# What are the HIV prevention needs of Latino gay men in the US?

Prepared by Gabriel R. Galindo, DrPH; CAPS

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Center for AIDS Prevention Studies (CAPS) Technology and Information Exchange (TIE) Core

### Why focus on Latino gay men?

The ever changing mosaic of Latino demographics in the US creates unique challenges to address health disparities of the population, especially when it comes to HIV prevention needs. Latinos are the largest and fastest growing ethnoracial minority group in the US, experiencing a 43% growth between 2000 and 2010¹. Data also show that Latinos are one of the fastest growing populations at risk for HIV transmission:

- Latino men who have sex with men (MSM\*) represent 81% of new infections among Latino men, and 19% among all MSM<sup>2,3</sup>
- Latinos are 16% of the US population, but make up 17% of living HIV/ AIDS cases and 20% of new HIV infections each year<sup>3</sup>
- Youth (ages 13-29) accounted for 45% of new HIV infections among Latino MSM<sup>4</sup>

In light of these data there is a need to identify culturally-specific health concerns of Latino gay men so that effective interventions may be developed to address current and prevent future disparities. The US National HIV/AIDS Strategy highlights the call for HIV programs that reduce health inequities among both ethnoracial and sexual minority populations<sup>5</sup>. Latino gay men have distinct cross-cultural identities that place them into both prioritized categories<sup>6</sup>.

Reviews of research with Latino gay and bisexual men also report that cultural influences and socioeconomic forces impact sexual well being. For example, residency status, HIV-related stigma, machismo, immigration and migration patterns, language, insurance status and educational attainment have all been associated barriers to HIV prevention services and programming<sup>11,12</sup>

### What are the prevention challenges?

Most work related to Latino gay men has been based on a sociocultural model of health, which shows that experiences of social discrimination, defined as racism, homophobia and poverty, are strong predictors of mental health outcomes<sup>7</sup>. Mental health outcomes, such as psychological distress, have been shown to increase sexual risk and decrease sexual resiliency. A recent study of Latino MSM living in New York and Los Angeles<sup>8</sup> reported that:

- Over 40% of the participants reported experiences of both racism and homophobia in the past year
- Low self-esteem and decreased levels of social support among Latino gay men are associated with increased rates of sexual risk behaviors, including unprotected anal sex
- Men who had both homophobic and racist experiences were more likely than men who reported no form of discrimination to engage in unprotected anal sex as a bottom, and to also be binge drinkers

Late testing (that is, those individuals who have an AIDS diagnosis within one year of testing HIV-positive) and lack of access to health insurance also create challenges to prevention, treatment and care.

- 38% of Latinos test late in their illness<sup>9</sup>.
- In a study of 21 major US cities, 46% of Latino MSM who tested positive for HIV were unaware of their infection<sup>3</sup>.
- HIV+ Latinos are more likely than Whites to postpone care due to issues such as lack of transportation, and more likely to delay initiation of care after their diagnosis<sup>9</sup>.
- 24% of Latinos living with HIV/ AIDS are uninsured, compared to 17% of Whites; and only 23% of HIV+ Latinos have private health insurance, compared to 44% of Whites<sup>10</sup>.

## What other factors affect sexual risk and resiliency?

Latino gay men are often faced with unique socio-sexual situations that place them at risk for HIV transmission. Prior work with MSM populations, including Latino gay men, has documented that various factors are associated with sexual-risk:

- Serosorting (choosing sexual partners based on *perceived* HIV status), seropositioning (choosing sexual roles [e.g., top or bottom] based on the perceived HIV status of each partner), and sexual stereotypes and preferences<sup>13</sup>
- Alcohol and drug use (including methamphetamine and injection use), as well as having had a history of STDs, like syphilis and gonorrhea<sup>14,15</sup>
- High rates of condomless anal sex ("barebacking") and multiple partners<sup>16</sup>
- Childhood sexual abuse and a social context of discrimination<sup>17</sup>

Defined as adopting cultural ways of mainstream society, work on acculturation suggests that: Latinos who are less acculturated to mainstream US culture are protected by traditional Latino (sexual) values; and that acculturation of US mainstream values serves as a protective barrier because it increases a sense of individualism and self-determination<sup>18</sup>.

Understanding the role of sociocultural factors helps to refine definitions of sexual resiliency among Latino gay men. Innovative work exploring protective factors among Latino gay men notes that:

 HIV prevalence was higher among US born than non-US born Latinos in San Francisco, while in Chicago the opposite was true<sup>19</sup>

- Community involvement moderates sexual risk behaviors<sup>20</sup>
- Volunteering with HIV/ AIDS organizations can decrease psychological stressors<sup>20</sup>

As the majority of these data came from quantitative surveys, more public health focused qualitative studies are needed to further examine the context of the sexual situations in which Latino gay men find themselves, as well as the cultural factors and sexual scripts<sup>21</sup> that influence their harm reduction behaviors.

### What's being done?

- Hermanos de Luna y Sol, born out of the Mission District in San Francisco, CA is a longstanding HIV prevention intervention for immigrant Spanish speaking Latino gay and bisexual men that is based on empowerment education and social support, and has been successful in increasing condom use among participants<sup>22</sup>.
- Latinos D (based in Queens, NY<sup>23</sup>) and Somos Latinos Salud (based in Ft. Lauderdale, FL<sup>24</sup>) are dynamic and promising adaptations of the MPowerment program, an effective community-level, evidence-based HIV intervention for young gay and bisexual men<sup>25</sup>.
- SOMOS, a homegrown and culturally responsive NYCbased HIV prevention program, has been shown to lower risk behaviors and decrease number of sexual partners among Latino gay men<sup>26</sup>.

Still, even with these programs and CDC recommendations to address Latino MSM health disparities, most adaptations of evidence-based interventions have largely been linguistically, but not necessarily culturally, translated versions of established programs.

#### What are the recommendations?

- Celebrate the diversity of Latino cultures in programming. Different experiences of historical events, political environments, immigration patterns and regional cultures exist within Latino communities (e.g., Chicanos in Los Angeles, Nuyoricans in New York, Tejanos in San Antonio).
- Conduct more research on structural and environmental influences on Latino gay men's sexual health including issues relating to undocumented HIV+ Latinos.
- Understand that serving populations is not the same as being culturally competent. Including Latino participation does not equate to providing appropriate services.
- Cultivate Latino gay community collaboration and empowerment by ensuring that Latino gay men participate in local HIV prevention and care planning councils.
- Develop programs that address the unique concerns of both immigrants and U.S. born Latino gay men. Assuming that all Latino gay men are monolingual Spanish speakers minimizes the needs of bicultural (but not necessarily bilingual) Latino gay men.
- Reduce gay-related and HIV-related stigmas in Latino communities. Breaking sexual silences will help promote healthy sexual identity development.
- Work with policy makers and political stakeholders to advocate for sustainable health care access.
- Highlight social norms and cultural values that enhance sexual resiliency. Focusing solely on risk factors leads to limited insights and opportunities for interventions.
- Foster programs that address the impact of isolation and identity validation. Lessening stressors that Latino gay men face will improve their overall well-being.

### Says who?

- 1 US Census Bureau (2011). Overview of Race and Hispanic Origin: 2010 U.S. Census Bureau. http://www.census.gov/prod/cen2010/briefs/c2010br-04.pdf.
- 2 CDC. (2011). CDC Fact Sheet: HIV and AIDS among Latinos. http://www.cdc.gov/nchhstp/newsroom/docs/FastFacts-Latinos-FINAL508COMP.pdf.
- 3 CDC. (2008). HIV Surveillance in Men Who Have Sex with Men (MSM). http://www.cdc.gov/hiv/topics/surveillance/resources/slides/msm/index.htm.
- 4 Prejean J, et al. (2011). Estimated HIV Incidence in the United States, 2006-2009. PLoS ONE.
- 5 ONAP. (2010). National HIV/AIDS Strategy: Federal Implementation Plan. http://www.whitehouse.gov/files/documents/nhasimplementation.pdf.
- 6 Diaz, RM (1998). Latino gay men and HIV: culture, sexuality, and risk behavior. Routledge.
- 7 Díaz RM, et al. (2001). The impact of homophobia, poverty, and racism on the mental health of gay and bisexual Latino men: findings from 3 US cities. Am J Public Health. 91(6):927-932.
- 8 Mizuno Y, et al. (2011). Homophobia and Racism Experienced by Latino Men Who Have Sex with Men in the United States: Correlates of Exposure and Associations with HIV Risk Behaviors. AIDS Behav. [Epub ahead of print]
- 9 CDC. (2011). HIV Surveillance Report, Vol. 21. 10 RAND. (2011). HIV Cost and Services Utilization

- Study (HCSUS). http://www.rand.org/health/projects/hcsus.html.
- 11 Zea MC, et al. (2004). Methodological issues in research on sexual behavior with Latino gay and bisexual men. Am J Community Psychol. 31(3-4):281-291.
- 12 National Latino AIDS Awareness Day. HIV/ AIDS and Latino/ Hispanic men who have sex with men. http://www.nlaad.org/resources/key\_facts\_latino\_
- 13 Rosenberg ES, et al. (2011). Number of casual male sexual partners and associated factors among men who have sex with men: results from the National HIV Behavioral Surveillance system. BMC Public Health. 25: 11-89.
- 14 CDC. (2010). HIV among Hispanics/ Latinos. http://www.cdc.gov/hiv/hispanics/resources/factsheets/pdf/hispanic.pdf.
- 15 Balan IC, et al. (2009). Intentional Condomless Anal Intercourse Among Latino MSM Who Meet Sexual Partners on the Internet. AIDS Educ Prev. 21(1): 14-24.
- 16 Diaz RM et al. (2005). Reasons for stimulant use among Latino gay men in San Francisco: a comparison between methamphetamine and cocaine users. Journal of Urban Health. 82(Supp1): 71-78.
- 17 Arreola SG, et al. (2009). Childhood sexual abuse and the sociocultural context of sexual risk among adult Latino gay and bisexual men. Am J Pub Hlth. 99 Suppl 2:S432-8.
- 18 Abraído-Lanza AF, et al. (2005). Do healthy

- behaviors decline with greater acculturation? Implications for the Latino mortality paradox. Soc Sci Med. 61:1243–1255.
- 19 Ramirez-Valles J, et al. (2008) HIV Infection, Sexual Risk, and Substance Use among Latino Gay and Bisexual Men and Transgender Persons. American Journal of Public Health. 98: 1036-1042.
- 20 Ramirez-Valles J (2002). The proactive effects of community inolyment for HIV risk behavior: A conceptual framework. Health Education Research. 17(4): 389-403
- 21 Carrillo H, et al. (2008). Risk across borders:
  Sexual contexts and HIV prevention challenges
  among Mexican gay and bisexual immigrant men.
  Findings and recommendations from the Trayectos
  Study (Monograph). San Francisco: UCSF and
  SFSU. http://caps.ucsf.edu/uploads/projects/
  Trayectos/monograph/index.html.
- 22 Hermanas de Luna y Sol. http://caps.ucsf.edu/resources/project-websites/hermanos-de-luna-y-sol.
- 23 Latinos Diferentes. https://www.facebook.com/LatinosD.
- 24 Latinos Salud Somos. http://www.latinossalud.org
- 25 Mpowerment. http://mpowerment.org.
- 26 Vega MY, et al. (2011). SOMOS: evaluation of an HIV prevention intervention for Latino gay men. Health Educ Res. 26(3):407-418.

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