PhD Student Dissertation Defense
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HIV prevention in transnational communities: Developing a model of trust and social influence among immigrant Latinos in North Carolina
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Abstract:
Early detection of HIV-positive status and entry into treatment is the most efficacious way to prevent the spread and/or progression of the disease. However surveillance data and cohort studies indicate Latinos in the United States (U.S.) are more likely than non-Latino blacks and whites to delay testing, present to care with an AIDS defining illness, and die within one year of learning their HIV-positive status. Recent studies have shown that U.S. immigrants from Mexico and Central America are more likely to delay testing and treatment compared to other foreign-born groups; and Latinos in southeastern settlement states may delay seeking care longer than Latinos in more established immigrant destinations. Because time lived in the U.S. and acculturation are often associated with increased behavioral risk and suboptimal health outcomes among Latinos, it is important to understand how combinations of sociopolitical and acculturative influences in new settlement areas may affect personal health assessments, socio-medical intuitions, and likelihood of HIV-testing/treatment-adherence over time.

This research develops emerging theories linking socio-acculturative factors and endorsements of trust in medical care to HIV-prevention and public health criteria. The research uses data collected in 2008-2009 from three NIH and extramurally funded studies to address three specific aims: (1) Assess validity of the adapted Wake Forest University Medical Trust Scale among Spanish-speaking men and women from Mexico and Central America; (2) Estimate structural relationships between socio-acculturative influences, self-rated health status, and HIV-testing, adjusting for length of residence in the U.S.; and (3) Examine how legal stress and medical trust modulate effects of the HoMBReS HIV prevention intervention. This research advances theory and measurement of psychological processes in the most rapidly growing U.S. populations experiencing the most severe AIDS-related outcomes.