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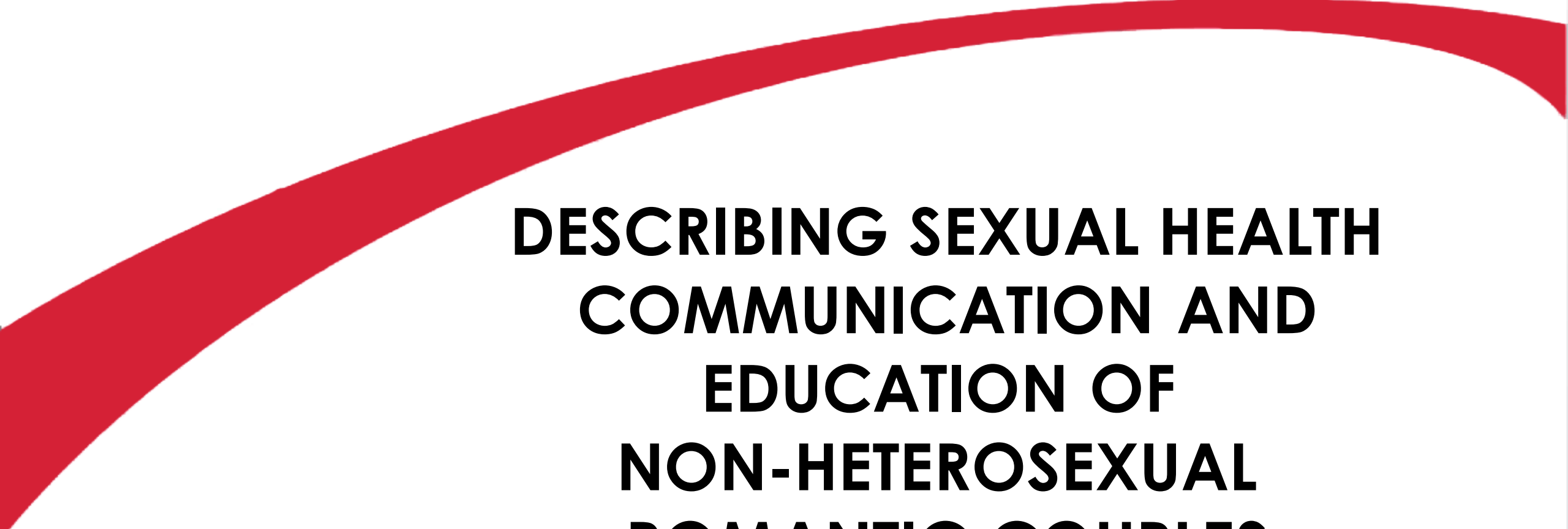
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Describing Sexual Health Communication and Education of Non-Heterosexual Romantic Couples

Cami Allen

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DESCRIBING SEXUAL HEALTH COMMUNICATION AND EDUCATION OF NON-HETEROSEXUAL ROMANTIC COUPLES



Cami Allen

Faculty Mentors:

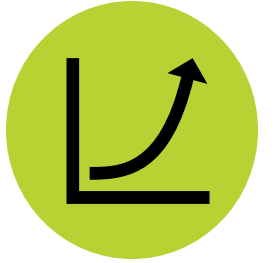
Katherine Bonafide, PhD & Kaitlin
Flannery, PhD

Sexual Health Risks Statistics

STI rates are currently at a peak and can pose many serious health risks if left untreated



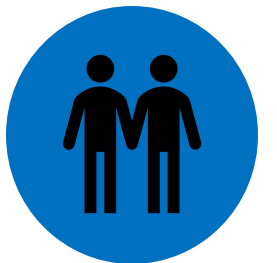
Since **2014**, cases of Gonorrhea, Chlamydia, and Syphilis have increased by **63%**, **19%**, and **71%**, respectively.



Individuals aged **15-24** account for **50%** of STI reports



Gay and bisexual men are at an increased risk for contracting STIs



Previous Research

- Past sexual health research tends to predominantly focus on MSM populations (CDC, 2019)
 - Newfound studies suggests there may be discrepancies in sexual health education for LGBTQ+ youth (Jarpe-Ratner, 2020; Hall et al., 2019; Roberts et al., 2020)
 - Research also suggests evidence of knowledge gaps for LGBT individuals in primary care settings (Manzer et al., 2018)
 - A study in 2016 analyzed the types of sexual health and behavior related messages that are online for lesbian & bisexual women (Faulkner & Lanutti)
- It is hypothesized that unsafe sexual health practices in these groups could be related to a lack of sexual health education resources that are accurate and accessible
 - This study seeks to analyze these components of sexual education and communication through observing and surveying ten college-aged LGBTQ+ romantic couples about their willingness and comfortability talking about sex and sexual health-related behaviors with each other as well as where they get their sex ed information

THE CURRENT STUDY

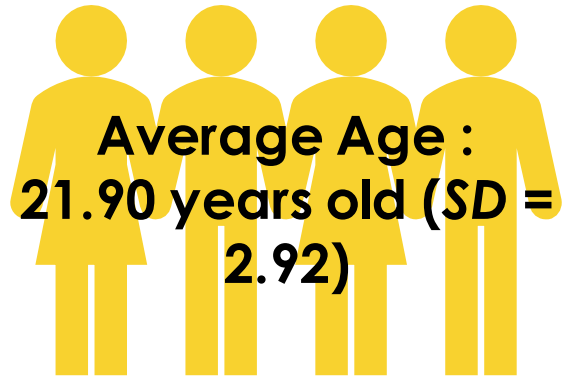


Uses qualitative measures to address the following research questions:

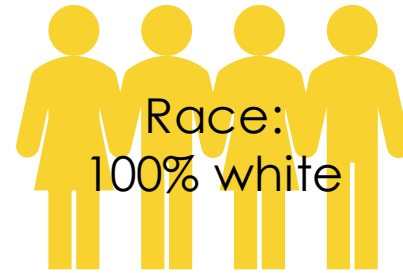
How long will LGBTQ+ individuals talk about sex related topics after being prompted?

Where do LGBTQ+ members get their sexual health-related information from?

What common themes emerge about sexual health communication and education among members of this community?



**Average Age :
21.90 years old (*SD* =
2.92)**



Race:
100% white



Gender Identity:
60% female, 30%
Nonbinary, 10%
Male

Participants

- 5 non heterosexual dyads were convenience sampled for the study ($N=10$)
- In order to qualify for the study, participants had to identify as members of the LGBTQ+ community
- Participants needed to attend the study with a partner in which they self-identified as romantic
- All participants gave informed consent, were debriefed following the study, and were each given a \$10 incentive for participation

Measures

Sex Ed Information Sources Scale

- This scale utilized a combination of new questions created by the researchers specifically for this study and previously created prompts (Vanable & Carey, 2008)
- Participants were asked "Who had taught you the most about sex?"
 - 6 participants answered, "my friends," 2 responded "my teachers," and 2 answered "no one taught me about sex"
- Participants were asked where they go to get information about sexual health
 - Out of the choices: mother, father, siblings, friends, romantic partner, the internet, social media, and healthcare providers, 5 participants rated the internet as the most frequent place they go

Post Comfort Talking About Sex Scale

- At the end of the study, participants were asked to rate their comfortability discussing sex related topic with their accompanying partner
- This was measured on a scale of one, not comfortable, to six, really comfortable
- Participants reported feeling comfortable discussing these topics ($M=5.48$, $SD=0.73$)

Measures

- After completing online surveys, participants were given two different prompts, one at a time
- They were asked to talk about the prompt for as long as they desired to for up to five minutes each
- Researchers left the room during the conversations, but they were recorded for qualitative purpose
- On average, participants talked about sexual health related topics for about 9.335 out of ten possible minutes after being prompted

Prompt 1

The State of STDs in the United States in 2018

STDs SURGE FOR THE FIFTH STRAIGHT YEAR, REACHING AN ALL-TIME HIGH.

1.8 million CASES OF CHLAMYDIA
19% rate increase since 2014

583,405 CASES OF GONORRHEA
63% rate increase since 2014

115,045 CASES OF SYPHILIS
71% rate increase of infectious syphilis since 2014

1,306 CASES OF SYPHILIS AMONG NEWBORNS
185% rate increase since 2014

LEARN MORE AT: www.cdc.gov/std/

Anyone who has sex is at risk, but some groups are more affected

- YOUNG PEOPLE AGED 15-24
- GAY & BISEXUAL MEN
- PREGNANT WOMEN

LEFT UNTREATED, STDs CAN CAUSE:

 - PREGNANT OR BIRTH DEFECTS

SIMPLE STEPS TO TREAT

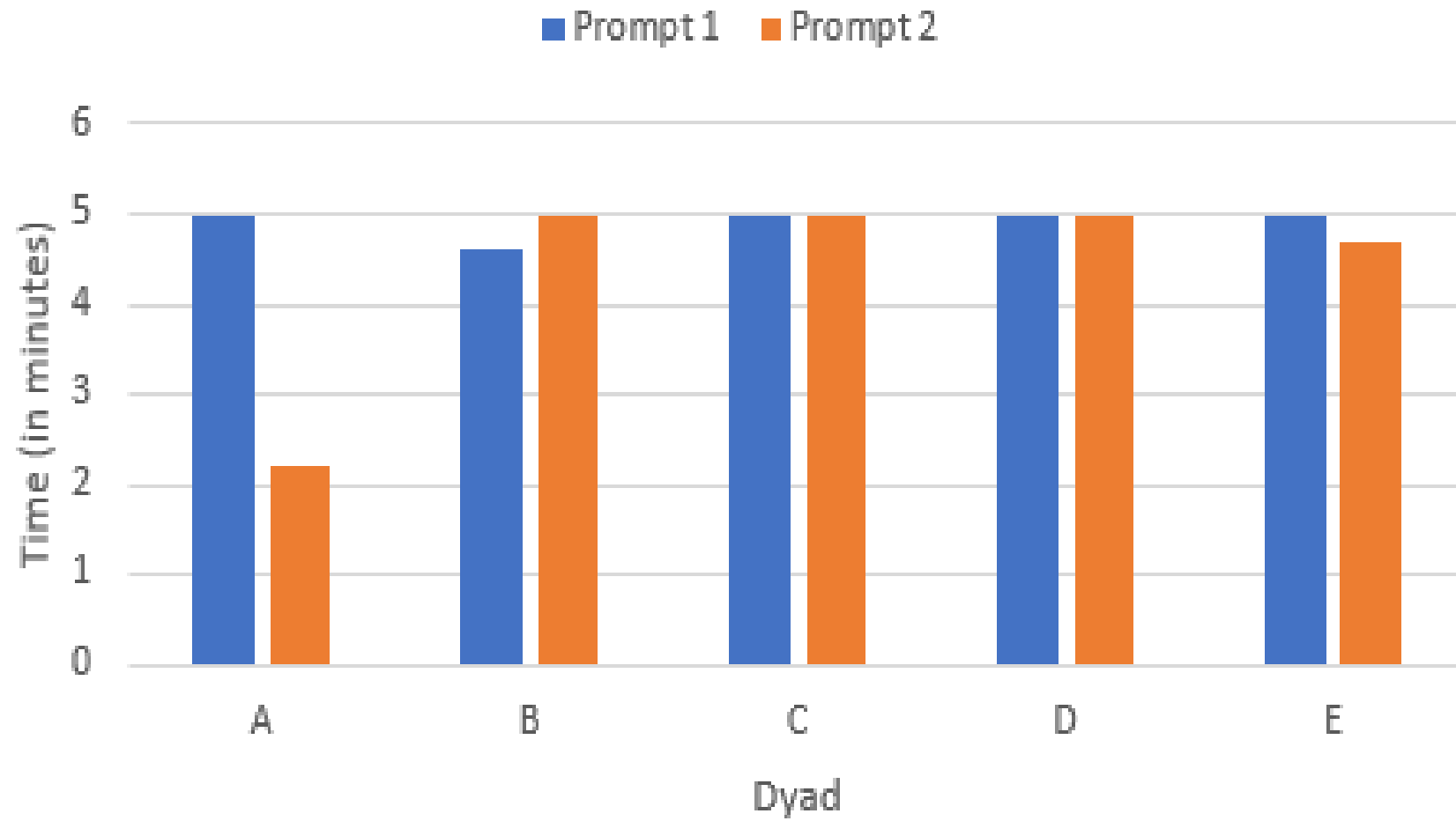
Centers for Disease Control and Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

Prompt 2

Charlie and Jordan have been having sex for the past month. Jordan has been seeing other people on the side and finds out another sex partner has an STD.

What do you think Jordan should do?

Time Spent Talking About Sex-Related Topics



QUOTES

"Can you get an STD from a lesbian woman?"

"You know, it sucks gay people are more at risk for this stuff."

"Also sex health isn't exactly taught as well for gay people."

"Being so close to the health center through college kind of like made me more aware [about sex education]."

"I always forget about like condoms for like lesbians."

Well also, like, you were never taught sex ed or anything in school."

"The public education system... it didn't help me because... it was not catered to gay people."

And I'd like to know more... [about untreated STDs leading to increased HIV risk]."

Emerging Themes



Lack of Education

- The most common and emerging theme evident in the dialogue between participants is that sexual education for LGBTQ+ individuals was not accessible, accurate, or addressed during their school years when most young teens were taught heteronormative sexual education

Curiosity

- Despite the lack of education and resources, participants used dialogue that suggested interest in discussing and learning more about sexual health topics. This is also evident in the time overall time spent talking about sex. This is important to note as it may support a hypothesis that the lack of knowledge does not stem from an unwillingness to learn

Future Research Implications

With such a small sample, comparative analysis were not applicable. Despite this shortcoming, the theme of lack of education resources was exemplified, still.

This study could be replicated using a larger sample of LGBTQ+ couples and therefore could introduce more data trends regarding sexual health education and communication amongst this minority.

Future research should continue to study sexual education history and experiences of LGBTQ+ community members as this newfound information could contribute to the creation of better education programs for young teens that could in turn could lead to safer sex practices.

Pinpointing where young adults seek sexual health information is valuable in order to provide accurate information in places they are already looking.

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