The Inaugural Australian Trans and Gender Diverse Sexual Health Survey

Barriers, Resilience, and the Impact of Trans-Led Research

Shoshana Rosenberg and Teddy Cook





SURVEY DEMOGRAPHICS

PARTICIPANTS

In total, 2,202 people started the survey

- 282 were ineligible
 - 175 were not trans or gender diverse
 - 107 lived outside of Australia, and
- 1,920 people started the main survey
 - 288 discontinued partway through and were excluded
 - 2 responses appeared to be duplicates
 - 17 did not provide enough information

The final sample comprised 1,613 people (84% completion rate)

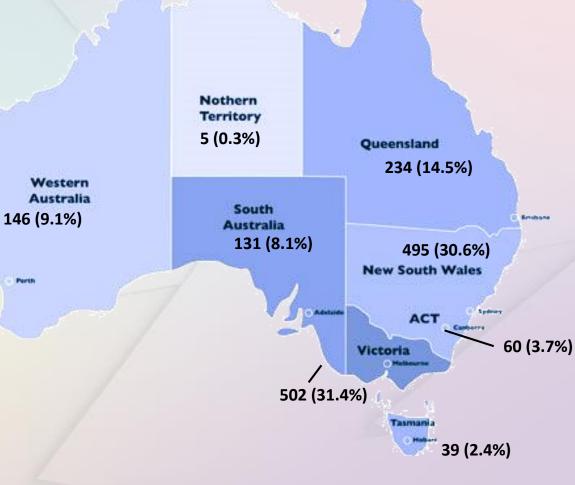
PARTICIPANTS

Among 1,613 participants...

• 4.4% Aboriginal and/or Torres Strait Islander

Perth

- 85% Australian-born
- 82.0% lived in a major city
- 25.8% high school or less
- Aged 16-80
 - Mean=24.5
 - Median=22



TRANSGENDER LIFESTYLES AND HIV/AIDS RISK

Funded by The Commonwealth Department of Human Services and Health Auspiced by The Australian Federation of AIDS Organisations

Project Co-ordinator: Roberta Perkins Research Assistant s and Fieldworkers: Aidy Griffin and Jeddah Jakobsen

> School of Sociology University of New South Wales 1994

QUESTIONNAIRE FOR PEOPLE WITH TRANSGENDER ISSUES

PLEASE NOTE: WHERE ANSWERS ARE GIVEN NUMBERS 01, 02, 03 ETC. ONLY ONE RESPONSE IS REQUIRED, SO PLEASE CIRCLE ONLY ONE ANSWER. WHERE ANSWERS ARE GIVEN NUMBERS 1., 1., 1., THESE ARE MULTIPLE CHOICE ANSWERS AND YOU CAN CIRCLE MORE THAN ONE.

PART 1: DEMOGRAPHY.

1. What is your age?

	01. <15 02. 16 - 20 03. 21 - 25 04. 26 - 30 05. 31	06.36-40 07.41-45 08.46-50 09.51-60 09.61 and over
2.	What gender were you given at birth?	
	01. Female	02. Male

3. What is your current gender?

01. Female

- and so the second

02. Male

- 4. Where dre you must a present?
 - 01. Sydney City & Inner Suburbs 02. Sydney - Eastern Suburbs 03. Sydney - Northern Suburbs 04. Sydney - Western Suburbs 05. Sydney - Southern Suburbs
 - 06. NSW Country 07. Canberra 08. Melbourne 09. Brisbane 10. Perth 11. Other.

5. What kind of accommodation are you currently living in?

- Part 1: Accommodation type:
- 01. Refuge
 07. Share accommodation

 02. Rental house/unit
 08. With friends

 03. Boarding house
 09. Homeless

 04. Hotel
 10. Housing Commission

 05. With parents
 11. Buying house/unit

 06. Other short term......
 12. Own house/unit

GENDER

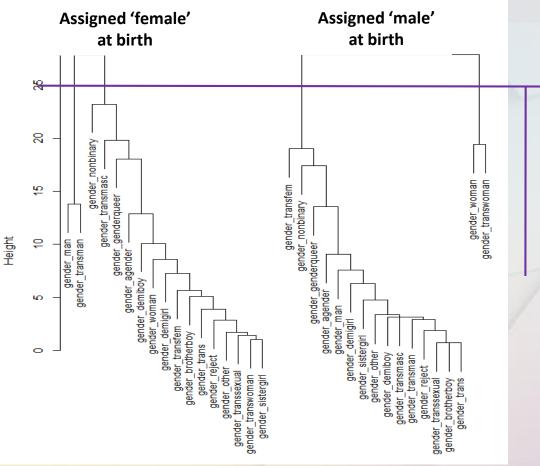
Please select as many from this list that your own as needed:

- Trans man
- Trans woman
- Man
- Woman
- Trans masculine
- Trans feminine
- Non-binary
- Genderqueer
- Agender
- Sistergirl
- Brotherboy
- Demiboy
- Demigirl
- Other

What sex were you assigned at birth (i.e. you feel apply to you and feel free to add what was specified on your original birth certificate)?

- Female
- Male
- Prefer not to say





4 Categories

- 353 (22%) trans men
- 397 (24%) trans women
- 231 (14%) non-binary, assigned male at birth
- 632 (39%) non-binary, assigned female at birth

Average Age of Realisation, Sharing and Living as Affirmed Gender

3.4% of participants had not told anyone they were trans and/or gender diverse

 (\mathbf{X})

Realising they were trans and/or gender diverse:

age **14.1** years Telling others that they were trans and/or gender diverse:



years

Living their lives as trans and/or gender diverse:



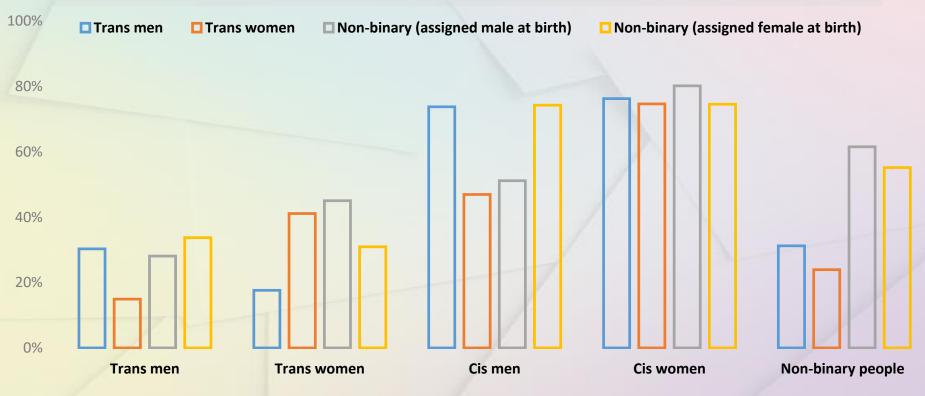
tgdsexualhealth.com.au

SEX, SEXUALITY AND ROMANTIC RELATIONSHIPS

SEXUAL ORIENTATION SELF-DESCRIPTIONS

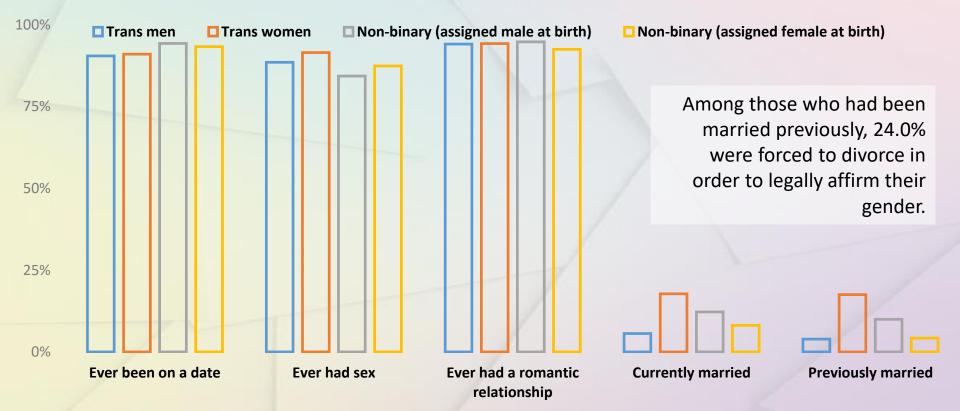


SEXUAL AND ROMANTIC RELATIONSHIPS



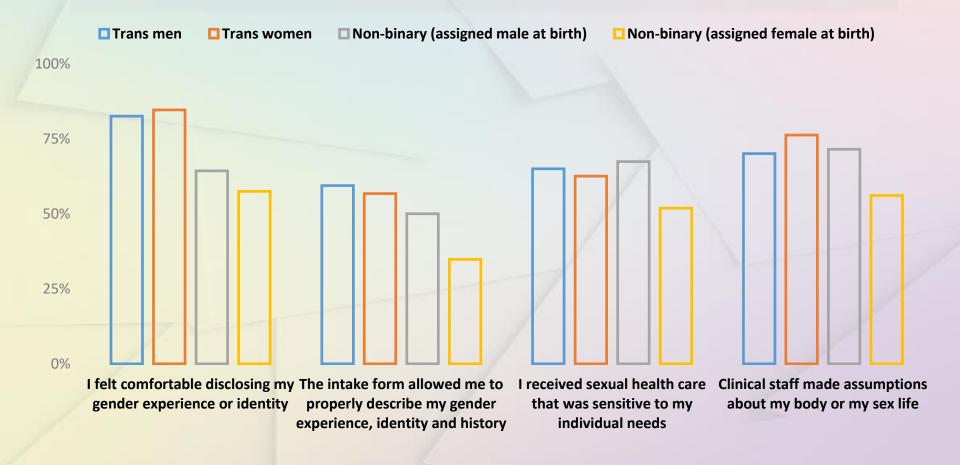
Gender of Sexual and Romantic Partner/s

SEX, DATING, AND MARRIAGE

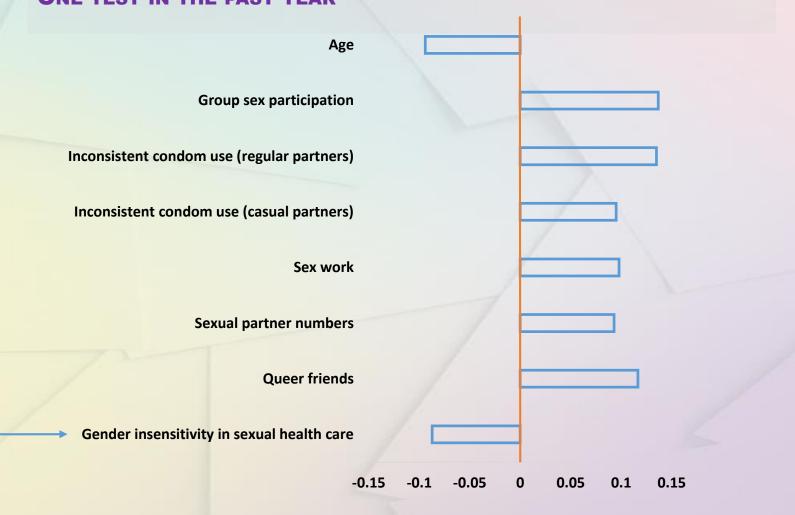


SEXUAL HEALTH CARE

EXPERIENCES OF SEXUAL HEALTH CARE



UPTAKE OF SEXUAL HEALTH CARE AMONG SEXUALLY ACTIVE PARTICIPANTS ONE TEST IN THE PAST YEAR



RISK, BLOODBORNE VIRUSES AND SEXUALLY TRANSMISSIBLE INFECTIONS

SEXUAL HEALTH

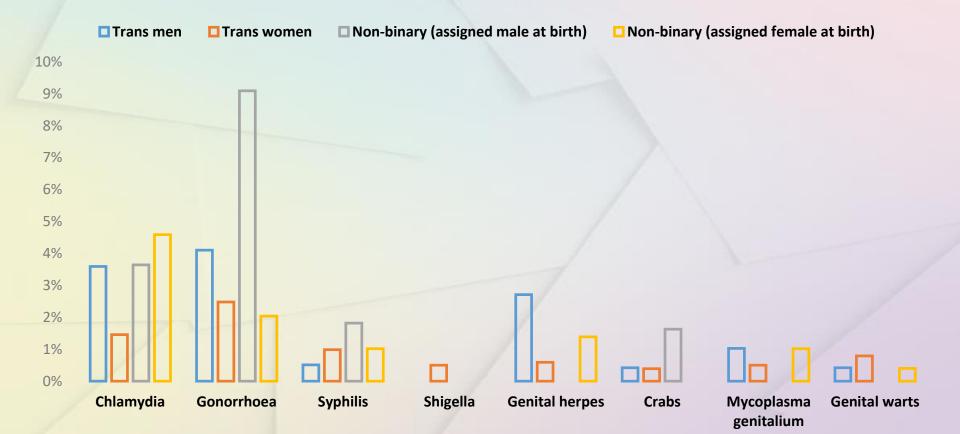
Condom use for anal, vaginal or frontal sex

- 79.7% reported inconsistent use with regular partners
- 69.4% reported inconsistent use with casual partners
- 2.2% reported using PrEP currently

STI testing among sexually-active participants

- 69.3% reported being tested for STIs in the past year
 - 46.9% of those reported two or more tests in the past year

STI DIAGNOSES IN THE PAST YEAR



HIV AND HEPATITIS C

51.5% of participants had been previously tested for HIV

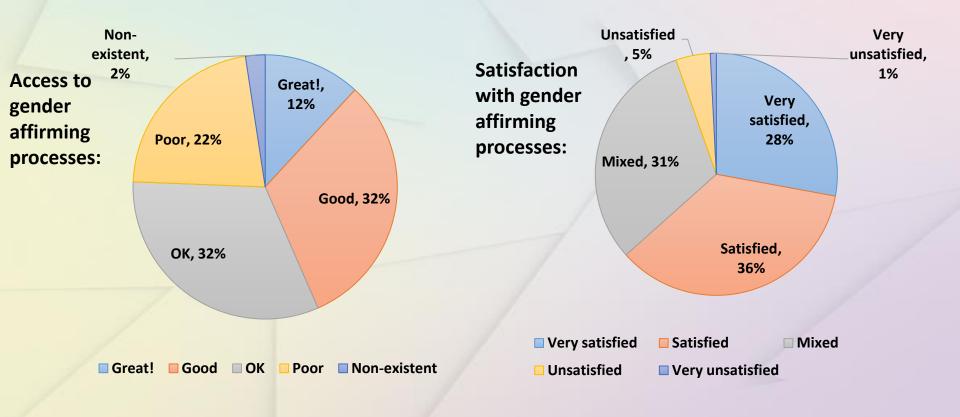
- 10 (1.2%) reported being HIV positive
 - 100% of these participants were receiving treatment
 - 10 reported their most recent viral load was undetectable
- Among HIV negative participants
 - 28.3% were tested for HIV within the previous year

46.6% of participants had been previously tested for Hep C

- 19 (2.4%) were negative following treatment
- 2 (0.2%) were positive and had not received treatment

GENDER AFFIRMING PROCESSES: ACCESS, SATISFACTION AND SEXUALITY

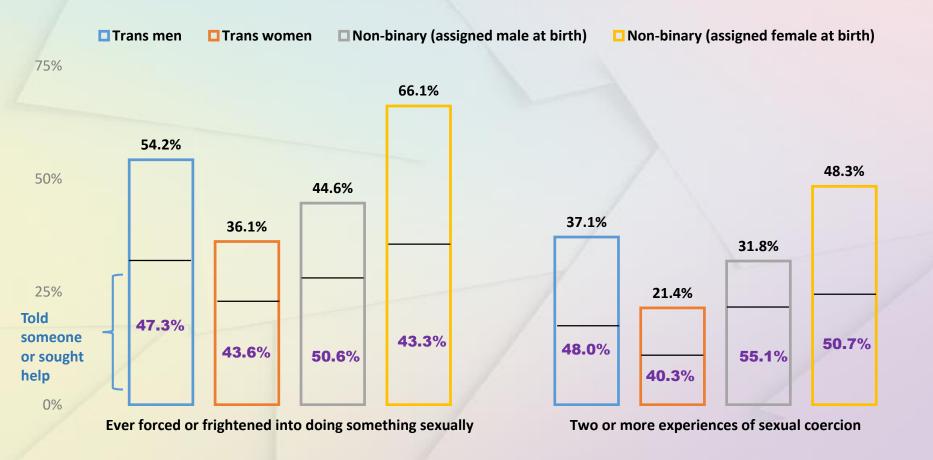
GENDER AFFIRMATION ACCESS AND SATISFACTION



SEXUAL COERCION AND VIOLENCE

SEXUAL COERCION AND VIOLENCE

182 (11.2%) PARTICIPANTS SKIPPED THESE QUESTIONS



SUMMARY OF FINDINGS

SUMMARY OF KEY FINDINGS

- The final sample of 1,613 yielded one of the highest response rates for a TGD-focused health study ever conducted
- There is an urgent need to prioritise health resources and services that could improve the sexual health and well-being of Australia's trans and gender diverse populations
- Trans and gender diverse people have unique experiences of sex and sexual health, they also engage in a wide range of sexual practices, get married and divorced, and form partnerships with people of all genders. Just like cis people do.
- Trans and gender diverse people experience sexual violence and coercion at a rate nearly four times that of the Australian general public, and only a minority report their experiences or seek help
- Trans and gender diverse people reported experiencing very high rates of marginalisation in sexual health care because of their gender

SUMMARY OF KEY FINDINGS

- Less than half of participants said they'd experienced inclusive sexual health care, this was associated with lower testing rates amongst sexually active participants
- Only half of participants reported having a sexual health screen in the last twelve months while most reported inconsistent condom use with casual partners. These factors, along with poor experiences in sexual health care, low uptake of PrEP and barriers to gender affirmation services present significantly heightened vulnerability to HIV and STIs
- Trans and gender diverse people also reported inadequate sex education and rarely received information to make decisions about fertility
- Trans and gender diverse people struggled to access the gender affirming care they sought, which was found to negatively affect mental health and sexual and romantic satisfaction
- Trans and gender diverse people who were able to access gender affirming care reported higher levels of sexual and romantic satisfaction and mental health

TRANS-LED TRANS RESEARCH

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- Most trans research, both historic and contemporary, has been entirely structured, conducted, and published by cisgender researchers
- Peer-led studies with other communities has shown that having community members involved in the research increases the research team's accountability to the community, helps build rapport, and provides deep insight into nuanced aspects of that community
- Including peers in these processes helps produce research that is actionable and effective in responding to that community's needs
- Previous research has indicated trans people feel more likely to participate if a study has trans peers

TRANS-LED TRANS RESEARCH

- The inclusion of trans researchers in trans studies is not only preferred, but an essential part of conducting valuable and actionable research
- Of our 9-person team, 5 researchers are trans and/or gender diverse
- We were involved in vetting the survey questions, analyzing the data, writing and publishing the preliminary report of our findings, and now presenting our findings here at ASHM
- Feedback from participants indicated that our community ties and public presence in the advertising of this survey encouraged participation

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REFERENCES

Braun, K. L., Browne, C. V., Ka'opua, L. S., Kim, B. J., & Mokuau, N. (2013). Research on Indigenous Elders: From Positivistic to Decolonizing Methodologies. *The Gerontologist*, *54*(1), 117-126. doi:10.1093/geront/gnt067

Breen, L. (2007). The researcher 'in the middle': Negotiating the insider/outsider dichotomy. Australian Community Psychology, 19(1), 163-174.

Coghlan, D. (2007). Insider action research doctorates: Generating actionable knowledge. *Higher Education*, 54(2), 293-306. doi:<u>http://dx.doi.org/10.1007/s10734-005-5450-0</u>

Gair, S. (2011). Feeling Their Stories. Qualitative Health Research, 22(1), 134-143. doi:10.1177/1049732311420580

Hayfield, N., & Huxley, C. (2015). Insider and Outsider Perspectives: Reflections on Researcher Identities in Research with Lesbian and Bisexual Women. *Qualitative Research in Psychology, 12*(2), 91-106. doi:10.1080/14780887.2014.918224

Hellawell, D. (2006). Inside–out: analysis of the insider–outsider concept as a heuristic device to develop reflexivity in students doing qualitative research. *Teaching in Higher Education*, 11(4), 483-494. doi:10.1080/13562510600874292

Jacobs-Huey, L. (2002). The natives are gazing and talking back: Reviewing the problematics of positionality, voice, and accountability among "native" anthropologists. *American Anthropologist*, 104(3), 791-804. doi:<u>http://dx.doi.org/10.1525/aa.2002.104.3.791</u>

Kanuha, V. K. (2000). "Being" Native versus "Going Native": Conducting Social Work Research as an Insider. *Social Work, 45*(5), 439-447. doi:10.1093/sw/45.5.439

Reisner, S. L., Deutsch, M. B., Bhasin, S., et al. (2016) Advancing methods for US transgender health research. *Current Opinion in Endocrinology & Diabetes and Obesity* 23: 198-207.

Rosenberg, S., & Tilley, P. J. M. (2018). Trans women's experiences of participating in insider research: Recommendations for future research approaches. Paper presented at the International Union against Sexually Transmitted Infections Asia Pacific Sexual Health Congress 2018, Auckland, New Zealand

Taylor, J. (2011). The intimate insider: Negotiating the ethics of friendship when doing insider research. *Qualitative Research*, 11(1), 3-22. doi:10.1177/1468794110384447

Voloder, L. (2013). Insider research on migration and mobility : international perspectives on researcher positioning / Lejla Voloder and Liudmila Kirpitchenko: Farnham Surrey, England : Ashgate.