

# SEXUALLY RISKY BEHAVIOR IN COLLEGE STUDENTS COMPARED TO RISKY BEHAVIOR IN OLDER WOMEN

*Carol Caico PhD, PMHCNS-BC, WHNP-BC*  
Assistant Professor, NYIT, Old Westbury, N. Y.

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## Abstract

**Objective:** To explore the findings a study done about sexually risky behavior in College- Aged Students and compare with risky sexual behavior in older adults.

**Design:** Descriptive study

**Setting:** Commuter college

**Participants:** A convenience sample of 770 students aged 15-25

**Methods:** To compare results of college sexual risks with a literature search of risky sexual behavior in older single, divorce and widowed women with identification of condom use and risks for sexually transmitted diseases.

**Results:** The college study identified condom use to be 50.9% and 47.2% were not worried about getting HIV and 42.7% did not feel knowledgeable about STD's. In the older population 71% did not use condoms and since returning to the sexual area after being widowed or divorced do not see themselves at risk for STD's, yet the pathological changes of aging puts them at a higher risk for the development of STD's.

**Conclusion:** It is imperative that old as well as young be screened for all STD's and conversation and education about sexual risks must be initiated by all health care providers . Education about sexual risks should be part of health education at a minimum starting in 9th grade for the young population.

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**Keywords:** Sexually risk behavior, students, older women

## Introduction

The United States has the highest rate of sexually transmitted diseases (STD's) compared to other countries. It is estimated that approximately 20 million new cases are diagnosed annually. Half of these s cases occur in young people between the ages of 15 and 24. The cost to the U.S. healthcare system for diagnosing and treating STD's is about \$15.9 billion annually.<sup>1</sup>

Some of the STD's that are contracted due to unprotected sex include chlamydia, gonorrhea, syphilis, herpes, human papilloma virus (HPV), Trichomoniasis and HIV.<sup>2</sup> Approximately 21% of people with HIV infection are unaware of them being infected and thus increases transmission to a sexual partner. Other STD's that often exist without symptoms are Gonorrhea, Chlamydia and Trichomonal infection. These infections can lead to serious complications such as pelvic inflammatory disease, peritonitis, ectopic pregnancy and increased risk of HIV infection if they are left untreated.<sup>3</sup>

## LITERATURE SEARCH

Sexually transmitted infections continue to be a major public health concern and cause significant morbidity. STD's have plagued humans for millennia and can lead to chronic disease pregnancy complications, infertility, and even death.<sup>3</sup> In a study done in a community college to determine if sexual behavior attitudes of students 18- and older would change after taking human sexuality classes. In a pretest 84% approved of premarital sex and 85% had experienced oral sex by age 15-17 and 22% had anal sex. 25% of the men and 20% of the women had had six or more sexual partners. After the sex education course the only thing that changed was there only 13% more of students said they would use condoms as a method of STD prevention.<sup>4</sup> Substance abuse and binge drinking were independently related to multiple sexual risk behaviors including a greater number of sexual partners, lack of condom use, and substance abuse prior to sexual activity. Urban adolescents who were exposed to violence had a higher levels of sexual risk taking.<sup>5</sup> A large body of research focuses on adolescent sexual behavior, inconsistent condom use, having unintended pregnancies and acquiring STD's, There is little research which examines the link between adolescent sexual risk behaviors and long-term reproductive health outcomes.<sup>6</sup> Research examining sexual behavior in a sample of aged 14-22 found that in a 3 month period 15% of sexually active women and 35% of such men had more than one sexual partner.<sup>6</sup> Genital herpes is a common STD with the majority of new cases occurring in adolescents and young adults. Important implications of having genital herpes include the risk of transmission to sexual partners as it is a virus and once one has it can be spread to others.<sup>7</sup> Condom use is still the best method to protect against STD's. Condom negotiation among sexually active young women remains problem. Some issues are feeling that the male should initiate condom use, unable to practice safer sex due to abuse and unequal gender dynamics. Some young women felt it was not necessary because of belief that they were in a monogamous relationship.<sup>8</sup> Sexual risk taking is not only for young college-aged students.

Older adults continue to be sexually active in their later years. A range of sexually transmitted infections such as chlamydia, gonorrhea, syphilis and HIV have been reported among older adults. In 2009 according to AARP on midlife or older men and women 1,110 reported having an STD (525 men and 585 women). Physiologically women are more susceptible to STD due to changes in the vaginal mucosal changes causing the vagina to be thin and subjected to tears. Men tend to use drugs like Viagra for erectile dysfunction and condoms are not used.<sup>9</sup> People over the age of 50 are increasingly at risk of HIV and sexually transmitted infections. Older persons should be included in education campaigns against STD's as they are frequently left out as more focus is on the younger population and yet often the older population is at a great risk. The CDC estimates that by 2025 about half of all people living with HIV in the U.S. will be over 50 year of age.<sup>10</sup> Most viral STD's such as Human Papilloma Virus (HPV), Herpes (HSV) and HIV cannot be treated and cured, and therefore causes life-long implications including death.. Antiviral medications may be used to decrease symptoms but does not eradicate the virus.<sup>11</sup>

It is extremely important to screen the young for STD's and those aged 50 and older must also be screened as both age extremes are practicing risky sexual behavior and life-long consequences. The purpose of this research is to compare the research done on college students sexually risky behavior and compare to the literature of risky behavior in older people.

## **PURPOSE**

The purpose of this study is utilize selected findings from a previous study conducted by the author about risky sexual behavior of college-aged students<sup>12</sup> and apply these and compare to information found in the literature and CDC (centers for disease control), about sexually risky behavior in older women. who are single, divorced or widowed.

## **METHODOLOGY**

The study was conducted on a college students and N=770 both male and female students. A monkey type survey was used so that there was complete anonymity. The study was approved by the college's institutional review board (IRB). The subjects were recruited via an e-mail request. The instructions were that only sexually active students between the ages of 17-25 participate.

The instrument used was designed as a self-administered questionnaire. It consisted of demographic information including number of sexual partners and sexual orientation. The population consisted of Caucasian, Asian, Hispanic and African Americans students. 89.2% were heterosexual. The questionnaire consisted of 46 questions which inclusive of the demographic

information. The purpose of this study was to determine sexually risky behavior and knowledge of STD's, use of alcohol or drugs prior to sexual encounters, condom use, and types of sexual behavior. The questions were taken verbatim from three published sexual questionnaires with proven reliability and validity.<sup>13</sup>

The current research will focus on comparing the results on sexually risky behavior the study in the college population with the literature on risky sexual behavior and risk in the older population.

## **RESULTS**

The study done on the college students showed that 50.9% had unprotected vaginal sex and 56.8% had unprotected oral sex. 47.2% were never worried about getting AIDS. 58.1% drink alcohol prior to or during sexual intercourse and although all these students engage in sexual intercourse. 14.3% of the students admitted to being treated for STD's and 12.5% had unintended pregnancies. The questions remains how many STD's were untreated due to lack of symptoms ? 42% of this population did not feel knowledgeable about STD's.

The results in literature about the older populations aged 50 and older found that 71% did not use condoms.. Condom negotiation may be avoided with new partners for fear of conflict and rejection. Single women over aged 50 think they are no longer at risk for STD's.<sup>14</sup>

Physiology older women due to low levels of estrogen, often have atrophy of the reproductive tract placing them at a higher risk of developing STD's such as chlamydia, syphilis, and HIV of which 43% were at risk due to heterosexual contact.<sup>15</sup> Despite perceptions of not being at risk, older adults engage in behaviors that pose risk for HIV infection. Older adults have an altered presentation of AIDS and therefore may be less likely to be recognize symptoms.<sup>16</sup> 75% of women aged 40-70 did not know the association of sex and contracting HPV (human papilloma virus), which is the leading cause of cervical cancer.<sup>17</sup> British researchers found that STD's among those 45 and older have doubled in less than a decade.<sup>18</sup>

## **DISCUSSION**

Older adults are no more immune to STD's than the younger population. The problem arises when sexuality is not discussed with this older population and inadequate sexual screening is performed. Teaching about STD's and how to prevent them should be discussed just as is done with young women. Healthcare providers in Women's Health routinely feel comfortable speaking to young women about their risks, screening for STD's, their sexual activity and teaching them the importance of using condoms at all times as a preventative measure in avoidance of contracting

STD,s. Many healthcare providers are uncomfortable discussingsexuality in older women and assume that if there was a problem the patient would bring it up.

An AARP survey identifies that older patients continue to be sexually active which further supports the need for healthcare providers to assess sexual behaviors in this population, as well as teach them the importance of using condoms.<sup>19</sup> STD's and HIV/AIDS is growing faster among people over age 50 than any other group.<sup>20</sup> The baby boomer generation is a rapidly growing population and cannot be overlooked when it comes to sexuality. The young population continues to practice at risky behavior and then request STD testing when they see their healthcare provider. It is imperative that continued health and sex education be part instruction in either 8th or 9th grades as the young are engaging in sex at earlier ages. Sex education and STD risks should be reinforced every year and into college. Discussion of sexual activity, STD screening and education must be part of every healthcare provider's practice regardless of the age of patient.

STD's have risks that can lead to life-long consequences and therefore this study's goal is to take the information and make positive changes in practice by teaching all the importance of using condoms to protect against STD's.

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