

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. Vol. 7, No. 1, January 3, 2003

Lower social class, not race, associated with HIV risk behavior among women

Women of color are disproportionately represented among women with AIDS. African-American women and Latinas account for 58% and 20%, respectively, of all women with AIDS. A recent study suggested that the relative risk for AIDS is seven times greater for Latina women than for White women.

Empirical literature suggests that race and social class may influence sexual behaviors, that race and social class are associated with stress, and that stress and coping are related to sexual risk. Understanding HIV risk behaviors among women of color has been of particular concern.

This study examined the validity of a theoretical model that proposed that stress and coping mediated the relationships of race/ethnicity and social class to sexual risk behaviors.

Methodology

A diverse sample of women were recruited from four urban community-based public health clinics in New Haven, Connecticut. Participants were recruited from among women voluntarily seeking HIV counseling and testing (C&T) and a

comparison group of never-tested women.

Trained interviewers did five structured interviews at the clinic. The fourth interviews were conducted 12 months post-HIV C&T.

Outcomes of the Study

The mean age of participants was 31 years. 45% of the women were White, 33% African American, and 13% Latina. 47% completed 12 years of school or less. Median income was \$13,200. 75% earned \$22,000 or less. 60% reported having been diagnosed with an STD. 50% reported their sexual partners had possible or definite risk of HIV and 54% reported having unprotected sex within 1 month of interview.

Major findings include:

- Women with higher incomes were more likely to be in committed relationships with lower risk partners and they were more likely to participate in unprotected intercourse.
- Although race/ethnicity was associated with education and income, race/ethnicity was not significantly related to stress, active or passive coping, or any risk variables.
- Education was only related to active coping, and active coping

was not related to any additional variables.

- Women with lower income had higher stress, and those with higher stress had higher partner risk.
- Women with higher income were more likely to engage in passive coping strategies; however, neither passive nor active coping style was related to heterosexual risk variables.

Implications for Prevention

This study found that socioeconomic status, not race, demonstrated direct and indirect associations with HIV risk behavior. Women with lower income had higher levels of stress and riskier sexual partners.

Socioeconomic status may be a more important factor than race in predicting individual HIV risk behaviors and assumptions about race and social class must be empirically tested to understand these complex associations.

SOURCE: Ickovics, J. R., et al. (2002). Pathways of risk: Race, social class, stress, and coping as factors predicting heterosexual risk behaviors for HIV among women. *AIDS and Behavior*, 6, 339-350.

Young Asian and Pacific Islander gay men have high HIV risk

Little is known about the risk behavior of young Asian and Pacific Islander (API) men who have sex with men. Patterns and predictors of unprotected anal intercourse was studied among 253 API MSM aged 15-25 from gay-identified venues in Seattle, WA, and San Diego, CA.

33% reported unprotected anal intercourse in the past 3 months. Unprotected anal intercourse was associated with self-identifying as gay or bisexual, having multiple sexual partners, having sex with a steady partner, having been tested for HIV, and not perceiving peer norms supportive of safer sex. Young API MSM engaged in unprotected sexual behavior at high rates.

There is an urgent need to assist these men to reduce sexual risk behaviors by implementing HIV prevention programs that address the findings of this study, particularly the importance of establishing safer sex practices as peer norms.

SOURCE: Kyung-Hee, C., et al. (2002). Unprotected sex and associated risk factors among young Asian and Pacific Islander men who have sex with men. *AIDS Education and Prevention*, 14, 472-481.

Adolescents perceiving higher STD risk more likely to use condom

Empirical studies have often failed to demonstrate a consistent relationship between perceptions of higher risk for STDs and increased condom use among adolescents.

This study determined whether partner-specific measures of perception of risk for STDs (PRSTD) predicted partner-specific condom use 6 months later among high-risk and low-risk youth aged 14 to 19 years. They were interviewed at baseline and at 6 months about PRSTD and other condom-related variables.

Among adolescents attending an STD clinic, adolescents' perceptions of risk for STDs with a main sex partner predicted their subsequent condom use. Those adolescents who perceived themselves to be at higher risk for STDs if they have sex with a main sex partner without a condom were more than twice as likely to use a condom 6 months later than adolescents who perceived themselves to be a lower risk.

Interventions that target high-risk adolescents should focus on perception of risk for STDs with a main partner.

SOURCE: Ellen, J. M., et al. (2002). Adolescent condom use and perceptions of risk for sexually transmitted diseases. *Sexually Transmitted Diseases*, 29, 756-762.

HPV type 16 infection more common among women than men

Infection with human papillomavirus type 16 accounts for about one-half of cervical cancers worldwide. Among United States men and women aged 12-59, seroprevalence was higher for women (18%) than men (8%). Age, race/ethnicity, and number of lifetime sex partners were associated with HPV in women. Seropositivity was high even in women reporting one lifetime sex partner.

SOURCE: Stone, K. M., et al. (2002). Seroprevalence of human papillomavirus type 16 infection in the United States. *The Journal of Infectious Diseases*, 186, 1396-1402.

Syphilis among MSM accounts for rise

The number of primary and secondary syphilis cases increased slightly in 2001. The increase occurred only in men, with syphilis cases occurring among MSM accounting for the increase. Syphilis declined among women and non-Hispanic blacks.

SOURCE: Centers for Disease Control and Prevention. (2002). Primary and secondary syphilis -- United States, 2000-2001. *MMWR*, 51, 971-973.

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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