

Young Women and STDs: Are Physicians Doing Enough to Empower their Patients and Protect their Health?

A Survey of Young Women, Mothers, and Physicians about Sexually Transmitted Diseases (STDs)



Introduction

According to the Centers for Disease Control and Prevention (CDC), cases of sexually transmitted diseases (STDs), also referred to as sexually transmitted infections (STIs), are at an all-time high, with more than two million cases of chlamydia, gonorrhea, and syphilis reported in the United States in 2016.¹

Because many cases of STDs go undiagnosed, these statistics may understate STD prevalence in the United States.

While any sexually active individual is at risk of an STD, the youngest are most vulnerable. CDC incidence and prevalence estimates suggest that young people aged 15–24 years acquire half of all new STDs, and that one in four sexually active adolescent females has an STD.²

What beliefs do young women have about sexual health and STDs that might contribute to these troubling rates? Is there an opportunity to communicate and care more effectively for young female patients?

To answer these questions, Quest Diagnostics commissioned an independent survey of young women (15–24 years) and mothers of women in this age group regarding sexual behavior, sexual health, and knowledge of and screening for STDs.* A separate survey of physicians, primarily in primary care, was also conducted to examine similar issues.

The survey polled young women about chlamydia and gonorrhea specifically because CDC guidelines recommend annual screening for these STDs for all sexually active women under the age of 25 years, yet they continue to be at heightened risk. We also contrasted results of the 2017 survey with one Quest commissioned in 2015 with a similar population.

Key Findings

False beliefs, unsafe behaviors, and high prevalence of disease put young women at high risk for STDs	3
Discomfort with patient–physician communication contributes to an STD “knowledge gap”	4
Gaps in physician–ordered STD testing persist, despite clear medical guidelines	5
The youngest women are at the highest risk	6
Despite good intentions, mothers may hinder communications between physicians and young women	7
Conclusions.....	8

CDC Guidelines for STD Screening of Women

Chlamydia: Annual chlamydia screening of all sexually active women younger than 25 years, as well as older women with risk factors, such as new or multiple sex partners, or a sex partner who has a sexually transmitted infection.

Gonorrhea: Annual gonorrhea screening for all sexually active women younger than 25 years, as well as older women with risk factors such as new or multiple sex partners, or a sex partner who has a sexually transmitted infection.

False beliefs, unsafe behaviors, and high prevalence of disease put young women at high risk for STDs.

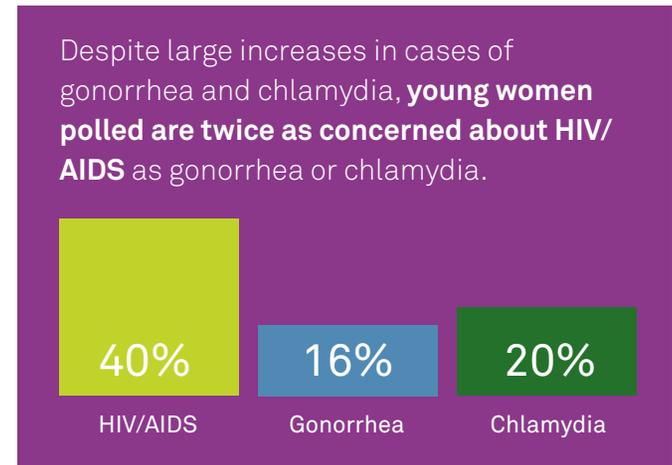
Even though most young women have some knowledge of sexually transmitted disease, they hold false beliefs about risk. Many don't understand the risk of common STDs, and most don't see a need to be screened. Many do not take measures, such as using a condom, to minimize the potential of STD infection.



More than half of young women are **sexually active**.



Of these, only 39 percent claim their partner **used a condom** the last time they had sex.



They don't get tested for STDs because they:



don't feel at risk (but high STD prevalence puts them at risk)



are asymptomatic (but many STDs have no symptoms)



CDC: Cases of Sexually Transmitted Diseases at Highest Number Ever Reported



Chlamydia

1.59 million
cases

4.7%
rate increase
since 2015

Gonorrhea

468,514
cases

18.5%
rate increase
since 2015

Primary and
Secondary Syphilis

27,814
cases

17.6%
rate increase
since 2015

Congenital
Syphilis

628
cases

27.6%
rate increase
since 2015

“All it takes is a simple STD test and antibiotic treatment to prevent this enormous heartache and help assure a healthy start for the next generation of Americans.”

Gail Bolan, director of CDC's Division of STD Prevention

Discomfort with patient-physician communication contributes to an STD “knowledge gap.”

Our study suggests that many young women are uneasy talking about sex and STDs (and screening) with their clinicians, to the point that they don't always tell the truth about their sexual behaviors. Yet, clinicians are not without anxiety: One-fourth of physicians surveyed said they feel uncomfortable talking about STD risk with their female patients. Perhaps it is not surprising that the majority of young women learn more about STDs from school than from their doctors.



51%

don't want to bring up sex or STDs with their clinician.

27%

don't always tell the truth about their sexual history to their clinician.

83%

of young women primarily learn about STDs at school in sex ed/health class. Only 51% learn about STDs from their clinician.



24%

of primary care physicians agree with the statement, “I am very uncomfortable discussing STD risk with my female patients.”

Gaps in STD testing persist, despite clear medical guidelines.

Medical guidelines recommend annual laboratory STD screening of sexually active women 25 years of age and younger largely because STDs frequently do not cause symptoms. Yet, a quarter of physicians surveyed make testing decisions for asymptomatic young women based on the presence of symptoms. Making matters worse, young women avoid asking their clinicians to be tested, and they say their doctors aren't offering to test them.



Less than one in four

young women **asks** their nurse or doctor **for an STD test.**

49%

of young women claim **their nurse or doctor has never asked** if they want STD testing.



Only **7 in 10**

primary care physicians said they would order chlamydia or gonorrhea testing for a sexually active, asymptomatic female patient under the age of 25, despite medical recommendations.

The youngest women are at the highest risk.

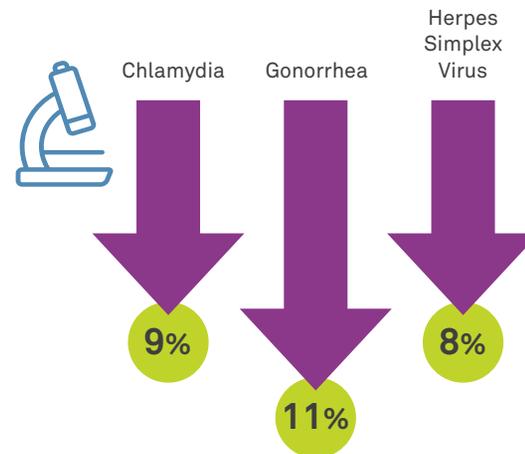
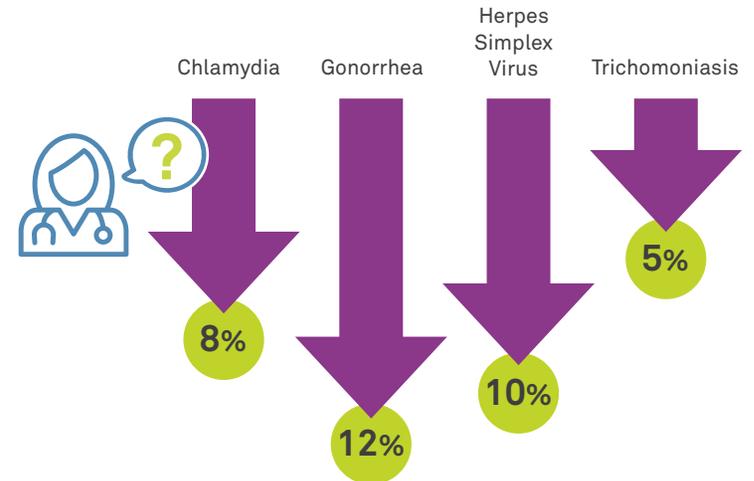
The youngest sexually active female patients (15-17 years of age) may be at the greatest risk of STDs. According to our research, a greater percentage of these individuals fail to be truthful with their physicians about their sexual behavior, compared to the overall group surveyed. Our findings also suggest physicians are less likely to discuss or offer STD screening to these women than in recent years.



43%

of young women aged 15-17 say they **don't always tell their clinician the truth** about their sexual history.

Based on a comparison of young women's responses in 2017 findings to the 2015 findings, **there have been significant decreases in physicians asking 15- to 17-year-olds if they want to be tested** for chlamydia, gonorrhea, herpes simplex virus, and trichomoniasis.

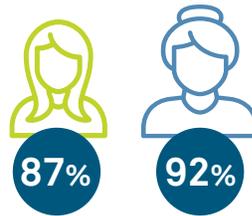


Based on the same comparison, since 2015 **there has been a significant decrease in chlamydia, gonorrhea, and herpes simplex virus testing** among 15- to 17-year-old young women.

Despite good intentions, mothers may hinder communications between physicians and young women.

Parents play a vital role in health education and access to healthcare for minors and young adults. As part of our survey, we asked women about their attitudes and experiences with STD testing for their daughters 15-24 years of age and compared and contrasted these with the cohort of young women and physicians surveyed.

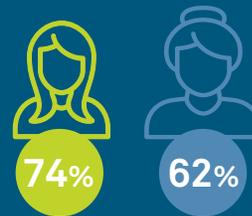
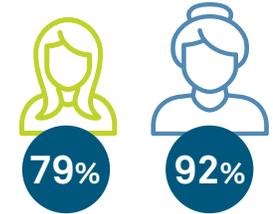
While we found that mothers of young women are inclined to trust the recommendations of their daughter's physician, their presence in the exam room may impede candid dialogue. Our survey found young women are far less likely to be truthful about sexual history or talk about STDs with their clinician if their mother is with them.



High percentages of both young women (87%) and their mothers (92%) **trust that their daughter's doctor knows what STDs to test for.**



They also **trust their doctors to know which tests are needed** (79% of young women, 92% of mothers).



Three-quarters (74%) of young women and 62 percent of mothers would **feel less embarrassed about testing if their doctor told them everyone got tested.**

88%

of young women **would prefer to be alone with their doctor/nurse when talking about sex or STDs**, rather than having their mom or stepmom in the exam room with them.



Conclusions

The Healthy People 2020 initiative recognizes reproductive and sexual health as a key opportunity to improve the health of Americans, and screening for STDs is central to the prevention strategy. Our survey findings suggest that education to reduce false beliefs about risk held by young women, greater adherence to guideline-based care, and open, honest, and non-judgmental communication initiated by healthcare practitioners with young female patients are important steps to combat the rise in STDs.

Quest Diagnostics and our Commitment to Women's Health

As the world's leading provider of diagnostic information services, Quest Diagnostics is committed to providing the broadest access to innovations to empower better health for women. We provide insights that help healthcare professionals and patients take actions leading to healthier lives.

For more information, please visit
www.QuestDiagnostics.com.

*Research was conducted by Aurora Research & Consulting on behalf of Quest Diagnostics in December, 2017. A total of 4,742 study respondents, comprised of 3,414 young women between the ages of 15-24, of whom 1,500 self-identified as sexually active; 1,016 mothers of young women in that age group; and 312 primary care, OB/GYN and specialty physicians were surveyed. Most clinician survey data presented in this report was of responses of 100 primary care physicians. Each respondent completed 15- to 30-minute online surveys regarding perceptions and knowledge of STDs and chlamydia and gonorrhea testing. Strengths of the research include the large number of respondents and the research's national scale, while limitations include self-reported data and a lack of direct comparability between study populations. The 2017 research was complemented by results of a survey of similar cohort of patients and healthcare practitioners performed in 2015. For more information, please refer to www.QuestDiagnostics.com.

Some localities may require reporting to authorities by health care providers where cases of child abuse are suspected.

Sources:

1. Centers for Disease Control and Prevention, 2016 Sexually Transmitted Diseases Surveillance, <https://www.cdc.gov/std/stats16/default.htm>
2. Centers for Disease Control and Prevention, <https://www.cdc.gov/std/stats16/adolescents.htm>

