



Sexual Sensation Seeking, Transactional Sex, and Rural African American Cocaine Users

Donna Gullette, DSN, APRN, ACNP-BC

Brenda M. Booth, PhD

Patricia B. Wright, PhD, MPH

Brooke E. E. Montgomery, PhD, MPH

Katharine E. Stewart, PhD, MPH

The purpose of this study was to explore correlates of sexual sensation seeking (SSS) in a sample of rural African American cocaine users. Respondent-driven sampling was used to recruit 251 participants from two impoverished rural counties in eastern Arkansas. Consistent with previous investigations, SSS scores were associated with being younger, being male, having more sexual partners, and having more unprotected sexual encounters in the previous 30 days. Multiple regression revealed that SSS was correlated with a number of oral sex acts, transactional sex (exchanging sex for food, shelter, drugs, money, or other commodities), and Addiction Severity Index drug composite. SSS continues to demonstrate a strong association with sexual risk behaviors in diverse populations, including vulnerable groups like this community. Interventions to reduce unsafe sexual behaviors among high-risk groups, including drug users and individuals who engage in transactional sex, should incorporate approaches that include high sensation seekers' needs for novelty and variety.

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As the related epidemics of HIV infection and other sexually transmitted infections (STI) continue to

evolve, rural populations have been increasingly identified as disproportionately affected, particularly ethnic minority individuals in rural areas. HIV, gonorrhea, and chlamydia have been noted as increasingly prevalent in rural populations since 1995, and there is a substantial disparity in infection rates for all of these diseases among African Americans in both predominantly urban and predominantly rural states (Boyer et al., 2006; Hall, Li, & McKenna, 2005).

One aspect of sexual risk-taking that may contribute to HIV and STI risk is sexual sensation seeking (SSS), defined as a tendency to pursue a variety of novel sexual experiences and to downplay

Donna Gullette, DSN, APRN, ACNP-BC, is the Associate Dean for Practice and Director of MNSc Programs, and a Professor, College of Nursing, University of Arkansas for Medical Sciences, Little Rock, Arkansas, USA. Brenda M. Booth, PhD, is a Professor, College of Medicine, Department of Psychiatry, University of Arkansas for Medical Sciences and Central Arkansas Veterans Healthcare System, Little Rock, Arkansas, USA. Patricia B. Wright, PhD, MPH, is an Assistant Professor, College of Nursing, University of Arkansas for Medical Sciences, Little Rock, Arkansas, USA. Brooke E. E. Montgomery, PhD, MPH, is an Assistant Professor, Fay W. Boozman College of Public Health, University of Arkansas for Medical Sciences, Little Rock, Arkansas, USA. Katharine E. Stewart, PhD, MPH, is an Associate Dean, Fay W. Boozman College of Public Health, University of Arkansas for Medical Sciences, Little Rock, Arkansas, USA.

the risks that may be associated with such experiences (Kalichman & Rompa, 1995). SSS has been examined in a variety of adult populations, including men who have sex with men, female and male college students, African American women, and heterosexuals (Gullette & Lyons, 2006; Monks, Tomaka, Palacios, & Thompson, 2010). SSS is associated with multiple risk behaviors, including engaging in unprotected sex and having multiple sexual partners and, in some investigations, with drug and alcohol use before sex (Gullette & Lyons, 2006; Kalichman & Rompa, 1995). However, the issue of SSS and its relationship to sexual risk behavior is somewhat understudied in rural populations, especially rural minorities.

Rural drug users may represent a population of particular concern for health providers, researchers, and educators. Rural drug-using communities are characterized not only by high rates of drug use, but also by small and closely related sexual networks, as well as by a number of high-risk behaviors, including multiple sexual partners, low rates of condom use, and infrequent HIV/STI testing (Wright, McSweeney, Frith, Stewart, & Booth, 2009; Wright et al., 2007).

Another risk behavior that has been well documented among cocaine users, including those in rural communities, is the existence of a sexual economy that involves repeated transactional sex, which may include trading oral or vaginal sex for food, shelter, or other necessities as well as for drugs or money (Adimora & Schoenbach, 2005; Wright et al., 2007). Typically, transactional sex has been related to lack of financial resources and frequently involves multiple sexual relationships, lack of condom use, and having sex while intoxicated (Dunkle, Wingood, Camp, & DiClemente, 2010). Understanding how transactional sex impacts rural African American women and their partners is important given that African American women experience higher rates of poverty and disparities in HIV risk (Dunkle et al., 2010). Unfortunately, little evidence exists linking SSS to transactional sex.

The purpose of our study was to explore the behavioral correlates of SSS among rural African American cocaine users. We hypothesized that SSS scores would be positively associated with age and male gender, and would be positively associated with rates of self-reported unprotected sex and number of sexual part-

ners. We also hypothesized that SSS scores would be associated with self-reported transactional sex. Further, we hypothesized that, consistent with other investigations (Kalichman, Cain, Zweben, & Swain, 2003; Kalichman & Rompa, 1995), SSS would be associated with frequency and severity of drug use. Given the importance of incorporating the potentially unique needs of high sensation seekers as well as understanding the role of transactional sex into sexual risk reduction efforts (Kalichman & Rompa, 1995), these findings may facilitate adaptation and development of programs for this underserved and vulnerable population.

Method

Our study used baseline data obtained in a larger randomized controlled trial to test an intervention to reduce sexual risk behaviors among rural African American cocaine users. All study procedures were reviewed and approved by the institutional review board of the University of Arkansas for Medical Sciences. A Certificate of Confidentiality was obtained from the National Institutes of Health, National Institutes on Drug Abuse prior to data collection procedures.

Participants

Recruitment. Respondent-driven sampling (RDS; Heckathorn, 1997; 2002) was used to recruit 251 participants from two contiguous rural counties in the Delta region of eastern Arkansas between February 2009 and February 2011. The counties are predominately African American, with high poverty rates and substantially higher rates of HIV and STIs than other areas of the state (Arkansas Department of Health, 2011a; 2011b). RDS, a variant of snowball sampling, is a sampling strategy that has been used with good results to recruit rural drug users in other studies (Booth, Leukefeld, Falck, Wang, & Carlson, 2006). Using RDS, initial recruits, known as “seeds,” were instructed to give referral coupons to “people like you” and ask those individuals to call the number on the card if they were interested in being in the study. If the person who received a coupon attended an interview and met eligibility criteria, the seed received

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