

Challenges

durex network - Raising awareness of sexual health across the globe
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The contrasting ups and downs of college affairs

A study highlights that losing their virginity can have differing effects on young men and women on campus

Young men who have had sex for the first time while they're at college say it made a positive difference to their self esteem. For young women, it appears the opposite is true.

The findings of the study carried out at Penn State University have been reported in *The Journal of Adolescence*.

The researchers surveyed 434 students asking them about their "attitudes and experiences in relationships with other people". The extent to which the young women's satisfaction with their appearance decreased after first intercourse came as a surprise.

"We're not talking about 12-year-old girls having sex, so it's striking that even among these young women – who are 17 or older when they first had sex – their images of themselves went down," commented Eva Lefkowitz, associate professor of human development and family studies at the University.

Previous studies have suggested that positive body image can reinforce risky sexual behaviour in male college students, explained Sara Vasilenko, graduate student in human development and family studies.

Based on the findings of the study, Vasilenko believes sexuality education programmes for males should focus on feelings of masculinity and how to achieve those without engaging in risky sexual behaviours. On the other hand, sexuality education for females should focus on promoting positive body image.

"There has been a lot of research on what predicts risky sexual behaviour, but not a lot about how adolescents and young adults experience their sexual behaviour and what might be

some of the mental health and wellbeing outcomes," Vasilenko said.

"Most of the research in that area looks at mental health outcomes of early sexual behaviour relative to peers, finding that adolescents who have sex early, particularly females, might have more depression symptoms.

"I was interested in whether it would be more positive if the individuals transition to sexual behaviour when they were college-age, because that's a more normative time, when most people are sexually active."

Vasilenko suggested that a possible next step is to look at what factors make the first sexual intercourse experience positive or negative for different people. Future research might lead to a better understanding of what contributes to a more positive experience for females. ■



First sex can affect a college girl's self-esteem

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How and when is sexual education best provided across age groups

Opinion is polarised in different parts of the world concerning the optimum approach to take

Many parents face a quandary over the question of who should tell their children the facts of life and when.

Parents of children aged 5-11 years were asked on the website babychild.org.uk whether they agreed with sex education being taught to children in schools, even from a young age.

Some 59 per cent of the 1,700 respondents said they disagreed with it, while only 18 per cent agreed and 23 per cent said they were impartial.

Of those who disagreed, the most frequently cited reason was “it is inappropriate to teach children about sex” (41 per cent), followed by “it should be the parent’s choice to teach their own child” (28 per cent).

When parents were asked at what age it was appropriate to teach sex education to children in schools by far the largest percentage (48 per cent) said 13 or older.

However, more than one in six respondents said they had already been quizzed about sex by their children, with most of the children first raising the subject between the ages of four and seven years old.

Although 31 per cent of parents said they explained everything their children asked “in full”, the most popular response was that they “felt embarrassed” (38 per cent), followed by “didn’t know what to say” (32 per cent).

The results indicate that while many parents are against their children having any form of sex education at primary school, they also appear reluctant to discuss the subject themselves.

One organisation that is prepared to talk about sex is the Scout Association in the UK, albeit primarily to those aged 14-18. The Association has launched a

A different approach again is being taken by a United States high school in Columbus, Ohio, where the focus is being firmly put on peer education to get the sexual health message through to young people.

A group of students at the school have been learning for the past year about topics such as sexually transmitted infections and teenage pregnancy to raise the level of conversation and good decision making.

The programme has been applauded by experts in the field such as Barbara Huberman, director of education and outreach for Advocates for Youth, a Washington, D.C. group that educates young people about reproductive health.

“We know that in the teen years, their peers are an incredibly strong influence in their thinking and in their choices,” Huberman said.

“This is normal adolescent behaviour to move away from parental advice. They want to stick out on their own and make their own decisions. They are going to listen to their peers and also listen to other trusted adults at this time.”

The students agree; as one, 15-year-old Deidra Gardner, told her local paper *The Columbus Dispatch*: “Before the group, we didn’t talk about teen pregnancy. We would see all these people getting pregnant, and no one would say anything. That’s not the case anymore.”

Meanwhile a new initiative in the US state of Colorado has seen the launch of a website designed to teach young people aged 13 years or more about sexually transmitted infections.



High school students work as peer educators to develop and deliver workshops

programme of sex education classes designed to encourage young people to learn about relationships and sexual health with their peers and trusted adults.

Chief Scout Bear Grylls explained: “This programme is about getting the right information to young people to help them make smart decisions about their relationships.

“We want to help young people become confident, clued up and aware. My message is – make your own mind up and don’t let others do it for you. We only get one body, so respect it and people will respect you.”

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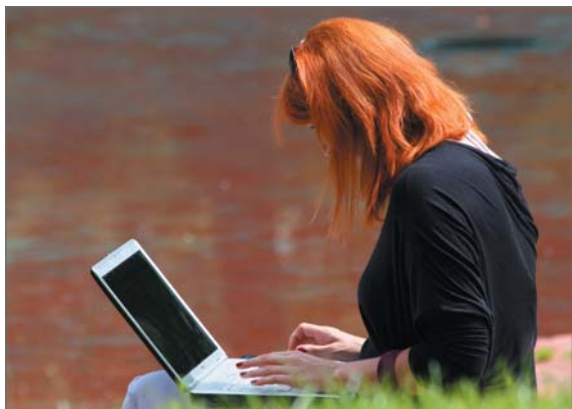
This comes after studies showed that 30 per cent of 15-19 year-olds in the state had chlamydia. "They're not doing what's necessary to avoid infection," said Ralph Wilmoth of the Colorado Department of Health, which has developed the website.

The Colorado officials don't share the same faith in peer education held by Columbus educationalists and are hoping that directing young people to the website will spare the embarrassment of teachers and parents in having to discuss sexual health with the children.

In many religious countries, the provision of formal sex education is seen as more than just a question of embarrassment as it is often interpreted as potentially encouraging immorality among young people.

Included among such countries in the past has been Chile, one of South America's most conservative nations, which has long aligned its views and policies on sex education with that of the Catholic Church.

However, the country's Education Minister Joaquín Lavín has made the surprise announcement that sex education will be given in all public schools from 2012.



Sexual information websites enable young people to learn in their own time

Younger children will first be taught the basics of acceptable behaviour, and as they get older learn more about pregnancy, contraception, HIV/AIDS, sexual abuse and homosexuality.

Chile's school system had more than 12,300 pregnant girls or mothers

registered last year and the primary aim of the new programme is to encourage young people to delay sexual activity.

The Islamic affairs ministry in Morocco is not going as far as to introduce contraceptive education in schools, but it is taking steps to try to slow the growing rise in unplanned pregnancies in the country by supporting the use of female religious advisers to talk to girls without conflicting Sharia law.

A study in Morocco by the National Institution for Solidarity with Women in Distress (INSAF) found that the number of single mothers in 2009 was almost 27,200. In the same year, some 8,760 babies were abandoned, an average of 24 infants a day.

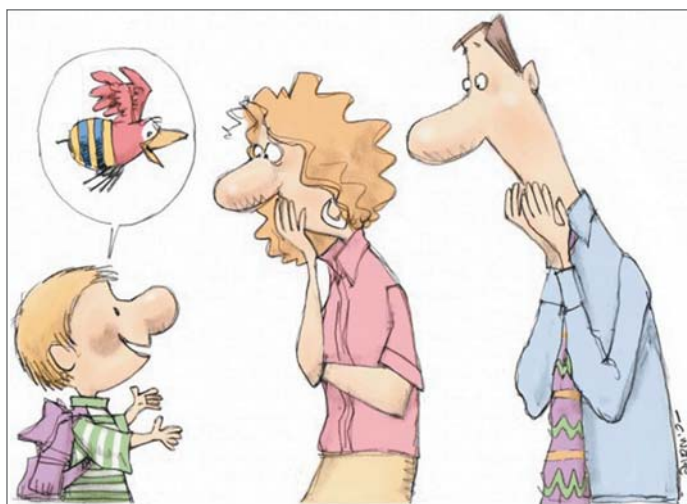
The INSAF believes the main causes are illiteracy, poverty, and the lack of sex education at home and at school.

Training sessions have been held for the advisers to play an outreach role as part of a health ministry programme on reproductive health. It is the first time such a project has been initiated at national level.

For many children around the world, receiving sex education from their parents isn't an option, whether they live in a religious country or not.

Children in state care in Australia became a particular cause for concern after figures showed that a quarter of girls gave birth soon after leaving care - 24 times higher than the rate of teenage pregnancy in the general population.

Welfare experts said children in care were not learning the basics of sex education,



The shock to parents of sex education classes ^ as seen by The Daily Sundial in California, USA

even though they were much more likely to be sexually active and to fall pregnant than other teenagers. "Because of the trauma and stress they've experienced, they're very, very keen to be loved," one explained.

The state of Victoria has now taken a lead by announcing sex education courses will begin next year for all children in its care.

However, it's not only young people who have been identified as requiring better education in sexual health. Increasingly, researchers say, older adults are in need of it too.

Studies have found that adults who had only rudimentary sex education when they were young tend to gain limited experience as they grow older.

The result has created a "sexually illiterate" population of American adults, according to Michael Reece, a professor of health at Indiana University.

"Most adults just don't have the basic education about their bodies, the bodies of their sexual partners, relationships or sexual behaviours," Reece told *LiveScience* magazine. "We really have this deficit, I would say, across the country."

Irrespective of whatever age it starts, or whoever provides it along the way, education in sexual health and wellbeing is now being increasingly recognised as an ongoing need for adults throughout the time they remain sexually active. ■

STIs increase as the risks are still ignored

Whether it's the older generations in Switzerland and Florida or the younger ones in Sweden, sexually active adults are closing their minds to the need to protect themselves and their partners

Considering the reputation that the Swiss traditionally hold for being safe and reliable, a recent government study brought some surprising results.

Among those aged 46-60 years, only 60 per cent of Swiss men and 50 per cent of women say they use condoms at the start of a new relationship. And that figure drops to 46 and 21 per cent respectively in people aged over 60.

The study commissioned by the Federal Health Office showed that the older age groups could learn from the wisdom of the younger generations, who are far more fastidious about practicing safer sex.

However, the Swiss are not alone. Research carried out by Indiana University found that in the United States, men in their 50s reported using a condom only 28 per cent of the time with a casual partner, compared to 50 per cent among men in the 18-39 age range.

The reasons given are partly because older couples are less worried about pregnancy, but also the feeling that to suggest the use of a condom may show a lack of trust in their new partner.

Whatever the reasoning, the results are fairly inevitable. According to the Centers for Disease Control and Prevention, STI rates across the USA rose by almost 50 per cent for men aged over 40 between 1996 and 2008.

The trend has been particularly noticeable in the sunshine state of Florida, where many Americans have headed for retirement. Among those aged 55 and older in Central Florida, the reported cases of syphilis and chlamydia increased by 71 per cent in five years from 2005 to 2009.

Viagra and other medications such as hormone replacements are helping the

older age groups remain sexually active longer, while a more open sexual attitude is contributing to the rising infection rates.

As one Florida geriatric specialist put it: "The flower children who were in their 20s back in the 1960s are now in the 70s. They're the make-love-not-war generation, and old habits die hard."



Older age groups are remaining sexually active for longer

Cases of syphilis are also on the rise in Sweden, together with gonorrhoea, although in this instance it is the younger generations that are becoming infected the most.

According to new statistics from the Swedish Institute for Communicable Disease Control, there was a 38 per cent rise in reported cases of the two diseases among Swedes in general.

Worst hit, however, are young women between 15-24 years, where the number of cases increased by 57 per cent. "We don't really know why, more than that women

clearly aren't afraid of being with new partners without using protection," said Inga Velicko, epidemiologist at the Institute.

A study of Swedish sexual habits presented earlier this year showed that only 30 per cent of young Swedes use a condom during sex.

According to Velicko, young people today are also less scared of HIV than before, which also leads to fewer using condoms as their contraceptive of choice. "It is seen as a chronic disease and not necessarily something you have to die from," she said.

She also pointed out that because many STIs show no symptoms, sufferers are often unaware they carry any infection.

This combination of unprotected sex and ignorance of whether or not they have an infection puts the spotlight on the necessity for sexually active adults of all ages to have regular STI tests.

One incentive being tried in Australia is to pay young people aged 16-30 years to go to a pharmacy and be tested for chlamydia. They each receive \$10 and the same sum is paid to the pharmacy to carry out the test.

It is a pilot programme being run initially in the Australian Capital Territory but if it proves successful it may be expanded nationwide.

Leading the project is Associate Professor Rhian Parker from the Australian Primary Health Care Research Institute, who believes if the scheme curtails transmission of the infection it would prove a good investment.

"Absolutely," he said. "Chlamydia has a significant cost to the community." And, if ignored, STIs such as chlamydia can also have a significant cost to the health of those left untreated, including infertility in women. ■

Laws that hinder HIV prevention services

A number of governments in the Asia-Pacific region have been blamed by the United Nations for laws that are hampering efforts to protect their citizens against the spread of HIV/AIDS.

UNAIDS, the United Nations programme on HIV/AIDS, says legislation forbidding same-sex relations and which regard drug addicts and sex workers as criminals are undermining prevention and treatment programmes.

Some 19 countries in the region criminalise same-sex relations and 16 restrict travel for those infected with HIV. Many also outlaw sex workers and punish drug addicts rather than focusing on sex education and drug treatment.

The head of UNAIDS, Michel Sidibé, has called on the governments to “make laws not just punitive but make laws protecting people”.

He said current legislation violates people’s rights and leads to increasing numbers of

HIV infections by creating an environment which makes people go underground without having access to services.



Michel Sidibé of UNAIDS calls on governments to make laws that protect people

Meanwhile, researchers in Cambodia have found that legislation recently introduced there to prevent sexual exploitation and human trafficking by outlawing brothels has resulted in sex workers being at increasing risk of HIV and sexually transmitted infections.

The 12-month study was carried out among 160 sex workers, aged between 15 and 29, in Phnom Penh and the results published in the journal *Sexually Transmitted Diseases*.

Women who worked as freelance sex workers had higher odds of HIV infection than those who reported having a manager, the report stated.

Cambodia country manager for Population Services International Chris Jones said prevention should take account of work venues, but noted implementation would be difficult.

“The shift of sex work from brothels has greatly complicated HIV prevention efforts, which rely on regular, unfettered access to women at risk of HIV to deliver information, products and referral to services,” he said.

Partner organisations have adapted their approaches to reach women at risk, but the new environment is much more complicated and poses greater challenges than the model of the past. ■

ART funding is money well spent

There are fears that the supply of antiretroviral treatment (ART) to poorer countries will fall further behind target as donor funding decreases.

Approximately 5.2 million people in developing countries are currently on ART to keep their HIV under control. Many more are in need of treatment now and will be in the future, however the funding shortfall is already estimated at more than \$7.5 billion.

Paul De Lay, deputy executive director of UNAIDS, has said the organisation is seriously concerned about the future of the programme. “Only about one-third of people in need have access to treatment,” he explained. “In the current economic climate even sustaining that over the long term will be a challenge.”

U.N. Secretary-General Ban Ki-Moon has called for a target of at least 13 million people to be receiving treatment by 2015, others, including the International HIV/AIDS

Alliance, want 15 million, which they say will still only offer 80 per cent coverage.

If those already on the ART programme cannot maintain their treatment, it could have significantly adverse effects on their health. By stopping for a period of time, the virus in their body will develop resistance to the medication they were on and they will then require a second line combination of drugs.

This would only exacerbate the funding problem, for second line drugs are even more expensive to supply – costing up to six times more than the first-line regimen.

The international organisation Médecins Sans Frontières (MSF) carried out a study into 16 countries in Africa, Asia and Latin America that account for 52 per cent of the global AIDS burden.

This found that greater access to ART had reduced HIV-related deaths, lowered

infection and deaths of tuberculosis and greatly lowered healthcare costs as people were spending less time in hospital and needed fewer supplementary medicines.

The MSF study noted that there had been great strides made in the past decade in terms of reducing drug bills and widening access. It reported that competition from generic manufacturers has driven the price of the most commonly used antiretroviral combination down from more than \$10,000 dollars per patient per year to \$67 dollars today – a decrease of 99 per cent.

MSF said it is understandable that there had been a drop in support for international causes following the global financial crisis and increased domestic spending pressures. However it has urged donors to look at ART funding as an investment that would pay off in the longer term. ■

Sex education – it’s a family affair

Dr Tiece Turnbull is a highly published academic and researcher in the field of psychology. Furthermore, Tiece is a Chartered Health Psychologist, Chartered Scientist and Associate Fellow with the British Psychological Society.

She is an expert in the sexual health of young people and in particular in sex and relationships education (SRE) and the involvement of parents. She currently works as an SRE consultant and has helped to develop SRE school policy and given expert sexual health advice to health professionals and supported school teachers in the delivery of SRE. Tiece was also SRE Development Co-ordinator for the Middlesbrough area for the Teenage Pregnancy Strategy in the UK.

Challenges spoke to her about her recent and planned work looking at sex and relationship education in the family context.

Dr Tiece Turnbull is passionate about the importance of parents in the field of sex and relationships education.

“My PhD thesis – *Psychosocial Exploration of Sex and Relationship Education in the Family Context* – looked at how knowledge about sexual health was communicated within the family and found that key factors were the knowledge of the parents and their ability to communicate effectively,” she explained.

“This is, in fact, recognised by the Department for Education and Employment (DfEE) who in their guidance to schools say that parents should be involved in the sex and relationships education of their child.

“However, when I spoke to families, I found that this simply was not happening in practice regarding some schools. Parents reported that schools were not talking to them about the sex education delivered to their children. This therefore meant that parents were not equipped and prepared for conversations. Consequently, parents were not able to help and guide their children to the level they would like.”



Dr Tiece Turnbull

Tiece’s research was carried out among 20 families in Teesside over a 10-month period using semi-structured interviews, observational field notes and quantitative measures. The key findings of the study were that trust, respect, spending leisure time together and children’s perceptions of their parents’ sexual knowledge were facilitators for sexual communications. Barriers to discussing sexual issues openly within the family included authoritative parenting, a lack of parental sexual knowledge, the presence of younger siblings and the parents’ direct

questioning of their children’s personal relationships.

Tiece believes that the answer is to give parents more knowledge in sexual health matters so they are able to educate their own children.

“My research found that the greater the knowledge of the parent, the more communication took place within the family.”

This echoes the findings of the Durex Network Face of Global Sex reports which found that receiving sexual health information from parents was a key factor in young people becoming sexually confident adults.

Tiece is planning to follow up her research in the north-east of England with further studies to cover the south of England and also other European countries to explore what approach is taken in each of these different locations. “I would like to look at the south of England because it is very different to the north-east and would enable me to build up a better picture of what is happening in the UK,” she said.

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“I believe the European studies will be particularly valuable as they will enable me to build up a picture of what is happening in the families of countries which have a far lower incidence of teenage pregnancy and STIs. This will allow for greater knowledge to be gained to steer SRE in such a way that the UK can benefit, especially with regards to unintended pregnancies and STIs and the promotion of positive sexual health for children and young people.”

Triece is currently seeking sponsorship for the next stage of her research and, once completed, plans to create a website for parents to be able to learn about SRE and how best to communicate within the family.

“I’ve decided to take this approach because it seems unlikely that schools will change their policies and involve parents to the level required, despite the guidelines from the Government.

“SRE is simply not given the same importance as other subjects in schools

and until that position changes, it seems unlikely that anything else will.

“There’s also an issue with the teaching of SRE. There are simply not enough specialist teachers to go round and often teachers are being asked to teach lessons that are way outside their comfort zone. This has a knock-on effect of making the child or teenager uncomfortable and treating SRE as a joke.

“And it’s the same within the family. If the parent is knowledgeable and not embarrassed by the subject, then the other family members are likely to learn more about it. However, at the moment parents simply don’t know how to discuss topics such as sexuality, masturbation and other sensitive topics.”

Triece has been alarmed by the recent high profile news stories in the UK suggesting that girls should be taught SRE separately from boys and that the focus should be on abstinence.

“This is particularly so because this is not what young people want – they want to learn about the opposite sex and be given correct and comprehensive SRE so they can make informed choices over their sexual behaviour and personal relationships.

“It also worries me that there seems to be a groundswell of political opinion suggesting that abstinence should be the key focus for girls.

“The problem with teaching abstinence alone is that young people don’t get to learn about how their bodies work. They don’t get to learn what is and is not appropriate behaviour or how to protect themselves. They need to be able to make informed decisions.

“Hopefully my research with families will enable us to give young people the knowledge to be safe and responsible – which, after all, is their right as individuals.” ■

Teenagers show scepticism online

Fears that teenagers may be unduly influenced by what they read on the Internet appear to be unfounded.

Researchers at New York’s Guttmacher Institute, which tracks public sex education in the USA and abroad, found that many young people are “savvy consumers” who are sceptical about contraception information they find online or hear from their friends.

The study was carried out among teenagers aged 16–19 years to find out where they get information on contraception and how much trust they put in it.

While most had talked to friends about safer sex at some time, only about one-third said they’d been exposed to contraception information online, and most were “wary” of the accuracy of



Teenagers are “savvy” about what they find on the Internet

information from both sources. Lead author Rachel Jones, a senior research associate, said: “There’s this assumption that teens are these blank slates and just uncritically absorb the information that’s given to them. Our expectation, not just with the Internet but in a variety of forums, was that teens are a little more critical of information.”

Those surveyed showed they were well aware that a search for birth control information online was likely to lead to a site selling something rather than offering quality information. They were most likely to trust sexual health information offered on sites from .edu, .org or .gov domains.

“There was this general distrust of the Internet for information, at least as it pertained to sexual health issues,” said Jones. ■

Prevalence of HPV among men is rising

With more and more males having HPV, is vaccination an answer?

Findings that indicate approximately half of all men may be infected with the human papillomavirus (HPV) have led to fresh calls that boys in the UK should be vaccinated against the sexually transmitted infection.

Scientists at the H Lee Moffitt Cancer Centre and Research Institute in Tampa, Florida, carried out a study which analysed 1,159 men, aged 18-70 years, from the US, Brazil and Mexico. Its results have been published in *The Lancet* medical journal.

The men taking part in the study were tested at regular intervals during a period of more than two years. The study determined that about half of the male population carried some form of HPV and that every year there was a six per cent increase in carriers of HPV 16 and 18, the deadliest forms of the virus which can cause cancer.

In *The Lancet* report, the study authors concluded: "The results from this study provide much-needed data about the incidence and clearance of HPV infection in men; these data are essential for the development of realistic cost-effectiveness models for male HPV vaccination internationally."

Girls between the ages of 12 and 13 in the UK have been offered the vaccine since 2008, but there is no immunisation programme in place for boys.

The UK Department of Health said the vaccination of boys was not recommended by the Joint Committee on Vaccination and Immunisation (JCVI), its independent advisory body. The JCVI maintains such a course of action would not provide any additional benefit and would not be cost-effective.



Teenage girls are being vaccinated against HPV - but should boys?

Professor Lawrence Young, head of the University of Birmingham's College of Medical and Dental Sciences, has called for a rethink.

Writing in the *Daily Mail*, Professor Young said more tests need to be done to fully understand how HPV is spread between men and women. However, he

added, "I implore health chiefs to think seriously about vaccinating boys against HPV."

Although teenage girls are offered the vaccine, there is no law to ensure every girl has it. Even "optimistic figures" put the amount of British girls receiving it at just 70-80 per cent, Professor Young claimed. ■

Conferences and events

Women/Youth Empowerment and HIV/AIDS Prevention - The Way Forward

Date: 11-17 July 2011

Location: London, United Kingdom

Key theme: An opportunity to learn more about the impact of women and youth empowerment in combating the scourge of HIV/AIDS

Contact: <http://linblazecharity2.tk/>

5th International Workshop on HIV Transmission

Date: 14-15 July 2011

Location: Rome, Italy

Key theme: A forum for scientists, clinicians, virologists, epidemiologists and public health officials to present and to discuss the various aspects of the transmission of HIV

Contact:

<http://www.virology-education.com>

10th International Congress on AIDS in Asia and the Pacific (ICAAP10)

Date: 26-30 August 2011

Location: Busan, South Korea

Key theme: A biennial gathering for the release and discussion of scientific, programmatic and policy developments in the global response of HIV/AIDS

Contact: <http://www.icaap10.org>

AIDSimpact

Date: 12-15 September 2011

Location: Santa Fe, United States

Key theme: a biennial international conference that focuses on behavioral science in guiding the development, evaluation and implementation of HIV prevention and care interventions

Contact: <http://www.aidsimpact.com>

Reproductive Health 2011

Date: 15-17 September 2011

Location: Las Vegas, United States

Key theme: Topics include family planning, healthy sexuality, HIV/STI prevention technologies and reproductive health

Contact: <http://www.arhp.org/RH11>

2011 Australasian Sexual Health Conference

Date: 28-30 September 2011

Location: Canberra, Australia

Key theme: For professionals working within sexual health medicine - physicians, nurses, counsellors and those involved in public health. It follows on from the Australasian HIV/AIDS conference

Contact:

<http://www.sexualhealthconference.com.au>

Challenges is an occasional publication produced by the Durex Network. While the articles are accurate summations of current sexual health matters, the views and opinions expressed are not those of the editor.

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