Juntos

Preliminary findings in the development of a digital health intervention for the Latino MSM community



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Background

Health inequalities in lesbian, gay, bisexual, trans, and queer communities, particularly for racial minorities, remain a primary concern in the U.S.

- Health disparities disproportionately affect communities of color¹ and diverse sexual and gender identities²
- MSM of color experience more stigma, lack of community support, inadequate access to health facilities and worth health outcomes than white MSM^{3,4}
- Disparities in drug abuse, violence, sex work, and HIV are disproportionately amplified for Black and Latino MSM^{4,5} even though MSM of color are more likely to use condoms and have fewer sexual partners on average than white MSM⁶
- Additional stressors for Latino MSM include^{7,8}:
 - Immigration status
 - Language barriers
 - Religious communities

Methods

Background Research (Jan-Apr)

Conduct literature reviews on:

- Health status of Latino MSM
- Key health determinants
- Effective health programs
- Existing online interventions

Design & Test Website (Jul-Dec)

Assess needs from survey results

Adapt existing intervention for Black

MSM/TW (healthMpowerment) for

Latino MSM/TW

Code & program website, including:

- Educational tools
- Resources for testing & care
- Social networking features

Newsfeed

Formative Research (May-Oct)

Interview Latino MSM & trans women (TW) and NC healthcare providers in English and Spanish on:

- Health of Latino MSM & trans community
- Barriers to healthcare
- Experiences with healthcare
- Preliminary website feedback
- Available health resources



Preliminary Results

- Discrimination When Seeking Health Care

 Many participants discussed instances of discrimination and
 misunderstanding during interactions with health care providers.
- Stigma and Discrimination from within Community
 Participants reported the prevalence of stigma within the Latino/a
 community as a consequence of deeply-rooted cultural beliefs about
 gender identity and sexual orientation.

"Many people still have machismo or do not want to accept that we exist and that we are just different. We didn't ask to arrive to this world this way. But in their heads, it's women or men and that's it."—MSM/TW participant

• Language Barrier

Participants attributed ineffective healthcare visits to not only the language barrier between themselves and healthcare providers, but also a general lack of access to bilingual service providers and health information.

• Lack of Awareness of Available Health Resources

Local health services providers believed that Latino MSM and Latina trans

women were not fully aware of available health resources.

"So the language, the cultural understanding, the need of medical interpreters on site, and understanding more the MSM community would be a huge plus from the medical providers." –MSM/TW participant

Lack of Support Systems

Some participants felt that their emotional and psychological needs were not properly met within their networks, while others reported having no secure social support networks.

"...Immigration tends to lead to people sectoring themselves off and forming their own communities, and then those communities start to become really small worlds. And people who are diagnosed with HIV are terrified that their small world is going to find out their HIV status and ostracize them." –Health service provider

Research Team



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