This study examined the safe-sex practices of African-American college students in light of culturally-specific beliefs that stigmatize Acquired Immune Deficiency Syndrome (AIDS) in the African-American community. A total of 21 self-selected, sexually-active African-American students (15 females and 6 males) aged 18-22 completed the AIDS Knowledge, Feelings, and Behavior Questionnaire. It was found that 80 percent of respondents strongly disagreed that AIDS was not a problem in the African-American community. Yet only 38 percent of respondents reported using condoms or latex protection with every sexual encounter. While the results revealed a low level of AIDS stigmatization and a relatively high level of safe-sex practices among African-American college students, they also indicated a modest negative relationship between AIDS stigmatization and safe-sex practices. An appendix contains 13 charts that detail the results. (Contains 14 references.) (MDM)
AIDS-Related Stigmas and Safe-Sex Practices of African-American College Students: A Pilot Study
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Abstract

Previous studies have suggested that there were culturally-specific beliefs which stigmatize AIDS in the African-American culture. A pilot study examined these beliefs and the safe-sex practices of 21 African-American college students. Eighty percent of the subjects strongly disagreed that that AIDS was not a problem in the black community. Yet, only 38% of the subjects used condoms or latex protection with every sexual act. Using the Spearman rho at the .05 level of significance, the results indicated a modest negative relationship between AIDS stigmatization and safe-sex practices; the more one stigmatize AIDS, the less likely they would engage in safe-sex practices (rho=-.44). Additional research in this area could be useful in creating preventive strategies in the African-American community.
The AIDS-Related Stigmas and Safe-Sex Practices of African-American College Students

Introduction

In the United States, over 500,000 AIDS cases were reported to the Centers of Disease Control (Laurence, 1996). Nearly 50% of these cases were reported in the last two years (Laurence, 1996). This increase has primarily affected ethnic minorities, particularly, African-Americans (Laurence, 1996). Estimates have indicated that African-American males were three times more likely to contract AIDS than white males; African-American females were 13 times more likely to contract AIDS than white females; and African-American children were 12 times more likely to contract AIDS than white children (Jenkins, Lamar, & Thompson-Crumble, 1993). Overall, African-Americans constitute 30% of the AIDS cases in the United States (Jenkins et al., 1993).

Experts have suggested that past preventive strategies were ineffective with African-Americans because of their beliefs which stigmatize the disease (Jenkins et al., 1993; Foster, Phillips, Belgrave, Randolph, & Braithwaite, 1993; Belgrave, Randolph, Carter, Braithwaite, & Arrington, 1993; Damond, Breuer, & Pharr, 1993; Quimby, 1993).
Based on Goffman's (1963) seminal work, a stigma was a belief which disqualified something from full social acceptance. These beliefs may lead to various misconceptions, stereotypes, and discriminatory acts (Goffman, 1963; Weitz, 1991; Moneyham, Seals, Demi, Sowell, Cohen, & Guillory, 1996).

Researchers have identified the cultural and contextual issues which stigmatize AIDS in the African-American culture (Baldwin & Baldwin, 1988; Jenkins et al., 1993; Quimby, 1993; Dancy, 1991; Dancy, 1996). The purpose of this study was to examine the relationship between these beliefs and the safe-sex practices of African-American college students. Subsequently, previous studies have indicated that African-American college students were less knowledgeable about HIV transmission and possessed more stereotypes about those infected (Thomas, Gilliam, & Iwery, 1989; Fennell, 1990). Do these beliefs continue to exist among African-American college students? It is hypothesized that there is a negative correlation between AIDS stigmatization and safe-sex practices of African-American college students.
Methodology

Subjects

A self-selected sample of 21 African-American college students in the Middle Tennessee area were used in the study. The age range was 18-22 with a mean of 22. In terms of gender 71.4% were female and 28.6% were male. The breakdown of college classification was the following: 19% were freshmen; 38.1% were sophomores; 33.3% were seniors. Geographically, 42.9% of the sample lived in the North; 52.4% lived in the South; and 4.8% lived in the Midwest. All of the subjects were heterosexual, single, and sexually active within the last six months. In the last six months, 76.2% of the sample had only one sexual partner; 9.5% had two sexual partners; and 14.3% had three sexual partners. All of the subjects indicated that they were HIV negative. They also indicated that they did not know anyone personally who had AIDS or was HIV positive. More importantly, all the subjects indicated that they have seen an HIV/AIDS presentation.
Instrument

The AIDS Knowledge, Feelings, and Behavior Questionnaire (AKFBQ) by Dancy (1991) was used to assess the safe-sex practices and AIDS stigmatization in the African-American culture. Six questions were selected from the Behavior subtest to measure safe-sex practices in the last six months (i.e. "Have your partner(s) use a latex condom or latex protection with every sexual act"). Safe-sex practices were operationally defined as the use of condoms or latex protection during sexual intercourse. All seven questions from the Feelings subtest was used to measure AIDS stigmatization (i.e. "AIDS is a conspiracy against black people"). AIDS stigmatization was operationally defined as the process with disqualifies AIDS from social acceptance. AIDS The AKFBQ was standardized on a sample of African-American women. The internal consistencies (reliability) for the Behavior and Feelings subtests were .84 and .60 respectively. All of the scores yielded ordinal data.
Procedure

Subjects were obtained from colleges and universities. The subjects were given the opportunity to receive extra-credit if they participated. All of the subjects were informed about the nature of the study before completing the questionnaire. The subjects completed the questionnaire within a 15 minute time period. Out of 59 volunteers, only 35.5% subjects were used in the statistical analysis.

Statistics and Results

The descriptive analysis on the Behavior items was provided on Chart 1-6 and the Feelings items on 7-13. The Spearman correlation was found to be significant at the .05 level of significance (p=.023) on Figure 1. The Spearman rho was -.4387. See Appendix for Charts 1-13 and Figure 1.
Discussion

The results of this pilot study suggested that there was a modest negative relationship between AIDS stigmatization and safe-sex practices of African-American college students (rho=-.44). Descriptively, the results revealed a low level of AIDS stigmatization and a high level of safe-sex practices among African-American college students. This refutes previous studies which have indicated African-American college students to have high misconceptions about HIV/AIDS. However, there were issues that there needed to be examined in future studies. First, there was a definite need to increase the sample size. More subjects were needed in order to provide generalizability. Secondly, the AKFBQ was designed solely on the responses of African-American women. Questions which were geared towards males and females should be used. Thirdly, further development was needed in the scaling of the AKFBQ. A Likert scale would be useful in utilizing parametric statistical analyses. Nonetheless, the study's manipulation checks provided a "traditional college student's" response to HIV/AIDS. Also, it was important to emphasize that all of the subjects were educated on HIV/AIDS. Perhaps, AIDS education in college settings has impacted the African-American college experience.
References


AIDS-Related Stigmas 10


Appendix
Subjects who maintain a supply of condoms or latex protection

Chart 1

AIDS-Related Stigmas 12

- Always
- Sometimes
- Never

n=21
Subjects who rely on their partners to supply condoms or latex protection

- Always: 14%
- Sometimes: 19%
- Never: 67%

n=21
Subjects who let their partners decide if condoms or latex protection should be used

- Always: 5%
- Sometimes: 24%
- Never: 71%

n=21
Subjects who avoided asking their partners to use condoms or latex protection because their partners would get upset

Chart 4  AIDS-Related Stigmas 15

5%

95%
n=21

Sometimes
Never

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Subjects who refused to have sex with their partners because condoms or latex protection was not used

Chart 5  AIDS-Related Stigmas 16

- Always: 48%
- Sometimes: 38%
- Never: 14%

n=21
Subjects who used condoms or latex protection with every sexual act

- Always: 38%
- Sometimes: 57%
- Never: 5%

n=21
AIDS is a Curse

- 47% Don't Know
- 29% Agree
- 14% Disagree
- 10% Strongly Disagree

n=21
DK=Don't Know; A=Agree; D=Disagree; SD=Strongly Disagree
AIDS is a Conspiracy against Black People

n=21
DK=Don't Know; SA=Strongly Agree; D=Disagree; SD=Strongly Disagree
People with AIDS deserve it, especially if their a homosexual, bisexual, prostitute, or a drug user

n=21
A=Agree; D=Disagree; SD=Strongly Disagree
AIDS posters should not be displayed in public

n=21
A=Agree; D=Disagree; SD=Strongly Disagree

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AIDS is not a problem in the Black Community

n=21
SA=Strongly Agree; A=Agree; D=Disagree; SD=Strongly Disagree
Homosexuality is a problem in the Black Community

n=21
DK=Don't Know; A=Agree; D=Disagree; SD=Strongly Disagree
People with AIDS should not be allowed to prepare food in public places

Dk=Don't Know; SA=Strongly Agree; A=Agree; D=Disagree; SD=Strongly Disagree

n=21
Figure 1

AIDS Stigmatization vs. Safe-Sex Practices

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