

TRANSGENDER WOMEN & TRANSFEMININE VETERANS

Get the Facts...

LGBTQ+ Health Program

Transgender women and transfeminine Veterans face increased health risks and unique challenges in accessing quality health care. The Veterans Health Administration (VHA) is working to be a national leader in health care for LGBTQ+ Veterans and assure that high-quality care is provided in a person-centered, respectful environment. It is important to know both specific risk and protective factors that impact health care based on gender identity, sexual orientation, race, age, and other individual factors. Preventative care and health treatment are best when Veterans and their providers have good relationships. The following is a list of the top things transgender women and transfeminine Veterans should discuss during their VHA visits.

TALK TO YOUR HEALTH CARE PROVIDER

For the best person-centered and personalized care, your VHA health care providers should know your gender identity and sexual orientation along with other personal health information. Discussing your identity should lead your provider to ask specific questions about you and offer needed health screening. Providers may ask you about what body parts you have and your sexual health history. Tell your provider about the medicines you have taken and the surgeries you may have had. If your providers know your health and treatment history, they will be better able to give you the best health care today. Coming out to your providers is an important step. If your provider does not seem comfortable with you as a transgender woman or transfeminine Veteran, ask for another VHA provider. Comfort with your providers is essential to your health and wellness. Ask them to record your gender identity and sexual orientation in your medical record.

HORMONE TREATMENT

Talk with your provider about gender-affirming hormone treatment. If you are starting hormones for the first time, ask about the things you need to watch out for while taking these medicines, such as blood clots, swelling, high blood sugar, and high blood pressure. If you are thinking about having a baby in the future, ask about storing eggs or sperm before you start hormone treatment. Be sure to take the hormones only as prescribed by your provider.

FITNESS (DIET AND EXERCISE)

Problems with body image can be a concern among transgender women and transfeminine people. Obesity is associated with higher rates of heart disease, cancers, and premature death and can lead to a number of health problems, including diabetes, high blood pressure, joint problems, and heart disease. If you are planning to have surgery, your surgeon will want to be sure you are in good physical condition to do well during and after surgery. Talk to your VHA provider about the MOVE! Weight Management Program.

MENTAL HEALTH

Depression, anxiety, and posttraumatic stress disorder (PTSD) affect transgender women and transfeminine people at a higher rate than non-transgender women. Veterans are also at higher risk of some mental health concerns than non-Veterans. Transgender women and transfeminine people may be more at risk for chronic stress from discrimination. Living with this stress can worsen depression and anxiety and may also contribute to thoughts of suicide. These problems may be more severe for transgender women and transfeminine people who remain "in the closet" or who do not have adequate social supports. Mental health services for the prevention, early detection, and treatment of these conditions should be available at your local VHA facility. Veterans not enrolled in VHA care may be eligible for free suicide prevention services.

MILITARY SEXUAL TRAUMA (MST)

MST is the term used by VHA to refer to experiences of sexual assault or repeated, threatening sexual harassment that a Veteran experienced during military service. Transgender women and transfeminine Veterans have higher rates of MST compared to non-transgender Veterans. Every VHA facility has providers knowledgeable about treatment for MST and VHA offers effective therapies. Veterans not enrolled in VHA care may be eligible for free MST-related services.

INTIMATE PARTNER VIOLENCE (IPV)

IPV refers to violence and aggression between intimate partners which can include physical, sexual, or psychological abuse or stalking. IPV can be a single event or last for many years. Transgender women and transfeminine people have higher rates of IPV compared to non-transgender women. The impact of IPV can reach far beyond the actual or threatened violence or aggression. VHA has resources available for Veterans who have experienced IPV, including violence from partners of any gender. VHA offers effective therapies for the mental health impacts that commonly occur with IPV, such as PTSD, depression, anxiety, and alcohol or drug use problems.

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SEXUALLY TRANSMITTED INFECTIONS (STIs)

STIs occur in sexually active transgender women and transfeminine people at a high rate. Some STIs can be cured (syphilis, gonorrhea, chlamydia, pubic lice), and some can be effectively treated but not cured (HIV, hepatitis, human papilloma virus, herpes). Barrier protection (e.g., condoms, dental dams) reduces the risk of STIs. Risk of exposure increases with the number of sexual partners. Screening for STIs is important because you can have an STI without symptoms and transmit it to others.

- **HIV/AIDS**

People who engage in high risk activities such as unprotected sex or injection drug use are at a higher risk of HIV exposure. Condoms and other barriers can reduce the risk of getting or transmitting HIV. Pre-Exposure Prophylaxis (PrEP) medication, when taken as prescribed, is highly effective at reducing the risk of HIV infection. If you are not HIV positive, discuss with your VHA provider about whether PrEP is best for you. If you are HIV positive or living with AIDS, ask for a consult to see an HIV provider.

- **HEPATITIS IMMUNIZATION AND SCREENING**

If you have sex (with partners of any gender) you are at risk of exposure to the viruses that cause the serious liver conditions known as hepatitis. These infections can lead to dangerous long-term issues such as liver failure and liver cancer. Immunizations are available to prevent two of the three viruses (hepatitis A and B). Barrier protection use and not sharing needles are effective at reducing the risk of viral hepatitis and is currently the only means of prevention for the hepatitis C virus. If you have hepatitis C, talk to your provider about treatments that can cure this infection.

- **HUMAN PAPILLOMA VIRUS (HPV)**

HPV is the most common STI in the United States. Barrier protection use greatly reduces the risk of HPV. HPV infections causes anal and genital warts and may play a role in the increased rates of anal cancers in people who have anal sex. HPV infection can cause cervical, vaginal, vulvar, anal, and throat cancers. Some health providers now recommend routine screening with anal Pap Smears, like cervical Pap Smears, to detect early cancers. Talk to your provider about whether an anal Pap Smear is recommended.

KIDNEY DISEASE

Transgender women and transfeminine people are at higher risk of having kidney disease. The kidneys filter waste out of your blood to make urine. Diseased kidneys filter blood poorly and can cause waste build up inside the body. Diabetes and high blood pressure are the leading causes of kidney disease. Use of feminizing medications may worsen kidney disease.

TOBACCO USE

Transgender women and transfeminine people use tobacco at higher rates than non-transgender women. Tobacco-related health problems include lung disease and cancer, heart disease, high blood pressure, and many other serious problems. VHA has tobacco cessation programs to help you quit smoking. If you are a smoker talk with your VHA provider about your tobacco use and available options to help you quit.

SUBSTANCE AND ALCOHOL USE

Transgender women and transfeminine people need to be aware of the risks of heavy drinking and substance use, which are higher than for non-transgender women. Problems with drinking or drug use may occur in response to stress and discrimination. They can make PTSD, depression, or other medical conditions worse. Fortunately, there are proven methods to help Veterans who have problems with alcohol or drug use, including mutual help groups and more intensive treatments. VHA has many resources to help Veterans and their loved ones answer questions, find support, and get treatment.

SLEEP AND INSOMNIA

Transgender women and transfeminine people report lower sleep quality and shorter length of sleep on average than non-transgender women. Poor sleep and insomnia can be caused by chronic stress from discrimination, and chronic stress may make sleep problems worse. Sleep is essential to well-being and poor sleep can be associated with other physical and mental health difficulties, access to a sleep specialist, and self-guided support specialist and has self-guided supports.



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CANCER

Transgender women and transfeminine people may be at increased risk for some cancers. Screenings for cancer may occur less often if you do not talk openly your provider. It is very rare to develop cancer due to hormone treatment, but your provider will evaluate you for this possibility during your check-ups, if needed. Your provider will also check for possible cancer of your prostate (present even after surgery), breast tissue, and cervix (if you have one). Cancer prevention is based on what body parts a person has or had in the past. Delaying these screenings can result in worse outcomes when cancer is detected at a later stage. Regular screenings are part of routine VHA care and can lead to early diagnosis when diseases are most curable. Routine cancer screening is part of quality VHA care.

HEART HEALTH

Transgender women and transfeminine people are at increased risk of high blood pressure and heart disease. They are more likely to have experienced a heart attack or congestive heart failure than non-transgender people. High blood pressure is a major risk factor for cardiovascular disease and can be affected by stress, including stress from discrimination experienced by transgender people. High blood pressure can be managed with healthy lifestyle changes and medications. Getting your blood pressure checked regularly is important because high blood pressure often has no symptoms.

PEOPLE OF COLOR

Transgender women and transfeminine people of color face additional health risks. Routine health care visits and screenings can lead to early diagnosis when diseases are most treatable. When health issues are detected at a later stage, health problems can be more serious and harder to treat. Research has shown that Veterans of color may receive less preventative care than white Veterans. VA is working to ensure all Veterans, regardless of color or ethnicity are provided access to the care and treatments they need. Every VHA facility has a Patient Advocate who can address your concerns with care.

AGEING TRANSGENDER WOMEN AND TRANSFEMININE VETERANS

Older transgender people are likely to have experienced stigma, discrimination, and even violence related to their identity. Older transgender women and transfeminine people who need assistance as they age are less likely to receive care from adult children. They may experience discrimination in nursing homes, community living centers, and senior housing. Out of concern about discrimination, LGBTQ+ Veterans may be socially isolated, delay getting personal care and support, or go “back in the closet” to hide their identity as they need more ageing-related care. VHA has non-discrimination policies in place to protect older LGBTQ+ Veterans and their partners in VA facilities.

YOUR HEALTH MATTERS

TRANSGENDER & TRANSFEMININE IDENTITY AND MEDICAL RECORDS

Your gender identity and sexual orientation should be included in your confidential and protected electronic health record. Your personal health information—including gender identity, sexual orientation, and sexual behavior—is only available to health care personnel who are authorized to access your records. All medically necessary diagnoses will be included in your medical record. VA policy prohibits discrimination based on gender identity, on sexual orientation, and prohibits attempts to change someone’s sexual orientation.

WHAT IF MY PROVIDER USES THE WRONG TERMS OR PRONOUNS WHEN REFERRING TO ME OR MY SPOUSE/PARTNER?

Your VHA provider wants to make you feel comfortable and using terms that you want is an important first step. Let your providers know which terms you want to be used to describe yourself and your partner(s). Ask providers to make sure your identity terms, pronouns, and chosen name are in your medical record. If they ever make a mistake, please let them know. You can update some information such as your chosen name in your profile by logging in at [VA.gov](https://www.va.gov). Go to **Sign In**, click on “**go to your profile**” and then “**personal information**” to “**update your legal name**” and “**gender identity**.”

DOES VHA HAVE RESOURCES TO HELP ME FIND AN LGBTQ+ AFFIRMING PROVIDER?

Yes! Every VHA facility has LGBTQ+ Veteran Care Coordinators (VCCs) to assure you have access to appropriate treatment. They can assist you with finding providers, answering questions, and reporting problems if you encounter them. Find facility LGBTQ+ services and local LGBTQ+ VCCs here:

www.patientcare.va.gov/LGBT.

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LGBTQ+ HEALTH PROGRAM at VHA

VHA's LGBTQ+ Health Program, under the Office of Patient Care Services, works to establish and maintain health care policy and best clinical practices for LGBTQ+ Veterans with the hope that you will choose VA for your care. Our goal is help you receive gender-affirming care and services so you can achieve your best health and well-being. For more information visit our website at www.patientcare.va.gov/LGBT

To find the VHA Medical Center nearest you, call 1-800-698-2411 or visit www.va.gov/find-locations

ADDITIONAL RESOURCES

Mental Health: General
www.mentalhealth.va.gov

Mental Health: PTSD
www.ptsd.va.gov

Mental Health: Military Sexual Trauma
www.mentalhealth.va.gov/msthome

Intimate Partner Violence Program
www.socialwork.va.gov/IPV

Substance Use
www.mentalhealth.va.gov/substance-use

Tobacco & Health
www.mentalhealth.va.gov/quit-tobacco

HIV & AIDS
www.hiv.va.gov

Viral Hepatitis
www.hepatitis.va.gov

MOVE! Weight Management
www.move.va.gov

Sleep & Insomnia
www.veterantraining.va.gov/sleep

Health Equity
www.va.gov/healthequity

Geriatrics
www.va.gov/geriatrics

Women's Health
www.womenshealth.va.gov

Wellness
www.va.gov/wholehealth

VA Apps for Mobile Devices:
mobile.va.gov/appstore/veterans



For more information and to get the LGBTQ+ Health Program Newsletter: www.patientcare.va.gov/LGBT/index.asp



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WWW.PATIENTCARE.VA.GOV/LGBT

 FACEBOOK.COM/VETERANSHEALTH

 TWITTER.COM/VETERANSHEALTH



If you are in crisis, please call 911 or go to the nearest Emergency Room. Contact the **Veterans Crisis Line** by phone 988 then press 1; by text 838255; by computer chat www.veteranscrisisline.net

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