Not using condoms employed as strategy to help establish a serious, loving relationship

Research has found that condoms are less likely to be used in primary sexual relationships than other relationship types. Several factors, such as gender inequity and power differential, levels of perceived risk, and less closeness and pleasure, are associated with whether couples use condoms.

Other studies have established that emotional needs may be hampered by condom use by interfering with relationship ideals of intimacy, trust and fidelity. Determining what women and men expect when entering into relationships including their decisions about condom use can be valuable to HIV control efforts.

This study explored reasons cited for condom use and nonuse and strategies used to reduce HIV risk among primary, heterosexual couples.

**Methodology**

Data were collected as part of a sexuality-related study conducted in Harford in 2004-2007. Qualitative interviews were conducted with 25 high-risk heterosexual couples, including HIV-serodiscordant couples.

Any partner reporting STI symptoms or testing positive with urine screening for chlamydia or gonorrhea was excluded from this study component.

**Outcomes of the Study**

Most participants were nonwhite and poor with low education levels. Nearly half had a drug abuse history. Major findings include:

- Both men and women talked about “taking a chance on love.” Nonuse of condoms was a strategy to help establish a potentially serious, as opposed to casual, relationship.
- Some participants talked about having spent years searching for a soul mate and having found one in their current partner.
- For many, the first sexual encounter was not just about sex, but also establishing trust. Not using condoms was evidence that the partner had been honest about sexual past and disease status.
- Many believed that condoms are appropriate for casual and “sex only” encounters but not needed for primary, serious relationships.
- Doubts about a partner’s exclusiveness did not typically lead to confrontation or insistence on condom use.
- Along with reduced physical pleasure, several associated condom use with reduced emotional and physical intimacy.
- Balancing the desire and need for physical intimacy and protecting oneself or one’s partner was very difficult for serodiscordant couples.
- Some expressed “condom fatigue”, or the frustration of reduced pleasure each time.
- Some negotiated safety to assess and reduce risk at beginning of relationship, but the strategies were not used consistently.

**Implications for Prevention**

This study found that for many of the couples the emotional needs that are fulfilled in an intimate relationship may have superceded concerns for personal safety, leaving them unwilling to risk losing their partner and relationship that might occur with condom use.

HIV prevention should account for love and other needs that primary relationships satisfy to be relevant to those of greatest need.

**SOURCE:**

Adolescent depression found related to STI risk

This study measured associations among depression, sexual risk behaviors, and STI among white and black youth in the U.S. Data were from the National Longitudinal Study of Adolescent Health involving students in grades 7-12.

Chronic or recent depression was more common for blacks (women, 19%; men, 12%) than for whites (women, 13%; men, 8%). White and black youth with recent or chronic depression were more likely to have numerous sex partners than those with no depression. In black male adolescents, depression was associated with 2 to 3 times the prevalence of STI.

In all groups, associations between depression and STI-related behaviors and infection remained when adjusted for demographic, socioeconomic and adolescent STI risk and substance abuse variables.

Combining mental health and STI prevention education for youth is warranted.


Lower acculturation related to less HIV testing in Hispanics

Hispanics comprise 14% of the U.S. population in 2006, yet account for 22% of new HIV/AIDS cases. This study examined the relationship of acculturation with HIV and hepatitis testing, and care access among an at-risk Hispanic population.

Participants were 600 Hispanics from STD clinics, local organizations, and needle exchange programs in Los Angeles County.

71% reported having had two or more HIV tests and 37% reported being tested for hepatitis C. Low levels of acculturation were significantly related with having fewer HIV tests, never getting tested for hepatitis C, testing negative for hepatitis C and non-injection drug use. Higher levels of acculturation were significantly associated with higher levels of access to care.

This study found lower levels of acculturation to be an important barrier to use of HIV-related health care such as HIV testing. Effective interventions that address the cultural and behavioral differences among Hispanics are needed.


HAART decreased suicide rate in Swiss AIDS patients

From 1988 to 2008, 15,275 Switzerland AIDS patients were followed; 150 died by suicide. In men, suicide rates declined from 13.7 in the pre-HAART era to 3.5 in the late HAART era. For women, ratios declined from 11.6 to 5.7. In both periods, higher suicide rates were found in older patients, in men, in injecting drugs users, and those with advanced stage of HIV illness.


HIV resurgence found for young MSM

Young men who have sex with men (YMSM) accounted for 54% of the 18,619 HIV/AIDS cases among US youth in 33 states between 2003 and 2006. YMSM have incidence rates about 10 times higher than in the overall MSM community.