Some sexual minority women at greater STD risk than are heterosexual women

STD are a major health problem in the United States with about 19 million new cases each year. Young adults aged 25-34 years are an often-overlooked risk group for STDs.

Understanding STD risk among young adult women aged 25-34 years is particularly important. Many women become pregnant during this stage of life. STDs transmitted during pregnancy or childbirth threatens not only the health of young adult women and their partners, but the health of their child as well.

Sexual minority women have historically not been adequately assessed by national surveillance systems and few studies have assessed STD risk among young adult women.

This study examined, using a nationally representative sample of young adult women, the association between sexual orientation and STD diagnosis in the past year.

Methodology
Data from the Wave 4 (years 2007-2008) National Longitudinal Study of Adolescent Health on 7,296 females aged 24-32 were used. Sexual orientation was measured by self-reported sexual identity and by gender of sex partners. Participants were considered to have an STD if they were told by a health care professional in the last year that they had any of 13 specified STD or another STD.

Outcomes of the Study
Major findings include:
- 80% of women considered themselves straight; 16% mostly straight; and 4% bisexual, mostly gay or gay.
- 85% had had only male partners, while 7% had had one female partner, and 8% two or more female partners.
- Women who identified themselves as mostly straight were more likely than straight-identified women to have had an STD; mostly gay or gay women were at lower risk.
- An STD diagnosis in the past year was reported by 18-19% of mostly straight and bisexual women, 12% of straight women and 7% of mostly gay or gay women.
- Women who had had two or more female sexual partners had a higher STD risk than did women who had had only male sexual partners.
- Social and demographic characteristics did not substantially alter the findings.
- Women who had had 1-5 sex partners were less likely than those who had had 10 or more sex partners to report an STD diagnosis.
- Women who had not engaged in anal sex had reduced odds of an STD diagnosis.

Implications for Prevention
This study found that some subpopulations of sexual minority women are at greater risk for STDs than are heterosexual women or women who have sex only with women. Similar results have been found in other nationally representative samples.

Sexual identity, gender of sex partners and sexual behaviors should be considered in assessments of women’s STD risk. Having both male and female sex partners may serve as a marker for STD risk behaviors among young adult women.

SOURCE:
MSM who attend sex parties had high risk for STD transmission

This study compared selected sexual behaviors on men who had attended a sex party last year, men who had been to a sex party more than a year ago, and men who had never been to one.

In 2012, 2,063 sexually active MSM in the USA were recruited on a sexual networking website. A significantly greater proportion of last year attendees were HIV-positive (28%), single (32%), demonstrated sexual compulsivity (39%), recently used drugs (68%), averaged the greatest number of recent male partners (Mdn=15, <90 days), and had greater instances of recent unprotected anal intercourse (UAI) with male partners (median=3, <90 days).

Free lubricant (94%) and condoms (81%) were the most desired services/products.

Men who attend sex parties are in need for targeted HIV/STD prevention. Collaborating with sex party promoters to provide condoms, lubricant and HIV/STD testing would be desirable.

SOURCE: Grov, C., et al. (2014). Characteristics of men who have sex with men (MSM) who attend sex parties: Results from a national online sample in the USA. Sexually Transmitted Infections, 90, 26-32.

HPV vaccination did not lead to risker sexual behaviors

Concern has been made that human papillomavirus (HPV) vaccination could lead to risker behaviors in adolescents. This study assessed whether adolescent risk perceptions after the first vaccine dose predicted subsequent sexual behaviors.

Young women 13 to 21 years of age (N=330) completed questionnaires after HPV vaccination.

Among all sexually inexperienced participants (42.5%), base-line risk perceptions were not associated with subsequent sexual initiation. Girls 16 to 21 years of age who reported lower perceived risk for other STI were less likely to initiate sex. Among all sexually experienced participants (57.5%), baseline risk perceptions were not associated with subsequent number of sexual partners or condom use.

Risk perceptions following HPV vaccination were not associated with subsequent riskier sexual behavior among both groups.

The researchers noted that these data contribute to the growing evidence that HPV vaccination does not lead to changes in sexual behaviors among adolescents.


Use of dual contraception methods low among young adults

Data from the 2006-2010 NSFG found that at last sex 20.7% of adolescents and young women used condoms with hormonal contraception or an IUD. Those who may have higher risk of pregnancy and STI were less likely to use dual methods at last sex. Having prior pregnancy and having sex before the age 16 was associated with decrease dual method use.


African Americans most affected by HIV

African Americans account for 44% of all new HIV infections among adults and adolescents yet represent only 12% of the population. This represents a population rate that is 8 times that of whites overall. Gay and bisexual men account for most new infections among African Americans.


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