



Young Women

How do we know young women are at risk?

- The fastest growing group receiving new positive HIV tests is occurring among Canadian women in the 15-29 years of age group. In 2005, women in this age group accounted for 35% of overall cases among women, which is a slight decrease from 43% in 2004 and 45% in 2001¹.
- As of 2005, there were 3,177 young women between the ages of 15-29 diagnosed with HIV in Canada².
- In Ontario, there have been 1,188 women between the ages of 15-29 diagnosed with HIV³.

What puts young women at risk?

- A woman's 'childbearing years' are often a time of sexual and drug initiation and exploration. Consequently, specific high-risk behaviours, such as unprotected sexual intercourse and drug/alcohol use, are increasingly putting young women at risk for HIV.
- Research has found that a large percentage of female youth are engaging in unprotected sex and many are also engaging in sex at an earlier age than young women of the past⁴.
- Social issues such as violence, social and economic inequalities, as well as young women's biological vulnerability to HIV, increase a young woman's individual risk.
- Additional issues such as street involvement⁵, homophobia and transphobia as experienced by lesbian/transgendered/bisexual youth⁶, and the partnering of younger women with older male sexual partners⁷, have also been linked to increased HIV risk.

Research

- A study was conducted in 2003 in Nova Scotia to identify information gaps and obstacles to sexual health decision-making among young heterosexual males in relation to their female sexual partners in an effort to prevent the further spread of HIV infection. The general findings suggest alarming trends occurring among this population: 1) males were less likely to talk openly about sex and seek information/resources for fear of looking unknowledgeable; 2) most youth reported not using condoms consistently; 3) pregnancy prevention was the major concern of youth; 4) most youth did not feel they were personally at risk of acquiring HIV; and 5) the women interviewed generally reported taking on the responsibility for birth control and safer sex.⁸
- In a Vancouver study among young injection drug users, it was found that women were more likely to have HIV, have a history of sexual abuse, engage in survival sex, inject heroin daily and have a higher number of sexual partners⁹.

HIV Prevention in Ontario



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- In 2002, the Canadian Council of Ministers of Education conducted a study to determine youth's knowledge about HIV/AIDS and the use of condoms and found that today's youth are less knowledgeable and less likely to use condoms than the youth of a decade ago¹⁰.

HIV prevention efforts for young women

- The social and economic context within which young women live must be recognized as having a strong influence on their individual risk behaviours. Supporting young women, couples, families and communities in addressing the HIV risk issues found within individual communities is crucial.
- Skills building around healthy decision-making and sexual negotiations, gender-based analysis, and the identification of social structures that support or act as barriers to healthy decision making, are essential.
- Successful HIV prevention efforts are often community-based, theoretically driven, and have strong evaluation and dissemination plans.

Recommendations

1. Create accessible, youth-friendly (age appropriate), gender-sensitive health resources for young women and men.
2. Ensure HIV, STI, teenage pregnancy, and substance use information is available and accessible for all youth.
3. Ensure condoms are readily available to youth.
4. Create opportunities for youth to discuss sexual decision-making, roles, responsibilities and risks.
5. Involve youth in the planning, implementation, evaluation and dissemination phases of HIV prevention interventions aimed at youth.
6. Use theory and existing literature to help guide youth interventions (i.e., Social Cognitive Theory, peer educators, mentoring programs, skill building).
7. Tailor HIV and STI education programs for youth with different lived experiences, such as ethnic minority youth, street-involved youth, youth in detention facilities or youth who use drugs.
8. Promote HIV testing and counseling for youth engaging in risk behaviours.

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¹ Public Health Agency of Canada. (2006). *HIV/AIDS Epi Updates, August 2006*. Ottawa, ON: Surveillance and Risk Assessment Division, Centre for Infectious Disease Prevention and Control.



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² Public Health Agency of Canada. (2005). *HIV/AIDS Epi Updates, May 2005*. Ottawa, ON: Surveillance and Risk Assessment Division, Centre for Infectious Disease Prevention and Control.

³ Remis, R.S., Swantee, C., Schiedel, L. et al. (2006). *Report on HIV/AIDS in Ontario, 2004*. Toronto, ON: University of Toronto.

⁴ Carvajal, S.C., Parcel, G.S., Banspach, S.W. et al. (1999). *Psychosocial predictors of delay of first sexual intercourse by adolescents*. *Health Psychology*, 18(5): 443-452.

⁵ Public Health Agency of Canada. (2003). *HIV/AIDS among youth in Canada*. Ottawa, ON: Centre for Infectious Disease Prevention and Control.

⁶ Clifton, C.E. (2001). *The young and the restless*. *Positively Aware*. March/April 2001.
http://www.thebody.com/tpan/marapr_01/young.html.

⁷ Miller, K.S., Clark, L.F. & Moore, J.S. (1997). *Sexual initiation with older male partners and subsequent HIV risk behavior among female adolescents*. *Family Planning Perspectives*, 29: 212-214.

⁸ Gahagan, J. & Rehman, L. (2004). *Mind the Sex Gap: Bridging Sexual and Reproductive Health and HIV Prevention for Young Heterosexual Males*. [www document] <http://www.thebuddystudy.com>

⁹ Miller, C.L., Spittal, P.M., LaLiberte, N. et al. (2002). *Females experiencing sexual and drug vulnerabilities are at elevated risk for HIV infection among youth who use injection drugs*. *Journal of Acquired Immune Deficiency Syndromes*. 30: 335-341.

¹⁰ Council of Ministers of Education. (2003). *Canadian Youth, Sexual Health and HIV/AIDS Study: Factors Influencing Knowledge, Attitudes and Behaviours*. Ottawa, ON: Canadian Strategy on HIV/AIDS.