



HEADS UP! Qualitative Findings from Focus Groups with Transgenders to Inform Development of a Home HIV/STD Testing Program

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BACKGROUND

To address high morbidity in the transgender community (4X rates of HIV infection) and a lack of targeted services, the LA County Division of HIV and STD Programs (DHSP) is developing a campaign to promote home collection kits for HIV and syphilis with the transgender community.

OBJECTIVES

To understand the transgender community's perceptions of health and healthcare, HIV and syphilis testing, and social marketing campaigns to help inform the development of a home test kit promotional campaign.

METHODS

28 Los Angeles transgender men, women and youth participated in 4 focus groups (1 each for men, youth, women in English, and women in Spanish) in September 2011. Groups were run by transgender moderators using a discussion guide designed by DHSP staff and a Community Advisory Group. Researchers observed the groups and later analyzed videotapes using emergent codes and themes.

RESULTS

The transgender community experiences significant hurdles to healthcare, including a lack of insurance/resources and a shortage of "trans-educated" healthcare workers. HIV concerns vary widely, while concerns and knowledge about syphilis were very low, but increased upon receipt of information provided in the groups. A home collection kit for HIV and syphilis was attractive, but perceived benefits were sometimes offset by issues of computer access, homelessness, and confidentiality. There is a tension between wanting trans-specific services and not wanting to be singled out from the broader community.

CONCLUSIONS

A home test kit for transgender communities shows potential receptivity. The promotional campaign should be upbeat and inclusive of the entire community, including both men and women. Small scale, highly targeted social marketing campaigns may positively impact routine testing within these communities.

IMPLICATIONS

Increased information about transgender attitudes and service utilization can inform health promotion among service providers seeking to improve outreach to transgender clients.

Themes and Verbatims

BARRIERS TO CARE

"I ended up having a yelling match with a guy at [the clinic] once, who insisted that I couldn't be there for an ultrasound of my uterus, when I still had it – in front of all these other patients." (M)

"I've been to...the top... LGBT clinic where really it's just a LGB clinic...and I find it to be horrible...if it's a place where you assume it to be, you know, queer friendly and it – to not be – I find that to be the most devastating." (M)

"If I have a pain or something, I couldn't just go rush off to the emergency room... I just cannot afford to do that, you know....it drives me crazy, cause I have to sit here with this pain." (E)

TARGETED SERVICES v NOT BEING SINGLED OUT

"I think it's necessary to have a trans-spectrum website....in too many other ways we're embedded into other organizations and programs and services, and it's just time for us to have something that speaks to our needs." (M)

"You don't see trans – like a lot of trans advertising, and then the first thing you see is like syphilis: "oh! trans people have syphilis" – you know...?(M)

"I've never been one just to be only in the transgender community – because that's like – that would be like living in a bubble, you know, and I can't do that." (E)

VARYING HIV CONCERNS

"I mean I'm concerned about it which is why I'm so, I don't know I guess you could say adamant about protecting myself. So it's really not a concern because I always protect myself." (Y)

"You can live with it now as long as you take care of yourself. There are more health opportunities today than before." (S)

"I also heard of some girls that...they're like "I'm gonna get it at some point, anyway, so it doesn't matter when I get it." (Y)

LOW SYPHILIS KNOWLEDGE

"The head of a man's penis...it has this white stuff stuck all around it...and I'm like 'why you leaking in the bed...'" (E)

"There's so little education targeted towards – having spent most of my life as female, none of this stuff was taught to me really.... I'm always thinking HIV first, I don't even think about the other stuff." (M)

"Does it have a scent?" (S)

"All I remember is that you get a yellow discharge." (S)

"I think a lot of people feel like if they aren't physically burning or physically see like rashes or symptoms, yeah, then they're fine." (Y)

PERCEPTIONS OF A HOME TEST KIT

"That sounds amazing. I would do that." (Y)

"This is less work... it just gets sent to your home and it's done." (S)

"I would do it because I hate going into clinics, but I don't think it's very accessible for a lot of people who don't have internet access...or who don't have homes – I'm thinking about my trans community and thinking about those barriers. But it's very convenient." (M)

"Government websites, you know, highly secure websites are hacked. So that would be my concern." (M)

"I'd do it for syphilis, but it wouldn't be my first choice for HIV." (M)

M = Men's Focus Group Y = Youth Focus Group
E = Women's Focus Group in English
S = Women's Focus Group in Spanish