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E-SYS QUICK FACTS



Sexual Behaviours of Canadian Street Youth: How Risky Are They?

Introduction

Street youth are predominantly homeless, or they live in highly unstable residential conditions.¹ They have varied back- grounds and cultures but share characteristics that jeopardize their health and well-being. Street youth frequently engage in high-risk behaviours, such as unprotected sex with multiple partners or sex while under the influence of drugs and alcohol.^{1–4} These behaviours increase their risk of contracting and transmitting sexually transmitted infections (STIs) and blood-borne infections (BBIs).

The information presented in this overview is based on Enhanced Surveillance of Canadian Street Youth (E-SYS). E-SYS is a sentinel surveillance system that monitors rates of STIs and BBIs, risk behaviours and health determinants in the Canadian street youth population. The data presented below are from the 1999, 2001, and 2003 cycles of E-SYS data collection.

STIs are more common in street youth than in general population youth

- As shown in Table 1, the prevalence rate of chlamydia in street youth increased from 8.6% in 1999 to 11.0% in 2003. It is substantially higher than the reported prevalence in general population youth.^{5,9}
 - In the general youth population, the prevalence of chlamydia rose from 0.7% to 0.9% in the same time period.^{5,9}
 - As with chlamydia, the prevalence of gonorrhoea is high in the street youth population, about 20 to 30 times higher than in the general youth population.

The prevalence of gonorrhoea among street youth has increased significantly, from 1.4% in 1999 and 2001 to 3.1% in 2003. This increase is substantially higher than the general youth population's, where the rate increased from 0.06% in 1999 to 0.09% in 2003.^{5,9}

"E-SYS is a collaboration between the Public Health Agency of Canada's Surveillance and Epidemiology Section (Community Acquired Infections Division, Centre for Infectious Disease Prevention and Control), participating surveillance sites and the youth who provide the data and samples collected."

An increase in infectious syphilis (primary, secondary and early latent syphilis) among street youth was noted between 2001, when there were no detected cases, and 2003, when the prevalence rate was 0.7% (10 cases).⁹

Street youth report early initiation of sexual activity and frequent sexual activity

- More than 95% of street youth surveyed by E-SYS reported being sexually active. This is consistent with other studies conducted on this population.⁶
- The average age at first sexual intercourse among street youth (both male and female) was 14 years, which is much lower than among youth in the general population (16.8 years).⁷
- In 2003, among female street youth who reported recent sexual activity, the average number of sexual episodes per week ranged from 2 with casual partners* to 13 with paying**

partners (Figure 1). Among male street youth who reported recent sexual activity, the average number of sexual episodes per week ranged from 3 with casual partners to 8 with paying partners (Figure 1).

- Male street youth reported having sex more frequently with regular*** and casual partners than did females.
- Female street youth reported having sex with paying partners more frequently than did males.

Street youth have many sex partners

- On average, street youth reported having had more than 17 sex partners in their lifetime. Males reported a higher number of lifetime partners than did females (Figure 2).
- The average number of partners was highest in male street youth who reported MSM**** activities (data not shown).

Table 1. Prevalence rates of selected STIs in street youth and in the general youth population in 1999, 2001 and 2003

Street Youth (General Youth Population)*5				
Age	1999	2001	2003	
Chlamydia				
15–19 years	8.98% (0.65%)	11.51% (0.74%)	10.88% (0.82%)	
20–24 years	7.87% (0.75%)	11.38% (0.88%)	11.04% (0.99%)	
Gonorrhoea				
15–19 years	1.56% (0.06%)	1.04% (0.07%)	2.19% (0.08%)	
20–24 years	0.90% (0.07%)	2.12% (0.09%)	4.38% (0.10%)	
Infectious syphilis				
15–19 years	-	0% (< 0.01%)	0.25% (< 0.01%)	
20–24 years	-	0% (< 0.01%)	1.31% (< 0.01%)	

* Rates in street youth are prevalence rates; the rates they are compared to in the general youth population are derived from reported cases. Rates from reported cases may underestimate actual prevalence in the general population, due to asymptomatic cases and those who do not report for testing.

^{*} A "casual" sex partner is someone with whom the youth has had sexual relations once or a few times, but with whom there is no emotional involvement.

^{**} A "paying" sex partner is someone that hasw given the youth money, drugs, goods or anything else in exchange for sex.

^{***&}lt;sup>0*</sup> A "regular" sex partner is someone with whom the youth has a relationship and with whom he or she is emotionally involved. ***^{0*} MSM: Men who have sex with men.

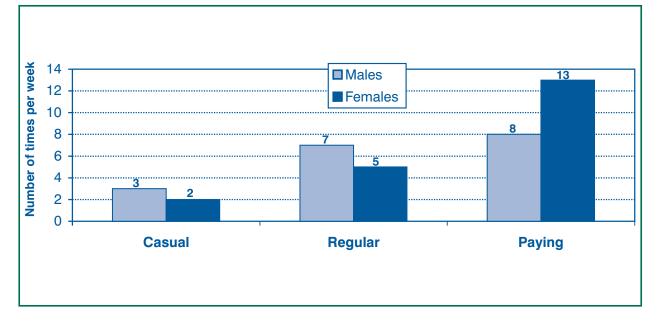
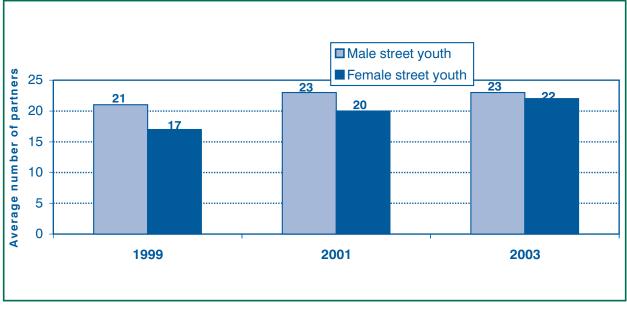


Figure 1. Average number of times street youth had sex per week by partner type in 2003





Condom use is low among street youth

- As shown in Figure 3, more street youth reported not using a condom with a male partner than with a female partner.
- In 2001, males were significantly more likely to report not using condoms with their male

partners than with their female partners (data not shown).

- The rate of condom use in street youth is very low – in all survey years, approximately 50% of street youth reported not using condoms at their last sexual encounter.
- These findings are consistent with those of other studies. For instance, in a study of AIDS risk behaviours among homeless youth in the United

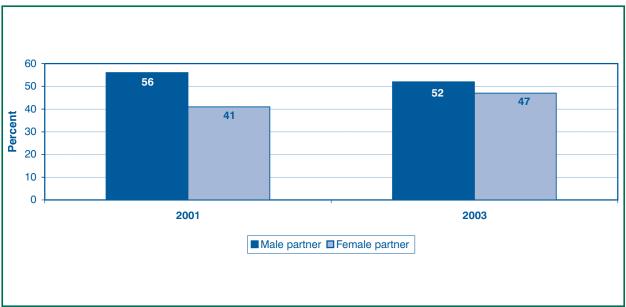


Figure 3. Proportion of street youth who reported not using condoms for protection at their last sexual encounter by gender of partner in 2001 and 2003

States, one-third of sexually active youth reported irregular condom use.⁶ Similarly, 32% of youth in Canada's Street Youth and AIDS study reported never using condoms.⁸

Sex with high-risk partners and unwanted sexual experiences are common among street youth

As seen in Table 2, many street youth report having sex with high-risk partners. In addition, there are gender differences in the sexual risk behaviours reported by street youth:

- The proportion of female street youth in E-SYS surveys who reported having experienced unwanted sex was more than double that of males.
- On average, female street youth were also more likely to report having traded sex than their male peers.⁹

- In 2003, the number of males who reported not using a condom at the last encounter where sex was traded was more than double that of females.
- About 50% of street youth reported having had sex with someone who was under the influence of drugs.
- Almost 20% of street youth had had sex with someone who had been diagnosed with an STI.

Street youth perceive themselves to be at low risk of contracting STIs

- Figure 4 shows that the majority of street youth who participated in E-SYS believed that they were at no or low risk of contracting an STI.
- About one-quarter of street youth believed that they were at no risk at all.

Table 2.	Proportion of street youth reporting selected risk behaviours and reporting sex with
	partners with certain high-risk characteristics

Sexual behaviour of street youth	2001	2003		
Ever had unwanted sex* (%)				
Male	11.0	12.5		
Female	28.0	27.8		
Overall	18.3	18.2		
Ever felt obligated to have sex (%)				
Male		14.3		
Female		25.5		
Overall		18.5		
No condom use at last obligated sexual encounter (%)				
Male		47.0		
Female		39.0		
Overall		44.0		
Ever traded sex (%)				
Male	16.5	14.5		
Female	26.5	29.3		
Overall	20.9	20.2		
No condom use at last encounter where sex was traded (%)				
Male	26.4	29.0		
Female	24.5	10.0		
Overall	25.0	19.0		
Percentage of street youth reporting having had sex partners with selected risk characteristics in previous 3 months				
Under the influence of drugs during sex	47.4	50.8		
Had been told they had an STI	17.0	16.0		
Had traded sex	7.1	9.5		

* Unwanted sex is defined as having sex, but not wanting to do so, with someone in a position of authority.

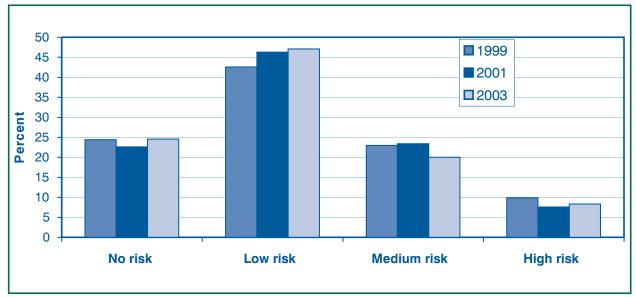


Figure 4. Self-perceived risk of STIs among street youth

Conclusions

E-SYS findings on sexual risk behaviours among street youth are a cause for concern. Upstream intervention and educational outreach initiatives are needed to reduce the risk of exposure to STIs in this population. Accessible harm reduction programs and measures are also required to help reduce the ill effects of street involvement. In addition, interventions that are sensitive to gender differences, sexual orientation and unwanted sexual experiences are necessary for this population. The social aspects of life on the street, specifically the unstable living and economic conditions youth face, cannot be ignored. Only by tackling the full spectrum of issues confronting street youth will inroads be made in lowering rates of risk behaviour and STIs in this population.

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Notes

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