

**HIV+ Male Spanish Speaking Mini-Focus Group  
POWER Program  
AIDS Project Los Angeles  
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**Participants:** Enrique (30 y/o) and Roberto (35 y/o), pseudonyms

**Introduction:**

POWER program staff (Angel Fabian) facilitated a formative mini-focus group with Spanish speaking male clients on December 17, 2001. The purpose of the group was to gain information to help POWER staff plan and develop POWER programs and activities. The group lasted for 2 hours and the following issues were discussed: medication, general health, safer sex information/education, sexual attraction, discrimination, disclosure of HIV status and sexuality, different health and wellness needs among HIV positive and HIV negative men and different sexual behavior with primary and non-primary sexual partners. Two gay-identified male clients participated in the group. These are highlights from the findings of the focus group.

**Highlights:**

- Participants were relatively young and well informed on issues impacting HIV+ Spanish speaking men. From the very start, they were able to generate an extensive list of health/wellness issues impacting this population. Both participants were familiar with a variety of social service agencies and had previously volunteered at such agencies.
- The fear/guilt of infecting others was one of the more prominent/reoccurring themes. As a result, upon knowledge of their HIV status both focus group participants altered their sexual behavior from abstinence to promising themselves not to infect anyone else.
- One of the participants made several references to the power imbalance between older men and younger men and how to best understand these dynamics.
- Both participants agreed that there were major differences in wellness issues among HIV-positive and HIV-negative individuals. These differences were presented as issues that HIV negative individuals do not have to face such as medication side effects, fear of infecting others, depression and having to think about HIV all the time.
- There were major differences in sexual behavior among primary sexual partners and non-primary sexual partners. With primary sexual partners issues of intimacy, trust and comfort in disclosing their HIV status were mentioned with non-primary sexual partners issues of fear of rejection, distrust from sexual partners if condoms are brought up and risk for other STDs were mentioned.
- Although they mentioned that they would like to be in a primary relationship, they were skeptical of finding a primary sexual partner. The focus here was a disbelief that men could be in a monogamous relationship.
- Participants were very interested in participating in social activities outside the bars/clubs. They specifically wanted these activities coordinated by someone who was enthusiastic and made them feel welcomed.
- There were definite doubts with respect to levels of risk behavior, specifically around oral sex.

**The most poignant statement** summarizing the group was put forth by a participant as follow:

“Now that I think about it, it is kind of funny, every time I am going to have sex or something, I think, “you meet someone, you get them infected, you don’t tell them, you take your medication which makes transmission less likely, you think about your medication, you think about your prescription, you think about the information just in case he does get it [STD/HIV], you are the person who gave it to them so feel you have to give them the information of APLA and AHF, it is kind of amazing that all these things come up when I am having sex with someone who does not have HIV. When I have sex with someone who has HIV I go through these same things but I am mostly worried about myself. First you worry about other people, but I worry about myself because I think about a stronger virus, stronger than the one I already have, get Hepatitis A, B, or C, syphilis, there is a lot of stuff out there.”

### **Recommendations:**

- Repeat this focus group with larger number of participants and broader age range.
- Promote interactive social activities/gatherings and outings
- Through one-on-one interactions, rap groups and workshops
  - Address guilt/shame of being or becoming HIV positive.
  - Address power relations as it relates to age, income and race.
  - Address sexual risk behaviors, specifically oral sex
  - Address relationship issues concerning communication, disclosure, intimacy, expectations and sexual activity.
  - Address mental health issues such as depression.
  - Address barriers/issues among HIV positive and HIV negative men

## Focus Group Notes:

1. What issues/topics should sexual health and wellness programs address for HIV-positive Spanish speaking male clients?
  - Medication
    - being up to date on medications
  - Health
    - how to tell others (disclosure), why not tell others, obstacles in telling others
  - Protection
    - how to take care of ourselves (HIV and other STD's)
  - Information/Education
    - what we know about AIDS and other STD's
  - Resources
    - how to seek social service agencies such as APLA/AHF
  - Alcohol and Drugs with sexual relationships
    - how much risk one is being drunk/high, the effects of cocaine and speed, their effect on your T-cells, how they influence your sexual drive (makes it easier)
  - Personality of other people
    - for example when you meet someone and that someone tries to attract you by what they say, for instance if I am in a bar and an older man approaches me and tells me that he can buy me stuff, invites me to their house or takes me for a ride in their car
    - Moderator: would you consider this then an imbalance of power with older men or the influence of an older man when hooking up at a bar?
    - Participant: both
  - Sexual lifestyle
    - how to tell family members, society and people at work
  - Discrimination
    - what are your rights
  - Sexual Attraction
    - towards particular types of men, why the attraction
  - Levels of Risk
    - worries of infecting others in sexual acts that you enjoy, for instance blow jobs, knowledge of sexual risk of both you and your partner
    - Moderator: at this time I shared some of the information that was given at the POWER Program's Oral Sex Workshop regarding HIV transmission risk while giving or receiving oral sex.
  - Depression
    - knowing symptoms, its effects on your health, things that bring it on such as thoughts of that by having sex with others you could be infecting them, the thought of not sharing razors, tooth brushes of other family members, they do not know but out of respect to them I would not do it, and what others think of you

- Time to live (quality of life)
    - how much time you have to live, when you are going to get sick and how you are going to die
  - Finances
    - how to budget if you do not qualify for programs (housing, food, medication, etc)
    - the one time I saw the actual prices of the medications I almost began to cry because I knew I could not pay that amount
- 2a. Are the sexual health needs of Spanish speaking HIV positive men different from those of Spanish speaking HIV negative men?
- HIV negative men . . .
    - receive/have brief information
    - have a normal life
    - are ignorant
      - know how to take care of themselves but do not wear condoms
      - they think that because they are HIV negative they are not going to get it
    - do not ask about HIV status or other diseases
    - do not have to worry about side-effects of the medication
    - are active in sports
    - do not have to think about HIV all the time
  - HIV positive men . . .
    - receive plenty of information
    - do not ask about HIV status or other diseases
    - change their diets
    - their physical abilities change
- 2b. How has your sexual life changed as a result of learning that you are HIV+?
- “I did not want to know anything about sex . . .”
    - went from not having sex, to masturbating, to having sex with very few people, to back to normal, all in a period of 2 years
  - “I made myself some promises . . .”
    - to protect myself from other diseases, to not become re-infected, to take care of my health and others I am with, and to respect my sexual partner
  - It limited my ability to travel and to work

- 3a. Sexual behavior with primary partners
  - We talk about sex
    - what we are willing to do and not do
    - who is going to top or bottom
      - comment was made about being disappointed sexually
      - sometimes your partner rejects you
      - sometimes the sexual role expected is not carried out (tops being really bottoms)
    - how long they have been infected
    - we talk about using or not using condoms
  - We are honest about our sexual activity
  - It is more comfortable to be with a partner that knows
  - We practice safer sex more often
  
- 3b. Sexual behavior with non-primary partners
  - We are bolder/take more risks
    - having sex is easier since we already have the disease
  - Using alcohol facilitates hooking up with others
  - There is a lot of promiscuity
  - There is a lot more risks for contracting other STD's
  - They do not ask about your HIV status, they do not reveal their HIV status, or ask after they have had sex
  - If you meet someone at a club you don't want to tell them your HIV status because they could tell others without your permission
  - There is distrust from people if you are trying to use a condom, some do not like using condoms and get upset if you bring it up
  
- 4. How are your sexual experiences with primary partners different from those with casual partners?
  - Primary partners
    - tend to be longer term relationships
    - there is more honesty, trust and security
    - engage in unprotected sex until the trust is broken
    - there is more room to explore why you are in love
    - do not have to worry about side-effects of the medication
  
  - Non-primary partners
    - they are casual encounters
    - they are short term
    - there is no honesty, trust or security
    - you are lucky if you remember their name
    - there is more use of alcohol and drugs
    - there is more room to explore sexually

- 5a. What issues arise regarding having sex with other HIV+ individuals?
- we do not worry about using condoms
  - there is a lot more drug use
  - there is more promiscuity
  - the sexual acts are “wilder” in bed
  - you practice more sexual acts/positions
  - there are more potential primary partners
  - there is more condom use to prevent re-infection
- 5b. What issues arise regarding having sex with other HIV- individuals?
- sex is limited
  - there is more safer sex, more foreplay and oral sex and more masturbation than penetration
  - more often sexual encounters
  - there is a concern about how people are going to treat you if they know your status, with hostility or kindness
  - there are fewer potential primary partners
  - age is a factor for understanding, the younger guys are less likely to understand
6. What are your concerns regarding being sexually active while being HIV+?
- infecting others and feeling guilty
  - not knowing when the you are going to get sick
  - not knowing how long you have to live
  - not knowing how this is going to impact my friends and family
7. What kinds of sexual health activities might help you cope in positive ways with the issues we have discussed? (Recruitment/retention)
- programs that provide information to young people, before they start having sex
  - condom distribution at APLA, bars, bath houses
  - sensitivity trainings
  - support groups
  - social gathering outside the bar
    - sports, camping, roller skating, going to the movies, plays, roller skating
    - activities that are comfortable, safe, fun, interesting, led by a motivated person, a person who wants to be there