

# Top Health Issues for Transgender People

## PHYSICAL HEALTH

Available research related to physical health issues among transgender people is extremely limited and mainly conducted abroad. Furthermore, studies of how medical interventions, such as hormone therapy and/or sexual reassignment surgeries, affect overall physical health and well-being remain extremely limited.

There is limited evidence to suggest an association between feminizing hormone therapies, such as estrogen-progestin combinations, and an elevated risk for venous thromboembolic disease and increased levels of prolactin. Some research also suggests an association between masculinizing hormone therapies, such as testosterone, and elevated liver enzymes, loss of bone mineral density, and increased risk for ovarian cancer. However, no clinical trials have been conducted to examine, longitudinally, the long-term effects of hormone therapies on overall physical health.<sup>1,2,3,4</sup>

### INJURY AND VIOLENCE

Violence against transgender people, especially transgender women of color, continues to occur in the United States. Numerous studies have suggested that between 16 to 60 percent of transgender people are victims of physical assault or abuse, and between 13 to 66 percent are victims of sexual assault. Intimate partner violence has also been found to be a prominent issue for transgender people. Social stigmatization and other factors may additionally lead to an under-reporting of acts of violence committed against transgender people.<sup>5,6,7,8,9,10,11,12,13,14,15,16</sup>

## BEHAVIORAL HEALTH

### SUICIDE

Studies have shown that suicidal ideation is widely reported among transgender people and can range from 38 to 65 percent. More alarmingly, studies have also found that suicide attempts among transgender people can range from 16 to 32 percent. Access to culturally-sensitive suicide prevention resources and supportive services for transgender people remains a critical priority.<sup>17,18,19,20,21,22,23,24,25</sup>

### MENTAL HEALTH

Data about the prevalence of mental health disorders such as depression, anxiety, and other clinical conditions among transgender people are extremely limited. To date, most studies focusing on mental health disorders among transgender people use nonprobability samples, and few compare the mental health of transgender to non-transgender people.<sup>26</sup>

The few recent studies that have compared the mental health status of transgender people to non-transgender people have yielded mixed results. On one hand, a recent study found that transgender women were more likely than non-transgender men and heterosexual women to report suicidal ideation and attempts, take psychotropic medications, and have a problem with alcohol; but no such differences were found between transgender women

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and lesbians. On the other hand, another study found that, when compared to men who have sex with men and bisexually active women, transgender women were most likely to report depressive symptoms and suicidal ideation.<sup>27,28</sup>

## **SUBSTANCE ABUSE**

Alcohol and substance abuse has been identified as a major concern among transgender people in the United States. Some studies have shown that marijuana, crack cocaine, and alcohol are the most commonly used drugs by transgender people. Other studies have also found alarming rates of methamphetamine use (4 to 46 percent; with the highest rates found in Los Angeles and San Francisco), as well as injection drug use (2 to 40 percent).<sup>29,30,31,32,33,34,35,36,37,38,389,40,41,42,43,44,45,46</sup>

High rates of tobacco use, specifically cigarette smoking, have also been found among transgender people. Some studies suggest that tobacco use rates can range from 45 to 74 percent. It is critical for prevention specialists and healthcare providers to note that, in transgender women who take estrogen, smoking greatly increases the chances for blood clots. These risks are similar to those faced by non-transgender women who smoke and take oral contraception or undergo hormone replacement therapy (HRT). In addition, transgender men who take testosterone increase their risk of heart disease, and smoking further increases that risk.<sup>47,48,49,50,51,52,53,54</sup>

Access to substance abuse treatment services can be very difficult for transgender people and therefore remains a critical priority. Studies have suggested that barriers to treatment services often include discrimination, provider hostility and insensitivity, strict binary gender (male/female) segregation within programs, and lack of acceptance in gender-appropriate recovery groups. Enhancing access to culturally-competent prevention and treatment providers for transgender people is essential in addressing the current behavioral health disparities within this population.<sup>55,56,57,58,59,60,61</sup>

# **SEXUAL HEALTH**

## **SEXUALLY TRANSMITTED DISEASES: HIV/AIDS**

The HIV/AIDS epidemic has had a significant effect on transgender people. However, due to a lack of systematic surveillance and reporting of HIV prevalence rates among transgender people, the exact prevalence of HIV among this population remains unknown.

In a recent 12-city study, HIV prevalence rates among transgender women were found to vary from 5 to 68 percent. Studies continue to suggest that HIV infection is highest among transgender women of color, with HIV prevalence rates ranging from 41 to 63 percent among African-American transgender women; 14 to 50 percent among Latina transgender women; and 4 to 13 percent among Asian-Pacific Islander transgender women.<sup>62,63,64,65,66,67,68,69,70,71,72,73,74,75,76</sup>

Although under-examined, HIV prevalence in transgender men (FTMs) is estimated to range from 2 to 3 percent. In the first studies of HIV among MTF transgender youth, HIV prevalence varied from 19 to 22 percent, showing them to be at high risk for infection.<sup>77,78,79</sup>

Despite high HIV prevalence rates among transgender women, some studies suggest a disparity in the availability of HIV treatment services. For example, a recent four-city study found that transgender women were less likely to receive highly active anti-retroviral therapy than a control group of men who have sex with men (MSM), heterosexual women and men, and male intravenous drug users (IDUs).<sup>80</sup>

### **SEXUALLY TRANSMITTED DISEASES: OTHER INFECTIONS**

As with HIV/AIDS, there is a lack of systematic surveillance of sexually transmitted diseases (STDs) among transgender people. However, some research has found varying prevalence rates of syphilis (3 to 79 percent); gonorrhea (4 to 14 percent); chlamydia (2 to 8 percent); herpes (2 to 6 percent); and human papillomavirus (HPV) (3 to 7 percent) within the population.<sup>81,82,83,84,85,86,87</sup>

Prevalence rates of other infectious diseases among transgender people are not well known. Limited studies have found hepatitis C prevalence rates between 11 to 24 percent and hepatitis B rates from 4 to 76 percent among specific samples of transgender women. Other studies on non-sexually transmitted diseases, such as tuberculosis (TB), found a prevalence rate of up to 13 percent among transgender women in San Francisco.<sup>88,89,90,91,92,93</sup>

*This publication lists non-Federal resources to provide additional information. The views and content in these resources have not been formally approved by the U.S. Department of Health and Human Services (HHS). Listing of the resources is not an endorsement by HHS or its operating divisions.*

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