

RAP* Time



RURAL CENTER *for* AIDS/STD PREVENTION

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

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

Vol. 16, No. 6 June 1, 2012

Only one-half of African American young adult females had high STD knowledge

In the U.S., African American young adult females are at a higher risk than their white peers for contracting a sexually transmitted infection. This discrepancy occurs particularly among young women residing in the south.

Theoretical models of health promotion include correct knowledge as an important component in adopting STI protective behaviors. Lack of adequate knowledge can advance disease acquisition and transmission.

This study sought to identify factors that distinguish African American girls who have high STI prevention knowledge from those lacking such knowledge.

Methodology

Participants were recruited from three public health clinics in downtown Atlanta, GA. Eligible participants were African American females aged between 15-21 years who reported having had sexual activity in the past 60 days.

The study examined whether age, attendance at sex education classes, employment status and self-mastery were associated with the quality of STI prevention knowledge (11 questions). Audio computer-assisted interviewing

technology was used to assess study variables.

Outcomes of the Study

Mean age was 18 years, 94% had attended a sex education class, 30% were employed, and 52% had received public aid.

Major findings include:

- About 51% reported high STI prevention knowledge.
- Higher STI knowledge was associated with being older, having higher mastery, and being employed.
- The number of correct answers on individual items ranged from 51% to 95%.
- Almost half of the participants (51%) did not know that people who carried the AIDS virus look healthy and may not have noticeable symptoms.
- Four out of ten participants did not know that females are more susceptible to contracting STI than males.
- 32% of the participants did not know whether it was safe to use oil-based lotions while using condoms.
- 36% did not understand that the presence of an STI increases HIV acquisition risk.
- 45% believed that if a man has an

STD, he will have noticeable symptoms.

- 21% believed that STDs can be passed through open sores or lesions.
- 8% believed that if a man pulled out before orgasm, condoms are not needed to protect against HIV.
- 5% believed that birth control pills protect women against the AIDS virus.

Implications for Prevention

This study involving young adult African American females found that only about one-half had high STI prevention knowledge. For example, about one-half did not know that HIV-infected persons look healthy and may not have noticeable symptoms.

HIV prevention education programs should especially target young African American women who are younger, unemployed, and who have low self-mastery.

SOURCE:

Voisin, D. R., et. al. (2012). Correlates of sexually transmitted infection prevention knowledge among African American girls. *Journal of Adolescent Health, 51*, 197-199.

HIV home testing kit rated positive by high risk group

This investigation determined whether individuals who choose to have unprotected sex would be willing to use the HIV home testing kit and/or be willing to ask potential casual partners to take the test before having unprotected sex.

Twenty-seven men who have sex with men were each given 16 HT kits to use with prospective sexual partners and were monitored weekly for three months and then interviewed.

The suggestion of using the HT kit opened up discussion about HIV status when it might not have been prior mentioned. In two cases, disclosure of an HIV-positive status was only given once the participant had proposed using the kit. Refusal resulted in sex with condom or not sex. A positive HIV test resulted in no sex taking place.

The researchers concluded that the HT kit proved cost-effective, simple and acceptable tool in the high risk group

SOURCE: Carballo-Diequez, A., et al. (2012). Use of rapid HIV home test prevents HIV exposure in high risk sample of men who have sex with men. *AIDS and Behavior*. DOI 10.007/s10461-012-0274-2.

Pediatricians indicate circumcision benefits outweigh risks

The American Academy of Pediatrics issued a new policy statement on male infant circumcision. The AAP stated that an evaluation of English-speaking, peer-reviewed literature from 1995 through 2010 reveals that the preventive health benefits of elective circumcision of male newborns outweigh the risks of the procedure.

AAP notes that the medical benefits include significant reductions in the risk of urinary tract infection in the first year of life and subsequently the risk of heterosexual acquisition of heterosexual acquisition of HIV and penile cancer the transmission other sexually transmitted infections.

AAP stated that even though the health benefits are sufficient to recommend routine circumcision for all male newborns the benefits of circumcision are sufficient to justify access to this procedure for families choosing it. Further, the benefits warrant third-party payment for circumcision of male newborns.

Clinicians should routinely inform parents of the health benefits and risks of male newborn circumcision in an unbiased and accurate manner.

SOURCE: Task Force on Circumcision. (2012). Circumcision policy statement. *Pediatrics*, 130, 585-586.

Genital warts declining among females in Sweden

Sweden began to subsidize HPV to teenage girls in 2007. After 2007, 27% of females were fully vaccinated. Genital warts among females decline between 2008 and 2010. Females aged 17 and 18 years had a greater than 25% decline in genital warts rates between 2006 and 2010 with decreases through the age of 25 years. STD rates dropped 17 percent among women ages 15-25 from 2006 to 2010.

SOURCE: Leval, A., et al. (2012). Incidence of genital warts in Sweden before and after quadrivalent human papillomavirus vaccine availability. *Journal of Infectious Diseases*, 206, 860-866.

Pill also for high risk heterosexuals

CDC has updated interim guidance on the utilization of the once-a-day Turvada to prevent HIV stating providers should consider prescribing it for heterosexual women and men who are at high risk of HIV infection but not all sexually active heterosexuals.

SOURCE: CDC. (2012). Interim guidance for clinicians considering the use of preexposure prophylaxis for the prevention of HIV infection in heterosexually active adults. *MMWR*, 61, 586-589.

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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