Latino and Latina sexual attitudes and behaviors must be understood if educators and counselors hope to reach this population with effective sexuality and Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS) information and education. The general U.S. Latino population is mostly sexually conservative; direct talk in public and private is still basically unacceptable among Latinos, and sexual roles are still extremely polarized. For many poor Latino women and men, childbearing may be the only way to prove that they are socially productive and thus worthy of respect. There is almost a total lack of adequate sexuality education in U.S. Latino communities. In addition, many Latinas basically have no authority over the sexual act, so to provide them with condoms without preparing their male partners as well is unproductive and may encourage domestic violence. Latinos and Latinas must be reached with information and education at the same time. Latino homosexuals and bisexuals generally hide their sexual behaviors from the rest of society and from each other. Several cultural factors contributing to bisexuality are gender roles, attitudes toward coming-of-age, machismo, and strong heterosexual family influence. This article includes definitions of terms such as "Latino" and "Hispanic," and guidelines for researchers, educators, and counselors involved in HIV/AIDS outreach with Latinos and Latinas. (KS)
CONSIDERATIONS FOR REACHING THE LATINO POPULATION

With Sexuality and HIV/AIDS Information and Education

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The Diversity of the Latino Culture

It is difficult to speak of sexuality issues among Latinos in the United States as if they were just one homogeneous group of individuals. The U.S. Latino population (see definitions on pages 4 and 5) — estimated to be more than 20 million people — includes individuals who speak many different languages and come from different regions, races, classes, and cultures of the Americas.

Although the attitudes and the ways they perceive one another may differ among various Latino groups, similarities have also been noted within groups, and between groups, that have resulted in individual and group stereotypes. For example, many Latin American mountain people consider the morality of coastal and island Latinos as "loose," while many of the latter regard the former as "puritanical"; many Latino whites, who publicly appear to live according to more conservative European moral traditions, consider black and racially-mixed Latinos as "overly erotic," and often simply ignore Indians as "asexual." Numerous myths and stereotypes are found among Latinos, as within any group of individuals. It is important that these subtle cultural forms of differentiation not be missed by North American service providers, as they may be the nuances that allow for the development of educational strategies that will effectively reach the Latino population.

As a Latino speaking to North American audiences, it remains forever difficult to speak of Latino sexualities without feeling that I am exposing my own communities to an unkind gaze, and that I am only emphasizing the negative: that is, that which is most difficult for North American professionals to understand; that which gets in the way of their work; and that which they must come to understand if they want to be clinically educated and educationally effective.

However, North American culture is suddenly having to become deeply acquainted with its Latino cultures because of the AIDS crisis. Although this is a terrible way to get acquainted — within a framework of illness and possible death — no one can wait for the melting pot theory to become a reality nor can Latinos "North Americanize" overnight, so-to-speak, so that they can fit neatly into North American culture-bound strategies. Latino sexual attitudes and behaviors must be looked at if one hopes to work closely with these communities, and strategies must be tailored to align with Latino cultural imperatives. Only then will Latino sexuality and AIDS education interventions actually begin to connect.

When one looks at Latino communities in the United States within the context of the AIDS crisis, one is confronted with many crucial issues: AIDS and unsafe drug use; AIDS and unrecognized and unprotected male bisexual behavior; AIDS and women; and AIDS and the newborn. These issues arise out of a socially complex framework of urban — and often immigrant — poverty, a framework that creates a breeding ground for HIV/AIDS. The focus of this article, however, will be on the particular Latino and Latina attitudes and behaviors that must be understood if researchers, educators, and counselors hope to effectively reach this population with sexuality and HIV/AIDS information and education.
General Sexual Attitudes and Behaviors of Latinas and Latinos

The general U.S. Latino population is mostly sexually conservative; direct sexual talk in public and private is still basically unacceptable among Latinos and sexual roles are still experienced as extremely polarized.

Latinas, for the most part, continue to be expected to fulfill a role often described by Latina feminists as bordering on the "culturally schizophrenic": they have to be virginal, but seductive; fragile (in need of male protection), but strong (so as to bear many children); and privately wise (as they are the first and, sometimes, only teachers of some of our poorest children), but publicly humble (as they should not show themselves as more publicly assertive than men). Latino men, in contrast, are not only generally free from the requirement of premarital virginity, but are expected to be "sexually experienced" before marriage. Thus, while males are encouraged to develop their sexual skills through a collection of premarital sexual experiences, women are expected to participate sexually, as it were, from instinct, with the verbal coaching of another — perhaps older — female, or they are expected to be initiated into an active sexual life by a male partner who is seen as an experienced teacher.

Men are most often conceived of as unable to control themselves sexually. Therefore, if a man is unfaithful to his wife it may be tolerated as the inevitable lot of women. The wife may don a martyr's attitude (possibly enhanced by her conservative Roman Catholic background) and keep the sanctity of the family home intact as long as no one speaks of it in public. An evil, seductive, larger-than-life "temptress" (Latino popular entertainment frequently abounds with voluptuous and sexually enticing vedettes) may also be blamed for luring the victim husband away from marital fidelity.

The latter social attitude is one of great irony because most low-income Latinas do not socially own their sexuality; it is owned, most commonly, by the males of their extended family group. Their fathers, uncles, brothers, and cousins "administer" their virginity, give them away in marriage, and take them back. Within this traditional system, the only women who appear to own their sexuality — and only to some degree — are sex workers (prostitutes).

Since, in Latino communities, women's sexuality is considered to be both extremely precious (because of its childbearing quality) and extremely dangerous (because it can, if unleashed, "enslave" men), its manifestation is regarded as something that must be dominated, otherwise it will be destructive to society.

Childbearing and Birth Control

It is important to understand that childbearing has a different meaning among the poor than among those who are more affluent. For the poor, in a society where they own little or nothing, their only source of wealth is their children. Indeed, in the urban areas of the first world, children are still considered to be the wealth of the poor, even though the agricultural and early industrial attitudes which saw children as free labor have been left behind. For Latino women and men who live in the first world within third world pockets, childbearing is often the only way they have to prove that they are socially productive and thus worthy of respect. Often stripped of everything else, and living in environments where there is little access to adequate housing, education, nutrition, and employment, they are left only with their most basic means of production — their fertility.

Latinas are usually held solely responsible for birth control. Traditionally, if they do not wish to get pregnant, they, not the men, must search for adequate protection. That is why the current condom campaign against HIV infection has had such limited success within Latino communities. Latino men have never had to worry about birth control devices. In fact, if a Latina, who is single, becomes pregnant, it is not unusual for the community to accuse her of secretly and maliciously trying to bind the poor, even though the agricultural and early industrial attitudes which saw children as free labor have
Some Guidelines for Researchers, Educators, and Counselors When Dealing With Latinas

#1 There are numerous Latinas involved in social work, teaching, nursing, casework, and other service professions. They should be consulted — possibly as part of advisory or focus groups — in the development of any formal HIV/AIDS outreach to their communities.

#2 Latinos must be reached with information and education at the same time that Latinas are engaged. This will reinforce any kind of assertive safer sex negotiation that Latinas and Latinos may attempt to initiate at home and will help to create a safer environment for the introduction of such information.

#3 Public health educators and clinicians must be aware, that in spite of instances of Latino male oppression, Latinas traditionally have considerable nonpublic, nonverbal authority within the family. As those who cook and feed the family, provide folk health care, teach the infants, and clean the house, they have the authority of those invested with the care of the "sanctuary" — the family home. However, one-third of all Latino households are headed by women with permanent or partially absent partners/fathers, which is increasingly placing such women in new and growing positions of authority beyond the family home. This is not yet recognized and supported by their society — a society that still lives under the illusion that women are in the same place as they were before. Educators should be aware of both traditional and new forms of female authority.

#4 Latinas are more ready to think of their family's health than of their own; they will sacrifice it for them. When stressing with Latinas the importance of their own sexual protection against HIV, educators should note their roles as mothers and caregivers, and should emphasize that by taking care of themselves they also will be taking care of their children and other family members.

For low-income Latinas, sterilization, which demands only a single medical intervention, has often been the most accessible form of birth control. The mass sterilization of low-income Latinas, however, has become a highly controversial issue. To turn sterilization into the only culturally accessible alternative is considered simply criminal by many — not to mention the lack of, or inappropriate, counseling given before and after surgical intervention, and the undue pressures exercised by "males in white robes" on poor and often illiterate women. Although many Latinas have found themselves relieved of the burden of innumerable unwanted pregnancies, there has also been the sad experience of those who have returned to their communities — which place the woman's worth as a human being on her ability to procreate — with traumatic consequences.

The lives of Latinas have always been undervalued in comparison to the lives of Latinos. Therefore, one must remember when approaching HIV-positive Latinas who are pregnant, with the subject of abortion or with the recommendation that they not have any more children, that part of their culturally-determined mission in life is to assure the life of the male and to provide him with existential continuity — that is, to provide him with a male baby that will inherit and pass on the family name. In addition, because a woman's life is traditionally defined by the presence of her male partner, she may wish to have, in the form of a child, a reminder of him so that she can feel she has a graspable part of him if he should die prematurely of AIDS.

It is also important to understand that Latinas are the quiet pillars of the Latino family. As such, they learn to take care of everyone else, but themselves. They, for example, often are willing to eat less in order to assure that their husbands and children will be able to eat enough. That is why a disease that infects them may be so dangerous. If Latinas are impacted on by HIV/AIDS, the entire family's health may crumble.

Sexuality and AIDS Education in Latino Communities

There is almost a total lack of adequate sexuality education in U.S. Latino communities. In some areas, Latino leaders have begun to publicly address the subject of...
sexuality only because of the fear of AIDS. This is very dangerous. To present sexuality education under the umbrella of fear of AIDS is to equate, in some ways, sexuality with illness and death. This perpetuates a fear of sexuality within groups where it is already shrouded in an atmosphere of great mystery. In addition, private and public experiences of sexuality within Latino communities have not yet been fully studied.

Clinicians serving Latino communities should be aware that women may walk into their offices pushing a heavy baby carriage, pulling an infant by the hand, and pregnant with a third child, but not know even the basics about sexuality education. As Dr. Yannick Durrand of the Brooklyn AIDS Task Force observed while training hospital personnel in New York: "For many low-income women of the third world, sex is something that happens to them in the dark and in silence." Many Latinas do not talk about sex, even with their male partners. Often, they find it is even too embarrassing to acknowledge that they are actually there — fully conscious and present — during "the act," and/or that their "hot Latino lover's" sexual performance may leave something to be desired.

Latino society does communicate abundantly about sexuality, but it does so in indirect and nonverbal ways. It is not uncommon to hear that fathers and uncles have taken their newly pubescent male relatives directly to sex workers to learn about sex without any prior discussion with them about basic sexuality. This stark cultural device helps them avoid talking about the subject. "We learn by doing, not by talking," is a common saying among Latinos.

Moreover, many Latino communities still believe that good and virtuous women do not talk about sex. This is why so many young Latina public health educators report that when they approach Latinos to speak with them about sexual subjects, the men, believing that they are "coming on to them" behave as though they are "turned on" and, in turn, "come on" to the women. Direct sexual talk is tolerated as something that only men, who may or may not be under the influence of alcohol, publicly engage in, often with sex workers or within the permissive atmosphere (a joking or seductive atmosphere) of a party or an all-male group.

Latinas, because of their training in passivity and submission before male authority, have been thought of as easy targets for public health education strategies. They have, therefore, been invited out of their homes into friendly and apparently harmless local community centers, or clinics, where condoms have been distributed to them — like cheap candy — as part of a one-time AIDS prevention effort. The local public health "minority" outreach worker leaves the presentation happy because his or her generic condom box is empty and goes home believing that s/he has done a great job. But, what the outreach worker may have indeed done, is to place those women at risk of being battered.

As stated before, many Latinas basically have no authority over the sexual act, so to provide them with condoms without preparing their male partners as well, and to pretend that they will be able to take them home and

Some Definitions That May Be Useful

Minority: "Few in number." This term is commonly used to describe black, Latino, Native American, Asian, and other ethnic groups in the United States. It is currently regarded by many as an oppressive term that connotes disempowerment and poverty. Its use is increasingly thought to be inappropriate in areas where such ethnic groups' presence is numerous, strong, and organized.

Hispanic: "Spanish speaking." A language term frequently misused in the United States as a racial term to label the peoples of Central and South America and the Caribbean/Atlantic region who have immigrated into English-speaking North America. Its racial use is inappropriate; it says absolutely nothing of the race of the people it attempts to describe. That is, it does not say whether the person labeled "Hispanic" is black, white, Indian, or racially-mixed. In fact, the person labeled with this language term, such as a Brazilian (whose native language is Portuguese) may not even speak Spanish. As a term, it is increasingly thought to be discriminatory by many Latinos, as it connotes poverty and lack of education to many of them.

Latino(s): When used in its singular form, Latino means a male Latin American. When used in its plural form, Latinos may also mean two or more Latin Americans, both men and women included. It is currently being presented as the "politically appropriate" term for anyone referring to this community but its use has not yet been accepted by all. Many Latinos themselves prefer the term Hispanic, as it is more familiar and does strictly refer to those in the Americas who speak Spanish. However, the term still creates confusion — in Europe it is used to describe all peoples and languages derived from Latin: Italians,
Portuguese, Spaniards, and the French are also "Latinos."

Latinass: When used in its singular form, it means a female Latin American. In plural form, it means two or more Latin American women. Many people, particularly lesbians and feminists, are promoting the use of this term as more sensitive: Latinas deserve to be specifically named and addressed and should not be hidden within the male plural term.

Latin American: Those people of the Americas who have Latin roots, most often understood as Spanish roots. This term is commonly used to designate the peoples of Central and South America and the Caribbean/Atlantic region. It is this author's belief that the best attempt at encompassing the Latino communities of the United States is one that researches and names the national and racial background of the particular U.S. Latino community one wishes to address: the Cubans in Miami, San Juan, or Union City; the Puerto Ricans in Manhattan or the Bronx or the Colombians in Queens, New York; the Haitians in Miami; the Salvadorans in Washington, DC. Or we may speak of Central Americans or South Americans or Caribbean peoples, who may be white, black, Indian, or racially-mixed between two or more of these races.

It is also interesting to note how often Latinos, who have been born in the United States, will refer to themselves as "Hispanics," whereas they will refer to newly arrived Latinos as "Latin Americans," considering them below themselves as they are not yet fluent in English nor do they yet have permanent resident status. On the other hand, many Latinos arriving in the U.S. will refer to themselves as "Latin Americans" and to the already-settled Latinos as "Hispanics," considering themselves to be more culturally pure while "Hispanics," they feel, have lost all, or part, of their original Latin American culture to North American cultural influences.

playfully place them on their male partner's erect penis, is possibly to be encouraging domestic violence. The men may feel castrated by their women who all of a sudden have assumed intimate authority (which they have never had before) over the core of their male partner's masculinity - his erect penis - when he is at his most vulnerable - naked and horizontal.

At the same time, to give a condom to a Latino and pretend that he will use it with his Latina wife, without first educating her, may lead his wife to feel that she is being treated like a sex worker, or it may suggest to her that her husband has been unfaithful and has caught some very "well-deserved" sexually transmitted disease from which he is now trying to protect her. Contraception is basically unpopular with everyone in Latino communities. However, if there is some chance of contraception being used, it might be with a sex worker; a sex worker is possibly the only woman with whom a man may avoid having children. It is also common for men to resist using condoms with a sex worker as well, as she may be a total stranger to him and he may not be concerned about her health, which could put a whole family at risk if she contracts HIV. It should be noted that sex workers in Latino communities in the Americas - and anywhere else where there is poverty - are often mothers who engage in prostitution sporadically, and not full-time, in order to afford food and shelter for their children and themselves.

No sexuality education strategy will be complete unless both partners are fully educationally engaged at the same time. This may mean having each in separate rooms with same-gender sexuality educators or counselors, and then reuniting them afterwards in order to begin to establish some dialogue between them. Both would then know that the other possesses an equal amount of information and that they have, momentarily, been made equal by the information received during the educational interventions.

Their sexuality is one of the few areas in which low-income Latinos still feel they have some control over their lives. Yet, public educators have proceeded to open this last sacred door by storm - because "we are in a health crisis" - and have then assumed the right to tell these people not to engage in sex or how they should do it. Educators or counselors, developing AIDS-related condom strategies for Latinas and Latinos, must understand the larger social context and then must ask, if they really want to be effective, what they plan to give these people for what is being taken away. Are they really "saving their lives" when it is at the cost of total disempowerment? Don't the recipients have the right then to ask if their lives will be worth living after paying such a high price?

AIDS and Unrecognized Latino (Male) Bisexual Behaviors

It is my belief that when we speak of Latino bisexuality issues within the AIDS crisis, most of the time we are not addressing true Latino bisexuality, but closeted Latino homosexual behavior or the bisexual behavior exhibited by Latino heterosexuals because of machismo. Thus, the
real Latino bisexual is lost in the shuffle of understud-
ied and misunderstood general Latino sexual behavior.
Therefore, in this article, I am not going to deal with
biseuxual identity, but with those sexual behaviors that
cause the focus on true bisexuality to be lost in most
studies and educational approaches.

Latino bisexual behavior may prove to be the en-
trance door for HIV into mainstream Latino commu-
unities in the United States and into Southern Latino so-
cieties, if public health educators, here and abroad, do
not recognize it and take appropriate action immedi-
ately.

When one begins to look at different male bisexual
behaviors within U.S. Latino communities, one has to
start by distinguishing between sexual identity and
sexual behavior. Researchers should note that often
how Latinos (males) self-label their sexual identities
has little or nothing to do with their actual sexual be-
aviors. Within many Latino cultures, there are many
publicly self-labeled male heterosexuals who manifest
private bisexual behavior. My first recommendation for
any new research, education, or social service strategy
is to place the issue of sexual identity in the back-
ground and bring the issue of sexual behaviors for-
ward to guide the new approach. Individuals should
be asked what is it that they sexually do — both con-
sciously and unconsciously — not who do they think
themselves sexually to be and how do they sexually
label themselves.

By unconsciously, I mean that within many a so-
cially oppressive heterosexual environment, forms of
sexuality, such as homosexuality and bisexuality, often
show their faces briefly, and only when individuals are
under the influence of alcohol or drugs. Suddenly,
sexually-closeted males may become “overly affection-
ate” with other males or may go on to show clear
homosexual or bisexual behavior. This is, in part, why
so many Latinas regard the undue consumption of al-
cohol by their male partners as something, not only
unpleasant and addictive, but dangerous and sinful, as
they suspect that this type of behavior (as well as
heterosexual promiscuity) might be encouraged and
induced among their male partners. While some indi-
viduals hold on to the need for personal control in or-
der to survive within their societies, others sporadically
let go of this control as a way of surviving. Thus, a
sexually-closeted man may get drunk in order to let
out that oppressed, but important, part of his sexual
identity that must be fulfilled in some way — now and
then — in order for him to survive.

It is difficult to talk about bisexuality among Lati-
os in the United States because these communities, in
general, consider it socially improper to address any
sexual matter directly. Also, Latino cultures do not
have the appropriate, direct verbal language to do so
— although they do have their indirect and nonverbal
ways. Bisexuality must be approached, therefore, from
within the general context of Latino sexualities, as it
only be explained in relation to this broad Latino
sexual framework.

Contributing Cultural Factors

Within Latino cultures there are a number of fac-
tors, which cannot be explained in detail here, that may lead
to bisexual behaviors. However, some of these factors
will be mentioned briefly.

Gender roles continue to be very polarized among
Latino people and often produce very harsh role expect-
tations. In general, sexual liberation tends to open up
heterosexually-polarized societies and create more sexual
options. But, many Latino homosexuals or bisexuals, liv-
ving within communities that are still heterosexually con-
servative, are culturally forced to opt for one of the two
toar heterosexually-polarized gender roles, and they are forced
to adopt public heterosexual male personas while pri-
ately manifesting homosexual behavior. For them, un-
like many homosexually-inclined men of first world ur-
ban societies, there is no middle-of-the-road option. Bi-
osexual behavior is thus culturally engendered.

Coming of age rituals are celebrations mostly thought
to occur in Africa or the Pacific islands, but Latino com-
munities still indirectly mark the coming of age of their
male youth by tolerating, if not nonverbally encouraging,
a more than usual broad range of sexual activity and ex-
perimentation. To play with sexually penetrating another
male, for the sake of practicing a newly found, socially
dominant role, is not such a taboo at this time.

Machismo is still a strong underlying force in most
Latino communities and — as the primitive attitude and
philosophy that it is — encourages the male to be sexu-
ally dominant, particularly over the feminine (whether
feminine female or feminine male). Also, there still is a
mystique that homosexual men are not really men. This
mystique, tied to the belief that the “super-macho” man
is one who not only penetrates/dominates women but
other males as well, encourages bisexual behavior in ex-
treme cases of machismo.

Not enough is said of the role of poverty and bisexual
behavior — it is as if poverty-related sexual behavior
only occurs in developing countries. Poverty can lead
heterosexual Latinos to engage in bisexual prostitution in
order to put themselves or a relative through school or simply to pay the rent and buy food for their families.
Or, it may mean that a homosexual Latino — who does
not have the financial means to physically leave his
heterosexual family home to live an independent homo-
sexual lifestyle in his own home — will have to remain
in his family’s home. Under constant family pressure, he
may eventually marry, yet continue to manifest his
homosexual behavior privately, while he behaves, as a
whole, bisexual.

Strong heterosexual family influence is also a part of
the many cultural factors that induce bisexual behavior.
For many Latinos, choosing a homosexual lifestyle may
mean becoming totally alienated from their families. In
societies where the abandonment of the family is cultur-
ally inconceivable, this forces some homosexuals to lead
double, i.e. bisexual lives.

The influence of drug addiction on bisexual behavior
is not generally acknowledged. Some Latino self-labeled
heterosexuals, however, do engage in bisexual prostituti-
on in order to support their drug habits.
Some Guidelines for Researchers, Educators, and Counselors When Dealing With Latino Males

#1 Unlike the North American gay community, which in large and fairly liberal urban centers can be easily found in particular sectors of cities and towns, the Latino who exhibits bisexual behavior is found everywhere in Latino communities. Therefore, any research study or educational strategy that wishes to reach him must aim at all the places where he lives, works, and socializes, such as gay and straight bars, gay and straight cruising areas, community centers and clinics, public transportation, churches, factories, public bathrooms, Latino neighborhoods and stores, and so forth.

#2 Do not presume that Latinas do not know or suspect that their male partners are engaging or have engaged in same-gender sexual behaviors. There is, however, a significant cultural difference between knowing this and admitting it to strangers who are outside of the family and community.

#3 Realize that Latino bisexual behavior means "AIDS within the Latino family." As the most difficult place to introduce a condom is in an existing, ongoing relationship, particularly if it is an old one, a Latino man, engaging in bisexual behavior, may be more likely to introduce a condom into a sexual exchange with his new male sexual partner than with his longstanding wife. Nevertheless, if he is extremely closeted and his same-gender sexual exchanges are anonymous, he may not care about using condoms with male strangers; in fact, he may not use condoms with either the stranger(s) or his wife.

#4 The question that must be asked of the Latino, who does not self-identify as a homosexual nor as a bisexual but is suspect of same-gender unprotected behavior, is not whether he has had sexual intercourse with another man, but whether he has had sexual intercourse with: a younger man; an effeminate man; a man dressed as a woman; a woman who was really a man or who turned out to be a man; a homosexual; a friend; or a (male) stranger whom he met at a bar (after drinking too much). One must try to "soften" the male identity of the partner, as that is just how this Latino perceives it — that is, not very strongly. Also, try to place him verbally "on top," that is, ask him if he penetrated someone else. There is a Latino mystique that the one who performs the penetration is the real male or, at least, maintains his manhood intact, while the one who is penetrated loses it and is not a real man. (In at least one South American country's army, there are different penalties for men found having anal intercourse: the passive partner receives the stronger sentence. In this case, institutionalized law maintains this sexual cultural myth.)

Types of Bisexual Behaviors

Some of the types of bisexual behaviors that I have encountered while working with and traveling through Latino communities in the United States and abroad are the following:

The closeted, self-identified, homosexual Latino is homosexual in his self-identity but bisexual in his behavior. Though out to himself, he lives a homosexually-closeted life because within his heterosexually-polarized community he cannot bring himself to adopt a transvestite role or that of a very publicly effeminate male — his society's most common, and perhaps only, experiences of those who are openly homosexual. Yet, he may also be closeted for the reasons listed above (especially poverty and family influence).

The closeted, latent-homosexual Latino may define himself as heterosexual, but he is haunted by his own attraction to men which humiliates and angers him. He may engage in same-gender sexual behaviors only under the influence of alcohol or other drugs, and will explain his behavior later, if he remembers it at all, as the strange consequence of such influences. In between episodes, he may be a strong public homophobe. Sporadically bisex-
ual, he does not admit to homeroic feelings, much less to a homosexual identity, yet he may actually be the one who is penetrated during infrequent same-gender exchanges. There are many levels to latent homosexuality. A Latino may find himself close to a level of self-acknowledgment, but may still hold back because of his hate for, and/or fear of, a homosexual identity. Or, he may assume that he is bisexual in identity, and may deal with his homosexuality, as it were, "half way."

The "super-macho," heterosexual Latino allows himself to have sexual intercourse with homosexuals, because he does not truly consider them to be real males; they are "pseudo-females." It has become very trendy, within the evolving lingo of North American urban public health, to try to engage him with the phrase "men-who-have-sex-with-men." But even this expression will not do it. The problem, here, is that often this heterosexual Latino, not only will not admit that he has had sexual intercourse with other men to his interviewers, but he will not admit it even to himself. My belief is that culturally he does not completely perceive homosexuals as other males, but perceives them rather to be a "third sex." His common perception of them is as transvestites who are involved in sex work, as those who are involved in the seductive bar glitz of female impersonators' shows, or as those who are involved in the exclusive women's world of beauty parlors. He observes such men walking, talking, and behaving like women, so he experiences them, in some ways, as women. He is therefore made "gender-blind" by his culture. (How Latino transvestites feed this view of themselves as women is material for another article.)

Here, then, is a sexual/social reality where Latino homosexuals, bisexuals, and heterosexuals all have sexual intercourse with each other, within Latino cultures that hide these behaviors from the rest of society and, most importantly, from each other. And, regardless of any kind of private psychological denial of same-gender behavior, many of the men who are homosexual or bisexual may have a female partner and may have fathered children. Having a wife or girlfriend nearby helps them to hide the reality of their same-gender sexual behavior, and to avoid the personal challenge that such behavior presents to the unexplored sexual identity that they hide from society and from themselves.

"Minority" and "High Risk Groups"

I would like to note here that I cannot help but be concerned with the issue of whether articles such as this feed the underlying belief that AIDS is about "high-risk groups" — and that Latinos and blacks are now being profiled as the "new" high-risk groups, just as North American gays and Haitians were initially profiled (and, in many instances, have continued to be profiled) since the beginning of the AIDS crisis. Larger North American society thinks of itself as sheltered from the virus, because it believes that it can still contain its marginal ethnic groups within the compartmentalized label of a "minority" status. This, however, is a dangerous assumption, as it prevents policymakers from creating prevention programs for mainstream society.

Moreover, when observing the progression patterns of the AIDS epidemic worldwide, I see no reason why North America will not follow their course. And, I fear that we may be writing future articles, similar to this one, on considerations for reaching the various ethnic groups of mainstream America on the intricacies of their sexual attitudes and behaviors — the Irish Americans, Polish Americans, German Americans, and Italian Americans, for example — so that culturally-appropriate prevention programs can be designed for them just as we are now trying to do for Latinos, blacks, Asians, and Native Americans.

This article does not, in any way, pretend to cover or exhaust all the issues faced by Latinas and Latinos. Lesbian Latinas and AIDS, and the HIV-risky practice of anal intercourse as a form of birth control among the poor and as a "protection" against the loss of female virginity between young, unmarried Latino couples, for example, still need to be named and discussed. Further research also needs to be done on a number of pertinent issues, including the impact of North American colonization on Latin America and how it has culturally engendered a certain type of Latino gay man — particularly within the so-called third world poor, urban communities that are hidden within first world U.S. cities. Such a Latino regards the Anglo-Saxon race and culture as superior and may be willing to join it — at any cost — which may be through an association with a North American, English-speaking lover, whom he does not want to lose, even if his lover is unwilling to use condoms and is placing him at risk for HIV infection.

References:
1. Training given to medical personnel at Downstate and Kings County hospitals in 1989.

This article is based on information included in the as-yet-unpublished Inventory of Hispanic/Latino Cultural Issues Affecting AIDS Service Delivery in New York, Cultural Sensitivity Series, Training Manual Number One by Ernesto de la Vega.

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The Hunt Alternatives Fund has awarded SIECUS a $10,000 grant to adapt and translate its booklet, How to Talk to Your Children About AIDS for Spanish-speaking families. The booklet will be available September 1990. We are grateful to the Hunt Alternatives Fund for their support.
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