

## **Implications of living with HIV/AIDS as a transitioning transsexual woman.**

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ISSUE: Transsexuals requiring medical care are often treated with a lack of professionalism before, during and after transition of their biological sex. This jeopardizes their human right to optimum health, dignity and quality of life. PROJECTS: Information has been gained through informal interviews with HIV positive transsexuals and one nurse. A condition of the interview, and the collection of information, has been a promise of privacy and confidentiality. Therefore, this research may only be considered experiential and anecdotal. The participants in the interviews ranged in age from nineteen to forty-six. I dealt with male to female transsexuals only because they were the only respondents to my request for information. RESULTS: The TS (transsexual) women who were willing to participate gave candid accounts of their experiences with the medical establishment and in-home health service providers across Canada. Most of the women spoke of discomfort, at a basic social level, caused by doctors, lab technicians, nurses, ambulance attendants and home care workers. Incidents ranged from benign to hostile. These include situations of doctors insisting on using the transitioning women's legal male names during office visits instead of the new, chosen name reflecting her gender identity; being referred to as 'it' in front of hospital staff and emergency room patients; refusal by home care workers to provide service in the home of a TS woman. At a medical level of care, most doctors and specialists in both transsexual care and HIV care do not fully know the implications of mixing HIV treatments with the drugs TS women require to meet their transitioning objectives. The population of patients who are both transsexual and HIV positive is insufficient and renders a study of this nature improbable. CONCLUSION: There are few centers of medical care that are knowledgeable regarding transsexuals. Fears of stigmatization, imagined and real, prevent TS women from receiving full and satisfactory medical attention. In the global community this would be a disgrace. In the HIV/AIDS community it is dangerous and potentially life threatening.  
MEETING ABSTRACTS \*Attitude of Health Personnel Drug Interactions \*Gender Identity Health Personnel/\*PSYCHOLOGY Human HIV Infections/NURSING/\*PSYCHOLOGY/THERAPY Male Patient Acceptance of Health Care/PSYCHOLOGY \*Prejudice Refusal to Treat Transsexualism/\*PSYCHOLOGY

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