

# RAP\* Time



## RURAL CENTER *for* AIDS/STD PREVENTION

A JOINT PROJECT OF  
INDIANA UNIVERSITY, PURDUE UNIVERSITY,  
and TEXAS A&M UNIVERSITY

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

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## Rural African American women perceived less HIV threat than suburban/urban women

The incidence of HIV infection is increasing disproportionately among African American women in the U.S. Although the majority of cases occur in urban areas, the spread of HIV to rural communities is a growing concern to prevention specialists.

Evidence suggests that rural HIV epidemics most frequently impact women, particularly young adult African American women. Few studies have specifically addressed how the HIV epidemic has affected rural African American women. Because they are more removed from urban areas, African American women may perceive less threat of HIV infection than their nonrural counterparts.

The study compared HIV-associated sexual health history, risk perception, and sexual risk behaviors of low-income rural and nonrural African American women.

### Methodology

Data from a statewide survey of women at a federally funded nutrition program for Women, Infants and Children (WIC) in Missouri were used. More than 90% of Missouri counties are rural. Women who received WIC benefits and agreed to participate were

mailed surveys between February and April 1998.

### Outcomes of the Study

Of those returning the questionnaire, 571 were African American. Twenty-four percent were from rural counties, with 72% and 4% from urban and suburban areas, respectively. For all respondents, about 80% reported a monthly household income of less than \$1200; about 50% reported an income of less than \$600. The mean age was 26 years. The mean frequency of sex during the past two months was 10.8 times for rural women and 8.3 for nonrural women.

Major findings include:

- Rural women were about two times more likely than nonrural women to report having no chance of HIV infection.
- Rural women were about two times more likely than nonrural women to report having no preferred way to prevent HIV/STD infection because they did not worry about HIV/STD.
- Rural women were about two times more likely than nonrural women to report never using condoms or not using condoms because they believed their current partner was HIV negative,

despite lack of HIV testing.

- Rural women were about two times more likely than nonrural women to report a lack of HIV counseling during last pregnancy.
- Rural women were more than twice as likely than nonrural women to have a current or past partner who had not been tested for HIV.
- Rural women were less likely than nonrural women to report ever having an STD.

### Implications for Prevention

This study found that fewer rural African American women (compared to nonrural) were engaged with the threat of HIV infection. In general, rural women believed themselves to be less susceptible to HIV. This perception may be problematic because of the spread of HIV to nonurban areas. Prevention efforts targeting rural African American women should be an important public health priority.

SOURCE: Crosby, R. A., et al. (2002). HIV-associated histories, perceptions, and practices among low-income African American women: Does rural residence matter? *American Journal of Public Health*, 92, 655-659.

## HIV testing only symptomatic persons inadequate

Studies indicate that one-third of HIV-infected persons in the U.S. have not been tested, and hence do not know their HIV status.

A program offering voluntary HIV counseling and testing to patients admitted to the medical service of a Boston, Mass, teaching hospital was implemented. The results of this effort was compared with testing results from a 15-month historical control period.

Intervention patients were 3.4 times more likely to undergo testing for HIV than those admitted during the control period. The intervention testing programs detected about 2 new diagnoses of HIV infection per month, compared to 1 per month for the controls.

The study concluded that testing efforts for HIV targeted to only symptomatic patients are inadequate to identify HIV-seropositive people in the U.S. who are unaware of their infection. HIV screening should be universal.

SOURCE: Walensky, R. P., et al. (2002). Identifying undiagnosed human immunodeficiency virus: The yield of routine, voluntary inpatient testing. *Archives of Internal Medicine*, 162, 887-892.

## MSM meeting men via Internet have higher sexual risk behavior

Recently the Internet has become a popular venue for gay men. This study examined the prevalence of Internet use for meeting sexual partners among men who have sex with men. HIV risk behavior of these men were also studied.

609 men attending a gay pride festival in Atlanta, GA, were recruited to complete a self-administered questionnaire.

Three-quarters used the Internet to access gay-oriented web sites. 34% reported having met a partner via the Internet. Men meeting partners online, compared to those not meeting partners in this manner, reported higher methamphetamine use, sex with more partners in previous 6 months, and higher rates of sexual risk behaviors including unprotected receptive and insertive anal intercourse.

The trend towards increased use of the Internet by gay men will likely continue, and interventions targeted at this population will be needed. The Internet therefore provides opportunities for new HIV primary prevention interventions.

SOURCE: Benotsch, E. G., et al. (2002). Men who have met sex partners via the Internet: Prevalence, predictors, and implications for HIV prevention. *Archives of Sexual Behavior*, 31, 177-183.

## Many primary care physicians have negative attitude about STD

A survey was mailed to primary care physicians in Pennsylvania. Many believed their STD counseling was ineffective (70%), their medical school STD training was inadequate (48%), or that they were not responsible for STD prevention services for their patients (43%). Overall, STD-related attitudes were more positive among female physicians.

SOURCE: Ashton, M. R., et al. (2002). Primary care physician attitudes regarding sexually transmitted diseases. *Sexually Transmitted Diseases*, 29, 246-251.

## Circumcision reduces penile HPV infection

Data from couples from five countries found that penile HPV was detected in 166 of 847 uncircumcised men (19.6%) and in 16 of 292 circumcised men (5.5%). Also, male circumcision was associated with reduced cervical cancer risk in current female partners.

SOURCE: Catellague, X., et al. (2002). Male circumcision, penile human papillomavirus infection, and cervical cancer in female partners. *The New England Journal of Medicine*, 346, 1105-1112.

**RAP Time** is a monthly AIDS/STD prevention bulletin published by the Rural Center for AIDS/STD Prevention (RCAP) at Indiana University, Bloomington. RCAP is a joint project of Indiana University, Purdue University and Texas A&M University. 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 represent those of the cooperating universities.

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