

RAP* Time



RURAL CENTER *for* AIDS/STD PREVENTION

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

*Rural AIDS/STD prevention. rap (rap) v. *Slang*. To talk freely and openly

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Sexual behavior changed with successive cohorts, with more changes among females

Evaluating sexual behavior patterns can increase greater understanding of the epidemiology of sexually transmitted infections and their sequelae and inform public health actions to improve sexual health. No previous studies have examined sexual behaviors by birth cohort among both female and male persons in the United States.

Analyzing differences in sexual behavior by cohort can provide information for evaluating the cumulative risk of lifelong STI, such as herpes simplex virus and hepatitis B and sequelae of other STIs such as cervical cancer and human papillomavirus. Such analysis can determine any historical and recent changes in sexual norms and behavior among U.S. adolescents and young adults.

STIs affect persons of all ages, but particularly teens and those in their early 20s. Data of their sexual behavior patterns can inform the development of efficacious interventions.

Methodology

Using NHANES sexual behavior data from 1999 to 2012, two analysis were performed: (1) trend analysis among adults aged 25 to 59 years by 10-year birth cohorts,

and (2) descriptive analyses among participants aged 14 to 24 years. Sex defined as vaginal, anal or oral sex. The National Health and Examination (NHANES) is an ongoing probability sample survey of the U.S. population.

Outcomes of the Study

Major findings include:

- Among persons 25-59 ages, median age at sexual initiation decreased between 1940-1949 and 1980-1989 cohorts from age 17.9 to age 16.2 among females and age 17.1 to age 16.1 among males.
- Median lifetime partners increased between 1940-1949 and 1970-1979 cohorts from 2.6 to 5.3 among females and 6.7 to 8.8 among males.
- The percentage of females reporting ever having a same-sex partner increased from 5.2% to 9.3% between 1940-1949 and 1970-1979 cohorts.
- Among persons aged 14 to 24 years, the percent having had sex increased with age, from 12.4% among females and 13.1% among males at age 14 to more than 75% at age 19 for both sexes.
- Among sexually experienced 14 to 19-year olds, 45% of females

and 55% of males had at least 2 partners in the past year.

- The proportion of females aged 20 to 24 years who reported ever having a same-sex partner was 14%.
- The proportion of participants aged 14-19 or 20-24 years ever having sex did not differ by survey year from 1999 to 2012 for either males or females.

Implications for Prevention

This study found that sexual behaviors changed with successive birth cohorts, with more pronounced changes among females.

The trends shown are similar to those found in other high-income countries such as United Kingdom, France, and Sweden. In these countries, the number of lifetime sexual partners increased while age of sexual initiation decreased among later birth cohorts. Also, the changes were greater for females than males.

SOURCE:

Liu, G. L., et al. (2015). Trends and patterns of sexual behaviors among adolescents and adults aged 14 to 59 years, United States. *Sexually Transmitted Infections*, 42, 20-26.

Nearly half of young men refused condom use after request

The study investigated pleasure-related, partner-related, and social normative correlates of recent condom refusal in young Black men (YBM). Participants were 561 YBM attending STI clinics in three cities. Mean age was 19.6 years.

Nearly one of every two young men (47%) indicated recent refusal to use a condom after a request from their sexual partner. There was no difference between YBM who refused to use a condom and men who did not refuse to use a condom for age, highest education level, income, previous knowledge of condom use skills, and being previously tested for HIV infection and STI status.

Men who rejected a partner's request were in agreement with the following two statements: "I feel closer to my partner without a condom," (two times more likely to refuse) and "condoms make sex hurt for their female partner" (70% more likely to refuse).

SOURCE: Geter, A., et al. (2014). Condom refusal and young black men: The influence of pleasure, sexual partners, and friends. *Journal of Urban Health*, 91, doi.10.1007/s115224-014-9869-4.

Rates of condom use low among Canadian college students

Young Canadian university-age persons are highly sexually active compared to other age groups and are at a relatively high risk for STIs. This study assessed the prevalence and individual predictors of condom use at last penile vaginal intercourse (PVI) of a national sample of 653 Canadian students (252 male, 401 female).

Less than half (55% men, 42% women) reported condom use at last PVI. For both men and women, the most frequently cited reason for having used a condom was birth control. The strongest predictor of condom use was that condoms were their preferred method of contraception.

Female students who reported that their most recent sexual encounter occurred with a more committed partner had slightly lower odds of reporting condom use at their last PVI.

The study suggests that interventions that raise awareness of STIs and improve attitudes and skills are needed on Canadian college campuses.

SOURCE: Milhausen R, R, et. al. (2015). Prevalence and predictors of condom use in a national sample of Canadian college students. *Canadian Journal of Human Sexuality*, 22, 142-151.

70% of HIV+ persons had not achieved viral suppression

Analysis of 2011 data from National HIV Surveillance System and the Medical Monitoring Project estimated 1.2 million persons were living with HIV infection in the United States, an estimated 86% were diagnosed with HIV, 40% were engaged in HIV medical care, 37% were prescribed ART, but an estimated 839,336 (70%) had not achieved viral suppression. Improvements are needed across the HIV care continuum to protect the health of persons living with HIV, to reduce HIV transmission, and to reach national prevention goals.

SOURCE: CDC. (2014). Vital signs: HIV diagnosis, care, and treatment among persons living with HIV--United States, 2011. *MMWR*, 63, 1113-1117.

1 in 5 HIV+ Asians not diagnosed

HIV diagnosis among the Asian persons in the U.S. has increased along with increased Asian U. S. population. More than 1 in 5 Asians living with HIV do not know they have HIV. Among Asians, gay and bisexual men are most affected by HIV.

SOURCE: CDC. (2015). HIV infection among Asians in the United States. Atlanta, GA

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 Arizona, 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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