

Community-derived interventions can improve responsiveness to the HIV prevention needs of transgender women in South Africa

Allanise Cloete

Senior Research Specialist

Identity and Belonging unit, Human and Social Capabilities Division

The Human Sciences Research Council, Cape Town | South Africa

With Donald Skinner, Leigh Ann van der Merwe and Ingrid Lynch



HIV RESEARCH FOR PREVENTION
27 & 28 JAN | 3 & 4 FEB 2021

Introduction



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

- First HIV bio-behavioural survey (BBS) targeting **exclusively** transgender women (TGW) in South Africa

To understand **the burden of HIV** amongst TGW in South Africa

Qualitative data to frame the contexts that contribute to HIV risk for TGW

Where was the study conducted?

Botshelo (from Sesotho) means life, love and happiness

The **Cape Town metro - municipality**, **Johannesburg metro – municipality**, **Buffalo City metro - municipality** located in the Eastern Cape province of South Africa.

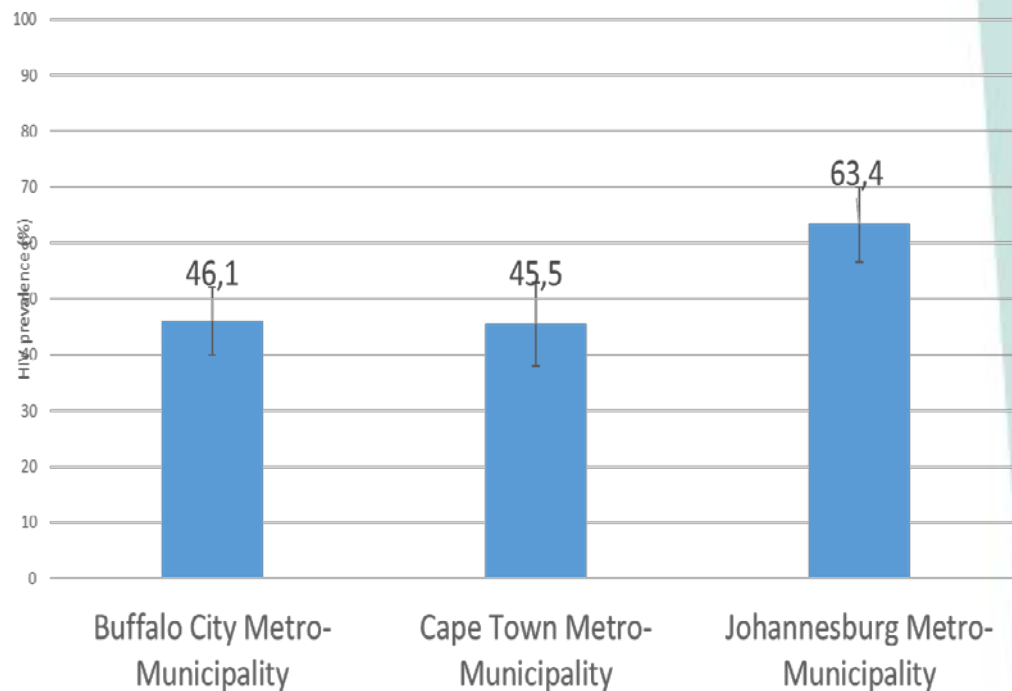


HIV risk for TGW

High HIV prevalence estimates among TGW in the 3 study metros

- ✂ 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

HIV prevalence estimates among transgender women in 3 South African metros



Social and structural factors that increase HIV risk for TGW

Childhood harassment for gender non-conformity and family rejection

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 (Trans Female Sex Worker, Gauteng)

Homelessness, little or no education leads to unemployment

*And also, hearing or having heard some of the other stories of my trans sisters and how they became **sex workers** is also because of the fact that they are, some of them have been on their own since a young age. Nobody accepted them for who they are and those are the kinds of stories that you hear (TGW, coordinator for Miss Gay Jozi, Gauteng)*



Individual/interpersonal factors that increase HIV risk for TGW

Selling sex

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

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)

Drug use

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)

HIV risk for transgender women is underpinned by socio-cultural and systemic factors

- A range of health and other challenges are syndemic to HIV risk and HIV treatment outcomes for TGW

This includes homelessness, drug use, everyday victimization, violence, experiences of stigma and discrimination because of transgender identifications and poor mental health

- This emphasizes the importance of **moving beyond a silo approach** in order to provide comprehensive HIV prevention services for TGW that addresses intersecting stigmas

Participatory approaches improve responsiveness to the HIV prevention needs of TGW



Interventions using community-participatory approaches grounded in the social realities of TGW

High feasibility and acceptability with marginalized transgender populations in the US, e.g. a peer-delivered HIV prevention intervention for TGW*



Leveraging existing relationships through a participatory approach:

Facilitate implementation

Improve the quality and effectiveness of HIV prevention interventions for TGW



Build capacity among TGW as decision-makers in their own healthcare



Conclusion

- Community-participatory approaches create opportunities for interventions to integrate TGW's innovative strategies to improve and manage their HIV prevention needs, health and wellbeing*
- Our research indicates that TGW in rural and peri-urban areas form informal networks of psycho-social support and their lives are not only characterized by stigma and discrimination, but also **collective agency and community integration****

A participatory approach places TGW at the center thereby generating an intervention that uniquely captures **not only HIV risks** - the dominant focus in existing research

But also **TGW's innovation in managing their own wellbeing and HIV prevention needs** amidst resource constraints and stigmatization; thus, in 'real world' settings.

- Through partnering with TGW, HIV prevention efforts can be enhanced by **harnessing protective factors and resiliencies of TGW**

SAFT, Aids Accountability. Southern Africa trans diverse situational analysis: Accountability to reduce barriers to accessing healthcare. Cape Town, South Africa: Gender DynamiX; 2016.

Lynch I, Clayton M. 'We go to the bush to prove that we are also men': Traditional circumcision and masculinity in the accounts of men who have sex with men in township communities in South Africa. *Cult Health Sex*. 2017;19:279–92.

Savva H, Cloete A, van der Merwe LLA. "You get HIV because there is no hope:" Qualitative assessment of transgender women's HIV vulnerabilities in three South African Cities. In: *HIV Research 4 Prevention (HR4P)* [Internet]. Madrid, Spain; 2018. p. 160. Available from: <http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=emexb&NEWS=N&AN=625283694>

Thuli's Hub: Integrated HIV prevention services for transgender women in South Africa

Leigh Ann van der Merwe

Director: SHE, Social, Health and Empowerment Feminist Collective of Transgender Women of Africa

with Tonia Poteat and Dee Adams, Donald Skinner, Allanise Cloete & Ingrid Lynch



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Social Health & Empowerment Feminist Collective (S.H.E.) is the largest transgender-women led organization in South Africa and is using **T-MAPP** to advocate for transgender-women, HIV, health, and human rights in South Africa.

Please help us to make that happen.

Let **YOUR VOICE** be heard and take a brief survey, then tell us **YOUR STORY** and the stories of your sisters in an interview.

We want to hear from you.

For more information and to participate contact...S.H.E. @ +27(0)43 722 0750 & WhatsApp: 073 811 0789 and on Facebook: Impilo Yethu



- 3 Datasets focused on transgender women's experiences of stigma in healthcare settings in South Africa

Botshelo ba Trans

the **T**ransgender Women **M**obilising and **P**reparing for HIV Impact **P**revention (**T-MAPP**) as well as;

Leigh Ann van der Merwe's MPH degree data



Barriers to accessing healthcare services in South African public health care facilities for transgender women

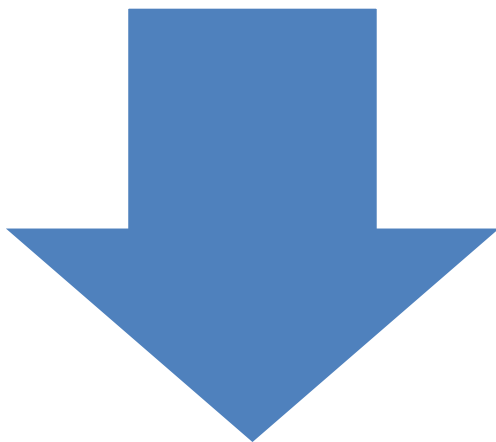
South African hospitals use gendered electronic filing systems that assign the gender of a patient according to the presented identification (ID) documents

These may result in external and internal stigmatization and present barriers to accessing HIV treatment and care services effectively.

These may also lead to experiences of violence both from fellow patients and healthcare workers:

“Whereas I’m not that one who wears skirts, like some who is dragging. Who just wears clothes, simple clothes, but they will see, the way I walk, the way I talk and my style, they see my style that is so unique to them. I’m so, they will look at me. I’m used to that because. People will look at me and then some will laugh, some will just say whatever they want to say.” (P002) Study participant, Buffalo City Metro

Transgender women are reluctant to access public health services due to stigmatising experiences

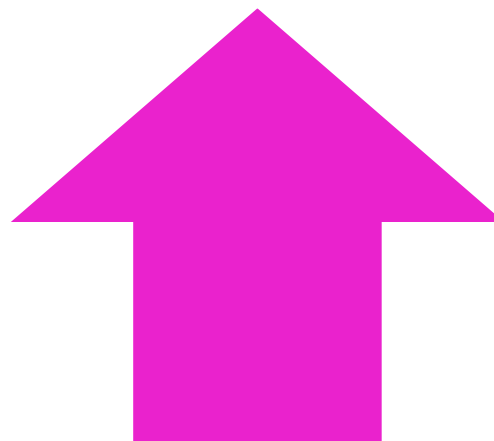


Healthcare avoidance

“Most of the girls with HIV here are too ashamed of what they feel other people will say about them. And there is not much privacy in hospitals, where a trans person will be subjected to stares at the hospital” (TGW: Cape Town)



Gender identity-related discrimination often operates as a **barrier to healthcare access** and may deter uptake of health services, including biomedical HIV prevention interventions



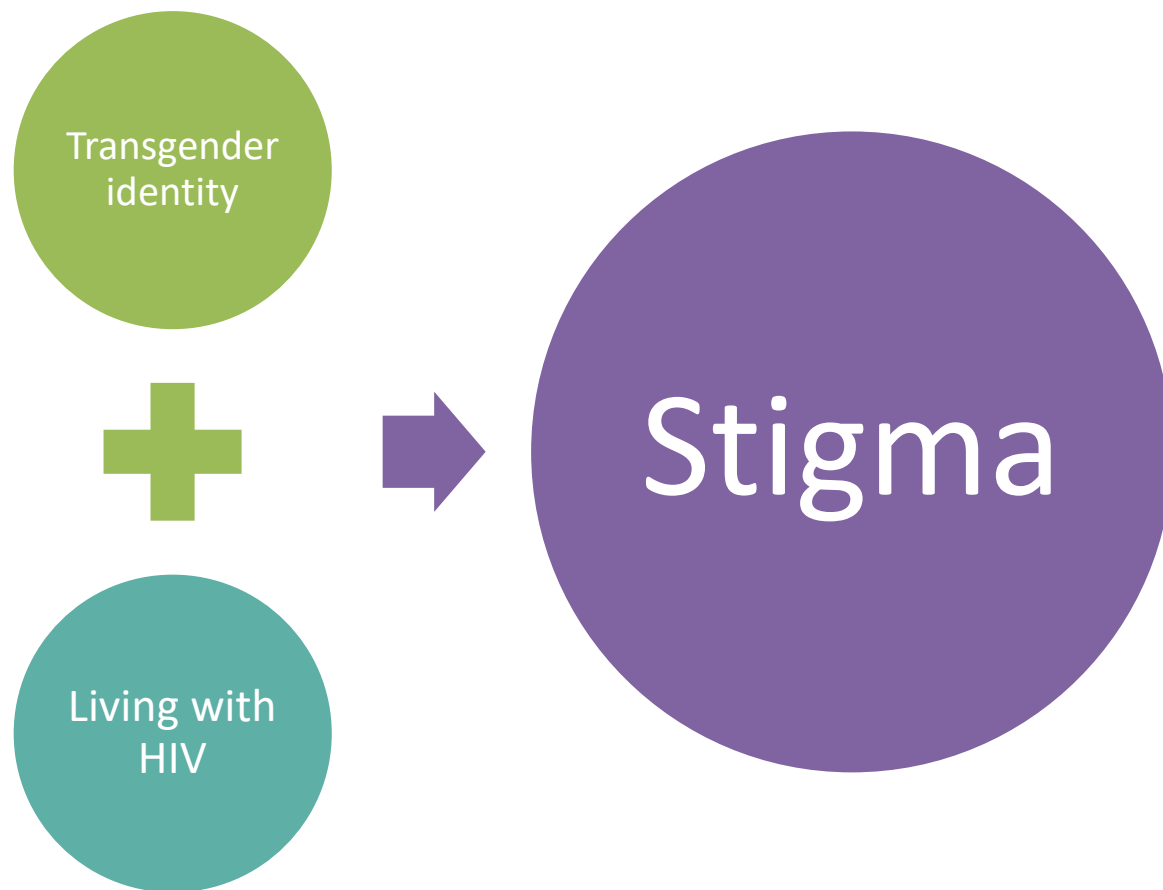
Desire for gender-affirming services

The persistent social oppression experienced by transgender women informs the psychological wellbeing of transgender women creates an increased need for gender affirmation

If I would undergo the surgery I would relax and people would not make fun of me in the communities because I travel between many communities and people often say that “this is a man”



Promotion and reproduction of gender normativity in healthcare services leads to an increased likelihood of being stigmatised



HIV and gender affirming care are less integrated for transgender women in South Africa

Whereas HIV services are offered at the primary healthcare levels, gender-affirming care is offered at one of two tertiary healthcare settings, which places gender-affirming care (GAC) out of reach for transgender people in more rural areas.

Research conducted elsewhere have yielded good results in terms of retaining transgender women in HIV care where GAC care is offered and gender affirmative practices are implemented (Lama, Mayer, Perez-Brumer, Huerta, Sanchez, Clark, Sanchez and Reisner 2019)

A gender-affirming comprehensive support and care intervention can increase HTS uptake and improve retention in HIV care and treatment for transgender women

