

**New Mexico Comprehensive HIV
Prevention Plan 2009 – 2011:
*Supplement on Latino
Gay & Bisexual Men***

**New Mexico Department of Health (NMDOH)
HIV Prevention Program**

and

**New Mexico HIV Prevention
Community Planning and Action Group (CPAG)**

March 2010



Acknowledgments

A comprehensive HIV prevention planning process was conducted during 2008 – 2010 to develop the *Supplement on Latino Gay & Bisexual Men*, a companion document to the *New Mexico Comprehensive HIV Prevention Plan: 2009 - 2011*. This process and the resulting document were fully supported by a grant from the Centers for Disease Control and Prevention (CDC) under *Program Announcement 04012 - MSM Supplemental Grant 2008 – 2009*.

The planning process and development of this document were coordinated by Brent Herrera, Minority Initiatives Coordinator with the New Mexico Department of Health (NMDOH) HIV Prevention Program. Diverse community input for all phases of the project was provided by the New Mexico HIV Prevention Community Planning and Action Group (CPAG).

The HIV Prevention Program and the CPAG would like to thank the following agencies and individuals for their participation in statewide assessment activities and the pilot projects that illustrated the potential impact of culturally targeted approaches to HIV prevention.

Organizational Partners:

Amigos del Parque – Santa Fe, NM

Ana Matiella & Associates – Santa Fe, NM

Exhale Lounge – Albuquerque, NM

Families and Youth, Inc. (FYI) – Las Cruces, NM

New Mexico AIDS Services (NMAS) and Mpower Project – Albuquerque, NM

NMDOH Region 5 Disease Prevention Team – Las Cruces, NM

Salon de Mua – Santa Fe, NM

US/Mexico Border Health Association (USMBHA) – El Paso, TX

Individual Partners:

Adam Lord

Angelica Garcia

Anthony Rodríguez

Curtis Billie

David Daniels

Esther Almaraz

Janet Lindsey

Javier Rios

Jimmy Schrock

Joey Torres

Josh Derrig

Kate Schneier

Lonnie Barraza

Luis Saenz

Maria Chaparro

Mark Clark

Myrna Trujillo

Nancy Green

Rafael Escamilla

Shantih Bisland-
Naggan

Travis Leyva

Tony Escudero

Terminology

The ethnic term “Latino” is used to represent individuals who identify with Latin American or Caribbean nations or cultural groups within the United States who identify with Spanish speaking cultures. This term is meant to be inclusive of the Latino diaspora and is not intended to ignore its rich cultural diversity. In New Mexico, the term “Hispanic” is more commonly used by some populations so it is used interchangeably in this report.

The term “men who have sex with men (MSM)” is meant to be inclusive of men who identify as either gay or bisexual. MSM is used in the context of HIV prevention since it is based on behaviors that may put persons at risk of HIV infection, rather than self-identity. The term includes both persons who self-identify as gay or bisexual as well as men who engage in sex with other men but do not self-identify with these groups.

Background and Data

Latino MSM individuals in New Mexico, including gay/bisexual identified men, have the fastest growth in new HIV/AIDS diagnoses of any ethnic/racial and risk group. Based on HIV/AIDS epidemiologic data, Latinos account for 36% of all cumulative cases reported through the end of 2008 but they represent a larger proportion (48%) of newly diagnosed cases during 2008. In fact, there have been more new diagnoses among Latinos than among Whites each year from 2004 through 2008. Since the beginning of the HIV epidemic in New Mexico, the majority of Latino HIV/AIDS cases have been among gay/bisexual men and other men who have sex with men (MSM).

There is significant concern in New Mexico about individuals who delay getting tested for HIV and learn their status late in their disease. This leads to a high proportion of concurrent HIV and AIDS diagnoses (defined as persons who are diagnosed with AIDS simultaneously or within 1 year of being identified as HIV-infected). Among individuals diagnosed with HIV during the period from 1998 through 2007 (n=1373), 43% received an AIDS diagnosis within 1 year of their HIV diagnosis. The highest rate of concurrent diagnoses was among Latinos (47%), compared with only 41% of concurrent diagnosed cases among Whites.¹ (See *Appendix A for epidemiologic data on HIV/AIDS cases in New Mexico among Latinos.*)

New Mexico has the highest proportion of Latinos among its total population of any state. While HIV prevention efforts may serve Latinos among their mix of clients, few currently

¹ *New Mexico Department of Health/ HIV & AIDS Epidemiology Program: 2008 Annual Report*
http://www.health.state.nm.us/ERD/HealthData/HIV/HIV_annual_report_2008.pdf

funded HIV prevention interventions specifically target this ethnic group. There are several reasons for this service gap.

- New Mexico is a minority-majority state and Latinos reflect 44% of the population per 2007 census estimates. Therefore, almost all prevention programs serve a large Latino population without specifically targeting this community. As a result, many providers feel there isn't a gap, even without culturally specific efforts, services or recruitment.
- Northern New Mexico has had a large Hispanic population for hundreds of years, so this community is integrated into almost all cities and towns, large and small. Likewise, Hispanics are the majority in southern New Mexico. For example, in Las Cruces, the state's 2nd largest city, 52% of the population is Latino. Thus, in many New Mexico communities it is difficult to serve only Hispanics without serving all residents.

The New Mexico Department of Health's HIV Prevention Program collects and reports data on all HIV prevention programs across the state that receive federal and/or state funding. This includes 11 providers that deliver over two dozen different types of HIV prevention models. The majority of these are evidence-based strategies; in 2008, 59% of interventions were part of the Centers for Disease Control and Prevention's Diffusion of Effective Behavioral Interventions (DEBI) project. New Mexico organizations and public health programs have also successfully implemented various locally-developed HIV prevention interventions. Even though none of these efforts during 2008 were culturally specific to serve Latinos, data shows that many Latinos were reached and served during that year. In fact, just over half (52%) of all clients served by statewide programs were Latino. *(See Appendix B for table of 2008 data by type of intervention.)*

Resources

For more data and information regarding the impact of HIV/AIDS among Latinos see the following resources.

National

<http://www.nastad.org/Programs/communitiescolor/>

http://www.nastad.org/Docs/highlight/2009923_NASTAD_Call2Action_ADELANTE%20EN.pdf

http://www.nastad.org/Docs/Public/Publication/2009618_NASTAD_Border_Vol1_alpha.pdf

<http://www.latinoaidsagenda.org/LNHANForm.html>

<http://www.latinoaids.org/>

<http://www.cdc.gov/hiv/hispanics/resources/factsheets/hispanic.htm>

<http://www.kff.org/hivaids/upload/6007-07.pdf>

<http://www.nclr.org/content/publications/detail/42686/>

Local

http://www.health.state.nm.us/ERD/HealthData/HIV/HIV_annual_report_2008.pdf

http://www.health.state.nm.us/ERD/HealthData/HIV/Fact_Sheet_Hispanics_2008.pdf

Summary of Latino MSM Planning Initiative

In Fall 2008, the New Mexico Department of Health's HIV Prevention Program, in collaboration with the New Mexico HIV Prevention Community Planning and Action Group (CPAG), was awarded funding under the Centers for Disease Control and Prevention (CDC) *Program Announcement 04012 – MSM Supplemental Grant 2008-2009*. The funding was directed towards developing a Latino MSM HIV Prevention Plan, statewide assessment activities (survey and focus groups), as well as to fund and support two pilot HIV interventions that target gay, bisexual, or non-gay-identified Latino men. These activities together comprise the Latino MSM Planning Initiative.

A statewide Latino advisory committee was convened. The priorities of the committee were to direct the planning phase of the initiative and to inform needs assessment activities. The needs assessment helped to determine current HIV prevention needs, available services and resources, and key gaps for Latinos of various risk categories.

Community preferences for HIV prevention services as well as for media (e.g. TV, internet, magazine, etc.) were determined via a brief self-administered survey and four focus groups. The HIV Prevention Program also partnered with US/Mexico Border Health Association (USMBHA) to further assess HIV prevention needs and resources for Latino MSM living in southern New Mexico. Together with current epidemiological data, the results of these assessment steps informed the selection of two pilot HIV interventions designed specifically to be culturally appropriate and specific for Latino MSM in two regions of New Mexico.

Resources

The Latino Advisory Group met in fall 2008 and discussed the community resources and prevention strategies that both directly and indirectly serve the Latino community and/or specifically target gay or bisexually identified Latino men. For an up to date listing of all health care facilities, community based organizations, and NMDOH Public Health Offices that offer HIV testing and prevention services visit www.nmhivguide.org.

This list is not exhaustive and only represents advisory member's suggestions from their specific regions of New Mexico. Future advisory group work will focus on adding to this initial resource guide for Latinos. *(See Appendix C for a complete listing of the advisory group's list of Latino serving organizations, businesses and media outlets.)*

Gaps in HIV/AIDS Prevention Services and Resources

The following is a listing of gaps in HIV/AIDS prevention services for Latinas/os in New Mexico. These gaps were developed by the Latino Advisory Group, using their own expertise in combination with the results of the surveys and focus groups reported in the following narrative.

HIV Prevention Programs that are culturally specific and designed to target the following at-risk populations:

HIV-infected Latinas/os

Spanish speaking individuals and communities

Latinas

Gay and Bisexual Latinos

Non-gay-identified Latino men who have sex with men (MSM)

Latino transgendered individuals

Latino youth

Immigrant and migrant communities

HIV prevention programs, social marketing efforts and/or media campaigns that address the following:

Family acceptance

HIV/AIDS stigma

Homophobia

Gender and sex role expectations

Healthy sexual relationships and communication

Self esteem

Media and Services Survey Summary

Background and Development

In October 2008, a statewide Latino Advisory Group of HIV prevention professionals and community members convened to develop a brief Spanish-English survey to offer to Latino men. The survey targeted gay/bisexual men and MSM. It asked questions related to media preferences (e.g. TV, radio, internet) as well as preferences for strategies and styles of HIV prevention services.

Survey goals and objectives were established to guide the development process through its subsequent revisions. The length of the survey and literacy level were regarded as important elements in keeping the survey accessible and easy to complete by diverse community members from differing backgrounds. A “final” version of the survey was offered to HIV prevention community workers to receive direct feedback from individuals working with community members on a daily basis. This resulted in key changes to the survey including the decision to ask questions in an “I” statement format. In this way, the survey read in a more personal way with the hope that answers would be more truthful and accurate. (See Appendix D for final versions of the English and Spanish Surveys, including a modified version used in Southern New Mexico.)

Survey Implementation

The “Media and Services” survey was disseminated through various HIV prevention organizations and offered at a variety of community-based HIV outreach and testing events. The survey was strategically offered to Latino men at an Albuquerque GLBT bar as well as to focus group participants; these survey respondents received a \$10 gift card to encourage participation and provide thanks for their time. All respondents were anonymous with only minimal demographic data collected.

An important note is that the survey was not conducted Southern New Mexico, specifically the Las Cruces area, due to a lack of staffing to distribute the survey and appropriate venues in which it could be collected during the limited timeframe available. As a result of this gap, the survey results are not representative of the Latino male experience along the US/Mexico border. To address the needs of this population, US/Mexico Border Health Association conducted an assessment analysis based on past focus group interviews and other relevant research data that was collected in Southern New Mexico and El Paso, TX. This data was used to augment the findings from this initiative, so this important population would not be excluded from analysis.

Survey Findings

Respondent Demographics

Implementation of the survey allowed for both Latino men and non-Latino men to complete the survey. The summary of findings represents the 50 surveys completed by men who identified themselves as Latino.

The mean age of survey respondents was 30, with a range from 17 to 54 years old. A majority were born in the United States (82%) with 12% indicating Mexico as their place of birth. Regarding language most used – 82% indicated English, 10% indicated Spanish, and 8% indicated English and Spanish. The mean number of years of education was 14, with a range from 6 years of school to 20 years. The majority of respondents identified as gay (82%) or bisexual (12%). Eighty-two percent (82%) of respondents identified ‘men’ as their sex partners with 14% indicating both men and women as their sex partners. A “versatile” sex role (60%) was marked by the majority of respondents - with 26% indicating “top” (insertive anal sex) and 14% indicating “bottom” (receptive anal sex) as their preferred sexual activities.

Media

Television, internet, and radio were the top 3 preferences for media. Text messaging and “seeing each other in person” were respondents preferred method of staying in contact with friends. Phone and web-based social networking sites (e.g. Facebook.com, MySpace.com) were also indicated as ways respondents stay connected. Regarding media preferences when seeking sexual health information - 67% responded Internet. Websites such as Google, WebMD, and TheBody.com were listed as preferred sites.

Health Information, Services, and Status

“Private Doctors Office” (81%) was indicated as the place respondents went to receive healthcare services. NMDOH Public Health Offices (36%) and Urgent Care Clinics (25%) were also mentioned. “Healthcare Provider” (61%) along with “internet website” (49%) and “friends” (41%) were respondent’s top 3 choices for how they preferred to learn about sexual health, while one-third of respondents indicated they liked learning about sexual health in “small groups or workshops”.

A majority (77%) of respondents had received an HIV test in the last 12 months with 56% having received an STD test in the same time period. Regarding services for viral hepatitis – 66% indicated they had not received a Hepatitis B test and 62% had not received a Hepatitis C test. The majority of respondents indicated they had been vaccinated for Hepatitis A (72%) and Hepatitis B (74%)

Relationships

Respondents preferred to meet men for socializing and friendship at “bars/clubs” (54%), “coffee shops/businesses” (50%), and “internet websites” (40%). Just under one-third of respondents indicated “private parties” (29%) and one-fourth indicated “community events” (25%) for socializing and friendship

A majority (60%) of respondents answered the question regarding their preferred places to meet men for dates or sex. Of those that responded, 55% preferred “bars/clubs” and 52% preferred “internet websites”. Also indicated were “adult bookstores” or “private parties” at 21% each.

New Mexico Focus Group Summary

Background

In November 2008 and January 2009, the HIV Prevention Program conducted 4 focus group interviews with GBT Latino men who either identified as gay, bisexual, or as “men who have sex with men.” Technical assistance and facilitation were provided through a contract with Ana Matiella & Associates. Three of the focus groups were conducted in Spanish and one in English.

Participant Recruitment

Focus group interviews were conducted in Albuquerque and Santa Fe. A total of 35 men were recruited, ranging in age from 18 to 45. A Santa Fe community member was engaged to help recruit Latino men whose primary language was Spanish. In Albuquerque, MPower Project Coordinators helped in recruiting both Spanish-speaking and English-speaking Latino men for the focus groups. Given the limited media and other outlets that could be used to find this population, recruitment efforts were not widespread. In place of broad promotion, focus group coordinators decided to rely on personal connections and social networks to recruit participants. Recruitment happened by asking key participants to invite friends to the focus group.

Focus Group Interview Format and Process

Focus group participants were given \$15 to participate in the 1.5 hour group interview. Interview facilitators explained the purpose of the group interview and reminded participants that their responses would be kept anonymous. Basic group agreements were established to ensure every participant felt comfortable sharing their responses and experiences.

Interview questions were developed using the established goals and objectives for the Latino MSM Initiative. *(See Appendix E for the final versions of the focus group interview questions.)* Despite initial development, after conducting the first focus group, it was decided that some questions needed to be added and others re-structured to better elicit participant’s preferences for media (e.g. internet, radio, magazines). In addition, some questions were not asked in every interview group due to time constraints to allow the conversation to develop and follow a natural course. Future assessment activities would benefit from adhering to stricter research

methods and practices, so that responses could be compared across groups in a more consistent fashion. This could be accomplished through more directed conversation, fewer questions, or allotting more time for the focus group interviews.

West Texas CPG Focus Group Interviews²

El Paso, located 42 miles from Las Cruces, is the sixth largest city in Texas with an estimated population of 624,365. Ciudad Juárez, its sister city in Chihuahua, Mexico has a population of 1,563,973. The total metro area has a population of 2,319,058, one of the largest urban areas along the US-Mexico border. Residents of Las Cruces often travel to El Paso and Cd. Juárez to work, visit relatives, shop, and socialize.

In 2005, the West Texas HIV Prevention Community Planning Group in collaboration with Border Research Solutions, LLC conducted 2 focus group interviews as part of a community assessment of HIV/AIDS risk factors among HIV-infected Latino men. Nineteen (19) HIV positive men participated in 2 focus groups. One focus group consisted of 8 males between the ages of 30-45 years. The second focus group consisted of 11 males between the ages of 18-30 years. All participants were Latino and only men served as moderators for both focus groups in order to help participants feel at ease and help create a pleasant and responsive environment. A thematic analysis was conducted on the data available from the 2 focus groups. Participants expressed a variety of common themes as well as some unique themes within each individual group. The results of this project were shared with New Mexico's Latino MSM Initiative through a partnership with the US/Mexico Border Health Association (USMBHA).

(See Appendix F for key findings from the New Mexico and West Texas focus group interviews.)

² *New Mexico Latino Male and HIV Initiative: Assessment Report (2009) Nancy L. Green, M.Ed., USMBHA Consultant*

Initiative Recommendations

The following recommendations were developed by the Latino Advisory Group for this project, by synthesizing all of the results and findings from the New Mexico Media and Services Survey, the Spanish and English language focus groups conducted in New Mexico and the focus groups conducted in West Texas:

- 1. Encourage and support local and regional assessment activities that target Latino gay/bisexual men and MSM of all ages who vary in English/Spanish use, immigration status, socioeconomic status, cultural identification, HIV status, and sexual identification.**

Invite Latino men into the planning and evaluation activities of current or planned HIV prevention activities. Ensure a participation environment that is empowering, neutral, and positive.

- 2. Fund agencies to develop or expand HIV prevention programs that offer “fresh”, entertaining, and affirming outlets to connect with other Latino gay/bisexual men and MSM.**

HIV Prevention programs should focus on:

- a. supporting individuals in getting an HIV test, referrals to other related prevention services (STD, Viral Hepatitis, Harm Reduction) and when necessary linkage to medical care and treatment.
- b. Incorporating both formal and informal information sharing.
- c. increasing self-efficacy with main and casual sex partners around condom use for anal, oral, and vaginal sex. Build communication and negotiation skills related to condoms and sexual relationships in general.
- d. increasing skills around delaying the use of drugs and alcohol before and during sexual encounters. Promote the understanding of harm reduction as a way to lower the various risks associated with substance use.

- 3. Utilize the internet, text messaging, and radio to educate, recruit and promote a sense of community among Latino gay/bisexual men and MSM living in New Mexico.**
 - a. In particular, social network sites help to create local/regional portals for social connection, events calendars, and information sharing.
 - b. Ultimately, the Internet can help to develop a sense of collective identity and community, which lacks among Latino gay/bisexual men here in New Mexico. Websites that target Latino men can potentially create a sense of “place” and acceptance, which in turn can help to empower individuals and potentially impact decision and risk taking behaviors.

- 4. Develop HIV prevention programs and social marketing campaigns that strive to inform, educate and foster acceptance of gay/bisexual and MSM Latinos within Latino families and communities.**

- 5. Design and develop an intervention for gay/bisexual and MSM Latinos that directly addresses the issues of isolation and low self esteem which may result from the lack of acceptance from one’s family and culture.**

- 6. Engage local and regional healthcare providers in media campaigns and education materials, and invite them into the planning process for current or planned HIV prevention programming.**

Summary of HIV Prevention Pilot Projects for Latino MSM

In spring 2009, two existing contractors of the NMDOH HIV Prevention Program were awarded special augmentations in their annual funding using dollars from the CDC Supplemental Award to develop and implement pilot HIV prevention programs targeting Latino gay/bisexual men and MSM. These two agencies, Families and Youth Inc. (FYI) of Las Cruces and New Mexico AIDS Services (NMAS) of Albuquerque, were selected because they demonstrated the capacity and interest to implement these targeted efforts quickly during the brief project period.

Pilot programs were funded from July through December 2009. Common elements between the interventions included targeting Spanish speaking individuals, an emphasis on community building, the use of social networks, and utilizing the internet to recruit and promote project activities. In addition, participants for each program had access to HIV testing, education, and referrals.

As of the writing of this report, each of these agencies had successfully completed the stated deliverables and activities for the pilot phase of the interventions during calendar 2009. As a result of completing these efforts, both were able to apply for and receive ongoing funding from the NMDOH HIV Prevention Program under a comprehensive Request for Proposals (RFP) for HIV prevention projects that was released in summer 2009. Below is a brief synopsis of the pilot projects and targeted interventions.

Pasa La Voz

Families Youth Inc. (FYI), a Las Cruces, NM based health and social services agency, in collaboration with the El Paso, TX-based US/Mexico Border Health Association and the New Mexico Department of Health, implemented an HIV Testing initiative targeting Latino MSM in Southern New Mexico. Pasa La Voz (PLV) was developed locally by USMBHA and continues to be piloted and evaluated for its effectiveness at recruiting various populations into HIV testing. PLV has shown success among high risk Latinas in western Texas, young Latino MSM in El Paso, TX and in Ciudad Juarez, Mexico. Pasa La Voz as it has been implemented by FYI to target Latino MSM will contribute to the ongoing understanding of its effectiveness as a strategy to increase HIV testing and education among high risk populations.

Pasa La Voz is a participant-driven intervention. It uses social networks to identify and access hard-to-reach populations. Participants are encouraged to recruit other participants from their own social networks into HIV prevention services and programs, such as HIV and STD testing. Several participants are identified as Promotores and offered training and support in recruiting

initial participants, “Semillas”, into the program. Semillas are then offered support in recruiting members of their social networks into HIV testing and services.

FYI identified several unique circumstances and challenges in implementing Pasa La Voz. These included a lack of gay community organizations, activities, or venues in Southern New Mexico, conservative cultural and political perspectives in the region, and a limited network of HIV prevention agencies in the region. In response to these and other challenges, USMBHA and the regional NMDOH team provided extensive training and support to FYI staff and other interested community members throughout the pilot project phase.

A targeted recruitment strategy was identified as a way to engage Latino MSM. Recruitment strategies and venues included promoting PLV in other HIV prevention programs, networking with gay community organizations affiliated with New Mexico State University, developing a Facebook account, and outreaches to various bars/restaurants and local public sex environments or businesses. In addition, FYI developed a calendar of educational and social events for all PLV participants aimed towards providing a community space for Latino MSM to meet, interact, and stay involved with the project. Promotores and Semillas were also offered continual training and support in recruitment strategies and community building.

Pasa La Voz in Southern New Mexico will continue to provide outreach and HIV testing to Latino MSM in 2010. Lessons learned during the pilot phase highlight the need to continue to focus on effective recruitment and retention strategies while maintaining a focus on community building by offering educational and entertaining events for Latino MSM. A final positive outcome of implementing PLV has been the growing spirit of collaboration among community members, community health organizations, and NMDOH staff. Implementing Pasa La Voz required work and commitment from many individuals and agencies to ensure that HIV services would be provided in a professional and timely manner.

Mpowerment Espanol Project

The Mpower Project of New Mexico AIDS Services (NMAS) in Albuquerque was awarded funding to pilot a Spanish speaker’s initiative to target young gay/bisexual Latino men. Mpower is one of the original sites in the United States of the Mpowerment DEBI model. Mpowerment is a science-based project that combines social marketing theory and asserts that participants are more likely to adopt sexual behavior changes if such changes are learned from and modeled by their peers.

The overall goals of Mpowerment and of the Spanish speaker’s initiative are to develop among participants a healthy sense of self and a sense of community wherein safer sex is the norm.

Initiative participants took part in a variety of activities that promoted safer-sex norms, self-esteem, and community building. Activities included: Core Group (a bi-monthly gathering of participants who plan and evaluate activities), Quarterly Forums, Educational workshops on safer sex and communication, and a Bi-weekly Outreach to gay venues to promote the Mpowerment Espanol activities. In addition, a Spanish Mpower MySpace page was developed along with weekly internet outreach in Spanish language gay chat rooms. Additional activities include HIV testing and community events highlighting National Latino AIDS Awareness Day (NLAAD). The largest event organized was the “Queenceaneria” fiesta in October 2009 where 60 individuals socialized and networked with other MPower ABQ and MPower Espanol participants.

MPowerment Espanol will continue to target and provide activities for gay/bisexual Latino men through 2010, emphasizing activities and education for Latino men who primarily speak Spanish.

Appendix A

Latinos and HIV in New Mexico: Selected Data³

HIV/AIDS Incidence 2004-2008					
		Hispanics		Whites	
Year	Total Incident HIV/AIDS cases	HIV/AIDS cases	% of total	HIV/AIDS cases	% of total
2004	158	87	55%	54	34%
2005	138	71	51%	50	36%
2006	158	85	54%	48	30%
2007	150	75	50%	49	33%
2008	152	74	47%	48	32%

³ New Mexico Department of Health/ HIV & AIDS Epidemiology Program: 2008 Annual Report
http://www.health.state.nm.us/ERD/HealthData/HIV/HIV_annual_report_2008.pdf

HIV/AIDS Incidence by NM Region (2008)					
		Hispanics		Whites	
Region	Total HIV/AIDS cases	HIV/AIDS cases	% of total	HIV/AIDS cases	% of total
Northern NM	43	18	42%	10	23%
Albuquerque/ Bernalillo County	70	35	50%	25	36%
Southern NM	40	21	53%	13	33%

HIV/AIDS Prevalence by NM Region (1981-2008)					
		Hispanics		Whites	
Region	Total HIV/AIDS cases	HIV/AIDS cases	% of total	HIV/AIDS cases	% of total
Northern NM	744	281	38%	330	44%
Albuquerque/ Bernalillo County	1036	477	46%	441	43%
Southern NM	503	264	52%	189	38%

HIV/AIDS Prevalence among Hispanics by Mode of Exposure (1981-2008)	
Mode of Exposure	HIVAIDS cases
MSM	779
IDU	131
MSM/IDU	121
Heterosexual	140
Other	7
NIR	148
Pediatric	9
TOTAL	1335

HIV/AIDS Prevalence among Hispanics by Sex (1981-2008)	
	HIVAIDS cases
Male	1191
Female	144
TOTAL	1335

HIV/AIDS Prevalence among Hispanics by Age at Diagnosis (1981-2008)	
Years	HIVAIDS cases
< 13	5
13-19	33
20-29	360
30-39	531
40-49	316
50+	90
TOTAL	1335

Appendix B

Latinos and HIV Prevention Interventions in New Mexico: Selected Data⁴

Program Model Name	Hispanic	%	All other racial and ethnic groups	%	Total
MPOWERMENT	3532	48%	3854	52%	7386
LOCAL IDG	816	48%	880	52%	1696
COMMUNITY PROMISE	1398	61%	901	39%	2299
INTERNET IDI	2146	47%	2429	53%	4575
ACUDETOX	397	37%	676	63%	1073
IDI	882	63%	495	36%	1377
3MV	74	26%	210	74%	284
COMMUNITY LEVEL INTERVENTIONS	453	40%	670	60%	1123
NEXT STEP	20	48%	22	52%	42
EXPERIENTIAL ADVENTURE	58	54%	49	46%	107
HEALTHY RELATIONSHIP	188	61%	122	39%	310

⁴ New Mexico Department of Health - HIV Prevention Program
 JohnJ.Murphy@state.nm.us (505) 476-3684

Program Model Name	Hispanic	%	All other racial and ethnic groups	%	Total
POL	192	49%	197	50%	389
RAPP	153	53%	134	47%	287
WOMAN 2 WOMAN	861	79%	227	21%	1088
RESPECT	80	89%	10	11%	90
SAFETY COUNTS	25	89%	3	11%	28
VOICES/VOCES	228	48%	244	52%	472
RECRUITMENT	1789	67%	867	33%	2656
DO IT RIGHT	43	32%	90	68%	133
SMART STEP	28	76%	9	24%	37
PARTNERSHIP FOR HEALTH	353	37%	582	60%	935
INTERGRATED INFECTIOUS DISEASE SERVICES	978	57%	723	43%	1701
TOTAL	14694	52%	13394	48%	28080

Appendix C

Southern NM HIV/AIDS & GLBTQ Resources- 2010

Name	Telephone	Fax	Hours of Operation	Services		
Families and Youth, Inc 1320 S Solano Dr Las Cruces, NM 88004 www.fyinnm.org	575-556-1549		M-Thurs: 8:30am-5:30pm; Fri: 8:30am-4:30pm	HIV Testing HIV Prevention Education	STD Testing, Condoms	Harm Reduction
Community Collaborative Care Program New Mexico Department of Health Region 5	575-528-5031		M-F 8:00am-4:00pm Call to make an appointment	Primary and HIV Specialty Care Mental Health and Substance Abuse	Support Services Housing assistance Food Bank	Medical and Non-medical Case Management Insurance and assistance program enrollment
Mescalero PHS Indian Hospital PO Box 210/ 301 Abalone Loop Mescalero, NM 88340	575-464-4441					
Alianza Of New Mexico 200 W Hobbs Roswell, NM 88203 http://alianzanm.org/index.htm	575-623-1995		M-F: 9:00am-5:00pm	HIV Testing, HIV Prevention Education HIV Support Services HIV Treatment	STD Testing, STD Treatment, Condoms	Harm Reduction
New Mexico Gay-Straight Alliance Network PO BOX 449 Tesuque, NM 87574 Contact: Cooper Lee Bombardier E-mail: cooper@santafemc.org Website: http://www.nmgsa.org/index.html	505-983-6158 ext. 21 505-983-6158 ext.33 (hotline)					

Name	Telephone	Fax	Hours of Operation	Services		
<p>Sexual and Gender Diversity Resource Center (SGDRC)- NMSU</p> <p>MSC 3ATP PO Box 30001 Las Cruces, NM</p> <p>Physical: Regents Row 531</p> <p>Contact: Sharna Horn E-mail: sgdrc@nmsu.edu Website: http://nmsu.edu/~sgdrc/</p>	575-646-7031					
<p>Stonewall Queer-Straight Alliance - NMSU</p> <p>Contact: Trevor, Stonewall QSA President E-mail: trevorna@nmsu.edu</p>	575-646-7031					
<p>Southern New Mexico Pride</p> <p>Contact: Carrie Hamblen</p> <p>E-mail: chamblen@nmsu.edu</p> <p>Website: http://www.southernnmpride.org/</p>						

Name	Telephone	Fax	Hours of Operation	Services		
<p>PFLAG Las Cruces/Dona Ana County</p> <p>c/o Unitarian Universalist Church 2000 South Solano Las Cruces, NM 88001</p> <p>Contact: Carrie Hamblen, President</p> <p>E-mail: pflaglascruces@yahoo.com</p> <p>Website: http://community.pflag.org/Page.aspx?pid=194</p>	(575) 496-5242					
<p>NM GLBTQ Centers</p> <p>PO BOX 2371 Las Cruces, NM 88004</p> <p>Physical: 1210 N. Main St.</p> <p>Contact: Richard Scramstad, President Contact: David Stocum, Executive Director</p> <p>E-mail: president@newmexicoglbtccenters.org</p> <p>Website: http://www.gaynewmexico.org/</p>	<p>575-635-4902</p> <p>1-888-286-9306 toll-free)</p>					

Name	Telephone	Fax	Hours of Operation	Services		
<p>Las Cruces Gender Bender</p> <p>Contact: John Boler, Co-Editor</p> <p>E-mail: jabart83@aol.com)</p> <p>Website: http://www.lascrucesgenderbender.org/</p>						
<p>The Sabra Connection</p> <p>Contact: Dixie Binning</p> <p>E-mail: Dixie@agavue.com</p> <p>Website: http://www.lascrucesgenderbender.org/</p>	575-267-1918					
<p>Rio Grande Adelante</p> <p>PO BOX 920061 El Paso, TX 79902</p> <p>Contact: Jonathan Kennedy, Chair</p> <p>E-mail: Use website contact link</p> <p>Website: http://www.rgadelante.org/index.html</p>	915-920-4412					

Name	Telephone	Fax	Hours of Operation	Services		
New Mexico Aids Services 625 Truman St NE Albuquerque, NM 87110 www.nmas.net	505-938-7100		M-F: 9:00am-5:00pm	HIV Testing, HIV Prevention Education HIV Support Services, HIV Treatment	STD Testing, Condoms	Harm Reduction
Navajo AIDS Network 101 E Hill Ave Gallup, NM 87301 www.navajoaidsnetwork.org	505-863-9929		M-F: 8:00am-5:00pm	HIV Testing, HIV Prevention Education, HIV Support Services	Condoms	
Equality New Mexico 1410 Coal Ave., SW Albuquerque, NM 87104 Basic Information: info@eqnm.org Volunteer: volunteer@eqnm.org Intern: intern@eqnm.org Website: http://www.eqnm.org/	505-224-2766					

Name	Telephone	Fax	Hours of Operation	Services		
Las Cruces (Central) Public Health Office 1170 N. Solano Dr. Las Cruces, NM 88001	575-528-5000	575-528-6032	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Sunland Park Public Health Office 3807 McNutt Rd - P.O. Box 390 Sunland Park, NM 88063	575-589-2543	575-589-9548	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Chaparral Public Health Office 317 McCombs Chaparral, NM 88081	575-824-4734	575-824-3071	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	
Anthony Public Health Office 865 N. Main Anthony, NM 88021	575-882-5858	575-882-3063	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
West Las Cruces Public Health Office 1850 Copper Loop, Bldg A Las Cruces, NM 88005	575-523-7335		M-F: 8:00am-5:00pm			
Dona Ana Village Public Health Office 5595 Elks Road Las Cruces, NM 88005	575-523-7991	575-528-6032	M-F: 8:00am-5:00pm			
East Mesa Public Health Office 5220 E Holman Road Las Cruces, NM 88012	575-382-0540	575-373-4737	M-F: 8:00am-5:00pm			
Hatch Public Health Office 3 Chile Capital Ln Hatch, NM 88119	575-267-5213	575-267-3516	M and Thur: 9:00am-4:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	
Catron County Public Health Office 1 Foster Lane Reserve, NM 87830	575-533-6432	575-533-6469	Call for appointment			

Name	Telephone	Fax	Hours of Operation	Services		
Grant County Public Health Office 2610 N. Silver Silver City, NM 88062	575-538-5318	575-388-4847	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Hidalgo Public Health Office 530 De Moss Street Lordsburg, NM 88045	575-542-9391	575-542-3544	Call for appointment			
Lincoln Public Health Office 117 Kansas City Rd Ruidoso, NM 88345	575-258-3252	575-258-5743	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Luna Public Health Office 215 S. Silver Deming, NM 88030	575-546-2771	575-546-9427	M-F: 8:00am-5:00pm	HIV Testing	STD Testing; STD Treatment; Condoms	Harm Reduction
Holloman Public Health Office Family Support Ctr. Bldg 40 Holloman AFB, NM 88330	575-572-7369	575-475-7368	M-F 8:00am - 4:00pm, Call for appointment			
Otero Public Health Office 1207 8th Street Alamogordo, NM 88310	575-437-9340	575-437-6629	M-F 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Tularosa Public Health Office 404 Fresno Tularosa, NM 88352	575-585-3019	575-585-3010	M-F 8:00am-5:00pm; Call for appointment			
Sierra Public Health Office 201 East 4 th Truth or Consequences, NM 87901	575-894-2716	575-894-3478	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Socorro Public Health Office 214 Neel Avenue NW Socorro, NM 87801	575-835-0971	575-835-3119	M-F: 8:00am-5:00pm	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction

Name	Telephone	Fax	Hours of Operation	Services		
Moriarty Public Health Office 1110 Route 66 Moriarty, NM 87035	505-832-6782	505-832-1507	M-F: 8:00am - 5:00pm, Call for appointment	HIV Testing	STD Testing, STD Treatment, Condoms	Harm Reduction
Estancia Public Health Office 301 S 8th Street Estancia, NM 87016	505-384-2351	505-384-2626	M-F: 8:00am-5:00pm, Call for appointment	HIV Testing	STD Testing, STD Treatment, Condoms	

Appendix D

Media and Services Survey

Thank you for taking the time to participate in the New Mexico Community Planning and Action Group (CPAG) Media and Services Survey. Your responses will help to improve HIV, STD and Hepatitis prevention efforts throughout New Mexico.

Your choice to participate in this survey is completely voluntary. Your responses will remain anonymous. Please try to answer all the questions. If a question makes you feel uncomfortable just skip it.

This survey asks questions about your media (TV, radio, internet) and health services preferences. This effort will help state, tribal, and community-based agencies find the best ways to communicate with men about health and prevention services.

Sexual Health means having the knowledge, skills and ability to make informed sexual choices and act responsibly to protect your health and the health of others. Sexual health includes the ability to engage in consensual sex of your choice, without causing or suffering physical or mental harm.

Zip Code: _____

Age: _____

Gender: Male Transgender (Male to Female) Transgender (Female to Male)

Race/Ethnicity: Asian /Pacific Islander African American/Black Latino/Hispanic Native American
 White Other: _____ Mixed Race/Ethnicity: _____

What language do you use most? _____

What country were you born in? _____

If you were not born in the United States, how long have you lived in the US? _____

How many years of education have you completed? _____

Sexual Identification: Gay Bisexual Straight Queer Other _____

Sex Role: Top Bottom Activo Pasivo Versatile

1. I stay connected to my friends by... *Put an X on your top 3 choices*

- Seeing each other in person often Phone Text messaging Email Internet chat
 Social Network Sites (Myspace, Friendster Facebook, etc.) Written Letters Private parties
 Public events Social Clubs or groups Community Organization Bars/Club Other _____

2. I go to the following places for health care. *Put an "X" on your top 3 choices*

- Private Doctor's Office Urgent Care Clinic Emergency Room Health Department office
 Alternative Medicine (herbalist, curandero/a, Chinese medicine) Mobile Health Van
 HIV Service Organization *Which one:* _____ Hospital
 Community Health Organization *Which one:* _____

3. Please answer the two questions below... Put an X on your top 3 choices and write in your answers.

	3a) I frequently see, hear, or read the following types of media		3b) I prefer getting information about health or sexual health from the following types of media.	
	X	Which ones	X	Which ones
Radio				
Television				
Internet				
Newspapers				
Magazine				
Billboards				
Bus Stop Ads				
Bus Banners				
Other				
Does not apply to me				

4. Please answer the two questions below... Put an "X" next to all that apply and write in your answers

	4a) I prefer to meet other men for socializing and friendship at the following places.		4b) I prefer to meet men to date or for sex at the following places.	
	X	Which ones	X	Which ones
Adult Bookstore				
Bars/Clubs				
Coffee shops, restaurants, other businesses				
Community events (<i>Gay Pride; Drag Show</i>)				
Community organization (<i>programs or events</i>)				
Internet Websites				
Private parties				
Public cruising place				
Social Clubs or groups				
Other				

5. I prefer to learn about Sexual Health in the following ways.

Put an "X" next to your top 3 choices and write in your answers

	X	Which ones
Friends		
Healthcare Provider (doctor, nurse, etc.)		
Large classes or workshops		
Small classes or workshops		
Internet Website		
Informational Videos		
Brochures		
Magazines		
Fotonovelas		
Community Events		
Other		
I do not look for sexual health information		

6. In the last year, I have participated in the following sexual health activities.

Put an "X" in the appropriate box

	Yes	No	If Yes, Where?
HIV Test			
STD Test			
Hepatitis B Test			
Hepatitis C Test			

7. I have received the Hepatitis A vaccine Yes No

8. I have received the Hepatitis B vaccine Yes No

9. My sexual partners are....? *Check all that apply*

- Men Women Transgender (Male to Female) Transgender (Female to Male)

10. In the past, the following reasons have made me *Put an "X" on all that apply*

	10a) ...not want to get an HIV test.	10b) ...not return for my HIV test results.	10c) ...not seek general health services.
Takes too long			
Don't know where to go			
Worried that others will find out and judge me			
Fear about learning results			
Don't know where I can get services in Spanish			
Don't know a place that will be sensitive to my culture			
I'm pretty sure I'm negative without getting a test			
I'm pretty sure I'm positive without getting a test			
Other priorities Explain _____			
Concerns about Immigration status			
No transportation			
Other Explain _____			
Does not apply to me			

11. Do you have any other suggestions on how we can reach men like you with important HIV and other sexual health information?

THANK YOU FOR PARTICIPATING!

ENCUESTA SOBRE LOS MEDIOS DE COMUNICACION Y LOS SERVICIOS MEDICOS

Muchas gracias por acceder a llenar la Encuesta sobre los Medios de Comunicación y los Servicios del Grupo de Planeación y Acción para la Comunidad de Nuevo México (CPAG por sus siglas en inglés). Sus respuestas nos ayudarán a mejorar los esfuerzos para prevenir VHI, ETS y la Hepatitis a través de Nuevo México. Su participación en esta encuesta es completamente voluntaria. Sus respuestas permanecerán en el anonimato. Por favor trate de contestar todas las preguntas. Si una de las preguntas lo hace sentir incómodo, no tiene que contestarla.

Esta encuesta hace preguntas acerca de sus preferencias sobre los medios de comunicación (televisión, radio, internet) así como sus preferencias con respecto a la salud. Al recopilar esta información intentamos ayudar a las agencias basadas comunitarias, ya sean estatales o de las tribus Nativo Americanas, a encontrar las maneras mejores de comunicarse con los hombres acerca de su salud y de los servicios preventivos.

Salud Sexual significa que usted tiene el conocimiento, las destrezas y la habilidad para tomar decisiones con conocimiento de causa sobre preferencias sexuales y que usted actúa responsablemente para proteger su salud y la salud de otros. El concepto de salud sexual incluye la habilidad de entrar en una relación sexual de mutuo acuerdo, sin causar o sufrir daños físicos o emocionales.

Código Postal _____

Edad: _____

Género: Masculino Transexual (Masculino a Femenino) Transexual (Femenino a Masculino)

Raza/Etnia: Asiático/Isleño del Pacífico Africano-Americano/Negro Latino/Hispano
 Nativo Americano Blanco Otra: _____ Raza Mixta/Etnia: _____

¿Qué idioma usa usted más? _____

¿En qué país nació usted? _____

¿Si usted no nació en los Estados Unidos, cuánto tiempo hace que vive en los Estados Unidos?

¿Cuántos años de educación ha completado? _____

Identificación Sexual: Gay Bisexual Heterosexual Homosexual Otro

Posición Sexual: Arriba Abajo Activo Pasivo Versátil

1. Yo me conecto con mis amigos por medio de... Marque con una X sus 3 medios preferidos

- Nos vemos muy seguido en persona Nos hablamos por teléfono Nos enviamos mensajes textuales Por E mail
- Hablamos por Internet Nos comunicamos por sitios de la Red social (Mi espacio, Álbum de Amigos, etc.)
- Nos escribimos cartas Asistimos a fiestas privadas Eventos Públicos Organizaciones Comunitarias
- Cantinas/Clubes Otros lugares _____

2. ¿A cuál de los siguientes lugares va usted para atender su salud?

Marque con una "X" sus 3 lugares preferido

- Doctor particular Clínica para cuidado urgente Sala de emergencia Clínica del Departamento de Salud
- Medicina Alternativa (herbolario, curandero/a, medicina China) Clínica móvil Hospital
- Organización de servicios para VHI ¿Cuál?: _____
- Organización social de salud ¿Cuál?: _____

3. Por favor conteste las dos preguntas siguientes... *Marque con una "X" sus 3 lugares preferido y anote su contestación*

	3a Yo veo, escucho, o leo frecuentemente los siguientes medios de comunicación		3b) Prefiero obtener información acerca de mi salud sexual de los siguientes medios de comunicación	
	X	Cuáles	X	Cuáles
Radio				
Televisión				
Internet				
Periódicos				
Revistas				
Cartelones				
Avisos en la estación de autobús				
Rótulos en los Autobuses				
Otros				
Does not apply to me				

4. Por favor conteste las dos preguntas siguientes... *Marque con una "X" todo lo que sea aplicable y anote su contestación*

	4a) Yo prefiero conocer a otros hombres para socializar y amistad en los siguientes lugares		4b) Yo prefiero conocer hombres para citarme con ellos o para tener relaciones sexuales en los siguientes lugares	
	X	Cuáles	X	Cuáles
Librería para Adultos				
Cantinas/Clubes				
Cafeterías, restaurantes, Otros negocios				
Acontecimientos en la Comunidad: <i>(Desfile Gay, Desfile de Modas)</i>				
Organizaciones comunitarias <i>(Programas o eventos)</i>				
Lugares en Internet				
Fiestas privadas				
Lugares públicos de Paseo				
Clubes sociales o grupos				

10. ¿Cuál de las razones siguientes, en el pasado, lo ha hecho... (Marque con una "X" todas las situaciones concernientes)

	10a) ... no querer hacerse la prueba VHI?	10b) ... no regresar por los resultados de mi prueba VHI?	10c) ... no buscar servicios de salud en general?
Toma demasiado tiempo			
No sé a dónde ir			
Me da miedo que otros lo sepan y me juzguen			
Me da miedo saber los resultados			
No sé a dónde ir para obtener servicios en español			
No conozco un lugar donde sean sensibles a mi cultura			
Estoy seguro que mis resultados son negativos sin hacerme la prueba			
Estoy seguro que mis resultados son positivos sin hacerme la prueba			
Tengo otras prioridades Explíquelas por favor _____			
Me preocupa mi situación como inmigrante			
No tengo transportación			
Otros motivos Explíquelos por favor _____			
Esto no me concierne			

11. ¿Tiene usted algunas otras sugerencias para ponernos en contacto con otros hombres que comparten sus preferencias para darles importante información sobre VIH así como otra información sobre su salud sexual?

¡MUCHAS GRACIAS POR SU PARTICIPACION!

Appendix E

Plática Sobre Cómo Promover La Prevención del VIH

1. ¿Por que creen ustedes que los hombres gay no se hacen le prueba del VIH?
2. ¿Cual serán las razones por las cuales los hombres no van a hacerse chequeos medicos o van a que los atienda el medico?
3. ¿Cuál es la mejor manera de educar a hombres cómo ustedes sobre el VIH?
4. Si ustedes estuvieran encargados de un programa de educación y promoción dedicada a informar a los hombres Gay Latinos que no hablan ingles, ¿Cómo la harían?
5. ¿Qué es lo que el programa del VIH/SIDA tiene que hacer para asegurar que los hombres como ustedes se protejan contra el VIH y que usen condones?
6. ¿Cuáles los sus medios de comunicación que ustedes ven, usan o escuchan con más frecuencia?
7. ¿Cuál es la persona en sus vidas a la cual le tienen más confianza?
8. ¿Cual es la persona más indicada a dar informes y consejos sobre la salud sexual de usted?
9. ¿Cómo mantienen ustedes el contacto con sus amigos?
10. ¿Dónde conocen a otros hombres gay para salir con ellos o para tener relaciones sexuales?
11. ¿Cómo prefiere aprender sobre la salud sexual?
12. ¿Conozen a organizaciones públicas aqui en Santa Fe o en Albuquerque que se dedican a proveer servicios para los hombres Gay? Gay Latinos? ¿Cuáles son?

Questions translated to English:

1. Why do you think gay men do not take the HIV test?
2. What could be reasons that men in general do not go in for regular check ups?
3. What is the best way to educate men like you about HIV?
4. If you were in charge of an education program or a promotional effort with the purpose of educating Gay Latinos who do not speak English, how would you do it?
5. What could the HIV program do to make sure that men like you would protect themselves by using condoms?
6. What are the means of communication that you use the most?
7. Who is the most trusted person in your life?
8. Who is the most appropriate person to give you advice or information about sexual health?
9. How do you keep in touch with friends?
10. Where do you meet gay men when you want to date or have sex?
11. How do you prefer to learn about sexual health?
12. Do you know of organizations who provide services to Gay Latinos? Which ones?
13. Have you heard of Empower, Santa Fe Mountain Center or NMAS?

Appendix F

Focus Group Interviews: Key Findings

New Mexico Focus Groups

Spanish Focus Groups

1. The acceptance and understanding of their families as well as the broader Latino community was important to all focus group participants. Participants stressed the importance of family education rather than targeting Latino GBT folks exclusively.
2. Participants discussed the conservative values of the broader Latino community, including the stigmatization and disdain for gay people, resulting in feelings of isolation and low-self-esteem among Latino MSM.
3. Participants agreed that HIV prevention programs or media campaigns need to promote the diversity within the Latino gay community and not assume all GBT/MSM Latino are the same culturally. Immigration status and language ability were highlighted.
4. Internet and texting are the preferred media for the majority of participants.
5. Participants expressed a great desire for HIV Prevention programs that were conducted in Spanish. In addition, they stressed the importance of having well-informed and well-trained individuals offer these activities.

English Focus Groups

1. Internet and texting are the preferred means of communication for this group of participants. Radio was mentioned more often than TV or print media.
2. When seeking sexual health information or services, all participants preferred healthcare providers (nurses, doctors, etc.) as well as staff from community based organizations. A non-judgmental and safe environment were stressed as key to receiving quality healthcare.
3. Participants expressed that HIV Prevention programming and media campaigns need to be affirming, exciting, and entertaining. Participants preferred small group activities where learning happened both formally and informally.
4. Participants felt that HIV Prevention programs need to consider diversity within the Latino community, especially around such issues as language and immigration status.

West Texas Focus Group

1. Gay and bisexual men may encounter challenges in accessing prevention education designed to promote safe sex practices. Some of these challenges can be attributed to Hispanic cultural influences such as machismo, which can lead to sexual silence among gay and bisexual men. Specifically, strong machismo attitudes and the stigma linked to homosexuality in conservative cultures may prevent men from identifying themselves as gay or bisexual as well as from identifying themselves as someone who is HIV/AIDS positive. As a result these men may be more inclined to engage in high-risk secretive sexual practices and to conceal their HIV status. Another negative outcome of this sexual silence is that these men may miss opportunities to receive any HIV/AIDS prevention education or health related interventions targeted to MSM.
2. Fear of rejection is a factor that prevents HIV positive Latinos from telling someone about their HIV status.
3. HIV positive status has not affected participants and they had always tried to use and continue to use condoms.
4. It was important to use a condom in order to prevent re-infection or so others won't get infected.
5. Participants stated that receiving more education and awareness about HIV/AIDS and being able to take better care of themselves would make it easier to use a condom.
6. Some participants stated that the use of condoms affects many Latino men because of the "machismo" that exists in the Hispanic culture and because most of the time they don't want to use a condom. They stated that many Latino men are closed and have beliefs that are taught by parents and families about "machismo" and about not using condoms. And when alcohol or illegal drugs are consumed, it makes it more difficult to think about using a condom.
7. Perceptions of people or about themselves change after they consume alcohol. Alcohol helps them feel more confident because it relaxes them and not care about things.
8. The use of drugs is usually due to depression or loneliness and the consequences of using drugs were low-self esteem and sexually transmitted infections.