QUALITY OF SEXUAL HEALTH CARE FOR VULNERABLE POPULATIONS:
PATIENT PERCEPTIONS OF THE INTERACTIONS WITH
AND ROLE OF CLINICIANS

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ABSTRACT

Background
Vulnerable populations are at risk for negative sexual health outcomes. Interactions with their clinicians may provide important opportunities to address these risks.

Objectives
The first study examines if race/ethnicity and/or mental illness, among one vulnerable population (substance-dependent individuals), are associated with receipt of safe sex counseling and risk behaviors. The second study aims to understand how another vulnerable population, young Black women, conceptualize pregnancy prevention and interactions with their clinicians. The last study seeks to understand young Black women’s preferences regarding the source of contraceptive information, online compared to from clinicians.

Methods
We used multiple logistic regression models to explore the relationship between race/ethnicity and mental illness with receipt of safe sex counseling and risk behaviors. Semi-structured qualitative interviews with fifteen young Black women ages 18-23 were used to explore their experiences of pregnancy prevention. Using techniques informed by grounded theory, we identified themes about ways in which women constructed themselves and their interactions with clinicians. The same qualitative interviews and analytic techniques were also used to identify participants’ preferences for contraceptive information sources.

Results
Nearly one third of substance-dependent patients reported they had not been counseled about safe sex. Being Black or having manic episodes was associated with report of receiving safe sex counseling. Young Black women interviewed portrayed themselves as sexually responsible individuals, in control of their pregnancy prevention. Despite some having positive relationships and receiving personalized care, the perceived importance of clinicians in pregnancy prevention was limited. Participants valued contraceptive information both from the internet and clinicians for different reasons.

Conclusions
These findings can help clinicians understand patient perceptions of their role in pregnancy prevention. Future research can focus on how the delivery of sexual health care can impact risk behavior among vulnerable populations, to improve disparities in sexual health.