

# RAP\* Time



## RURAL CENTER *for* AIDS/STD PREVENTION

A JOINT PROJECT OF  
INDIANA UNIVERSITY & PURDUE UNIVERSITY

\*Rural AIDS/STD prevention. rap (rap) v. Slang. To talk freely and openly.

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## Rural Residence Associated With Delay of Onset of Sexual Intercourse Among Teens

Researchers have identified factors that predispose young people to early onset of sexual intercourse, including biological factors (e.g. gender, age pubertal timing) and social factors (e.g. poverty, family marital disruption and poor academic performance). Little is known about the characteristics of adolescents who have chosen to delay the onset of coitus.

This study hypothesized that the same factors identified as protective against acting-out behaviors would be associated with postponing sexual intercourse among female and male adolescents.

### Methodology

The study sample included 26,023 students in grades 7-12 who completed an anonymous health survey in 1988 and who did not report a history of sexual abuse.

Subjects were derived from Minnesota public schools which were selected using a multistage stratified cluster sampling design. Random sampling was used in each stratum of students and for each grade. Analyses were stratified into early (13-14 years),

middle (15-16 years) and late adolescence (17-18 years).

### Outcomes of the Study

Nearly nine out of ten (87.5%) of the sample were white, with 52.5% being male. Forty percent (10,399) reported ever having sexual intercourse.

Major findings include:

- The proportion of youth who ever had sexual intercourse increased with age. Among females, 16.3%, 36.8%, and 55.2% of students age 13-14, 15-16, and 17-18 years, respectively, had ever had sexual intercourse. Corresponding percentages among boys were 29.3%, 47.0%, and 60.2%.
- Variables showing association with delayed onset of coitus for both females and males were: residing in rural areas, dual-parent families, higher socioeconomic status (SES), higher school performance, concerns about the community, and higher religiosity. Higher parental expectations were a protective factor for males, but not females.
- Higher body pride was associated with higher levels of sexual activity for all subjects.

- Variables associated with lower levels of sexual activity across all age groups and genders were: dual-parent families, higher SES, better school performance, greater religiosity, absence of suicidal thoughts, feeling adults and parents cared, and high parental expectations.

### Implications for Prevention

The study found that influences on adolescent sexual behavior are complex and that contextual factors such as area of residence, family structure and SES, as well as personal characteristics such as school performance and religiosity, are important.

While many factors are not subject to intervention, the study showed that teen pregnancy and HIV/STD prevention may be enhanced by addressing family and educational factors.

SOURCE: Lammers, C., et. al. (2000). Influences on adolescents' decision to postpone onset of sexual intercourse: A survival analysis of virginity among youths aged 13 to 18 years. *Journal of Adolescent Health, 26*, 42-48.

### Young Adult Men Received Less STD Messages Than Teens

Young men are less likely to use condoms and are at increased risk for HIV/STD as they reach adulthood. Longitudinal data from the 1988, 1990-1991 and 1995 waves of the National Survey of Adolescent Males were used to identify sources of HIV/STD information among 1,290 young men aged 22-26.

Twenty-two percent discussed disease prevention with a health provider last year, 48% attended a lecture or read a brochure, 51% spoke to a partner, friend or family member, and 96% heard about HIV/STD from the media (e.g. TV, radio, magazine). Excluding media sources, 30% reported getting no HIV/STD prevention messages last year.

Also, young adult men were much less likely than adolescents to receive HIV/STD education.

More prevention efforts are need to be aimed at young adults.

SOURCE: Bradner, C. H., et al. (2000). Older, but not wiser: How men get information about AIDS and sexually transmitted diseases after high school. *Family Planning Perspectives*, 32, 33-38.

### Syphilis Often Associated with HIV and Crack-Using Partners

Syphilis transmission in Atlanta, Georgia is ongoing despite declining incidence. This study identified risk factors and missed opportunities for education.

Twenty-five STD clinic patients with primary or secondary syphilis and 49 matched controls were interviewed in 1995 and 1996.

Persons with syphilis more frequently had HIV infection (24% versus 2%), crack-using sex partners (52% versus 18%), and a history of incarceration. Many cases (48%) and controls (31%) had received drug-abuse treatment. Only 40% of previously incarcerated patients and 74% of those having drug treatment received HIV/STD prevention education in those settings.

For patients reporting recent HIV education, 41% were told about STD recognition and treatment. Unprotected sex and delay in seeking treatment were common. To prevent syphilis and associated HIV, more extensive STD education is needed in jails and drug-treatment centers.

SOURCE: Fleming, D. T., et al. (2000). Syphilis in Atlanta during an era of declining incidence. *Sexually Transmitted Diseases*, 27, 68-73.

### Gonorrhea Rates Higher in "Broken Windows" Districts

The association between "broken windows" (i.e., housing quality, abandoned cars, graffiti, trash, and public school deterioration) in New Orleans and gonorrhea was assessed. In high-poverty neighborhoods, districts with high broken windows scores had significantly higher gonorrhea rates than areas with low broken windows scores.

SOURCE: Cohen, D. et al. (2000). "Broken windows" and the risk of gonorrhea. *American Journal of Public Health*, 90, 230-236.

### Smart Teens Do Not Have Sex As Often

Data from a large, nationally representative sample of adolescents found that those at the upper and lower ends of the intelligence distribution were less likely to have sex. Higher intelligence was also associated with the delay of initiation of the full range of partnered sexual activities.

SOURCE: Halpern, C. T., et al. (2000). Smart teens don't have sex (or kiss much either). *Journal of Adolescent Health*, 26, 213-225.



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