

Childhood Abuse and Risky Sex Among Homeless Youth in Canada: The Mediating Role of Sexual Problems

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INTRODUCTION

- HIV prevalence is disproportionately high among homeless youth in Canada (DeMatteo et al., 1999; Roy et al., 2000).
- Childhood abuse is also extremely common among homeless youth (e.g., Rew et al., 2001) and has been consistently linked to risky sexual behaviour in adolescents, including homeless adolescents (e.g., Senn et al., 2008).
- Despite this established association, the mechanisms underlying the relationship between childhood abuse and risky sex remain unclear.
- The current study examined whether trauma symptoms mediated the relationship between three forms of childhood abuse – sexual abuse (CSA), emotional abuse (CEA), and physical abuse (CPA) – and unprotected vaginal intercourse (UVI) among Canadian homeless youth.

METHOD

Sample:

- 186 homeless youth (59% male) aged 16 to 21 (mean age = 19, SD = 1.67) were recruited from five homeless shelters throughout Toronto, Canada
 - 84% heterosexual; 32% white, 17% black, 29% two or more ethnicities, 22% other ethnicities
- 40% reported a history of CSA
- 73% reported a history of CPA
- 82% reported a history of CEA
- 59% of the sample had engaged in UVI in the past 6 months

Procedure:

- Participants were recruited from five youth homeless shelters throughout Toronto, ON via flyers and announcements.
- Self-report questionnaires were administered in groups of up to 15 individuals.
- Participants completed measures examining childhood abuse, trauma symptoms, and UVI in the past 6 months.
- \$20 compensation was provided to participants.

Measures:

- Childhood Trauma Questionnaire-Short Form (CTQ-SF; Bernstein et al., 2003)
- 28 item Likert-type scale
 - CSA, CEA, and CPA subscales (5 items per subscale)
- Trauma Symptom Checklist-40 (TSC-40; Briere & Runtz, 1989)
 - 40 item Likert-type scale
 - 6 subscales: depression; anxiety; dissociation; sleep problems; sexual problems (e.g., low sex drive, sexual dissatisfaction); sexual abuse trauma index
- UVI (yes/no) in the past 6 months

Data Analysis:

- For each form of abuse, a separate mediational analysis was computed (Baron & Kenny, 1986)
- Using multiple logistic regressions with UVI as the dependent variable, childhood abuse (CSA/CEA) was entered on Step 1 and trauma symptom subscales were entered on Step 2

RESULTS

- CSA and CEA were associated with both trauma symptoms and unprotected sex at the bivariate level.
- CPA was associated with all trauma subscales, but not with unprotected sex.
- When CSA and CEA were entered on Step 1, and all trauma subscales were entered on Step 2, sexual problems was the only unique predictor of unprotected sex in both models. All other trauma subscales were non-significant.
- Sexual problems completely mediated the relationship between CSA and UVI (see **Table 1**), and CEA and unprotected sex (see **Table 2**).

Table 1

Sexual problems as a mediator of CSA and UVI

Predictor	OR	95% CI	p
Step 1			
Severity of CSA	1.43	1.02-2.02	.04
Step 2			
Severity of CSA	1.05	0.72-1.53	.79
Severity of sexual problems	2.49	1.63-3.80	<.01

Note: OR is for each SD higher on the CSA and sexual problems scales

Table 2

Sexual problems as a mediator of CEA and UVI

Predictor	OR	95% CI	p
Step 1			
Severity of CEA	1.50	1.11-2.03	<.01
Step 2			
Severity of CEA	1.22	0.88-1.68	.24
Severity of sexual problems	2.37	1.57-3.57	<.01

Note: OR is for each SD higher on the CEA and sexual problems scales

CONCLUSIONS

- Although CEA is often neglected in the literature, the present study suggests that it warrants further attention as a correlate of unprotected sex.
- Past research has shown that childhood abuse is associated with risky sex and sexual problems; however, this is the first study to indicate that sexual problems may account for why individuals who have experienced childhood abuse engage in risky sex.
- Current HIV preventions which take a behavioural focus (i.e., condom distribution, safer sex skills) may be more effective if they include a module on the consequences of CSA and CEA, and the sexual problems that may arise as a result of childhood abuse.
 - For homeless youth, sexual problems may be reduced by targeting maladaptive sex-related cognitions and behaviours with empirically-supported counselling interventions (e.g., Wincze, 2009; Wincze & Barlow, 2004).