

**ABSTRACT**

Men who have sex with men (MSM) in the United States have increased risk for contracting and spreading HIV. HIV testing is a critical component in reducing the spread of HIV. Understanding and addressing barriers for HIV testing among MSM is important in the aim to reduce the spread of HIV. The present study aimed to examine whether social stigma presented as internalized or externalized homophobic stigma or microaggressions decreased testing outcomes and whether social support increased testing outcomes. Data from the RADAR study was used containing cross-sectional data to perform a Mann-Whitney U analysis of the independent variable outcomes. White MSM reported significant findings based on microaggression experiences and internalized homophobic stigma, no findings were found among Black or Latino MSM. Key research and practice implications emphasize the need to continue studying barriers in HIV testing among all racial ethnic groups of MSM, the impact microaggression experiences have on MSM, and societal impact homophobia continues to have on MSM.

**INTRODUCTION**

**Significance of Study**

- Lack of service utilization among MSM is a critical issue in health disparity because testing is a major component of HIV prevention (Frye et al., 2018).
- Understanding structural barriers in obtaining HIV testing and other health services among MSM aids in addressing barriers to create more equitable healthcare practices and outcomes.

**Purpose of the Research**

To examine whether social stigma presented as internalized or externalized homophobic stigma decreased testing outcomes and whether social support increased testing outcomes and whether outcomes are different among racial ethnic groups

**Research Questions**

- Does internalized stigma, microaggressions, or experienced of community violence decrease HIV testing among MSM?
- Does having social support increase HIV testing?

**Hypothesis**

We believe HIV testing will increase with increased social support and HIV testing will decrease with higher rates of microaggression, internalized homophobic stigma, and experiences with LGBTQ related community violence.

**LITERATURE REVIEW**

**HIV Testing & Service Utilization**

- 25% of sexually active MSM have not tested for HIV in the past year (Frye et al., 2018)
- 33% of HIV positive MSM were unaware of their status while engaging in unprotected sex (Paz-Bailey et al., 2013)
- Having a lower perceived risk of HIV and lack of access to transportation were both implicated in lower testing outcomes.

**Research on Stigma**

- Stigma is increased in Black and Latino communities which is believed to decrease testing outcomes (Freeman et al., 2017)

**Research on Social Support**

- Social circles with openly gay MSM (and less microaggression) increased testing outcomes (Goldenberg et al., 2018)

**Research on Discrimination**

- 78% of sexual minorities experience some form of anti-gay harassment and 25% report concealing identities (Burks, 2015)

**Research Gaps**

- There are inconsistent findings surrounding the impacts of stigma and testing behaviors among Black MSM
- Most studies analyzed had disproportionate representation of Hispanics, African Americans, and Caucasians.

**METHODS**

**Research Design and Data Collection Procedures**

- The current study is a secondary analysis of data from the RADAR Study launched in 2014 through Northwestern University
- RADAR information was a cross-sectional survey design that obtained information from MSM through computer assisted technologies analyzing demographic information, testing history, and potential barriers to testing.

**Sample and Sampling Method**

- The study used multiple cohort longitudinal design, the data utilized in the current study contains only initial surveys from original study.
- 1026 participants were enrolled; All participants were 16-29 years of age and assigned male at birth. 917 participants used in this study's sample

**Measures**

**Internalized Stigma**

- Internalized Stigma was measured by a scale with 8 self-report questions such as "Sometimes I wish I were not gay or bisexual." or "Sometimes I think that if I were straight, I would probably be happier"

**Externalized Stigma**

- Externalized Stigma was measured through 7 self-rated questions such as "Many people believe that gay or bisexual men have psychological problems." or "Many people do not see gay or bisexual men as real men."

**LGBT Victimization**

- Victimization was measured by a 6-question scale quantified by asking "How many times" and correlating scale measures with questions such as "How many times have you been threatened with physical violence because you are, or were thought to be gay, bisexual, or transgender?"

**LGBT Microaggression**

- Microaggression was measured by a 9-question scale with questions such as "You heard someone talk about the gay lifestyle." or "Someone said you are not like those gay people."

**Perceived Social Support**

- Perceived social support was measured through a 12-question scale with questions such as "There is a special person, like a boyfriend or girlfriend, who is around when I am in need." or "I have a special person, like a boyfriend or girlfriend, who is a real source of comfort to me."

**RESULTS**

**Mann-Whitney U Results**

- The presence of internalized stigma was found to be significantly related to decreased rates of HIV testing among Caucasian males.
- The presence of microaggressions perpetuated by friends and family members was found to be significantly related to decreased rates of HIV testing among Caucasian males.
- There were no significant findings among Black or Hispanic males, which may be attributed to higher testing rates within this sample.

Table 2  
Results of Mann-Whitney U Test Among MSM Groups with Diverse Racial and Ethnic Backgrounds

Dependent Variable	Mann-Whitney	Sig	N	HIV-Tested Mean rank	HIV-Not Tested Mean rank
<b>Black</b>					
ISM Mean Score	4148.0	.55	326	162.51	173.23
EXS Mean Score	4758.5	.52	326	164.58	152.88
MSPSS Mean Score	4385.5	.89	327	163.77	166.32
VIC Mean Score	4935.5	.25	327	165.62	147.98
MICRO Mean Score	4940.5	.39	327	165.63	147.82
<b>Hispanic</b>					
ISM Mean Score	7548.5	.21	314	154.18	169.49
EXS Mean Score	7257.5	.09	314	153.00	173.77
MSPSS Mean Score	7933.0	.52	314	155.75	163.84
VIC Mean Score	8706.0	.52	314	158.89	152.47
MICRO Mean Score	8952.5	.37	314	159.89	148.85
<b>White</b>					
ISM Mean Score	3980.0	.00	255	120.80	154.80
EXS Mean Score	5187.0	.62	255	126.81	132.44
MSPSS Mean Score	5728.0	.57	256	129.86	123.43
VIC Mean Score	5523.0	.85	256	128.84	127.22
MICRO Mean Score	4395.5	.03	256	123.26	148.10

Figure 1

Race of Participants based on Lifetime HIV Testing

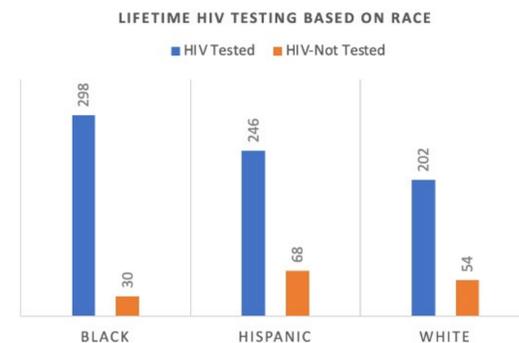


Table 1

Sociodemographic Characteristics of Participants (N = 917)

Characteristic	n	%
Age in years	M = 21.3	SD = 03.01
Race/Ethnicity		
White or Caucasian	263	28.7
Black or African American	335	36.5
Hispanic or Latinx	319	34.8
Sex Assigned at Birth		
Male	917	100.0
Female	0	0.0
Current Gender Identity		
Male	917	100
Other	0	0
Lifetime Number of HIV Tests	M = 6.92	SD = 11.01
Number of HIV Tests Past 6 Months	M = 1.78	SD = 03.54

Figure 2

Internalized Stigma Mean based on Racial Ethnic Background

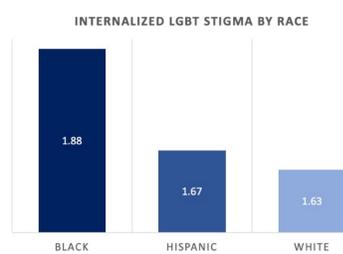
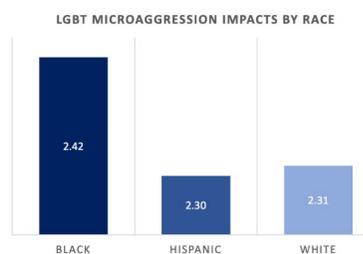


Figure 3

Microaggression Mean Scores based on Racial Ethnic Background



**CONCLUSIONS**

**Summary of Findings**

- The studies results indicated that microaggressions and internalized stigma were significant barriers to HIV testing among White MSM.
- Although Black and Latino MSM experienced higher rates of homonegativity, they tested at higher rates which was interpreted as having less barriers to testing.

**Implications for Practice and Policy**

MSM are often subjected to homophobic messages from friends, family, and institutions such as school systems and medical settings. These messages are often internalized, all potentially creating barriers for seeking testing and other forms of healthcare.

- Clinicians and allied professionals must be aware of own biases and monitor for heteronormative attitudes.
- Clinicians must understand and acknowledge the impact verbal microaggressions have on mental and physical health of LGBTQ individuals of all backgrounds
- More research must be done focusing on Black and Latino MSM who are not testing to understand what barriers they face with testing and healthcare utilization.

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