



Brother to Brother

Inspiration

Had I lived the life that the state planned for me from the beginning, I would have lived and died in somebody else's kitchen, or somebody else's land, and never written a word. That knowledge is bone deep, and it informs everything I do.

~ Toni Morrison

SAM CBA Presentations

Community Planning Leadership Summit
Chicago, Ill.**March 6-9, 2002**

Technology Transfer Training
Jackson, Miss.**April 7-12, 2002**

United States Conference on AIDS
Anaheim, Calif.**Sept. 19-22, 2002**

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SOUTHERN AFRICAN-AMERICAN MEN'S CBA PROJECT

HIV/AIDS needs assessment survey results reported

By Mark A. Colomb, Ph.D.

In 1999, a community needs assessment of African-American men who have sex with other men (AAMSM) for the southern region was completed by the Jackson State University Mississippi Urban Research Center (JSU MURC). The Centers for Disease Control and Prevention (CDC) clearly defines states in the southern region, geographically, as those which also settle along the Mason-Dixon Line.

The survey was disseminated and collected by the Southern African-American Men's Capacity-Building Assistance (SAM CBA) Advisory Board members who were chosen by the MURC director and staff based on their activity within their community and their ability to access the community from their respective states. Each member was responsible for at least 100 surveys with a specified protocol to be used in accordance with this particular instrument. These members serve JSU, MURC, and the SAM CBA project on a voluntary basis.

The purpose for implementing this survey was to examine the knowledge base of African-American men who have sex with other men (AAMSM) concerning the Community Planning Process and "any" Community Mobilization efforts within the southern

region and their respective community. The target population was given this survey in their respective states, places of leisure and various other areas that were comfortable and accessible to them through contact with the advisory board members from their respective states.

Approximately 1,900 surveys were issued to the advisory board members with a return rate of 38 percent. A total of 729 surveys were analyzed for this report. The states within the southern region and the number of surveys received are as listed: Alabama, 84; Arkansas, 71; Delaware, 66; Florida, 129; Georgia, 1; Kentucky, 30; Louisiana, 21; Maryland, 78; Mississippi, 3; North Carolina, 0; Oklahoma, 0; South Carolina, 0; Tennessee, 83; Texas, 80; Virginia, 3; West Virginia, 0; and the District of Columbia, 80. Out of 16 states, a total of 13 reported, along with the District of Columbia. The information that was reported is evidenced within this account for those states reporting.

In the survey, a common set of questions is raised in the following areas: demographics, resources and HIV prevention community planning groups.

The findings in the survey indicate that 60.4 percent of all respondents identified as homosexual,

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Southern African-American Men's Capacity-Building Assistance Project

Mississippi Urban Research Center • Jackson State University • P. O. Box 17309 • Jackson, MS 39217
Toll-free: 1-866-JSU-MURC (578-6872) • Fax: 601-979-4336 • E-mail: murc@mail1.jsums.edu



SAM CBA
Advisory Board Members

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Ft. Myers, Florida

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Louisville, Kentucky

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Jacksonville, Florida

J. Carl Devine
St. Petersburg, Florida

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Impoverished African-American men who have sex with men lack basic sexual risk information and have high levels of sexual risk for HIV/AIDS

By: G. Michael Crosby, A.M. Williams, Edward Bein, (University of California, San Francisco Center for AIDS Prevention Studies/AIDS Prevention Studies/AIDS Research Institute), Rene Durazzo, Joe Headlee, and Jamal Bey (The San Francisco AIDS Foundation)

Key Findings: High rates of HIV infection are reported among African-American MSM from economically poor areas of San Francisco, California. Unprotected anal intercourse occurring more with primary partners than with casual partners. Almost universal knowledge of the means of HIV transmission via injection drug use (87-97 percent). Fewer men understood the risk of HIV transmission associated with sexual behavior (22-51 percent).

Background: HIV transmission is disproportionately on the rise among African-American men who have sex with men (MSM) in the United States (Centers for Disease Control and Prevention, HIV/AIDS surveillance report 11(2). 1999).

Objectives: To describe the patterns of HIV sexual risk behavior, the knowledge, attitudes and beliefs about HIV/AIDS.

Methods: (Participants) A convenience sample (n=238) of African-American MSM from economically poor areas of San Francisco was recruited in 1999. Recruited from street outreach and flyers posted in health clinics, bars, hotels and shelters. (Procedures) Interviewer-administrative quantitative survey measured: Demographics, HIV sexual risk-taking, knowledge, attitudes and beliefs about HIV/AIDS (Categories collapsed: Agree=agree and somewhat agree; Disagree and somewhat disagree). The survey took approximately 75 minutes to complete. Participants received \$25 for their time.

Statistical Analysis: Descriptive statistics for demographic characters,

HIV sexual transmission and knowledge, attitudes and beliefs.

Conclusion: Rates of HIV infection reported among African-American MSM is twice that of MSM in general. A substantial number are engaging in unprotected and anal intercourse without knowledge of partner HIV serostatus. Men reported they are able to avoid behavior that may put them at risk. However, during sex, many are unable to stop doing risky things. Despite almost universal knowledge of the means of HIV transmission via injection drug use, men may be less certain about the risk of sexual behavior.



Recommendations: HIV prevention and education programs aimed at economically poor African-American men must address:

-The different sexual orientations within this group of men, many of whom self identify as bisexual or heterosexual and who have male, female and transgender sex partners.

-Ongoing education about the sexual risk of HIV transmission.

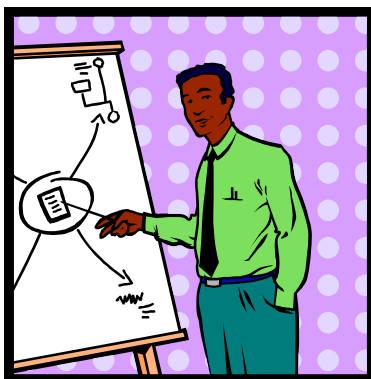
SAM CBA HIV/AIDS needs assessment survey continued...

17.7 percent identified as bisexual, while 14 percent identified themselves as heterosexual; leaving 4.7 percent and 3.3 percent either not sure or not giving a response, respectively.

This survey pertains extensively to AAMSM and the Community Planning Process. It also provides invaluable data for this region and by no means represents the entire nation.

While this instrument consists of only 39 questions, the survey results contain an enormous amount of information about African-American men who have sex with other men and their understanding of the Community Planning Process and any Community Mobilization efforts addressing HIV prevention needs within the southern region and their respective communities.

Among the most striking conclusions was that although this was a survey for African-American men who have sex with other men, 14 percent of the respondents denoted that they were heterosexual. Although 70 percent of the targeted population have knowledge of HIV prevention services that are available and how to access these services, due to these relatively high percentages, one can anecdotally summarize that many communities do not provide culturally sensitive services for AAMSM and that there is a need for more innovative and community-wide interventions to address these demands. This need is important to the AAMSM community because they are the hardest hit by the HIV/AIDS epidemic. CDC reports that over 50 percent of the new cases are African-American men. With this ever increasing number, we must develop organizations within those communities to begin taking care of themselves. Also, one can denote that advocacy and intervention to address AAMSM's knowledge and involvement in the political process is greatly needed. It can be concluded through analysis of this assessment, that



AAMSM do not have a real knowledge and/or understanding of the Community Planning Group or Process. This denotes that there is truly a strong need to build capacity and understanding in the AAMSM community around the Community Planning Process. This vital to the AAMSM community because the disease has had the greatest impact on this community and the overall purpose of the community planning process is to involve those who are most affected by this disease. If AAMSM have no understanding or knowledge of the process, and they are not at the table, then the community planning process is flawed. The Community Planning Group determines the

targeted populations which federal funding follows.

Therefore, if the epidemic is in the AAMSM community, but they are not aware or have a knowledge of the community planning process, then funding does not funnel down to the areas most impacted by the disease. A strong social marketing process is greatly encouraged to increase the knowledge and understanding of the community planning process in the AAMSM community.

Throughout this survey, the varying percentages denoted the need for more capacity-building and social marketing efforts in the African-American men who have sex with other men communities. The targeted population is the most impacted by this HIV/AIDS epidemic and all epidemiological trends show that the disease is ever increasing in this community as well. Every effort should be made to increase the capacity of the AAMSM communities. I strongly recommend that efforts should include both individual level and community level interventions to effectively begin to move these communities to a level of knowledge and understanding of the processes and mobilization efforts.

Southern African-American Men's Capacity-Building Assistance (SAM CBA) Project

Jackson State University (JSU)
P. O. Box 17309
Jackson, MS 39217
Telephone: (601) 979-4100
Toll-free: 1-866-JSU-MURC
Fax: (601) 979-4336

Focus

The Southern African-American Men's Capacity-Building Assistance Project seeks to motivate, mobilize, increase participation and involvement of African-American men who have sex with other men (MSM) in the delivery of HIV prevention services and the community planning process. This project also seeks to foster collaborations and linkages of HIV prevention programs targeting African-American (MSM) with these stakeholders and community leaders.

The Southern African-American Men's Capacity-Building Assistance Project's geographical area of coverage is as follows: AL, AR, FL, KY, LA, MS, OK, TN, TX.

Staff

Dr. Mark Colomb

Project Director
mcolomb@mail1.jsums.edu

Anthony E. Fox

CBA Coordinator
afox@mail1.jsums.edu

Keith Bush

Regional Capacity-Building Specialist
kbush@mail1.jsums.edu

Torrence McKnight

Regional Capacity-Building Specialist
torrence.a.mcknight@jsums.edu

Dana Stanard

Technical Assistance Analyst
dstanard@mail1.jsums.edu

Brother to Brother

Executive Editor: **Dr. Mark Colomb**

Editor: **Pamela McCoy**

Managing Editors: **Anthony Fox**

Marilyn Moering

Asst. Managing Editor: **Linda Adams**

Graphic Artist: **Valarie Jackson**

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Skills-Building Course Calendar

Community Mobilization.....Nov. 1 - 2
Mobile, Alabama

Community Planning.....Nov. 29 - 30
Baton Rouge, Louisiana

Community Mobilization.....Feb. 25 - 26
Jackson, Mississippi

Community Planning.....Feb. 28 - March 1
San Antonio, Texas

Community Mobilization.....April 1 - 2
Oklahoma City, Oklahoma

Community Mobilization.....April 18 - 19
Jacksonville, Florida

Community Planning.....May 9 - 10
Lexington, Kentucky

Community Mobilization.....May 20 - 21
Huntsville, Alabama

Community Planning TOT.....June 3 - 4
Orlando, Florida

Community Planning TOT.....June 13 - 14
New Orleans, Louisiana

Community Planning TOT.....June 27 - 28
Dallas, Texas

Community Planning.....July 18 - 19
Miami, Florida

Community Planning TOT.....July 29 - 30
Memphis, Tennessee

For information about these courses, please call the Southern African-American Men's Capacity-Building Assistance Project, toll-free, at 1-866-JSU-MURC (578-6872).

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Jackson State University
MISSISSIPPI URBAN RESEARCH CENTER
Southern African-American Men's
Capacity-Building Assistance Project
P. O. Box 17309 • Jackson, MS 39217

