

RAP* Time



RURAL CENTER *for* AIDS/STD PREVENTION

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About 11% of men in the United States found to have concurrent sexual relationships

Concurrent sexual relationships (sexual partnerships that overlap in time) fosters faster dissemination of HIV/STI infection through a network than would the same number of new, sequential sexual partnerships. This is particularly true during acute HIV infection when transmission is greatest. A person infected with HIV by a sexual partner can transmit HIV without the delay involved in ending the first partnership and starting the second. Concurrent sexual partnerships could contribute to heterosexual HIV transmission. A 12% 5-year concurrency has been reported among women.

This study determined the prevalence, distribution, and correlates of U.S. men's involvement in concurrent sexual relationships.

Methodology

Sexual partnerships of the 4928 male respondents in the 2002 National Survey of Family Growth (NSFG) were analyzed. The NSFG was a national probability sample, representing the household population of persons aged 15 to 44 years in each of the 50 states and the District of

Columbia. The overall response rates was 78%.

Female interviewers administered the NSFG using computer-assisted and audio computer-assisted technology.

Outcomes of the Study

65% of men were non-Hispanic White, 17% were Hispanic, 12% were non-Hispanic Black, with 6% other.

Major findings include:

- About 11% of men had concurrent sexual relationships during the preceding year.
- Most concurrent sexual relationships involved only female partners.
- Among the 164 men with male sexual partners in the past year, 40 reported ever having had sexual intercourse with a woman.
- Concurrency was associated with being unmarried, non-Hispanic Black or Hispanic race/ethnicity, and incarceration in the past year.
- Men with concurrent sexual partnerships were more likely than those without concurrent sexual partnerships to report several risk factors, including drug or alcohol intoxication during sexual intercourse, non-monogamous female and male sexual partners and a

history of ever having had sexual intercourse with a man.

- Men with concurrent sexual partners were less likely to have used condoms during last sexual intercourse.
- The prevalence of multiple sexual partnerships varied by race/ethnicity: Non-Hispanic Blacks, 28%; Hispanic men, 18%; non-Hispanic Whites, 13%; men of other racial/ethnic groups, 9%.

Implications for Prevention

This study found that 11% of U.S. men had concurrent sexual partnerships during the 12 months of this NSFG.

The dense sexual networks and mixing between high-risk subpopulations and the general population may be major factors contributing to the U.S. epidemic of heterosexual HIV infection and continuing epidemic among non-Hispanic Black and Hispanic populations.

SOURCE:

Adaora, A. A., et al. (2007). Concurrent sexual partnerships among men in the United States. *American Journal of Public Health*, 97. doi: 10.2105/AJPH.2006.099069.

Many MSM reported problems with condom fit and feel

Problems with condom fit and feel may reduce consistent use by men. This study examined experiences with condom fit and feel among African-American men. 178 MSM completed a questionnaire during the "Black Gay Pride" event in Atlanta, GA in 2006.

Most reported that condoms generally fit well and feel comfortable. 21% reported that condoms felt too tight, 18% too short, 10% too loose, and 7% reported that condoms felt too long. Significant associations were found between men's reports of condom breakage and slippage, and their perceptions of condom fit and feel. Further, perceptions of condom fit and feel were related to men's reports of seeking condoms for their size-specific properties.

The fit and feel problems experienced by the men of this sample may be among those that contribute to their likelihood of using, or not using condoms consistently and correctly.

SOURCE: Reece, M. et al. (2007). Experiences of condom fit and feel among African-American men who have sex with men. *Sexually Transmitted Infections*, 83, 454-457.

Bacterial vaginosis found common in women, ages 14-49

Bacterial vaginosis (BV) is a disturbance of vaginal microflora and a common cause of vaginal symptoms. BV is associated with increased risk for HIV/STI and adverse pregnancy outcomes.

A self-collected vaginal swab was secured from women aged 14-49 years who participated in the National Health and Nutrition Examination Survey, 2001-2004.

The prevalence of BV was 29%; only 16% reported vaginal symptoms. Prevalence was 51% among non-Hispanic Blacks, 32% among Mexican Americans, and 23% among non-Hispanic whites.

BV was positively associated with race/ethnicity, increasing lifetime sex partners, increasing douching frequency, low education attainment, and inversely associated with current use of oral contraceptive pills.

BV was found to be a common condition, but the vast majority do not report symptoms. Because BV increases the risk of acquiring STIs, BV could contribute to racial disparities in these infections.

SOURCE: Koumans, E. H., et al. (2007). The prevalence of bacterial vaginosis in the United States, 2001-2004; Associations with symptoms, sexual behaviors, and reproductive health. *Sexually Transmitted Diseases*, 34, 864-869.

HPV DNA test helps detect lesions earlier than Pap smear

A 5-year study of 17,000 Dutch women (ages 29-56) found that the human papillomavirus DNA test helps discover potentially dangerous lesions earlier than the Pap smear procedure. HPV causes most cases of cervical cancer. The researchers concluded that the findings could lead to fewer screenings for women and earlier treatment of precancerous lesions.

SOURCE: Bulkman, N. W. J., et al. (2007). Human papillomavirus DNA testing for the detection of cervical intraepithelial neoplasia grade 3 and cancer: 5-year follow-up of a randomized controlled implementation trial. *Lancet*, doi: 10.1016/S140-736(07)61450-0.

9% of U.S. TB patients are infected with HIV

The rates of HIV among U.S. tuberculosis patients is 9%. Groups greater include IDUs (35%), NIDUs (27%), homeless persons (22%), non-Hispanic blacks (17%), prison inmates (16%), persons aged 24-44 (16%) years, alcohol abusers (15%), and males (11%).

SOURCE: CDC. (2007). Reported HIV status of tuberculosis patients -- United States, 1993-2005. *MMWR*, 56, 1003-1106.

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

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