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In our convenience sample of 131 African American MSM living with HIV, we found a high prevalence of interpersonal trauma, including sexual assault, CSA, and other physical assault. About half of those who had experienced trauma attributed that trauma to discrimination on the basis of their being Black or African American, HIV positive, or gay. We also found a high prevalence of sexual risk, with 47% reporting UAI with a male partner in the previous 3 months.

This study is from 2013 but the high rates of trauma are considerable.

Association of Discrimination-Related Trauma With Sexual Risk Among HIV-Positive African American Men Who Have Sex With Men

Abstract

Objectives. We investigated whether 1 form of traumatic stress, discrimination-related trauma (e.g., physical assault because of race), was associated with unprotected anal intercourse, especially when compared with non-discrimination-related trauma, among African American men who have sex with men.

Methods. A convenience sample of 131 HIV-positive African American men who have sex with men receiving antiretroviral treatment completed audio computer-assisted self-interviews that covered unprotected anal intercourse, interpersonal trauma, and whether trauma was because of discrimination on the basis of race/ethnicity, HIV serostatus, or sexual orientation.

Results. **Sixty percent reported at least 1 interpersonal trauma;** they attributed at least 1 trauma to being gay (47%), African American (17%), or HIV positive (9%). In a multivariate regression, experiencing discrimination-related trauma was significantly associated with unprotected anal intercourse (adjusted odds ratio [AOR] = 2.4; 95% confidence interval [CI] = 1.0, 5.7; $P = .04$), whereas experiencing non-discrimination-related trauma was not (AOR = 1.3; 95% CI = 0.6, 3.1; $P = .53$).

Conclusions. HIV-positive African American men who have sex with men experience high levels of discrimination-related trauma, a stressor associated with greater risk taking. HIV prevention interventions should consider the potential damaging effects of discrimination in the context of trauma.

Experience With Interpersonal Trauma

Sixty percent of participants reported experiencing at least 1 interpersonal trauma; 45% experienced CSA ($n = 58$; average age = 8.8 years; SD = 3.9), 8% adult sexual assault ($n = 10$; average age = 23.4 years; SD = 5.0), and 36% physical assault ($n = 47$; average age = 23.1 years; SD = 10.9). Of those who experienced any interpersonal trauma, 47%

attributed at least 1 trauma experience to being gay (average age at first gay-related trauma experience = 13.8 years; SD = 9.2), 17% to race (average age at first race-related experience = 14.7 years; SD = 8.8), and 9% to HIV serostatus (average age at first serostatus-related experience = 19.9 years; SD = 14.6).

Interpersonal Trauma and Unprotected Anal Intercourse

In bivariate analyses, discrimination-related interpersonal trauma was associated with a higher likelihood of reporting UAI with any male partners in the past 3 months (odds ratio [OR] = 2.78; 95% confidence interval [CI] = 1.26, 6.13; $P = .01$) and reporting UAI with HIV-positive male partners in the past 3 months (OR = 2.83; 95% CI = 1.29, 6.22; $P = .009$; [Table 2](#)). There was no significant association of discrimination-related interpersonal trauma and UAI with HIV-negative or unknown HIV status male partners. Interpersonal trauma not related to discrimination was not significantly associated with any of the UAI outcome variables.