

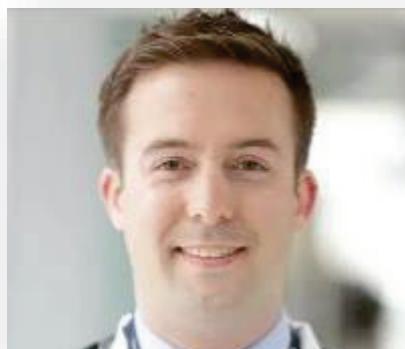


DELIVERING HIV PREVENTION AND CARE TO TRANSGENDER PEOPLE

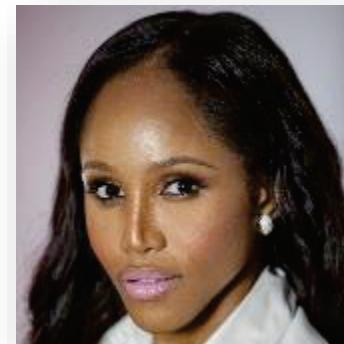
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Disclosures: Dr. Radix and Dr. Ard have nothing to disclose. Dr. Elliott is a Gilead Sciences bureau speaker.

This activity has been reviewed and is acceptable for up to 0.75 Prescribed credit(s) by the American Academy of Family Physicians. Participants should claim only the credit commensurate with the extent of their participation in this activity.

Learning Objectives

1. Describe steps that clinicians can take to help HIV-negative transgender people reduce their risk for HIV; and to help HIV-positive transgender people live healthy lives and reduce risk of transmission.
2. Describe what is known about interactions between antiretroviral medications and hormonal therapy.
3. Define gender identity and common terms that transgender people may use to describe themselves.
4. List health disparities and describe the role that stigma and discrimination play in creating them.
5. Summarize strategies to make clinical environments more welcoming to transgender people.

Part I

HIV and the Transgender Population

HIV Among Transgender People

High Risk of HIV Infection for Some Transgender Men

- HIV prevalence estimates range from 0% to 4%.
- Black/African American transgender men may be disproportionately affected.
- Transgender men who have sex with men (MSM) may have a particularly high risk of HIV.

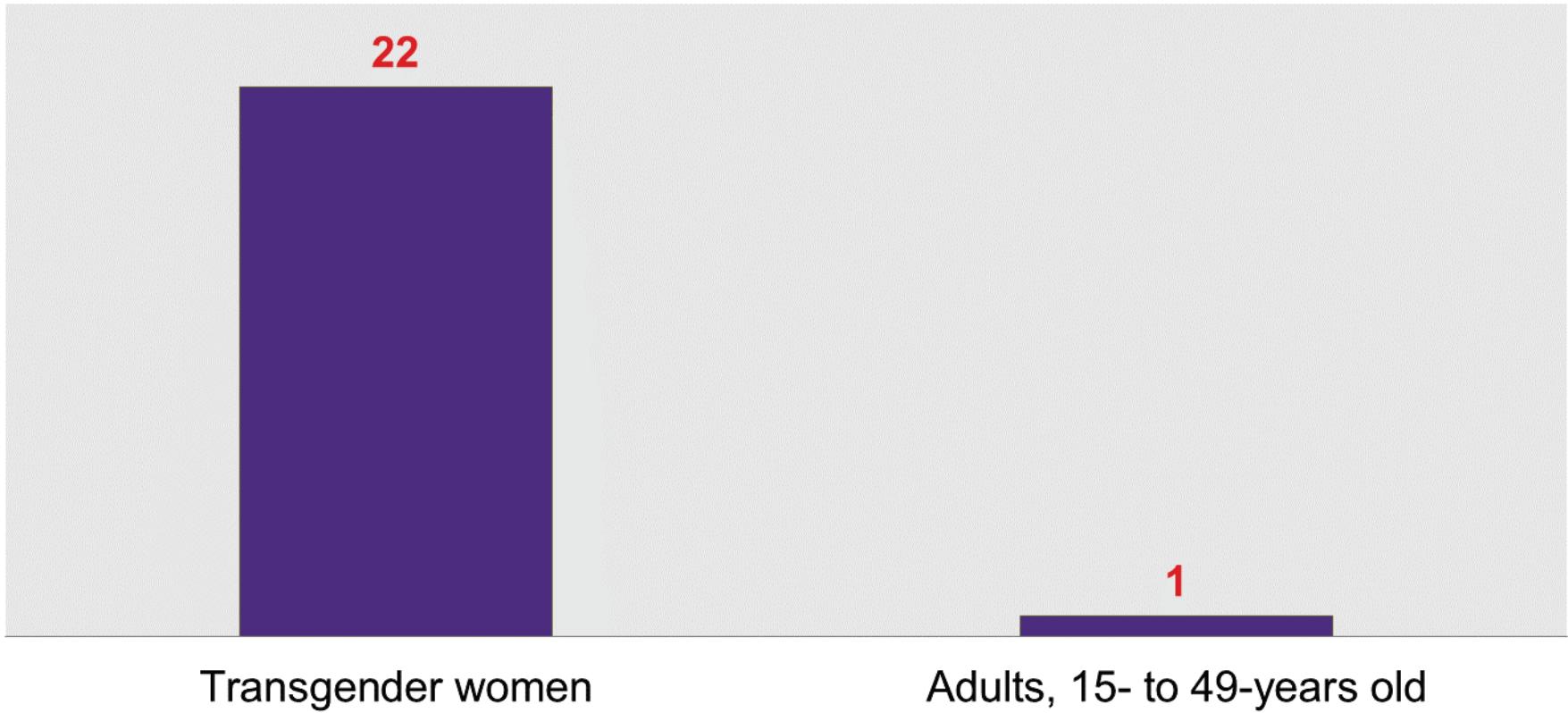
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Transgender Women Are Disproportionately Affected by HIV

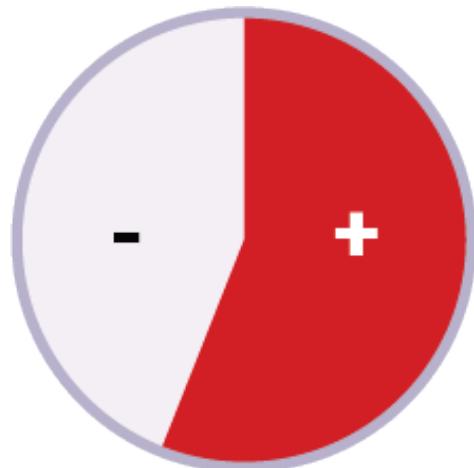
Estimated HIV prevalence (%) in the United States



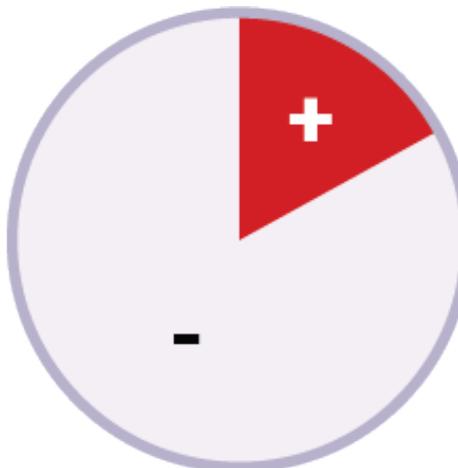
Baral, S. D., Poteat, T., Strömdahl, S., Wirtz, A. L., Guadamuz, T. E., & Beyerer, C. (2013). Worldwide burden of HIV in transgender women: A systematic review and meta-analysis. *Lancet. Infectious Diseases*, 13(3), 214–222.

African American Transgender Women Are Disparately Affected by HIV

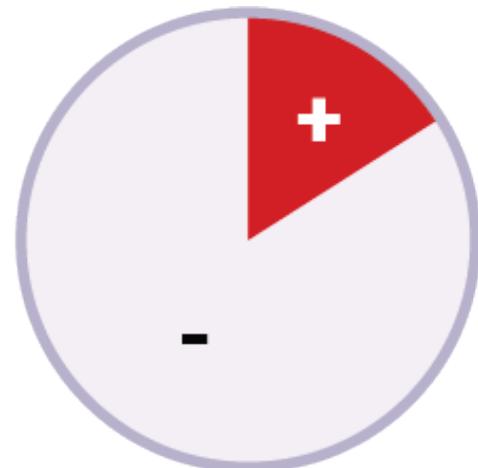
- Studies suggest high rates of HIV and racial and ethnic disparities among transgender women.



Black / African American
56% HIV-Positive



White
17% HIV-Positive

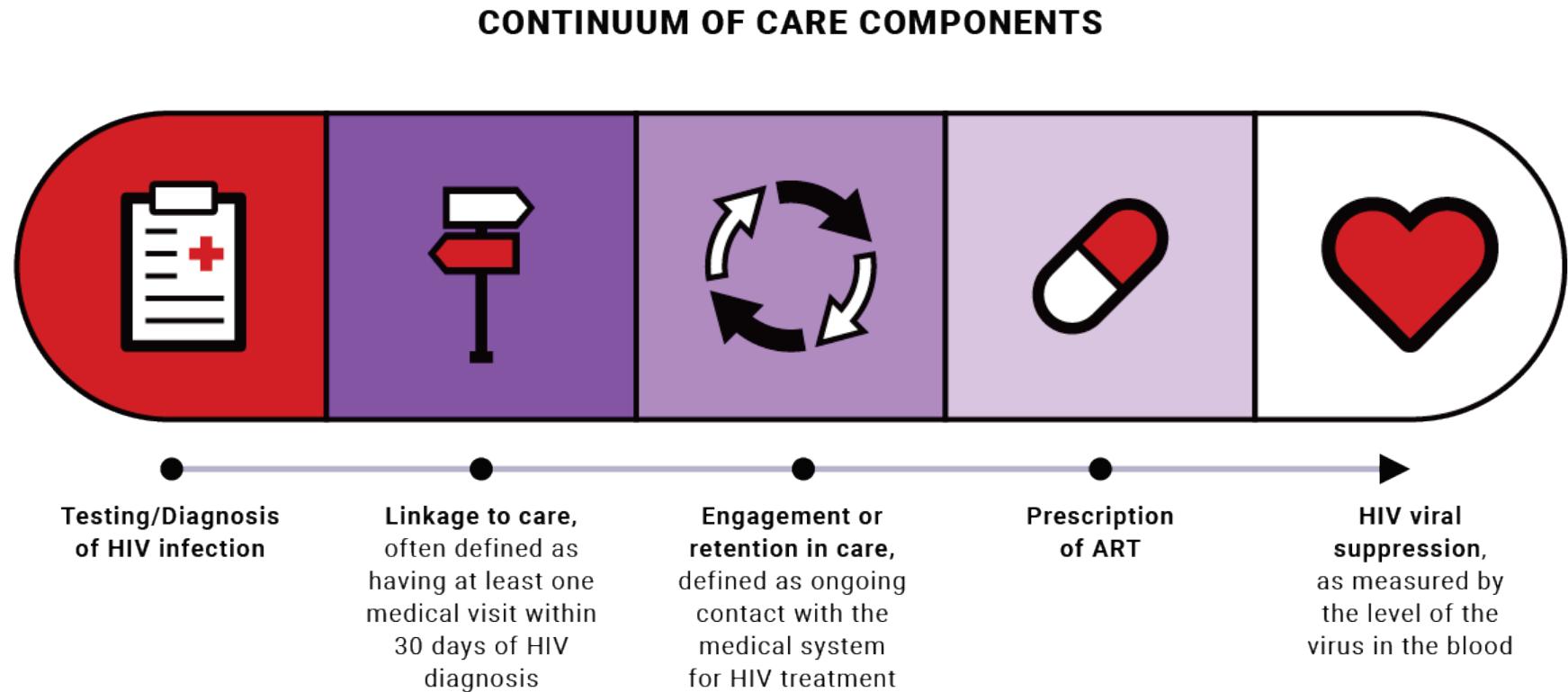


Hispanic / Latina
16% HIV-Positive

Herbst, J. H., Jacobs, E. D., Finlayson, T. J., McKleroy, V. S., Neumann, M. S., & Crepaz, N. (2008). Estimating HIV prevalence and risk behaviors of transgender persons in the United States: A systematic review. *AIDS and Behavior*, 2(1), 1–17.

Clark, H., Babu, A. S., Wiewel, E. W., Opoku, J., & Crepaz, N. (2016, December 29). Diagnosed HIV infection in transgender adults and adolescents: Results from the National HIV Surveillance System, 2009–2014. *AIDS and Behavior*. Epub ahead of print.

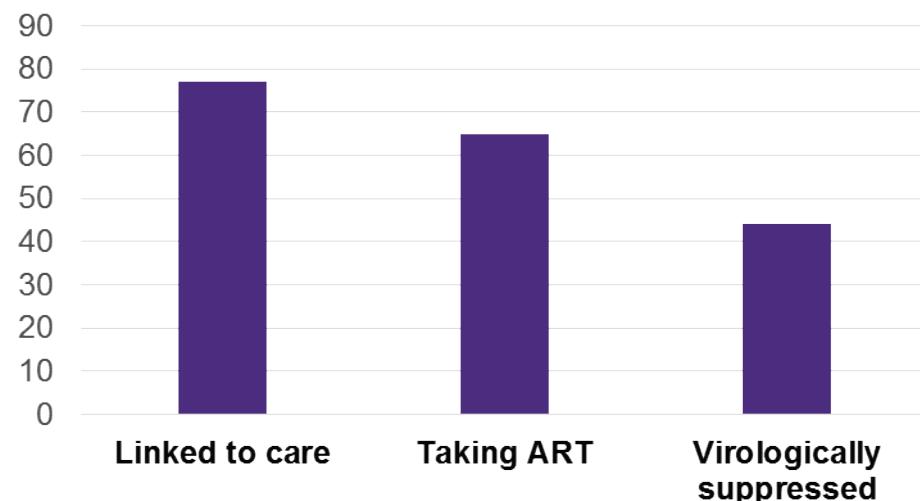
The HIV Care Continuum



Achieving Milestones on the HIV Care Cascade

- Diagnosis: nearly **12%** of MTF (male-to-female) people self-reported HIV diagnosis; almost **28% tested positive for HIV (Herbst, 2008)**.

Care milestones among **314** HIV-positive transgender women (Santos, 2014)



Herbst, J. H., Jacobs, E. D., Finlayson, T. J., McKleroy, V. S., Neumann, M. S., & Crepaz, N. (2008). Estimating HIV prevalence and risk behaviors of transgender persons in the United States: A systematic review. *AIDS and Behavior*, 2(1), 1–17.

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Barriers Faced by HIV-Positive Transgender Women

- Lack of access to patient-centered care and affirming care
- Housing instability
- Physical and emotional trauma
- Prioritization of other health issues over HIV treatment
- Concerns about interactions between antiretroviral therapy and hormonal therapy

Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L. Keisling, M. (2011). *Injustice at every turn: A report of the National Transgender Discrimination Survey*. Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force. Retrieved from http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf

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A Transgender Woman's Perspective

“You could have been made fun of the entire way to the health provider’s office, and when you get there, you may still face stigma and discrimination. Even in the doctor’s office, you might face incorrect pronoun use, misnaming, hostile waiting rooms, or being asked to use bathrooms that don’t support your gender identity.”

Transgender People May Prioritize Other Health Concerns Over HIV

Top 5 health concerns among **157** transgender people living with HIV:

1.  Gender affirming & non-discriminatory health care
2.  Hormone therapy & side effects
3.  Mental health care, including trauma recovery
4.  Personal care (nutrition, healthy living, etc.)
5.  Antiretroviral therapy and side effects

Chung, C., Kalra, A., Sprague, L., & Campbell, B. (2016). *Positively trans: initial report of a national needs assessment of transgender and gender non-conforming people*. Oakland, CA: Transgender Law Center. Retrieve from <http://transgenderlawcenter.org/wp-content/uploads/2016/02/PositivelyTrans-2015-7-border-FINAL.pdf>

HIV Prevention

How Clinicians Can Help Address HIV Prevention for Transgender People

1. Universal HIV screening
2. Screen for and treat sexually transmitted infections
3. Counsel about risk reduction
4. Post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) for HIV-negative transgender women and men at high risk of HIV infection
5. Engagement in HIV care and antiretroviral therapy for HIV-positive transgender people

Incorporate Routine HIV Screening Into Practice

- Recommended by CDC and the USPSTF
- Screen more often those with higher risk of infection, as determined by sexual history
- Preferred test: HIV antibody/antigen assay
- Engage partner services in case of a new diagnosis



Branson, B. M., Handsfield, H. H., Lampe, M. A., Janssen, R. S., Taylor, A. W., Lyss, S. B. (2006). Revised recommendations for HIV testing of adults, adolescents, and pregnant women in health-care settings. *Morbidity and Mortality Weekly Report*, 55(RR14), 1–17.

Tips for Discussing Sexual Health History With Transgender Patients

1. Explain why the history is important, and assure confidentiality.
2. Avoid assumptions about patients' sexual orientation or the gender identity of their partners.
3. Avoid assumptions about the type of sexual activities in which people engage.
4. Base assessment of HIV risk on sexual history, not on gender identity.
5. Ask about sexual function and satisfaction, not just infection risk.

Helpful Questions for Sexual Health Discussions

- What types of sex do you have?
- Can I ask you a few questions about your sexual partners?
- What do you think about using condoms?
- Have you ever had any surgeries such as breast or chest augmentation or masculinization, vaginoplasty, or phalloplasty?

Screen for and Treat Sexually Transmitted Diseases (STDs)

- Some STDs foster HIV transmission.
- The screening interval depends on risk, as determined by the sexual history.
- Screening may require extragenital testing for gonorrhea and chlamydia.
- Brief counseling by clinicians can reduce sexual behaviors that put people at risk.



HIV Prevention for HIV-Negative Transgender People

PrEP May Benefit People at High Risk of HIV Infection

- PrEP refers to the ongoing daily use of antiretroviral medication to prevent HIV acquisition.
- Since 2012, FDA has approved one medication, daily oral tenofovir disoproxil fumarate-emtricitabine (TDF-FTC), to prevent sexually acquired HIV-1 in HIV-negative adults.
- Effectiveness is contingent upon adherence.
- No clinical trials have been dedicated to assessing PrEP in transgender women or men.

Data on PrEP Efficacy Among Transgender Women Are Limited

- Post-hoc analysis of a study of 2,499 men (at birth) who reported sex with men.
- 14% were transgender women, using an expanded definition.
- PrEP adherence was lower among transgender women than MSM.
- PrEP efficacy among transgender women was not demonstrated.

Deutsch, M. B., Glidden, D. V., Sevelius, J., Keatley, J., McMahan, V., Guanira, J., ... Grant, R. M. (2015). HIV pre-exposure prophylaxis in transgender women: A subgroup analysis of the iPrEx trial. *Lancet HIV*, 2(12), e512–519.

No Known Interactions Between TDF-FTC and Hormonal Therapy

- Hormonal therapy is a priority for many transgender women.
- Some transgender women are concerned about interactions with PrEP.
- No clinically significant interactions were found between TDF-FTC and the lower level of hormones in contraceptives used by cisgender women.
- Hormone levels are monitored as part of transition-related care and may provide reassurance that PrEP medication is not affecting hormone levels.

Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L. Keisling, M. (2011). *Injustice at every turn: A report of the National Transgender Discrimination Survey*. Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force. Retrieved from http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf

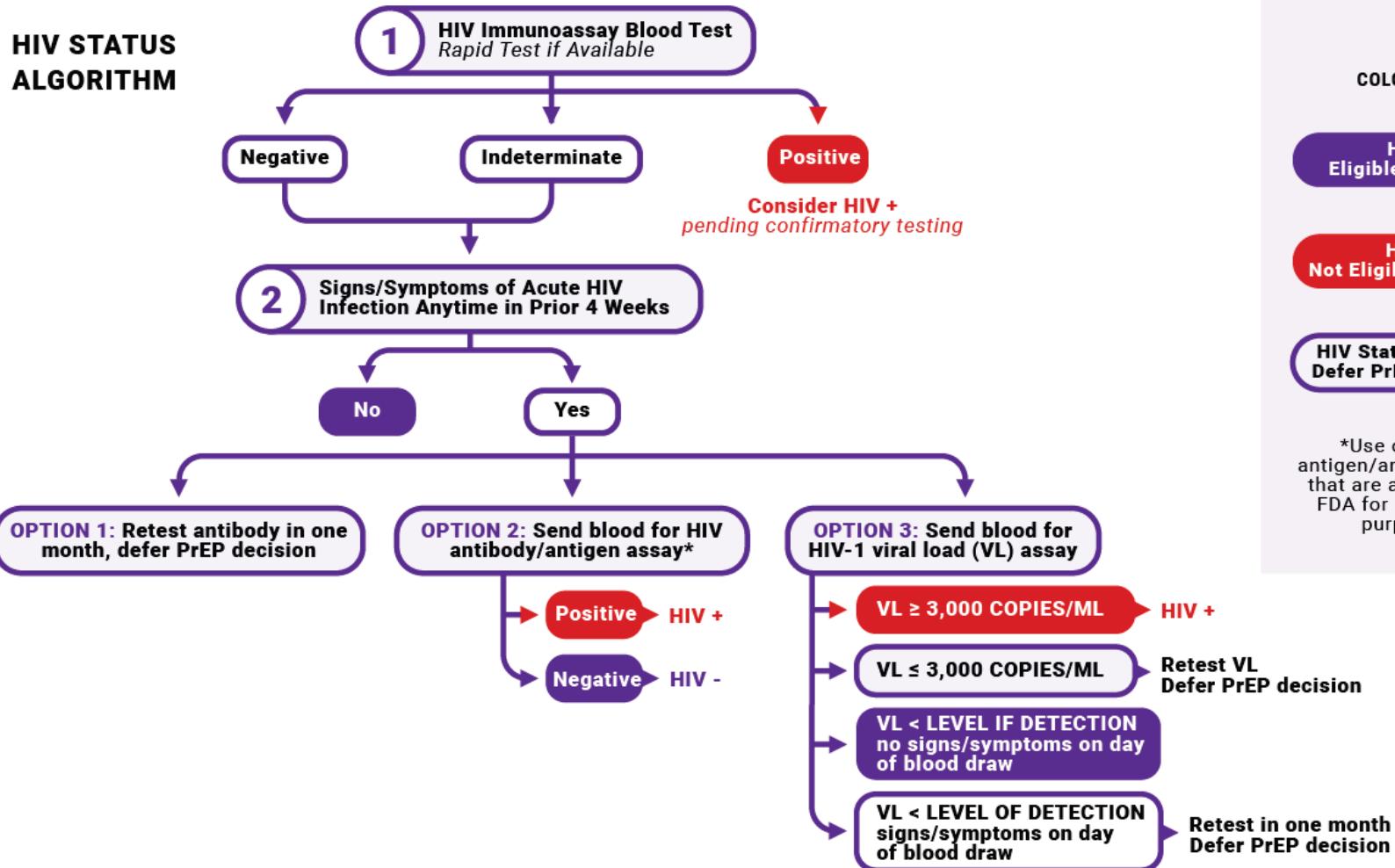
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Prescribing and Monitoring PrEP

HIV STATUS ALGORITHM



Prescribing and Monitoring PrEP (cont.)

- Additional baseline testing:
 - Hepatitis B surface antigen
 - Serum creatinine to measure estimated creatinine clearance
 - Pregnancy testing, for those of childbearing potential
- Prescribe:
 - TDF-FTC, 200–300 mg by mouth once daily
- Monitor:
 - Every 3 months: HIV test
 - Every 6 months: STI screening

U.S. Public Health Service. (2014). *Preexposure prophylaxis for the prevention of HIV infection in the United States—2014, A Clinical Practice Guideline*. Atlanta, GA: Centers for Disease Control and Prevention. Retrieved from <https://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf>

Accessing PrEP

- Financial barriers
 - Governmental and commercial insurance coverage varies.
 - Assistance programs can lower drug costs:
 - www.gileadadvancingaccess.com
 - www.copays.org
 - Local PrEP assistance programs.
 - Locating a PrEP provider: <https://preplocator.org/>
- Other barriers
 - Lack of knowledge
 - Stigma

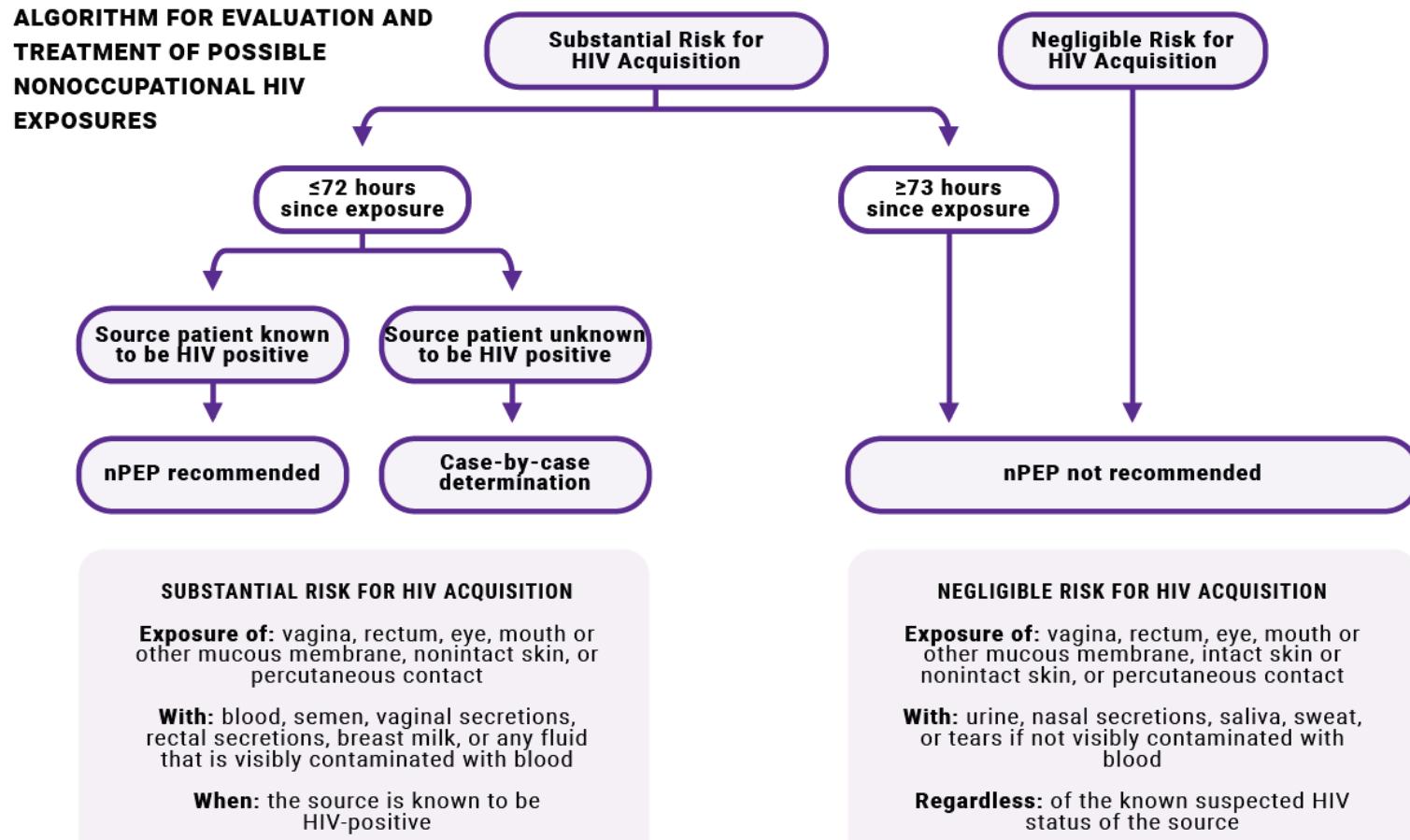
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PEP May Benefit Transgender Women After a High-risk Exposure

- PEP is for:
 - People who have a high risk exposure to HIV
 - Are not taking PrEP

PEP May Benefit Transgender Women After a High-risk Exposure (cont.)



Cardo, D. M., Culver, D. H., Ciesielski, C. A., Srivastava, P. U., Marcus, R., Abiteboul, D., ... Bell, D. M. (1997). A case-control study of HIV seroconversion in health care workers after percutaneous exposure. *New England Journal of Medicine*, 337(21), 1485–1490.

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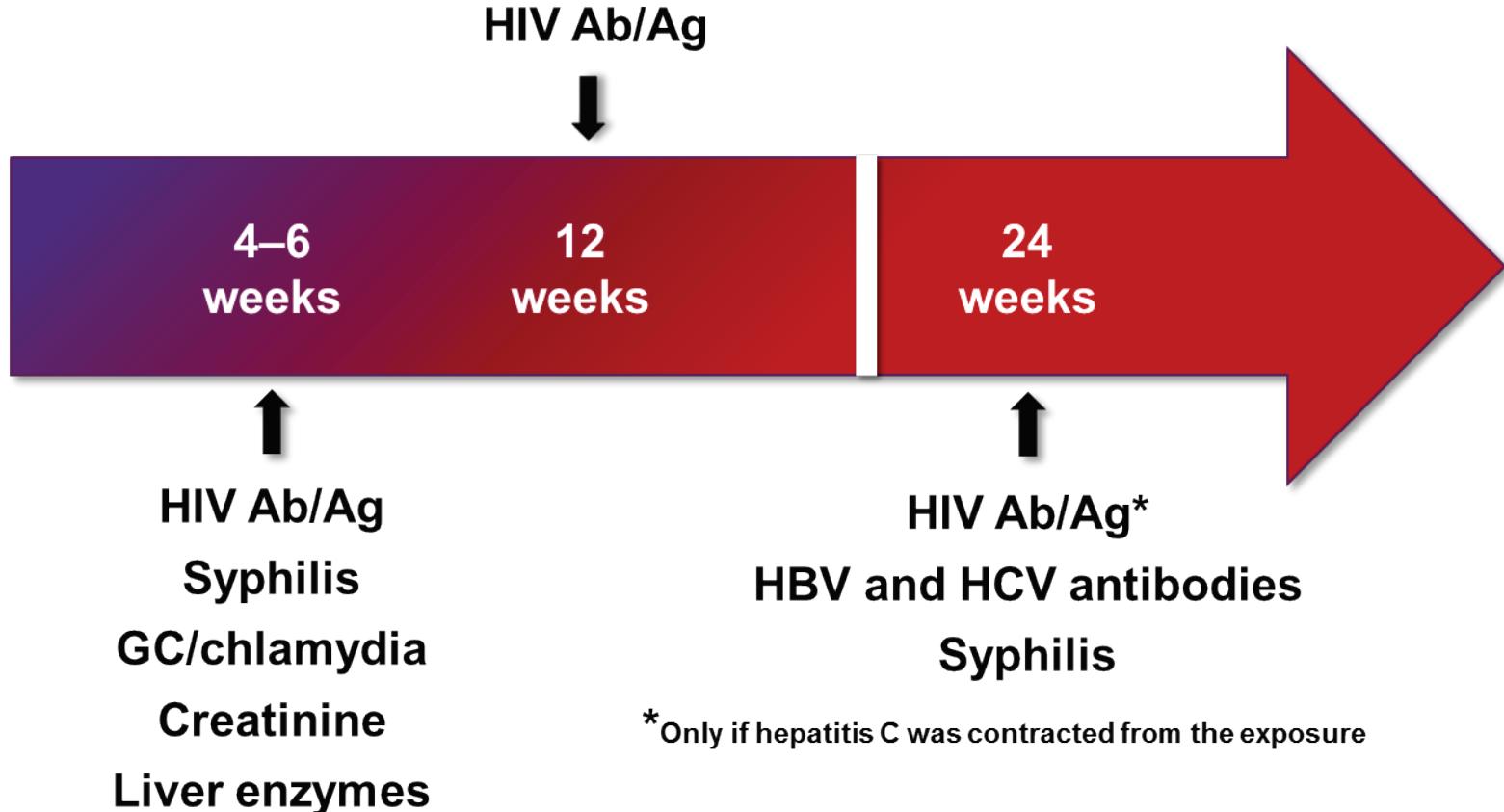
PEP May Benefit Transgender Women After a High-risk Exposure (cont.)

- PEP consists of antiretroviral medication and should be initiated as soon as possible (no more than 72 hours) after the exposure and continued for 28 days.
- Preferred regimens include:
 - TDF-FTC and raltegravir
 - TDF-FTC and dolutegravir
- No clinical trial of PEP efficacy has been performed in any population.
- Baseline Laboratory Evaluation for PEP
 - HIV antibody/antigen on the exposed and, if possible, source individuals
 - Serum creatinine and liver enzymes
 - Hepatitis B and C antibodies on the exposed and, if possible, source individuals
 - For sexual exposures, testing for syphilis, gonorrhea, and chlamydia

Cardo, D. M., Culver, D. H., Ciesielski, C. A., Srivastava, P. U., Marcus, R., Abiteboul, D., ... Bell, D. M. (1997). A case-control study of HIV seroconversion in health care workers after percutaneous exposure. *New England Journal of Medicine*, 337(21), 1485–1490.

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Follow-Up for the Exposed Person



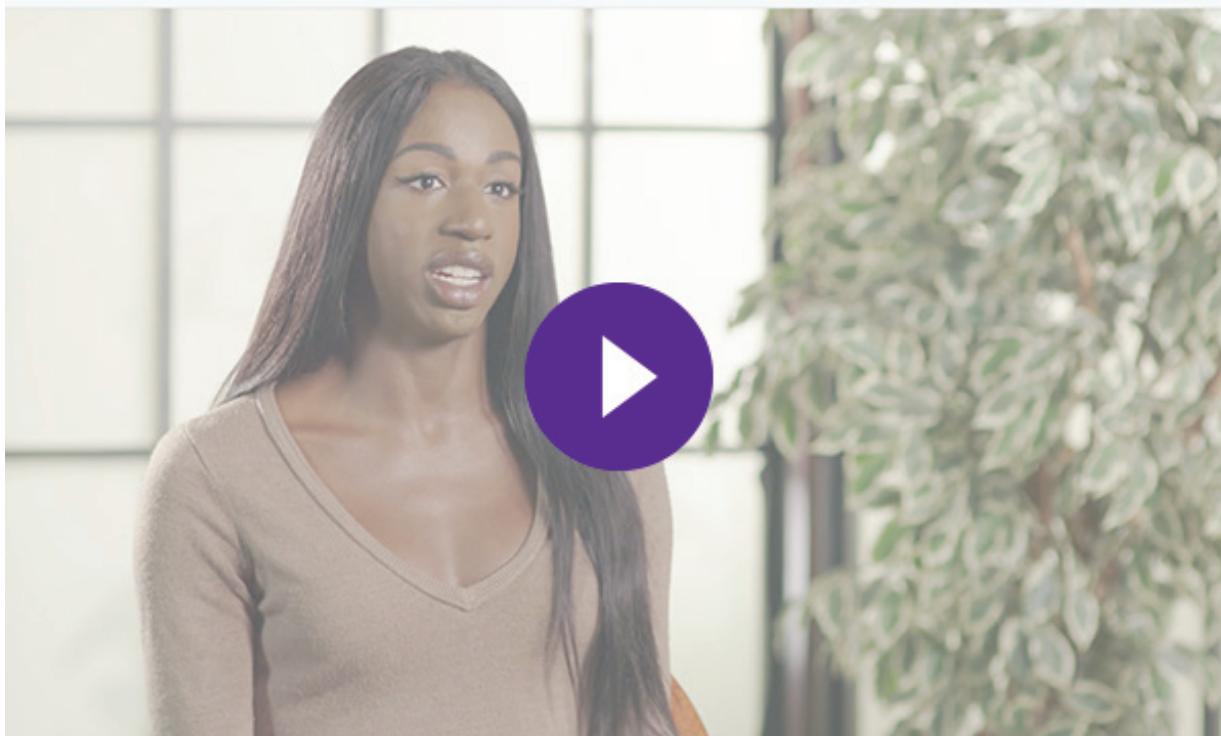
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Financial Assistance for PEP

- Governmental and commercial insurance may cover PEP.
- Manufacturers' assistance programs can lower drug costs: www.pparx.org.
- Crime Victim's Compensation Programs for assistance, if PEP is prescribed after a sexual assault: www.ojp.usdoj.gov.

Care and Transmission Prevention for HIV-Positive Transgender People

Patient Testimonials



Viral Suppression Prevents Sexual HIV Transmission

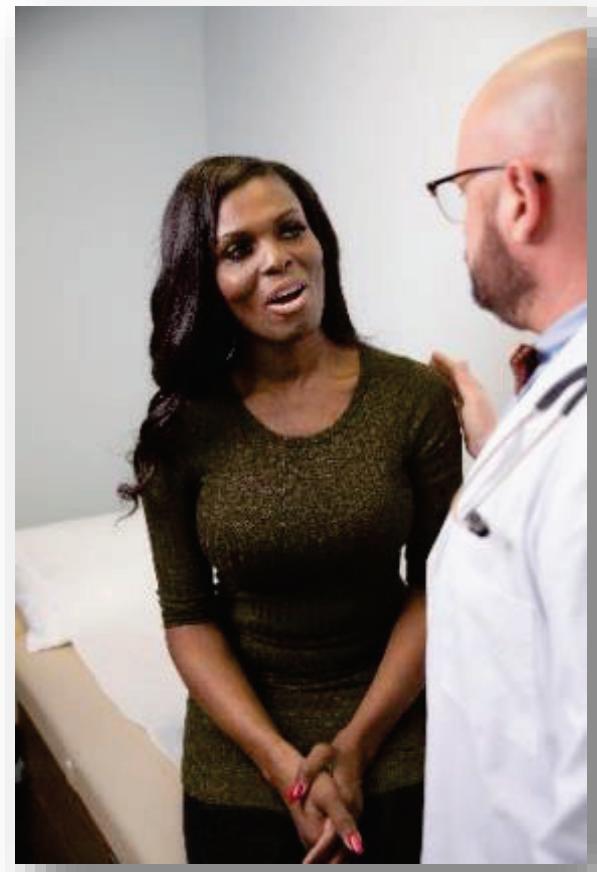
- Randomized controlled trial of heterosexual adults:
 - 1,763 serodifferent couples.
 - Immediate ART (versus delayed ART) for the partner with HIV infection (index) reduced within-couple HIV transmission by 93%.
 - No within-couple transmissions occurred when the index partner was virally suppressed.
- Observational study of heterosexual and MSM adults:
 - 548 and 340 serodifferent heterosexual and MSM couples, respectively.
 - 58,000 episodes of condomless sex over median 1.3 years of follow-up.
 - Zero (0) within-couple transmissions.

Cohen, M. S., Chen, Y. Q., McCauley, M., Gamble, T., Hosseinipour, M.C., Kumarasamy, N., ... Fleming, T. R. (2016). Antiretroviral therapy for prevention of HIV-1 infection. *New England Journal of Medicine*, 375, 830–839.

Rodger, A. J., Cambiano, V., Bruun, T., Vernazza, P., Collins, S., van Lunzen J., ... Lundgren, J. (2016). Sexual activity without condoms and risk of HIV transmission in serodifferent couples when the HIV-positive partner is using suppressive antiretroviral therapy. *JAMA*; 316(2), 171–181.

Clinicians Can Help Transgender People Achieve Viral Suppression

- **Engage** the health care team in making clinical settings welcoming to transgender people.
- **Ask** transgender women and men about barriers they encounter related to taking ART.
- **Connect** patients with transgender-friendly support services, when applicable.
- **Co-locate** services relevant to transgender people, when possible.
- **Identify** ART regimens that do not interact with hormonal therapy.



No Confirmed Interactions Between Hormonal Therapy and First-line ART

Recommended Antiretroviral Regimens for Treatment-Naïve Patients

Dolutegravir/abacavir/lamivudine

Dolutegravir plus either TAF/emtricitabine or TDF/emtricitabine

Elvitegravir/cobicistat/TAF/emtricitabine or elvitegravir/cobicistat/TDF/emtricitabine

Raltegravir plus either TAF/emtricitabine or TDF/emtricitabine

→ Darunavir plus ritonavir plus either TAF/emtricitabine or TDF/emtricitabine

TAF = Tenofovir alafenamide

TDF = Tenofovir disoproxil fumarate

Panel on Antiretroviral Guidelines for Adults and Adolescents. (2016). *Guidelines for the use of antiretroviral agents in HIV-1-infected adults and adolescents*. Washington, DC: U.S. Department of Health and Human Services. Retrieved from <https://aidsinfo.nih.gov/contentfiles/lvguidelines/adultandadolescentgl.pdf>

Part II

Transgender People and Patient-Centered Care

Background Information for Establishing an Affirmative Environment for Transgender People

Concepts and Demographics

Gender Identity

- Is a person's internal sense of being a man/male, a woman/female, both male and female, or another gender
- Is not the same thing as sexual orientation, which indicates a person's emotional and sexual attraction to others



Transgender

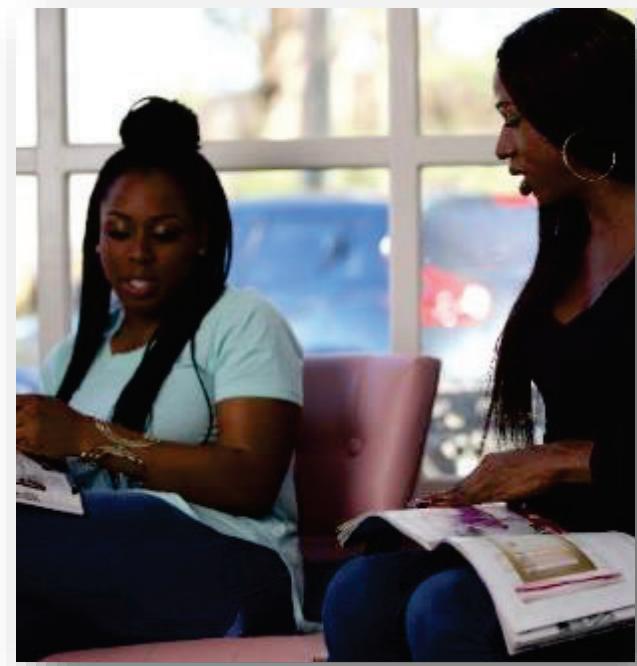
- An umbrella term that describes people whose gender identity does not correspond with societal expectations based on their sex assigned at birth.
- *Cisgender* refers to people whose gender identity conforms to societal expectations based on their sex assigned at birth.
- How many people identify as transgender in the United States?
 - Recent U.S. population estimates: 0.4–0.6% of adults.
 - Young adults (**18- to 24-year old**) are more likely to identify as transgender compared with older adults.

References

1. Flores, A. R., Herman, J. L., Gates, G. J., & Brown, T. N. T. (2016, June). *How many adults identify as transgender in the United States?* Los Angeles, CA: The Williams Institute. Retrieved from <https://williamsinstitute.law.ucla.edu/wp-content/uploads/How-Many-Adults-Identify-as-Transgender-in-the-United-States.pdf>
2. Meerwijk, E. L., & Sevelius, J. M. (2017). Transgender population size in the united states: A meta-regression of population-based probability samples. *American Journal of Public Health, 107*(2), 216.

Transgender Women

- People who were assigned male sex at birth but who identify as women/female.
- Some use the term *male-to-female (MTF) person* (not preferred).
- Many transgender women describe themselves simply as *women*.
- *Trans-feminine* is a new term encompassing a range of feminine gender identities among people assigned male sex at birth.



Transgender Men

- People who were assigned female sex at birth but who identify as men/male.
- Some use the term *female-to-male (FTM) person* (not preferred).
- Many transgender men describe themselves simply as *men*.
- *Trans-masculine* is a new term encompassing a range of masculine gender identities among people assigned female sex at birth.

Genderqueer

- A term used by some transgender people who do not identify as either male or female but rather some of both and/or who experience fluidity in their gender identity.
- Related terms include *gender variant*, *gender expansive*, *gender fluid*, *agender*, and *non-binary*.

Gender Affirmation

- Many transgender people go through a process of gender affirmation.
- This includes recognizing, accepting, and expressing one's gender identity.
- A related term is *transition*.
- A multifaceted process:
 - Social
 - Legal
 - Medical



Forms of Medical Affirmation

- Trans-feminine people:
 - *Hormonal therapies:*
 - Estradiol
 - Anti-androgen
 - *Surgery:*
 - Facial feminization
 - Hair removal
 - Breast augmentation
 - Vaginoplasty
 - Tracheal shave
 - Orchectomy
- Trans-masculine people:
 - *Hormonal therapies:*
 - Testosterone
 - *Surgery:*
 - Facial masculinization
 - Chest reconstruction
 - Metoidioplasty
 - Phalloplasty

Health Disparities

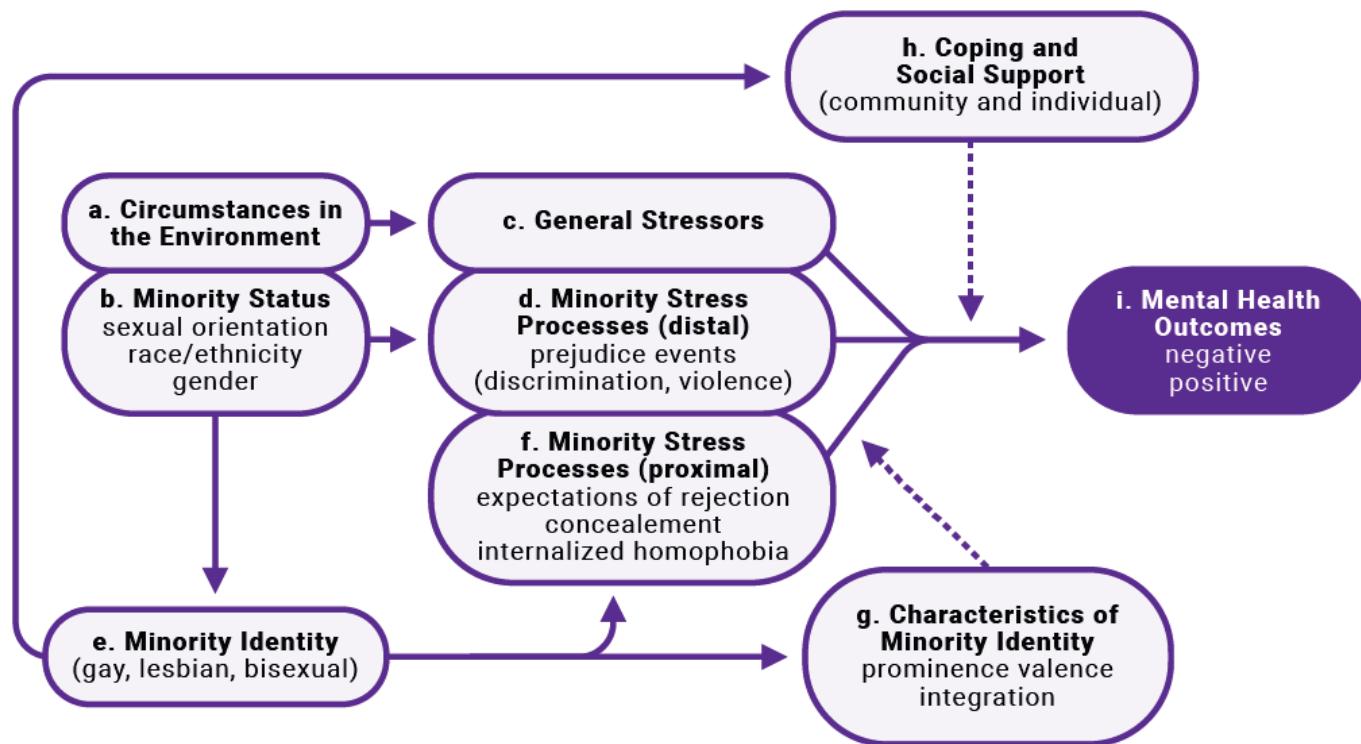
Discrimination and Barriers to Care

- Stigma and discrimination
 - 77% Mistreatment at school
 - 48% Physically attacked/verbally harassed/denied treatment
 - 33% Have had at least one negative experience in medical setting within past year related to being transgender
 - 30% Mistreatment at work
- Access to health care
 - Avoidance of or delays in seeking care due to discrimination concerns
 - Lack of clinicians with expertise in gender-affirming care
 - Lack of health insurance and coverage for:
 - Transition-related care
 - Preventive care that does not match the person's legal gender marker (e.g., cervical cytology for a transgender man; prostate health screen for a transgender woman)

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality. Retrieved from <http://www.transequality.org/sites/default/files/docs/usts/USTS%20Full%20Report%20-%20FINAL%201.6.17.pdf>

Stigma and Discrimination Can Lead to Health Disparities for Transgender People

MINORITY STRESS PROCESSES IN LESBIAN, GAY, AND BISEXUAL POPULATIONS



Meyer, IH. Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence. Psychological Bulletin, Vol 129(5), Sep 2003, 674-697. <http://dx.doi.org/10.1037/0033-2909.129.5.674>

Reisner SL, et al. Substance use to cope with stigma in healthcare among U.S. female-to-male trans masculine adults. LGBT Health. 2015;2(4):324-332.

Transgender People Face Disproportionate Health Disparities

- **Health concerns:** Compared with the general population, transgender people experience higher rates of the following health concerns:



HIV Infection



Mental Health Problems



Substance Use Disorders



Violence and Victimization

- Studies have found that **41%** of transgender people have attempted suicide at some point in their lives
- Transgender women have one of the highest prevalences of HIV of any group

Herbst, J. H., Jacobs, E. D., Finlayson, T. J., McKleroy, V. S., Neumann, M. S., & Crepaz, N. (2008). Estimating HIV prevalence and risk behaviors of transgender persons in the United States: A systematic review. *AIDS and Behavior*, 2(1), 1–17.

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). The report of the 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality. Retrieved from <http://www.transequality.org/sites/default/files/docs/usts%20Full%20Report%20-%20FINAL%201.6.17.pdf>

Providing Patient-Centered Care to Transgender People

Providing Care to Transgender People

- Several strategies can help to provide care to transgender people.
- These strategies share several underlying principles:
 1. Respect peoples' identities and experiences.
 2. Avoid assumptions of gender and gender conformity in clinical interactions.

Address Patients Using Self-selected Names and Pronouns

Strategy	Examples
Ask patients how they would like to be addressed.	<p>“What name and pronouns would you like us to use?”</p> <p>“How would you like to be addressed?”</p>
Avoid using gendered terms, such as “sir,” “Miss,” “Mr.,” or “ma’am” with patients until their names and pronouns are known.	<p>“How may I help you today?”</p>
Use the pronoun “they” if a patient’s pronouns are unknown.	<p>“The patient called to say they are running 5 minutes late. They will be here as soon as they can.”</p>

Collect Information About Sexual Orientation and Gender Identity (SOGI)

Gender Identity		Sexual Orientation
Do you think of yourself as:		
• Male • Female • Transgender man/trans man/female-to-male (FTM) • Transgender woman/trans woman/male-to-female (MTF)	• Genderqueer/gender nonconforming neither exclusively male or female • Additional gender category (or other); please specify: _____ • Decline to answer	• Straight or heterosexual • Lesbian or gay • Bisexual • Queer, pansexual, and/or questioning • Something else; please specify: _____ • Don't know • Decline to answer
What sex were you assigned at birth?		
• Male	• Female	• Decline to answer

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Collect Information About Names and Pronouns

Name and Pronouns

What is your name as you would like it to appear on your health records?

What is/are your pronouns?

- He/him
- She/her
- They/them
- Other:

Additional Strategies for Providing Care to Transgender People

- Include gender identity and expression in the institution's nondiscrimination policy.
- Offer single-occupancy, all-gender bathrooms when possible.
- Train all staff members about providing culturally relevant and patient-centered care.
- Develop clinical expertise in areas of importance for transgender people, such as hormonal therapy.
- Include images of transgender people in marketing and educational materials.
- Display posters and materials featuring transgender people throughout the office.
- Partner with local transgender community groups to sponsor events of interest and importance to transgender people.

Additional Resources

Additional Resources for Health Care Providers

Training on Transgender Health Care and Cultural Competency

- The National LGBT Health Education Center [link to www.lgbthealtheducation.org/topic/transgender-health]
- Center of Excellence for Transgender Health [link to <http://transhealth.ucsf.edu>]
- World Professional Association for Transgender Health (WPATH) certified training courses [link to www.wpath.org]
- Mazzoni Center [link to www.mazzonicenter.org]
- Callen-Lorde Community Health Center [link to <http://callen-lorde.org>]
- Collecting Sexual Orientation and Gender Identity Data Training [link to www.lgbthealtheducation.org/topic/sogi/]

Clinical Care Protocols for Transgender People

- World Professional Association for Transgender Health Standards of Care [link to http://www.wpath.org/site_page.cfm?pk_association_webpage_menu=1351&pk_association_webpage=3926]
- Gay & Lesbian Medical Association Guidelines for Care of Lesbian, Gay, Bisexual, and Transgender Patients [link to http://www.ghma.org/_data/n_0001/resources/live/GLMA%20guidelines%202006%20FINAL.pdf]
- Center of Excellence for Transgender Health Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Non-binary People <http://transhealth.ucsf.edu/trans?page=protocol-00-00>
- Transgender Law Center Organizing for Transgender Health Care: A Guide for Community Clinic Organizing and Advocacy [link to <http://transgenderlawcenter.org/archives/430>]
- CDC Guidelines for Preventing New HIV Infections [link to <https://www.cdc.gov/hiv/guidelines/preventing.html>]

Additional Resources for Health Care Providers (cont. 1)

Providing HIV Care

- CDC Rapid HIV Testing Training Course [link to <https://effectiveinterventions.cdc.gov/en/HighImpactPrevention/PublicHealthStrategies/HIVTesting.aspx>]
- AIDS Education and Training Center Program [link to <https://aidsetc.org/>]
- American Academy of HIV Medicine [link to <http://www.aahivm.org/>]
- HealthHIV Primary Care Training Program [link to <http://www.healthhiv.org/what-we-do/education-training/healthhiv-hiv-primary-care-training-and-certificate-programtm/>]

Insurance and Billing Information

- Medicare Benefits and Transgender People [link to http://transequality.org/Resources/MedicareBenefitsAndTransPeople_Aug2011_FINAL.pdf]
- Human Rights Campaign Finding Insurance for Transgender-Related Healthcare [link to www.hrc.org/resources/entry/finding-insurance-for-transgender-related-healthcare]

Resources for Patients on Changing Name and Gender on Legal Documents

- Transgender Legal Defense & Education Fund The Name Change Project [link to www.transgenderlegal.org/work_show.php?id=7]
- Massachusetts Transgender Political Coalition [link to <http://www.masstpc.org/publications/>]
- Transgender Law Center [link to <http://transgenderlawcenter.org/>]
- Health Care Rights and Transgender People [link to http://transequality.org/Resources/HealthCareRight_UpdatedAug2012_FINAL.pdf]

Additional Resources for Health Care Providers (cont. 2)

Posters, Brochures and Other Materials, for Improving the Physical Environment

- Health Resources and Services Administration LGBT Health [link to <http://www.hrsa.gov/lgbt/>]
- National LGBT Health Education Center Publications [link to www.lgbthealtheducation.org/lgbt-education/publications]
- *Act Against AIDS* Campaigns [link to <https://www.cdc.gov/actagainstaids/>]

Other Helpful Resources

- Lesbian, Gay, Bisexual, and Transgender Health [link to <http://www.cdc.gov/lgbthealth/transgender.htm>]
- Transgender Law Center [link to <http://transgenderlawcenter.org/resources/health>]
- Human Rights Campaign Explore Transgender [link to www.hrc.org/explore/topic/transgender]
- Healthy People 2020 Lesbian, Gay, Bisexual, and Transgender Health [link to <https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health?topicid=25>]
- CDC's HIV Risk Reduction Tool [link to <http://www.cdc.gov/hivrisk>]
- How Many Adults Identify as Transgender in the United States? [link to <http://williamsinstitute.law.ucla.edu/wp-content/uploads/How-Many-Adults-Identify-as-Transgender-in-the-United-States.pdf>]
- Transgender Issues in HIV [link to http://www.transhealth.ucsf.edu/pdf/Sevelius_HIV_Specialist_Dec13.pdf] from *HIV Specialist*
- Rad Remedy [link to <http://www.radremedy.org>]

Learning Objectives

1. Describe steps that clinicians can take to help HIV-negative transgender people reduce their risk for HIV; and to help HIV-positive transgender people live healthy lives and reduce risk of transmission.
2. Describe what is known about interactions between antiretroviral medications and hormonal therapy.
3. Define gender identity and common terms that transgender people may use to describe themselves.
4. List health disparities and describe the role that stigma and discrimination play in creating them.
5. Summarize strategies to make clinical environments more welcoming to transgender people.