

Investigation of the High HIV Prevalence in the Transgender African American Community in San Francisco

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Objective

To identify factors that contribute to high HIV prevalence and risk among African American male-to-female Transgenders in San Francisco and Alameda Counties

Issues

- Previous studies found that among the male-to-female Transgender population, African Americans have extremely high HIV prevalence (>50%)
- Reported sexual and drug use behaviors among African Americans Transgenders are not significantly different from other Transgender racial/ethnic groups
- Differences in HIV prevalence among Transgender racial/ethnic groups are unexplained and a cause for concern

Methods

- Rapid assessment of African American Transgender (TG) population in San Francisco and Alameda Counties
- Methods included:
 - Direct field observation
 - Focus groups
 - Quantitative survey
 - Key informant interviews

Findings

Field Observations

- Transgenders congregate in specific neighborhoods:
 - **San Francisco:** Polk, Tenderloin, limited areas of the Castro
 - **Alameda County/ Oakland:** Downtown area, the “Stroll” in West Oakland
- Best time of personal contact in public areas was 5 pm to 9 pm, and after midnight
- Activities (not necessarily related to TGs) in these areas included:
 - sex work and drug trafficking
 - high police presence
 - AIDS Service Organizations
- Few drag shows and cabarets were frequented by TGs
- In some Transgender bars, African American TGs were not in attendance
- Health clinics remain open for special hours targeting TG population, but ASOs are closed



Focus Groups

- Key health issues for Transgenders:
 - Mental health issues but NOT related to HIV
 - HIV is NOT a high priority
 - Medical providers are NOT sensitive or astute to TG health needs
 - Increased access to TG specific services and awareness of TG specific needs, especially psychosocial
- Barriers to HIV prevention for Transgenders:
 - Other social and health needs take priority
 - Stigma, discrimination, lack of societal sensitivity to TG issues
 - Looking for love in all the wrong places...

Focus Groups (cont'd.)

- Identified issues to explore in key informant interviews
 - Mental health needs, job training, personal and sexual abuse, using drugs to appease sex partners

Quantitative Survey

Demographics and selected characteristics (N=71)

Age (Median – Range)	37 (19-57)
Gender Identification	
Transgender/transsexual	58 (82%)
Other; specified female	8 (11%)
Bi-gendered/cross dresser	5 (7%)
Income sources	
Government assistance	31 (44%)
Sex work	27 (38%)
Drug selling	10 (14%)
Employment (full/part time)	3 (4%)
Annual Income	
< \$7200	22 (31%)
\$7201 – \$14,400	25 (35%)
\$14,401 – over	22 (31%)

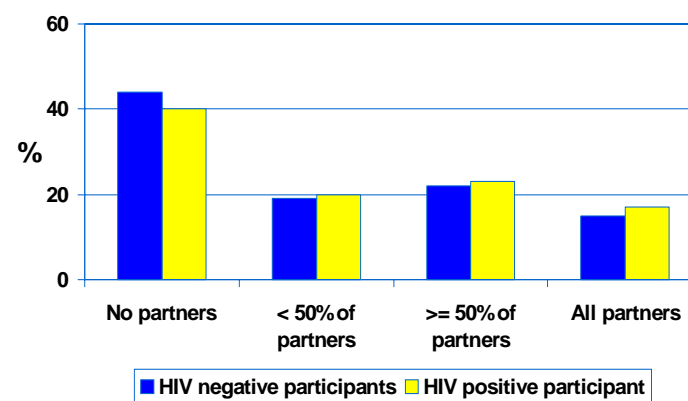
Sexual Risk and HIV Status (N=71)

Sexual orientation	
Gay	59 (83%)
Bisexual	10 (14%)
Heterosexual	7 (10%)
HIV positive received HIV specific health care	37 (90%)
Sexual partners in last 6 months	
0	14 (20%)
1	14 (20%)
2 or more	42 (60%)
Sexual partner type last 6 months:	
casual	30 (42%)
main	30 (42%)
paying/tricks	24 (34%)
anonymous	6 (8%)

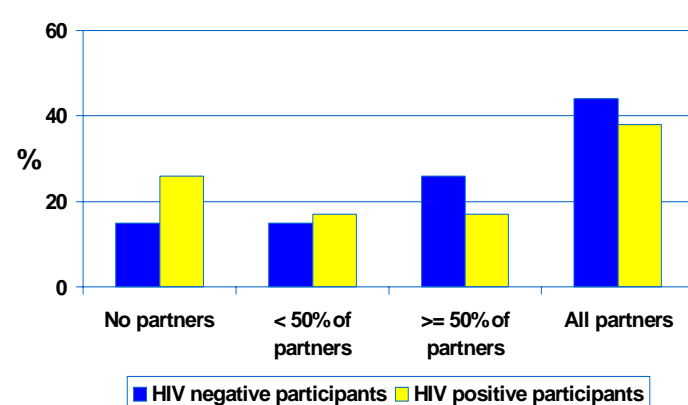
Drug Use (N=71)

	Use in last 6 months	Ever use
Injection drug use		
Methamphetamine	8 (11%)	18 (25%)
Cocaine	4 (6%)	7 (10%)
Heroin	3 (4%)	4 (6%)
Non-injection drug use		
Smoked Crack	24 (34%)	31 (44%)
Methamphetamine	13 (18%)	21 (30%)
Snorted cocaine	7 (10%)	20 (28%)
Other: ecstasy, GHB, LSD, PCP, ketamine	5 (7%)	15 (21%)

What percentage of your sex partners ask you about your HIV status?



What percentage of your sex partners would you say you tell your HIV status?



Key Informant Interviews

- HIV risk:
 - Drug abuse is a TG community concern
 - Few job or economic opportunities result in sex work
- Transgenders face crippling discrimination during childhood and adolescence. Familial and social acceptance, nurturing and support will decrease society’s distorted perceptions of Transgenders.
- Needs for Transgender community
 - Job training, mental health services, social support

Notable Quotes

- “For Black Transgenders, [we’re already] 3 strikes behind...”
- “HIV is a shameful disease, people don’t want to talk about it”
- “We [transgenders] have a deep sense of loneliness”
- “If we get our heads straight, everything else will follow”
- “HIV is not the problem, it’s healing—and sex is the closest thing to love”
- “Love your child”

Lessons Learned

- HIV was not identified as a leading health priority by the African American Transgender community
- HIV status not often discussed by Transgenders or their sex partners
- Mental health, employment opportunities, counseling, and social support services ranked before HIV prevention among perceived needs of Transgenders
- Services including drug treatment, vocational training, healthcare, and counseling are not now but should be Transgender specific and culturally sensitive to their needs

Acknowledgements

- Transgender Advisory Group:** Miss Major, Janetta, Nashanta, Bobbie, Monika, Shawnon, Nicole, Jealousy, Carla, Ron
- Interviewing Staff:** Jason Mehrtens and Viva Delgado
- Agencies:** Ark of Refuge, AIDS Project East Bay, Tenderloin AIDS Resource Center, TRANS Center, Transgender Law Project
- Sponsors:** Sephora, Kiehl’s New York, Rainbow Grocery, Sebastian Hair Care Products
- Funding:** CDC, Behavioral Intervention Research Branch; U50-CCU917790-01/02



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