\_\_\_\_  
Department/Institute: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Registration No.: \_\_\_\_\_  
\_\_\_\_\_

(The certificate may be combined or separate for the two mental health professionals.)

**SAMPLE CERTIFICATAE**

*{Insert logo of the Institute}*

*[Name of Department, Institute and Address]*

**Certificate of Hormonal treatment**

This is to certify that \_\_\_\_\_ {name of client}, age \_\_\_\_\_ {years} has been under the follow-up of the Department of Endocrinology, \_\_\_\_\_ {name of hospital} since \_\_\_\_\_ {date of first registration}.

The patient has received masculinising / feminising hormones for a period of one year starting from \_\_\_\_\_ to \_\_\_\_\_. Patient's current hormonal profile and physical changes are in consonance with regular hormonal treatment for a period of one year. Patient has also undergone psychological evaluation during this period. Patient wishes to continue with the desired gender and Gender Affirmation Surgery for the same. Patient is cleared for Gender Affirmation surgery from Endocrine viewpoint.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Place: \_\_\_\_\_

Name of the Endocrinologist: \_\_\_\_\_

Designation: \_\_\_\_\_

Department/Institute: \_\_\_\_\_

Registration No.: \_\_\_\_\_

Sub- committees involved in formulating the SOP

Dte. GHS

1. Dr. Atul Goel, DGHS
2. Dr. Amita Bali, DDG (P)
3. Dr. Bhavuk Garg, Associate Professor Psychiatry, LHMC

Psychiatry & Clinical Psychology

1. Dr. Pratap Sharan, Head of Department Psychiatry, AIIMS New Delhi
2. Dr. Mina Chandra, Head of Department Psychiatry, RMLH
3. Dr. Shiv Prasad, Head of Department Psychiatry, LHMC
4. Dr. Pankaj Verma, Head of Department Psychiatry, VMMC/SJH
5. Dr. Swati Kedia Gupta, Assistant Professor, Cl. Psychology, AIIMS New Delhi
6. Ms. Satyam, Assistant Professor, Cl. Psychology, RMLH.

Urology

1. Dr. Hemant Goyal, Head of Department, RMLH
2. Dr. Abhishek Johari, Assistant Professor VMMC/SJH
3. Dr. Sridhar P, Assistant Professor AIIMS Delhi

Obstetrics & Gynaecology

1. Dr. Reena, Head of Department, LHMC
2. Dr. Ashok Kumar, Head of Department, RMLH.
3. Dr. Bindu Bajaj, Head of Department, VMMC/SJH

Plastic Surgery

1. Dr. Sameek Bhattacharya, Head of Department, RMLH
2. Dr. Sujata Sarabhai, Head of Department, VMMC/SJH
3. Dr. Manish Singhal, Head of Department, AIIMS

General Surgery

1. Dr. Shivani B Paruthy, Head of Department, VMMC/SJH.
2. Dr. Sunil Chumber, Head of Department, AIIMS, New Delhi

Endocrinology

1. Dr. Krishna Biswas, Head of Department, VMMC/SJH
2. Dr. Rajesh Khadgawat, Professor, AIIMS Delhi
3. Dr. Bindu Kulshreshtha, Head of Department, RMLH

Dermatology

1. Dr. Vibhu Mendiratta, Head of Department, LHMC
2. Dr. Kabir Sardana, Head of Department, RMLH
3. Dr. Sanchita Karmalkar, Head of Department, VMMC/SJH

98

IN THE HIGH COURT OF KARNATAKA, AT BANGALORE

(ORIGINAL JURISDICTION)

IA.NO. \_\_\_\_\_/2026

W.P. No. \_\_\_\_\_/ 2026

**BETWEEN**

Akira Mujawar

...Petitioner

**AND**

Union of India and others

Respondents

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**INDEX**

<b><u>Sno.</u></b>	<b><u>Particulars</u></b>	<b><u>Page No.</u></b>
1.	Interlocutory Application under Section 151 CPC, 1908 For Dispensation with the Requirement of Production of Certified Copy of <b><u>ANNEXURE-M.</u></b>	
2.	Verifying Affidavit of the Petitioner	

Place: Bangalore

Date:

Counsel for the Petitioner

IN THE HON'BLE HIGH COURT OF KARNATAKA, AT BANGALORE

(ORIGINAL JURISDICTION)

I.A. NO. \_\_\_\_\_/2026

W.P. NO. \_\_\_\_\_/2026

**IN THE MATTER OF:**

Akira Mujawar

...Petitioners

**AND**

Union of India

...Respondents

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**APPLICATION UNDER SECTION 151 CPC, 1908 FOR  
DISPENSATION WITH THE REQUIREMENT OF PRODUCTION OF  
CERTIFIED COPY OF ANNEXURE - M**

*The Counsel for the Petitioner respectfully submits:-*

1. It is submitted that the Petitioner in the above matter knows the facts and circumstances of the case and the Petitioner is competent to swear to this application.
2. It is submitted that in the accompanying Petition, the Petitioners have, *inter alia*, annexed the following document:
  - (i) Copy of the Transgender Persons (Protection of Rights) Amendment Act, 2026 as published in the Gazette on 30.03.2026, produced herein as **ANNEXURE-M.**
3. It is submitted that the aforementioned documents' certified copies are in the possession of the Respondents and are not

available to the Petitioner. It is submitted that the process of procurement of the necessary certified copies shall take a considerable amount of time. Owing to the gravity and urgency of the situation, the Petitioner has annexed the available online copies of **ANNEXURE-M** in lieu of the certified copies.

4. It is submitted that the Respondent may kindly be directed to produce the same or the Petitioner herein undertakes to file certified copies of **ANNEXURE-M** within 4 weeks' time at the earliest for the kind consideration by this Hon'ble Court.
5. It is submitted that the Grea prejudice, loss and undue hardships shall be caused to the Petitioner if this Hon'ble Court is not pleased to allow this application whereas no such prejudice, loss or hardships shall be caused to the Respondents if this Hon'ble Court is pleased to allow this application.

Wherefore, or the reasons stated above, I humbly pray this Hon'ble Court may be pleased to dispense with the production of original document (Transgender Persons (Protection of Rights) Amendment Act, 2026 as published in the Gazette on 30.03.2025) marked as **ANNEXURE-M** in the accompanying Petition in the interest of justice and equity.

**Place:** Bangalore

**Date:**

**Counsel for the Petitioner**