

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

Vol. 19, No. 9, September, 2015

Sexual concurrency among rural AA women associated with IPV and forced sex

Nearly two-thirds (64%) of U.S. women diagnosed with HIV in 2010 were African American. Most (84%) acquired HIV from heterosexual contact.

Concurrent sexual partnerships (partnerships that overlap over time) can accelerate the spread of HIV infection. Individuals with concurrent partners are thought to have no greater risk for acquiring HIV than those having multiple consecutive partnerships. However, a person whose partner has concurrent relationships has increased risk for STI. An individual's concurrency has been studied but research on their partner's concurrency is limited.

This study examined relationships characterized by partner's sexual concurrency among African American women.

Methodology

Participants were 1013 African American women from 2 rural counties in each of northeastern Alabama and eastern North Carolina who reported having vaginal or anal intercourse with a man in the past 12 months.

For the participant and her most recent partnership, characteristics of the partnership including

frequency of sex, frequency of condom use, and whether gifts/money were received from the partner were assessed.

Outcomes of the Study

Median age was 33 and 56% were single, never married. Half reported household income of \$12,000 or less per year.

Major findings include:

- 24% of women had concurrent partnerships. Increased concurrency was found among illicit drug users, binge alcohol users, and those whom had experienced intimate partner violence (IPV) or forced sexual contact in past twelve months.
- 20% of women reported that their partner "definitely did" have other partners. Women ever having experienced IPV and forced sex was related to partner's concurrency.
- 51% of women in partnerships in which their only partner was involved in concurrency reported never using condoms.
- Women with a partner involved in concurrency were more likely to receive a place to live but also reported getting nothing else from their partners.
- Women in partnerships in which

both were involved in concurrent partnerships were least likely to report receiving money, food/things for the house, clothing/gifts, and help with the bills.

- Women with partners involved in concurrency did not receive more economic benefit than whose partners were exclusive.
- Receipt of drugs was uncommon among all groups.

Implications for Prevention

This study found significant relationships between history of intimate partner violence and forced sexual contact with partner's concurrency. Only half of women with partner involved in concurrency used condoms.

The findings suggest that rural women with similar experiences found in this study would benefit from interventions designed to reduce partner's concurrency.

SOURCE:

Ludema, C., et al. (2015). Characteristics of African American women and their partners with perceived concurrent partnerships in 4 rural counties in Southeastern US. *Sexually Transmitted Diseases*, 42, 498-504.

No new HIV found among MSM PrEP users

In July 2012, the FDA approved the use of daily oral Truvada as a HIV pre-exposure prophylaxis (PrEP). This study assessed PrEP use among members of the Kaiser Permanente Medical Center in San Francisco.

Since 2012, referrals and initiation of PrEP for prevention of HIV increased dramatically in a large clinic practice. None of the 600 men who have sex with men taking PrEP had contracted HIV during the study period. Many of the individuals are utilizing condoms less frequently since beginning PrEP. Within a year, one-half of men acquired at least one STD.

Persons at higher risk for HIV were more likely to initiate PrEP after their first consultation. Acceptance of PrEP has increased in the San Francisco MSM community. Outreach is needed for other groups at risk for HIV including transgendered women, heterosexual men and women, and injection drug users.

SOURCE: Volk, J. E, et al. (2015, September). No new HIV infections with increasing use of HIV preexposure prophylaxis in a clinical practice setting. *Clinical Infectious Diseases*. doi.org/10.1093/cid/civ778.

Substance abuse associated with sexual risk among teens

This investigation examined the risk for engaging in high-risk sexual behavior associated with substance use in U.S. teenagers. A national sample of 15,425 adolescents, grades 9-12, was obtained from the Youth Risk Behavior Surveillance System.

Substance abuse was significantly associated with sexual risk behavior. "Having ever used," age at first use, use within previous 30 days, days used, daily use, and use within lifetime were associated with ever having sexual intercourse, younger age of sexual debut, greater number of lifetime and recent partners within prior three months, not using condoms at last sexual intercourse, using substances prior to engaging in sexual intercourse, and being tested for HIV.

The greatest risk was for adolescents who used cigarettes and illicit substances, and those who engaged in injection drug use.

The findings highlight the need for interventions targeting sexual risk behaviors in substance-using adolescents as one means of reducing STI transmission.

SOURCE: Thamocharan, S, et al. (2015). An examination of sexual risk behaviors in adolescent substance users. *International Journal of Sexual Health*, 27, 106-124.

5% of patients with gonorrhea reported receiving EPT

Data from seven U.S. jurisdictions estimated expedited partner therapy (EPT). Overall, 5.4% of patients diagnosed and reported as having gonorrhea reported receiving EPT to treat their sexual partners. Heterosexual partners were more likely to have received EPT than men who have sex with men. No difference was found for race, Hispanic ethnicity, or age.

SOURCE: Stenger, M. R., et al. (2015). Patient-reported expedited partner therapy for gonorrhea in the United States: Findings of the STD Surveillance Network 2010-2012. *Sexually Transmitted Diseases*, 42, 470-474.

7% of people have oral HPV

About 7% of U.S. people have oral HPV. 1% have the type of oral HPV that is found in oropharyngeal cancers (HPV type 16). Oral HPV is three times more common in men than women. Yearly, about 9,000 people are diagnosed with cancers of the oropharynx that may be caused by HPV

SOURCE: CDC. (2015). HPV and oropharyngeal cancer - Fact sheet. 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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