

HIV/AIDS IN THE AFRICAN AMERICAN COMMUNITY

A CONCEPTUAL PAPER

SUBMITTED TO THE FACULTY OF THE
WHITNEY M. YOUNG, JR., SCHOOL OF SOCIAL WORK
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR
THE DEGREE OF MASTER OF SOCIAL WORK

BY

VICTOR C. CORNETT

CLARK ATLANTA UNIVERSITY

ATLANTA, GEORGIA

MAY 2017

ABSTRACT

SOCIAL WORK

CORNETT, VICTOR C.

B.A. WRIGHT STATE UNIVERSITY, 2014

HIV/AIDS IN THE AFRICAN AMERICAN COMMUNITY

Advisor: Youseung Kim, Ph.D.

Conceptual Paper dated May 2017

This study examines the effects of HIV/AIDS in the African American community. The readers will gain an understanding of how this increasing epidemic continues to rise and has become the number one leading cause of death for African American women. The research explored the reason's this transmission continues to rise at an alarming rate in the African American community. The researcher identifies the factors this virus has on African Americans and discusses this study using a holistic approach. Data on HIV/AIDS was analyzed by determining attributes that cause this virus to have an impact on African American men and women. There is a steady rise in transmission and society can contribute to help the decrease in HIV/AIDS. The research concluded that perception, society and environment is an indicator in HIV/AIDS transmission.

© 2017

VICTOR C. CORNETT

All Rights Reserved

ACKNOWLEDGEMENTS

I would like to thank my mother, father, sister, and grandmother who have always supported me in my educational journey. The encouraging words from my family to further my education and to succeed in what I'm passionate for in life has been a major contribution to fulfil my life dream. My mother has instilled in me that higher education requires sacrifices and throughout my educational career at Clark Atlanta University that has kept me grounded in the Master of Social Work Program. Being raised in a family that pulls together to help others in times of need has developed my character and helped shaped myself to being a scholar to join the Social Work profession.

HIV/AIDS has been a population that I have been interested in serving and wanting to make a positive difference in for the last five years. The field of Social Work will give me that opportunity to serve this oppressed population for the better. When I was enrolling into college as an undergraduate student I have never forgotten the day my mother suggested Social Work, because she said I was a caring individual and the profession would be great to have someone like myself. The encouraging words helped influence my decision to enroll in the Graduate Social Work Program.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	ii
CHAPTER	
I. INTRODUCTION.....	1
Statement of the Problem.....	2
Purpose of the Study	3
Significance of the Study	4
II. LITERATURE REVIEW.....	5
Historical Perspective	5
African American “Down Low” Man.....	6
HIV/AIDS Transmission in African American Women.....	8
Afrocentric Perspective.....	9
Theoretical Framework.....	11
III. METHODOLOGY	13
Methods of the Study	13
Limitations of the Study.....	15
IV. PRESENTATION OF FINDINGS.....	16
Analysis Results of Participants.....	16
Analysis Results of Methodologies and Measurements	17

CHAPTER

V.	CONCLUSION.....	20
	Summary of the Study	20
	Implications for Social Work.....	21
	REFERENCES	23

CHAPTER I

INTRODUCTION

Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (HIV/AIDS) has been an epidemic in the United States for over thirty-years. However, there has been a rise in infection rates in the African American community in the past recent years. “Black men who have sex with men (MSM) and women (MSMW) who do not identify as gay or disclose their bisexual activities to main female partners, also known as men on the down low, have been cited as the main reason for the increase in HIV infections in black women” (Millett, Malebranche, Mason, & Spikes, 2005). HIV/AIDS is not a homosexual disease although it has been perceived to be by society. “When HIV/AIDS first emerged as a pandemic in the 1980’s, efforts to prevent infection in the United States focused on two high risk groups, men who have sex with men (MSM) and injection drug users (IDU); these groups accounted for the majority of cases reported to the Centers of Disease Control and Prevention” (Montgomery, Mokotoff, Gentry, & Blair, 2003). For the purpose of this research the focus will be on the climbing HIV/AIDS rate from sexual intercourse in the African American community by men who have sex with men (MSM) and how it affects both black men and black women.

Statement of the Problem

Due to the lack of education on HIV/AIDS, the transmission of the disease has resulted in an increase from no obtained knowledge about this growing epidemic. Millet et al. (2005) reported that “In 2002, the leading cause of HIV infection for both black men and women was sex with a man” (p.525). The risk of HIV/AIDS has no age, race, or gender but research does show there is a predominance to exposure. Men who have multiple male sex partners are more likely to avoid condom use because that would require the thought of what they are doing which is homosexual behavior. The thought of homosexual sex for these men would mean they are identifying as gay, so they would rather act on impulse. Also, the arrogance that “It could never happen to me”, and fear of getting tested to know one’s status is a result of higher infection rates. Some men and women are unaware of their status and rather continue at risk sexual behavior then to know their HIV status. Men who have sex with men and secretly hide that from their female partners are not the only reason for an increase in HIV/AIDS rates. HIV/AIDS is also spread from women to men. An HIV positive women can have sexual relations with a man and spread it to a HIV negative male. Women can also spread HIV to their child from breast feeding. The African American community place a standard on how black men should be perceived and behave. Pressure within the black man’s ethnic community of how he is to identify leaves the black man in a situation where he wants to hide his sexuality, because of stigma from being homosexual and black. In the African American community these men face stigma from their families, close friends, their communities, their gender, women, and also the black church that plays a big role in the black man’s sexual identity. These men continue to live in self-denial and have a fear of losing

everything they love and desire to have, because they are taught being black and gay is wrong.

Society often places emphasis that doesn't allow one to identify within their truth. This often is the result from religion, beliefs, norms, values, and not having acceptance. These social values leave an impact that the black man has to live with on a constant basis. Bowleg, Teti, Massie, Patei, Malebranche, and Tschann (2011) analyzed two ideologies of masculinity in black men "that black men should have sex with multiple women, often concurrently and that black men should not be gay or bisexual. Analyses also identified two implicit masculinity ideologies: the perception that black heterosexual men cannot decline sex, even risky sex, and women should be responsible for condom use" (p.545). The problem with this is that society continues to have gender roles and if a man does not live up to what is considered the norm his sexuality is questioned and health for both men and women is put at risk.

Purpose of the Study

The purpose of this study is to research why African American men participate in risky sexual behavior with both men and women and do not want to label their sexuality as homosexual or bisexual and develop an understanding of how this affects the African American psyche. The subtopics that will be explored are black men that identify as a heterosexual, bisexual, or gay and how their sexual identity puts them and their partners at risk for HIV/AIDS. Atlanta, Georgia is known as the black gay capital and also one of the top cities in the United States to have the highest rate of HIV/AIDS cases. Although the virus has a high rate at the current moment, does not mean that it cannot be decreased.

It is important for research on this epidemic to be focused worldwide but also in cities with the highest transmitted infections to decrease the rate.

Significance of Study

HIV/AIDS is a growing epidemic in the African American community and it is important nationwide to be aware that anyone no matter what racial background, gender, or age can be at risk of this disease. At this current time there is no cure for HIV/AIDS; research on a cure and prevention will be important to study. Contribution to current generations will be that education on HIV/AIDS will be more prevalent than it appears to be at the current moment. Having additional research will allow to provide discussions and awareness on HIV/AIDS, and help to become the end of the epidemic. This study can add to the topic of discussion of at risk sexual behavior in the African American community and how one not disclosing their sexual partners and behaviors can lead to an increase in HIV/AIDS.

CHAPTER II

REVIEW OF LITERATURE

The review of literature will focus on HIV/AIDS in the African American community. Through exploring the historical perspective of this epidemic the reader will be able to obtain knowledge of the virus as it relates to its transmission through heterosexual contact. The researcher will present the review of literature regarding the spread of the virus from African American men and its transmission to African American women.

Historical Perspective

The first case of HIV/AIDS was discovered over three decades ago, and still continues to increase in infections to this present day. “HIV-1 and HIV-2 are the result of multiple cross species transmissions of simian immunodeficiency viruses (SIVs) naturally infecting African primates” (Sharp & Hahn, 2011). Prior research on the disease states that a similar disease to HIV/AIDS was found in monkey’s first. “AIDS has likely afflicted chimpanzees long before the emergence of HIV. Tracing the genetic changes that occurred as SIVs crossed from monkeys to apes and from apes to humans” (Sharp & Hahn, 2011). The Center for Disease Control and Prevention (CDC) Morbidity and Mortality Weekly Report reported “The first AIDS cases were reported in the United

States in June 1981 describing cases of a rare lung infection, Pneumocystis Carinii Pneumonia (PCP), in five young, previously healthy gay men in Los Angeles” (p.430). During the time of the first case, HIV/AIDS was believed to be a white man’s gay disease and that one had to participate in homosexual activity to transmit the virus. From the past until this present day this disease show’s any person is at risk no matter what gender or sexual orientation a person identifies themselves as. The 2001 CDC reports “The number of persons living with AIDS has increased as deaths have declined” (p.430). There has been several studies throughout the years on how the virus is spread, and medication’s to help control the symptoms for those living with HIV, but there is still no cure to terminate HIV/AIDS.

African American “Down Low” Man

The term down low is used in the African American community to refer to men who identify as straight but secretly have sexual relations with men. These men are often in denial about their sexual orientation. As Millett et al. (2005) stated “Black men who have sex with men (MSM) and women are the main reason for the increase in HIV infections in black women” (p.525). These down low MSM is done secretly because society tells the African American male homosexuality is wrong. This brings upon confusion to the black male and at times a reaction to participate in at-risk sexual behavior. African American men are a 13% representation of the United States population. These men, in the year 2006 regarded for 65 percent of newly reported HIV cases among African Americans, and represent for 64 percent of high risk heterosexual contact HIV cases according to the Center for Disease and Control Prevention. (Bowleg

et al., 2011). Men are told to be masculine and hypersexual; if a black man does not fulfil what society labels as the norm his sexuality comes into question. McNair and Prather (2004) study found the following:

The rate of HIV/AIDS cases among African American males is currently greater than the rates of any other male racial/ethnic group. African American women are least likely to date men from other racial/ethnic groups which sets the stage for African American high rates of exposure through heterosexual contact. (p.109)

These statistics represent the explanation of the increase of the virus in both black men and black women.

Hosek and Martinez (2005) state “Men from minority communities who practice same-sex activity often do not declare their sexuality because of stigmas that continue to surround homosexuality” (p.1103). Secrecy is often associated with shame and this contributes to the behavior of MSM. Black men are taught by their families and environment that homosexuality is a disgrace to the black race. The African American church teaches that homosexuality is a sin and one will be punished for such behavior. These men will hide from their reality by constantly living in deception to escape judgment or the fear of losing those they care about that do not agree with homosexuality.

Non-disclosure of sexual orientation by African American MSM present additional risk that can arise such as increased rates of sexually transmitted diseases, reports of more sexual interaction with women than men, and those who are HIV positive are less likely to be aware of their status (McNair & Prather, 2004). These men will have sexual relations with women to prove to themselves that they can't be homosexual. These men will also marry women, have children and continue to secretly have sex with men.

Men who have sexual relations with both men and women or have an attraction to both men and women are referred to by the term bisexual. There is a larger stigma placed upon bisexual men than bisexual women.

HIV/AIDS Transmission in African American Women

HIV/AIDS is still believed by some to be a “gay” disease and that it is only transmitted through homosexual contact, and that gay men are more likely than any other group to have the disease. However, McNair and Prather (2004) state that “African American women represent the fastest growing group of individuals infected with HIV in the United States” (p.106). Amid all women African American women constitute 67 percent diagnosed with HIV compared with 16 percent Latinas and 15 percent Whites (Muturi & An, 2010). Studies have shown that the HIV/AIDS virus being a homosexual disease is false and that the transmission through heterosexual contact is increasing. McNair and Prather (2004) study states the following:

At the beginning of the epidemic, white gay men were most likely to reflect the public’s perception of someone with AIDS. By the early 1990s, women became the fastest growing group of individuals infected with HIV, having rates that continue to increase faster than those for the highest risk groups, such as men who have sex with men (MSM) and injection drug users (IDUs). (p.106)

Although there are several preventions that can contribute to one’s HIV status, the HIV/AIDS epidemic continues to rise.

The practice of safe sex is the number one prevention to help decrease the spread of the virus. Sex partners often won't uphold the conversation of sexual history about previous partners and the discussion of condom use.

Women tend to have less interpersonal power in the relationship. Lower levels of interpersonal power can interfere with women's ability to initiate discussions about condom use, due to concerns that the topic can lead to conflict and threaten the future of the relationship" (McNair & Prather, 2004).

Society often places men to be dominate or the aggressor in the relationship and women to be submissive. This lack of interpersonal power can put both the man and woman's health at-risk because they're acting upon societal gender roles and not the importance of one's own health. "For many women, low perception of risk is related to the belief that being in a monogamous relationship protects them from HIV, and that many heterosexual African American women do not perceive AIDS to be a major health risk and consider themselves to be at low risk for acquiring HIV" (McNair & Prather, 2004). African American women and men should still get tested regularly regardless of being in a monogamous relationship to always be aware of their status.

Afrocentric Perspective

The Afrocentric perspective is a "world view" that looks at perspectives and solutions of all minorities of oppressed people. The Afrocentric perspective develops an understanding to why people function the way they do in society. This perspective analyzes past barriers minorities have encountered and incorporate it with today's oppression. "African Americans' lack of progress has been attributed to several occurring

themes: racism, oppression, stress, mental health, general health issues, and spirituality” (Manning, Cornelius, & Okundaye, 2004). These limitations brought upon setbacks that do not grant the same rights and opportunities of the majority population.

African American’s have faced oppression for centuries based off of their skin color. African American men still struggle with acceptance in society and are often negatively stereotyped and denied the same opportunities as white America. Society places a label on black men and when he is homosexual as well, it makes their life harder. Gay Black men do not appear to get to live their lives in truth, but rather in shame and denial to have acceptance in society (Brown, 2008). Some black gay men live their lives in secret about their sexual preference because the African American community and churches teaches that it is wrong to be black and gay. Black gay men face stigma and homophobia in their black communities (Brown, 2008). Down low men will be dishonest by having girlfriends, wives, and create a family all to gain acceptance by society. Some of these men have taken part in at-risk sexual behavior and have transmitted HIV to their girlfriends and wives. This brings on a new stigma for being HIV positive.

The Lesbian, Gay, Bisexual, Transgender (LGBT) community has even been compared to as the new Civil Rights. Some are able to compare the civil rights struggle to gay right struggles because both encounter bigotry and discrimination (Brown, 2008). Those who identify as gay face discrimination in ways that differ but have similarities to blacks during the Civil Rights Movement, such as marriage inequality, unequal employment opportunities, disrespect, and being referred to by derogatory names for example. “African American functioning is negatively impacted by daily oppressive and racist experiences, which is usually feelings of powerlessness. Powerlessness is

experienced through discrimination, racism, and oppression” (Manning, et. al, 2004). These actions that society places upon those who identify as gay reflects upon some of the actions as to why their sexuality remains hidden, because being black and gay keeps these individuals oppressed in opportunities in their careers, family, health, and the same equalities of the majority members in society.

Humanistic Values will value an individual regardless of their sexual identity and status. African Americans have endured discrimination based off of their race and face discrimination for having an HIV positive status because of lack of equality with health services. An HIV positive status is not a death sentence, but those who are uneducated on the virus perceive it differently. HIV positive individuals regardless of race, class, gender, age or sexual orientation can live a long healthy life. If all were treated equal based upon those demographics, it would help to eliminate oppression. Autonomy can be applied to those homosexual individuals to free themselves from hiding their sexual identity. It can also be applied to those individuals who are HIV positive, but don't self-disclose because of the stigma associated with the virus. These core values allows for a better understanding for the gay and HIV/AIDS community internally and externally, for this is an oppressed group often facing discrimination.

Theoretical Framework

Empowerment Theory helps individuals gain power and maintain control over their own lives while developing a stronger sense of self. The Empowerment Theory can help African Americans with their continuous issues of oppression, racism, and health services by assisting in their personal growth of individualism (Manning, et. al, 2004).

African American's lack of condom use participating in at-risk sexual behavior has resulted in an increase of HIV/AIDS in the African American community, especially in black women through heterosexual sex. "Gay Black men are trapped amongst conflicting identities and communities" (Brown, 2008). These black men are dealing with the stigma of self-identifying as gay by being labeled as well as the backlash from the African American community. The Empowerment Theory will help these men gain control to stand up in their truth and not be hindered to live a life they are taught is wrong because of their sexuality. If these men are able to use the Empowerment Theory it could bring a decrease in the virus because the men will no longer feel the need to hide their sexual identity and secretly sleep with men.

There is an increase in HIV/AIDS in African American women because some women are not making it a priority to use condoms during sex. The leading cause of death for women aged 25 to 34 is HIV/AIDS (Ferguson, Quinn, Eng, & Sandelowski, 2006). Women have let men take control over the sexual relationship for reasons that can be based on low self-esteem and embarrassment to use a condom, because they feel the man does not want to use one and will no longer want to be involved if asked to (Ferguson et al., 2006). The Empowerment Theory will help black women gain control over their bodies as well as influence better decision making.

CHAPTER III

METHODOLOGY

The objective of this conceptual paper is to identify the connection between the HIV/AIDS rate among the African American community and its transmission through heterosexual contact. Data on this topic has been analyzed using qualitative methods to gain insight on this increasing epidemic. This chapter also discusses limitations from this study implied in the literature review.

Methods of the Study

Methods for this study were used for the researcher to obtain knowledge of HIV/AIDS within the African American population. Research was to identify the factors of why the virus has an increased rate especially in African American women. The conducted research for this study was a systematic review. In reviewing the literature, comparisons were found in previous research that perception of one's identity can have a significant impact on sexual identity and sexual behavior. For example all studies found that a critical response in homosexuality or bisexuality indicates African American men disclosure of sexual orientation and HIV status. The majority of the research for this topic used interviews and focus groups of African American men who have sex with men

(MSM) and women (MSMW), as well as African American women in both of the gender roles as it comes to the transmission of the virus.

The search engine Google Scholar was used to find information on this topic. Google was also used to help define words such as sexual orientation, bisexual, sexual identity, and LGBT. Sexuality has various terms and categories one can use to identify as Lesbian, Gay, Bisexual, and Transgender (LGBT) is used to refer to all those who are a part of the gay community. It is important for the researcher's to have an understanding of each of these categories for the LGBT population because sexual identity is continuing to expand. For example, LGBT has expanded to Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex and Allies (LGBTQIA). According to the article Generation LGBTQIA, "Q" can mean questioning or queer, formally a derogatory term before it was accepted by gay activist in the 1990s. "I" stands for intersex, someone whose anatomy is not male or female. "A" stands for ally or asexual due to having an absence of sexual attraction" (Schulman, 2013). With sexuality having an umbrella of categories research is beneficial when there is understanding of each term, as it can contribute to the reasons an individual is comfortable or uncomfortable in revealing their sexual orientation and experiences. Key words used were African American, men, women, gay, homosexual, down low, HIV, AIDS, transmission and epidemic. Journal Storage (JSTOR), EBSCOhost, and ProQuest database were used with the same key words and Google Scholar was the most beneficial to obtain information on this topic. Google Scholar also assisted in journal articles in JSTOR and American Psychological Association.

Exclusion were articles that were outdated. Research articles that were done within the last decade were not used much to provide information on how the HIV/AIDS

rate has increased to this present day. Those reasons were to have accurate data within the recent years to show how it has changed, progressed, or gotten worse in society from the past 3 decades.

Limitations of the Study

This conceptual paper is based on HIV/AIDS within the African American community who are infected with the disease from heterosexual contact by African American men who have sex with both men (MSM) and women (MSMW). Sexual orientation can be a broad topic and narrowing it down could be a challenge. For example, if the study identified men as bisexual or MSM and MSMW they are still considered to be homosexual or the term gay. Future research would be specific in one's sexual identity in the LGBTQIA community. This will assist the researcher in obtaining data on the direct relationship of African Americans and specifics on their sexual orientation as it can relate to HIV/AIDS transmission. Exposure to HIV/AIDS is contributed from the social factors of sex-ratio imbalance and the lack of men disclosing their bisexual behaviors (McNear & Prather, 2004). Confusion and denial of an individual's sexuality can alter research because of technicalities, and it has been displayed in research. For example, participating in bisexual behavior but wanting to identify as heterosexual. This limitation exist within the LGBTQIA community because some of those who have sexual relations with the same sex don't want to be labeled homosexual. This created limitations when research would identify the transmission by sexual orientation.

CHAPTER IV

PRESENTATION OF FINDINGS

This chapter evaluates the relationship between HIV/AIDS transmission in African American men and women. To understand the severity of this epidemic four studies were analyzed to obtain knowledge on HIV/AIDS, as it relates to sexual activity, sexual identity, HIV/AIDS status, stigma, and perception.

Analysis Results of Participants

Each of the studies conducted composed of both male and female participants. Participants varied from African American, White and other ethnicities such as Latino. These attributes were used for developing an understanding of how these demographics contribute to HIV/AIDS in majority and minority populations. All participants were over eighteen years old in the studies. Age ranged from 19 to 51 in the studies. Other participants from collections of research were college students, as well as HIV negative and positive participants. Montgomery et al., (2003) study consisted of 5,156 men and 3,139 women, both HIV infected groups. This study had the largest number of participants. Ferguson, Quinn, Eng, & Sandelowski (2006) included the least number of

participants of four focus groups of 6 to 9 students at a Historically Black College and Universities (HBCUs).

Analysis Results of Methodologies and Measurements

Two of the four studies used focus groups. Participation was voluntary and participants were recruited by the researcher of the studies. An interview guide approach was used to elicit and measure narratives about the men's lives and ideologies of masculinity for black men and sexual behaviors (Bowleg et al., 2011). Historically Black College's (HBCU's) focus group study also aimed to identify gender negotiations when it came to condom use. The lack in the practice of safe sex has been a contributing factor in the spread of HIV/AIDS. Condoms Emotional Reaction Scale was used to measure the magnitude of anger experienced in relation to condom use (Ferguson et al., 2006). Ideologies from this research focused on African American's having multiple sexual partners and that black men should not be gay or bisexual. This was a common theme amongst the study of HIV/AIDS in the African American community, because research was able to identify perception as being a factor in one's lifestyle and behaviors.

Two of the four studies used a questionnaire focusing on sexual identity in men and bisexual behavior in men (Montgomery et al., 2003). The questionnaire's included women participants that measured general stigma toward people with HIV/AIDS (Muturi & An 2010). The measure of stigma was used on a point-scale. The Supplement to HIV/AIDS Surveillance (SHAS) project was a cross-sectional interview project. The questionnaire asked participants how they sexually identify, how many male and female partner's participants had in the past five years, and the questionnaire asked women have they had sexual relations with a bisexual man in the past five years (Montgomery et al.,

2003). These questionnaires' were used to determine a woman's awareness of their male partner's sexual orientation and how that influences the sexual relationship.

Analysis Results of the Outcomes

Out of the four studies one of the results revealed that those participants with a high level of religiosity displayed a higher stigma to those with HIV/AIDS (Muturi & An, 2010). Examples include women who visit multiple faith based organizations such as church and community events. Studies concluded that although these were men from different backgrounds and generations, research has demonstrated all have shared similarities of what society perceives and expects a black man to be. The outcome from the participant's discussion addressed that society implies black men should have multiple women sex partners, and no real man is gay or bisexual (Bowleg et al., 2011). These attributes provide evidence that men who feel a sense of shame or embarrassment about their sexual orientation will display human behavior to adjust their actions to be accepted in society.

Bisexual behavior among HIV-infected MSM and women may be significant for the level of HIV transmission risk to women who are the sex partners of HIV-infected bisexually active men (MSMW). The results "varied by race": 34% of black MSM, 26% of Hispanic MSM, and 13% of white MSM. While 14% of white women acknowledged having a bisexual partner, only 6% of black and 6% of Hispanic women reported having a bisexual partner. This data suggest that bisexual activity is relatively common among black and Hispanic HIV-infected MSM" (Montgomery et al., 2003). The difference with this study is it's based on those participants who are aware that their HIV status is

positive, but has a similarity that black men are not often forthcoming with the information that they have sex with men to their female partners. This information is important to the study of HIV/AIDS when it comes to the difference in women who are aware that their having sexual relations with MSMW and how that can account for HIV/AIDS.

HBCU focus groups students identified a gender ratio imbalance of more women to men on campus, which can put women at a higher risk of HIV infection. According to Ferguson et al., (2006), the consequence to this gender ratio imbalance are men having multiple female sex partners and women complying with the male preference not to use a condom.

Studies have shown that different situations as it relates to HIV/AIDS also have similar outcomes in the transmission of the virus. A common theme as it relates to one's HIV/AIDS status was stigma across the studies.

CHAPTER V

SUMMARY AND DISCUSSION

Although the number of deaths in HIV/AIDS have decreased due to medications and prevention practices, it still remains that the infection rates are continuing to rise. Research has determined that HIV/AIDS is a growing epidemic for a variety of reasons, but also provides interpretation that this virus could be drastically decreased by an array of reasons as well. With proper education on the facts of HIV/AIDS, rather than stereotypical assumptions can lead to an alarming decrease in this growing epidemic.

Summary of the Study

Research has provided evidence based practices for conclusions on HIV/AIDS in the African American community. What was once believed to be a White man's gay disease has altered into being the fastest growing epidemic to be transmitted in African American women. Down Low men hiding their sexuality participating in at risk sexual contact with both men and women have had a tremendous contributing factor in the spread of HIV/AIDS in the African American community. Being a Black male in a society that upholds a heterosexual American dream and biblical ideologies has an impact on the lives of African Americans. Men wanting acceptance from a society that can often be judgmental and discriminate against one's life and opportunities can put the man in a

place of fear and ultimately live a life that he is being untruthful with himself and those that surround him. African American women raising questions and discussing the importance of past and previous sexual partners with their male partners can provide awareness to both the man and woman's life.

The Black man and Black woman both getting tested prior to any sexual interaction would decrease the transmission, due to both parties being informed of each other's status. Avoiding the conversation of HIV/AIDS has led to the transmission of the virus because of a lack of communication and education on the spread of sexually transmitted diseases. Precautions by practicing safe sex, getting tested, researching, education, and discussions about the virus can contribute in the decrease of spreading HIV/AIDS from one person to the next.

Implications for Social Work

When addressing HIV/AIDS it is important to be aware of Person-In-Environment. Person-In-Environment gives Social Workers the opportunity to develop an understanding of the person's behavior as it relates to their environment, which contributes to how a person lives their life. The Code of Ethics and being culturally aware needs to be implemented when working with homosexuals and the HIV/AIDS population. This is an oppressed population that often continues to face stigma. Practice and policies need to be set in place that guarantees the same rights and opportunities as the majority population.

Social Workers are to advocate for their profession as well as those populations they serve. Oppressed populations need a support system because at some point a Social

Worker could be all they have. Practice, policy, and research can transpire tools that can benefit those living with HIV/AIDS and help inspire those to get tested and become aware of the importance to know your status. When working with HIV positive persons it is important that Social Workers do not convey any biases. Instead Social Workers need to develop interventions that allow clients to come up with ideas to help them become independent to gain the best treatment for themselves. The NASW Code of Ethics states to not discriminate against one's sexual orientation. This is a good national policy that is implemented because it promotes the practice to accept all.

Future research needs to focus on those geographic regions that has the highest transmission rate of HIV/AIDS. It is important for research to be conducted to develop an explanation on why specific regions have a higher rate, and what measures need to be taken to decrease the transmission rate.

REFERENCES

- Bowleg, L., Tetl, M., Massie, J., Patel, A., Malebranche, D., & Tschann, J. (2011). What does it take to be a man? What is a real man?: *Ideologies of masculinity and HIV sexual risk among black heterosexual men*, 13(5), 545. doi: 10.1080/13691058.2011.556201
- Brown, E. C. (2008). Racism in the gay community and homophobia in the black community: *Negotiating the Gay Black Male Experience*, 1-83
- Centers for Disease Control and Prevention: Morbidity and Mortality Weekly Report (2001). 50(21), 430.
- Ferguson, O. Y., Quinn, C. S., Eng, E., Sandelowski, M. (2006). The gender ratio imbalance and its relationship to risk of HIV/AIDS among African American women at historically black colleges and universities. *AIDS Care*, 18(4), 323-331
- Hahn, B., Sharp, P. (2011). Origins of HIV and the AIDS Pandemic: *Cold Spring Harb Perspect Med*, 1-22
- Hosek, S., & Martinez, J. (2005). An Exploration of the Down-Low Identity: *Nongay-Identified Young African American*, 97(8), 1103-1112
- Manning, M. C., Cornelius, L.J., & Okundaye, J. N. (2004). Empowering African Americans through social work practice: integrating an Afrocentric perspective,

ego psychology, and spirituality. *Families in Society: The Journal of Contemporary Social Services*, 85(2), 229-235

McNear, L., & Prather, C. (2004). African American Women and AIDS: *Factors Influencing Risk and Reaction to HIV Disease*, 30(1), 106-123.

Millett, G., Malebranche, D., Mason, B., & Spikes, P. (2005). Focusing "Down Low": *Bisexual Black Men, HIV Risk and Heterosexual Transmission*, 97(7), 525.

Montgomery, J. P., Mokotoff, E. D., Gentry, A. C., & Blair, J. M. (2003). The extent of bisexual behavior in HIV-infected men and implications for transmission to their female sex partners: *AIDS Care*, 15(6), 829. doi: 1080/09540120310001618676

Muturi, N., & An S. (2010) HIV/AIDS Stigma and Religiosity Among African American Women, *Journal of Health Communication*, 15:4, 388-401, doi:0.1080/10810731003753125

Schulman, M. (2013, January 9). Generation LGBTQIA. *New York Times*. Retrieved from <http://www.oakland.edu/upload/docs/Clips/2013/130111%20-%20lgbtqia.pdf>