

INFLUENCE OF TRANSGENDER IDENTITY STIGMA AND HIV-RELATED STIGMA ON MENTAL HEALTH: TESTING THE MINORITY STRESS MODEL AMONG HIJRAS/TRANSGENDER WOMEN IN INDIA



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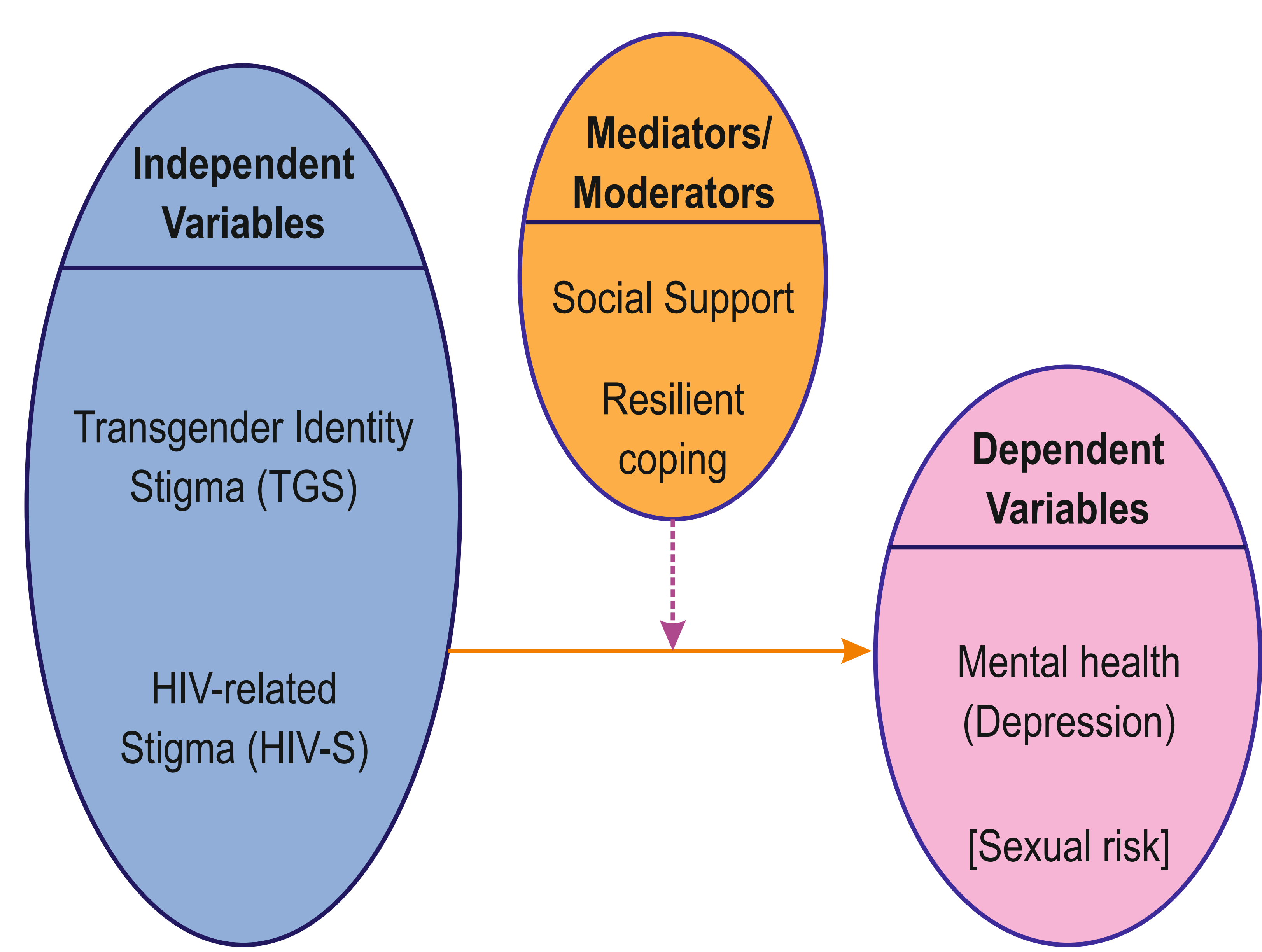
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Background

- ❖ Little is known about how transgender identity stigma (TGS) and HIV-related stigma (HIV-S) affects mental health of hijras and other male-to-female (MtF) transgender (TG) people in India.
- ❖ We adapted Meyer’s minority stress model to examine the influence of TGS and HIV-S (vicarious, felt normative, enacted, internalised) on depression among TG people in India.
- ❖ We hypothesised that resilient coping and social support would moderate/mediate the relationship between TGS/HIV-S and depression.

Diagram 1. Testing a modified minority stress model



Methods

- ❖ A cross-sectional survey was administered to 300 MtF TG people recruited through community agencies from 3 urban (Mumbai, Delhi and Kolkata) and 3 rural (Sangli, Kancheepuram and Kumbakonam) sites.
- ❖ Scales used:
 - ✦ TG identity stigma scale ('Exposure to Transphobia' scale of Sugano, Nemoto, & Operario, 2006, which was adapted from a homophobia scale [Diaz et al., 2001])
 - ✦ HIV-related stigma scale of Steward et al., 2008, with minor modifications
 - ✦ Brief Resilient Coping Scale (Sinclair & Wallston, 2004)
 - ✦ Multidimensional Scale of Perceived Social Support (MSPSS) (Zimet et al., 1988)
 - ✦ Beck Depression Inventory Fast-Screen (BDI-FS) (Beck, Guth, Steer, & Ball, 1997).
- ❖ Descriptive analysis, correlation analysis, and independent sample t-tests were conducted. Hierarchical block regression analyses were conducted to measure associations between independent (TGS and HIV-S as block 1), moderators (resilient coping and social support as block 2) and dependent (depression) variables.

Table 1. Summary of overall and subscale scores across variables (n=300)

Variable	Mean	SD	Range	Score on 0-100 scale
HIV-related stigma (Overall)	37.26	12.01	6-89	6-84
Vicarious Stigma	13.36	6.39	0-28	0-93
Felt Normative Stigma	22.50	7.05	0-33	0-100
Enacted Stigma	2.07	2.37	0-9	0-90
Internalized Stigma	12.93	6.77	0-33	0-100
Transgender identity Stigma (TGS)	38.65	7.17	19-56	34-100
TGS - Enacted	24.83	5.90	10-40	25-100
TGS - Perceived	13.83	2.19	6-16	38-100
Social Support	38.04	9.21	12-58	20-97
Depression	5.98	4.29	0-18	0-100
Resilient Coping	12.67	2.94	5-15	33-100

Results

- ❖ Socio-demographic characteristics of survey participants (n=300):
 - ✦ Mean age = 29.5 years (SD 7.8).
 - ✦ Median monthly income was INR 6000 (120 USD).
 - ✦ 66.7% (n=200) identified as hijra, 25% (n=74) as 'transgender' (English term) and 8% (n=25) as *jogta*.
 - ✦ 70.7% (n=212) reported being paid for sex in the last three months.
- ❖ The majority of participants had moderate (19%) or severe (24%) depression scores (Mean-5.9, SD-4.2), and moderate (53%) or severe (33%) transgender identity stigma scores (Mean-38.6, SD-7.1). See Table 1 for details of scores from different scales.
- ❖ Hierarchical regression analyses (Table 2) revealed that TGS and HIV-S subscales (vicarious and felt normative stigma subscales) accounted for a significant amount of variance in overall depression scores. TGS and HIV-related vicarious and felt normative stigmas were significant correlates. Social support and resilient coping were entered together in the next step and explained a further 19% of the variance in depression scores. Resilient coping was a significant correlate. The final model accounted for a significant amount of variance in overall depression scores (adjusted R2= 0.37).
- ❖ Overall, thus, **depression was associated with higher levels of transgender identity stigma and felt normative and vicarious HIV-related stigma, and lower levels of resilient coping.**
- ❖ Addition of interaction terms (not shown) as block 3 did not for significant variance in depression, and none of the interactions terms were significant. Thus, in this sample, social support and resilient coping were not found to be moderators.

Table 2. Hierarchical regression analysis of predictors of depression among MtF transgender people (N = 300)

	Model 1				Model 2			
Block variables	B	SE B	β	t	B	SE B	β	t
Block: Stigma								
TG identity stigma	0.15	0.03	0.25	4.24***	0.09	0.03	0.16	3.02**
HIV-S: Vicarious	-0.09	0.04	-0.14	-2.39**	-0.14	0.03	-0.20	-3.95***
HIV-S: Felt Normative	0.08	0.03	0.13	2.08**	0.08	0.03	0.133	2.37*
Block: Coping								
Social Support					-0.04	0.02	-0.10	-1.89
Resilient coping					-0.61	0.07	-0.42	-7.91***
R2				0.20				0.39
Adjusted R2				0.17				0.37
Change in R2				0.06				0.19
F for change in R2				7.87***				46.81***

Note. HIV-S = HIV-related Stigma. Sociodemographic variables were entered as control variables (not shown), and age and income group were found to be significant.
*p < .05. **p < .01. ***p<.001

Conclusion and Recommendations

- ❖ The study findings are consistent with our adapted minority stress model that both transgender identity stigma and HIV-related stigma influence mental health.
- ❖ Findings may inform inclusion of multi-level stigma reduction measures within existing HIV prevention and care interventions for TG in India.
- ❖ Some of the steps that can be taken include:
 - ✦ Educating and sensitizing the general public and other stakeholders (health care providers) on sexual minority issues to decrease societal stigma and promote acceptance of TG people
 - ✦ Providing counselling on mental health issues and mental health referral services to hijras/TG people through HIV prevention interventions of the government and other partner agencies
 - ✦ Decreasing discrimination faced by sexual minorities in various settings – health care settings, workplace, and educational institutions
 - ✦ Promoting self-acceptance (i.e., decreasing self-stigma) among hijras/TG people