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Social science that makes a difference

The response of the research sector in South Africa to trans women and HIV

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Trans 101...Transgender

- Transgender refers to a person who has a gender identity that differs from one's biological sex at birth
- Trans people are those of us whose gender identity does not or is perceived to not match stereotypical gender norms associated with our assigned gender (Prepared by Jody Marksamer and Dylan Vade)
 - Gender identity is independent of sexuality:
 - Trans people may identify as *straight, gay, bisexual*, or may consider conventional sexuality labels inadequate or inapplicable.
 - The term, transgender refers to a wide range of identities, roles and experiences which can vary considerably from one culture to another.

Introduction...

“Trans women (male to female), are those individuals who are assigned male at birth but identify as women, and may also include genderqueer or gender non-conforming individuals, who are assigned male at birth but do not identify as a man or woman”

Trans women do not have ‘male bodies’ nor do they primarily have sexual contact with women:

- *The reality is very complex:*
 - *Trans people’s bodies can be at any stage of medical transition, ranging from male to female to unusual and non-conforming bodies that cannot simply be defined in male-female binary*

Trans women are at great risk for HIV infection

- Globally trans women have been shown to be at high risk for HIV infection
 - In a systematic review and meta-analysis conducted by Baral and colleagues (2013) found that:
 - The odds ratio (OR) for being infected with HIV in trans women compared with all adults of reproductive age across the 15 countries was 48.8%

Trans women are at great risk for HIV infection

- Individual level risks for HIV infection among trans women include:
 - Unprotected anal intercourse (UAI) (Herbst et al., 2008)
 - High number of sexual partners (Clements-Nolle, Marx, Guzman & Katz, 2001) and;
 - The use of alcohol and substance use are all associated with heightened sexual exposure among trans women in several settings (Santos et al., 2014 & Reback & Fletcher, 2014)

Trans women are at great risk for HIV infection

- For trans women, the risk for acquiring HIV is worsened by stigmatization (Logie, James, Tharao, Loutfy, 2012) that may deter access to health services.
- Discrimination against trans women stems from many forms of stigma relating to:
 - Gender identity/expression, perceived sexual orientation, and involvement in sex work (Tucker, de Swardt, Struthers & McIntyre, 2013)
 - Transphobia displayed through discrimination in health settings intensifies the risk of HIV infection among trans women (Logie, James, Tharao, Loutfy, 2012)
- Body modification or gender expression may heighten discrimination against trans women in all sectors, including the health sector and the workplace (Poteat et al., 2010)
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The current status quo...globally and in South Africa

- While there is evidence that trans women are at great risk for HIV infection, HIV prevalence estimates for trans women, globally are often missing from country reports.
 - *Although there are a fair number of reports about gender identity and about being transgender in South Africa, there is very little information on HIV prevention and the response to AIDS that specifically focuses on trans people*

Methods

- A rapid scoping review was conducted in September 2015 of literature focused on HIV and trans women in South Africa
 - The search was limited to English-written documents published between 2005 and September 2015.
 - The timeframe of the search started in 2005 as the trans movement in South Africa came to the fore with the enactment of Act 49 (“Alteration of Sex Description and Sex Status Act, 2003” enacted in 2004 makes provision for trans people to align their bodies to their gender identity) and;
 - The establishment of the first exclusively trans organisation in South Africa in 2005.

Methods

- Searches were conducted using the following databases:
 - *Applied Social Sciences Index and Abstracts, Global Health, JSTOR, OVID, PubMed, ProQuest, Psych Articles, PsycInfo, Scopus, and Sociological Abstracts. COS Conference Papers Index and POPLINE were searched for conference and meeting papers, Google Scholar and WHO Library Databases (WHOLIS) for NGO reports and guidelines.*
 - HIV prevention interventions (NGOs providing psychosocial support and/or specific HIV services for trans women in South Africa)
 - Articles and citations were downloaded and organized on EndNote (version X6).
- Multiple searches were conducted using the same search terms in all selected databases.
 - The terms, “HIV”, “AIDS”, “STI” and “Healthcare” were combined with variations of words and phrases denoting trans women, and particular attention was devoted to selected local terms used for trans people or trans women.

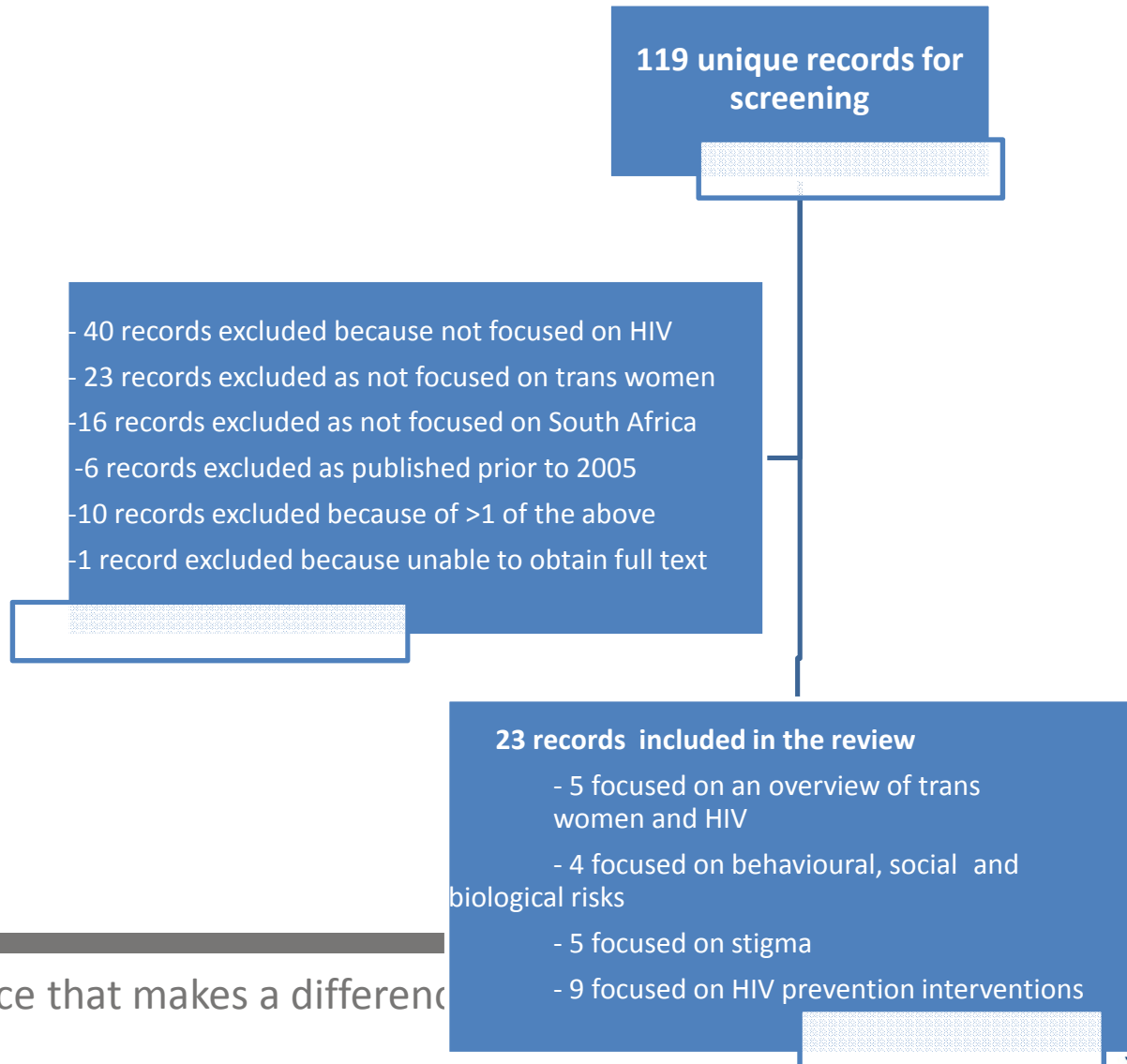
Methods

- After completion of the search, three independent reviewers screened the titles, abstracts and summaries (in the case of NGO reports and guidelines) for relevance.
- A focus on trans women and HIV in South Africa includes the following:
 - a) If trans women (n= > 0 -1000) were included as part of the final sample composition, even if subsumed under categories of “MSM”, “trans people” and other “key populations” (such as sex workers),
 - b) If trans women and HIV was reported as part of either the main findings, the discussion and/or conclusions and/or recommendations for future research or implications for service provision.

Methods

- The relevant articles were categorised into four distinct groups including those that focused on:
 - a) An overview of trans women and HIV in South Africa;
 - b) Behavioural, social and biological risks exacerbating HIV among trans women; and
 - c) Stigma in healthcare settings as it pertains to trans women
 - d) HIV prevention interventions tailored for trans women

Results



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Results

- Behavioural, social and biological risks
 - The heightened HIV risk of trans women through the overlap between drug use and sex work
 - The link between gender affirmation and high risk sexual practices (i.e. sex work)
 - Gender identities may lead to social exclusion, ironically, they also lead to risky sex, (a form of intimacy and affirmation of female identity)
 - Criminalisation of sex work intensifies the issue, with many trans women unwilling or unable to establish their rights in the face of judgemental health providers

Results

- Behavioural, social and biological risks
 - There are specific HIV vulnerabilities for trans women (in particular those who have made a physical transition from male to female by surgically altering the body, e.g. vaginoplasty)
 - The tissue in the neo-vagina itself makes trans women anatomically vulnerable to HIV.
 - The absence of health education for this population group perpetuates the belief that trans women are not at risk for HIV.

Results

- Stigma

- Trans women are reluctant to access public health services due to negative experiences and human rights violations
- The South African healthcare system is not gender responsive and often silent on the health issues facing trans women, in particular with regards to HIV.
- There is a general lack of knowledge by medical providers about the health needs of transgender individuals.
 - This gap may cause health service providers to discriminate and violate the rights of transgender individuals through inappropriate and unethical treatment, as well as stigmatizing language.

Results

- HIV prevention interventions for trans women
 - Pre-Exposure Prophylaxis (PrEP) should be considered an integral part of a combination prevention intervention for trans women
 - Support groups for trans women and referral services

Summary of what we found

Overall we found that literature focused on HIV and trans women in South Africa:

- Contain relatively cursory mention of trans issues
- No population size estimates and the burden of HIV among trans women remains undocumented
- No disaggregation by MSM or trans identifications
- Several research gaps including interactions between HIV treatment and hormonal therapy
- More research is needed looking at the link between gender affirmation and high risk sexual practices

In conclusion...

- The 1996 SA constitution and;
- The adoption of Act 49 of 2003 “Alteration of Sex Description and Sex Status Act, 2003” enacted in 2004 makes provision for trans people to align their bodies to their gender identity
 - There are ambiguities in Act 49 which often result in delayed processing of applications for sex realignment.
 - South African hospitals use gendered electronic filing systems that assign the gender of a patient according to the presented identification (ID) documents
- The few organisations working primarily with trans women have provided tailored services, under budgetary constraints, where possible for this population.

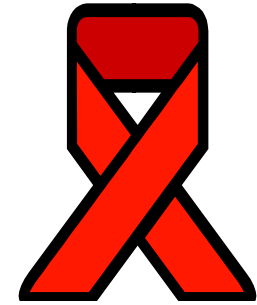
In conclusion...

- More recently:
 - The 2012-2016 National Strategic Plan (NSP): For HIV, key populations include young women between the ages of 15 and 24 years...people with disabilities and mental disorders; sex workers and their clients; people who abuse alcohol and illegal substances; men who have sex with men and **transgender individuals**” the South African National AIDS Council (SANAC, 2011)

In conclusion...

- Bringing trans women's experiences into a discourse of human rights was affirmed through:
 - The adoption of Act 49 and;
- Research focused on trans women and HIV has increased following pressure from advocacy and activist groups in South Africa.

THANK YOU



Please send any queries/suggestions to:

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