

Many young adults do not receive recommended testing for bacterial STDs, and while evidence is scarce, it is reasonable to think that testing rates are particularly low among sexual minority young people. In this issue of *Perspectives on Sexual and Reproductive Health*, Annie-Laurie McRee and colleagues report that home-based testing may be a promising approach for screening nonheterosexual young adults (page 3). In a national sample of 18–26-year-olds who identified themselves as gay, lesbian or bisexual, the investigators found that three-quarters would be willing to use a test that required them to collect a urine sample or genital specimen and mail it off to a doctor for testing. Among characteristics examined as possible correlates of willingness to use such a test, only one was significant for both men and women: Having had multiple partners in the past year was associated with elevated odds of expressing willingness to use a home-based test. The most common concerns that participants voiced about a home-based test were that it might not be accurate and that they might not do it correctly; smaller, but still substantial, proportions said that they would rather be tested by a doctor.

McRee and colleagues note that the flexibility of home-based STD testing “may increase access for populations that may not otherwise use sexual health services.” More work, they add, is needed to assess how to address sexual minority young adults’ concerns about this testing strategy, the best ways to offer it and its impact on screening rates.

**Also in This Issue**

- In a study of women who sought to terminate unwanted pregnancies, Jane Mauldon and coauthors report (page 11), only about one-third were still in a romantic relationship with the man involved in the pregnancy two years later. The proportion did not differ between those who obtained an abortion and those who were denied the procedure because they had passed the facility’s gestational age limit, although giving birth appeared to slow the pace at which romantic relationships ended. The analyses, based on data from the Turnaway Study, which followed women who sought abortions at 30 U.S. facilities in 2008–2010, revealed no difference in relationship quality between those who had abortions and those who gave birth. According to the authors, their findings suggest that “most...children born as a result of women’s limited access to abortion will not be cared for by two romantically involved parents.”

- Short and long intervals between pregnancies are associated with poor perinatal and maternal outcomes. Yet in an analysis of data from three rounds of the National Survey of Family Growth, Keely Chestack-Postava and Alix S. Winter found that nearly one-third of pregnancies that followed intervals of less than 12 months, and nearly

half of those that followed intervals of more than 60 months, occurred at what the women considered the “right time” (page 19). Short and long interpregnancy intervals were associated with both biological and socioeconomic characteristics, but some correlates of short intervals appeared only for well-timed pregnancies. The authors suggest that future work build on theirs to develop a “more nuanced” understanding of pregnancy timing and intention, and to identify subgroups at risk for extremely short or long interpregnancy intervals.

- Cohabiting young adult couples are less likely than those who are dating not only to use condoms, but also to use hormonal or long-lasting contraceptive methods, according to Elizabeth Wildsmith et al., who analyzed data from the romantic pair subsample of the National Longitudinal Study of Adolescent Health (page 27). The analyses revealed multiple associations between relationship characteristics and contraceptive use patterns; however, associations differed according to relationship type and contraceptive method type. Notably, for dating couples, several characteristics reflecting both positive and negative aspects of relationships were linked to condom use. For cohabiting couples, by contrast, frequency of sex was the only relationship quality measure that was significant, showing associations with both method types. The results, according to the researchers, point up the need to study method use within the context of relationships, and to consider both positive and negative relationship characteristics.

- To study the theoretical underpinnings, strategies and effects of parent-based adolescent sexual health interventions, Diane Santa Maria and coauthors conducted a systematic review of the literature spanning 1998–2013, used established coding schemes to assess the programs and conducted meta-analyses to explore effects (page 37). In all, 28 trials were included, most of which were conducted among minority parents who participated in group sessions or self-paced activities. The meta-analyses, based on appropriate subsets of the included studies, revealed a medium effect on increasing parent-child communication and a large effect on increasing parental comfort with communication. While the results provide “preliminary support” for the effectiveness of parent-based interventions, the researchers point out, they also show that published trials have missed potentially important programs, such as ones aimed at parents of sexual minority young people and faith-based services.

- The Digests section (page 51) contains summaries of reports on associations between teenagers’ sexting and sexual activity, Hispanics’ use of HIV care, teenage women’s sexual self-efficacy and more.

—The Editors