

**Women more likely than men to disclose STD status to partner**

Partner notification is an important component of HIV control efforts that is mandatory in several countries. This study investigated the proportion of individuals who did not disclose an STD diagnosis according to gender and type of partner.

Data were from three national population-based surveys of adults and adolescents in France.

14% of men reported that they had not informed their main sexual partner of an STD diagnosis compared to only 2% of women. This sex difference was not associated with the type of STD, the patient's age, their level of education, or their previous number of sexual partners.

51% of adolescent males reported they had not discussed their STD with a current partner compared to 9% of females.

Procedures must be developed to facilitate the notification of sexual partners particularly female adults and adolescents who are not likely to be tested early without such notification.

SOURCE: Warszawski, J., & Meyer, L. (2002). Sex difference in partner notification: Results from three populations based surveys in France. *Sexually Transmitted Infections*, 78, 45-49.

**Drinking at first coitus associated with decreased condom use**

Research on factors that influence sexual risk behavior, such as alcohol use prior to sex, is important to HIV prevention efforts because alcohol may impair decision-making. This analysis examined previous studies to determine the relationship between alcohol use and condom use in individual sexual encounters. 13 studies from the U.S., Norway, Canada, and France were included in the analysis.

Persons using alcohol before their first sexual intercourse were slightly less likely to use condoms than those who did not drink. This is particularly true for adolescents. Among adults, drinking was unrelated to use of condoms in their later sexual encounters and in recent encounters with new partners. Other drugs may be associated with nonuse of condoms.

A public health message that alcohol leads to sexual risk taking is misleading given that this link is found only at first intercourse. Incorporating this complex relationship into health and sexuality education programs for adolescents is a challenging task.

SOURCE: Leigh, B. C. (2002). Alcohol and condom use: A meta-analysis of event-level studies. *Sexually Transmitted Diseases*, 29, 476-482.

**Confidence in HAART related to sexual risk among MSM**

547 homosexual men were interviewed. HIV-negative gay men who most agreed that HAART reduced concern about HIV infection were 3 times more likely to report unprotected receptive anal sex compared to other HIV-negative men. HIV-positive gay men with the greatest reduced concern due to HAART were 6 times more likely to report unprotected insertive anal sex than other HIV-positive men.

SOURCE: Ostrow, D. E., et al. (2002). Attitudes towards highly active antiretroviral therapy are associated with sexual risk taking among HIV-infected and uninfected homosexual men. *AIDS*, 16, 775-780.

**Chlamydia found more often in female teens**

Chlamydia and gonorrhea screening among asymptomatic San Francisco high school students showed that 3.9% of females had chlamydia and .7% had gonorrhea. For males, .8% had chlamydia and none had GC.

SOURCE: Nocolai, L. M., et. al. (2002). HIV-infected persons' knowledge of their sexual partners' HIV status. *AIDS Education and Prevention*, 14, 183-189.

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The opinions expressed here do not necessarily represent those of the cooperating universities.

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# 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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## Early coitus associated with sexual risk behaviors among rural high school students

Previous research indicates that adolescent health-related behaviors are associated with sexual risk. Recent studies suggest relationships exist between sexual risk taking among adolescents and sexual experiences, sexual and physical abuse, and alcohol and drug use. Most of these studies focused on urban youth or did not separate analysis by residence.

Given that many rural adolescents are engaging in risky sexual behaviors, studies of rural youth are needed to examine the potential risk and protective factors associated with risky sexual behavior. This analysis determined the association between selected risk and protective factors and two or more lifetime sexual intercourse partners and non-condom use for last coitus among U.S. adolescents from rural high schools.

### Methodology

The sample was comprised of 569 sexually experienced adolescent females and 561 sexually experienced adolescent males who participated in the national 1999 Youth Risk Behavior Survey and attended rural high schools. Eleven behavioral risk factors and two protective factors were in-

cluded as potential determinants of sexual risk behavior.

### Outcomes of the Study

The mean ages for females and males were 15.4 and 15.5, respectively. 90% were White or Black.

Major findings include:

- Females who had coital debut before age 15 were 11 times more likely to have two or more lifetime coital partners. Males who had coitus before age 15 were more than 5 times more likely to have had multiple partners.
- Females who experienced forced coitus or were physically abused by their partner in the past 12 months were more than 2 times more likely to have had multiple partners.
- Females who used marijuana in the past month were 3 times more likely to have had multiple partners. Males who used marijuana/binge drank in the past month were 2 times more likely to have had multiple partners.
- Females who had coital debut before age 15, experienced forced coitus or were cigarette smokers were 2 times less likely to have used a condom during last coitus.
- Males who experienced forced sexual intercourse were 2 times

less likely to use a condom during last coitus.

- Males who used cocaine in the previous month were almost 5 times less likely to use a condom for last coitus.
- No protective value of exposure to AIDS education in school and discussing AIDS with a health care provider was established.

### Implications for Prevention

The findings suggest that rural adolescents who initiate sexual intercourse at an early age are at markedly greater risk of engaging subsequent sexual risk behaviors. Further, substance use and a history of forced sex were also determinants of sexual risk taking.

Risk reduction programs should encourage the delay of sexual initiation and address the key roles of substance use and the psychological effects of sexual abuse.

SOURCE: Yarber, W. L., Milhausen, R. R., et al., (2002). Selected risk and protective factors associated with two or more lifetime sexual intercourse partners and non-condom use during last coitus among U.S. rural high school students. *American Journal of Health Education*, 33, 206-213.