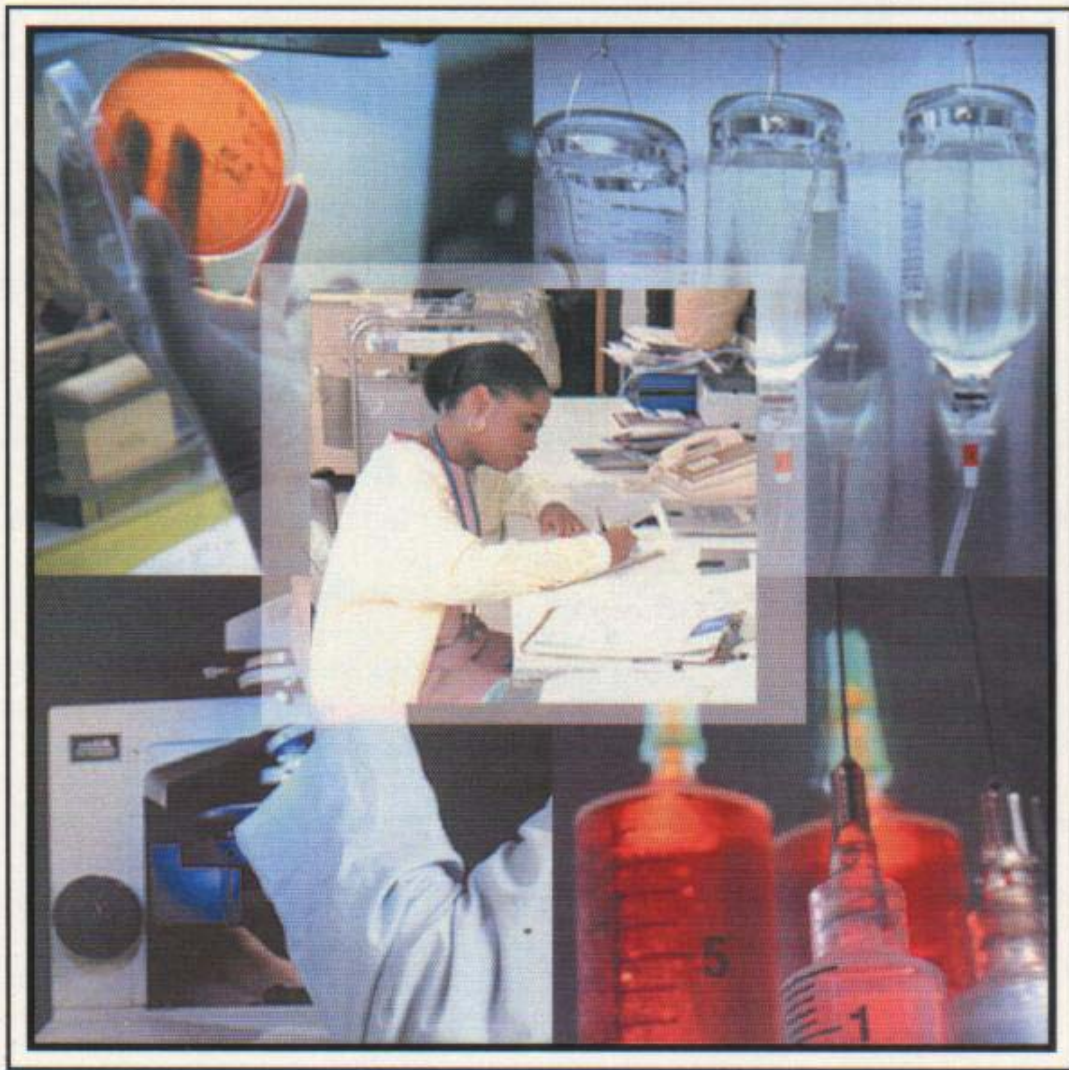


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# Women & Health™



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# Women & Health

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### Factors Associated with Effective Contraceptive Use Among a Sample of Latina Women

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*America Casillas, BS*

*Unintended pregnancy disproportionately affects Latina women. One factor contributing to unintended pregnancy among Latinas is the low rate of contraceptive use. This study examined correlates of effective contraceptive use among a sample of Latina women (n = 202) at increased risk for HIV. In addition to traditional intrapersonal variables (i.e., perceived risk of pregnancy, motivation to avoid pregnancy), the present study examined the role of the male partner and relationship factors (i.e., relationship commitment, duration, pregnancy prevention decision-making) on contraceptive use. Participants were recruited from clinics and community locations in East Los Angeles and administered a 60-minute in-person interview. Multivariate logistic regression was used to compare women who consistently used effective contraceptives (36%) to women using no method or an ineffective method. Women in relationships of 1 to 2 years were nearly 3 times more likely to use an effective contraceptive compared to women in relationships of less than 1 year (odds ratio (OR) = 2.7, 95% CI 1.1, 6.7). Women were more than twice as likely to use an effective method if they reported a high level of involvement in decision-making about whether to use contraception (OR = 2.3, 95% CI 1.1, 4.7) or had discussed contraception with their partner (OR = 2.4, 95% CI 1.03, 5.6). This study provides additional information about the importance of male partners and relationship factors in contraceptive use among Latina women. Efforts to prevent unintended pregnancy need to address the role of relationship factors in the sexual risk and protective behaviors of Latinas.*

**KEYWORDS.** Contraception, Latina women, relationship characteristics, intrapersonal factors

Introducing HPV Triage into the English Cervical Cancer  
Screening Program: Consequences for Participation

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*Objective: To predict the likely impact of adding human papillomavirus (HPV) triage for minor abnormalities on participation in the English cervical cancer screening program.*

*Method: Contingent valuations of the existing Pap program and a possible HPV-augmented screening program, obtained from questionnaires completed by 1141 women in east-central England.*

*Results: The value of participating in Pap screening was negatively associated with age, positively associated with educational level, and positively associated with the level of household income. Higher levels of worry about cervical cancer were associated with higher valuations of screening. Adding HPV-based triage to the Pap program lowered the value of screening participation for only two women, whereas for the sample as a whole, it increased the average valuation by about 47 per cent. Supposedly-negative characteristics of HPV testing, when described, were expected to trigger psychosocial concerns in respondents and thereby give rise to significant decreases in valuations of participating in a Pap-plus-HPV program. For most women, however, such information changed their valuations of participation in screening little, if at all.*

*Conclusions: Accepting the proposition that higher contingent valuations indicate stronger behavioural preferences, our results offer insubstantial grounds for believing that the inclusion of HPV triage would detrimentally affect participation in Pap screening for cervical cancer.*

**KEYWORDS.** Cervical cancer, contingent valuation, human papillomavirus, Pap test, screening

Women, Mental Health and Health-Related Quality of Life  
in Coronary Patients

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*A. González-Pinto, MD, PhD*

*Objective: To establish clusters of Health-Related Quality of Life (HRQL) in a population of patients hospitalised for suspected Coronary Heart Disease (CHD), and to examine the relationship between mental health and other sociodemographic and clinical variables associated with worse HRQL.*

*Methods: We conducted a cross-sectional study of 185 patients admitted to the Cardiology Service. We used the General Health Questionnaire (GHQ-28) to assess the mental status, and the SF-36 to assess Health Related Quality Life (HRQL). Using the patients' scores obtained from the SF-36, we performed a cluster*

Cultural Similarities and Differences Between a Sample  
of Black/African and Colored Women in South Africa:  
Convergence of Risk Related to Substance Use,  
Sexual Behavior, and Violence

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*Kyla Marie Sawyer, PhD*  
*Wendee M. Wechsberg, PhD*  
*Bronwyn J. Myers, MSc*

*South Africa is one of the six southern African countries where the HIV levels for childbearing women are 20% or higher. We conducted two focus groups aimed at developing an understanding of the intersections of substance abuse, sexual behavior, and violence affecting the lives of women of color in Cape Town, South Africa. Both Colored and Black/African participants reported using cannabis, methaqualone, and alcohol, although they differed on other drugs used. Black/African women also used heroin, and crack cocaine, whereas Colored women used methamphetamines. For participants in both groups, relationships with men affected sexual and substance use risk behaviors. Although the Black/African women did not trust men to use condoms, the Colored women in the study believed that almost all men use condoms. Both groups of women reported high rates of violence, with Colored participants reporting more gang violence and woman-on-woman violence compared with Black/African participants. The paper discusses these issues, as well as the implications for adapting a culturally specific, brief woman-focused HIV prevention intervention for the South African context.*

KEYWORDS. Substance abuse, South Africa, women, violence, HIV, sexual risk behavior

Women's Reactions to HPV Diagnosis:  
Insights from In-Depth Interviews

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*Karen (Kay) M. Perrin, PhD, MPH, RN*  
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*Sandra F. Naoom, MPH*  
*Jennifer L. Packing-Ebuen, MA*  
*Holly L. Rayko, MPH*  
*Mary McFarlane, PhD*  
*Robert J. McDermott, PhD*

*Research links certain types of the human papillomavirus (HPV) to subsequent development of cervical cancer. Women (n = 52) recently diagnosed with HPV following an abnormal Pap smear participated in in-depth interviews to explore their knowledge of HPV, their emotional responses to diagnosis, and the extent of their disclosure of their HPV diagnosis to others. Women had many knowledge deficits about HPV. Emotions related primarily to stigma, fear, self-blame, powerlessness, and anger. Most women disclosed their disease to significant others, usually to a sexual partner. Women's lack of accurate knowledge may contribute to the array of emotions they experience. Whereas education about HPV may reduce the potency of these emotions, information alone may be inadequate for achieving opti-*

mal patient care. Health care providers can be important in treating the emotional elements associated with diagnosis as well as the condition itself.

KEYWORDS. Human papillomavirus, cervical cancer, sexually transmitted infection

## Pregnancy Attitudes and Contraceptive Plans Among Women Entering Jail

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Jennifer Rose, PhD

Megan R. Hebert, MA

Maureen G. Phipps, MD, MPH

Michael D. Stein, MD

*Unplanned pregnancies are an important and costly public health problem. Women entering jail are at particularly high risk for unplanned pregnancies when they leave jail, given the high rates of poverty, substance abuse and sexually transmitted infections (STIs) in this population, all of which are associated with unplanned pregnancies. Attitudes toward pregnancy vary substantially, influencing openness of incarcerated women to starting a birth control method. This study was conducted as part of a Title X service evaluation and examined varying attitudes towards pregnancy and associated plans to use contraceptives. The current study included 223 women entering jail who were, under 36 years of age, fertile, sexually active with men, and not planning to become pregnant in the near future. Nearly half of the women had negative pregnancy attitudes (PAs), indicating that they did not want to become pregnant, while 41.3% endorsed ambivalent PAs. Compared to those with ambivalent PAs, those with Negative PAs were more likely to report a previous unplanned pregnancy (90.6% vs. 75.4%), a previous pregnancy termination (40.0% vs. 22.8%), and recent consistent use of contraceptives (37.0% vs. 21.7%). Women with negative PAs were significantly more likely to want to start or to continue a birth control method compared to those with ambivalent PAs (66% vs. 47%). Tailoring services to women's specific pregnancy attitudes during periods of incarceration may aid in preventing unplanned pregnancies in populations of high-risk women.*

KEYWORDS. Incarceration, prison, prisoners, reproductive health, women's health, contraception