



Understanding the Racial Disparity in STIs Among U.S. Adolescents

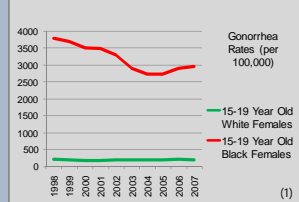
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STIs in Adolescents: Evidence of a Racial Disparity

	Total U.S. Incidence (2007)	15-19 yr old black females	15-19 yr old white females
Chlamydia	370.2 / 100,000	9,647.7 / 100,000	1,432.7 / 100,000
Gonorrhea	118.9 / 100,000	2,955.7 / 100,000	200.6 / 100,000
Syphilis (all stages)	13.7 / 100,000	10.4 / 100,000	0.7 / 100,000

(1) 50% of new STIs occur among adolescents and youth 15-24 years old (2)
 Gonorrhea represents the largest racial disparity observed in any infection disease in the U.S. (3)
 Consequences of untreated STIs include:
 • Pelvic Inflammatory Disease
 • Infertility in females
 • Chronic pelvic pain
 • Risk of ectopic pregnancy
 • Increased susceptibility to HIV and other STIs (4)

The Racial Disparity in Gonorrhea Rates Among Female Adolescents Over Time



What Causes the Disparity? Review of Current Literature

Social Ecological Approach to Risk Factors (5)

Contextual & Environmental Risk Factors	Interpersonal Risk Factors
<ul style="list-style-type: none"> Low SES Exposure to violence/abuse Limited access to care Housing insecurity History of arrest/incarceration 	<ul style="list-style-type: none"> Concurrent sexual partnerships (6) Inconsistent condom use Relationship power dynamics
	Intrapersonal Risk Factors
	<ul style="list-style-type: none"> Low educational attainment Drug/Alcohol use Early age of sexual debut

Exposure to violence (OR 1.4), history of arrest (OR 1.4), and housing insecurity (OR 1.3) have strongest association with adolescent STI history (5)

STI/HIV infection risk estimated 25 times higher for African American adolescents who only engage in low risk behaviors (7)
 • Changing intrapersonal level risk may not impact STI disparity

The role of concurrent partnerships (8)
 • Amplifies spread of disease by increasing network connectivity
 • Assortative mating reduces mixing between groups
 • Risk of STI acquisition is high even if # of partners is low
 • Spread of HIV in Uganda reduced when # of concurrent partnerships reduced (9)

What is Unknown?

- How common are concurrent sexual partnerships among adolescents?
- Are African American adolescents more likely to report these relationships?
- Why do adolescents choose concurrent sexual partnerships?
- Are concurrent partnerships a mutual choice or a result of deception or violence in adolescent relationships?
- What is the relationship between concurrent partnerships and known contextual risk factors?

Research Proposal

Design: Qualitative
Population: 20 sexually active African American adolescents age 15-24 (from 10 dyadic partnerships)
 • Half of participants engage in concurrent partnerships and half do not
 • Participants will identify each other as sexual partners, but will be interviewed individually and confidentially

Method: In person open-ended interviews
 • Questions will cover STI history, individual risk behaviors, exposure to contextual risk factors, partnership dynamics, reasons for partnership choices

Goal: Understand cultural and psychosocial factors involved in concurrent sexual partnership dynamics in African American community

Future Directions:
 • Quantitative study examining adolescent involvement in concurrent partnerships and associated STI risk
 • Tailored intervention to inform adolescents of risks associated with concurrent partnerships

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