

# R A P\* Time



## RURAL CENTER *for* AIDS/STD PREVENTION

A JOINT PROJECT OF  
INDIANA UNIVERSITY, UNIVERSITY OF COLORADO,  
AND UNIVERSITY OF KENTUCKY

\*Rural AIDS/STD prevention. rap (rap) v. *Slang*. To talk freely and openly. Vol. 12, No. 1, January 4, 2008

## Rural youth using substances reported greater STD/HIV-related sexual risk behavior

Among 15-24 year olds, HIV rates continue to rise and STD rates remain higher for this age group than any other. HIV/AIDS has spread to rural America with outbreaks of HIV infection occurring among rural adolescents. Substance use is a contributing factor to sexual risk behavior. In particular, rural adolescents are experiencing greater problems related to substance abuse and STD/HIV.

This study examined the relationship between substance use -- including alcohol, marijuana, cigarettes and cocaine -- and unprotected sex and multiple recent sexual partners among sexually active rural youth.

### Methodology

Participants included 9th - 12th grade rural adolescents (N=5,745) who completed the 2003 national Youth Risk Behavior Survey.

The independent variables were six substance use behaviors: (1) cigarettes smoked in past 30 days; (2) lifetime marijuana use; (3) alcohol consumed in past 30 days; (4) consecutive days of alcohol use in past 30 days; (5) lifetime cocaine use; and (6) alcohol or drug use before sexual intercourse. The

dependent variables were unprotected sex (non-condom use) and the number of recent sex partners.

### Outcomes of the Study

48% was female, with 35% white, 26% black, 25% Hispanic and 14% other ethnic groups. Mean age was 16 years. 33% were in 9th grade, 26% in 10th grade, 22% in 11th grade, and 19% in 12th grade.

Major findings include:

- Among the 2181 sexually active adolescents (38% of total participants), 71% reported having a single sexual partner in past three months, 30% reported multiple sexual partners in past three months, and 32% reported not using a condom during their last sexual intercourse.
- Adolescents reporting alcohol or drug use prior last sexual intercourse, smoking three or more days during past 30 days and ever using marijuana, were more likely not to use condoms during last sexual intercourse.
- Adolescents reporting ever using cocaine, drinking alcohol three or more days in the past 30 days, and binge drinking in the past 30 days were more likely not to use condoms during last coitus.
- Adolescents reporting alcohol or

drug use prior last coitus and smoking three or more days during the past 30 days were more likely to have multiple sexual partners..

- Adolescents reporting ever using marijuana, ever using cocaine, drinking alcohol in past 30 days, and binge drinking in past 30 days were more likely to have multiple sexual partners.

### Implications for Prevention

This analysis of a national sample of rural youth found that substance use was significantly associated with unprotected (non-condom use) sexual behaviors and with having multiple sexual partners.

Given the fewer AIDS cases reported in rural areas, many community leaders may not recognize the seriousness of the STD/HIV among rural residents. This study highlights the need to provide effective STD/HIV prevention education to rural youth, particularly in schools.

### SOURCE:

Yan, A. F., et al. (2007). STD-/HIV-related sexual risk behaviors and substance use among U.S. rural adolescents. *Journal of the National Medical Association*, 12, 1386-1394.

## College students expressed concerns about condom use

Few studies have qualitatively examined condom use. This study examined problems of male condom use experienced by college men and women. Single-sex focus groups were conducted, two involving men (n=9, n=9) and two involving women (n=7, n=13). Eight research questions guided the discussion.

Six categories of problems and errors were identified: availability and provision of condoms, condom application, "fit and feel" of condom use, erection problems, incomplete use, and breakage of slippage. Participants expressed concerns, including mistrust of each gender in supplying and applying condoms, inadequate lubrication during condom use, condoms partially or fully slipping off, "losing" part or all of the condom in the vagina, delayed applications, and reduced sensation and irritation.

Greater attention to correct condom use and sexual relationship dynamics related to condom use is needed for college students.

SOURCE: Yarber, W., et al. (2007). 'Do you know what you're doing?' College students' experiences with male condoms. *American Journal of Health Education*, 38, 322-330.

## Being circumcised found not protective against HIV infection

Recent studies in Africa found a HIV protective effect of circumcision. This study examined characteristics of circumcised Latino and black men who have sex with (MSM) in the U.S. and to assess the association between circumcision and HIV infection.

Participants were 1154 black MSM and 1091 Latino MSM from three large U.S. cities.

The prevalence of circumcision was greater among black MSM (74%) than among Latino MSM (33%). Circumcision status was not associated with prevalent HIV infection among Latino MSM, black MSM, black bisexual men, or black or Latino men who reported being HIV-negative based on their last HIV test. Also, circumcision was not associated with a reduced likelihood of HIV infection among men who had engaged in unprotected insertive and not unprotected receptive anal sex.

This study failed to establish that being circumcised was protective against HIV infection among black MSM or Latino MSM.

SOURCE: Millet, G. A., et al. (2007). Circumcision status and HIV infection among Black and Latino men who have sex with men in 3 US cities. *Journal of Acquired Immune Deficiency Syndromes*, 46, 643-650.

## High-risk HPV infection is more common among poor women

Women aged 14-59 years (n=1,921) of the 2003-2004 National Health and Nutrition Examination Study was tested for 37 HPV types. High-risk HPV infection was present in 15.6% of participants. Women living below the poverty line, compared with those living three or more times above it, were more likely to be positive for high-risk HPV (23% vs. 12%). Cervical cancer prevention must target all low-income women.

SOURCE: Kahn, J. A., et al. (2007). Sociodemographic factors associated with high-risk human papillomavirus infection. *Obstetrics and Gynecology*, 110, 87-95.

## Neonatal HSV reportable in nine states

A national assessment found that neonatal herpes was a reportable condition in nine states from 2000-2005: CT, MA, FL, OH, NE, LA, SD, DE, and WA. Inconsistency was found in the surveillance case definition and specific form for reporting neonatal herpes.

SOURCE: Dinh, T., et al. (2008). Assessing neonatal herpes reporting in the United States, 2000-2005. *Sexually Transmitted Diseases*, 35, 19-21.

**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, University of Colorado, and University of Kentucky. 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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