HIV and Transgender Communities

Strengthening Prevention and Care

Nearly 1 million people in the United States identify as transgender. Transgender people, particularly transgender women, are at high risk for HIV infection. In fact, evidence suggests that in relation to their population size, transgender women are among the groups most affected by HIV in the U.S.

HIV prevention for transgender people is a core priority of the National HIV/AIDS Strategy. As part of its High-Impact Prevention approach, CDC is working with public health partners, other federal agencies, and community leaders to address key gaps in HIV prevention and care for transgender people nationwide.

What the Available Data Tell Us

HIV Prevalence

To estimate the percentage of transgender people living with HIV in the U.S., or HIV prevalence, CDC scientists recently conducted a meta-analysis of 88 studies published from 2006-2017. This analysis is important because there are limited HIV surveillance data for transgender populations (see sidebar).

The analysis confirmed that transgender women and men are disproportionately affected by HIV. Laboratory-confirmed HIV prevalence was 14.1% for transgender women, 3.2% for transgender men, and 9.2% for transgender people overall. By comparison, estimated HIV prevalence for U.S. adults overall is less than 0.5%.

The analysis also showed that transgender women of color are at particularly high risk. Mean HIV prevalence was 44.2% among African American transgender women and 25.8% among Hispanic/Latina transgender women, compared to 6.7% among white transgender women. Not enough data were available to examine HIV prevalence by race/ethnicity for transgender men.

While the results of this analysis are useful, they should be interpreted with caution, in part because transgender people at high risk of HIV may have been overrepresented in the studies that comprised the review.

Improving Data on HIV Among Transgender Populations

In recent years, CDC has taken steps to improve the quantity and quality of data on HIV among transgender populations.

Accurate, timely data are critical for designing, targeting, and evaluating HIV prevention programs. But since the beginning of the epidemic, there has been limited national information on the impact of the HIV infection among transgender populations. In large part, this is because there has been no reliable system for collecting and sharing both sex and gender identity information in health records.

To help address these gaps, CDC has:

- Revised the data fields used in CDC’s National HIV Surveillance System (NHSS) to better account for sex and gender identity
- Issued recommendations and statistical tools for health departments to collect information on current gender identity and report these data to the NHSS
- Informed healthcare providers about the importance of collecting complete data on sex and gender identity
- Analyzed data on HIV testing among transgender people through CDC’s Behavioral Risk Factor Surveillance System
- Funded health departments to study behavioral risk factors for HIV, testing behaviors, and the use of prevention services among transgender women through CDC’s National HIV Behavioral Surveillance system

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HIV Diagnoses

Although data on HIV diagnoses – the number of people who received an HIV diagnosis in a given time period – are incomplete for transgender people (see sidebar on page 1), CDC recently published an analysis of available data for 2009-2014.6 The analysis shows that of the 2,351 transgender people with a reported HIV diagnosis during that timeframe:

- 84% were transgender women, 15.4% were transgender men, and 0.7% had another gender identity
- More than half of transgender women (50.8%) and men (58.4%) were African American
- 72.6% of transgender women and 53.5% of transgender men had their infection diagnosed between the ages of 13 and 34
- 43% of transgender women and 54% of transgender men lived in the southern U.S.

### Why Transgender People Are at Increased Risk

- Many transgender people face stigma, discrimination, social rejection, and exclusion that can prevent them from accessing health care, education, employment, and housing. They also experience high rates of incarceration, mental health issues and violence. A recent CDC study found that of the nearly 2% of high school students who identify as transgender, 35% have been bullied at school, and 35% have attempted suicide. These factors affect the health and well-being of transgender people, placing them at increased risk for HIV.7,8,9,10


- Several behavioral factors, which often serve as a way for transgender people to cope with stigma and discrimination, put them at risk for HIV. These include elevated rates of injecting hormones or drugs, anal sex without condoms or medicines to prevent HIV, and commercial sex work.11,12


- Insensitivity to transgender issues by health care providers can be a barrier for transgender people with HIV who are seeking quality treatment and care services. Few health care providers receive proper training or are knowledgeable about transgender health issues and their unique needs. This can lead to limited health care access and negative health care encounters.13

  13 De Santis, JP, 362-372.

- The effectiveness of HIV behavioral interventions, developed for other at-risk groups and adapted for use with transgender people, is understudied. According to a 2017 study, most existing interventions target behavior change among transgender women, with only one HIV prevention program evaluated for transgender men. Evidence-based multilevel interventions that address the structural, biomedical, and behavioral risks for HIV among transgender populations, including transgender men, are needed to address disparities in HIV prevalence.14

Transgender women and men might not be sufficiently reached by current HIV testing measures. Tailoring HIV testing activities to overcome the unique barriers faced by transgender women and men might increase rates of testing among these populations.15

CDC’s Support for Transgender-Specific HIV Prevention

CDC is collaborating with many partners to intensify HIV prevention efforts for transgender people and build the base of evidence needed to improve programs and track progress.

Delivering High-Impact Prevention

Transgender people are a priority for CDC’s major HIV prevention funding programs, including funding to state and local health departments and community-based organizations (CBOs). CDC is providing 30 CBOs with targeted funding of nearly $11 million per year over five years to support HIV testing, linkage to care and prevention services for transgender youth of color and young gay and bisexual men of color.

Transgender people are also a priority population for CDC’s health department demonstration projects designed to expand two HIV prevention strategies: pre-exposure prophylaxis (PrEP), a daily medicine that can significantly reduce the risk of HIV infection, and Data to Care, an approach that uses routinely collected HIV surveillance data to identify people with diagnosed HIV who are not receiving care and link them to it.

In addition, CDC funds a national network of capacity-building providers that help health departments and CBOs provide culturally relevant programs, services and interventions for transgender people.

As part of its Transforming Health resource, CDC addresses ways healthcare providers can help high-risk transgender people prevent HIV, improve care for transgender people with HIV, and make clinical environments more welcoming to transgender patients.

Advancing HIV Prevention Research

While a number of prevention programs have been adapted for use with transgender populations, to date, few have been tested and proven effective. To address this gap, CDC is working with partners to develop new prevention programs, adapt existing ones, and rigorously assess their impact on HIV risk behaviors and transmission. For example:

• As part of its Compendium of Evidence-Based Interventions and Best Practices for HIV Prevention, CDC recently included the Couples HIV Intervention Program – which focuses on reducing HIV risk behaviors among transgender women and their primary cisgender male partners.

• CDC is supporting CBOs in Atlanta and Chicago to pilot Transgender Women Involved in Strategies for Transformation (TWIST), a peer-led educational intervention that seeks to reduce HIV transmission risk behaviors and sexually transmitted diseases among transgender women with HIV. TWIST was developed in collaboration with transgender women and was adapted from an existing HIV intervention focused on cisgender women.

• CDC is studying two locally-developed or adapted interventions that are designed to deliver a combination of HIV prevention and other support services to transgender people who have sex with men and who are at high risk of HIV infection. These interventions are a combination of mutually reinforcing biomedical, behavioral, and social/structural intervention components that together, have the potential to reduce participants’ risks for acquiring HIV.

Raising Awareness, Engaging Communities

Well-designed awareness campaigns can help people better understand their level of risk for HIV and encourage them to take steps to protect themselves, get tested, and seek out care and treatment. Several of CDC’s social marketing campaigns include materials and activities that are specifically tailored to transgender communities:

- **Doing It**, which encourages all adults to get tested for HIV and know their status, and includes images and testimonial videos featuring transgender leaders
- **HIV Treatment Works**, which encourages people with HIV to stay in care and features stories of transgender women
- **Let's Stop HIV Together**, which raises awareness about HIV and fights stigma, and includes stories of transgender women
- **Start Talking. Stop HIV.**, which helps gay and bisexual, cisgender and transgender men communicate about safer sex, testing, and other prevention issues

CDC is also working with the Center of Excellence for Transgender Health to support National Transgender HIV Testing Day, which promotes HIV testing, prevention, and treatment efforts among transgender people.

Need for Collective Action

Despite significant challenges, there is much that can be done today to address key gaps in HIV prevention and care for transgender people. CDC plays a critical role, and action is also needed from many other partners, including other federal agencies, state and local governments, CBOs, community leaders, and healthcare providers.

Closing today’s data gaps will require diligence by healthcare providers and health departments in collecting, compiling, and reporting data on sex and gender identity. Researchers and their institutions should conduct additional research to expand the body of evidence on effective strategies to reduce HIV infections and improve health outcomes for transgender individuals with HIV.

Today, there is great potential to address the HIV prevention and healthcare needs of transgender people. CDC will continue working with partners to ensure that transgender people can access the HIV prevention and care they need to remain healthy.