

North American Association of Christians in Social Work (NACSW)

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"A Vital Christian Presence in Social Work"

BEFORE YOU SAY "I DO"

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Presented at: NACSW Convention 2006 October, 2006 Philadelphia, PA

White Paper



before You Say "I Do": Advocating for Premarital Blood Festing in Fennessee

Introduction

A woman stands in front of the altar promising to be faithful "'til death do us part". Little does she realize that her husband is bringing more sickness than health into the marriage. In all of the frenzy of falling in love and planning the big day, blood testing never crossed her mind. It does not take long for the bad news to shatter her wedding bliss. She has just been informed in a sterile hospital room that she has been infected with a sexually transmitted disease not by a stranger, but by the very man who promised to stand by her side. Now all she is left with is the what ifs and wishing if only I had been tested, things might be different.

Blood testing for syphilis used to be a requirement in order to obtain a marriage license in the state of Tennessee, but that was repealed in 1985 (Premarital Law, 36-3-201—210, 1985); high costs and low positive findings were the rationale (T. Shaver, personal communication, February, 17, 2006). Syphilis is on the rise nationwide, with chlamydia and HIV/AIDS climbing in Tennessee. Adding Gonorrhea and Hepatitis C to the list of STDs, it is evident that there is an epidemic. The knowledge that they have been infected by their spouse has shocked far more people than it should. This betrayal of trust could be prevented with an incentive from the state for couples to be tested before obtaining a marriage license.

The Problem

The spread of sexually transmitted diseases such as chlamydia, gonorrhea, Hepatitis C, HIV/AIDS, and syphilis, just to name a few, is hitting the nation hard, and Tennessee is not exception. Cases of chlamydia, the most commonly reported infectious disease in the United States, have increased with an estimated 2.8 million new cases each

year (Center for Disease Control and Prevention, 2005, Trends, p. 1). The tragedy is that since chlamydia is asymptomatic, many cases go undiagnosed each year. If left untreated, chlamydia can lead to Pelvic Inflammatory Disease (PID), infertility, and increases susceptibility to HIV if exposed to the virus. In Tennessee alone, chlamydia has increased significantly within the past couple of years (Tennessee Department of Health, 2004, Reported chlamydia cases).

Although rates for gonorrhea have decreased between from 2003 to 2004, it is the second most commonly reported disease in the United States (Center for Disease Control and Prevention, 2005, Trends, p. 3). Tennessee has followed the same trend according to the number of reported cases between 2002 and 2003 (Tennessee Department of Health, 2004, Reported gonorrhea cases). If left untreated gonorrhea in women can cause PID, chronic pelvic pain, entopic pregnancy, and infertility. Similarly to chlamydia, many cases of gonorrhea go undiagnosed which may account for the decrease in reported cases in Tennessee.

The number of HIV/AIDS cases in the United States has also significantly increased between 2003 and 2004 (Center for Disease Control and Prevention, 2005, HIV/AIDS Surveillance Report, p. 10). Within Tennessee HIV and AIDS also rose between 2003 and 2004 (Tennessee Department of Health, 2005, HIV/AIDS cases among persons in TN, p. 8).

Hepatitis C (HCV) is a virus that is spread by blood through items such as razors, tooth brushes, and old needles. This particular virus is especially dangerous because 80% of those who are infected have no signs or symptoms (Center for Disease Control and Prevention, 2006, Viral Hepatitis C: Fact Sheet, Signs & Symptoms). If not treated, the

virus leads to chronic liver disease which could result in liver failure. The number of cases of HCV nationwide had greatly declined between the 1980's and 2001. However, statistics show a rise in cases showing an increase in the number of cases between 2001 and 2003. Tennessee has been fortunate in that the number of reported cases has steadily declined between 2002 and 2004 (Tennessee Department of Health, 2004, Interactive statistics results: Hepatitis C between 1995-2003). However, since 80% of those infected do not experience any signs or symptoms of the virus, there are likely many more cases both throughout the nation and Tennessee that have gone undetected and unreported.

Syphilis had reached an all time low in 2000, but in the past four years is showing a trend of increasing once again. Between 2003 and 2004 the national rates of syphilis has increased 8% (Center for Disease Control and Prevention, 2005, Trends, p. 4). Although this upward trend has not yet reached Tennessee, the threat of this deadly disease still remains a public health concern. (Tennessee Department of Health, 2004, Reported syphilis cases). Syphilis, if left untreated, can cause severe health problems such as nerve, cardiovascular, and organ damage, and even death.

Sexually transmitted diseases are not only spread through rape, unprotected sex, and drug use, but are also transmitted between spouses. Husbands and wives are entering an intimate life together without knowing if each is free of sexually transmitted diseases.

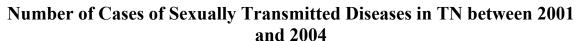
Tennessee has its share of cases of spousal transmission of sexually transmitted diseases.

A blood test for sexually transmitted diseases prior to marriage would aid in preventing such risks.

The law requiring a blood test before obtaining a marriage license in Tennessee was repealed in 1985. The reasoning behind repealing the requirement for a blood test

was primarily due to the fiscal burden to individuals and the current culture of privacy (T. Shaver, personal communication, February, 17, 2006). Reviving policies that provide for premarital blood testing for dangerous STD's before obtaining a marriage license will promote and benefit the public good and protect individuals from harm.

This problem, however, goes beyond individual rights to privacy; this problem also affects the greater public good. In this instance, when maintaining the individual's right to privacy affects the well-being of others in society, the maintaining of the public good is of greater importance.



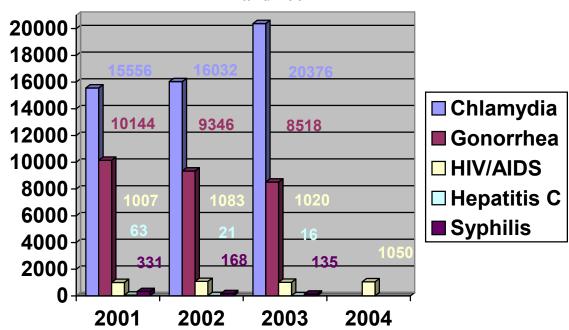


Chart constructed from aggregated data from: (Tennessee Department of Health, 2004, Reported chlamydia cases,) (Tennessee Department of Health, 2004, Reported gonorrhea cases) (Tennessee Department of Health, 2005, HIV/AIDS cases among persons in TN, p. 8) (Tennessee Department of Health, 2004, Interactive statistics results: Hepatitis C between 1995-2003) (Tennessee Department of Health, 2004, Reported syphilis cases)

History

Until 1985, the law required premarital blood testing for syphilis in the state of Tennessee. The General Assembly of the State of Tennessee has amended Tennessee Code Annotated, Title 68, Chapter 5 by repealing the Premarital Law requiring a blood test for syphilis and a doctor's examination for venereal disease for applicants of marriage licenses in Tennessee. This act took effect on July 1, 1985 (Premarital Law, 36-3-201—210, 1985). In a conversation with the health department, the reason for repealing this was a low rate of positive findings in premarital blood tests and it not being perceived as being cost affective (T. Shaver, personal communication, February, 17, 2006).

Risks and Benefits of Premarital Blood Testing to Marital Partners Potential Risks:

- Loss of privacy / individual rights
- Emotional distress
- Relational conflict
- Stigma
- Individual cost burden
- Spread of STD to future spouse
- Loss of autonomy/independent choice

Potential Benefits:

- Protects individual health
- Reduction in spread of STD to future spouse and to future children
- Access to post marital counseling, if needed
- Provides education on STD's on those who test negative
- Early identification of STD could lead to a better prevention

Costs and Benefits of Premarital Blood Testing to Public Health

Costs:

- Cost of a marriage license in Tennessee is \$35 with premarital counseling and \$95 without premarital counseling (usmarriagelaws.com)
- 19 million new cases of STD's occur each year, with nearly half of them young adults (Center for Disease Control and Prevention, 2005, Trends, p. 1)
- Medical costs associated with STD's are estimated to be at \$13 billion annually (Center for Disease Control and Prevention, 2005, Trends, p. 1)
- CDC also rates Memphis as the 11th highest city for the reporting of syphilis with 9.6 cases per 100,000 population. This rate is higher than that of New York City and Boston (Center for Disease Control and Prevention, 2005, Trends, p. 6).
- Possible increase in medical costs

Benefits:

- Acts as a public good because it protects public health
- Protects Individuals
- Reduce the high rate of STD's among young adults

Arguments For and Against Premarital Blood Testing

Arguments For:

- Public health good
- Individual good
- Early detection and treatments for STD's

Arguments Against:

- A current culture of privacy and confidentiality
- Cost
- Voluntary testing currently available through public and private avenues

Proposed Alternative Policy

The state of Tennessee initiates an incentive program that would offer a reduction on the marriage license fee if couples submit to a premarital blood test for chlamydia, gonorrhea, Hepatitis C, HIV/AIDS, and syphilis. Although the proposal does not solve all serious issues posed by STDs, it asserts prevention in the face of the growing epidemic that plagues not only Tennessee, but the nation.

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Imagine...

A woman stands in front of the altar promising to be faithful 'til death do us part.

Little does she realize...

her husband is bringing more sickness than health into the marriage.

In all of the frenzy of falling in love and planning the big day...

blood testing never even crossed her mind.



She has just been informed in a sterile hospital room that she has been infected with a sexually transmitted disease not by a stranger...

but by the very man who promised to stand by her side.

Now all she is left with are the what ifs and thinking "if only I had been tested, things might be different."

Although this is a fictional scenario, this happens all too often in real life.....

This raises the question.....

How well do you REALLY know your future spouse?

Many people are not even aware that premarital blood testing is no longer required, and has not been for some time.

Blood testing for syphilis used to be a requirement to obtain a marriage license in Tennessee, but that was repealed in 1985.

It was said to be a fiscal burden and that blood testing goes against the grain of the current culture of privacy.... (T. Shaver, personal communication, February, 17, 2006)

But a closer look at this issue suggests that there might be an alternative solution

The Problem

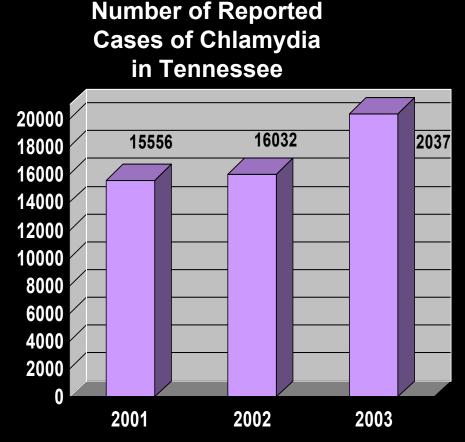
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Chlamydia

- Cases of chlamydia, the most commonly reported infectious disease in the United States, have increased with an estimated 2.8 million new cases each year (Center for Disease Control and Prevention, 2005, Trends, p. 1).
- The tragedy is that since chlamydia is asymptomatic, many cases go undiagnosed each year.
- If left untreated chlamydia can lead to Pelvic Inflammatory Disease (PID), infertility, and increases susceptibility to HIV if exposed to the virus (Tennessee Department of Health, 2004, Reported chlamydia cases,).

Chlamydia in Tennessee

 In Tennessee alone, chlamydia has increased significantly within the past couple of years (Tennessee Department of Health, 2004, Reported chlamydia cases,).



(Tennessee Department of Health, 2004, Reported chlamydia cases)

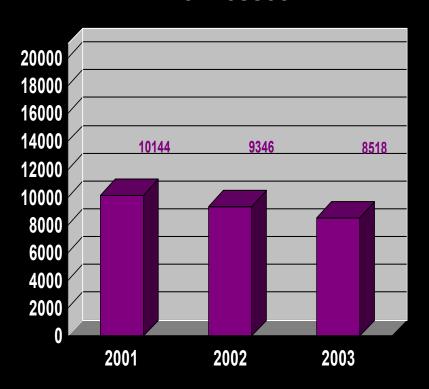
Gonorrhea

- Although rates for gonorrhea have decreased between 2003 to 2004, it is the second most commonly reported disease in the United States (Center for Disease Control and Prevention, 2005, Trends, p. 3).
- If left untreated gonorrhea in women can cause PID, chronic pelvic pain, entopic pregnancy, and infertility.
- Similarly to chlamydia, many cases of gonorrhea go undiagnosed.

Gonorrhea in Tennessee

- Tennessee has followed the national trend according to the number of reported cases between 2002 and 2003 (Tennessee Department of Health, 2004, Reported gonorrhea cases).
- Due to the fact that many cases of gonorrhea go undiagnosed, this may account for the decrease in reported cases in Tennessee

Number of Reported Cases of Gonorrhea in Tennessee

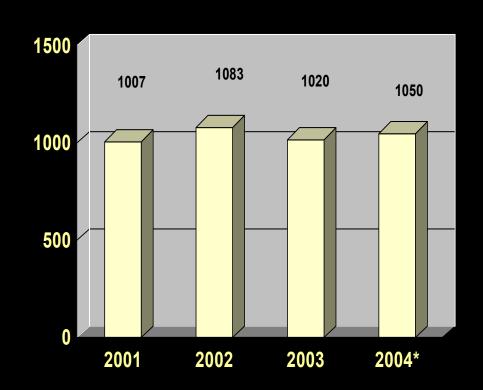


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HIV/AIDS

- The number of HIV/AIDS cases in the United States has also significantly increased between 2003 and 2004 (Center for Disease Control and Prevention, 2005, HIV/AIDS Surveillance Report, p. 10).
- Within Tennessee, HIV and AIDS has similarly risen between 2003 and 2004 (Tennessee Department of Health, 2005, HIV/AIDS cases among persons in TN, p. 8).

Number of Reported Cases of HIV/AIDS in Tennessee



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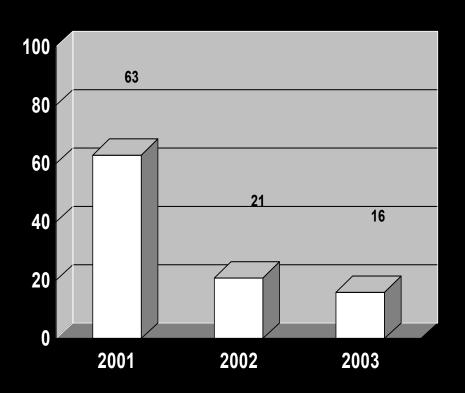
Hepatitis C (HCV)

- Hepatitis C is a virus that is spread through blood in such items as razors, tooth brushes, and old needles
- 80% of those who are infected have no signs or symptoms (Center for Disease Control and Prevention, 2006, Viral Hepatitis C: Fact Sheet, Signs & Symptoms)
- This virus leads to chronic liver disease which could result in liver failure

Hepatitis C (HCV) in Tennessee

- Statistics show a rise nationally in the number of cases between 2001 and 2003.
- Tennessee has been fortunate in that the number of reported cases has steadily declined between 2002 and 2004 (Tennessee Department of Health, 2004, Interactive statistics results: hepatitis c between 1995-2003).
- Since 80% of those infected do not experience any signs or symptoms of the virus, there are likely many more cases both throughout the nation and Tennessee that have gone undetected.

Number of Reported Cases of Hepatitis C (HCV) in Tennessee



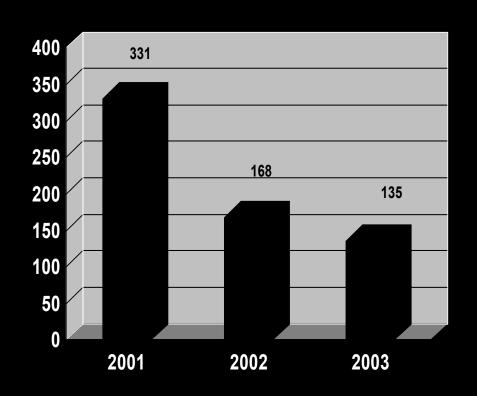
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Syphilis

- Syphilis had reached an all time low in 2000, but between 2003 and 2004 the national rates of syphilis have increased 8% (Center for Disease Control and Prevention, 2005, Trends, p. 4).
- Syphilis left untreated can cause severe health problems such as nerve, cardiovascular, organ damage, and even death.

Syphilis in Tennessee

 Although this upward trend has not yet reached Tennessee, the threat of this deadly disease still remains a public health concern Number of Reported Cases of Syphilis in Tennessee



(Tennessee Department of Health, 2004, Reported syphilis cases)

Previous Policy

- Until 1985, the law required premarital blood testing for syphilis in the state of Tennessee
- Tennessee Code Annotated, Title 68, Chapter 5 repealed the premarital law requiring a blood test for syphilis and a physician's examination for venereal disease on applicants for marriage licenses which took affect July 1, 1985.

Cost-Benefit Analysis

Costs

- Cost of a marriage license in Tennessee is \$35 with premarital counseling and \$95 without premarital counseling (www.usmarriagelaws.com)
- 19 million new cases of STD's occur each year, with nearly half of them young adults (Center for Disease Control and Prevention, 2005, Trends, p. 1)
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- CDC also rates Memphis as the 11th highest city for the reporting of Syphilis with 9.6 cases per 100,000 population. This rate is higher than that of New York City and Boston (Center for Disease Control and Prevention, 2005, Trends, p. 6)
- Also possible increase in medical costs should be considered

Benefits

- Premarital blood testing acts as a Public Good because it protects public health
- It also protects individuals
- And it reduces the high rates of STD's among some young adults

Proposed Alternative Policy

We propose that the state initiates an incentive program that would offer a reduction on the marriage license fee if couples submit to a premarital blood test for chlamydia, gonorrhea, Hepatitis C, HIV/AIDS, and syphilis. Although this will not solve all of the serious issues posed by STD's, it is a necessary preventative step to combat the growing epidemic that plagues not only Tennessee, but the nation as well.

There is no current law mandating premarital blood testing in Tennessee. With the proliferation of sexually transmitted diseases, we suggest a reconsideration of current policy offering an incentive alternative that underscores both public good and individual rights to privacy.

