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Botshelo Ba Trans: HIV and access to healthcare for transgender women in Cape Town, East London and Johannesburg, South Africa

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Botshelo Ba Trans



Botshelo Ba **TRANS**
strong.live.life.love

- Botshelo (from Sesotho) means life, love and happiness.
- Important first step in that process where transgender women (TGW) will have a voice –



Trans 101...

- Transgender (“trans”) = An umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they were assigned at birth.





Trans 101...

Most TGW want to transition their bodies to be more congruent with their identities; they often use medical technologies, such as cross-sex hormones, and undergo various types of surgeries –

- Transgender people are a diverse group
 - Some live with their gender incongruence but decide not to transition
 - Some make a social transition only,
 - Some buy hormones on the street (or on the web) or visit their local doctor rather than specialised clinics
 - In many parts of the world stigma discourages people from making their transgender status known to others or accessing healthcare of any sort (*Winter et al., 2016*)



Trans 101

A woman in the making

GAUTENG / 7 AUGUST 2015, 6:20PM / BOTHO MOLOSANKWE



29.07.2015 Snowy Mamba, shares her a journey at her home in Tsakane, East Rand. Picture: Itumeleng English



Hijras of India





What is known of TGW and HIV?

- Globally, TGW have been shown to be at high risk for HIV infection.
- TGW are nearly 49 times more likely to be living with HIV than any other adults of reproductive age
- In South Africa we currently have little information regarding the specific HIV vulnerabilities of TGW
- Number of TGW in South Africa?
- HIV prevalence amongst TGW in South Africa also remains undocumented



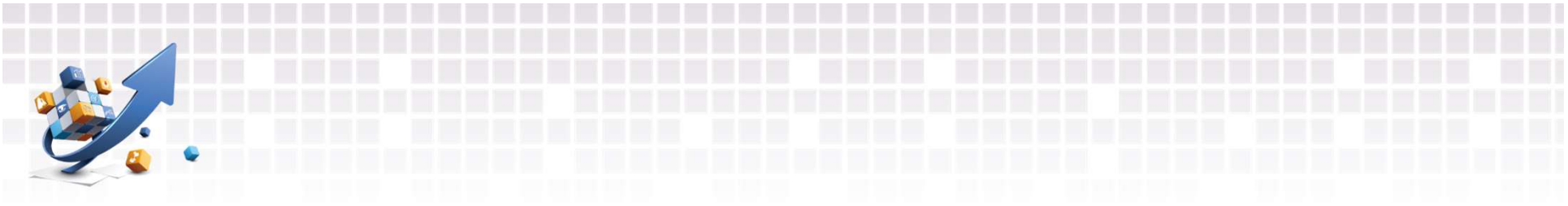
Methods

- Rapid ethnography:
 - 25 Key informant interviews with government and NGOs, activists, TGW, and other key populations
 - 3 Focus group discussions, 1 with HIV-positive TGW, and 2 with support groups
 - 26 Semi-structured individual interviews with TGW recruited via snowball sampling.



Methods

- We asked interlocutors
 - Life of a TGW in the city?
 - Access to healthcare and HIV services?



Results



Life of a TGW

- Social rejection leads to homelessness:

I remember, I emigrated from home to the city of Johannesburg and that moment, I think I was between the age of twelve going thirteen. And when I came here, I became homeless for about 1 year and six months you know? And I hustled my way from the pavement to a hotel somewhere in Hillbrow (TGW, Sex Worker, Gauteng)



Life of a TGW

Engaging in sex work provides a space where TGW are affirmed as women

The link between gender affirmation and high risk sexual practices (i.e. sex work)

You know most of the time they do sex work, trans women, because of issues like acceptance. They say when it comes to engaging in sex, those are the only people who accept them just as they are (Representative of Eastern Cape AIDS Council, East London)



Life of a TGW

- Violence and victimization directly and indirectly leads to HIV risk
 - *But you know the daily sort of struggle to try and negotiate the city police, people's belongings are destroyed all the time and you are homeless, your stuff is confiscated, your ID book destroyed, all your things can be wiped out overnight. They are trying to push people out of the city ... they are assuming that will stop people from being homeless, but of course that is a ridiculous assumption (NGO for trans female sex workers, Cape Town)*



Life of a TGW

- Sex work
- Unable to negotiate safer sex
- Drug use
 - *Many trans women say that they use substances as the way of coping with the heartache, coping with the isolation, coping with the rejection (TGW, founder of trans-specific NGO, East London)*
 - *Unemployment, being on the street, using drugs. If you are on the street and you are cold and you are whatever, you start to use drugs. That whole culture, that bottomless pit of vulnerability basically that there is (Ministry of Health, Cape Town)*



Life of a TGW

- Individual level, structural
- *The trans female sex workers that I see, there is not one that is not HIV positive (Medical nurse at LGBTI NGO, Cape Town)*



Access to HIV prevention, treatment and care services for TGW

- *Let's start with the bathrooms being friendly, one. Two, the documents they use. I always have a problem with this. I strictly do not tick anything when I see gender, male or female. Because that's not my gender. That's my sex. So I'm not gonna tick anything. The document they use are not gender affirming as well. Their programmes that they have within. They're all designed for females and males and not accommodating your intersex people and your transgender people if you know what I'm saying
(Representative SANAC LGBTI sector, Gauteng)*



Access to HIV prevention, treatment and care services for TGW

- South African hospitals use gendered electronic filing systems that assign the gender of a patient according to the presented identification (ID) documents
- These may result in external and internal stigmatization and present barriers to accessing HIV treatment and care services effectively.



Access to HIV prevention, treatment and care services for TGW

- Lack of gender affirming services
- There is a general lack of knowledge by medical providers about the health needs of transgender individuals and even more so about the HIV prevention, care and treatment needs
 - 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.



Resilience of TGW

- TGW champions have emerged and have established TGW-led organisations that create spaces for TGW to be visible and to network (*Scheibe et al, 2018, in press*)
- TGW outreach workers are reaching their peers and providing essential services in an array of contexts (*Scheibe et al, 2018, in press*)
- TGW outreach workers bridge these gaps and foster social connections within the transgender, healthcare and broader communities (*Scheibe et al, 2018, in press*)



Recommendations

- Multi-level interventions are required that address risk at an interpersonal, biological, structural and community levels
- Considerations of the legal and policy framework in which sex workers work needs to be looked at
- Community-led interventions, grounded in empowerment



Recommendations

- *Botshelo ba Trans* - TGW-led nature is a model for future knowledge generation and should be adopted to develop TGW researchers and empower them to own and use their data.
- Peer-driven delivery approaches are considered best practice to access, foster and provide responsive, quality health services to marginalised groups, including TGW.



Conclusion

- Donor funding for TGW is focused on HIV
- The NDOH has made provision for TGW to access reproductive health services that meet their needs
(National Department of Health. National Contraception and Fertility Planning Policy and Service Delivery Guidelines. Pretoria: South African Department of Health; 2012).
- These include specialized clinics and increased access to hormone therapy and surgery *(Scheibe et al., 2018 in press).*



Conclusion

- The Adolescent Sexual and Reproductive Health and Rights Framework commits to address the needs of underserved groups, including TGW *(Department of Social Development. National Adolescent Sexual and Reproductive Health and Rights Framework Strategy (2014 - 2019). Pretoria: Department of Social Development; 2015. Available from: Department of Social Development South Africa)*
- The health of TGW would be holistically improved if these policies were effectively implemented within the public healthcare system *(Scheibe et al., 2018 in press).*



THANK YOU

