



Latino/Hispanic Men Who Have Sex With Men

The term “men who have sex with men” (MSM) refers to all men who have sex with other men, regardless of how they identify themselves (gay, bisexual, or heterosexual).

In the U.S., HIV/AIDS has had a tremendous effect on MSM. HIV infection has been increasing steadily among gay and bisexual men since the early 1990s.¹ Since the beginning of the epidemic more than half a million MSM have been diagnosed with AIDS.² MSM are disproportionately affected by HIV/AIDS—although MSM made up only about 5% to 7% of men in the U.S., they accounted for more than two thirds (68%) of all men living with HIV in 2005. Approximately 62% (218,676) of male adults and adolescents living with HIV/AIDS in the U.S. identified male-to-male sexual contact as the primary mode of transmission in 2006.³

Among Latino males, the AIDS rate is climbing at alarming proportions. The estimated rate (per 100,000) of AIDS for Hispanic men (31.3) was approximately three times that for non-Hispanic White men (11.2) in 2006.⁴ Among Latino MSM, the HIV/AIDS rate is climbing at alarming proportions. Among MSM, the estimated rate of AIDS infection per 100,000 (in 2006) was 6.3 among Hispanics/Latinos, 10.8 among Blacks, and 2.56 among non-Hispanic Whites. For the same year, 2,816 Hispanics were estimated to be infected with AIDS through this way, compared with 4,309 among Blacks and 6,251 among non-Hispanic Whites; making non-Hispanic White MSM the group most affected by AIDS through male-to- sexual contact. For Latino men living with HIV, the most common mode of transmission is sexual contact with another man.⁵ At the end of 2005, 57% of all Hispanics living with HIV/AIDS in the U.S reported male-to-male sexual

1. Centers for Disease Control. “Estimates of New HIV Infections in the United States”. Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008
2. Centers for Disease Control. “HIV/AIDS Among Men Who Have Sex with Men”. Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2007. <http://www.cdc.gov/hiv/topics/msm/index.htm>
3. Centers for Disease Control. “HIV/AIDS Surveillance Report, 2006, Volume 18, Table 9.” Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2006report/pdf/2006SurveillanceReport.pdf>
4. Centers for Disease Control. “HIV/AIDS Surveillance Report, 2006, Volume 18, Table 5a.” Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2006report/pdf/2006SurveillanceReport.pdf>
5. Poppen, PJ et al. “Sterostatus disclosure, seroconcordance, partner relationship, and unprotected anal intercourse among HIV-positive Latino men who have sex with men”. 2005, AIDS Education and Prevention, Vol. 17(3), pp. 227-237

contact as the transmission category, compared to 49% among Blacks and 77% among non-Hispanic Whites.⁶ Of all male adults and adolescents living with HIV/AIDS in the U.S. at the end of 2006, male-to-male sexual contact was the primary mode of transmission for 17% of Latinos, 47% among Black men and 34% among White non-Hispanic men.⁷ The percentage of Latino MSM living with HIV/AIDS in the U.S. varies by place of birth. 62% of Cuban-born and 59% of Mexico-born Latinos living with AIDS cited male-to-male sexual contact as the mode of transmission, whereas approximately 18% of people living with AIDS born in Puerto Rico became infected with HIV through male-to-male sexual intercourse.⁸

Several factors act as obstacles to prevention efforts and thus contribute to the high level of HIV infection specifically in the Latino MSM community.

Latino gay/bisexual men show some of the highest rates of HIV seroprevalence, seroconversion, and unprotected anal intercourse with multiple partners despite the health risks associated with this behavior.⁹ In five different studies of gay and bisexual men in the U.S., Latinos have reported the highest rates of unprotected anal intercourse, even when compared to men from other ethnic minority groups.¹⁰ For example, the Los Angeles Young Men's Survey found that 39% of Latino participants had engaged in unprotected anal intercourse in the previous 6 months.¹¹ In another study, approximately 45% of Latinos in a sample from Texas reported unprotected anal intercourse in the past month.¹² Having anal sex without a condom continues to be a significant threat to the health of MSM. Unprotected anal sex with casual partners is an increasing concern. Not all the reasons for an apparent increase in unprotected anal intercourse are known, but research points to the following factors: optimism about improved HIV treatment, substance use, complex sexual decision making, seeking sex partners on the Internet, and failure to practice safer sex.¹³

Frequently, the social and sexual lives of Latino MSM are impacted by three socially oppressive forces—poverty, racism and homophobia—that often produce experiences of social alienation and personal shame.¹⁴ Racism, homophobia, and poverty act as obstacles to prevention efforts because they contribute to a sense of powerlessness and lack of control in their personal lives and in sexual situations: “Social discrimination impacts HIV risk among Latino gay men by creating social isolation in the lives of these men and by creating poorer self-esteem,” explained Mr. Ayala, an expert Latino MSM researcher, in an interview with the CDC, “Men who feel socially isolated and who don't feel very good about who they are in the world, find themselves in risky situations”.¹⁵ Dr. Rafael Diaz, another expert Latino MSM researcher also in this same CDC interview explained the link between social discrimination, risky situations, and HIV: “[Risky] situations constrain the possibility of choice and the possibility of protecting yourself”.¹⁶

Many Latino MSM turn to alcohol and illegal drug use as a means to cope with homophobia and the frustration caused by poverty, racism and other forms of social discrimination and abuse. Substance use has become popular among men in the MSM community. “Party drugs” (e.g. ecstasy, methamphetamine, etc)

decrease social inhibitions and enhance sexual experiences.¹⁷ However, substance use can increase the risk for HIV transmission through the tendency toward risky sexual behaviors while under the influence and through sharing injection drug equipment.¹⁸ Until recently, methamphetamine was perceived mostly as a problem of the white gay community; however, recent studies demonstrate that the proportion of Latino gay men who use methamphetamine has risen quickly to meet the rates found in the white gay community.¹⁹ In an interview with the CDC, Mr. Santana, the former Director of the Community Partnership Program for the Miami-Dade County Health Department cited methamphetamine use specifically as one of the major predictors of risk for HIV in the Latino MSM community: “Well, one of the predictors, which is emerging and a lot of recent studies have been contributing to this [high incidence of HIV/AIDS among Latino MSM] is the use of crystal meth, methamphetamine”.²⁰

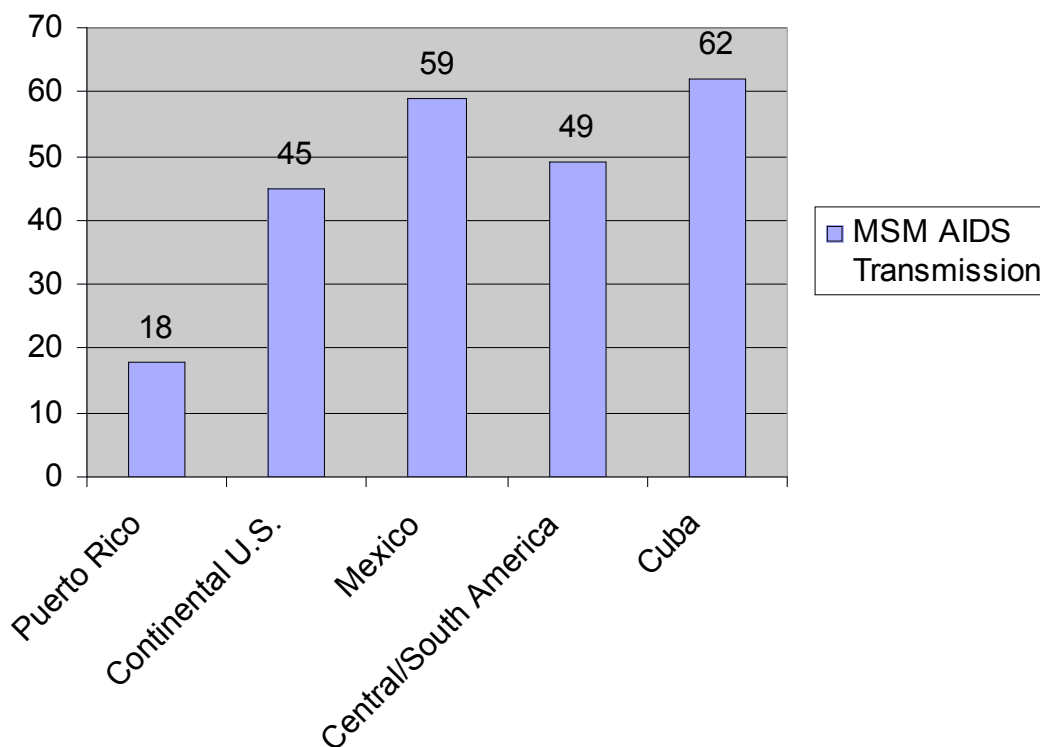
6. Centers for Disease Control. “HIV/AIDS Surveillance Report, 2006, Volume 18, Table 9.” Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2006report/pdf/2006SurveillanceReport.pdf>
7. Centers for Disease Control. “HIV/AIDS Surveillance Report, 2006, Volume 18, Table 9.” Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2006report/pdf/2006SurveillanceReport.pdf>
8. Centers for Disease Control. “HIV/AIDS Surveillance Report, 2006, Volume 18, Table 6.” Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2006report/pdf/2006SurveillanceReport.pdf>
9. Diaz, R. and Ayala, G. “National Gay and Lesbian Task Force Report: Social Discrimination and Health, the Case of Latino Gay Men and HIV Risk <<http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>>”. The Policy Institute of the National Gay and Lesbian Task Force. 2001. <http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>
10. Diaz, R. and Ayala, G. “National Gay and Lesbian Task Force Report: Social Discrimination and Health, the Case of Latino Gay Men and HIV Risk <<http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>>”. The Policy Institute of the National Gay and Lesbian Task Force. 2001. <http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>
11. Bingham, TA et al. “The effect of partner characteristics on HIV infection among African American men who have sex with men in the Young Men's Survey, Los Angeles, 1999-2000. 2003, AIDS Education and Prevention, Vol. 15, pp. 39-52.
12. Lye Chng, C. and Geliga-Vargas, J. “Ethnic identity, gay identity, sexual sensation seeking and HIV risk among multiethnic men who have sex with men. AIDS Education and Prevention. 2000, Vol. 12, pp. 326-339.
13. Centers for Disease Control. “HIV/AIDS among Men Who Have Sex with Men: Fact Sheet”.
14. Diaz, R. and Ayala, G. “National Gay and Lesbian Task Force Report: Social Discrimination and Health, the Case of Latino Gay Men and HIV Risk <<http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>>”. The Policy Institute of the National Gay and Lesbian Task Force. 2001. <http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>
15. Centers for Disease Control. “HIV Prevention among Men Who Have Sex with Men: Risk Issues among African American, Latino and Young Men”. CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6867#transcript>
16. Centers for Disease Control. “HIV Prevention among Men Who Have Sex with Men: Risk Issues among African American, Latino and Young Men”. CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6867#transcript>
17. Centers for Disease Control. “HIV/AIDS Among Men Who Have Sex with Men”. Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2007. <http://www.cdc.gov/hiv/topics/msm/resources/factsheets/msm.htm>
18. Centers for Disease Control. “HIV/AIDS Among Men Who Have Sex with Men”. Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2007. <http://www.cdc.gov/hiv/topics/msm/resources/factsheets/msm.htm>
19. Accion Mutua. “Methamphetamine Use and HIV Risk Among Latino Gay Men”. http://www.apla.org/accionmutua/resources/other/broadsheet_pdf/MethBroadsheet53106.pdf
20. Centers for Disease Control. “HIV Prevention among Men Who Have Sex with Men: Panel Discussion of Viewer Questions”. CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6888#transcript>

The stigma associated with HIV/AIDS and homosexuality, known as “rechazo” (rejection), acts as a major obstacle to prevention efforts in the Latino community. The CDC reports that prevention efforts in the Latino community are hindered by a reluctance to talk about risk factors, HIV transmission, and homosexuality.²¹ The stigma creates a “sexual silence” in which Latino gay, bisexual and transgender men carry on a secret sex life cut-off from the support and familial network necessary to overcome isolation. Hispanic men who have sex with men are less likely to identify themselves as gay than white men—a survey of HIV-infected men revealed that only 18% of Latinos equated homosexuality with having sex with other men.²² Additionally, traditional rigid gender roles and norms such as “machismo” contribute to the sense of Latino gay men being “failed men”. Dr. Diaz’s research demonstrates that such cultural norms create a low self-esteem for Latino MSM in interpersonal situations, heightening their risk as they attempt to prove their manhood.²³

Levels of acculturation are often ignored in prevention efforts with many immigrant Latino gay men.²⁴ According to previous studies, greater acculturation into the U.S. culture has been associated with the adoption of several health-protective behaviors among Hispanics, including communicating with partners about sexual safety and disclosing positive HIV serostatus.²⁵ However, high levels of acculturation are also associated with an increase in risky behaviors for HIV infection. In one study, highly acculturated HIV-positive Hispanic/Latino men were more likely to use drugs before sex, which increased unsafe sexual behavior.²⁶ Mr. Santana further explained the importance of acculturation in his interview with the CDC: “Many Latino men feel that acculturating and being part of main stream society is also engaging in high-risk behavior such as drug use and unprotected sex”.²⁷

Estimated percentage of AIDS cases in adults and adolescent Latinos, by transmission category, Men who have Sex with Men (MSM) and place of birth, - 2006 in the U.S. and dependent areas³²

NOTE: US Dependent Areas include American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands



21. AIDS Action Policy. “AIDS-related Stigma”, 2001. <http://www.aidsaction.org/legislation/pdf/stigma2.pdf>

22. AIDS Action Policy. “AIDS-related Stigma”, 2001. <http://www.aidsaction.org/legislation/pdf/stigma2.pdf>

23. Diaz, R. and Ayala, G. “National Gay and Lesbian Task Force Report: Social Discrimination and Health, the Case of Latino Gay Men and HIV Risk <<http://www.thetaskforce.org/downloads/reports/reports/SocialDiscriminationAndHealth.pdf>>”. The Policy Institute of the National Gay and Lesbian Task Force. 2001.

24. Diaz, R. et al.. “Hispanic/Latino Gay Men and HIV: Culture, Sexuality, and Risk Behavior.” 1998. Routeledge, pp. 58-59.

25. Rojas-Guyler L, Ellis N, Sanders S. Acculturation, health protective sexual communication, and HIV/AIDS risk behavior among Hispanic/Latino women in a large midwestern city. 2005, Health Education & Behavior; Vol. 32, pp. 767 – 779.

26. Marks, G, et al. “Is acculturation associated with sexual risk behaviours? an investigation of HIV-positive Latino men and women”. 1998. AIDS Care; Vol.10, pp. 283 – 295.

27. Centers for Disease Control. “HIV Prevention among Men Who Have Sex with Men: Panel Discussion of Viewer Questions”. CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6888#transcript>

28. Centers for Disease Control. “HIV/AIDS Surveillance Report, 2006, Volume 18, Table 6.” Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008.

Unknown HIV status acts as another barrier to prevention efforts for Latino MSM. A recent CDC study found that approximately 77% of young MSM who tested HIV-positive did not believe they were infected before the HIV test and 59% of these men believed that they were at low or very low risk of infection.²⁹ Knowledge of HIV status can help prevent HIV infections among MSM, because people who know they are infected with HIV are more likely to alter their behaviors to reduce risk of transmitting the virus.³⁰

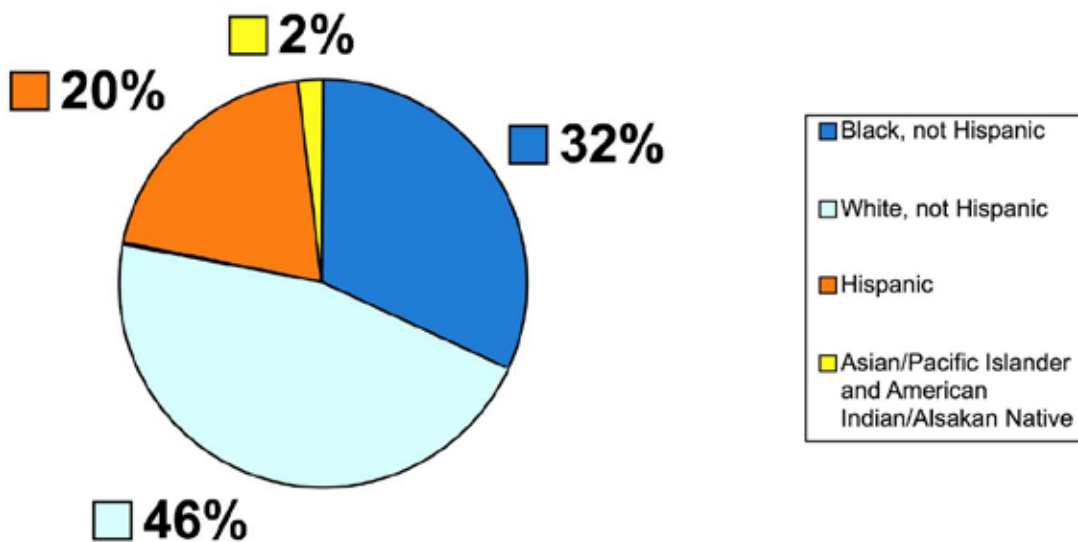
Since the introduction of highly active antiretroviral therapy, the negative aspects of HIV infection and AIDS have been minimized, giving many younger Latino MSM false impressions and beliefs about living with HIV or AIDS. For example, studies show that MSM's optimism about HIV treatment is associated with a greater willingness to have unprotected anal intercourse.³¹

Many young Latino MSM use certain internet sites as a gateway to meet sex partners. The internet can help MSM to find partners for casual sexual intercourse without the need to form a relationship.³² Therefore, there is little opportunity to discuss the need for protection or safe sex practices when the partners meet one another for anonymous sexual intercourse.

The alarming statistics on HIV/AIDS in the Latino MSM community indicate that current public health prevention efforts are not effectively reaching this unique population. There needs to be more support for the development of culturally relevant public health interventions for gay and bisexual Latino men that address the unique factors currently acting as obstacles to HIV/AIDS prevention efforts.

**Latino Men who have Sex with Men (MSM)
Reported AIDS cases for male adults, by transmission category, MSM and race/ethnicity, at the end of 2006 in the U.S. and Dependent areas³³**

NOTE: US Dependent Areas include American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands



29. Centers for Disease Control. "HIV Prevention among Men Who Have Sex with Men: Panel Discussion of Viewer Questions". CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6888#transcript>
 30. Centers for Disease Control. "HIV Prevention among Men Who Have Sex with Men: Panel Discussion of Viewer Questions". CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6888#transcript>
 31. Centers for Disease Control. "HIV Prevention among Men Who Have Sex with Men: Panel Discussion of Viewer Questions". CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6888#transcript>

32. Centers for Disease Control. "HIV Prevention among Men Who Have Sex with Men: Panel Discussion of Viewer Questions". CDC Featured Podcast, 2007. <http://www2a.cdc.gov/podcasts/player.asp?f=6888#transcript>
 33. Centers for Disease Control. "HIV/AIDS Surveillance Report, 2006, Volume 18, Table 19." Atlanta: Department of Health and Human Services, Centers for Disease Control and Prevention, 2008.