

## **Appendix C- Soundbite Template**

### **I. Rationale**

In the United States, Black men are disproportionately burdened by the HIV epidemic, representing 42% of males diagnosed with HIV (1). Having sex with men is the major route of HIV infection and among Black men who sex with men (MSM) the risk of HIV infection more than doubles that of other racial/ethnic MSM (1). Childhood sexual abuse (CSA) is one of the vulnerabilities that place MSM at risk for engagement in HIV sexual risk behavior and HIV infection (2, 3) and Black MSM report a significantly high rate of CSA and related mental health issues (e.g. PTSD and depression) (4). However, sexual risk behaviors and individual level factors alone do not account for the health disparities in HIV prevalence for Black MSMs and contextual/structural factors are especially relevant in HIV risk/outcome for Black MSM (5-8). Black MSM experience high rates of unemployment and poverty, and often reside in disenfranchised communities with limited resources (4). A recent publication by Mayer and colleagues (4) from the HPTN 061 study noted that Black MSM newly diagnosed with HIV were significantly more likely to be unemployed than HIV-uninfected Black MSM. The relationships between poverty indicators and sexual risk behavior may be significantly heightened within the context of childhood sexual abuse. We are proposing to conduct analyses on relations between unstable housing, other poverty indicators, and sexual risk among Black MSM with CSA. Findings may suggest individual and community level interventions to decrease sexual risk among Black MSM.

### **II. Clear Statement of Objective**

- Examine the relations between unstable housing and other poverty indicators and sexual risk among Black MSM with a history of childhood sexual abuse.
- **Hypothesis**  
Black MSM with a history of childhood sexual abuse, who have unstable housing and other poverty indicators will report significantly higher rates of sexual risk behaviors.

### **III. Expected product (conference, journal, etc)**

A manuscript will be prepared and submitted to a peer-reviewed journal for publication.

### **IV. Recommendation of writing team members, including lead**

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### **V. How will the perspective of the community be incorporated into the concept and final product?**

Communities of color have long advocated for community investments and resources to address contextual/ structural barriers (e.g. poverty) that may relate to health disparities such as HIV, thus if our hypothesis is supported, the manuscript will echo the communities’ interests by recommending financial and economic empowerment in order to reduce sexual risk among Black MSM with a history of CSA.

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7. Millett GA, Peterson JL, Flores SA, Hart TA, Jeffries WLt, Wilson PA, et al. Comparisons of disparities and risks of HIV infection in black and other men who have sex with men in Canada, UK, and USA: a meta-analysis. *Lancet* 2012;380(9839):341-8.
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