



# Data Points

RESULTS FROM THE 2005 CALIFORNIA WOMEN'S HEALTH SURVEY

Some sexually transmitted diseases (STDs) can cause serious long-term health complications years after infection. If left untreated, STDs can cause pelvic inflammatory disease, infertility, cancer of the reproductive tract, and other health problems in women. Although studies show that adolescent females know of the association between STDs and future reproductive health problems such as infertility,<sup>1</sup> no published studies show that adult women are aware of this association.

Protection Motivation Theory holds that personal assessment of the consequences of current risk is associated with future behavior.<sup>2</sup> In addition, the *severity* of a perceived threat is a main predictor of behavior change. Education about the risks of untreated STDs could be a viable motivational tool for increasing patient-initiated testing and treatment and for changing individual behaviors. The STD Control Branch sought to assess California women's awareness of long-term consequences of STDs and to determine the content of this knowledge.

In the 2005 California Women's Health Survey (CWHS), 4,623 women aged 18 years and older were asked: "As far as you know, are there any long-term health problems a WOMAN might experience if she has had a sexually transmitted disease?"

Women who answered "Yes" were then asked: "Please tell me about all the long-term health problems you've ever heard of (caused by an STD)."

These responses were grouped for analysis into two categories ("Yes" or "No"), indicating the ability to correctly name at least one adverse outcome: infertility, increased risk of

cervical cancer or other genital cancers, pregnancy and birth-related complications, pelvic inflammatory disease, blindness, mental illness/neurological damage, scarring (of reproductive organs), life-long recurrence of symptoms/always having to take medication, increased risk of human immunodeficiency virus infection, or death.<sup>3</sup>

Highlights of the responses were as follows:

- Most respondents (74.4 percent) answered "Yes," that a woman might experience long-term health problems from an STD. The remaining 25.6 percent answered either "No" (19.5 percent) or "I don't know" (6.1 percent).
- White women were most likely to answer that there were long-term consequences of STDs (84.5 percent), followed by Blacks/African Americans (74.6 percent), Hispanics (60.0 percent), and women in the Asian/Other race/ethnicity group (62.7 percent).<sup>4</sup>

Of the women who answered that adverse long-term outcomes may result from STDs:

- Most women (85.1 percent) correctly named one or more specific long-term health consequences, while 32.4 percent named just one consequence, 28.7 percent named two, 16.2 percent named three, and 7.8 percent named four or more consequences.
- Most Black/African American women (91.8 percent) and White women (88.2 percent) could name at least one long-term health consequence, while Hispanic women were significantly less likely to be able to do so (76.1 percent).<sup>5</sup>

## Knowledge of Adverse Long-Term Consequences of Sexually Transmitted Diseases, 2005

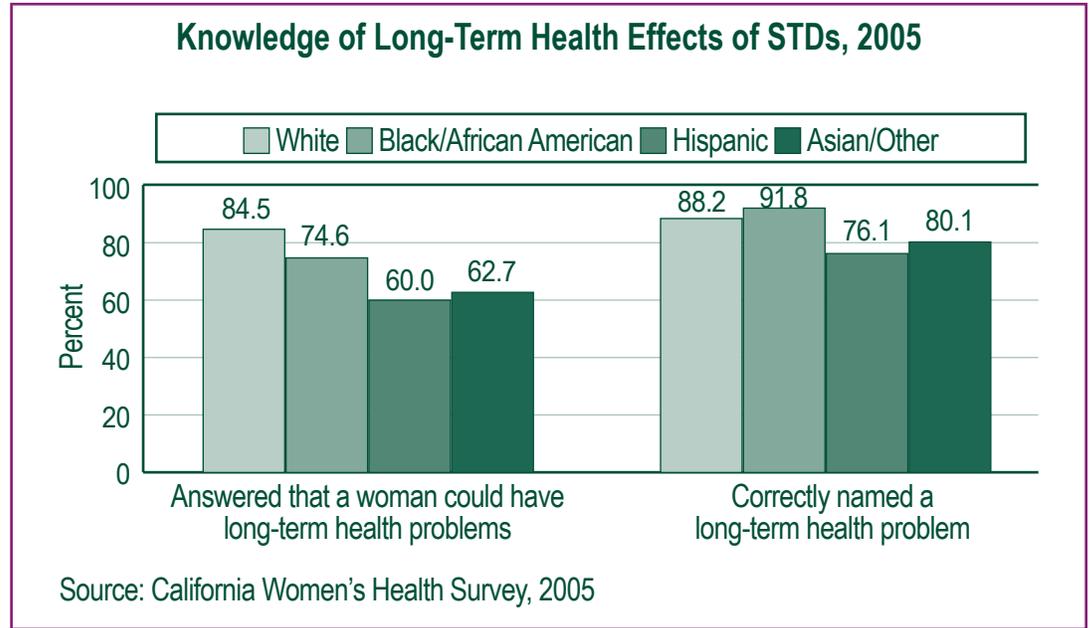
California Department of Public Health,  
Sexually Transmitted Disease Control Branch

**Public Health Message:**  
*Awareness of the long-term health problems that could result from STDs is high among California adult women. However, efforts to increase knowledge among Hispanic women and women in the Asian/Other race/ethnicity group of the association between STDs and future health problems are needed and may lead to increased utilization of STD prevention services.*

Issue 5, Summer 2008, Num. 12

**Knowledge of  
Adverse Long-Term  
Consequences of  
Sexually Transmitted  
Diseases, 2005**

California Department of  
Public Health,  
Sexually Transmitted  
Disease Control Branch



- 1 Trent M, Millstein SG, Ellen JM. Gender-based differences in fertility beliefs and knowledge among adolescents from high sexually transmitted disease-prevalence communities. *J Adolesc Health* 2006;38(3):282-287.
- 2 Browes S. Health psychology and sexual health assessment. *Nurs Stand* 2006;21(5):35-39.
- 3 Because death is included in the list of adverse outcomes and is a widely known outcome of HIV infection, the results of this analysis may be driven largely by knowledge of HIV outcomes, but not of outcomes for other STDs.
- 4  $p < .05$  for all comparisons except for Hispanic compared to Asian/Other.  
(Note: The Asian/Other race/ethnicity group includes American Indians/Alaska Natives).
- 5  $p < .01$ .

Submitted by: Adrienne Rain Mocello, M.P.H., Joan M. Chow, Dr.P.H.,  
Michael C. Samuel, Dr.P.H., Gail Bolan, M.D. California Department of Public Health,  
Sexually Transmitted Disease Control Branch, (510) 620-3717, Rain.Mocello@cdph.ca.gov