

# Internalized heterosexism (IH) and exposure to gay related harassment (GRH) are associated with higher perceived HIV stigma and other barriers to HIV treatment engagement among a sample of predominantly minority HIV+ men who have sex with men (MSM) living in a US urban area

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## Introduction

- It is well documented that lesbian, gay, bisexual and transgender (LGBT) youth experience levels of harassment and discrimination higher than that experienced by their heterosexual peers over the course of their lifetime (Raymond et al, 2009)
- Homophobic attacks against young gay and bisexual youth have been found to help explain heightened rates of serious health problems among adult gay men (Friedman et al, 2007)
- We examined the roles of gay related harassment (GRH) and internalized heterosexism (IH= the internalization of anti-homosexual societal attitudes) on HIV treatment as potential barriers to optimal engagement in care

## Materials and methods

- From August 2010 through November 2011, we surveyed 298 HIV+ men who have sex with men (MSM) who were either newly diagnosed (< 3 months) or met the US National AIDS Strategy definition of inconsistent engagement in care
- Measures included exposure to GRH (verbal and physical), IH, HIV stigma, social support, and treatment adherence self-efficacy or treatment readiness

**Table 1:** Participant Characteristics (N=298)

Age m (SD)	37.0 (10.4)
Race/Ethnicity (%)	
Black (non-Hispanic)	72.6
Hispanic	18.2
White (non-Hispanic)	6.0
Other	3.2
Non US-born (%)	17.0
Sexual Orientation (%)	
Homosexual	73.9
Bisexual	13.9
Heterosexual	5.0
Not sure/Other	3.7
Not specified	3.5
Education <sup>1</sup> (%)	
Less than HS	15.1
HS diploma or equivalent	27.1
Some college or technical school	42.7
College degree or higher	14.7
Relationship Status (%)	
Single	76.6
Partnered	17.4
Other	6.0
Currently on HIV medications (%)	41.9
Newly diagnosed (% < 3 months)	31.3
Mos. since HIV+ m (SD) <sup>2</sup>	106.6 (2562)

Table 1 notes:

<sup>1</sup>Does not include 85 cases due to missing data from early version of survey  
<sup>2</sup>N=200, excludes newly diagnosed

## Results

- The sample of 298 was 73% African American, 18% Latino and 6% White (mean age=37 years)
- Verbal and physical GRH were reported in 74% and 46% of the sample, respectively, but GRH was unrelated to IH ( $r = .07, p = .24$ )

## Results (cont.)

- Higher GRH was related to higher perceived HIV stigma ( $r = .30, p < .001$ ) and lower treatment adherence self-efficacy ( $r = -.24, p < .05$ ). Similarly, higher IH was associated with higher perceived HIV related stigma ( $r = .36, p < .001$ ), lower social support ( $r = -.16, p < .01$ ), lower likelihood of disclosure of HIV status to friends ( $r = -.14, p < .05$ ), and more negative beliefs about medications ( $r = .14, p < .05$ )
- Among those not on antiretrovirals, both GRH and IH were associated with lower expectancies of ease of initiating ART (GRH:  $r = .16, p < .05$ ; IH:  $r = .23, p < .05$ ) and greater social/stigma-related concerns about initiating ART (GRH:  $r = .30, p < .001$ ; IH:  $r = .43, p < .0001$ )

**Table 2.** Correlations among Gay-related Harassment (GRH) and Internalized Heterosexism (IH) and key variables of interest

	1. GRH	2. IH
1. Gay-related Harassment (GRH)	1	-
2. Internalized Heterosexism (IH)	0.07	1
3. General Health	0	0
4. HIV Stigma	.30 <sup>c</sup>	.36 <sup>c</sup>
5. Social Support	-0.1	-.16 <sup>b</sup>
6. Disclosure to friends	0.05	-.14 <sup>a</sup>
7. Disclosure to family	0.03	-0.1
8. Unmet disclosure need	0.09	0.06
9. Adherence self-efficacy	-.24 <sup>a</sup>	-0.1
10. ART adherence	0.04	-0.1
11. Treatment Ease	-.16 <sup>a</sup>	-.23 <sup>b</sup>
12. Treatment Social Concerns	.30 <sup>c</sup>	.43 <sup>c</sup>
13. Treatment Readiness	-0	-.23 <sup>b</sup>
14. General Medication Concerns	0.08	.14 <sup>a</sup>

Table 2 Notes:

<sup>a</sup>  $p < .05$ , <sup>b</sup>  $p < .01$ , <sup>c</sup>  $p < .001$ . Sample sizes vary pairwise due to missing data; ART Adherence and Adherence Self-Efficacy only assessed for respondents on ART; variables 11-13 only assessed for respondents not on ART.

## Conclusions

- Although not related to each other, gay-related harassment and internalized heterosexism were each associated with higher perceived HIV related stigma and with other factors linked to poor treatment engagement
- Programs to optimize treatment engagement should take into account the impact of gay-related harassment and the internalization of anti-gay societal beliefs

## Literature cited

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