



Medical Advisory Bulletin

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HIV/AIDS in Transgendered & Transsexual Persons

Advisory

GEA recommends that all transsexual and transgendered persons who engage in or have a history of unprotected sexual relations with any other person examine their risk behaviors and consider ways of reducing their risk of HIV/AIDS and other STDs. Those who engage in high-risk behaviors or have done so in the past should get tested to learn their HIV status, and then take appropriate action to prevent transmission or reception of HIV and other STDs.

The Problem

The HIV/AIDS pandemic is the most significant health crisis facing the world today. Nearly 800,000 cases of AIDS have been diagnosed in the U.S. since the epidemic began over two decades ago, and an estimated one-quarter to one-third of Americans living with HIV are unaware they are infected. According to the U.S. Centers for Disease Control and Prevention (CDC), Men who have Sex with Men (MSMs) are the single-highest group at risk for HIV/AIDS, especially MSMs of Color. With regard to HIV surveillance and prevention, it is the CDC's current practice not to separate MTF transgendered and transsexual people from their MSM category, with no attention paid to the risks of FTM transgendered people.

Discussion

Although it is impossible to determine the actual HIV seroprevalence rate for transgendered and transsexual people in the U.S., recent data from non-federal sources suggest they comprise one of the highest at-risk populations in the U.S. Qualitative and quantitative needs assessments of urban transgender populations performed over the past seven years by various public health departments and organizations have yielded a wealth of information, not only about sexual risk behaviors, but also psychosocial and physical medical needs, access of and barriers to health care, and other data.

HIV seroprevalence in MTF transgendered people has been reported in these studies as ranging from 14% to 35%. Seroprevalence in MTF sex workers have been reported as high as 68%, and they are often induced by their clients to engage in barrier-free sex. HIV seroprevalence in FTM and female-bodied transgendered people reported thus far has been low (1.6% to 3.3%). However, they too have been found to engage in barrier-free sex, and an unknown percentage of FTMs also identify themselves as gay and have sex with non-transgendered men. Studies have also found significant substance abuse among transgendered people, and needle sharing among FTMs and MTFs for hormonal injection also has been reported.

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