

Interpersonal violence and self-reported Chlamydia diagnosis among California women

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Intimate Partner Violence & STDs

STD diagnosis is associated with exposure to intimate partner violence (IPV).

- The consequences of IPV may have important implications for treatment & prevention of STDs.

Current practice guidelines recommend that physicians screen all patients for recent IPV in settings where STD screening & treatment occur.

Interpersonal Violence & STDs

IPV may not be the only type of interpersonal violence associated with STDs.

Exposure to violence is also associated with PTSD and other mental health problems, which are associated with risky sexual behavior and increased risk for STD infection.

Purpose

Examine the relationship between exposure to various types of interpersonal violence throughout the lifespan, PTSD and CT diagnosis in a population-based sample of California women

Participants

California Women's Health Survey (CWHS): annual, random-digit-dialed telephone survey

- CWHS is sponsored by CA Department of Public Health in collaboration with other state agencies
- Survey from years 2003 and 2005
- Response rate = 72% & 73%
- Total Sample: 3,021 women aged 18-44

CWHS Questions

Child Abuse/Adult Assault:

Before/After the age of 18 did anyone ever...

...beat you up, such as slap, punch, or kick you, or attack you?

...force you into unwanted sexual activity by using force or threatening to harm you?

Source: Traumatic Stress Schedule



CWHS Questions

IPV: In the past 12 months...

- Have you been frightened for the safety of yourself, your family or friends because of the anger or threats of a partner or former partner?
- Has a partner or former partner:
 - Tried to control most or all of your daily activities?
 - Thrown something at you?
 - Pushed, grabbed, shoved or slapped you?
 - Kicked, bit or hit you with a fist?
 - Beaten you up or choked you?
 - Forced you to have sex against your will?
 - Used a knife or gun on you or fired a gun at you?
 - Followed you or spied on you?

Source: Conflict Tactics Scale



CWHS Questions

PTSD:

In the last 30 days have you...

- Had nightmares or thought about it when you did not want to?
- Tried hard not to think about it or avoided reminders?
- Been constantly on guard, watchful, or easily startled?
- Felt numb or detached?

Source: PC-PTSD Screen

Chlamydia:

- Have you ever been told by your health care provider that you had Chlamydia?



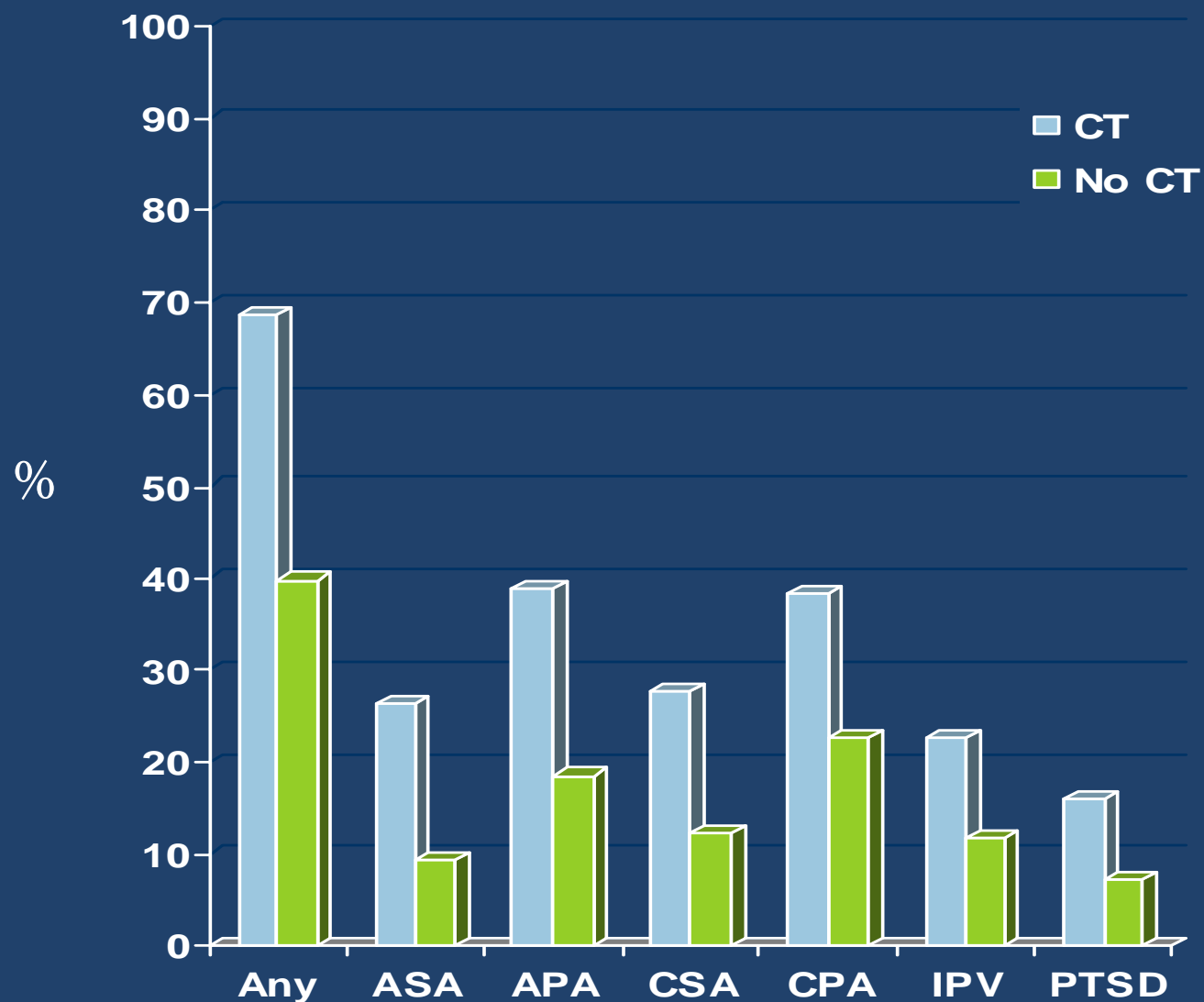
Data Analysis

- Logistic Regression Equations were used to examine bivariate and multivariate models.
- Odds Ratios (95% CI) were adjusted for race/ethnicity.

Prevalence of Violence, CT & PTSD Overall

- 42% of women reported experiencing interpersonal violence in their lifetime.
 - 13% of women reported recent IPV.
- 7% of women reported a Chlamydia diagnosis.
- 8% had significant PTSD symptoms.

Prevalence of Violence & PTSD among Women with and without CT Diagnoses



Association between Violence & CT

- Every type of interpersonal violence was associated with self-reported CT diagnosis, controlling for race/ethnicity.
- Women who reported any interpersonal violence were three times more likely to report CT diagnosis. (AOR=3.28, 95%CI 2.44-4.41)
- Women who reported recent IPV or PTSD were more than twice as likely to report CT diagnosis. (AOR= 2.20 95%CI 1.57-3.09 & AOR=2.45, 95%CI 1.66-3.62)

Conclusions

- There is a relationship between recent exposure to IPV and CT diagnosis at a population level.
- Exposure to other types of interpersonal violence throughout the lifespan and PTSD are associated with CT diagnosis.

Conclusions

- Behavioral and psychological sequelae of violence may interfere with STD prevention and treatment.
 - Less sexual assertiveness, altered risk recognition, more use of substances during sex, difficulties with intimacy
 - PTSD & other mental health problems
 - Maladaptive interaction styles

Limitations

- Cross-sectional design does not allow casual inferences.
- Population-based sampling affords less sensitivity for detailed assessment of variables of interest.
 - No biological evidence of CT

Policy Implications

- Consider screening for lifetime history of exposure to interpersonal violence when CT is diagnosed.
- Treatment & prevention should be tailored appropriately for women with a history of interpersonal violence.

Thank you!

SHE research team

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