

Meeting transgender-specific needs: Service acceptance and identified needs among Thai transgender women engaging in substance use or chemsex (iT-REX study)

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Disclosure

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- Invited speaker for Pfizer

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Background

- Substance use and chemsex among transgender women are increasingly recognized, yet harm reduction services remain scarce in Thailand.
- Building on a pre-implementation study, which identified barriers and facilitators, we implemented a multi-component model integrating substance literacy, sexual health, mental health, and socio-legal support.

- Drug use literacy & skills
- Community-based long-term opioid agonist therapy
- Overdose management by family/community
- Voluntary treatment/support to voluntarily reduce/stop substance use
- Needle and syringes
- TB screening, diagnosis and treatment

- Testing for HIV, STIs, HBV, and HCV
- HIV prevention with PrEP/PEP
- HBV prevention with HBV vaccination
- Treatment for HIV, STIs, HBV, and HCV
- Condoms and lubricants
- Sexual and reproductive health for cisgender-women and gender affirmation for transgender people



- Screening for depression, anxiety, and suicide thoughts
- Brief advice, brief intervention, and safety plan.
- Pharmacological/special therapy for mental health conditions

- Screening for stigma (including internalized stigma), discrimination, and rights violations
- Counseling and skill building on managing stigma (including internalized stigma)
- Support and navigation through the justice system process
- Social needs assessment
- Rights literacy
- Group support/well-being support
- Home visit
- Family service

Hiransuthikul et al. Sex Health. 2025

Objective



- To explore the **acceptability** of, and identify unmet **needs** within, harm reduction service components among transgender and non-binary adults in Thailand.



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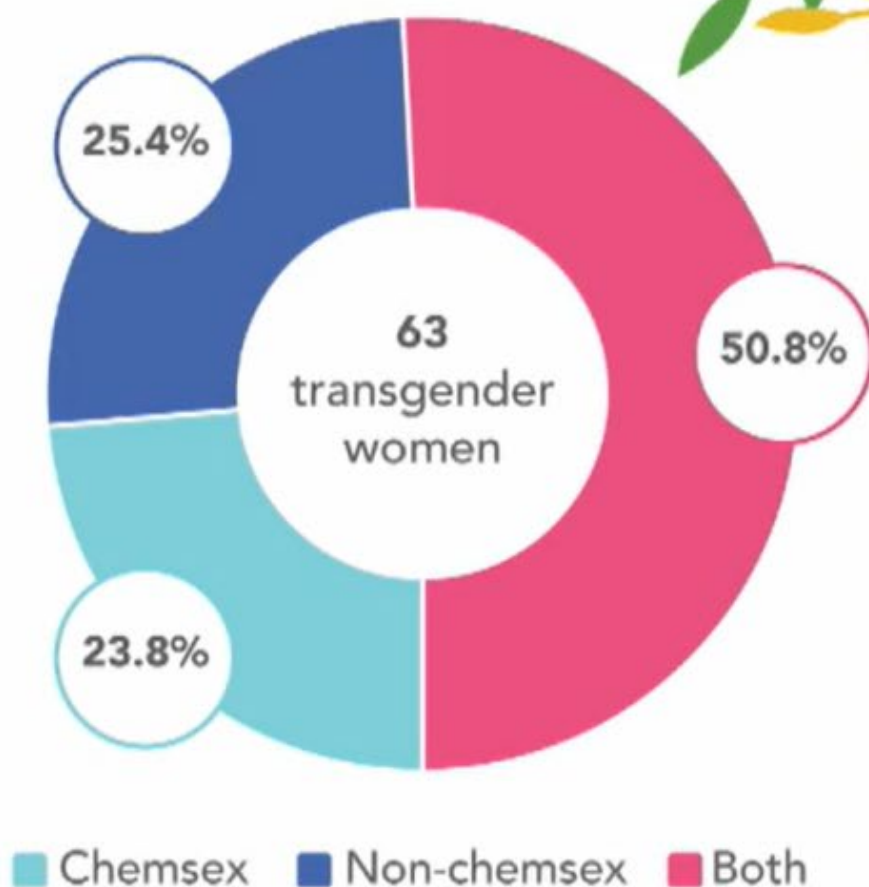
Methods

- The iT-REX study is an ongoing cohort started in September 2025.
- Enrolled transgender and non-binary adults (≥ 18 years) who use substances or engage in chemsex and are not living with HIV.
- Participants undergo assessments across four domains with tailored interventions.
- This analysis includes baseline data only.



Results

- N = 63 (all transgender women)
 - Median age: 31.1 years
 - Sex workers: 34 (54.0%)
 - Gender-affirming care: 42 (66.7%) had undergone surgery; 42 (66.7%) currently used hormones
- 50.8% reported use in both chemsex and non-chemsex contexts.
- Polysubstance use: 26 (41.3%), of whom 6 (23.1%) used them simultaneously
- Injection use: 6 (9.5%)
- All participants agreed to substance use, sexual health, mental health, and socio-legal/rights assessments.

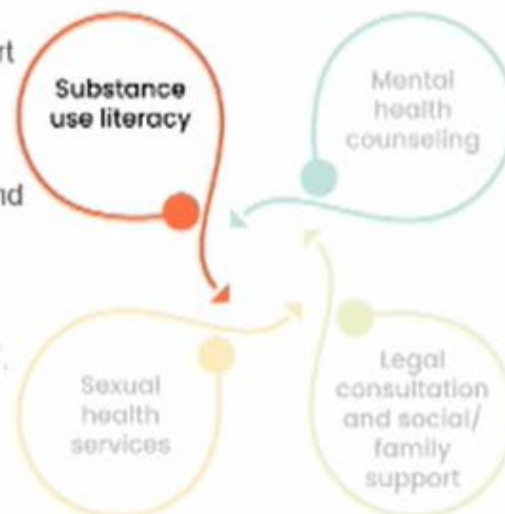


Results: Substance Use



- Drug use literacy & skills
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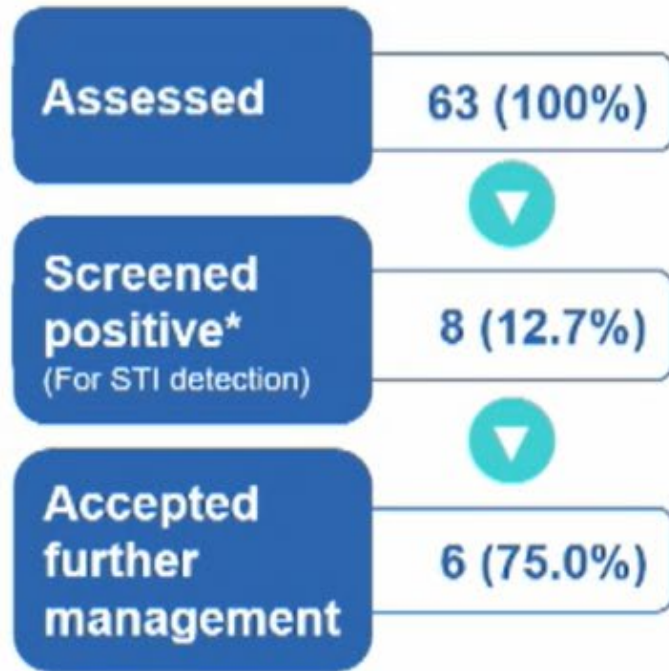


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- Counseling and skill building on managing stigma (including internalized stigma)
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- Rights literacy
- Group support/well-being support
- Home visit
- Family service



Results: Sexual Health



- Drug use literacy & skills
- Community-based long-term opioid agonist therapy
- Overdose management by family/community
- Voluntary treatment/support to voluntarily reduce/stop substance use
- Needle and syringes
- TB screening, diagnosis and treatment

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Results: Mental Health



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Results: Socio-legal/Rights



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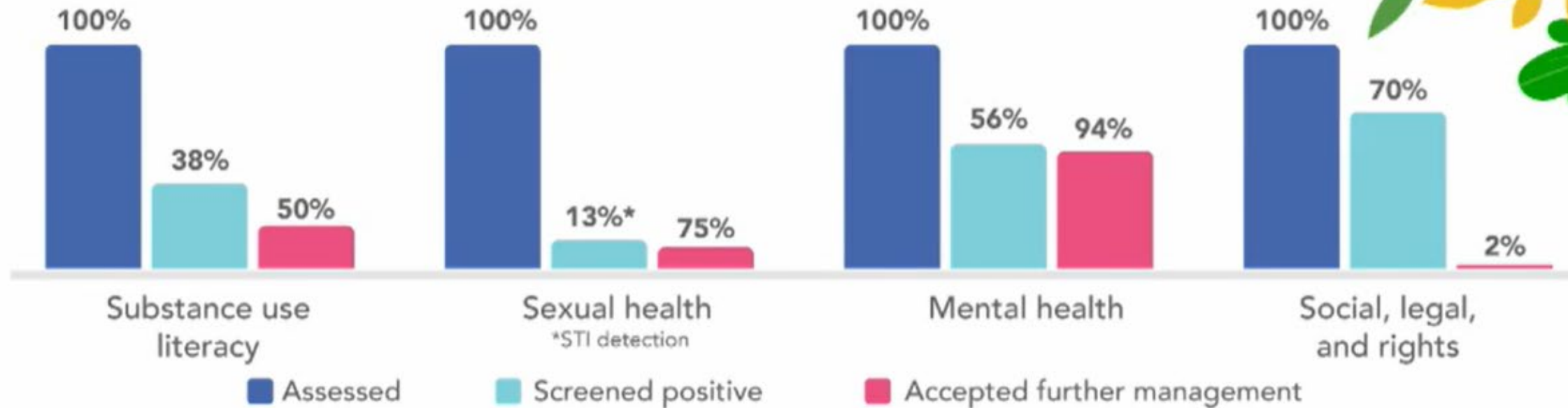


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Results



- Among 28 anti-HBs negative participants, 15/28 (53.6%) accepted vaccination.
- Most agreed to PrEP (44; 69.8%), including four who had never used it.
- Among 42 current hormone users, 23 (54.8%) requested hormone-level testing.

Conclusions

- Transgender women using substances (including chemsex) showed high acceptance of gender-affirming, multi-component harm reduction assessments.
- Needs emerged across four domains. Care uptake was highest for mental health, STI treatment, and PrEP, while uptake of HBV vaccination, substance literacy, and rights literacy requires further improvement.



Thank you

