

# R A P\* 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. 10, October 3, 2003

## Alcohol use before sex may not decrease condom use among teens who drink

Sexually active adolescents do not consistently protect themselves from STD infection. Research reveals that about one-third of young teenagers use condoms in no more than one-half of their sexual encounters. Alcohol consumption has been considered a primary contributing factor impacting sexual risk behavior. However, research on the association of alcohol use and unprotected sex among adolescents has been mixed.

This study examined the extent to which the same adolescent used condoms depending on whether alcohol use had preceded specific sexual encounters.

### Methodology

Female and male adolescents were recruited in Seattle, Washington, in 1998 and 1999 through flyers posted in locations that teenagers frequent. Participants completed daily diaries about their health behaviors including alcohol use and sexual intercourse for eight weeks.

Study eligibility was limited to teenagers 14 to 19 years of age who were unmarried and not in a steady, exclusive relationship of longer than 6 months. Participants had to have used condoms in the

previous 12 months, and had to have consumed alcohol at least four times in the previous two months.

### Outcomes of the Study

The sample was comprised of 112 adolescents with a mean age of 17 years. 70% were female. Over one-half identified as white; 16% were black, 19% Hispanic and 11% mixed or other. Most were still in high school.

Major findings include:

- Rates of condom use did not differ between sexual events preceded by alcohol consumption (54%) and those not preceded by alcohol consumption (53%).
- The odds of condom use did not increase or decrease according to how much alcohol had been consumed before sex.
- Two-thirds reported drinking alcohol one to six times per week over the previous two months.
- Eight of ten reported three or more drinks per occasion, with one-third reporting five or more drinks per occasion.
- Half reported getting drunk several times a week.
- One-half reported sometimes drinking alcohol before having sex.
- Adolescents were almost four

times more likely to use a condom with a casual partner than with a steady partner when alcohol use preceded sex.

- Condoms were more likely to be used when sex was anticipated.
- Adolescents were less likely to use condoms if another form of birth control was used.
- 59% reported having sex more than once a week over the past two months with 1 in 11 reporting being paid for sex.
- Forty percent reported always or nearly always using condoms.

### Implications for Prevention

These results suggest that drinking alcohol may not be associated with condom non-use among adolescents. They also indicate that programs which increase adolescents' access to condoms and condom use skills may be beneficial for increasing safer sex behaviors. The inability to use contraceptive methods other than condoms to protect against STD should also be emphasized.

SOURCE: Morrison, D. M., et al. (2003). Adolescent drinking and sex: Findings from a daily diary study. *Perspectives on Sexual and Reproductive Health*, 35, 162-168.

### Over one-half did not return for HIV test results

HIV counseling and testing is currently the largest and most costly HIV prevention effort in the U.S. However, testing effectiveness depends on individuals returning to receive their testing results and undergo posttest counseling.

This study assessed the frequency and predictors of receiving HIV test results. Participants were 101 newly diagnosed HIV-positive persons and 411 HIV-negative persons.

55% (58% of HIV-positive) failed to return for their test results. Persons who failed to return were likely to be women, African American, and never married. Those with a history of drug use were unlikely to return. Those who came to the clinic with STD symptoms were less likely to return. Disease intervention specialists were able to locate 88% of those testing positive for HIV after a median of 12 days.

To maximize the benefit of testing and counseling, interventions should target those less likely to return for test results.

**SOURCE:** Hightow, L. B., et al. (2003). Failure to return for HIV posttest counseling in an STD clinic population. *AIDS Education and Prevention*, 15,282-290.

### Teens with lower social capital engage in greater sexual risk

Social capital comprises trust, reciprocity, cooperation, and supportive interaction within and among families, neighborhoods, and communities. Research suggests that social capital may be inversely related to the prevalence of STDs.

This study assessed the state-level association between social capital, poverty, income inequality, and adolescent sexual risk and protective behaviors using 1999 Youth Risk Behavior Survey data.

Lower social capital was associated (for both genders) with ever having had sex, sexual debut before age 13, sexual activity in previous 3 months, and for males only, reporting sex with at least four partners. Females with lower social capital were more likely to report ever being pregnant. Greater social capital was associated with birth control pill use. Social capital was not associated with condom use for either gender. Poverty was not related to any outcome measures.

Given that social capital may be amenable to change, this may be an important element in a broad STD/HIV prevention effort.

**SOURCE:** Crosby, R. A., et al. (2003). Social capital as a predictor of adolescents' sexual risk behavior: A state-level exploratory study. *AIDS and Behavior*, 7, 245-252.

### Chlamydia infection prevalent among female Army recruits

23,010 female U.S. Army recruits were tested for chlamydia between 1996 and 1999. Nearly 10% tested positive across all years. Black race, youth (under age 25), Southern home town, more than one sexual partner, and a history of other STDs were risk factors for infection. Most people are unaware of their chlamydia infection and do not seek testing.

**SOURCE:** Gaydos, C., et al. (2003). Sustained high prevalence of *Chlamydia trachomatis* in female Army recruits. *Sexually Transmitted Diseases*, 30,539-544.

### 25% of AIDS cases occur among IDUs

Of the 765,559 cumulative AIDS cases diagnosed at end of 2000, 193,527 (25%) occurred among injection-drug users. IDUs become infected through sharing injection-drug equipment with HIV-infected persons or by engaging in other risk behaviors such as unprotected sex. Since 1995, AIDS incidence among IDUs has declined.

**SOURCE:** Centers for Disease Control and Prevention. (2003). HIV diagnoses among injection-drug users in states with HIV surveillance -- 25 states, 1994-2000. *MMWR*, 52, 634-636.

**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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