

RAP* Time



RURAL CENTER *for* AIDS/STD PREVENTION

A JOINT PROJECT OF
INDIANA UNIVERSITY, UNIVERSITY OF COLORADO,
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*Rural AIDS/STD prevention. rap (rap) v. *Slang*. To talk freely and openly

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Heterosexual anal sex among teens and young adults found related to HIV/STD risk

Receptive unprotected anal intercourse has greater risk for HIV transmission than unprotected vaginal intercourse. Research has shown that the rate of anal sex has doubled from 1995 to 2004 for adults age 18 to 30. The NSFG found the lifetime prevalence of heterosexual anal intercourse to be 35% among women and 40% among men. Many adolescents have participated in anal intercourse, and the prevalence increases with age. Research indicates that anal intercourse among adolescents and young adults is often unprotected. Little research exists that examines factors related to anal intercourse among young people.

This study determined what factors are associated with anal intercourse among adolescents and young adults.

Methodology

Participants were from the SHIELD HIV prevention project of persons aged 15 to 21 conducted in 1998 to 2002 in 3 US cities: Atlanta, GA, Providence, RI, and Miami, FL. Inclusion criteria included reporting unprotected vaginal or anal intercourse in past 90 days. Audio-CASI was used to

assess sexual risk behaviors, relationship context, sexual risk attitudes, substance abuse and mental health.

Outcomes of the Study

56% of the 1386 participants were female. Mean age was 18 years. 51% self-identified as Black, 24% Hispanic, and 20% White. 92% self-identified as heterosexual.

Major findings include:

- 16% (n=220) reported engaging in anal intercourse in past 90 days with the mean episodes being 3.4 for females and 4.8 for males.
- Anal intercourse was related to multiple sex partners.
- Participants who identified as non-heterosexual were more likely to engage in anal intercourse.
- Using drugs during sexual intercourse and believing drugs improve sexual experiences were related to anal intercourse.
- Those who felt that using condoms decreased pleasure of sex engaged in riskier behaviors.
- Age was not related to engaging in anal intercourse.
- For women, those reporting having had forced sex and living with a partner were more likely to have engaged in anal intercourse.
- For men, those reporting having had sex with a sex trader were

more likely to have engaged in anal intercourse.

- Women who engaged in anal intercourse used condoms during vaginal intercourse only half as often as those not having anal intercourse.
- For both genders, those having anal sex had a higher proportion of respondents who had attempted suicide.

Implications for Prevention

This study found the lifetime anal intercourse prevalence of 16% for this sample of at-risk adolescents and young adults. Non-heterosexual orientation, multiple sex partners, and drug use during sex were important factors related to anal intercourse. For women, having forced sex and living with partner were related to anal sex.

Interventions should focus on the common and different factors related to anal intercourse for both genders.

SOURCE:

Lescano, C. M., et al. (2009). Correlates of heterosexual anal intercourse among at-risk adolescents and young adults. *American Journal of Public Health*, 99, 1131-1136.

Male condoms found to offer partial protection against HSV-2

Numerous studies indicate that consistent male condom use reduces HIV transmission. Strong data support condom effectiveness in preventing STIs that target urethral and cervical epithelia, such as chlamydia and gonorrhea. But, the effectiveness of condoms in preventing HSV-2 acquisition is less certain.

Researchers identified studies with individual-level condom data and laboratory-defined HSV-2. Effect of condom use was modeled using a continuous percentage of sex episodes during which a condom was used and not used.

A total of 5385 HSV-2 negative people at baseline contributed to 2,040,894 follow-up days; 415 persons acquired HSV-2. Consistent condom users (used 100% of the time) had a 30% lower risk of HSV-2 acquisition compared to those who never used condoms. Hence, condoms offered moderate protection against HSV-2 in men and women, but not as large as observed for other STIs.

SOURCE: Martin, E. T., et al. (2009). A pooled analysis of the effect of condoms in preventing HSV-2 acquisition. *Archives of Internal Medicine*, 169, 1233-1240.

Many bridged demographic groups in their sex partnerships

The spread of STIs within a population is not random. Highly connected persons with many short-duration partnerships (“core group”) are important for maintaining transmission. Sexual contact networks are an important way to describe the structure of contact between sex partners in a population and the spread of STIs.

This study assessed how often persons bridge demographic groups in their sex partnerships. For the study, a “bridger” is a person whose two most recent sex partners differed by demographic grouping (e.g. age group, socioeconomic status, racial group, spatial separation of residences, and gender).

Of 1013 participants who described their 2 most recent sexual partnerships, 74% were classified as a bridge of some type. Education bridges were most prevalent (46%), followed by spatial (34%), age (29%), and gender bridges (3%).

The study revealed that there are multiple potential paths for STI infection flow.

SOURCE: Spicknall, I. H., et al. (2009). Sexual networks are diverse and complex: Prevalence of relationships bridging population subgroups in the Seattle Sex Survey. *Sexually Transmitted Diseases*, 36, 465-472.

AIDS death rate for U.S. women has plateaued recently

From 1995 through 2004, 710 of 2792 HIV-infected U.S. women died, from a ratio of 24.7 in 1996 to 10.3 in 2004. Over the decade, deaths from non-AIDS causes (trauma or overdose, liver disease, cardiovascular diseases, and malignancy) increased and accounted for most deaths.

SOURCE: French, A. L., et al. (2009). Trends in mortality and causes of death among women with HIV in the United States: A 10-year study. *Journal of Acquired Immune Deficiency Syndromes*, 51, 399-406.

HPV-related cancers higher for HIV patients

Data on 499,230 persons diagnosed with AIDS from 1980 through 2004 were linked with cancer registries in 15 U.S. regions. Cancers of the anus, cervix, oropharynx, penis, vagina, and vulva were significantly higher among persons with AIDS than among the general population.

SOURCE: Chaturvedi, A. K., et al. (2009). Risk of human papillomavirus-associated cancers among persons with AIDS. *Journal of the National Cancer Institute*, 16, 1120-1130.

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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