The overall goal of this NICHD funded project is to improve understanding of the acceptability of the vaginal diaphragm for the prevention of HIV and other STIs (Harvey, Bird & Branch, 2003). The project consists of three studies that examine factors that may influence the probability that the diaphragm will be used. The first study was a telephone survey with 766 women, recruited from members of Kaiser Permanente Northwest Region, who were either current (n=215) or former (n=172) diaphragm users or users of other contraceptive methods (n=378). Analyses have examined the influence of method characteristics, individual characteristics, relationship/partner factors, and contextual factors on acceptability of the diaphragm and other methods (e.g., Bird, Harvey, Maher, & Beckman, 2004; Harvey et al, 2003; Harvey, Henderson, & Branch, 2003; Maher et al., 2004).

The second study is a multi-method study of young women at risk for HIV and other STIs who have never used the diaphragm. We recruited 140 racially/ethnically diverse women from California State University, Los Angeles (CSULA) to participate in 25 focus groups about the diaphragm and complete questionnaires before and after the focus group to better understand the factors that would make the diaphragm more acceptable to young women at risk for HIV. The mean age of the women was 21.5 years. Reflecting the racial/ethnic makeup of the CSULA campus, the majority of women were Latina (52.1%), followed by African Americans (26.4%) and Whites (21.4%) (Branch, Harvey, Casillas, & Bird, 2003; Harvey, 2003; Harvey & Bird, 2004a; Harvey, et al., under review).

In Study 3, we examined the acceptability of the diaphragm compared to other extant and potential HIV prevention methods among university students. In total, 277 students (187 women, 90 men) completed self-administered questionnaires that included questions about the diaphragm, microbicides, male condoms, preventive HIV vaccines and related topics (Warren, Harvey, & Bird, 2003; Harvey & Bird, 2004b).

Findings from all three studies will inform the development of new female-controlled barrier methods, stimulate research on the efficacy and acceptability of the diaphragm and diaphragm-like products for HIV prevention, and suggest strategies to improve the acceptability of the diaphragm among high risk women.

References


