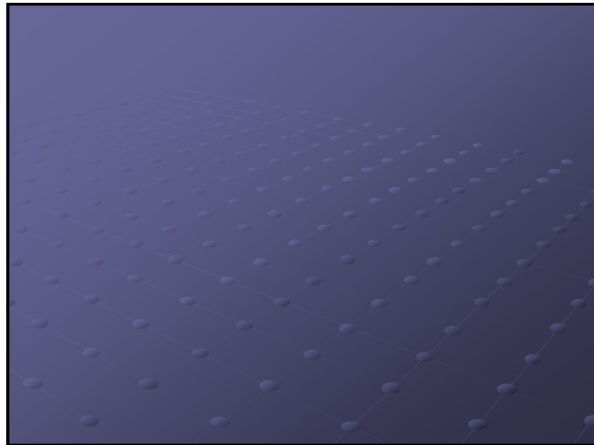


Transgender Clients: We Need Effective Care Too!

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Center of Excellence
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Transgender HIV Prevention
Community Advisory Board



Overview

- Getting on the Same Page:
 - Establishing a Common Language
- What Are the Facts?
 - What is the HIV Prevalence among Trans People in the US?
 - Effects of Stigma & Discrimination on Trans Communities
 - What are the Barriers and Challenges?
- What Are We Going To Do?
 - Addressing Transphobia
 - Action Steps & Recommendations
 - Where do we go for help?
- Questions & Answers

A working definition of Transgender:

A person whose sex, gender identity or gender expression differs from the one assigned to them at birth.

“Trans” can be shorthand for transgender and transsexual.

Defining other relevant terms:

- Stigma: the negative evaluation of a socially devalued attribute
- Discrimination: To act on the basis of prejudice (Webster's, 1986)
- Transphobia: Refers to discrimination against trans people, based on the expression of their gender identity (Wikipedia), often confused with homophobia but is specific to gender.

What are some Trans identities?

Trans can encompass a variety of identities **not only** Male-to-Female (MTFs) and Female to-Male (FTMs) but also includes: crossdressers, transsexuals, drag artists (drag kings/drag queens), androgynous, androgyny, gender queer, gender variant, gender outlaws, gender fluid, two-spirited, boychicks, studs, femme queens, butch up in drag, bigender, polygender, boi, grrl, feminine male, masculine female, transwomen, transmen, trannyfags, etc.

Clarifying Assumptions about Trans People

- 1) **There are many ways to identify as trans.** MTF or FTM is not inclusive of all trans identities.
- 2) **Not every trans person, regardless of their identity, decides to take hormone therapy or surgery. Be careful with "op" words.**

Pronouns!

● Don't sweat it. Politely ask!



● Remember individual trans people:

- May have a preference of he or she
- May not have a preference and it's okay to use he or she
- May prefer you use a gender neutral pronoun such as "ze"
- May prefer you not use any pronoun at all

HIV prevalence in the general population

An estimated **1 in 250** people are living with HIV/AIDS in the United States

(Centers for Disease Control and Prevention, 2006; Glynn & Rhodes, 2005)

HIV Prevalence Among Trans People

● A recent national meta-analysis of 29 studies concludes that:

- Average prevalence for trans women is **28% or 1 in 4** (lab-confirmed)
- **12%** (self report) (Herbst, et al, 2008)
- African American transwomen have the highest prevalence (**56%**) (Herbst, et al, 2008), compared to other racial/ethnic groups (Clements, Marx, Guzman & Katz, 2001; Nemoto, Operario, Keatley, Han, & Soma, 2004).

Nicole, San Francisco, CA

- Living with HIV.
- Was introduced to sex work around age 17.
- History of injection drug use.

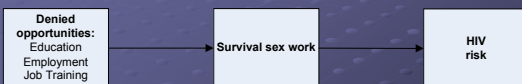
"Once I knew I was not going to be performing sex work I really didn't have much use for meth any more!"



Transgender women and HIV

- In California's publicly-funded counseling and testing sites, **transgender female clients have higher rates of HIV diagnosis (6%) than all other risk categories**, including
 - MSM (4%)
 - partners of people living with HIV (5%)
 - African American transgender women have a substantially higher rate of HIV diagnosis (29%) than all other racial or ethnic groups. (California Department of Health Services, 2006)

Sex work / Survival sex



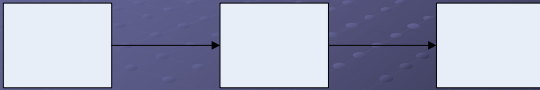
- (Sausa et. al, 2007, Kammerer et. al, 2001, Clements, 1999; Clements-Nolle et. al, 2001)

Sex work

- A recent *multi-national* meta-analysis of studies found that **28% of transgender female sex workers were HIV-positive.**

• (Operario et. al, 2008)

Substance use



- (Nemoto et. al, 2004, Sausa et. al, 2007, Clements et. al, 1999; Clements-Nolle et. al, 2001)

Victoria Arellano (1984-2007)

- Mexican transgender woman who immigrated to the US as a child
- Died in custody of the Dept. of Immigration and Customs Enforcement, while handcuffed to a bunk in a men's facility, of AIDS-related complications due to denial of proper treatment



Immigration issues

- Legal problems related to documentation of gender identity, employment discrimination, and restricted access to healthcare.

Incarceration issues



- **Incarceration rates: 37 to 65%**
- (Clements et. al, 2001; Nemoto et. al, 1999).
- (Nemoto et. al, 1999; Risser et. al, 2001; Garofalo et. al, 2006).

Beau, Seattle, WA

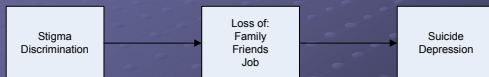
- Transgender man living with HIV
- Parent and activist
- Co-organizer of Gender Odyssey (Seattle, WA), "a national conference focused on the thoughtful exploration of gender".



Transgender men and HIV

- Very little existing data
- Some transgender men do engage in high-risk sex, including sex work, with non-trans men. (Sevelius, 2007)
- **HIV prevalence: 1 - 3%** (Sevelius, 2007; Xavier, 2005)

Social support



- (Clements-Nolle et. al, 2006; Garofalo et. al, 2006)
- In a San Francisco-based sample,
 - 55% of transgender men were depressed,
 - 32% reported having attempted suicide at least once. (Clements-Nolle et. al, 2001)

Amiyah, Atlanta, GA



- 18 year old Amiyah is "baby Beyonce" of the ballroom scene.
- Transitioned as a sophomore in high school at age 15 and identifies as a femme queen.



Transgender youth

*(Garofalo et. al, 2006; Sausa, 2003 & 2005; Lombardi et. al, 2001, Clements-Nolle, et. al, 2006, Sugano et. al, 2006).

•In the US, half of all new HIV infections occur in people under age 25; one-fourth in people under the age of 21. (Office of National AIDS Policy, 2000)

HIV prevention

- No culturally specific, evidence-based HIV prevention interventions for transgender people yet.

Factors Driving HIV Transmission in Transgender Women

- Social Stigma
 - Discrimination, Harassment, Violence
 - Unemployment, Lack of Health Insurance,
 - Poverty, Homelessness
- Gender Identity Validation through Sex
 - Multiple sex partners, unprotected sex
- Survival Sex Work
 - Unprotected Sex, Substance Use
- Lack of Appropriate Medical Care
 - Lack of medical screening, including HIV/STDs, increased morbidity risks

Lack of social support

High drop out
Suicide
Subst
Unprot
Unstab
Barriers t

Factors Driving HIV Transmission in Transgender Women *Continued*

- Culturally incompetent prevention methods
- Multiple injection risks (IDU, ISU, IHU)
- Barriers to access to transgender care
→ self-medication through street hormones, ISU
- Reluctance by MSM-serving AIDS service organizations to include trans people

Barriers to Service

- Lack of information on risk for trans people
- Misinformation within trans community
 - Low perception of risk
- Data collection has ignored various trans identities.
 - prevalence drives funding and programs
 - incidence among TMSM not well understood or explored
- Trans women continue to be counted in MSM category for funding and prevention programs

Barriers to Care: *Providers*

- Lack of knowledge and information
- Personal discomfort
- Lack of clinical research, literature
- Lack of agency support
- Not enough people doing the work
- Religious/Moral concerns

Barriers to Care: *Clients*

- Fear of disclosure/exposure
- Social and geographic isolation
- History of bad experiences with care providers
- Intake forms, office environment, alienating process
- Lack of insurance coverage
 - Trans-related care is often explicitly denied in insurance policies.

HIV and Hormones

- There are no significant drug interactions with drugs used to treat HIV.
- Several HIV medications change the levels of estrogens.
- Cross gender hormone therapy is not contraindicated in HIV disease at any stage.
- Transgender patients need ongoing care, not just access to hormones.

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