

Heterosexually acquired HIV did not spread in rural area

Residents of the South account for an increasing proportion of HIV infection in the United States. A population-based survey of HIV infection in a rural Florida community was conducted in 1986 and in 1998-2000.

Prevalence of HIV in 1986 and 1998-2000 was 3.2% and 1.7%, respectively. Predictors of HIV infection in both 1986 and 1998-2000 were having a history of STD, large number of sex partners, and exchanging money or drugs for sex. A history of having sex with men was a risk factor in 1998-2000 but not in 1986. Residence in specific neighborhoods was a risk factor in 1998-2000 but not in 1986.

The authors conclude that heterosexually acquired HIV infection did not spread throughout the community between 1986 and 1998, but persisted at a low level in discrete neighborhoods.

Intervention programs targeting HIV-endemic neighborhoods are needed to further reduce HIV prevalence in this area.

SOURCE: Ellerbrock, T. V., et al. (2004). Human immunodeficiency virus infection in a rural community in the United States. *American Journal of Epidemiology*, 160, 582-588.

Youth living with HIV have greater risk behavior post HAART

The impact of HAART on HIV-related risk behavior has been conducted in some populations, but adolescents have been understudied. This study examined the HIV transmission behavior among youth living with HIV (YLH), pre- and post-HAART.

Two cohorts from Los Angeles, San Francisco, New York City and Miami were recruited: (1) 349 YLH during 1994 to 1996 and (2) 175 YLH during 1999 to 2000, after the wide availability of HAART. The groups did not include the same people, but the teens studied had similar demographic characteristics. Difference in sexual and substance-abuse risk behaviors and quality of life were examined.

Post-HAART YLH were more likely to engage in unprotected sex and substance use, to be more emotionally depressed, and to have lower quality of life than were pre-HAART YLH.

The researchers concluded that targeted interventions for YLH that address reductions in transmission behavior and aim to improve quality of life are still needed.

SOURCE: Lightfoot, M., et al. (2005). Risk behaviors of youth living with HIV: Pre- and post-HAART. *American Journal of Health Behavior*, 29, 162-171.

IDU men involved in sex trade have higher levels of HIV infection

Factors associated with sex trade work among injecting drug use men in a Canadian city were assessed. These men had higher levels of HIV infection. They were more likely to report high intensity cocaine use and elevated IDU-related behaviors including syringe borrowing. Many reported having sought but unable to access substance abuse treatment.

SOURCE: Kuyper, L. M., et al. (2004). Factors associated with sex trade involvement among male participants in a prospective study of injection drug users. *Sexually Transmitted Infections*, 80, 531-535.

Problematic alcohol use related to STD

Eleven studies of problem drinking and STD were reviewed. The research supports an overall association between problematic alcohol use and STD, though there are no differences by gender. However, the casual relationship between alcohol use and STD cannot be determined with certainty.

SOURCE: Cook, R. L. & Clark, D. B. (2005). Is there an association between alcohol consumption and sexually transmitted diseases? A systematic review. *Sexually Transmitted Diseases* 32, 156-164.

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

Senior Director

William L. Yarber, H.S.D.
Indiana University, Bloomington

Co-Directors

James G. Anderson, Ph.D.
Purdue University, West Lafayette
Janet N. Arno, M.D.
IU School of Medicine, Indianapolis
Stephen R. Byrn Ph.D.
Purdue University, West Lafayette
Susan I. Driesback, Ph.D.
University of Colorado, Denver
Mohammad R. Torabi, Ph.D.
Indiana University, Bloomington

Rural Center for AIDS/STD Prevention

Indiana University
801 East Seventh Street
Bloomington, Indiana
47405-3085

Phone, Fax, E-mail, web page:
Voice and TDD: (812) 855-1718
(800) 566-8644
FAX line: (812) 855-3717
aids@indiana.edu
<http://www.indiana.edu/~aids>

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One-quarter of HIV-positive people in close relationships report physical abuse

Domestic violence and abuse may affect mental and physical health. A large proportion of persons living with HIV may experience physical abuse in their close relationships. Physical abuse has been shown to facilitate sexual transmission of HIV.

Understanding the source of and factors related to violence among individuals with HIV and their partners is important to the development of effective interventions to reduce abuse. People infected with HIV may have unique risk factors for abuse, particularly men having sex with men and injection drug users.

The study identified factors associated with abuse, perpetration and victimization among persons living with HIV.

Methodology

Participants were drawn from a nationally representative sample of persons living in urban and rural areas in care for HIV who were part of the HIV Cost and Services Utilization Survey between 1996 and 1998. Subjects were interviewed in person using a computer-assisted instrument administered by the interviewer and also completed self-report

items related to sexual behavior and abuse.

A close relationship was defined as a spouse or primary relationship partner.

Outcomes of the Study

51% of the sample of 1,421 persons with HIV reported having a close relationship during a 6-month period. Over 75% were males and one-half were between the ages of 35 and 44 years old. Ethnic minorities represented half of the total sample. Over half were MSM.

Major findings include:

- Of individuals in close relationships, 27% reported experiencing abuse.
- In 48% of the cases, the abuse was mutual and abuse perpetration (20%) and victimization (20%) occurred equally often.
- Women were not different from MSM in their likelihood of being either victims or perpetrators of abuse.
- African Americans were more likely to report being both perpetrators and victims of abuse when compared with Whites.
- Younger individuals were more likely report being both perpetrators and victims of abuse.
- Binge drinkers, individuals

currently using drugs, and those with a psychiatric disorder were more likely to report being both perpetrators and victims of abuse.

- Persons with the highest CD4 counts were more likely to report being victims than those with lowest counts.
- People with partners who were HIV negative were less likely to report being victims.
- Persons being in relationships longer were more likely to report being perpetrators of abuse.

Implications for Prevention

The study findings suggest that abuse is a serious problem for many persons living with HIV who are in close relationships. Because persons living with HIV are already a vulnerable group, abuse has implications for further threatening psychological and physical health. Medical and other services providers should routinely inquire abuse issues in persons living with HIV.

SOURCE:

Galvan, F. H., et al. (2004). Abuse in the close relationships of people with HIV. *AIDS and Behavior*, 8, 441-451.