

what are U.S. Latinos' HIV prevention needs?

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are Latinos at risk for HIV?

HIV continues to be a major health threat for Latinos in the US, many of whom are disadvantaged due to racism, economic disparities and language barriers. Latinos in the US (including residents of Puerto Rico) are disproportionately affected by HIV, accounting for 18% of total AIDS cases while comprising 14% of the US population.¹

The majority of AIDS cases among the Latino population in 2000 were concentrated among those born in the continental US (35%) and Puerto Rico (25%), followed by those born in Mexico (13%), Central or South America (8%) and Cuba (2%). An additional 18% were reported from Latinos with unknown place of birth (15%) or born elsewhere (3%).²

what puts Latinos at risk?

Latinos in the US include a diverse mixture of racial and ethnic groups and cultures. Latinos share common factors with other ethnic groups that increase vulnerability to HIV, such as discrimination,³ poverty, lack of information, substance use and negative attitudes toward condoms.

AIDS case rates and risk behaviors among Latinos in the US vary by region. In the Northeast and along the eastern seaboard, where many Latinos from Puerto Rico live, Latino rates are up to three times higher than the national average.⁴ In this region, the main risk for transmission is injection drug use, believed to be fueled by the concentration of heroin availability.⁵ By comparison, in the West and Southwest, the majority of AIDS cases occurs among men who have sex with men (MSM), although cases are also high among injection drug users (IDUs) in certain areas.

In 2000, 47% of AIDS cases among Latino men were attributed to sex with men, 33% to injection drug use, and 14% to sex with women. In the same year, 65% of AIDS cases among Latina women were attributed to sex with men, and 32% to injection drug use.¹ Thus, among both male and female Latinos, as with most other groups, unprotected sex with an HIV+ man is the most common route for becoming infected with HIV, followed by the sharing of an unclean syringe/needle with an HIV+ person.

HIV risk dynamics among immigrant and migrant Latinos can be more complex than among US born Latinos, as they are dealing with conflicting cultural norms while trying to adjust to life in a new country. For some, this results in higher risk; for others, lower risk. Levels of acculturation, poverty, employment, migrant labor conditions and connection to traditional Latino values can influence HIV risk.⁶

what are barriers to prevention?

The social and political climate in the US today poses serious problems for effective HIV prevention in Latino communities. Racial and ethnic discrimination, anti-immigrant attitudes, policies on mandatory testing for immigrants, and fear of deportation for undocumented immigrants can prevent many Latinos from receiving and accessing adequate resources and services for HIV prevention, including HIV counseling and testing.

Traditionally in Latino cultures, sex and sexuality are not discussed. For some Latina women, this sexual silence dictates that they should not know about or talk to men about sex because it suggests promiscuity. Therefore, their ability, comfort and success in insisting on condom use with male partners may be limited.⁷ Sexual silence can prevent MSM from discussing their sexual preference, instilling low self-esteem and personal shame.⁸ In addition, the lack of parental discussions and education regarding sex and condoms seems to contribute to the disproportionate number of unintended pregnancies, sexually transmitted diseases and HIV cases among Latino youth.⁹

Injection drug use is one of the main risk factors for HIV transmission, yet many IDUs do not have access to clean needles and drug treatment. Access is even more difficult for monolingual, immigrant Latino IDUs who may not use needle exchange sites or other public services due to lack of knowledge and fear of being recognized or deported.

Says who?

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how does culture affect prevention?

Familismo is a traditional Latino commitment to family and a central support to family members. *Familismo* can be a powerful incentive in helping heterosexual Latino men reduce unprotected sex with casual partners outside of primary partnerships. However, for many Latino MSM, *familismo* and homophobia can create conflict because families may perceive homosexuality as wrong. MSM are forced to separate their sexual identity from their family life, leading to low self-esteem and personal shame.⁸

*Machismo may lead men to view sex as a way to prove masculinity. This can mean that frequency and type of sex are most often determined by men, leaving women in fear of violence or abandonment if they resist male sexual advances.*⁷ *Machismo may also be used as an excuse for unprotected sex.*

what's being done?

Prevention Point Philadelphia, in collaboration with other AIDS organizations, operated a full service needle exchange site from a van that traveled to an area with many shooting galleries. The van offered needle exchange, oral HIV testing, bilingual social service and drug treatment referrals and medical care. The van reached many homeless, Spanish-speaking Puerto Rican IDUs who were regular shooting gallery users. Many of them had never accessed preventive medical care or social services.¹⁰

*In San Antonio, TX, a three-session small group intervention was offered to English-speaking Mexican-American women who had a sexually transmitted disease (STD). The intervention sought to help women recognize their risk for HIV and other STDs, make a plan to change and then build skills to help reduce those risks. The intervention significantly reduced rates of subsequent STDs.*¹¹

*Hermanos de Luna y Sol, is an ongoing intervention for Latino gay/bisexual men at Mission Neighborhood Health Center in San Francisco, CA, based on empowerment education and social support. The program provides outreach, six structured discussion sessions and ongoing support to maintain behavior change. Sessions deal with the common history of oppression among Latino gay men, social support and community and emotional issues around sex and sexuality. The impact of AIDS and HIV transmission are discussed in the final two sessions. The program has been successful in recruiting men and increasing condom use among participants.*¹²

*Mujeres Unidas y Activas is a community education, organizing and advocacy project created by and for Latina immigrant and refugee women in San Francisco, CA. The project includes components such as information meetings, friendship circles, workshops and advocacy. Although the project was not developed to specifically target HIV risk behaviors, women who attended up to nine types of activities showed increases in sexual communication comfort, were less likely to maintain traditional sexual gender norms and reported changes in decision-making power.*¹³

what still needs to be done?

Latinos are concerned about the HIV epidemic and are motivated to learn and to teach their children about prevention.¹⁴ Providers and social service agencies should capitalize on this by providing Spanish-language or bilingual education and services such as anonymous and confidential HIV testing. Incorporating HIV prevention messages into general health services, Spanish media and religious settings would decrease stigma and increase access to HIV prevention programs.

*As Latinos, we must attempt to break the silence around sexuality in our communities and overcome homophobia. Latinos can encourage healthy sexuality by discussing gender role expectations, teaching children about sexuality and accepting diversity in our own community.*¹⁵ *Programs can build upon the protective aspects of Latino culture and emphasize resiliency.*¹⁶ *Larger societal factors such as poverty, racism and homophobia must also be addressed in order to reduce their impact on risk behavior.*

PREPARED BY CYNTHIA GÓMEZ, PHD, CAPS

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