



NINR FOCUS: WOMEN'S HEALTH

*one in a series of focus papers on
NINR-funded research advances*

Research devoted to issues of women's health, including gender differences in illness and response to treatment, is a relatively new field. Nursing research has contributed to the understanding of many aspects of women's health across the lifespan.

CARDIOVASCULAR HEALTH

✚ **Heart attack symptoms in women.** Recent female heart attack patients reported a variety of symptoms in the previous month, including fatigue, sleep disturbance, shortness of breath, indigestion, and anxiety. At the time of the attack, acute symptoms included weakness, fatigue, cold sweat, and dizziness. These symptoms differ from the typical chest pain or pressure often reported by men. *McSweeney, University of Arkansas, 2003.*

✚ **Recovery after a heart attack.** Over the year after suffering a heart attack, women reported improvements in health, physical and psychosocial functioning, mood state, and social support. The greatest improvement came in quality of family life, which women often vie differently than men. *Rankin, University of California, San Francisco, 2003.*

SEXUALITY AND SEXUAL HEALTH

✚ **Mother-daughter discussions about sex.** Interviews of sexually active adolescent African American and Latina girls revealed that roughly three quarters had discussed sex, birth control, AIDS, and related topics with their mothers. These discussions helped reduce the number of unprotected sexual encounters and increased self-efficacy in condom use. *Hutchinson, University of Pennsylvania, 2003.*

✚ **Relationships changes after miscarriage.** At one year after a miscarriage, over one third of women reported a more distant interpersonal relationship with their partner, and only 7% had

a closer sexual relationship. However, almost one quarter reported they had grown closer as a couple. These women had greater emotional strength, and their partners were more sharing. *Swanson, University of Washington, 2003.*

PREGNANCY AND CHILDBIRTH

✚ **Breastfeeding Support.** Low-income mothers who received breastfeeding support from a community health nurse and a peer counselor were more likely to continue breastfeeding at 6 months than mothers in usual care. In addition, the breastfed infants required fewer emergency health care visits and fewer medications. *Pugh, Johns Hopkins University, 2002.*

✚ **Mothers of Preterm Infants.** Almost half of a group of mothers of preterm infants were at risk for depression, and all had at least one symptom of post-traumatic stress disorder. These mothers may need help to express their feelings, learn about normal premature infant behaviors, and develop caregiving confidence. *Holditch-Davis, University of North Carolina at Chapel Hill, 2003.*

✚ **Bedrest for high-risk pregnancy.** A group of women with high-risk, singleton pregnancies who were hospitalized on bed rest had poor maternal weight gain, and almost 70% delivered prematurely. Most of the infant birth weights were significantly below the mean of the appropriate range, and low maternal weight gain was linked to low infant birth weight. *Maloni, Case Western Research University, 2004.*

HEALTH PROMOTION

✚ Parental bonding in college-age women.

Interviews with women attending a large university found that a high level of caring from either parent helped reduce depressive symptoms and negative thinking and increase self esteem, while parental over-protectiveness increased depression risk and lowered self esteem. *Peden, University of Kentucky, 2004.*

✚ **Recovery from abuse.** For Black women who had escaped an abusive relationship, the healing process involved sharing information, reclaiming the self, renewing the spirit, forgiveness, finding inspiration in the future, and personal or social activism. These women found ways to survive abuse and transform their lives. *Taylor, University of Iowa, 2004.*

WOMEN AND HIV/AIDS

✚ **Sexuality and HIV.** In a survey of women with HIV, most stated they remained sexually active. While half regularly used condoms, one third used no safe sex practices. Of those not sexually active, reasons included no partner, physical problems, and fear of disclosure. *Bova, University of Massachusetts, 2003.*

✚ **Helping HIV+ Mothers.** Low income, black mothers with HIV received home nurse visits to provide education on HIV, and to emphasize the maternal role of childcare. The mothers reported improved physical function and a reduction in depressive symptoms and infections. *Miles, University of North Carolina at Chapel Hill, 2003.*

MANAGING CHRONIC DISEASES

✚ **Irritable bowel syndrome.** Women with irritable bowel syndrome (IBS) who reported an alternating constipation/diarrhea bowel pattern had more severe menstrual disturbances, sleep disruption, and cognitive symptoms. IBS

sufferers on oral contraceptives reported less severe symptoms. *Heitkemper, University of Washington, 2003.*

✚ **Alternative therapies for MS.** A survey of patients with Multiple Sclerosis (MS) showed that almost half had tried a complementary or alternative therapy (CAT), and one third were using one currently. The CATs reported as most helpful were massage, nutritional supplements, yoga, herbal treatment, and special diets. *Stuifbergen, University of Texas at Austin, 2003.*

✚ **Urinary incontinence.** Using data from the Study of Women's Health Across the Nation (SWAN), researchers found that over half of older women had experienced urinary incontinence (UI), with one-quarter reporting moderate to severe urine leakage. Risk factors included childbirth, perimenopausal status, diabetes, obesity, and current smoking. *Sampselle, University of Michigan, 2002.*

MENOPAUSE AND AGING

✚ **Latina women and menopause.** Interviews with Latina women about menopause found three themes: 1) menopause can reorder the harmony and balance in life, 2) the "change of life" is a normal adult phase, and 3) this is a time for women to reorient their lives. However, many women lacked knowledge about menopause and ways to manage symptoms. *Villarruel, University of Michigan, 2002.*

✚ **Exercise after menopause.** A group of older women who received regular supervised exercise sessions over an 8-month period experienced significant improvements not only in bone density, but also in strength, body sway, and weight. A control group without the exercise intervention showed a decline in bone density. *Jessup, University of Florida, 2003.*

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