physically harmed on purpose by their boyfriend or girlfriend. Teen dating violence (TDV) is associated with depression, suicide attempts, substance use and abuse, and sexual risk behaviors in teens. The majority of previous work has focused on female teens. There is little understanding of the influence of physical TDV on male condom usage and no reports on the influence on contraception usage at last sex. We examined the association of physical TDV and condom and contraceptive use at last sex in adolescent males.

Methods: We performed a secondary analysis of the 2011 Youth Risk Behavior Survey. The sample included approximately 7,000 male participants. The dependent variables in our study were condom and highly effective contraception (defined as Combined Hormonal Contraception, IUD, Implant, or Injection) usage at last sexual intercourse. Our independent variable of interest was physical TDV. Additional independent variables included: age, gender, race/ethnicity, electronic bullying, forced sex, age at first sexual intercourse, number of recent sexual partners, and alcohol and drug use before last sexual intercourse. Univariate analyses of the risk factors were performed to obtain crude odds ratios. Multivariate stepwise logistic regression analysis was conducted to determine the best set of predictors as well as derive adjusted odds ratios. We utilized a p-value of < 0.05 for significance and a 95% confidence interval.

Results: Approximately 1 in 10 U.S. male (9.5%) and female (9.3%) teens reported having experienced teen dating violence. Half (49.2%) of males reported ever having had sexual intercourse; 9% of males reported coitarche at age 13 years old or younger. 70% of males reported condom use and 17.1% report a that a highly effective contraceptive use at last sex. Males who reported physical TDV had a significant reduction in condom usage at last sex (AOR = 0.641, 95% CI 0.487-0.844). Males who reported having experienced forced sex (AOR = 0.469, 95% CI 0.313-0.705) or electronic bullying (AOR = 0.653, 95% CI 0.515-0.829) also reported a significant reduction in condom usage at last sex. In adjusted analyses, the association of physical TDV and use of highly effective contraceptive methods at last sex in males did not meet statistical significance (AOR = 0.635, 95% CI 0.390-1.035).

Conclusions: Teenage males in the US report physical TDV at the same rates as their female counterparts. Physical TDV is associated with a reduction in condom usage at last sex for males but was not significantly associated with use of highly effective contraception at last sex. This reinforces the need for education on healthy relationships for all adolescents. Screening of male adolescents for physical TDV may provide valuable insights into sexual health risks. Future studies should explore other aspects of adolescent relationship abuse in males, including emotional and sexual abuse, and the interaction with protective reproductive health behaviors.

Sources of Support: Supported by the National Center for Advancing Translational Sciences of the National Institutes of Health under Award Number UL1TR000454.

119.

CORRELATES OF CONDOM KNOWLEDGE, SKILLS, AND INTENT TO USE CONDOMS IN INCARCERATED ADOLESCENTS
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Purpose: Incarcerated adolescents are at increased risk for exposure to sexually transmitted diseases and HIV due to their participation in high risk behaviors including sexual activity. Use of condoms decreases the risk of transmission of sexually transmitted diseases in this high risk, underserved population. Few studies have investigated correlates of condom knowledge, skills and intent to use condoms in incarcerated adolescents. The aim of this study to assess condom knowledge, attitudes and behaviors in a diverse population of incarcerated adolescents.

Methods: Sociodemographic, psychosocial, and sexual behavior data were collected and analyzed on 1198 incarcerated adolescents ages 13–18 participating in an HIV/STI education intervention in a detention facility in Alabama. Univariate analyses, t-tests and anova tests were conducted. Items were taken from a newly created scale to designed to assess condom attitudes, condom skills knowledge, and intent to use condoms in incarcerated adolescent populations.

Results: Adolescent girls reported a higher intent to use condoms than adolescent boys p = 0.033. Beliefs about the use of condoms varied significantly by age and race (p = 0.003 and 0.017 respectively). Anova tests showed that condom skills knowledge and positive beliefs about condom use increased significantly with age (p < 0.05, p = 0.003 respectively).

Conclusions: Differences in the intent to use condoms vary by gender and age. Incarcerated adolescent girls are more likely than boys to endorse the intent to use condoms. The intent to use condoms, condom skills knowledge and positive beliefs about condoms does increase with age. Future programs for incarcerated adolescents should explore developing innovative programs that target adolescent boys and younger adolescents to improve skills, knowledge and beliefs around condom use.

Sources of Support: This reseach was supported by the NIH T35 Grant, the CDC Grant Number C70119120, the Robert Wood Johnson Foundation, American Heart Association, UAB Minority Health and Health Disparities Research Center and the UAB Center for Clinical and Translational Sciences (NCATS) and National Center for Research Resources (NCRR) component of the National Institutes of Health (NIH).

118.

DESIRES TO FATHER A CHILD AND CONDOM USE: A STUDY OF YOUNG BLACK MALES AT RISK OF SEXUALLY TRANSMITTED INFECTIONS
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Purpose: In the U.S., young Black males (YBM) continue to be disproportionately likely to acquire sexually transmitted infections (STIs) and Human Immunodeficiency Virus (HIV). Condom use is the primary public health strategy to prevent these infections. However, condom use is antithetical to conception of a child; thus desire to father a child or conception of partners’ desire may be a primary barrier to STI/HIV protection. While an unavoidable reality when partners mutually desire conception, a very different situation exists when desire is not mutual. We examined whether male-reported discrepant desire to conceive was associated with