

Coerced First Intercourse and Sexually Transmitted Infections

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Sexual violence has been associated with negative reproductive health outcomes in several studies. Data from the 2001 Youth Risk Behavior Survey (YRBS), a nationally representative survey of adolescents enrolled in grades 9-12, showed that female adolescents with a history of forced sex were more likely to have had multiple sexual partners in the three months prior to interview and were less likely to have used a condom at last sex, implying a continuing effect of forced sex on sexual behavior (Howard & Wang, 2005). Women who experienced child or adolescent sexual abuse were more likely to engage in risky sexual behaviors as adults, including trading sex for money or drugs, having multiple sexual partners in the last 30 days, and engaging in more unprotected sex (Parillo, Freeman, Collier, & Young, 2001). Researchers have hypothesized that these early exposures may change later sexual behaviors (Heise, Ellsberg, & Gottmoeller, 1999; Heise et al., 2002), which has an impact on the risk of acquiring a sexually transmitted infection. This study examines the association between coercive first intercourse and self-reported sexually transmitted infections.

Methods

Data from the National Survey of Family Growth (NSFG) were used in this study. This is a nationally representative survey of persons 15-44 years of age. Both computer-assisted personal interviews (CAPI) and audio computer-assisted self-interviews (ACASI) are used for data collection. In the CAPI portion of the interview, trained interviewers ask the respondent questions and key answers into the computer,

while with ACASI, respondents listen to questions on headphones connected to a laptop computer and then key answers directly into the computer themselves. ACASI is used to administer the more sensitive questions on the survey because it is believed to gather more honest responses to such questions. Data collection took place from March 2002 to February 2003. The interviews were voluntary and confidential, and took an average of 80 minutes to complete. The response rate for women was 80%.

The exposure of interest was coercion at first intercourse. During the ACASI portion of the interview, respondents were asked two initial questions about coercion at first intercourse. First, women were asked, "Which would you say comes closest to describing how much you wanted that first vaginal intercourse to happen?" The response choices were: wanted (I really wanted it to happen at the time), mixed feelings (part of me wanted it to happen and part of me didn't), or unwanted (I really didn't want it to happen at the time). Next, they were asked, "Would you say then that this first vaginal intercourse was voluntary or not voluntary, that is, did you choose to have sex of your own free will or not?" Individuals who said first intercourse was both wanted and voluntary were not asked about types of force used. All other women were asked a series of seven yes/no questions about whether specific kinds of force were used; for the purposes of this study, these "types of force" items were then divided into none, nonphysical or physical categories (Appendix A). Because 19.8% of women reported more than one type of force, the categorization of nonphysical or physical force was based on the most severe form of force reported; physical force was considered more severe than nonphysical. A three-category variable indicating the degree of coercion was created based on responses to these questions. Women were coded as

experiencing significant coercion if they indicated any physical force or that the experience was involuntary. The group experiencing mild coercion includes those who reported that the first experience was unwanted or nonphysical force was used. Finally, the none or minimal group were those who indicated that no force was used and that first sex was either wanted or they had mixed feelings.

Self-reported sexually transmitted infections were obtained through several questions. Women were asked if they had been treated or received medication from a doctor or other medical care provider for a sexually transmitted disease or been told by a doctor or other medical care provider that you had gonorrhea or chlamydia in the last 12 months. Women were also asked if they had been told by a doctor or other medical care provider at any time, that they had genital herpes, genital warts, or syphilis. Women were said yes to any of these questions were coded as having a sexually transmitted infection.

Control variables included age at interview, race/ethnicity, completed education at interview, age at first pregnancy, and marital status at first pregnancy. Women were also asked if they had ever been forced to have sexual intercourse by a man and if so, at what age this had occurred; the question was rephrased to ask about subsequent forced sex for women who reported that first sex was either not voluntary or unwanted.

Study Sample

Interviews were conducted with 7,643 women. Women are excluded if they were less than 18 years of age at the time of interview and thus not asked about forced sexual experiences or sexually transmitted infections or if they did not provide answers

to all sexual coercion questions. The final sample for this analysis consists of 6,096 women who responded to all questions used in these analyses.

Statistical Analysis

Chi-square tests will be used to evaluate the bivariate associations between: 1) coercive first intercourse and sexually transmitted infections; 2) coercive first intercourse and all covariates; 3) sexually transmitted infections and all covariates. Covariates significant at $p < 0.10$ in either chi-square test will be included in the final logistic regression model. Multiple logistic regression will be used to estimate adjusted odds ratios and 95% confidence intervals for the association between coercive first intercourse and unintended first birth, controlling for all significant covariates. SUDAAN software was used to adjust for the complex survey design and create nationally representative estimates.

Preliminary Results

In 2002, 12.3% of US women reported that they experienced mild coercion at first intercourse and 8.8% experienced significant coercion at first intercourse. Compared with women who experienced no coercion, the unadjusted odds of reporting a STI was greater for women who experienced mild (OR: 1.5, 95% CI: 1.12-2.0) or significant coercion (OR: 1.9, 95% CI: 1.4-2.7).

Appendix A. Kinds of force questions and categories of force

<u>Item</u>	<u>Category</u>
Were you pressured into it by his words or actions, but without threats of harm?	None
Did you do what he said because he was bigger than you or a grown-up?	Nonphysical
Were you given alcohol or drugs?	Nonphysical
Were you told that the relationship would end if you didn't have sex?	Nonphysical
Were you threatened with physical harm or injury?	Nonphysical
Were you physically hurt or injured?	Physical
Were you physically held down?	Physical