HIV Risk Behaviors and Substance Use among Transgender Women in the San Francisco Bay Area

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Previous Studies

Author	Location	Sample characteristics	Sample Size	HIV Seroprevalence Rate
Elifson and et al., 1993	Atlanta, GA	Transgender sex workers	53	68%
Clements-Nolle and et al., 2001	San Francisco, CA	transgender persons	392 (MTF); 123 (FTM)	35% (MTF) 2% (FTM)
Gattari and et al., 1991	Rome, Italy	Drug-using transgender sex workers	22	86%

Previous Studies

Author	Location	Sample characteristics	Sample Size	HIV Seroprevalence Rate
Inciardi, 2001	Rome, Italy	Drug-using transgender sex workers	57	74%
Inciardi, 2001	Sao Paulo, Brazil	Transvestite sex workers	37	62% (study conducted in 1998)
Inciardi, 2001	Sao Paulo, Brazil	Transvestite sex workers	112	60.7% (study conducted in 1992)

Previous Studies

Author	Location	Sample characteristics	Sample Size	HIV Seroprevalence Rate
Van Kesteren and et al., 1997	Amsterdam, the Netherlands	MTF transsexuals	39	8%
Reback and et al., 2001	Los Angeles, CA	MTF trangender population	244	22%

Previous Studies

Author	Location	Sample Characteristics	Sample Size	HIV Seroprevalence Rate
Nemoto and et al., (in press)	San Francisco, CA	MTF transgenders of color	332	26%
Spizzichino and et al., 2001	Rome, Italy	Foreign transsexual sex workers	353	38.2%
Gras and et al., 1997	Amsterdam, the Netherlands	Transsexual/ transvestite prostitutes	25	24%

Findings Based on the Survey in Phase I (N = 332)

- **26% HIV infection rate**
- **14% STD infection rate over past 12 months**
- **47% had engaged in unprotected receptive anal sex (URAS) with primary partners in the past 30 days**
- **About 50% had engaged in sex under the influence of substances in the past 30 days**
- **6% had ever injected illicit drugs in the past 30 days**

Major Findings of Phase I Study

- Unprotected receptive anal sex (URAS) was varied by the types of sex partners (47% with primary, 26% with casual, and 12% with commercial sex partners in the past 30 days)
- URAS with primary partners was correlated with drug use before sex
- URAS with casual partners was correlated with HIV positive status and drug use before sex
- URAS with commercial sex partners was correlated with African American ethnicity and low income.

Mental Health

- **Depression**
- **44% depressed based on CES-D**
- **45% thought about committing suicide**
- **33% attempted suicide**
- **Transphobia Experience**
- **As youth: 79% were made fun of; 68% heard TGs were not normal; 37% experienced violence**
- **As adults: 63% had heard TGs were not normal; 38% lost job for being TG; 20% experienced violence**

Psychological Correlates

- Examine the relationship between transphobia (societal discrimination and stigma toward transgender people) and HIV risk behaviors (e.g., URAS)
- 24% had engaged in URAS at least once in the past 30 days
- Transphobia was not independently correlated with URAS, but found an interaction effect between age and transphobia
- Among younger participants (18-25 yrs), those exposed to higher transphobia were 3.2 times more likely to have engaged in URAS compared to those exposed to lower transphobia

Phase II Study

Target Groups: African American Transgender women in Oakland and White Transgender women in San Francisco

Qualitative Study

4 Focus Groups (22 Whites and 22 African American transgender women)

Similar themes emerged, such as risky sexual behaviors with private partners, not with customers, vicious circle of substance use and sex work, transphobic experience in the transition period, job-seeking experience, daily lives, and survival sex

Findings Based on the Survey in Phase II (N = 241; 118 Whites and 123 African Americans)

	African American	White
• Mean Age	33.8 years	39.4
• Currently Employed	34%	23%
• Transitional Housing	54%	38%
• Ever Legally Married	4%	34%
• Gender Identity		
• As Women	33%	55%
• As Pre-Op Trans	51%	59%

	African American	White
Sexual Orientation		
Heterosexual	66%	40%
Homosexual	16%	9%
Bisexual	12%	35%
Self-Reported		
HIV Positive	45%	18%
Hepatitis C	9%	27%

Sexual Risk Behaviors

URAS in the Past 30 Days

	African American	White
With Primary Partners	37%	69%
With Casual Partners	70%	76%
With Commercial Sex Part.	21%	19%
Sex with Casual Partners Under the Influence of		
Alcohol	58%	34%
Marijuana	60%	24%
Ecstasy	38%	None
Stimulants	24%	42%

Drug Use (Lifetime)

	African American	White
• Marijuana	93%	94%
• Medical Marijuana	30%	26%
• Crack Cocaine	53%	35%
• Injected Cocaine	9%	32%
• Speedball	5%	20%
• Injected Meth	12%	39%
• Hallucinogens	19%	72%
• Ecstasy	56%	38%

	African American	White
• Ever Injected Drugs	12%	44%
• Shared Needles in the Past 30 days	None	59%

Psychosocial Measures

• Self-Efficacy to Practice Safe Sex		
• In General	3.85	4.30 (ns)
• With Customers	3.73	4.19 (ns)
• Self-Esteem	3.64	3.72 $p<.05$
• Depression (CES-D)	55%	58% (ns)

Discussion

- HIV infection rates are high among African Americans (41% in SF and 45% in Oakland) compared with Latinas (23%), whites (18%), and APIs (13%).
- It may be due to high rates of URAS with customers among African Americans (23% in SF and 21% in Oakland).
- URAS with casual partners among Phase II participants (70% African Americans and 76% whites) is more frequent than African Americans (44%), Latinas (17%), and APIs (21%) in Phase I

- Hallucinogen use and injection drug use among Whites are high and about 60% reported sharing needles in the past 30 days. Injection drug use among Whites may be related to their high Hep C infection rate (27%). High risk drug use behaviors among White transgender women need to be addressed by HIV and substance use prevention efforts.
- High prevalence of depression [65% Latina, 58% Whites, African American (55% Oakland and 39% SF), and 26% APIs] need to be addressed in relation to their transphobia.

Publications Based on TRANS

- Nemoto, T., Operario, D., Keatley, J. (2005). Health and social services for male-to-female transgenders of color in San Francisco, International Journal of Transgenderism, 8, 5-9.
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- Nemoto, T., Operario, D., Keatley, J., Han, L., & Soma, T. (2004). HIV risk behaviors among male-to-female transgender persons of color in San Francisco, American Journal of Public Health, 94, 1193-1199.
- Nemoto, T., Operario, D., Keatley, J., & Villegas, D. (2004). Exploring the social context of HIV risk behaviors among male-to-female transgenders of color: A focus group analysis, AIDS CARE, 16 , 724-735.
- Nemoto, T., Iwamoto, M., & Operario, D. (2003). HIV risk behaviors among Asian and Pacific Islander male-to-female transgenders, Community Psychologist, 36, 31-35.

Publications Based on TRANS

- Operario, D. & Nemoto, T. (2005). Sexual risk behavior and substance use among a sample of Asian Pacific Islander transgendered women, AIDS Education and Prevention, 17, 430-443.

- Sugano, E., Nemoto, T., Operario, D. (2005). The impact of exposure to transphobia on HIV risk behavior in a sample of transgendered women of color in San Francisco, AIDS and Behavior, [online].

Summary

- Prevention intervention studies are needed for hard-to-reach and stigmatized transgender populations
- Difficulty in obtaining funding from NIH because of limitations of preliminary studies
- Hard to avoid political scrutiny and prejudice from general society or even from within these groups (e.g., LBGT)
- Our publications, presentations, and services have had a significant impact on promoting health for transgender people and their affected partners and communities
- A number of students have been involved in our community-based research, gained experience and knowledge, and pursued their careers as professionals in social science, public health, medicine, health and social policy.

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