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What is This?
Health Care Diversity

HIV Among Hispanic/Latino Populations in the United States

Wei-Chen Tung, PhD, RN

Introduction
The Hispanic/Latino population is the largest and fastest growing ethnic minority group in the United States. According to 2010 US Census, there were an estimated 50.5 million Hispanics/Latinos in the United States, composing 16% of the total population. However, the latest Centers for Disease Control and Prevention (CDC) statistics report that Hispanics/Latinos accounted for 20% of all new HIV infections (42,011) in the United States in 2009. The HIV infection rate among Hispanics/Latinos (26.4 per 100,000) in that same year was almost three times as high as that of Whites (9.1 per 100,000). The CDC data also indicate that Hispanic/Latino men comprised 79% (7,400) of new HIV infections and Hispanic/Latino women comprised 21% (2,000) of new HIV infections among all Hispanics/Latinos. Hispanic/Latino men who have sex with men (MSM) accounted for the majority 81% (6000) of all newly HIV infected Hispanic/Latino men. For HIV infected Hispanic/Latino men, the most common modes of HIV transmission are male-to-male sexual contact and injection drug use. For Hispanic/Latino women diagnosed with HIV/AIDS, the main mode of HIV transmission is through high risk heterosexual contact with HIV positive men. A number of cultural, demographic, and socioeconomic factors contribute to the HIV epidemic in the Hispanic/Latino community. This column briefly reviews cultural specific factors that increase HIV vulnerability among Hispanics/Latinos. Culturally appropriate HIV prevention strategies are also discussed. It is hoped that this column will increase awareness of cultural factors affecting HIV transmission in the Hispanics/Latinos community and of culturally sensitive HIV prevention programs that are available for this population.

Cultural factors increase HIV Vulnerability Among Hispanics/Latinos

Gender norms and expectations

While Hispanic/Latino women accounted for 21% of new HIV infections among all Hispanics/Latinos in the United States, their HIV incidence rate (11.8 per 100,000) was more than 4 times the rate for White women (2.6 per 100,000). According to CDC’s 2009 National Youth Risk Behavior Survey, Hispanics/Latinos reported the lowest rates of condom use during last sexual intercourse (55%), as compared with sexually active 9th- to 12th-grade students of other ethnicities (Black 62.4%, White 63.3%). Hispanic/Latino gender norms and expectations may play an important role in HIV prevention behaviors and make Hispanic/Latino women vulnerable to HIV infections. Traditionally, Hispanic/Latino women are expected to be submissive to their male partners and not question male authority. This gender-based expectation prevents Hispanic/Latino women from questioning their male partners about sexual history and negotiating condom use. Consequently, many Hispanic/Latino women may be unaware of their male partner’s risk factors until their partners become ill, or they become symptomatic. In addition, some Hispanic/Latino women may feel powerless to insist on using a condom because they fear that their male partners will physically abuse or leave them.

Machismo

This Hispanic/Latino culture of machismo may also contribute to the risky sexual behaviors and have negative consequences for HIV prevention. Machismo is a social behavior pattern in which the Hispanic/Latino man exhibits an overbearing attitude to any one in a position inferior to his. For some Hispanic/Latino men, machismo may lead them to view sex as a way to prove their masculinity. Therefore, condom use is usually determined by men rather than women. The traditional belief of machismo also grants Hispanic/Latino men sexual freedom to engage in behaviors that women are forced to accept (e.g., seeking outside the marital relationship). Thus many Hispanic/Latino women

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infected through heterosexual contact are in long-term, perceived monogamous relationships due to their male partner’s risky sex behaviors, such as sex with multiple partners or unprotected sex with women or men.

**Homophobia and Stigma Associated to the Disease**

The stigma around homosexuality (homophobia) among Hispanic/Latino communities discourages MSM from identifying themselves as gay or bisexual. Traditional gender norm of machismo also contributes to the sense of Hispanic/Latino gay men being failed men. Some married Hispanic/Latino men who also have sex with men may carry on a secret sex life. As a result, Hispanic/Latino women may be unaware of their male partner’s risk factors and identify themselves as being invulnerable to HIV infection, which can increase women’s vulnerability to HIV infections.

Since many Hispanics/Latinos believe that HIV only affects homosexual people or prostitutes, this stigma associated with an HIV diagnosis and what it represents about sexuality may cause Hispanic/Latino people to avoid getting tested for HIV or to avoid medical care because their HIV infection may become known and lead to rejection by family members, friends, and coworkers.

**Acculturation**

The associations between acculturation and sexual behavior and access to health care among Hispanics/Latinos have been reported. Less acculturated Hispanic/Latino men are more likely to have multiple partners than are more acculturated men. Among Hispanic women, those who are less acculturated are less likely to have multiple partners than are more acculturated women. These results could be explained by that less acculturated Hispanic/Latino men and women may hold certain cultural values (e.g., machismo, traditional gender norms). Moreover, less acculturated Hispanics/Latinos are less likely to access health care in the United States and more likely to have fewer HIV tests than more acculturated Hispanics/Latinos.

**Culturally Appropriate HIV Prevention Strategies**

Because of power imbalance in Hispanic/Latino male and female relationships, special attention must be given to developing strategies that empower Hispanic/Latino women and encourage them to actively engage in HIV prevention strategies (e.g., negotiating condom use with sexual partners). Intervention activities could include modeling skills for communication with partners about condoms, social support, and corrective feedback.

The culture of machismo has negative consequences for HIV prevention in Hispanic/Latino communities. However, machismo can have positive implications for HIV prevention. Hispanic/Latino men should be educated there are other outlets for the expression of machismo that permit them to display their manhood, their courage, and promote the family identity in ways that do not place the individual at risk for HIV, such as protection of the family members from disease. HIV prevention programs should also focus on recognizing harmful gender roles and emphasizing the importance of minimizing the number of sexual partners and addressing other risky behaviors to prevent the spread of HIV.

Lower level of acculturation into the U.S. culture has both negative (e.g., men are more likely to have multiple partners, less likely to access health care, more likely to have fewer HIV tests) and positive (e.g., women are less likely to have multiple partners) effects on the HIV behavior of Hispanics/Latinos. HIV prevention programs designed to improve HIV-related behaviors and the use of HIV services must consider individuals’ stage of acculturation.

Health care providers play an important role in directing Hispanics/Latinos to accurate sources of HIV information and motivating them to be screened and treated for diseases. Health care providers caring for Hispanics/Latinos should be familiar with the available local/state/national interventions that are targeted at cultural factors such as gender roles and machismo. For example, several CDC-funded culturally relevant interventions designed to increase condom use and improve condom negotiation have been proven effective at increasing condom use with Hispanic/Latino men and women (e.g., 3MV, CLEAR, Cuidate, Community PRPMISE, RESPECT, SEPA, Sisters Saving Sisters, VOICES).

**Summary**

Epidemiological data demonstrate the disproportionate impact of HIV/AIDS on Hispanic/Latino communities. The issues contributing to the disproportionate impact of HIV/AIDS on U.S. Hispanic/Latino populations are complex. Cultural factors are important when working with this population. Health care professionals can reduce the impact of HIV/AIDS among Hispanics/Latinos through culturally sensitive approaches.

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