

RELATIONSHIPS AS RISK FOR HIV INFECTION: HIGH RISK SEX, SUBSTANCE ABUSE, AND VIOLENCE AMONG HISPANIC MEN WHO HAVE SEX WITH MEN*

RELACIONES COMO RIESGO DE INFECCIÓN POR VIH: SEXO DE ALTO RIESGO, ABUSO DE SUSTANCIAS Y VIOLENCIA ENTRE HOMBRES HISPÁNICOS QUE TIENEN SEXO CON HOMBRES

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RESUMEN

*Los hombres que se involucran en actividades sexuales con hombres (HSH) experimentan una serie de disparidades de salud, incluyendo altas tasas de infección por VIH, que se relacionan a actividades sexuales riesgosas y múltiples parejas, y a comportamientos sexuales riesgosos. Sin embargo, se conoce muy poco acerca de las relaciones entre HSH hispanos y de los factores que contribuyen al riesgo dentro de estas relaciones. Objetivos: El propósito de este estudio es explorar mediante el uso de métodos cualitativos, los factores responsables del comportamiento sexual de alto riesgo dentro de las relaciones primarias entre HSH hispanos, Métodos: Se reclutaron veinte HSH hispanos de comunidades del sur de Florida, para participar en grupos focales grabados en audio. La información obtenida fue transcrita y analizada utilizando análisis de contenido. Se recolectó información hasta obtener un nivel de saturación. Resultados: Los participantes identificaron temas que contribuyen al riesgo: drogas/alcohol, sexo fuera de la relación, encubrimiento de infección por VIH, violencia, violencia sexual consensual y no consensual y ausencia de apoyo familiar. También describieron la relación entre riesgo sexual, uso de sustancias y violencia. Conclusiones: Los resultados de este estudio proporcionaron importantes implicaciones clínicas a los profesionales de salud que brindan cuidados a HSH hispanos. **Palabras clave:** Hispánicos, riesgo de VIH, investigación cualitativa, relaciones.*

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ABSTRACT

Men who have sex with men (MSM) experience a number of health disparities including high rates of HIV, which are related to high risk sexual behaviors and multiple sexual partners, and also to high risk sexual behaviors. However, relatively little is known about relationships among Hispanic MSM, and about the factors that contribute to risk within these primary relationships. **Aims:** The purpose of this study is to use qualitative methods to explore the factors responsible for high risk sexual behavior within primary relationships among Hispanic MSM. **Methods:** Twenty Hispanic MSM were recruited from community sites in South Florida to participate in audiotaped focus groups. Data from the focus groups were transcribed and analyzed using content analysis. Data were collected until saturation was achieved. **Results:** Participants identified topics that contribute to risk: drugs/alcohol, outside sex, concealment of HIV infection, violence, consensual and non-consensual sexual violence, and absent family support. They also described the relationship of sexual risk, substance abuse, and violence. **Conclusions:** The results of the study provided some important clinical implications for clinicians providing care to Hispanic MSM. From the results of this study, directions for future research focused on the relationships of Hispanic MSM are evident. **Key words:** Hispanics, HIV risk, qualitative research, relationships.

INTRODUCTION

Men who have sex with men (MSM), including Hispanic MSM, continue to experience high rate of HIV infection¹. The high rates of HIV infection are largely related to participation in high risk sexual behaviors such as unprotected anal intercourse (UAI), which is common among Hispanic MSM².

To reduce the risk of HIV infection, MSM are encouraged to refrain from engaging in UAI and to decrease the number of sexual partners¹. Strategies to decrease the HIV risk include developing and maintaining monogamous relationships among MSM and awareness of each partner's HIV status³.

Just as relationships among MSM may be protective against HIV infection, relationships may also serve as a source of HIV risk. This risk is present when high risk sex occurs outside the primary relationship with men of unknown HIV status³. In fact, some researchers hypothesize those new cases of HIV infection may be related to high risk sexual behaviors that occur within primary relationships^{4,5}.

Relatively little is known about relationships among MSM, and even less is known about the relationships of Hispanic MSM. It is important to study relationships

and how they impact HIV risk among MSM because relationships have the potential to influence or impact each partner's belief regarding sexual behaviors³. In addition, current HIV prevention interventions targeted toward MSM are focused on the individual, and have not considered the impact that relationships among MSM may have on sexual behaviors, and ultimately HIV risk⁶. Given the dearth of research on the factors that contribute to HIV risk among Hispanic men in relationships, the objective or purpose of this study was to conduct a qualitative exploration of the impact that relationships have on risk behaviors of Hispanic MSM.

Review of the Literature:

A number of studies conducted over the past 10 years have examined risk behaviors in the context of gay relationships among the general population of MSM. These studies have identified a number of factors within the context of MSM relationships that may be related to HIV risk. One such factor that place MSM at risk is trust among sexual partners. As trust and love increase, condom usage decreases. This poses a risk factor for both partners

when external relationship sex occurs, and partners report difficulty or reluctance to disclose these relationships to the primary partner⁷.

Sex outside of primary relationships among MSM is common. In addition, external relationship sex often involves high risk sexual behaviors, but many MSM do not express concern over the risk that these sexual relationships pose to both partners⁸. Some evidence suggests that MSM who engage in external relationship sex engage in high risk sex with both the primary and casual partners, thereby posing a risk for multiple persons⁹.

Another factor that influences risk in MSM relationships is relationship agreement about outside sexual partners. Previous researchers have noted that MSM have discussed sexual agreements with their partners, yet do not always abide by these agreements¹⁰. One study in particular notes that almost 25% of MSM in primary relationships reported that they had broken the relationship agreement, which may expose both partners to HIV infection⁶.

Relatively little is known, however, about factors that place Hispanic MSM at risk for HIV infection in the context of primary relationships between men. It is known that Hispanic MSM within primary relationships engage in a number of high risk sexual behaviors such as UAI, substance abuse before or during sex, contact with partner's body fluids, and failure to negotiate safer sex behaviors with partners². Factors identified in previous research that may decrease HIV risk among Hispanic MSM in primary relationships include practical sexual agreements, HIV knowledge, participation in support groups, and receiving social support from family and peers for maintenance of the primary relationship¹¹.

In spite of the studies on relationships among the general population of MSM, and the limited studies among Hispanic MSM, an evident gap in the research

literature exists. Studies that have examined the factors that place Hispanic MSM in relationships at risk for HIV infection have not been fully conducted. To address this identified gap in the research literature, a qualitative study to describe the factors within the context of Hispanic MSM relationships is warranted. Therefore, the purpose or objective of this study is to conduct a qualitative study that explores factors within relationships of Hispanic MSM that promote risk for HIV infection.

METHODS

Design

The data presented in this study are unpublished data from a secondary analysis of a larger qualitative study that examined risk factors and behaviors of a sample of Hispanic MSM residing in South Florida¹². During data analysis of this qualitative study, it became apparent to the research team that large amounts of data were collected that described the risks that relationships pose for HIV among Hispanic MSM. This data allowed members of the research team to meet the study objective of describing factors within the context of relationships among Hispanic MSM that contribute to HIV risk. To analyze and report this data on relationship risks, a descriptive qualitative research design was used.

Qualitative descriptive designs are probably the least theoretical of all qualitative designs. This qualitative design tends to be more congruent with naturalistic inquiry, and less concerned with methodologies of other qualitative traditions. Unlike other qualitative traditions such as ground theory employ a strict method, qualitative description allows the research to combine qualitative methods and to draw on other methods of qualitative inquiry¹³.

A qualitative descriptive design is appropriate for use when researchers want straightforward answers to research questions that are relevant to practice including

participant concerns, thoughts, attitudes, and feelings¹³. Unlike other methods of qualitative research that require the researcher to interpret data, qualitative description allows the data to be analyzed in its natural state. Data in its natural state are less likely to be misinterpreted during data analysis¹⁴.

Setting

The study's setting was South Florida, USA. This area of the U.S. has a large number of Hispanics, including a large number of recent immigrants. Study data were collected at a large private university in South Florida. The focus groups were conducted in a large, private conference room located at the medical campus of the university.

Procedure

Participants were recruited from bars, clubs, cafes, and other establishments that cater or provide services to Hispanic MSM. Potential participants were approached by a member of the study team and invited to participate. Potential participants were provided with a business card with the telephone number that the participant could call for an eligibility screening. Once the eligibility screening was completed, participants were scheduled to attend one of the four focus groups.

Data were collected during focus group sessions. Three focus groups were conducted with eight participants in the first group; seven participants in the second focus group; and five participants in the third focus group. The focus groups were conducted in Spanish by two researchers who are bilingual in English and Spanish. All focus groups were audio-recorded. The audiotapes were transcribed in Spanish by a graduate student, and then translated into English by another bilingual researcher. The focus groups were structured using an interview guide. Both the original transcript and the English transcript were used for data analysis.

Protection of Human Subjects

The study was approved by the University's Institutional Review Board. Before participating in one of the focus groups, a participant was required to complete a signed informed consent. Participants were also asked to sign an additional consent giving the researchers permission to audiotape the interview.

To protect participants' privacy and confidentiality, a number of steps were taken during data collection. First, all focus group participants were briefed by the researchers prior to data collection on the confidential nature of the focus groups, and the importance of maintaining this confidentiality. Second, participants were asked not to provide any identifying information about them on the audiotape.

Table 1. Sample Characteristics (N = 20)

Demographic Variable		Number
Age	20-29	2
	30-39	4
	40-49	9
	50-59	5
Country of Origin	Cuba	9
	Puerto Rico	2
	Honduras	2
	Nicaragua	2
	Colombia	2
	Costa Rica	1
	Perú	1
	Chile	1
Income	Less than \$500/month	9
	\$500-\$999/month	6
	\$1,000-\$1,999/month	3
	Not reported	2
	Educational Level	
	Less than 12 years	7
	12 years	2
	More than 12 years	11

Because of the sensitive nature of the data collected, a Certificate of Confidentiality was obtained by the National Institutes of Health.

Sample

Twenty Hispanic MSM participated in this study. The participants ranged in age from 26 to 54 years of age (M = 43.60, SD = 8.61). Ten participants reported that they were infected with HIV; eight were HIV antibody negative; and 2 participants were not aware of their HIV status. A more complete demographic description of the study's participants is included in Table 1.

Analysis

Consist with the use of a qualitative descriptive design; data were analyzed using content analysis. Like other forms of qualitative research, content analysis has established concepts, procedures, and methods to ensure trustworthiness of the data¹⁵. Techniques for content analysis as described by Krippendorff¹⁵ were followed. The use of content analysis first involves the selection of the unit of analysis¹⁶. In this study, the units of analysis are the focus group interviews that are focused on the impact that relationships have on risk behaviors of Hispanic MSM. Content analysis is concerned with manifest and latent content. Manifest content is focused on the obvious meaning of the data, while latent content is focused on the underlying meaning of the data¹⁶.

Data were analyzed using condensation, the process by which data are shortened while preserving their meaning. This led to the identification of codes and categories that are used to provide a description of the study's findings¹⁶.

Trustworthiness of the data is a concern with qualitative research. Three methods to ensure trustworthiness of the data were used in this study, as described by Lincoln and Guba¹⁴. These include credibility, dependability, and transferability^{14,15}. Credibility was achieved by using

quotations from participants to illustrate the study's findings, and to ensure that these quotations are reflective of the data by having all members of the research team agree on their meaning. Maintaining an open dialogue among members of the research team in terms of data analysis ensures dependability of the data. Transferability was achieved by the description of culture, context, and participants combined with appropriate quotes from the participants that will enhance transferability of the data to the population of Hispanic MSM.

RESULTS

The focus group participants were able to provide rich descriptions of how intimate relationships are a source of risk for Hispanic MSM. The risks that are present in these relationships stem from high risk sexual behaviors, substance abuse, and intimate partner violence (IPV). Participants reported that high risk sexual behaviors, substance abuse, and IPV were co-occurring phenomena that frequently transpire in Hispanic MSM relationships. The following factors were identified as sources of risk that occur among Hispanic MSM in intimate relationships, and are included in Table 2.

Drugs and Alcohol as Risk

Participants identified that the use of drugs and alcohol was the point of origin for risk among Hispanic MSM in relationships. The use of drugs and alcohol was a new experience for many of the focus group participants, as drugs and alcohol were not readily available in their county of origin. Immigration to the U.S. provided them an opportunity to use alcohol and drugs. This use often resulted in participation in high risk sexual behaviors, as described by one of the focus group participants:

"When I came to Miami, it was like something new. I have never used drugs or alcohol, but I have been around partners that have used them. And really for me it

Table 2. Factors Influencing HIV Risk in the Context of Hispanic MSM Relationships

Category	Condensed Meaning Units
Drugs and alcohol as risk	Drugs and alcohol as a new experience for recent immigrants Drugs and alcohol were not readily available in the country of origin Use of drugs and alcohol during sex Preference for drug and alcohol use during sex Drugs and alcohol use interfering with condom use
Sex outside the relationship as risk	Common practice to have sex outside the relationship Sex outside the relationship is concealed from the other partner Sex outside the relationship often involves high risk sex Results from dissatisfaction with the relationship Partners may not realize the risk of sex Some may not like that sex outside the relationship occurs, but they accept it Use of sex outside the relationship to preserve the relationship
Concealment of HIV infection	Partners may not disclose their HIV status Person with HIV infection may engage in high risk sex during moments of passion Some persons may intentionally infect others
Violence as risk	IPV is common among Hispanic MSM IPV may be related to jealousy because of sex outside the relationship IPV may be more common among younger MSM IPV may continue throughout the course of the relationship IPV is a lack of respect that one partner has for another Belief that IPV occurs because victim allows it to occur
Sexual Violence	Sexual violence includes rape and psychological damage Sexual violence is not discussed with friends or family
Consensual sexual violence	Consensual sexual violence may be an accepted form of sexual expression May stem from childhood violence
Absent family support	Lack of disclosure of sexual orientation to family Fear of rejection Physical distance from family of origin Lack of social support when there are relationship issues
Relationship of sex, substances and violence	Drugs and alcohol lead to a loss of judgment The relationship of stress and violence Need for communication and respect in relationships Lack of conscious regarding sex Mental health: low self-love and self-esteem May need more sexual partners to increase self-worth

was something new: to see people that actually have to use drugs in order to have sex. That is what is happening and people get HIV and other things this way”.

According to the participants, once Hispanic MSM experimented with drugs and alcohol during sex, many participants enjoyed this experience and continued to engage in alcohol/drug use with partners

during sexual activity. One focus group participant described his preference for drug and alcohol use during sex with his partner and the resulting risk that occurred:

"Having sex with drugs is awesome! Because you reach maximum pleasure, because there is no other way, you know, it terms of man to man sex. You have to be honest. I was always on drugs and alcohol and crazy things happen when you and your partner are under the influence. Doing a lot of things that sometime later you regret. You get high and forget to use a condom"

Sex Outside the Relationship as Risk

The focus group participants reported that sexual relationships outside of the primary relationship pose risk to both of the partners. The participants noted that sex outside of primary relationships is common among Hispanic MSM, and these sexual encounters are often without the other partner's knowledge and often involve unsafe sexual behaviors. Often times these sexual relationships outside the primary relationship result from dissatisfaction with the primary relationship, as described by one of the focus group participants:

"When the food is bad at home, you look for better in the streets. There's rice and beans and you want to eat meat."

The problem with these outside sexual relationships is that they pose a risk for HIV and STIs for both partners, but one participant reported how Hispanic MSM do not perceive the risk that these sexual encounters carry: *"Latins have not understood that they have to use protection."*

I am going to live as I want, but I want to feel good things. It is more important to feel good than to take care of ourselves".

Another participant agreed with this by stating:

"Generally I couldn't deal with seeing my partner with another person, even if he did it right in front of me. It hurts just as

much as what they do behind your back as what they do in front of you. My partner said to me, "Look, I am going to have sex. I will see you tomorrow and tell you what I did." And there are many gay people who deal with this and live a bitter life because they are willing to accept this".

Although all focus group participants reported that the sex outside of the primary relationships of Hispanic MSM is common and has a potential to destroy the relationship, some participants reported that sexual relationships outside of the primary relationship may actually preserve it. One participant described this in the following manner: *"What I think is important is that they (both partners) are in agreement on what they want and how to live their life as a couple. If they are both in agreement to have certain experiences outside of the relationship and it feeds them and brings them closer together, then I don't think it is wrong. People here don't fall or stay in love. It is convenient that we stay together. There isn't a strong foundation to the relationship".*

Concealment of HIV Infection

Participants in the focus groups reported that sex with primary or casual partners who are infected with HIV are a source of sexual risk for them. Often, according to the participants, the HIV-infected partner does not inform the other partner of their HIV status. Concealing the diagnosis and engaging in high risk sexual behaviors places the uninfected partner at risk for HIV infection, as described by two of the focus group participants:

"I don't consider it correct because if one of partners is HIV-positive, you can't tell me that in this relationship someone is going to go beyond for pleasure and forgets to use a condom".

"Just because somebody gave it (HIV infection) to me, doesn't mean that I am going to give it to anybody else. I know there are people who say, "Well, if they gave it to me, I'll give it to a few others be-

fore I die. I'll take a few with me." Just like that with such egotism! If someone gives me HIV it was my fault—it wasn't anyone else. Everything that happens in your life the only fault is with you, you know?"

Violence as Risk

Just like sex outside of primary relationships, intimate partner violence (IPV) is common in Hispanic MSM relationships according to focus group participants. There participants reported that IPV often results from jealousy between the partners that is often related to casual sexual relationships outside of the primary relationship. One focus group participant detailed how IPV serves as a source of risk for Hispanic MSM:

"There is a sick relationship of jealousy and violence. This is a really bad relationship. The first person I had was an extremely jealous person, a very jealous person. This relationship was really bad: hitting and ripping clothes. During that time many things happened when we were younger, and you really didn't care. But once you get a certain age, you start becoming a bit more serious and you try to find a partner that is more stable and the most important thing is that there is love and respect. It's the most important thing in a relationship. But once the relationship gets to the point when they give you the first punch, it will continue to go on".

Participants agreed that the source of violence was the lack of respect that the aggressive partner has for the partner who is experiencing IPV. Participants reported that when one partner disrespects the other or if one partner allows himself to be disrespected by the other partner, then IPV may occur within the relationship:

"It seems to me that the problem is that respect has to be there. I've never had problems with violence in my relationships, thank God, but I've seen people who have experienced violence and the fault belongs to the person who has been violated because he hasn't respected himself and he

has allowed people to be violent towards him".

Sexual Violence

In addition to IPV, participants reported that sexual violence may occur in Hispanic MSM relationships. This sexual violence takes the form of rape of one partner by the other partner. This sexual violence is not only psychologically damaging, but may serve as a source of HIV infection. One participant described his experience of sexual violence in a former intimate relationship:

"...And the worst thing in the world is when the person you love wants to take you by force. That is rape. Who are you going to talk to about this? You can't tell your parents. Your friends notice a lot of things, but they don't open your eyes either".

Consensual Sexual Violence

Sexual violence in the form of rape is not a consensual sexual encounter; however, the focus group participants noted that sometimes consensual violence is an accepted form of sexual expression among Hispanic MSM. According to the participants, the origins of violence as a part of sexuality may be rooted in childhood experiences with violence. One participant summed up the role of consensual sexual violence in the sexual relationships of Hispanic MSM:

"Violence may become a part of sex. Why do I need so much violence to satisfy myself? The partner represents violence. And there has to be a reason for this. When you analyze it, many times you realize it was because there was violence during childhood. The person who has experienced this cannot have sex if it is not like that, if there is sex without violence".

Absent Family Support

Hispanic MSM participating in the focus groups reported that another risk for Hispanic MSM in relationships is a lack

of family support. Many times these men have not disclosed their sexual orientation to family members because of fear of rejection or because of physical distance from the family related to immigration. When there are problems such as high risk sex outside the primary relationship, substance abuse, or violence, often these men do not have access to social support. This results in increased risk of psychological stress and even physical risk as described by one focus group participant:

"Hiding yourself from your family is different and difficult because they have formed an image of you that you have not formed. They don't know what is true. And so the day that you want to come out, it's hard for you because your parents have created an image is different from the one you have created for them. And when there are problems (in the relationship), who do you turn to"?

The Relationship of Sex, Substances, and Violence

Focus group participants were asked how sex, substance abuse, and violence occur in relationships among Hispanic MSM. Participants were able to describe the relationships of these risk factors within the context of Hispanic MSM relationships with a few selected quotes from participants:

"I think there are two problems: drugs and alcohol. When these things are in any relationship HIV is likely to occur because the people lose their judgment. And in losing your judgment you aren't concerned. You get all heated up and the drugs and alcohol are added and there's no control because you do what you have to do. And so it contributes to not using a condom because judgment is lost ..."

Another participant reported:

(As for violence) "we live with too much stress. We identify with violence, mostly verbal. There are highs and lows (in the relationship), but I think something can be done, you know? Especially if there is

communication and respect. As far as sex, (it) is a problem of upbringing and conscience that you have about the problem. Everyone needs to begin to acquire some type of conscience".

A third participant added:

"Maybe what is responsible for this (the relationship of sex, substance abuse, and violence) is mental illness, no self-love, or no self-esteem. They don't love life. I say low self-esteem because I think that people that have the lowest self-esteem are Latins. (However), Latins always feel they are superior to others...The more men you have means that "I am better. I am the best." They are very promiscuous in that aspect. Latins don't keep one single partner because that makes them more manly or makes him feel superior. For Latins, the experience is never sufficient. When they reach 500 (sexual partners), it is when they feel they have reached it".

DISCUSSION

The objective of this research study was to describe factors within Hispanic MSM relationships that promote risk for HIV infection. The high rates of HIV infection among this subpopulation of MSM¹ coupled with the fact that relationships may serve as a catalyst for HIV risk among MSM^{4,5}, and noting that little is known about Hispanic MSM relationships, this study was warranted.

This study identified a number of factors within the context of Hispanic MSM relationships that may contribute to the risk of HIV infection. This study's findings support the existing body of research and provide some new findings that are specific to document the unique risks that Hispanic MSM in relationships experience.

The first theme, Drugs and Alcohol as Risk, emerged as a risk for HIV infection among Hispanic MSM in relationships. Participant noted that drugs and alcohol served as a risk for HIV infection, and this relationship has been noted in previous research^{17,18}. Because all participants were

foreign-born, they reported that drugs and alcohol were often not available in their country of origin, but upon arrival to the U.S., the opportunity of the use and abuse of substance during sexual behaviors was evident. This finding is supported in the literature by Nakamura and Zea¹⁹ who reported that acculturation was associated with high risk sex and drug use/abuse among Hispanic MSM.

Also included under the theme of Drugs and Alcohol as Risk is the fact that Hispanic MSM in relationships engage in alcohol and drug use/abuse during sex in order to increase sexual pleasure. This finding is supported by previous^{20,21}. Although not reported by the participants in this study, the use of drugs/alcohol during sex may also be related to the need to increase endurance, to decrease the pain threshold²¹, to decrease sexual inhibition^{20,21}, or as a means of coping with sexual orientations²⁰. This needs to be further investigated to obtain a better understanding of the reasons for substance use/abuse during sex among Hispanic MSM in relationships.

The second theme, Sex Outside the Relationship as Risk, included the perception by the participants that sex outside of the primary relationship was a common occurrence. Moreover, these sexual encounters were often deceptive in nature. This finding is supported by the work of Gomez and colleagues⁶ who noted that undisclosed sexual activities were common in MSM relationships. Although the participants in the study reported that they did not desire sex outside of the primary relationship, Hispanic MSM in relationships may differ from the general population of MSM. Previous research has noted a range of relationships among the general population of MSM that include both open and closed relationships, as well as numerous variations⁷. More research is needed to identify the occurrence of both open and closed relationships among Hispanic MSM and to identify both the protective and risk

factors that relationships among Hispanic MSM may pose. In addition, more research is needed to understand the perception of HIV risk among Hispanic MSM.

Concealment of HIV infection also provided a source of HIV risk for Hispanic MSM. The participants in this study reported that their partners would conceal HIV status and then engage in unprotected sex, which may result in acquisition of HIV infection. The participants hinted that HIV-infected partners deliberately infected their partners. Concealment of HIV status is well-documented in the literature, and one study found that nearly 20% of people with HIV infection do not disclose their HIV status to their sexual partners²². However, research evidence to support the notion that HIV-infected MSM intentionally infect others cannot be found. More research is warranted to understand reasons why HIV-infected Hispanic MSM conceals their HIV status from primary and casual sex partners.

Intimate partner violence (IPV), sexual violence, and consensual sexual violence contribute to Violence as Risk. Participants believed that jealousy, a lack of respect, and a need to control partners contributed to IPV. This is consistent with previous research on IPV that notes that abusive partners employ a number of tactics including physical, psychological, and sexual actions and threats to intimidate and control partners²³. It has been noted that IPV is a significant problem for Hispanic MSM, as it contributes to HIV risk²⁴. As noted by one of the participants in the study, the risk for IPV and resultant high risk sexual behavior among Hispanic MSM may be related to childhood sexual abuse (CSA) as Hispanic MSM have the highest rates of CSA when compared to Blacks and Caucasians²⁵. More research is needed to explore how physical, psychological, and sexual violence during both childhood and adulthood contribute to sexual risk among Hispanic MSM.

Absent Family Support was the final HIV risk factor identified by participants. The participants reported that the lack of family support often stemmed from concealing sexual orientation from the family or origin, distance from the family because of immigration, and failing to discuss relationship issues with the family of origin. This lack of support often resulted in ineffective coping strategies such as substance abuse, and placed the men at risk for IPV. This combination often resulted in depression. Absent family support in the form of family rejection has been shown to increase the risk for high risk sex, drug use, and mental health conditions among Hispanic MSM²⁶. More research is needed to explore sources of social support available to Hispanic MSM²⁶, especially when family support is not available. Exploration of other sources of social support to assist Hispanic MSM to decrease high risk sexual behaviors is needed.

The results of this study suggest that high risk sex, substance abuse, and IPV all contribute to HIV risk for Hispanic MSM within the context of primary relationships. These health risk behaviors form co-occurring health issues for Hispanic MSM. This study is one of the first to explore these overlapping health issues within the context of Hispanic MSM relationships. The results of this study support previous research HIV risk among MSM in primary relationships^{6,10}. Little attention has been paid to Hispanic MSM relationships. This is unfortunate as relationships among Hispanic MSM can serve an important role in decreasing HIV risk. Hispanic MSM in relationships can be taught to negotiate sexual agreements, provide a platform for education about HIV risk, and may provide much needed social support¹¹. Relationships are both a risk and are protective against HIV risk. However, more research is needed regarding the types of relationships that occur among Hispanic MSM, and how each type of relationship is either

protective against HIV or serves as a risk factor among Hispanic MSM.

The results of this study have some important clinical considerations. Nurses need to have knowledge of the overlapping relationship of HIV risk, substance abuse, and IPV among Hispanic in relationships. This knowledge will allow nurses to screen for HIV risk, substance abuse, and IPV among clients of this population. Second, nurses should assess relationship status of Hispanic MSM. This assessment of relationship status would permit the opportunity to educate client not only about HIV risk, but it will allow risk factors within the relationship, such as sexual relationships outside of the primary relationship, which can be addressed. Last, nurses must have the skills to implement nursing interventions that include client education and referrals of Hispanic MSM in relationship that are at risk for substance abuse, IPV, or other mental health issues.

Limitations

There are a few limitations of this study that need to be addressed. First, this study's results may not be able to be generalized to the general population of Hispanic MSM. This lack of participants were recruited using snowball sampling, a homogeneous sample of Hispanic MSM may have been recruited that limits the generalizability of the findings.

The study's sample included a number of Hispanic MSM who were infected with HIV, had co-occurring substance abuse problems, and had experienced or were experiencing IPV. Because of the overrepresentation of Hispanic MSM with these issues, this may have influenced the study's results.

Summary

This study qualitatively explored the role of relationships in contributing to HIV risk among Hispanic MSM. Despite its limitations, it makes an important contribution to what is known about how relation-

ships among Hispanic MSM may serve as a source of HIV risk for both partners in the relationship. More research is necessary not only to explore the role of Hispanic MSM relationships as a source of risk, but also regarding the multiple co-occurring health issues confronting Hispanic MSM.

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