Promotion of condom use to control HIV among heterosexuals succeeded in 1990’s

National surveillance studies indicate that HIV prevalence among heterosexuals has declined since 1990. Decreased HIV among injecting drug users, decreases in STD prevalence, increased adoption of health behaviors, and the development of public health initiatives are factors that contributed to this decline.

This study examined changing national patterns in condom use among at-risk heterosexuals in the 1990's.

Methodology

Outcomes of the Study
Females and males were nearly equally represented. Almost three-quarters were white, with the remaining being largely black and Hispanic. Over 60% had 12 or more years of education. Slightly more than half were married with about one-quarter never married.

Major findings include:
- The observed increases over time in condom use across all heterosexual at-risk population segments are consistent with observed decline in HIV and syphilis in the 1990's.
- The proportion of the population who engaging sexually risky behaviors was stable between 1990 and 1992 and increased by about 3% in 1996.
- Condom use increased from 1990 to 1992 and remained stable between 1992 and 1996.
- There were significant trends over time in condom use among participants by race, education, age, gender, type of relationship and risk behavior across samples.
- Blacks and Hispanics had a 40% decline in poor condom use versus 17% for at-risk whites.
- Although behavior change among at-risk women was not significant between 1990 and 1992 there was a significant decline (15%) in poor use by women between 1992 and 1996.
- Poor condom use decreased across all levels of education and ages groups between 1990 and 1996.
- Among those reporting having multiple sexual partners, poor condom use decreased from 78% to 50% between 1990 and 1996.

Implications for Prevention
These results and findings from other studies suggest that national efforts to promote condom use and reduce the spread of HIV and related sexually transmitted disease-cofactors among at-risk heterosexuals was succeeding over most the 1990’s.

National and local prevention efforts should be directed toward sustaining behavioral change and conducting more rigorous studies on population trends in HIV/STD related behaviors and pathogens.

**HIV+ drug users likely to get needles from safe sources**

Needle exchange programs have been implemented to reduce the spread of HIV and other blood-borne diseases among injecting drug users. This study examined factors associated with obtaining syringes from needle exchange programs and other safer sources in Baltimore, Maryland.

The sample included 741 current drug injectors recruited between 1997 and 1999 in areas of high drug activity. Most participants (85%) obtained needles from street needle sellers. Only 8% obtained their needles exclusively from safer sources (needle exchange programs, pharmacies, hospitals, or patient with diabetes). However, HIV positive participants who were diagnosed before needle exchange programs began were more likely to get their needles from safer sources.


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**Some college students try to dissuade partners from condom use**

Despite public health efforts to increase condom use, only a minority of men and women who engage in sexual intercourse use condoms regularly. This study surveyed college students about their verbal attempts to dissuade sexual partners from the couple using condoms.

Participates in the survey were 954 undergraduates a large, southern, urban, state university. Of those who were sexually experienced, 14% of females and 17% of males reported they had attempted to dissuade a partner from using condoms. Those who had more than 10 lifetime sexual intercourse partners were more likely to report attempting to dissuade their partner. Thirty percent of the men and 41% of the women said that a sexual partner had tried to persuade them.

Dissuading statements by both men and women included: sex feels better without a condom, they would not get pregnant, and they would not get an STD.


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**Young age strongest predictor of repeated chlamydial infections**

Of 32,698 Washington women treated for chlamydia, fifteen percent developed one or more repeated infections. Youngest girls (10-14 years) had the highest risk of reinfection. Women living in rural counties were less likely to have repeat infections.


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**N-9-induced inflammation increases HIV risk**

While one-time use of nonoxynol-9 had no adverse affect on cervicovaginal cells, the use of three daily applications resulted in a “striking” inflammatory response and increased HIV-1 replication.