

EPI Monthly Report

Florida Department of Health in Miami-Dade County

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Barriers to HIV/AIDS Prevention among Hispanics/Latinos in Miami-Dade County

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Introduction

October 15th is National Latino AIDS Awareness Day in the United States, a day that is set aside to encourage Latino communities to take action against the increase of HIV/AIDS. In Miami-Dade County, where 66.2%¹ of the population is Hispanic or Latino, the fight against HIV/AIDS has become even more urgent. According to the Centers for Disease Control & Prevention (CDC), Miami, FL is number one among the nation's cities for new HIV infections and AIDS diagnoses². In the past 5 years, the HIV rate among Hispanics/Latinos has increased from 32.7 in 2010 to 38.4 per 100,000 in 2014. It is important to understand the factors behind these rising rates in HIV among the Hispanic/Latino population so that measures can be taken to prevent new cases in Miami-Dade County.

Challenges and Barriers to Prevention

CDC has reported that Hispanics/Latinos are disproportionately affected by HIV/AIDS nationwide.³ Like many other communities struggling to combat the increase of infection rates, Hispanics/Latinos have unique social and cultural characteristics that may present challenges to the implementation of effective prevention strategies. Hispanics/Latinos now account for a fourth of all new HIV cases in the United States, making this epidemic a particular threat to the health of this large

yet underserved community.

Within this population, poverty, lower education levels, lack of health insurance, limited access to quality care, and language barriers may present hurdles for public health officials to design and implement effective prevention interventions. Undocumented Hispanic/Latino immigrants may also delay testing or treatment due to the fear of disclosing their immigration status, making them less likely to receive education or treatment, or be aware that they are living with HIV. Due to these socioeconomic barriers, even after testing, Hispanics/Latinos are more likely than any other racial/ethnic group to delay the onset of medical treatment.⁴

There are also various cultural norms that can contribute to the high incidence of HIV/AIDS among Hispanics/Latinos. A North Carolina study identified specific gender roles among immigrant heterosexual Hispanic/Latino couples. The males in the study traditionally adopted the dominant, "machismo," role—that of decision maker and chief provider—, and female commonly adopted the, "marianismo," role—that of homemaker and caretaker. Research has shown, however, that the unspoken enforcement of these gender roles can make it very difficult for couples in traditional Hispanic/Latino culture to communicate effectively

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regarding condom use, safe sex practices, monogamous behavior, and HIV/AIDS and sexual transmission infection (STI) knowledge.⁴

The diverse and mosaic Hispanic/Latino community in Miami-Dade is comprised of individuals and families from multiple countries and backgrounds, making a single culturally-competent prevention education strategy very difficult. CDC's data suggest that among Hispanics/Latinos, an individual's country of origin can serve as a predictor of differing infection routes and behavioral risk factors.³ A person coming from one Latin American country might be more likely to contract HIV through heterosexual contact, while a person from a different country might be more likely to contract the virus through injection drug use.⁵ These risk factors that vary across nationalities make it challenging for public health professionals to design large-scale, community-wide interventions that have the ability to reach multiple people hailing from multiple countries. Together with the social and economic characteristics that are associated with Hispanics/Latinos, this disparity in nationality creates a complex situation for public health professionals who desire to mitigate and reverse the rising HIV/AIDS rates among this at-risk population.

Innovations and Solutions

In 2013, there were 26,760 people in Miami-Dade County living with HIV and AIDS, with Hispanics/Latinos representing 51% and

44% of those cases, respectively⁶. Efforts are being made county- and nationwide to reduce the incidence of HIV/AIDS among Hispanics/Latinos.

As 7 out of 10 new HIV/AIDS cases among Hispanics/Latinos occur in men who have sex with men (MSM)³, the Florida Department of Health in Miami-Dade County HIV and STI Prevention and Control Program has improved testing and outreach efforts among Hispanic males. The program has provided free confidential testing and HIV education, and has encouraged young men to know their HIV status through the KYS² Program (Know Your Status, Know Yourself), an initiative to equip males in Miami-Dade with the knowledge to make informed decisions regarding HIV and sexual health. This increase in outreach and testing contributed to the identification of more HIV positive members of the Hispanic MSM community in 2014⁶. Knowledge of one's HIV/AIDS status is the first step in stopping this epidemic.

CDC has also turned its focus towards the Hispanic/Latino community on a national level. The CDC "Act Against AIDS" initiative has introduced a campaign specifically geared towards the Hispanic community called *Podemos Detener el VIH Una Conversacion a la Vez*, or "We Can Stop HIV One Conversation at a Time."⁷ The campaign has produced videos which feature HIV positive Latino celebrities, a suspenseful telenovela series which documents the life of Latino family coping with the

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struggles surrounding HIV, and public service announcements to encourage open dialogue about HIV/AIDS in the community. The efforts of *One Conversation at a Time* recognize the cultural taboo of talking about sex, condom use, and STI infection in Latino families, but teach that learning the facts about HIV/AIDS will help the community to decrease stigma, foster better communication between Latino couples, and play a part in stopping rising infection rates.⁷

For more information regarding the efforts of CDC and Miami-Dade County HIV and STI Prevention and Control Program, go to <http://www.cdc.gov/hiv/group/raciaethnic/hispaniclatinos/> and <http://miamidade.floridahealth.gov/programs-and-services/infectious-disease-services/hiv-aids-services/hiv-surveillance.html>.

References:

1. <http://quickfacts.census.gov/qfd/states/12/12086.html>
2. http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/_documents/fact-sheet/2014/2014-us-vs-fl-fact-sheet.pdf
3. <http://www.cdc.gov/hiv/group/raciaethnic/hispaniclatinos/>
4. Hernandez, Amy. Zule, William. (2011). Factors That Influence HIV risk among Hispanic Female Immigrants and Their Implications for HIV Prevention Interventions. *International Journal of Family Medicine*, 2012, 1-11.
5. Florida Department of Health in Miami-Dade County, HIV/AIDS Surveillance, Monthly HIV/AIDS Surveillance Report, September, 2015.
6. <http://www.careresource.org/hivaids/statistics/>
7. <http://www.cdc.gov/actagainstaids/campaigns/oneconversation/index.html>



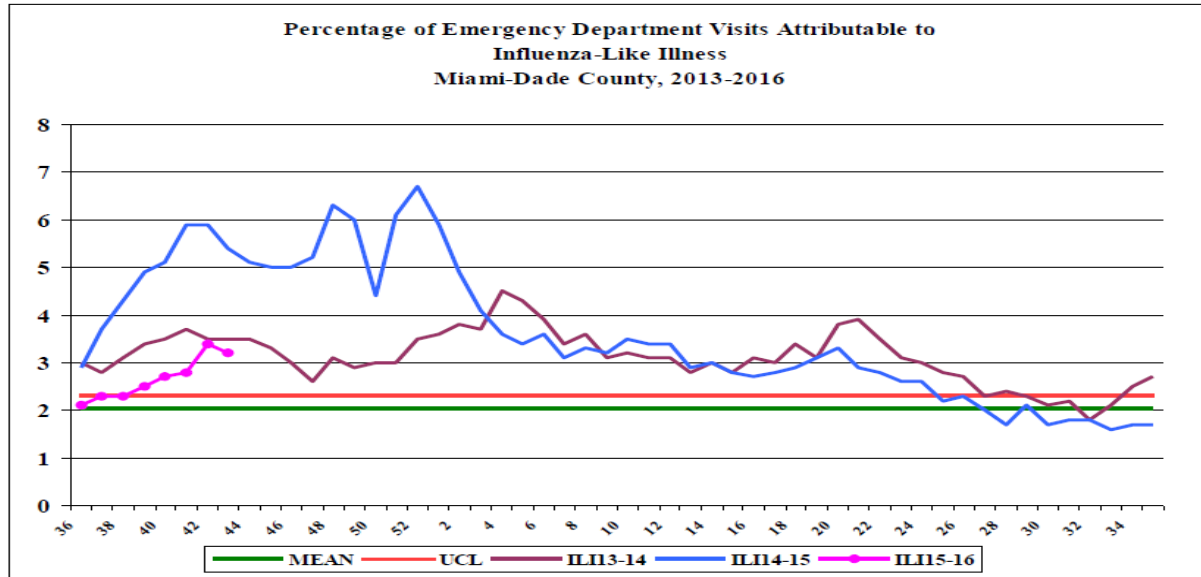


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Influenza-Like-Illness, All Age



During this period, there were 23,383 ED visits; among them 749 (3.2%) were ILI. At the same week of last year, 5.4% of ED visits were ILI.

PARTICIPATE IN INFLUENZA SENTINEL PROVIDER SURVEILLANCE

Florida Department of Health in Miami-Dade County NEEDS Influenza Sentinel Providers!

TO REPORT ANY DISEASE AND FOR INFORMATION CALL:
Epidemiology, Disease Control & Immunization Services

- Childhood Lead Poisoning Prevention Program305-470-6877
- Hepatitis305-470-5536
- Immunizations or outbreaks305-470-5660
- HIV/AIDS Program305-623-7420
- STD Program305-575-5430
- Tuberculosis Program305- 575-5415
- Immunization Service305-470-5660
- To make an appointment.....786-845-0550

Sentinel providers are key to the success of the Florida Department of Health’s Influenza Surveillance System. Data reported by sentinel providers gives a picture of the influenza virus and ILI activity in the U.S. and Florida which can be used to guide prevention and control activities, vaccine strain selection, and patient care.

- Providers of any specialty, in any type of practice, are eligible to be sentinel providers.
- Most providers report that it takes **less than 30 minutes a week** to compile and report data on the total number of patients seen and the number of patients seen with influenza-like illness.
- Sentinel providers can submit specimens from a subset of patients to the state laboratory for virus isolation **free of charge**.

For more information, please contact

Lakisha Thomas at 305-470-5660.

About the Epi Monthly Report

The Epi Monthly Report is a publication of the Florida Department of Health in Miami-Dade County: Epidemiology, Disease Control & Immunization Services. The publication serves a primary audience of physicians, nurses, and public health professionals. Articles published in the Epi Monthly Report may focus on quantitative research and analysis, program updates, field investigations, or provider education. For more information or to submit an article, please contact Emily Moore at (305) 470-6918.

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Miami-Dade County Monthly Report Select Reportable Disease/Conditions September 2015

Diseases/Conditions	2015 Current Month	2015 Year to Date	2014 Year to Date	2013 Year to Date
HIV/AIDS				
AIDS*	31	365	428	539
HIV	99	1149	1029	1101
STD				
Infectious Syphilis*	30	237	261	267
Chlamydia*	890	7552	7312	7612
Gonorrhea*	211	1483	1612	1801
TB				
Tuberculosis**	9	79	92	88
Epidemiology, Disease Control & Immunization Services				
Epidemiology				
Campylobacteriosis	28	284	284	284
Chikungunya Fever	7	22	48	0
Ciguatera Poisoning	6	15	20	20
Cryptosporidiosis	21	37	30	18
Cyclosporiasis	1	3	1	2
Dengue Fever	4	16	27	34
Escherichia coli, Shiga Toxin-Producing	0	3	19	8
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	33	153	167	202
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	0	1	1
Legionellosis	6	20	14	20
Leptospirosis	0	1	0	0
Listeriosis	0	2	2	1
Lyme disease	1	5	5	5
Malaria	1	6	5	8
Meningitis (except aseptic)	3	6	15	27
Meningococcal Disease	0	6	7	15
Salmonella serotype Typhi (Typhoid Fever)	0	2	1	2
Salmonellosis	97	507	449	435
Shigellosis	13	113	632	47
Streptococcus pneumoniae, Drug Resistant	1	1	36	67
Toxoplasmosis	0	0	0	0
Vibriosis	3	16	6	10
West Nile Fever	0	0	0	0
Immunization Preventable Diseases				
Measles	0	0	0	0
Mumps	0	3	0	0
Pertussis	4	27	29	36
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	13	41	37	49
Hepatitis				
Hepatitis A	1	31	30	23
Hepatitis B (Acute)	2	11	9	13
Lead				
Lead Poisoning	0	69	60	71

*Data is provisional at the county level and is subject to edit checks by state and federal agencies.

** Data on tuberculosis are provisional at the county level.