What Parents and Providers Need to Know About HIV Risk and Teens [1]

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The average teenager feels as if she or he could not possibly get HIV. Most believe that HIV only happens to other people. However, teens represent a growing share of people getting and living with HIV worldwide. In 2016, more than two million teens ages 10 to 19 were living with HIV. That same year, an estimated 260,000 adolescents who had been HIV-negative
acquired the virus. It is important that all teens take HIV seriously, get educated, and be tested if they have sex or use drugs.

**Risk Factors**

Teens and young adults make up the largest number of HIV cases reported in recent years. Globally, UNAIDS estimates that a young woman newly acquires HIV every minute. Young women account for more than six in ten young people living with HIV worldwide. In many countries, girls and young women have few or no privileges in the economic and social structures of their communities. As a result, they often have less access to HIV testing [2] and treatment as well as to prevention measures, such as condoms [3] and negotiating for safer sex [4]. Moreover, less than a third of young women worldwide have correct and thorough knowledge about HIV.

Violence against girls and women [5] also contributes to the number of young women who are living with HIV. UNAIDS reports that between 11 and 48 percent of the first sexual experiences of adolescent girls (less than 15 years old) were forced. In addition, early marriage is still common in many parts of the world. Adolescent girls who marry and become sexually active are more likely to drop out of school, have less ability to get and understand important health information, and have greater chances of acquiring HIV. Adolescent girls who get married often marry against their will and marry older men; these older men are more likely to have been exposed to HIV through sexual activity or injection drug use and therefore expose their young brides to HIV.

In the US, the Centers for Disease Control and Prevention (CDC) estimates that young people ages 13 to 24 accounted for more than one in five new HIV diagnoses in 2015, and 51% of them did not know they had acquired HIV. Young people living with HIV are also the age group least likely to have an undetectable viral load [6]. When a person living with HIV takes HIV drugs and their viral load drops to an undetectable level (too few copies of HIV in the blood for tests to measure), they are more likely to stay healthy and cannot transmit HIV to sexual partners [7].

One of the groups most at risk for HIV in the US is young gay and bisexual men. In 2015, more than eight in ten new HIV cases in young people ages 13 to 24 occurred as the result of male-to-male sexual contact. Gay and bisexual men who acquire HIV may transmit the virus to women as well as to men.

Gay and bisexual are particularly at risk for several reasons:

- Larger numbers of gay and bisexual men live with HIV; therefore, they face a greater risk of being exposed to HIV each time they have sex
- Many gay and bisexual men do not know their HIV status
- Many gay and bisexual men have unprotected sex (sex without condoms or treatment-as-prevention [8] methods), especially unprotected anal intercourse which has a higher rate of transmission of HIV compared to vaginal or oral sex
- Many gay and bisexual men use alcohol and street drugs, which increases their likelihood of risky sexual behaviors
- Young gay and bisexual men may incorrectly believe that HIV is no longer a serious health problem because of advances in treatment
Social stigma and fear of homosexuality have deep and direct negative effects on the health of gay and bisexual men. Negative cultural messages can lead gay and bisexual men to think poorly about themselves and make unhealthy decisions, including those about sex and substance use. Stigma and discrimination may also make gay and bisexual men less willing to access HIV prevention and care, or may isolate them from family, friends, and other community support networks.

Teens and Sex

Let's face it – teens are having sex. In the US in 2015, more than four in ten high school students said they had ever had sexual intercourse, yet only one in ten said they had ever been tested for HIV. One of the most common ways HIV is passed among teens is through unprotected sex. Teens are less likely to use a condom during vaginal or anal intercourse than adults. Among sexually active US high school students, 43 percent did not use a condom the last time they had sex. This is a key reason why so many new HIV infections occur among youth and young adults.

Not using condoms also puts teens at risk for other sexually transmitted infections or diseases (STIs or STDs). In fact, half of all STIs each year occur among people ages 15 to 24. This is especially concerning because having an STI greatly increases a person's chance of getting or transmitting HIV during sex. Regularly using condoms significantly reduces the chances of getting STIs.

Another way to keep teens HIV-negative is Pre-Exposure Prophylaxis (PrEP). This means taking medicine before being exposed to something to prevent getting a disease or condition - in this case HIV. The only medication approved in the US for PrEP, Truvada (tenofovir plus emtricitabine), must be taken regularly to be effective.

PEP stands for Post-Exposure Prophylaxis. It refers to taking HIV drugs for about a month immediately after possible exposure to HIV (e.g., needle-stick, sexual assault, unprotected sex). For PEP to be effective, it must be taken as soon as possible after exposure to HIV — within the first 72 hours if possible.

Young Women of Color in the US

Teens living with HIV come from all different backgrounds; however, recent studies show that over half of all youths in the US who newly acquire HIV are African-American, even though only 17 percent of all US teens are African-American.

Unlike young men, the vast majority of young women get HIV through heterosexual sex (sex between a male and a female). Young black women ages 13 to 24 accounted for almost six in ten new HIV cases among US teens and young women in 2010.

Certain factors may put young women at greater risk for sexually transmitted HIV:

- Not being aware of their partners' risk factors
- Lack of power in relationships
- Having sex with older men who are more likely to be living with HIV
- HIV is transmitted from men to women much more easily than from women to men
Younger women have a less mature genital tract that may be more likely to get tears or abrasions during vaginal intercourse.

A younger woman's cervix (entrance to the womb) is still developing until age 18. A young woman's "immature cervix" has thinner cells that provide less of a barrier to HIV than the cervix of an older, mature woman.

**Alcohol and Drug Use**

Young people in some countries, including the US, use alcohol and drugs at high rates. Many teens are curious about drugs and feel pressure from peers to try them. Teens are more likely to engage in high-risk behaviors, such as unprotected sex, when they are under the influence of drugs or alcohol.

In 2015, over 20 percent of sexually active American high school students drank alcohol or used drugs before the last time they had sex. Young people who run away or are otherwise homeless are at high risk for HIV if they trade sex for drugs or money.

Drug use can also increase the risk of HIV acquisition if needles are shared. This includes using needles for injecting drugs, injecting steroids, piercing the ears and body, and tattooing. For information on how to stay safe while injecting drugs, see our fact sheet on Cleaning Equipment for Injecting Drugs.

**Talking to Your Teen about HIV**

Teens hear about HIV at school, from friends, and on the TV, radio, and Internet. They generally know some basic information. However, what they know may be incorrect and many teens would like to know more. Teens need accurate, age-appropriate information that includes the following:

- What HIV is and how it is spread
- How to protect themselves
- How and where to get tested for HIV
- Myths about HIV vs. facts
- How to talk with their parents and partners about HIV/AIDS
- How to use a condom correctly
- How to make healthy choices about abstinence or sexual activity

Parents can make a difference. CDC research has shown that it is important for parents to talk early and clearly with their children about sex and values. Ongoing conversations about sex, HIV, STIs, and pregnancy prevention can help teens wait until they are ready to have sex and make responsible decisions about sexual behaviors when they do start having sex. Awareness, education, and communication can reduce the risk of teens acquiring HIV.

So, let's start talking! (See our fact sheet on Talking with Your Children about HIV)

**Tags:**

- HIV Teens
Additional Resources

Select the links below for additional material related to HIV risk and teens.

Sexual Risk Behavior: HIV, STD, & Teen Pregnancy Prevention (US Centers for Disease Control and Prevention) [34]
Coming to Terms with HIV in Adolescence (World Health Organization) [35]
NIDA for Teens (National Institute on Drug Abuse) [36]
Young People, HIV and AIDS (Avert) [37]
Sexual Health of Adolescents and Young Adults in the United States (Kaiser Family Foundation) [38]
Teens with HIV: The Forgotten Generation? (Huffington Post) [39]
Learn the Link – Drugs and HIV (National Institute on Drug Abuse) [40]
HIV (Advocates for Youth) [41]
Turning the Tide Against AIDS Will Require More Concentrated Focus on Adolescents and Young People (UNICEF) [42]
Empower Young Women and Adolescent Girls: Fast-Tracking the End of the AIDS Epidemic in Africa (UNAIDS) (PDF) [43]
Preventing HIV Infection in Girls and Young Women (UNAIDS) (PDF) [44]
HIV Prevention Among Adolescent Girls and Young Women (UNAIDS) (PDF) [45]
Girl Power: Rethinking the Way We Approach HIV/AIDS in Girls and Young Women (ONE) [46]