

Rapid Review Response: Latino men and coming out

Question: Are patterns of ‘coming out’ different for Latino men as compared to White men and are there any differences in psychosocial, health, access to health services and HIV outcomes?

The Issue and Why It’s Important

‘Coming out’ or disclosing one’s sexual orientation to family, friends, co-workers and the community is a life-long process of accepting and affirming one’s sexual identity and being open about it (1;2). Generally, for some Men who have Sex with Men, (MSM), ‘coming out’ is traumatic as it is sometimes accompanied by isolation, alienation and violence from families, friends and the community (3-8). Religion, culture and racism also impose additional pressures on MSM from racial/ethnic communities when ‘coming out’ about their sexual orientation (3;4;7-10).

Existing research on the differences in ‘coming out’ patterns between Latino and White men MSM is inconclusive (5). Despite research indicating that Latino MSM are less likely than White MSM to disclose a non-heterosexual orientation (8), there is also research to show that there are no significant differences in ‘coming out’ patterns for White and Latino MSM (5). Further research is required to ascertain the difference if any. Existing research focuses largely on lesbians, gays and bisexuals (LGB) as a single group, with few studies dedicated exclusively to Latino MSM (5).

Key Take Home Messages

- Further research is required to fully demonstrate the differences in ‘coming out’ patterns between Latino and White MSM and how these differences impact health, HIV outcomes and access to health care (5;10).
- Latino MSM have specific healthcare needs (5). Healthcare workers should integrate more opportunities for them to disclose their sexual identity and behaviour during health assessments (5).
- Latino MSM are not a homogenous group (3;9). Future research should address potential differences in the patterns of ‘coming out’ among different Latino communities (11).
- Mental health professionals should focus on addressing internalized homophobia among Latino MSM, as it can often cause symptoms of psychological distress including suicide among MSM (3;9).

What we Found

Existing research on Latino MSM focuses extensively on mental health, HIV/AIDS and other sexually transmitted infections (5). To provide comprehensive, appropriate and sensitive health

care to Latino MSM further research is required to determine how ‘coming out’ to friends, family and the community affects their health, access to health care and HIV outcomes (5). The articles reviewed noted that Latino MSM often experience additional pressure from their communities when ‘coming out’ for the following reasons:

- Coming out’ as an MSM is viewed as a rejection of the Latin American culture. Conformity is a key element in the lives of Latino family members (2;9).
- Due to the perception that the ‘Latino man’ must be masculine (3), MSM who exhibit effeminate characteristics are viewed as ‘alien’ and ‘inferior’ (2). Gender non-conforming MSM are more frequently confronted with stressful events (10).
- Traditionally it is believed that homosexuality is never justifiable behaviour. For example, in Canada 25.3% of the population think that homosexuality is never justifiable behavior (6).

Health outcomes

There is a link between rejecting behaviours of family, friends, community of MSM and negative health outcomes among MSM in general (3;7;9). Compared to heterosexuals, there are higher levels of substance use, suicide attempts, sexual health risks and depressive symptoms among MSM (6;7;12). The mental health of Latino MSM is affected by violence, stigma, internalized homophobia and discrimination that is sometimes associated with ‘coming out’ to their friends, co-workers, families and the community (5-7;10). Research involving Latina lesbians in the United States indicates that the more ‘out’ lesbians are, the less psychological distress reported (2). The inability to disclose one’s sexual orientation, the lack of family and community support and the use of language denigrating Latino MSM may lead to an increased incidence of suicide, depression, anger and post traumatic stress (7;10). Given the strict norms regarding traditional gender roles in Latino cultures, higher levels of mental stress can be found in MSM who are considered effeminate because Latino men are expected by tradition to be masculine (10).

Access to Health Services

Discrimination in healthcare settings can present major barriers to Latino MSM’s ability to access healthcare (5;8). In general, they do not ‘come out’ to their health care providers for fear of homophobic reactions (5). In some situations, substandard and inappropriate care has been provided to those who have disclosed their sexual identity to health workers (5). Within the healthcare system, assumptions are often made about one’s sexual orientation with few opportunities to disclose sexual orientation to healthcare workers (5). Assumptions that heterosexuals are not sexually active with same sex partners may prevent full and accurate assessment of their health risks (5). Research indicates that in general, lesbian, gay, bisexual and transgendered health consumers will respond only to the extent that they feel their responses will be heard and respected, which highlights the need for health workers to be non judgmental when working with these populations (9;13).

HIV Outcomes

Compared to white MSM, Latino MSM in the United States have disproportionately high rates of both HIV and AIDS (13). They report high rates of sexual risk behaviour such as unprotected anal sex, inconsistent condom use, and multiple partners (4;14-16). The rate of new HIV infections among Hispanic men is more than double that among white men, with gay and bisexual men particularly affected. In the United States, most new infections among Hispanic men (72%) occur among MSM (17).

Factors That May Impact Local Applicability

- The findings of the studies cannot be generalized. Most of the cited studies are conducted in Mexico (6), the United States (3;4;6-11) and New Zealand (5). None of the papers reviewed were from Canada.
- The Latino community is not homogenous. Future studies should include larger sub-samples of Latino males from different countries to allow analysis of possible differences by country of origin (8).
- Existing research has usually been conducted with a single ethnic group and cannot necessarily address potential differences among racial/ethnic groups (5). Only a few studies compared racial/ethnic groups (5;11) with very little attention paid to Latinos (5;8;9).

What We Did

We conducted a search in the Cochrane Library using text terms¹ and conducted searches in PubMed using MeSH terms². In addition, we conducted a 'related articles search' using an article of interest provided to us by the organization that requested this summary.

Suggested Citation:

Rapid Response Service. *Latino men and coming out: Rapid Review Response*. Toronto, ON: Ontario HIV Treatment Network; 2010

¹ Latino AND (gay OR lesbian OR MSM OR men who have sex with men)

² ("homosexuality, male/psychology"[MeSH Terms] OR "homosexuality, male/statistics and numerical data"[MeSH Terms]) AND Latino

Reference List

- (1) Cass VC. Homosexual identity formation: A theoretical model. *Journal of Homosexuality* 1979; 4:219-35.
- (2) Moreno C. *Invisible Lesbians: Latina Immigrant Lesbian Coming Out Experiences* 2002.
- (3) Guarnero PA, Flaskerud JH. Latino gay men and depression. *Issues in Mental Health Nursing* 2008; 29(6):667-70.
- (4) Ibanez GE, Van Oss MB, Flores SA, Millett G, Diaz RM. General and gay-related racism experienced by Latino gay men. *Cultural Diversity and Ethnic Minority Psychology* 2009; 15(3):215-22.
- (5) Neville S, Henrickson M. Perceptions of lesbian, gay and bisexual people of primary healthcare services. *Journal of Advanced Nursing* 2006; 55(4):407-15.
- (6) Ortiz-Hernandez L, Tello BL, Valdes J. The association of sexual orientation with self-rated health, and cigarette and alcohol use in Mexican adolescents and youths. *Social Science and Medicine* 2009; 69(1):85-93.
- (7) Wright ER, Perry BL. Sexual identity distress, social support, and the health of gay, lesbian, and bisexual youth. *Journal of Homosexuality* 2006; 51(1):81-110.
- (8) Zellner JA, Martinez-Donate AP, Sanudo F, Fernandez-Cerdeno A, Sipan CL, Hovell MF et al. The interaction of sexual identity with sexual behavior and its influence on HIV risk among Latino men: results of a community survey in northern San Diego County, California. *American Journal of Public Health* 2009; 99(1):125-32.
- (9) Guarnero PA. Family and community influences on the social and sexual lives of Latino gay men. *Journal of Transcultural Nursing* 2007; 18(1):12-18.
- (10) Sandfort TG, Melendez RM, Diaz RM. Gender nonconformity, homophobia, and mental distress in Latino gay and bisexual men. *Journal of Sex Research* 2007; 44(2):181-9.
- (11) Rosario M, Schrimshaw EW, Hunter J. Ethnic/racial differences in the coming-out process of lesbian, gay, and bisexual youths: a comparison of sexual identity development over time. *Cultural Diversity and Ethnic Minority Psychology* 2004; 10(3):215-28.
- (12) Bauermeister JA. It's all about "connecting": reasons for drug use among Latino gay men living in the San Francisco Bay Area. *Journal of Ethnicity in Substance Abuse* 2007; 6(1):109-29.
- (13) Balan IC, Carballo-Dieguez A, Ventuneac A, Remien RH. Intentional condomless anal intercourse among Latino MSM who meet sexual partners on the Internet. *AIDS Education and Prevention* 2009; 21(1):14-24.

- (14) Diaz RM, Ayala G, Bein E, Henne J, Marin BV. The impact of homophobia, poverty, and racism on the mental health of gay and bisexual Latino men: findings from 3 US cities. *American Journal of Public Health* 2001; 91(6):927-32.
- (15) Diaz RM, Ayala G, Bein E. Sexual risk as an outcome of social oppression: data from a probability sample of Latino gay men in three U.S. cities. *Cultural Diversity and Ethnic Minority Psychology* 2004; 10(3):255-67.
- (16) Fernandez MI, Jacobs RJ, Warren JC, Sanchez J, Bowen GS. Drug use and Hispanic men who have sex with men in South Florida: implications for intervention development. *AIDS Education and Prevention* 2009; 21(5 Suppl):45-60.
- (17) Centers for Disease Control and Prevention. HIV and AIDS among Latinos. 2009.