



CHANGING THE GAME:

Visibility of Trans Men in the South

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Greetings,

I founded Game Changing Men out of the need to have more supportive and inclusive spaces for trans men and transmasculine folx. As we provided spaces to have difficult conversations and bond, we became aware of a common denominator — the lack of representation for trans men and transmasculine folx in data, research and visibility. With limited resources set aside for a demographic that is invisible to most people, I wanted to hear a different narrative than just trans women.

The stories and narratives of trans men and transmasculine folx have been erased from almost any tangible documentation. As an organization that prides itself on bringing representation and visibility for trans men and transmasculine folx we knew that we must capture the true needs within the community. As a trans man I know first hand the lack of access to care and lack of needed resources. Over my years of advocacy, I learned that stigmas attached to sexual health, reproductive health and mass incarceration have created barriers for trans men and transmasculine folx to even access resources or support spaces. Everyone affected must be included in Ending the HIV Epidemic — and that includes trans men and transmasculine folx.

We wanted this survey to highlight some of the barriers but also to show the need of trans men and transmasculine folx to have access to prevention, contraceptive methods and other resources needed to add to the quality of life. This survey brings great visibility to the existence of trans men and transmasculine folx and tells a small part of our story. This survey is knocking down the doors of stigma, societal barriers and any exclusion that misrepresents trans men and transmasculine folx. Trans men and transmasculine folx exist, we come in all different shapes, sizes, masculinity and femininity. We will not live in a box that was created for us! This is just the beginning to highlight real stories, barriers and issues trans men and transmasculine folx face daily. We will continue to be the voice when needed and a source in the community to seek services and resources.

Quinton Reynolds

Executive Director, Game Changing Men



Amid unprecedented legislative attacks on the transgender community in states across the country, it is more important than ever to create spaces like this survey to shine a light how we must direct our resources and support.

Through this work, the Southern HIV Impact Fund and Game Changing Men are starting an important conversation about the public health needs of Black transmasculine communities.

And it's long overdue.

Our path to ending the HIV epidemic must include support for grassroots activism across the South and the work of community-based organizations like Game Changing Men to make change within transgender communities.

This survey provides a much-needed opportunity for trans men and transmasculine people to be heard and seen without judgment. Contained within these pages is an important call to action for additional resources and attention given to the needs of transmasculine communities throughout the South. We cannot end the HIV epidemic without equitable investments in communities most impacted — and that includes Black trans men.

Our hope is that this survey is the foundation upon which we can build deeper research and strategies to end the HIV epidemic that are reflective of the lives and experiences of Black trans men throughout the South.

By using this survey as a guide, our goal is for more organizations to create pathways to leadership that reflect transmasculine communities and invest more financial support to organizations that serve trans men.

AIDS United will continue to support and fund the critical work of Black transmasculine communities in the South. Our work to end the HIV epidemic depends on it.

Athena Cross

*Vice President & Chief Programs Officer
AIDS United*



Greetings:

The Southern HIV Impact Fund supports movement leaders and builders in the Southern United States that are working at the intersection of social justice and HIV. As of November 2022, the Southern HIV Impact Fund has done this by providing 221 grants totaling more than \$13.4 million since 2017. I am excited to count Game Changing Men in that number. As a grantee partner, we thank Game Changing Men for the vision of this survey.

Commissioning this report as a deliverable for Game Changing Men was an act of activism to ensure that the voices of trans men and transmasculine folx in the United States South could be heard and become visible in our strategies to end new HIV diagnoses, and as a tool to address the social injustices that trans men and transmasculine folx face.

Congratulations to Game Changing Men, Executive Director Quinton Reynolds, its leadership, staff and volunteers on this momentous report and moment. Finally, thank you to the 2022 collaborative funders of the Southern HIV Impact Fund: The Gilead COMPASS Initiative®, ViiV Healthcare, Levi Strauss Foundation, Janssen and Janssen Pharmaceutical Company and Wellspring Philanthropic Foundation.

Sincerely,

Marvell L. Terry II

*Senior Program Manager, Southern HIV Impact Fund
AIDS United*



The Southern HIV Impact Fund

The South is the epicenter of the HIV epidemic in the United States and in response, the Southern HIV Impact Fund is changing that. To address the disproportionate distribution of funding to the Southern United States, Funders Concerned About HIV and AIDS convened funders to address this

impact. This gathering led to the establishment of the Southern HIV Impact Fund in 2017, which supports movement builders and leaders through grant-making, capacity building, leadership development, and technical assistance in the Southern United States.

The Southern HIV Impact Fund provided Game Changing Men a grant in 2022 to grow and improve its infrastructure under its *iFORWARD: Equipping Organizations in the South through Technology to End the HIV Epidemic initiative*. The organization allocated a portion of this grant to developing a survey that was administered to capture the state of transmasculine people's health in the South.

To learn more about the Southern HIV Impact Fund, visit www.southernfund.org.



Game Changing Men Background

Founded in 2021, Game Changing Men is a Georgia-based organization that advances health-seeking behaviors among African American trans men, people assigned female at birth and gender diverse individuals. Its purpose is to highlight the unique and nuanced needs of this population and offer

resources that address barriers to care. The organization creates healing spaces and communities with the aim of breaking cycles of harm and encouraging collective care.

To learn more about Game Changing Men, visit www.gamechangingmen.com.

Methods

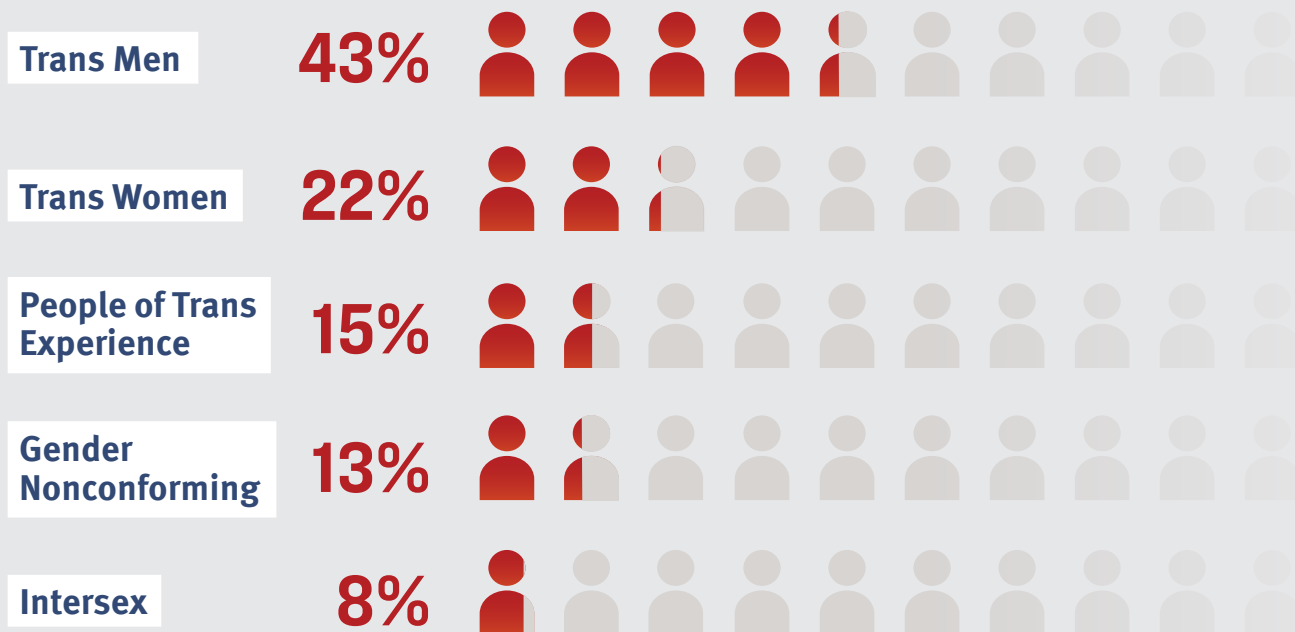
The Game Changing Survey was developed to understand the public health needs of African American transmasculine communities in the South. The online survey was available via social media platforms as well as the following events: Trans Hope Pagent, Sexual Health Expo, Sexual Health Ball, Mental Health Expo, Mental Health Ball, National HIV Testing Day Block Party and the Rebirth Ball. The Game Changing Men team also attended the Little Rock, Arkansas, Black Pride Sexual Health Expo and drag show. The survey had a total of 1,200 participant responses between June 2022 and September 2022 (334 at the aforementioned events and 866 via online platforms).



Statement from the Evaluator Vienna Mbagaya, M.P.H.

It was an incredible opportunity being entrusted with the Game Changing Men survey data, one that illuminated profound insight on why the organization and its advancement of African American trans men visibility in the South are crucial. The project demanded data integrity standards that aligned with our continued reverence for this community and its underserved health needs. Instead of relying on the survey data alone, we also leaned on the insight of Game Changing Men's founder Quinton Reynolds, his lived experience and that of other African American trans men. We hope this report edifies audiences on the urgency of advocacy for all trans folx in the areas of reproductive rights, sexual health and justice reform.

Gender Identity



43% (515) of all respondents identified as trans men, 22% (264) as trans women, 15% (176) as people of trans experience, 13% (151) as gender-nonconforming, and 8% (94) identified as intersex.

Gender Assigned at Birth

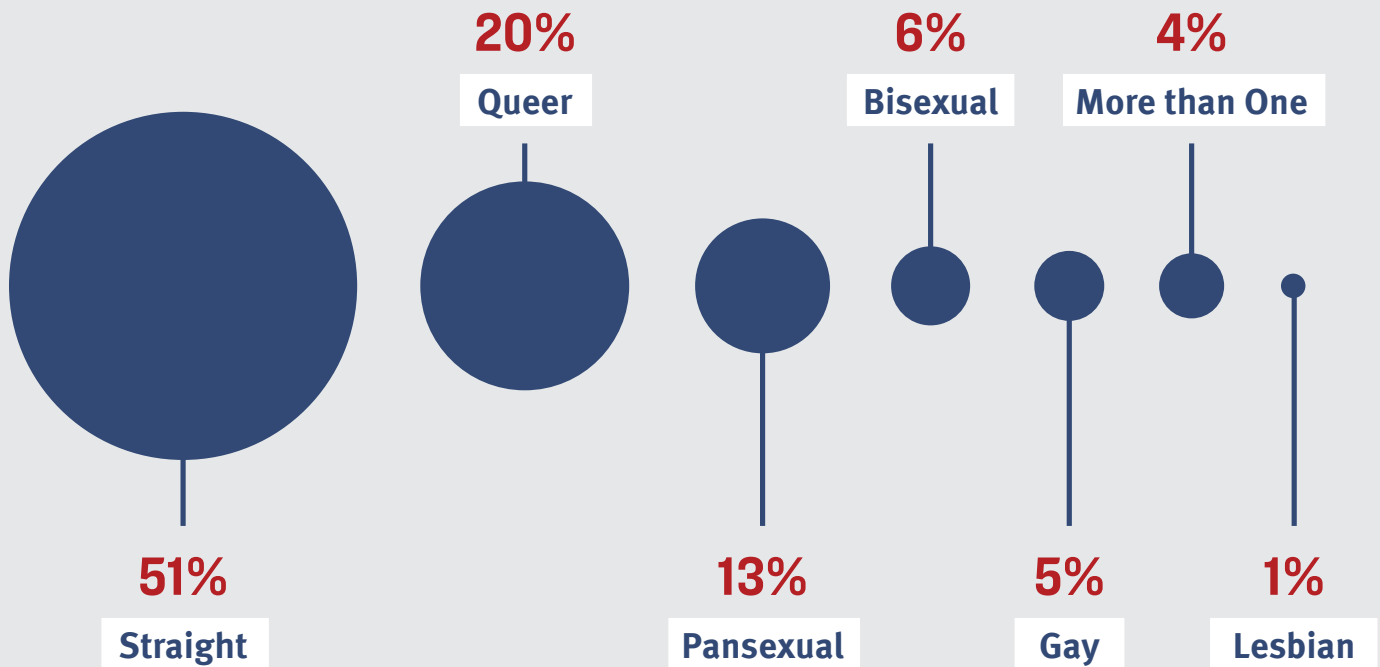
57% (687) of survey respondents were assigned female at birth (AFAB) and 43% (513) were male at birth (AMAB). In comparison, among 515 trans men who responded, 99% (511) were AFAB, while 1% (4) were assigned AMAB.



**I'm outside of the box,
we create our own boxes."**

-Anonymous

Sexual Orientation



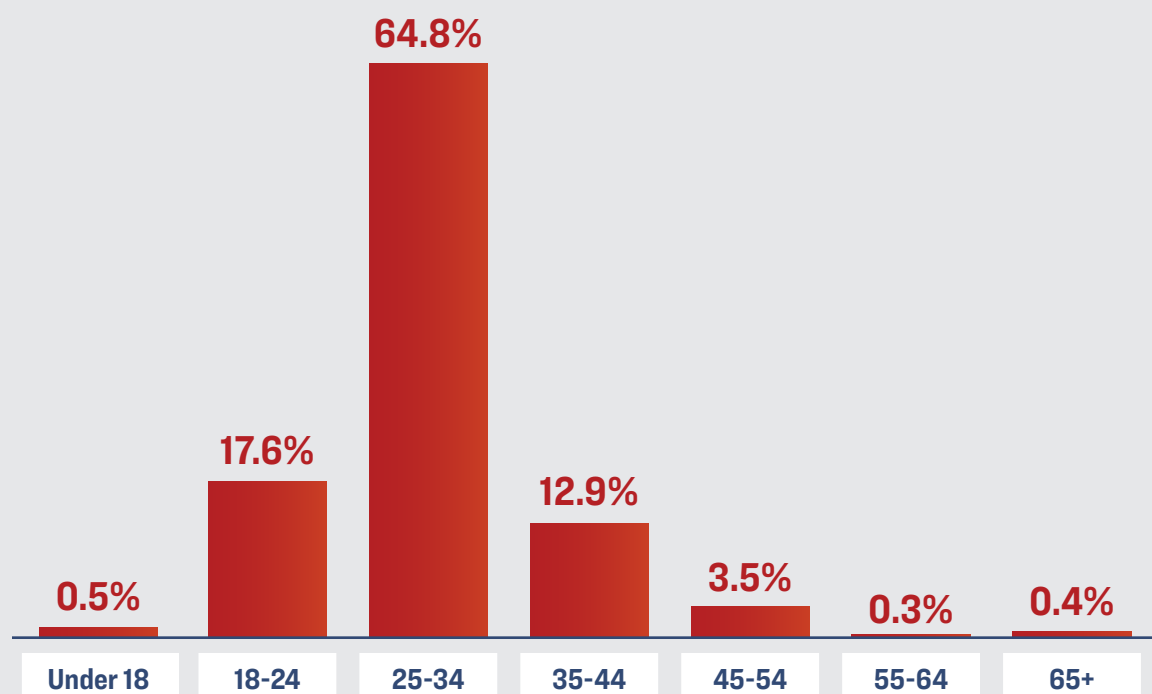
51% (614) respondents identified as straight, while 20% (239) identified as queer, 13% (154) as pansexual, 6% (48) as bisexual, 6% (61) as gay, 4% (48) identified as more than one sexuality, and only 1% (12) identified as lesbian.

Out of the 515 trans men respondents, 52% (269) identified as straight, 22% (111) as queer and 11% (55) as pansexual.

“When it comes to sexuality and gender orientation, people have to understand that they are mutually exclusive of each other. Although, the T and I for transgender and intersex are often lumped in with LGBTQI — they are not the same. A trans masculine person can identify as lesbian, gay or bisexual still because gender and sexuality are not congruent and can very much be fluid. We have to make space for our trans masc folx to feel comfortable in their sexuality and identities.”

-Tai'Rance S. Kelly Sr.

Age Distribution



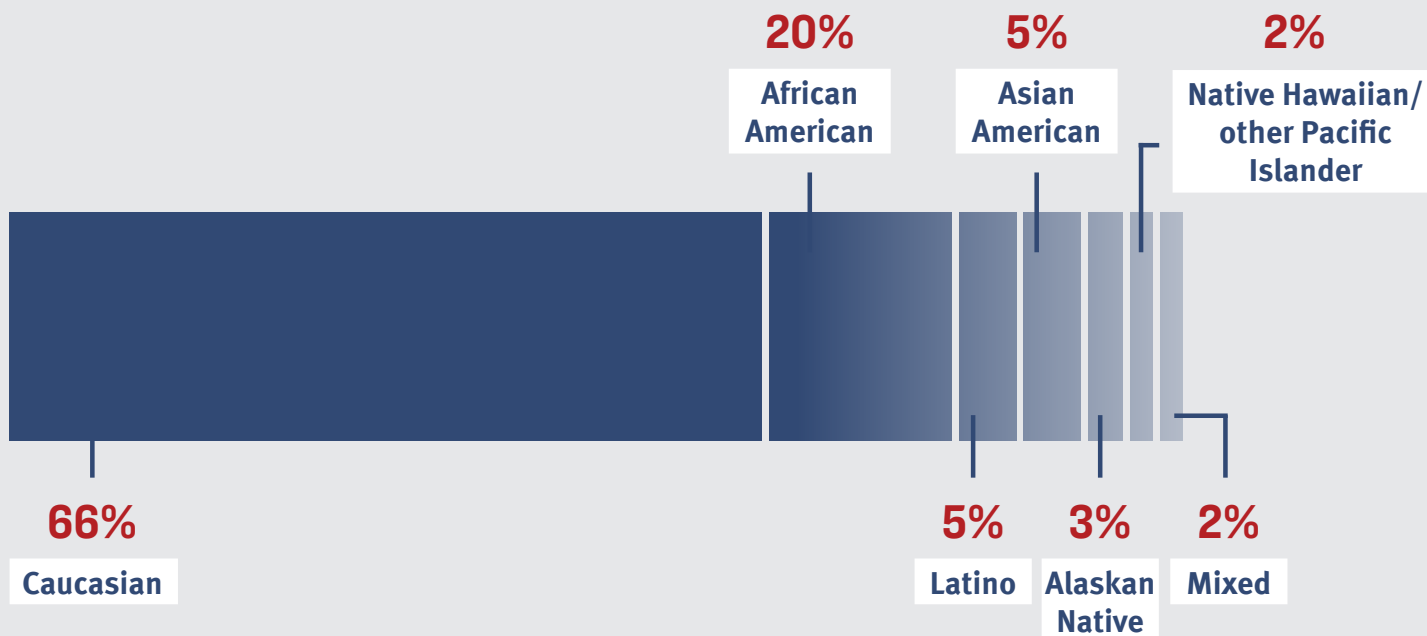
A vast majority of participants, 64.8% (778), were between the ages of 25 and 34, indicative of the age groups that typically attend the chosen events. Participants between the ages of 18 and 24 were the next largest group represented, with a turnout of 17.6% (211).

Similarly, among trans men, the largest age group represented was 25-34 at 57%, followed by 18-24 at 19% (96). Overall, older age groups were not in attendance at the events where Game Changing Men administered the survey in person. Moreover, they did not have high engagement with the survey via online platforms. The existing gap in transmasculine long-term health research necessitates more targeted outreach efforts around the unique needs of older trans men.

“The youth want to engage and participate in non-traditional activities, not just support groups they want to experience joy.”

-Anonymous

Race and Ethnicity



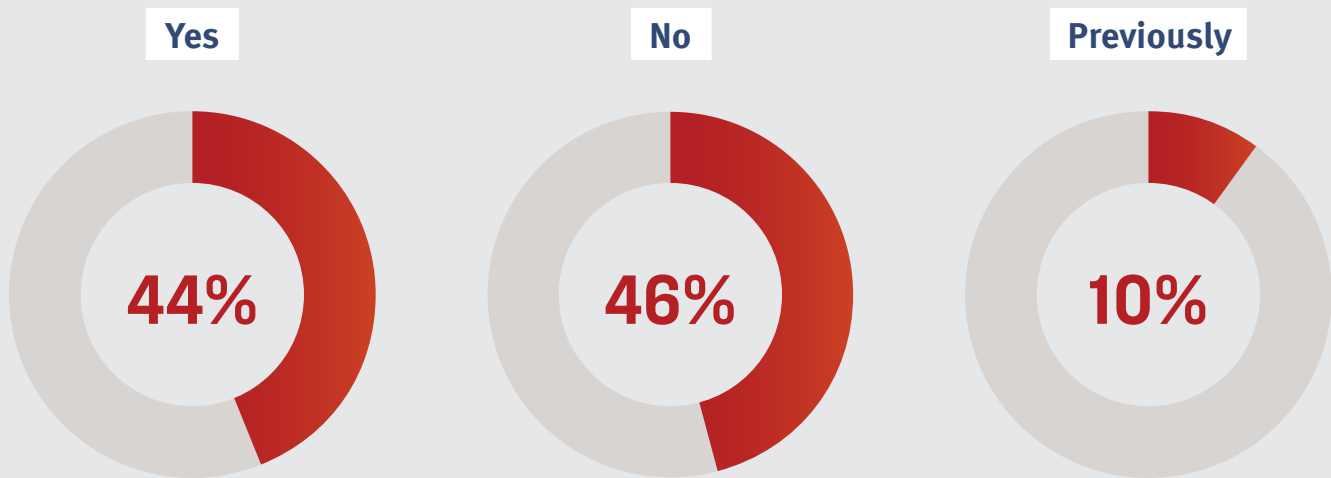
Game Changing Men’s key target audience, African American trans men, made up only 5.3% (64) of all survey respondents. An extensive network of African American trans men-focused organizations, health care providers, mental health providers and community-based organizations across the South is capable of establishing the partnership needed to identify and gather insight on this demographic. Most importantly, broadening the research around strategies for creating safe spaces and competently engaging with this group is necessary to build trust and deepen understanding.



The limited history on transmasculine folx is on white trans men.”

-Anonymous

Identifies as a Sex Worker or Engages in Survival Sex Work



*1158 respondents answered this question; 42 did not respond.

The survey asked about engaging in sex work or survival sex work, which means exchanging sex or sexual favors for food, a place to stay, drugs or alcohol, money or other resources needed. 44% (511) of survey respondents indicated that they had engaged in it, while 46% (530) indicated that they had not. Moreover, 10% (117) reported previous engagement in it. In total, 54% (628) of respondents had engaged in sex work or survival sex work, demonstrating elevated risk behavior for HIV and other STIs.

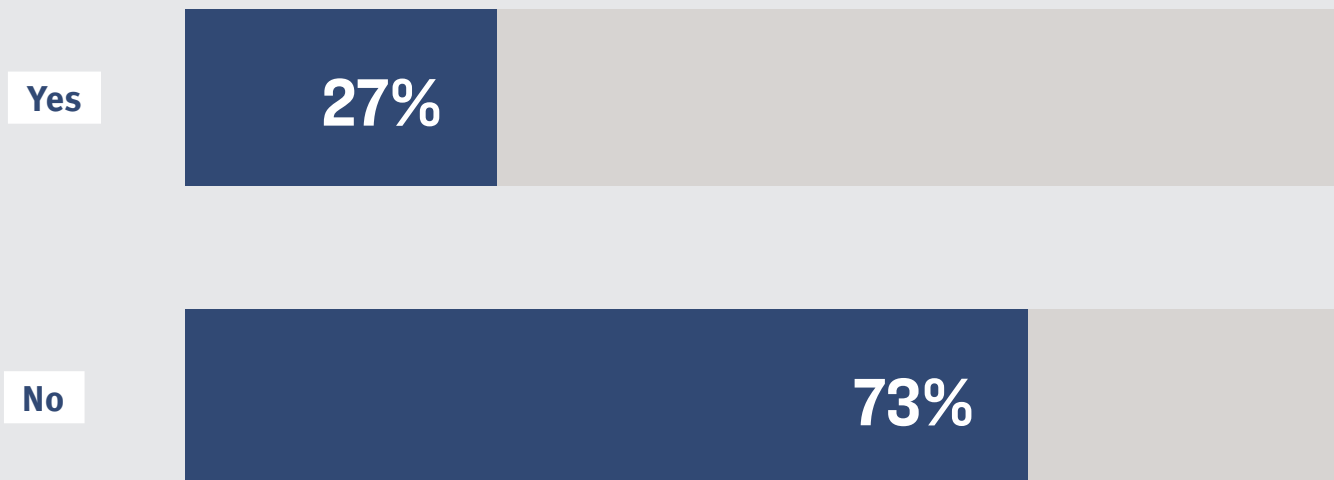
Among the 498 trans men that responded, 47% (233) had engaged in sex work or survival sex work, while 51% (256) had not. In the past, 2% (9) had engaged in sex work or survival sex work. In total, 49% (242) of trans men had engaged in it. Similar to the overall respondents' findings, this data proposes an urgent need for further research into trans men and specific high risk behaviors.



We are in the streets doing survival sex work and street work because of discrimination and lack of access.”

-Anonymous

Former Incarceration

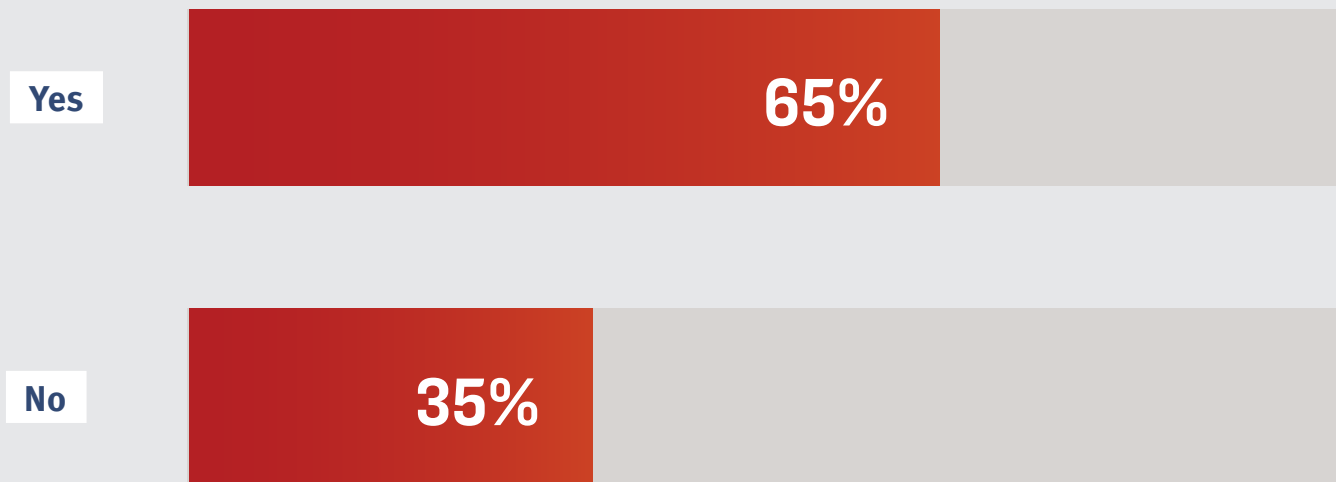


Overall, 27% (323) of respondents had been formerly incarcerated. Among the 515 trans men respondents, 35% (182) had a history of incarceration. At a national level, trans-identified adults have a 16% rate of incarceration, compared to just 2.7% of cis adults. This conspicuously disproportionate contact with law enforcement and the justice system puts them at an increased risk for discrimination, harassment and violence. Advocacy for trans-identifying individuals is especially vital in prisons, jails and immigration facilities where people are housed according to sex assigned at birth and not gender identity. In these settings, trans-identifying individuals are left vulnerable to attacks and sexual assault from staff and other detained people.

“When we go to jail we are still Black masculine people on top of the issues we have to deal with because I’m trans and in jail.”

-Anonymous

Currently Enrolled in Care



*1158 respondents answered this question; 42 did not respond.

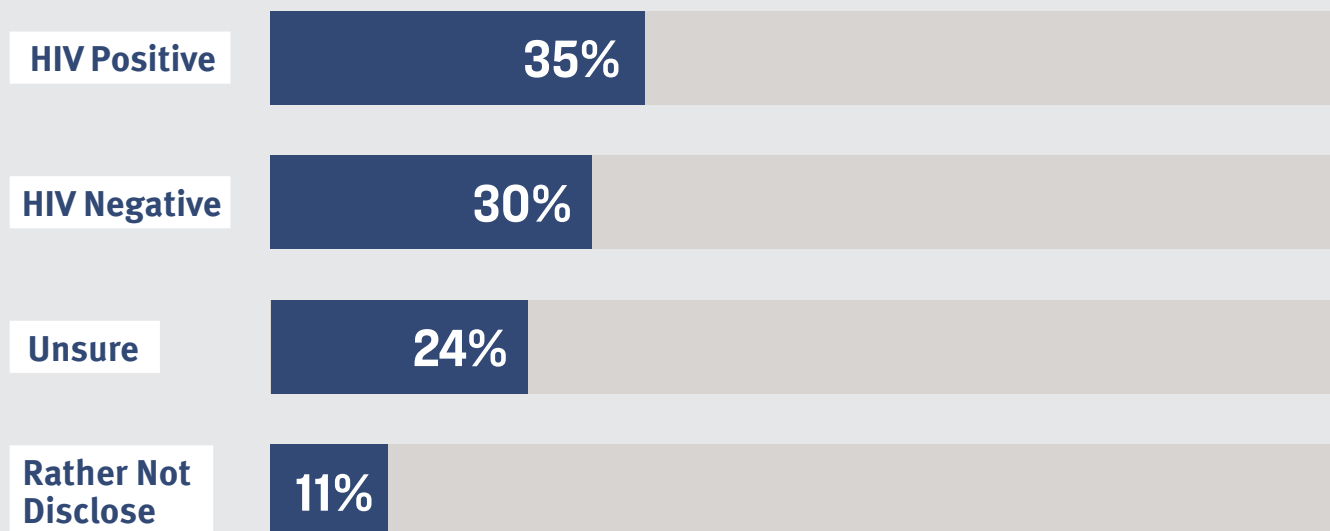
While 65% (751) of survey respondents reported that they were currently enrolled in care, 35% (407) reported that they were not. Out of the 498 trans men that responded, 19% (95) were not enrolled in care. In comparison to national rates, the [U.S. Census Bureau](#) 2020 report showed that 91.4% of Americans were enrolled in care, while 8.6% were not. Whether enrolled in care, trans-identifying adults are often hesitant to seek critical medical and mental health care due to the acknowledged deficit in the delivery of health services that are specific to transgender and gender-nonconforming (TGNC) individuals.



I believe it is important that trans people have their own data to create their own facilities and services, so that a codependency is not created in the process of seeking inclusion.”

-Maneesh Chatman

HIV Status



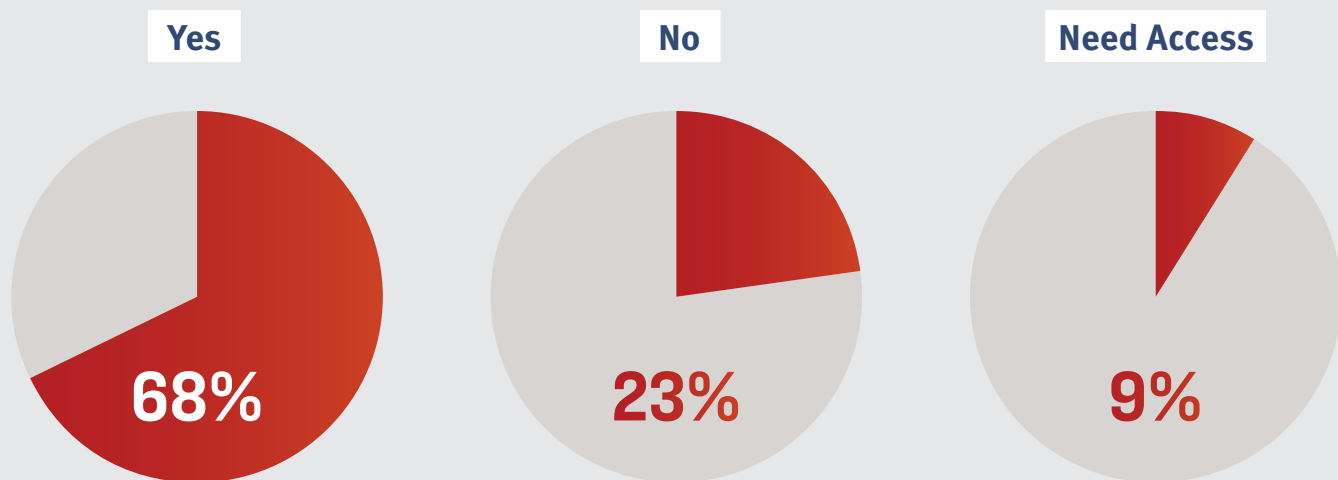
*1158 respondents answered this question; 42 did not respond.

30% (345) of respondents shared that they were HIV negative and in that cohort, 31% (108) were on pre-exposure prophylaxis. 35% (404) reported that they were living with HIV and out of that group, 44% (179) had an undetectable viral load. Of the remaining respondents, 11% (135) chose not to disclose their HIV status and 24% (274) were not sure.

Of the 498 trans men that responded, 25% (125) were HIV negative and in that group, 23% (29) reported being on PrEP. 31% (153) were HIV positive and in this cohort, 35% (53) had an undetectable viral load. Of the remaining trans men respondents, 17% (83) chose not to disclose their HIV status and 28% (137) were not sure.

According to a [2020 CDC report](#), PrEP has a national overall uptake of just 25%. In other words, for people among whom PrEP is recommended, only a quarter followed up with a prescription. The same report highlighted a disparity in coverage for PrEP, where men are three times more likely to receive coverage than women. This imbalance regresses the effort to lower the risk of new HIV infections.

Accessibility to Sexually Transmitted Infection Prevention Methods or Birth Control



*1158 respondents answered this question; 42 did not respond.

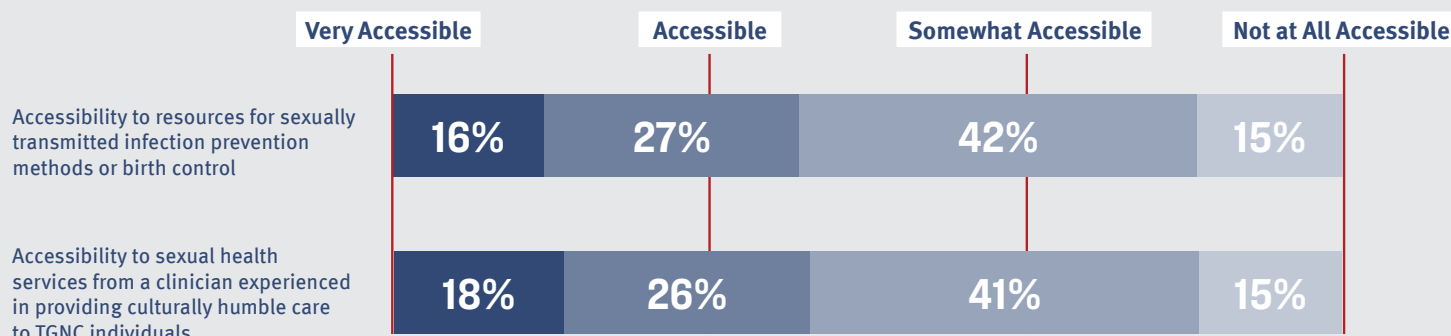
68% (790) of survey respondents reported having access to sexually transmitted infection prevention methods or birth control, but 23% (265) did not, and 9% (103) indicated they were in need of these important resources. Among the 498 trans men that responded, 81% (401) had access to STI prevention methods or birth control, but 18% (90) did not, and 1% (7) indicated they needed access.

Trans men already face barriers communicating their sexual health needs in a health care system that has knowledge gaps in their acute needs. Destigmatizing sexuality, gender identity, HIV and other STIs among trans-identifying individuals within the health care system is an essential step toward addressing barriers to accessing STI prevention methods and birth control.

“We are erased from being parents, needing access to family planning tools, contraceptives, and access to abortion. Trans people are able and deserve to have families when we feel it is the right time, we should be able to determine what that looks like for us.”

-Anonymous

Sexual Health Accessibility



*1158 respondents answered this question; 42 did not respond.

With regards to STI prevention methods or birth control (PrEP, condoms, dental dam, post exposure prophylaxis), 42% (482) of survey respondents reported that resources were somewhat accessible and 15% (176) reported that resources were not at all accessible. Out of the 498 trans men that responded, 47% (233) of survey respondents reported that resources were somewhat accessible and 14% (70) reported that resources were not at all accessible. Given that a significant proportion of respondents could benefit from increased access to these resources, it warrants robust partnerships between health care providers and trans men-focused community-based organizations.

“We exist and our segment of the population is evolving and growing. Our unique family and health care needs and interests deserve to be recognized.”
- SD Manning

In terms of being connected to a provider that is knowledgeable in STI prevention methods and sexual health for transgender and gender-nonconforming individuals, 41% (472) of respondents reported that it was somewhat accessible and 15% (178) indicated that this was not at all accessible.

Out of the 498 trans men that responded, 48% (240) of respondents reported that it was somewhat accessible and 11% (56) indicated that this was not at all accessible. Trans-identifying individuals often experience discrimination from health care providers and may feel uncomfortable seeking medical care such as pap tests for trans men and prostate exams for trans women. In these unfortunate instances, health care providers fail to meet TGNC-specific health care needs.

Gender-affirming care requires medical care and requires training for providers on transgender and gender-nonconforming care and sensitivity. This data points to a need for more nonjudgmental safe spaces for trans men to seek guidance on sexual and reproductive health. There is a lack of trans visibility in the medical field, leaving providers with a blind spot in how care is provisioned.

“We are tired of teaching our providers how to provide the services they say they offer.”
-Anonymous

Key Findings

For the transmasculine community to be heard and represented, holistic and harm reduction approaches must be applied with sensitivity to their needs:

- 1** The existing gap in transmasculine long-term health research necessitates more targeted outreach efforts around the unique needs of older trans men.
- 2** In order to build trust and gather insight on the health care needs of African American trans men, strategies that lead to creating safe spaces and empowering health care providers to competently engage with this group is necessary.
- 3** Sex work and survival sex work among trans men is not widely-researched. Larger studies on this topic will offer statistically significant data that can help surface high risk behavioral patterns within this group.
- 4** Advocacy for trans-identifying individuals is especially vital in prisons, jails and immigration facilities where people are housed according to sex assigned at birth and not gender identity. In these instances, this group is left vulnerable to attacks and sexual assault.
- 5** Destigmatizing sexuality and gender identity within the health care system is an essential step toward addressing barriers to enrolling in care. To combat the harassment experienced by this group in these settings, sexual orientation and gender identity training can be offered to all health care personnel as part of routine training.
- 6** Deficits in accessing STI prevention methods and birth control resources warrant robust partnerships between health care providers that offer trans-specific resources, and trans men-focused community-based organizations across the South. Such a network is capable of linking vulnerable and high risk populations to much needed health care services.
- 7** More nonjudgmental safe spaces for trans men to seek guidance on sexual and reproductive health are considerably needed. There is a lack of trans visibility in the medical field that has left health care providers with a blind spot in how gender-affirming care is provisioned. Gender-affirming care requires appropriate sensitivity training on transgender and gender-nonconforming care for health care personnel.

Call to Action: A Vision for the Future

Funding

We call upon the philanthropic community to invest more financial support in organizations that serve, and where leadership reflects the community of trans men. In this investment, general operating funds allow minority organizations to become more sustainable.

The Southern HIV Impact Fund pledges to fund more organizations in the South led by trans men.

Visibility

We call upon the HIV movement to create trans men-inclusive strategies to reduce new HIV diagnoses.. This includes trans men and transmasculine folx being involved on advisory committees as subject matter experts and consultants.

We call upon research institutions to include trans men in their study protocols as participants and to engage regarding the trans men community with language and recruitment. We ask trans men to be more engaged in clinical trials when they feel comfortable.

Advocacy

We call upon advocacy groups and coalitions to include trans men and transmasculine communities in policy agendas. There are harmful laws and policies being enacted (and proposed) in the South that impact the lives of trans men. Reproductive justice must include trans men too.

As we collectively consider changing the game for trans men, the following set of questions will act as a North Star as we work toward a vision for the future.

- **How do we successfully capture additional insights into older trans men and African American trans men?**
- **How can Game Changing Men and organizations like it adapt to better target and advocate for African American trans men?**
- **What will it take to build a robust network of community-based organizations centering African American trans men and their health needs?**
- **How does Game Changing Men use this information to advocate for changes to the public health delivery system among trans men in the South?**

Glossary

Assigned sex at birth: A medical assignment given at birth based on physical characteristics of the body. This can refer to male, female or also intersex.

AFAB: Acronym with the meaning “assigned female at birth.”

AMAB: Acronym with the meaning “assigned male at birth.”

Gender Identity: An individual’s internal sense of being male, female or neither. Since gender identity is internal, one’s gender identity is not necessarily visible to others.

Gender-nonconforming: Expressing or identifying gender in a way outside of or beyond cultural or societal expectations for gender expression.

Intersex: Describes an individual born with sex chromosomes, genitalia or reproductive system not typical for the male or female sex.

Person of trans experience: Denotes that someone has or has had a trans/transgender/transsexual experience, but it is not central to their identity.

Transfeminine: Having a feminine gender identity or expression usually opposite from the sex assigned at birth.

Transgender: Describes people who have a gender identity that is different from the sex assigned at birth.

Trans man: Someone who was assigned the sex of “female” at birth but who identifies as a man.

Transmasculine: Having a masculine gender identity or expression usually opposite from the sex assigned at birth.

Trans woman: Someone who was assigned the sex of “male” at birth but who identifies as a woman.

Transmasculine Organizations in the South

| ORGANIZATION | LOCATION | WEBSITE | POINT OF CONTACT | CONTACT INFORMATION |
|---|---------------------------|--|--------------------|--|
| Be YoUUU Organization | Little Rock, AK | itsoktobeyouuu.com | Keon L Anderson | keonanderson.beyouuu@gmail.com |
| TMSM Connect | Atlanta, GA | tmsmconnect.org | Jamel Young | djamel@tmsmconnect.org |
| Tranz of Anarchii | Oakland, CA & Atlanta, GA | tranzofanarchiiinc.net/omega | Tai'Rance S. Kelly | tranzofanarchii.inc@gmail.com |
| Ubuntu | Atlanta, GA | ubuntuinc.org | Derek Baugh | villageofubuntu@gmail.com |
| Destination Tomorrow South | Atlanta, GA | destinationtomorrow.org/dt-south-atlanta | Sean Coleman | info@destinationtomorrow.org |
| I am Human Foundation | Atlanta, GA | iamhumanfoundation.org | Sybastian Smith | info@iamhumanfoundation.org |
| National Black Trans Advocacy Coalition | Carrollton, TX | blacktrans.org | Carter Brown | (855)454-9310 |
| The Knights & Orchids Society Inc (TKO Society) | Selma, AL | tkosociety.org | Quentin Bell | (334) 603-1716 |

Special Acknowledgement

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TWOC Healing Project

Mary Wood

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