



## **Sexual Health**

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**Sexual Activity**

Early age of sexual debut has been associated with multiple risk behaviors, including depression, lack of condom use, and alcohol and drug use.<sup>1</sup> Adolescents who report being abused by a dating partner are more likely to be younger at sexual initiation and to engage in riskier sexual behaviors, such as unprotected sex and higher numbers of partners and have increased risk for unintended teen pregnancy.<sup>2,3</sup>

Statewide survey data on the sexual behavior of Washington state youth have not been available since 1995. Washington State will begin collecting sexual behavior data in 2010, through the Healthy Youth Survey. National and limited local data are available and presented here.

**National Results**

According to national data from the **2007 Youth Risk Behavioral Surveillance Survey**:<sup>4</sup>

- About 48 percent of high school students nationally had ever had sexual intercourse (ranging from 33 percent of 9<sup>th</sup> graders to 65 percent of 12<sup>th</sup> graders). Youth who reported having sex at least once in the 3 months before the survey are considered currently sexually active. About a third were currently sexually active (ranging from 20 percent of 9<sup>th</sup> graders to 53 percent of 12<sup>th</sup> graders.)
- About 9 percent of youth in 9<sup>th</sup> grade, 7 percent of youth in 10<sup>th</sup> and 11<sup>th</sup> grade and 5 percent of youth in 12<sup>th</sup> grade reported they had their first sexual intercourse by age 13.
- About 16 percent of currently sexually active youth reported using birth control pills to prevent pregnancy. Birth control pill use was highest among white students (21 percent), female students (19 percent) and 12<sup>th</sup> graders (24 percent).

<b>National Data from the 2007 Youth Risk Behavior Surveillance Survey, 9<sup>th</sup>-12<sup>th</sup> grades<sup>4</sup></b>						
	<b>Total</b>	<b>Males</b>	<b>Females</b>	<b>Whites</b>	<b>Hispanics</b>	<b>Blacks</b>
Ever had sex	<b>48%</b>	50%	46%	44%	52%	67%
Currently sexually active	<b>35%</b>	34%	36%	33%	37%	46%
Used a condom last time	<b>62%</b>	69%	55%	60%	61%	67%
Drank or did drugs before last time they had sex	<b>23%</b>	28%	18%	25%	21%	16%
Sex with four or more partners in lifetime	<b>15%</b>	18%	12%	12%	17%	28%

*Source: 2007 Youth Risk Behavior Surveillance Survey, Centers for Disease Control and Prevention*

<sup>1</sup> Lehrer JA, Shrier LA, Gortmaker S, Buka S. Depressive symptoms as a longitudinal predictor of sexual risk behaviors among US middle and high school students. *Pediatrics*. 2006;118(1):189-200.

<sup>2</sup> Eaton DK, Davis KS, Barrios L, Brener ND, Noonan RK. Associations of Dating Violence Victimization With Lifetime Participation, Co-Occurrence, and Early Initiation of Risk Behaviors Among U.S. High School Students. *J Interpers Violence* 2007; 22; 585

<sup>3</sup> Roberts TA, Auinger P, Klein JD. Intimate partner abuse and the reproductive health of sexually active female adolescents. *Journal of Adolescent Health* 2005; 36 (5):380-385.

<sup>4</sup> Youth Risk Behavior Surveillance, United States 2007. Morbidity and Mortality Weekly Report; June 6,2008.Vol.57. No.SS-4. , Url: [http://www.cdc.gov/HealthyYouth/yrbs/pdf/yrbss07\\_mmwr.pdf](http://www.cdc.gov/HealthyYouth/yrbs/pdf/yrbss07_mmwr.pdf) Accessed July 2009

According to the **National Campaign to Prevent Teen Pregnancy**:

- Sexually active teens are more likely to engage in other risky behaviors such as smoking, drinking and illegal drug use.<sup>5</sup>
- In a 2007 survey, about 67 percent of youth ages 12-14 and 57 percent of youth ages 15-19 wish they had waited longer to have sex.<sup>5</sup>
- Both teens and parents state that the most common reason that teens do not use contraception is fear of their parents finding out.<sup>6</sup>
- In a 2009 survey, about one-third of teens (31 percent) say parents most influence their decisions about sex followed by 23 percent who cite themselves as most influential, 18 percent who say their friends, 7 percent who say the media, 5 percent who say religious leaders, and 3 percent who say teachers and sex educators are most influential. Only one quarter (24 percent) of parents believe they are the most influential factor in teens' decisions about sex. About 51 percent of parents and 42 percent of teens said that more open conversations between teens and parents would help to avoid teen pregnancy.<sup>7</sup>
- Nationally in 2008, about 20 percent of 13-19 year old teens reported they had electronically sent or posted nude or semi-nude pictures or videos of themselves (22 percent of teen girls and 18 percent of teen boys), and 39 percent said they had sent sexually suggestive messages (text, email, or instant message) to other people.<sup>8</sup>

## Local Results

Oregon and Spokane survey data are presented below. Results from other states and from local areas within Washington are not considered generalizable to the entire Washington adolescent population.

### Data from the 2008 Oregon Healthy Teens Survey<sup>9,10</sup>

The Oregon Healthy Teens Survey is a school-based, anonymous and voluntary survey administered annually to more than one-third of Oregon's 8<sup>th</sup> and 11<sup>th</sup> graders. In 2008, the Oregon Healthy Teen Survey collected information from more than 28,000 Oregon adolescents.

- Oregon 8<sup>th</sup> graders were most likely to report first having sex at age thirteen (6 percent), while 11<sup>th</sup> graders were most likely to report first having sex at age sixteen (16 percent). About 3 percent of 8<sup>th</sup> graders and 2 percent of 11<sup>th</sup> graders reported their first sexual experience occurred at age 11 or younger.

<sup>5</sup> National Campaign to Prevent Teen Pregnancy, The Sexual Behavior of Young Adolescents Fact Sheet: [http://www.thenationalcampaign.org/resources/pdf/SS/SS3\\_YoungAdols.pdf](http://www.thenationalcampaign.org/resources/pdf/SS/SS3_YoungAdols.pdf)

<sup>6</sup> With One Voice 2007: America's Adults and Teens Sound off About Teen Pregnancy, National Campaign to Prevent Teen Pregnancy. Accessed July 31, 2009 from: [http://www.thenationalcampaign.org/national-data/pdf/WOV2007\\_fulltext.pdf](http://www.thenationalcampaign.org/national-data/pdf/WOV2007_fulltext.pdf)

<sup>7</sup> National Campaign to Prevent Teen Pregnancy. With one voice (lite): A 2009 survey on parental influence, abstinence, contraception and the increase in the teen birth rate. [http://www.thenationalcampaign.org/resources/pdf/pubs/WOV\\_Lite\\_2009.pdf](http://www.thenationalcampaign.org/resources/pdf/pubs/WOV_Lite_2009.pdf)

<sup>8</sup> National Campaign to Prevent Teen Pregnancy. Sex and Tech: Results from a survey of teens and young adults, 2008. Accessed July 31, 2009 from: <http://www.thenationalcampaign.org/sextech/>

<sup>9</sup> Sexual Behavior. Oregon Healthy Teens 2008—11<sup>th</sup> grade: State Summary Results. Accessed July 17, 2009 from: <http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/ohteens/2008/11/sex11.pdf>

<sup>10</sup> Sexual Behavior. Oregon Healthy Teens 2008—8<sup>th</sup> grade: State Summary Results. Accessed July 17, 2009 from: <http://www.dhs.state.or.us/dhs/ph/chs/youthsurvey/ohteens/2008/8/sex8.pdf>

- Among Oregon 11<sup>th</sup> graders in 2008, about 90 percent of females and 94 percent of males identified as heterosexual. About 1 percent of females and 2 percent of males identified as gay/homosexual and 5 percent of females and 2 percent of males identified as bisexual. About 4 percent of females and 3 percent of males reported ever having sexual contact with someone of the same gender as themselves.

<b>Data from the 2008 Oregon Healthy Teens Survey</b>				
	<i>8<sup>th</sup> graders</i>		<i>11<sup>th</sup> graders</i>	
	<b>Males</b>	<b>Females</b>	<b>Males</b>	<b>Females</b>
Ever had sexual intercourse	19%	16%	46%	50%
<b>Of Those Who Had Ever Had Sex:</b>				
Drank or did drugs before last time they had sex	18%	23%	22%	17%
Used a condom last time	72%	67%	67%	57%
Did not use any method to prevent pregnancy last time	19%	24%	17%	17%

*Source: 2008 Oregon Healthy Teens Survey, Oregon State Center for Health Statistics*

**Data from the 2009 Spokane Regional Health District Youth Health Risk Survey<sup>11</sup>**

In 2009, the Spokane Regional Health District conducted a telephone interview survey of 337 Spokane residents ages 15-24 years, including 202 teens ages 15-19, which included questions on sexual activity.

- Among teens ages 15-19, 43 percent reported they were currently sexually active.
- Nearly all (85 percent) of Spokane teens believed schools should teach comprehensive sexual education as opposed to an abstinence-only curriculum. About 65 percent of teens and young adults believed birth control and/or condoms should be available in high schools.
- About 53 percent of 15-24 year olds said that peers and friends influence sexual activity, and 40 percent said that teens become sexually active due to pressure to be like their friends.
- Nearly half of teens reported having had only one partner in their lifetime.

<b>Data from the Spokane Regional Health District 2009 Youth Health Risk Survey</b>	
<b>Among Teens aged 15-19</b>	<b>2009</b>
Ever had oral sex	41%
Ever had vaginal sex	34%
Ever had anal sex	7%
Had only 1 partner in lifetime (of those who had sex)	45%
Average age at first sex (of those who had sex)	15.8 years old
Used a condom last time (of those who had sex)	67%
Never been tested for a Sexually Transmitted Disease (STD) (of those who had sex)	49%
Worry a lot about getting an STD and/or pregnancy	31%
Get information about sex from parent	32%
Get information about sex from school resources	31%
Say they are likely to use a school-based health center	51%

*Source: Spokane Regional Health District 2009 Youth Health Risk Survey*

<sup>11</sup> 2009 Spokane Regional Health District : 2009 Youth Health Risk Survey, Opinion Research Corporation

### ***Washington Sexual Health Education and Health Care Policies***

- In 2007, the Washington State legislature passed the Healthy Youth Act. The Healthy Youth Act does **not** require schools to provide sexual health education. If a school does provide such instruction, the school must assure that it is medically and scientifically accurate; is age appropriate; is appropriate for students regardless of gender, race, disability status, or sexual orientation; is consistent with the 2005 Guidelines for Sexual Health Information and Disease Prevention; and includes information about abstinence **and** other methods of preventing unintended pregnancy and sexually transmitted diseases. Washington schools offering sexual health education were required to comply with the Healthy Youth Act by September 2008.<sup>12</sup>
- In a 2008 survey of Washington principals, about 90 percent said their middle or high school taught the benefits of being sexually abstinent in a required course. About 60 percent taught eleven topics related to HIV, sexually transmitted infections or pregnancy prevention in a required course. About 35 percent said their high school or middle school had a gay/straight alliance or similar club to help promote safe environments in schools for all students.<sup>13</sup>
- In 2008, among 8<sup>th</sup> graders who took a health or science class in the past year, about 48 percent learned about abstinence, 30 percent learned about abstinence and other ways to prevent pregnancies and sexually transmitted infections, and 10 percent said they did not receive any information on sexual health during a health or science class last year. For 10<sup>th</sup> graders, about 40 percent learned about abstinence, 40 percent learned about abstinence and other methods, and 9 percent received no information on sexual health during a health or science class last year.<sup>14</sup>
- In 2008, about 77 percent of Washington 8<sup>th</sup> graders, 71 percent of 10<sup>th</sup> graders and 48 percent of 12<sup>th</sup> graders said they were taught about HIV infection during the past year.<sup>13</sup>
- Washington State allows minors (age 12-17) to consent to receive contraceptive services, sexually transmitted infections testing, prenatal care and abortion services without parental notification or consent, although involving parents in sexual health decisions is recommended.<sup>15</sup>

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<sup>12</sup> Healthy Youth Act DOH - 2009 MCH Block Grant Application Office of Maternal and Child Health Act Frequently Asked Questions. Accessed on July 20, 2009 from: <http://www.doh.wa.gov/cfh/mch/cahcp/Documents/HYA-FAQ.doc>

<sup>13</sup> Washington State Department of Health. Washington 2008 School Health Profiles Report. Unpublished Data.

<sup>14</sup> Washington State Healthy Youth Survey 2008

<sup>15</sup> Guttmacher Institute. State Policies in Brief: An Overview of Minors' Consent Laws. Accessed on July 17, 2009 from: [http://www.guttmacher.org/statecenter/spibs/spib\\_OMCL.pdf](http://www.guttmacher.org/statecenter/spibs/spib_OMCL.pdf)

**Adolescent Pregnancy** \*Critical Health Objective\*

<b>Adolescent Pregnancy Rates per 1,000, Washington State 2007 and United States 2004</b>			
<b>Age</b>	<b>WA Number</b>	<b>WA (2007) Rate per 1,000</b>	<b>U.S. (2004) Rate per 1,000<sup>16</sup></b>
Age < 15 <sup>§</sup>	196	<b>0.9</b>	<b>1.6</b>
Age 15-17	3,958	<b>28.7</b>	<b>41.5</b>
Age 18-19	8,057	<b>89.5</b>	<b>118.6</b>
Age 15-19	12,015	<b>52.8</b>	<b>72.2</b>
<b>Race/Ethnicity (ages 15-17)</b>			
White, Non-Hispanic		*	<b>22.4</b>
Black, Non-Hispanic		*	<b>80.1</b>
Hispanic		*	<b>82.9</b>

\* Race/ethnicity data unreliable for abortion data so pregnancy rates by race not included

§ Fetal death counts not included for those under 15

Source: Birth Certificate data. Washington State Department of Health;

**Additional Data:**

- Reducing adolescent pregnancies to no more than 43 per 1,000 females ages 15-17 is one of the **21 National Critical Health Objectives** for adolescents and young adults. Other related Healthy People 2010 objectives are to increase the proportion of adolescents who have never engaged in sexual intercourse to 75 percent; to increase the proportion of sexually active adolescents ages 15-17 who use contraception; and to reduce unintended pregnancies.<sup>17</sup>
- Nationally and in Washington State, teen birth rates declined between 1991 and 2005, but show insignificant increases since 2006. National research suggests that while rates of sexual activity among teens have not changed, reported rates of contraceptive use have declined in recent years and this may be driving the recent increase in teen births.<sup>18</sup>
- **Adolescent abortions:** Washington's abortion rate for 15-17 year-olds had steadily decreased over time, from 20.2 per 1,000 in 1997 to 12.5 per 1,000 in 2007. From 2004-2007, the abortion rate among 15-17 year olds has been stable.<sup>19</sup>
- **Unintended pregnancy:** From 2005 to 2007, about 68 percent of surveyed Washington new mothers less than 20 years old reported their births were unintended.<sup>20</sup>
- **Prior Pregnancies:** In 2007, about 30 percent of females ages 18-19 with a live birth and 14 percent of females ages 15-17 with a live birth reported at least one prior pregnancy.<sup>21</sup>

<sup>16</sup> Ventura, SJ, Abma, JC, Mosher, WD, et al. Estimated Pregnancy Rates by Outcome for the United States, 1990-2004. Accessed July 2009 from: [http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56\\_15.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr56/nvsr56_15.pdf)

<sup>17</sup> Department of Health and Human Services (US). Healthy People 2010: Understanding and Improving Health. 2nd edition. Washington, DC: US Government Printing Office; November 2000.

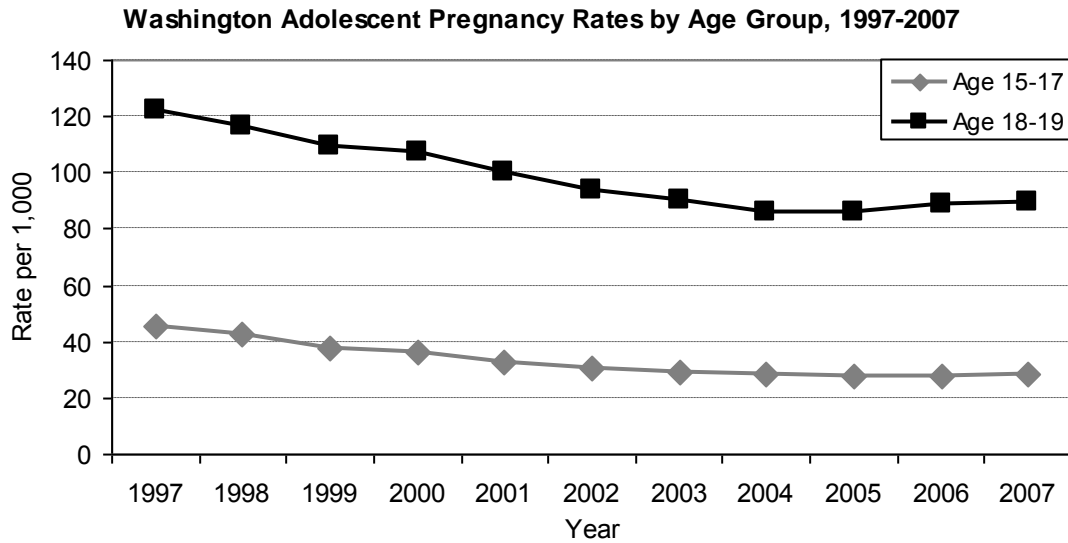
<sup>18</sup> Santelli, J S; Orr M; Lindberg L D; Diaz D C. Changing behavioral risk for pregnancy among high school students in the United States, 1991-2007. *Journal of Adolescent Health*, 2009 (45), 25-32.

<sup>19</sup> Abortion Records Report, Washington State Department of Health, Center for Health Statistics

<sup>20</sup> Washington Pregnancy Risk Assessment Monitoring System (PRAMS), 2005-2007. Washington State Department of Health, 2009

<sup>21</sup> Washington State Department of Health, Birth Certificate Data

Trend Data



Source: Washington State Department of Health, Birth Certificate, Abortion, and Fetal Death Data

**Trends:**

- **Ages 15-17:** There was a significantly decrease in pregnancies among 15-17 year olds from 1997 until 2003, but from 2004-2007 there was no significant change in the pregnancy rate.
- **Ages 18-19:** There was a significantly decrease in pregnancies among 18-19 year olds from 1997 until 2004, but from 2005-2007 there was no significant change in the pregnancy rate.

**Adolescent Births**

<b>Adolescent Birth Rates per 1,000, Washington State and United States, 2007</b>			
	<b>WA Number<sup>22</sup></b>	<b>WA Rate per 1,000</b>	<b>U.S. Rate per 1,000<sup>23</sup></b>
<b>Age</b>			
Age 10-14	89	<b>0.4</b>	<b>0.6</b>
Age 15-17	2,217	<b>16.1</b>	<b>22.2</b>
Age 18-19	5,210	<b>57.9</b>	<b>73.9</b>
Age 15-19	7,427	<b>32.6</b>	<b>42.5</b>
<b>Race/Ethnicity (ages 15-17)</b>		(± margin of error)	
White, Non-Hispanic	935	<b>9.0</b> (± 0.6)	<b>11.8</b>
Black, Non-Hispanic*	124	<b>20.5</b> (± 3.6)	<b>35.8</b>
American Indian, Non-Hispanic*	118	<b>42.6</b> (± 7.5)	<b>31.7</b>
Asian/ Pacific Islander, Non-Hispanic*	53	<b>5.1</b> (± 1.4)	<b>8.4</b>
Hispanic*	939	<b>64.6</b> (± 4)	<b>47.8</b>
<b>Rural- Urban Residence (ages 15-17)</b>		(± margin of error)	
Urban	1,732	<b>15.6</b> (± 0.7)	**
Rural***	482	<b>20.4</b> (± 1.8)	**

\*\* Data not available

Source: Washington State Department of Health, Birth Certificates

\* Significant difference compared to non-Hispanic Whites based on significance testing with p&lt; 0.05

\*\*\*Sign difference at p&lt;0.05

**Disparities:**

For Washington 15-17 year olds in 2007, birth rates were **higher** among teens living in rural areas of the state. Birth rates were **higher** among Hispanic, Non-Hispanic Black and Non-Hispanic American Indian teens—and significantly **lower** among Non-Hispanic Asian/Pacific Islander teens—compared to Non-Hispanic White teens

**Additional Data:**

- Reducing adolescent pregnancies to no more than 43 per 1,000 females ages 15-17 is one of the **21 National Critical Health Objectives** for adolescents and young adults. Other related Healthy People 2010 objectives are to increase the proportion of adolescents who have never engaged in sexual intercourse to 75 percent; to increase the proportion of sexually active adolescents ages 15-17 who use contraception; and to reduce unintended pregnancies.<sup>24</sup>
- The teen birth rate in the United States remains much higher than in other industrialized countries and in 2006 was one and a half times higher than the teen birth rate in the United Kingdom.<sup>25</sup>

<sup>22</sup> Birth Certificate Data: Washington State Department of Health, Center for Health Statistics, VISTA<sub>PHW</sub> Accessed July 2009.

<sup>23</sup> Hamilton, BE, Martin, JA, Ventura, SJ. National Vital Statistics Reports 57(12). Births: Preliminary Data for 2007.

[http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57\\_12.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57_12.pdf)

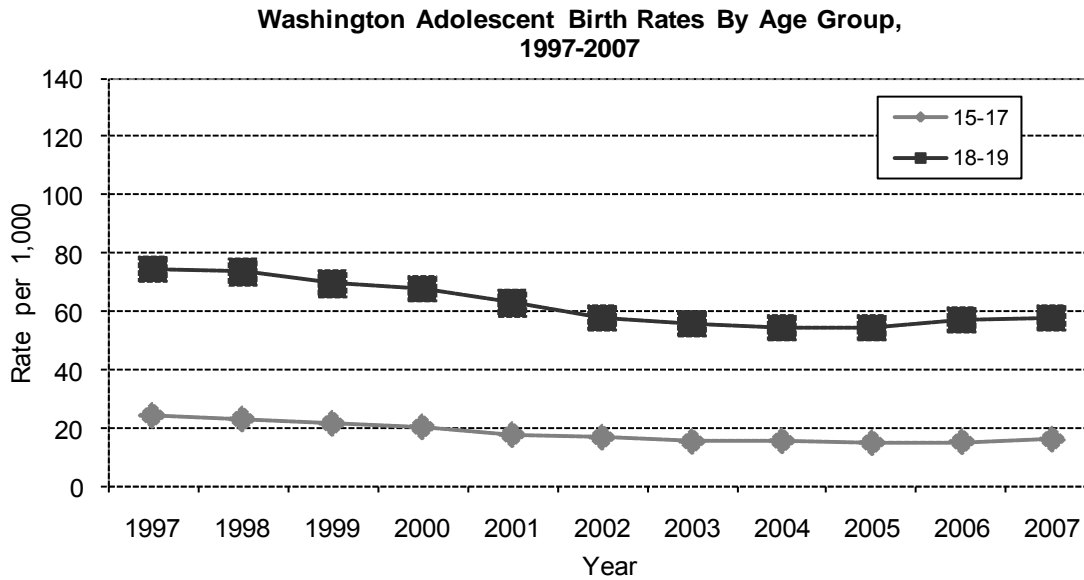
<sup>24</sup> Department of Health and Human Services (US). Healthy People 2010: Understanding and Improving Health. 2nd edition. Washington, DC: US Government Printing Office; November 2000.

<sup>25</sup> Santelli, J S; Orr M; Lindberg L D; Diaz D C. Changing behavioral risk for pregnancy among high school students in the United States, 1991-2007. *Journal of Adolescent Health*, 2009 (45), 25-32.



- National studies suggest that after years of steady decline, adolescent birth rates have been stable since 2004, and there is a recent increase in teen births that is not statistically significant.<sup>26</sup>

**Trend Data:**



Source: Washington State Department of Health, Birth Certificates

**Trends:**

- **Ages 15-17:** There was a significant decrease in birth rates among 15-17 year olds from 1997 until 2003, but from 2003-2007 there was no significant change in birth rates.
- **Ages 18-19:** There was a significant decrease in birth rates among 18-19 year olds from 1997 until 2004, but from 2004-2007 there was no significant change in birth rates.

<sup>26</sup> Sexual and Reproductive Health of Persons Aged 10-14 Years—United States, 2002-2007. MMWR Surveillance Summaries, July 17, 2009, 58(SS06);1-58. Accessed July 22, 2009 from: [http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5806a1.htm?s\\_cid=ss5806a1\\_e#tab4](http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5806a1.htm?s_cid=ss5806a1_e#tab4)

**Sexually Transmitted Diseases****Chlamydia** \*Critical Health Objective\*

<b>Chlamydia Rates per 100,000, Washington State (2008) and United States (2007)</b>			
<b>Characteristic</b>	<b>WA Number</b>	<b>WA Rate per 100,000<sup>27</sup></b>	<b>U.S. Rate per 100,000 (2007)<sup>28</sup></b>
<b>Age</b>			
Age 10-14	225	<b>51.8</b>	<b>66.1</b>
Age 15-19	6,390	<b>1,353.5</b>	<b>1,779.3</b>
Age 10-19	6,615	<b>729.5</b>	-
<b>Gender (ages 15-19)*</b>			
Male	1037	<b>427.7</b>	<b>615.0</b>
Female	5,353	<b>2,330.9</b>	<b>3,004.7</b>
<b>Race/Ethnicity (ages 15-19)</b>			
White, Non-Hispanic	2,823	<b>857.6</b>	<b>787.7</b>
Black, Non-Hispanic*	942	<b>5,048.8</b>	<b>6,052.0</b>
American Indian, Non-Hispanic	164	<b>1,881.2</b>	<b>2,547.7</b>
Asian/Pacific Islander , Non-Hispanic	231	<b>624.8</b>	<b>465.0</b>
Hispanic*	963	<b>1,634.5</b>	<b>1,720.4</b>

*Data Source: Washington State Department of Health, Infectious Disease and Reproductive Health Office*

\* Significant difference compared to non-Hispanic Whites based on significance testing with  $p < 0.05$

**Disparities:**

- **Gender:** Among Washington 15-19 year olds, reported Chlamydia rates are nearly six times higher in females compared to males. Females are tested more frequently than males for Chlamydia, and are more likely to engage in risky behaviors with older male partners.<sup>27</sup>
- **Race:** In Washington, despite a large proportion of missing data on race/ ethnicity, there is a disparity in Chlamydia rates between Black adolescents compared to Whites, and an emerging disparity between Hispanic adolescents and Whites. This may be related to underlying disparities in income, access to care, and education between these populations.

**Additional Data:**

- Reducing Chlamydia infections is one of the **21 National Critical Health Objectives** for adolescents and young adults. The Healthy People 2010 goal is to decrease the proportion of

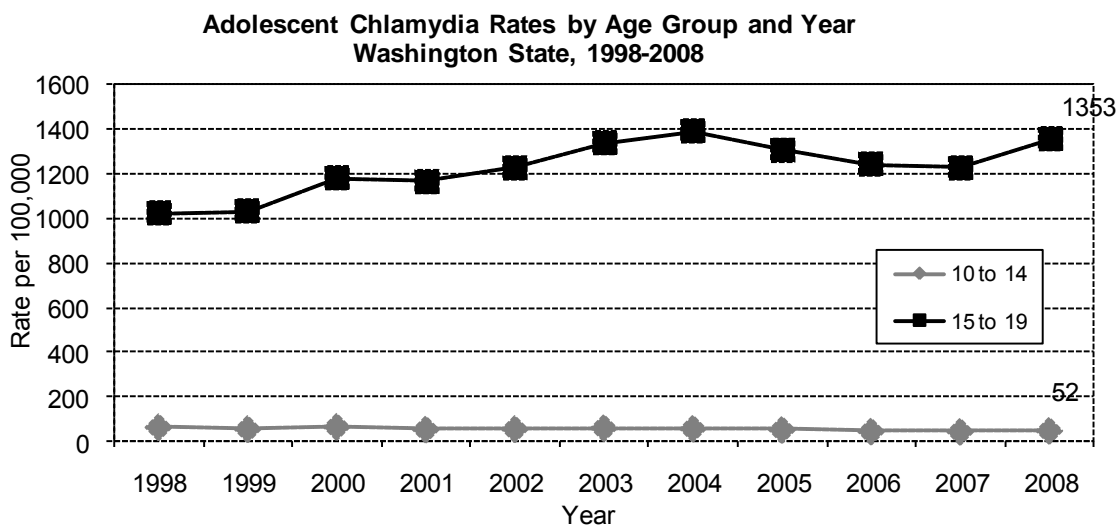
<sup>27</sup> Data provided by Mark Stenger, Office of Infectious Disease and Reproductive Health, DOH. Because of the large amount of missing data on race/ ethnicity, these rates are presented for completeness and informational purposes only. Caution should be used in comparing rates by race. Please see technical notes for more detailed explanation.

<sup>28</sup> Centers for Disease Control & Prevention. Table 10 Chlamydia — Reported cases and rates per 100,000 population by age group and sex: United States, 2003–2007 <http://www.cdc.gov/std/stats07/tables/10.htm>

15 to 24 year olds with Chlamydia infections to 3 percent among those attending family planning or STD clinics.<sup>29</sup>

- Chlamydia is the most commonly reported Sexually Transmitted Disease (STD) in both Washington and in the United States. It may be asymptomatic.
- Untreated Chlamydia infection may cause pelvic inflammatory disease (PID), infertility, chronic pelvic pain, and ectopic pregnancy. It can be transmitted to infants resulting in eye infection and pneumonia. It also increases risk for transmission of HIV and other STDs.
- In 2008, about 31 percent of all Washington State Chlamydia cases occurred among 15-19 year olds. In Washington, Chlamydia infection is most common among 20-24 year old females.<sup>30</sup>

**Trend Data:**



*Data Source: Washington State Department of Health, Infectious Disease and Reproductive Health Office*

**Trends:** In Washington, Chlamydia rates among 15-19 year old adolescents significantly increased from 1998 to 2008. This may be because of better tests, more screening, and improved surveillance in addition to a possible increase in sexual risk behaviors.

<sup>29</sup> Department of Health and Human Services (US). Healthy People 2010: Understanding and Improving Health. 2nd edition. Washington, DC: US Government Printing Office; November 2000.

<sup>30</sup> STI Fast Facts: Washington State 2008, Washington State Department of Health. Accessed July 2009 from: <http://www.doh.wa.gov/cfh/STD/Morbidity2008/FFWEBVer08.pdf>

## Gonorrhea

<b>Gonorrhea Rates per 100,000, Washington State (2008) and United States (2007)</b>			
<b>Characteristic</b>	<b>WA Number</b>	<b>WA Rate per 100,000<sup>31</sup></b>	<b>U.S. Rate per 100,000 (2007)<sup>32</sup></b>
<b>Age</b>			
Age 10-14	35	<b>8.1</b>	<b>19.2</b>
Age 15-19	642	<b>136.0</b>	<b>462.3</b>
Age 10-19	677	<b>74.7</b>	-
<b>Gender (ages 15-19)*</b>			
Male	172	<b>70.9</b>	<b>286.0</b>
Female	470	<b>204.7</b>	<b>647.9</b>
<b>Race/Ethnicity (ages 15-19)</b>			
White, Non-Hispanic	223	<b>67.7</b>	<b>118.0</b>
Black, Non-Hispanic*	203	<b>1,088.0</b>	<b>2,237.2</b>
American Indian, Non-Hispanic	17	<b>195.0</b>	<b>288.0</b>
Asian/Pacific Islander, Non-Hispanic	23	<b>64.0</b>	<b>55.3</b>
Hispanic	59	<b>100.1</b>	<b>208.1</b>

Data Source: Washington State Department of Health, Infectious Disease and Reproductive Health Office

\* Significant difference compared to non-Hispanic Whites based on significance testing with  $p < 0.05$

**Disparities:**

- **Gender:** In 2007, Gonorrhea rates in Washington were two and a half times higher in female 15-19 year olds than males. For females ages 15-19, the incidence was 248 per 100,000 and for males ages 15-19 the incidence was 97 per 100,000.
- **Race:** Nationally among 15-19 year old African American females, Gonorrhea rates are much higher than for any other group; prevalence was approximately 3 percent among African American adolescent females in 2005. But disparities in Gonorrhea rates between blacks and whites are greatest for adolescent males, with a rate ratio of 36 in 2005.<sup>33</sup>
- In Washington State, despite a large proportion of missing data on race/ethnicity, there is a disparity in Gonorrhea infections between Black adolescents and all other races. This may be related to underlying disparities in socioeconomic status, access to care and education between populations.

**Additional Data:**

- The **Healthy People 2010 objective**, which is not adolescent specific, is to reduce Gonorrhea to no more than 19 cases per 100,000 population.<sup>34</sup>

<sup>31</sup> Data provided by Mark Stenger, Office of Infectious Disease and Reproductive Health, DOH. Because of the large amount of missing data on race/ ethnicity, these rates are presented for completeness and informational purposes only. Caution should be used in comparing rates by race. Please see technical notes for more detailed explanation.

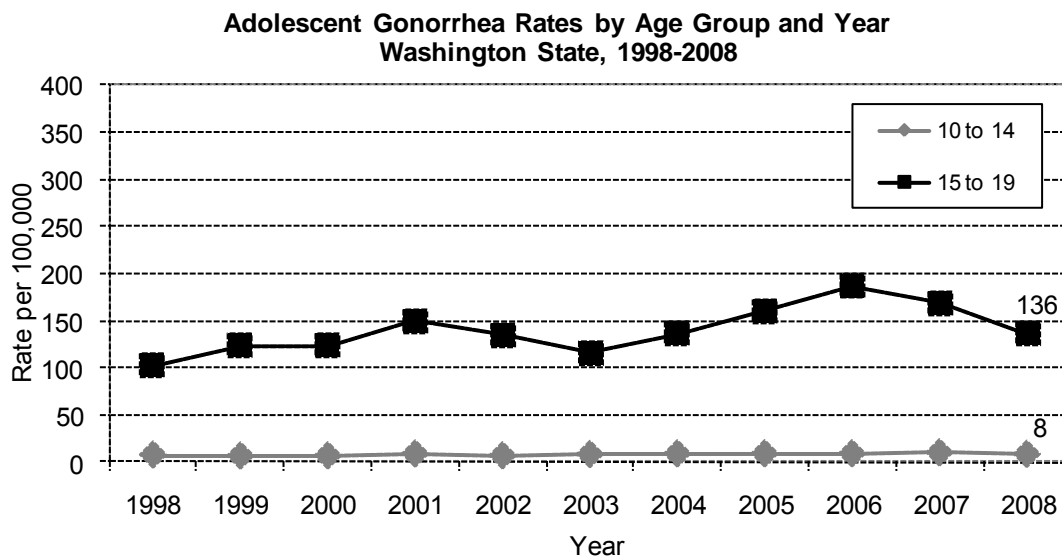
<sup>32</sup> Centers for Disease Control and Prevention. Table 20. Gonorrhea — Reported cases and rates per 100,000 population by age group and sex: United States, 2003–2007. <http://www.cdc.gov/std/stats07/tables/20.htm>

<sup>33</sup> Center for Disease Control & Prevention Division of STD Prevention. Consultation to Address STD Disparities in African American Communities: Meeting Report 2007. <http://www.cdc.gov/std/general/STDHealthDisparitiesConsultationJune2007.pdf>

<sup>34</sup> Department of Health and Human Services (US). Healthy People 2010: Understanding and Improving Health. 2nd edition. Washington, DC: US Government Printing Office; November 2000.

- Nationally and in Washington, Gonorrhea is more common among 20-24 year old young adults than among adolescents. However, Gonorrhea is the second most common reportable STD among adolescents nationally and in Washington State. Gonorrhea is more common in adolescent females than males, but this may be because females are more likely to be tested, and because adolescent females are more likely to engage in risky sexual behaviors with older male partners.<sup>35</sup>
- Risks of untreated Gonorrhea infection include Pelvic Inflammatory Disease (PID), infertility, ectopic pregnancy and chronic pelvic pain. Infection may also facilitate HIV transmission.

**Trend Data:**



*Data Source: Washington State Department of Health, Infectious Disease and Reproductive Health Office*

**Trends:** In Washington, there has been no significant change in trend in adolescent Gonorrhea rates from 1998 to 2008.

<sup>35</sup> Centers for Disease Control and Prevention. Sexual and Reproductive Health of Persons Aged 10–24 Years — United States, 2002–2007. Surveillance Summaries, July 17, 2009 . MMWR 2009;58(No. SS-6).

## Other Sexually Transmitted Diseases

### Human Papillomavirus

- Human Papillomavirus (HPV) is estimated to be the most common sexually transmitted infection in the United States, and HPV infections are believed to be most prevalent among 20-24 year old women.<sup>31</sup> There are no Washington data on HPV prevalence among teens. Nationally, one study found the prevalence of all strains of HPV was about 25 percent among 14-19 year old females in 2004. Adolescent male population HPV prevalence is unknown.<sup>36</sup>
- Disparities: Nationally, HPV infection is more prevalent among women living below the poverty line, women who are Black or Hispanic, and women who are unmarried.<sup>37</sup>
- There are many strains of HPV. Some are asymptomatic, and others may cause the growth of warts on the external genitals or surrounding areas. HPV may be transmitted through sexual contact even when warts are not present, and when there are no symptoms of the virus.<sup>38</sup>
- Most HPV infections will resolve over time without requiring medical treatment, but some strains of HPV can cause cervical cancer in women if left untreated over a long period of time.<sup>31</sup> Receiving a cervical pap test by age 21, or within three years of beginning sexual activity (whichever comes first) will help determine if medical treatment is needed.<sup>39</sup>
- The HPV vaccine protects against some strains of HPV that may cause genital warts or cervical cancer and is recommended for all adolescent females.<sup>40</sup> In 2008, 47% of Washington girls ages 13-17 had been vaccinated against HPV, compared to 37% nationally. Using a condom significantly reduces the risk of sexual transmission of all strains of HPV.<sup>34</sup>

### Herpes Simplex Virus

- Herpes Simplex Virus (HSV) Type 1 is a virus usually transmitted during childhood via nonsexual contact. HSV-1 may be called Oral Herpes and usually results in sores or lesions around the mouth. Herpes Simplex Virus Type 2, which is sometimes called Genital Herpes, usually results in sores or lesions in the genital area, and is one of the most prevalent sexually transmitted infections in the world.<sup>37</sup>
- There are no Washington data on the prevalence of Herpes Simplex Virus among adolescents. Nationally, in 2004, HSV-2 prevalence was estimated to be about 2 percent among 14-19 year olds. HSV-1 prevalence was around 39 percent among 14-19 year olds.<sup>42</sup>
- Both HSV-1 and HSV-2 can be transmitted sexually, orally, or during oral sex, and both are more common among female adolescents than males.<sup>37</sup> Both HSV-1 and HSV-2 may be

<sup>36</sup> Dunne, E F; Unger, E R.; Sternberg, M; et al. Prevalence of HPV Infection Among Females in the United States *JAMA*. 2007;297(8):813-819.

<sup>37</sup> Kahn, J A; Dongmei, L; Kahn, R S. Sociodemographic factors associated with high-risk human papillomavirus infection. *Obstetrics & Gynecology*. 2007; 110 (1): 87-95

<sup>38</sup> Centers for Disease Control and Prevention. STD Facts—Human Papillomavirus. Accessed August 2009 from: <http://www.cdc.gov/STD/HPV/STDFact-HPV.htm>

<sup>39</sup> Centers for Disease Control and Prevention. Cervical Cancer Screening. Accessed August 2009 from: [http://www.cdc.gov/cancer/cervical/basic\\_info/screening.htm](http://www.cdc.gov/cancer/cervical/basic_info/screening.htm)

<sup>40</sup> Washington State Department of Health. HPV Vaccine. July 2009. Accessed July 17, 2009 from: <http://www.doh.wa.gov/cfh/immunize/documents/hpvvaccinefactsheet.pdf>

<sup>41</sup> Source: MMWR Weekly: National, State, and Local Area Vaccination Coverage Among Adolescents Aged 13–17 Years --- United States, 2008. September 18, 2009/ 58(36):997-1001 Accessed at: [www.cdc.gov/mmwr/preview/mmwrhtml/mm5836a2.htm?s\\_cid=mm5836a2\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5836a2.htm?s_cid=mm5836a2_e)

<sup>42</sup> Xu, F; Sternberg, M; Kottiri, B; et al. Trends in Herpes Simplex Virus Type 1 and Type 2 Seroprevalence in the United States. *JAMA*, 2006. 296(8): 964-973.

asymptomatic, but are still transmissible even when sores or lesions are not present. Using a condom significantly reduces the risk of sexual transmission of both strains of HSV.

### Human Immunodeficiency Virus (HIV) Disease **Critical Health Objective**

- The Centers for Disease Control and Prevention estimates that there are approximately 1.2 million people currently living with HIV disease in the United States, including people who have AIDS.<sup>43</sup>
- Nationally, reported HIV disease cases are most prevalent among those ages 35-44 years.
- While African Americans make up approximately 13 percent of the United States population, they account for about half (49 percent) of all new HIV diagnoses.<sup>44</sup>
- Reducing the number of new HIV infections among youth ages 13-24 years is one of the **21 National Critical Health Objectives** for adolescents and young adults. A related Healthy People 2010 objective is to reduce AIDS among adolescents and adults to no more than 1 case per 100,000.<sup>45</sup>

#### Washington Incidence and Prevalence:<sup>46</sup>

- Between 2004 and 2008, on average there were about 9 new HIV cases per year among Washington youth ages 10-19. Trends have been stable.
- As of 12/31/2008, there were sixty-two Washington youth ages 10-19 who had been diagnosed and were living with HIV disease (including those with AIDS). The majority of prevalent youth cases are male (69 percent).
- Because of the very small number of AIDS cases among adolescents in Washington State, no reliable estimate of adolescent AIDS incidence or prevalence is available.

#### Primary method of transmission for youth in Washington:

- Most new youth HIV cases in Washington are attributed to unprotected sex.
- Among 10-19 year old males, over 80 percent of new HIV cases are believed to be the result of unprotected sexual contact with an HIV-infected male.
- Among 10-19 year old females, over 60 percent of new HIV cases are believed to be the result of unprotected heterosexual contact with an HIV-infected male partner.

#### Demographics:

- Gender: Of the forty-seven 10-19 year old youth who were newly diagnosed with HIV in Washington between 2004 and 2008, 60 percent were male.
- Age: Most youth HIV cases in Washington (over 70 percent) occur among adolescents ages 18 or 19 at initial HIV diagnosis.
- Race and Ethnicity: While the majority of youth in Washington who are newly diagnosed with HIV are White (62 percent between 2004 and 2008), a disproportionate number based on the population of this age group are either Black (23 percent) or Hispanic (11 percent).

<sup>43</sup> Centers for Disease Control and Prevention, Division of HIV/AIDS Prevention. Accessed August 2009 from:

<http://www.cdc.gov/hiv/stats.htm#hivest>

<sup>44</sup> Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report: Cases of HIV Infection and AIDS in the United States and Dependent Areas, 2005. Rev. 2007. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2005report/pdf/2005SurveillanceReport.pdf>

<sup>45</sup> Department of Health and Human Services (US). Healthy People 2010: Understanding and Improving Health. 2nd edition. Washington, DC: US Government Printing Office; November 2000.

<sup>46</sup>Data provided by Washington State Department of Health, Infectious Disease and Reproductive Health Assessment Unit, Jason Carr