

RAP* Time



RURAL CENTER *for* AIDS/STD PREVENTION

A JOINT PROJECT OF
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*Rural AIDS/STD prevention. rap (rap) v. Slang. To talk freely and openly. Vol. 3, No. 10, October 1, 1999

Most Youth Living With HIV Disclose Serostatus to Family and Sexual Partners

When learning of their infection with HIV, persons are confronted with deciding to whom, how, and when to disclose their diagnosis. In the United States, youth living with HIV (YLH) are largely African-American or Latino young men who have sex with men, and women infected through heterosexual coitus. Most studies of YLH disclosure patterns have been with young hemophiliacs and gay/bisexual men who are predominately White.

This study examined the disclosure patterns, sociodemographic characteristics, sexual and substance-use risk history, and current health status of YLH.

Methodology

Over a 21-month period (1994-1996) 350 youth were surveyed at four medical sites in New York City, Los Angeles, Miami and San Francisco. Serostatus was confirmed at the recruitment site by Elisa tests and Western blot tests.

Outcomes of the Study

The mean age was 21.3 years. Males were 72% of the sample

with 93.8% reporting engaging in same-gender sexual activity. Nearly 90% of the HIV+ female youth labeled themselves as "straight."

Overall, 38% were Latinos, 27% African-American, 18% White, and 17% another or biracial ethnicity. The median length of time since learning HIV seropositivity to the time of interview was 19 months. Thirty-five had AIDS, 108 were symptomatic, and 201 were asymptomatic.

Major findings include:

- Most youth disclosed their serostatus to their family (87%). Female and male youth had similar disclosure rates, with being younger at diagnosis having high disclosure. Latino youth had lower disclosure rates.
- Male youth (93%) were more likely to disclose to friends than female youth (79%). Spanish-speaking Latinos and African-Americans were less likely to disclose.
- Most gay and lesbian youth (90.6%) disclosed their sexual orientation to their family and an even higher percentage disclosed to their friends (97.6%). No relationships were

found between the disclosure of serostatus and sexual orientation.

- Most youth disclosed to all of their sexual partners (69%). Higher rates of disclosure to their sexual partners was associated with having fewer partners and being African-American.
- Condom use was significantly associated with disclosure for young women and tended to be related for young men. Although many YLH disclose their serostatus to their partners, condom use is not increased.
- The youth of this study disclose more often than hemophilis youth.

Implications for Prevention

Disclosure was common among the YLH. Interventions are needed to increase condom use among YLH, as well as to encourage disclosure to partners by the 31% of YLH who do not disclose.

SOURCE: Lee, M., et al. (1999). Disclosure of serostatus among youth living with HIV. *AIDS and Behavior*, 3, 33-39.

Fear of AIDS Major Reason Why Rural Young Teens Abstain

Research asking adolescents who have not had sexual intercourse why they remained abstinent has not been reported. This study was examined why some youth remain "sexually resilient."

The sample was 697 early adolescents (8th-10th grade) attending 20 schools in Missouri. Fifty-nine percent were female, 74% White and 67% from nonurban areas.

The most frequent reasons for not having sex were: fear of AIDS, fear of becoming pregnant or getting someone pregnant, and fear of getting a disease. Moderately frequent reasons were: believing it is wrong to have sex before marriage and waiting until marriage. The least frequent reasons were: not knowing where to get birth control or protection, being embarrassed to use birth control or protection, and not having enough money to buy birth control or protection.

SOURCE: Blinn-Pike, L. (1999). Why abstinent adolescents report they have not had sex: Understanding sexually resilient youth. *Family Relations*, 48, 295-301.

AIDS Cases Increasing Among Hispanic Men and Women

Data for persons with AIDS reported to CDC through September 30, 1998, whose dates of diagnosis were between January 1, 1991, and December 31, 1996, and who reported residing in 1 of the 50 states or Puerto Rico were analyzed.

Of the total of 415,864 AIDS cases reported to CDC between 1991 and 1996, 78,138 (19%) were Hispanic. Of these, 80% were adult men, 19% adult women, and 1% children younger than 13 years. The AIDS rate was higher among Hispanic adults and children than among White non-Hispanics. A linear model showed increasing AIDS cases among foreign-born Hispanic men and women and heterosexual US-born Hispanics was observed.

Among foreign-born Hispanics, the largest increase was among heterosexuals; among the US born, declines occurred among injection drug users and men who have sex with men. Some evidence suggested that most foreign-born Hispanics were infected in the US.

SOURCE: Klevens, R. M., et al. (1999). Trends in AIDS among Hispanics in the United States, 1991-1996. *American Journal of Public Health*, 89, 1104-1106.

Most Patients of Syphilis Reintroduction Were MSM

After several years of decline, King County, Washington, including Seattle, had an reintroduction of infectious syphilis during 1997-1998. Sixty-eight percent of patients were men reporting sex with men, of which 66% were seropositive to HIV. Most were 30 years or older and had many anonymous partners.

SOURCE: Williams, L. A., et al. (1999). Elimination and reintroduction of primary and secondary syphilis. *American Journal of Public Health*, 89, 1093-1097.

TV Viewing Impacts Sex-Related Variables

Of 314 students aged 18-20, greater involvement with TV's sexual content were associated with stronger endorsement of recreational sex, higher expectations of peer sex activity, and more extensive sexual experience.

SOURCE: Ward, L. M., & Rivadeneyra, R. (1999). Contribution of entertainment television to adolescents' sexual attitudes and expectations: The role of viewing among versus viewer involvement. *The Journal of Sex Research*, 36, 237-249. ○

RAP Time is a monthly publication of the Rural Center for AIDS/STD Prevention (RCAP). RCAP is a joint project of Indiana University, Bloomington and Purdue University, West Lafayette, Indiana. The major focus of RCAP is the promotion of HIV/STD prevention in rural America, with the goal of reducing HIV/STD incidence. The opinions expressed here do not necessarily reflect those of Indiana University or Purdue University.

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