

Poster Session I
#23

The Interaction of Relationship Power and Older Male Partners as Factors in Sexual Risk Behavior

Ellen M. Volpe, PhD, CRNP, University of Pennsylvania, Philadelphia, PA ~ Thomas Hardie, EdD RN PMHCNS-BC, Drexel University, Philadelphia, PA ~ Dianne Morrison-Beedy, PhD, RN, FNAP, FAANP, FAAN, University of South Florida, Tampa, FL

Purpose: There is a theoretical correlation between an adolescent girl's perceived relationship power and participation in risky sexual behaviors resulting in higher probability of adverse health outcomes. Those thought to be at greatest risk for low relationship power are girls with older male partners. However the association of older partners with low power has not been fully supported. The purpose of this study was to determine if having an older partner moderated the relationship between power and risky sexual behaviors.

Theoretical Framework: Blanc's gender power framework was used in this study to test as partner age impact contributing to gender-based power and sexual behavior.

Methods: A cross-sectional survey was administered to sexually active urban girls (N=157), ages 14-18. The sample was predominantly black (69%), non-Hispanic (80%), and low-income (80%). A multiple regression was conducted with sexual relationship power and older partner (≤ 2 yrs.) and the interaction term to determine its effect high-risk sexual behaviors.

Results: The mean partner age difference was 1.6 yrs. (SD= 2.2). Bivariate relationships showed significant correlations between high-risk sexual behaviors and both having an older partner ($p < .01$) and sexual relationship power ($p < .001$). Adolescent girls with a partner that was at least 2 years older and who reported low sexual relationship power had significantly more sexual risk episodes. The full model of older partner moderating the effect of sexual relationship power on sexual behavior predicts 17% of the variance in the sexual risk behavior ($p < .005$).

Conclusions and Implications: For adolescent girls with perceived lower relationship power, having an older male partner put them at significant risk for sexual risk infections due to the increased exposure. Clinicians should include relationship dyadic factors, such as partner age and relationship control, in their risk assessments. Nurses are in prime positions to develop and lead interventions to increase girls' relationship control and decrease sexual risk behaviors resulting in long-term reproductive health.