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Risk factors for HIV transmission among transgender women in Ho Chi Minh City

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Introduction & Aim: Transgender Women (TW) are highly vulnerable to HIV infection and face many social exclusions including access to health services. The marginalization of TW contributes to negative health outcomes including suicide attempts, substance use, sex work, or violence victimization. In Vietnam, very limited data on TW is available. The Vietnam government and international organization often classify TW as a small subgroup within the larger population of MSM (What does this stand for?). One small study of this population in 2015 has shown a 49 times higher risk for HIV than the general population. There are no, or limited, services provided which are tailored for this population. The aim of this research was to identify the risk factors and proportion of HIV infection among transgender women in Ho Chi Minh City, Vietnam.

Method: From Feb to May 2018 we conducted research among 458 transgender women in Ho Chi Minh City, Vietnam by using a combination of quantitative (cross-sectional) and quantitative research design and a Respondent Driven Sampling (RDS) technique.

Finding: The results showed that the average age to start to realize gender identity: 17.5, taking roughly 2 years to express that identity; 39% underwent surgery; 41% had frequent male sex partners and 55% did not use condoms often in the last 30 days before the survey. Nearly 25% received money for having sex with non-frequent male sex partners and 53% of those did not use condoms often. The risks relating to frequent condom-free sex: (1) Alcohol use: \geq 4 drinks; (2) Stimulant use 2 hours before sex. HIV prevalence found in the survey: 16.5% (77/456); approx. 40% transgender women used drugs in the last 30 days; risks factors relating to HIV transmission: (1) Methamphetamine/popper use 2 hours before sex and (2) Experience of discrimination.

Conclusion: In order to address HIV in these populations, tailored interventions are urgently needed to make HIV and sexually transmitted infection screening more accessible. Secondly, there is an urgent need for HIV intervention programs for TG women focusing on their Methamphetamine/popper/alcohol use and to increase condom use.

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