

what are Black men's HIV prevention needs?

why is HIV a concern?

HIV is currently a major health crisis among Black and African American men of every age and sexual orientation.¹ In 2000, AIDS was the leading cause of death among Black men 35-44 and the third leading cause of death for all Black men 25-44.² Rates of HIV are higher among young African American men who have sex with men (MSM) than among any other racial or ethnic group.² HIV+ Black men also have the poorest AIDS survival rates.¹

HIV/AIDS is not the first health crisis faced by Black men and will not be the last one. Black men face many health disparities and are overrepresented in many diseases such as homicide/unintentional injury, cancer and heart disease. HIV presents a different challenge because it is transmitted through sex and drug use, topics that are difficult to discuss and often stigmatized in many communities.

who are Black men?

Racial identification and sexual identification cannot be lumped into a one-size-fits-all category for Black men or other groups. Not every person who looks Black or African American will identify with these labels. In the US, Black and African American men represent a diverse group, including, but not limited to, Afro-Cuban, Caribbean, Brazilian or African national men.

Similarly, Black and African American men formulate and understand their sexual and gender identities in many ways, and the terms for sexual identification, orientation and behavior often do not reflect this.³ For example, a Black man who has had sex with women and men may be seen by the CDC's risk classification as "male-to-male sexual contact," by researchers as "bisexual" or "MSM," by newspaper articles as "on the down low," by activist groups as "same gender loving" or by his partners as "straight."

what affects HIV risk?

We know how HIV is transmitted, be it among Black men or any other man: through unprotected vaginal or anal intercourse with an HIV+ person or sharing injection equipment with an HIV+ person. We know much less about how psychosocial, contextual, political and historical forces influence Black men's risk taking. Education, employment and incarceration must be addressed, especially with financially marginalized men.

Black and African American men face discrimination in education and employment. Black male children in schools are often characterized as disruptive and are channeled into "special education" classes. This results in fewer Black male youth entering high school.⁴ Because of this, Black men often cannot obtain gainful employment, putting them at a significant disadvantage in our technological economy. Lack of employment is linked to increased involvement in activities that can increase risk of HIV infection such as substance use, commercial sex, homelessness and incarceration.

The HIV epidemic among Blacks in the US is related to the epidemics of heroin and crack cocaine abuse.⁵ Drug abusers often face addiction, poverty, homelessness, stigma, depression, mental illness and past trauma; all of which can affect HIV risk behaviors such as sharing injection equipment.⁶

Nearly one-third of all Black and/or African American men have been incarcerated either as adolescents or adults.⁷ This negatively affects Black men's ability to keep and maintain jobs and relationships. Maintaining a sexual relationship with just one person is difficult when Black men are incarcerated at high rates and cycle in and out of the prison system. Fewer available Black men in the community means Black couples have less opportunity for long-term monogamy and more chance for multiple partnerships, which may increase the risk of HIV/STD transmission.⁸

In the US there has been a significant history of sexual exploitation and objectification of the Black male. Black men often are referred to by their presumed sexual preoccupation and/or prowess rather than being seen as complex multi-dimensional beings with strengths as well as weaknesses.⁹

Says who?

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what are protective factors?

Many organizations across the country promote strength and bonding among Black men. Fraternities, barber shops, civic groups such as 100 Black Men and others build on the strength of Black men by providing positive role models, promoting African American history and culture and collaborating with businesses and institutions of higher learning.¹⁰

Family, community and spirituality are important support systems that can protect Black youth from HIV risk. Strong families where parents and adult caregivers monitor and talk to their children are key to promoting healthy behaviors.¹¹ The Black church can provide guidance and HIV prevention education, and can set an example by addressing and destigmatizing drug use, homosexuality and HIV.¹²

what's being done?

African American adolescents in Philadelphia, PA were offered an HIV prevention program addressing both abstinence and safer sex. Abstinence intervention participants reported less sexual intercourse after 3 months, but not at 6- or 12- month follow-ups. For youth who reported prior sexual experience, those in the safer sex intervention reported less sexual intercourse than those in the abstinence intervention at 3-, 6- and 12-month follow-ups. Both approaches reduced HIV sexual risk behaviors in the short-term, but safer sex interventions may have longer-lasting effects than abstinence interventions, and may be more effective for sexually experienced youth.¹³

People of Color in Crisis (POCC) in Brooklyn, NY, has been active in providing HIV/AIDS prevention and intervention efforts to Black men and women for many years. "Many Men, Many Voices" is an interactive and experiential group intervention designed for gay men of color. Trained facilitators lead six weekly group sessions to help men feel safe and accepted with positive social support.¹⁴

Concerned Black Men (CBM) is a service organization for males founded and run by Black men to provide positive role models for Black children. CBM has 21 chapters across the US that offer programs for preventing violence, substance use, school drop-out, pregnancy and STDs/HIV, as well as promoting self-esteem, conflict resolution and planning for higher education.¹⁵

The Down Low Barbershop Project works with barbers/stylists in Black communities to provide Black men with HIV education and condoms, and referrals for free HIV counseling and testing. Barbers receive two 8-hour HIV prevention trainings, then recruit ten of their clients for a 4-hour training. Barbershop owners, barbers and clients are all paid for their involvement and clients who attend receive a coupon for a free haircut. The Down Low Barbershop Project takes place through Brother to Brother in Seattle, WA and Us Helping US in Washington, DC.¹⁶

what needs to be done?

HIV prevention agencies must acknowledge underlying cultural and social factors in the Black community. There is a broadening gap between haves and have-nots, with the majority of HIV risk and infections occurring in low-income communities.³ Programs need to address issues of employment, education, incarceration, addiction and stigma in addition to sexual and drug risk behaviors.

In order to provide a comfortable atmosphere for open discussion about sensitive sexual and drug use issues, research and prevention programs should take place in familiar settings away from clubs, bars or other sexually-identified venues.¹⁷ Collaborating with cultural, religious and civic organizations that historically reach Black men can help recruit and involve Black men.¹⁸

Prevention programs should link with other programs such as drug treatment, violence prevention, scholastic enrichment, family planning, cultural strengthening and business organizations to help support Black men as a whole, working with the richness and complexities of modern Black male life.

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