

Women's Health Needs Study (WHNS): Atlanta^a

The WHNS was a **one-time survey** that collected information on women's health care experiences and needs, as well as female genital mutilation/cutting (FGM/C).

The study took place from **November 2020** to **June 2021** in four metropolitan areas in the United States (**Atlanta, Minneapolis, New York, and Washington, DC**). The data below represent women surveyed in the **Atlanta** metropolitan area.

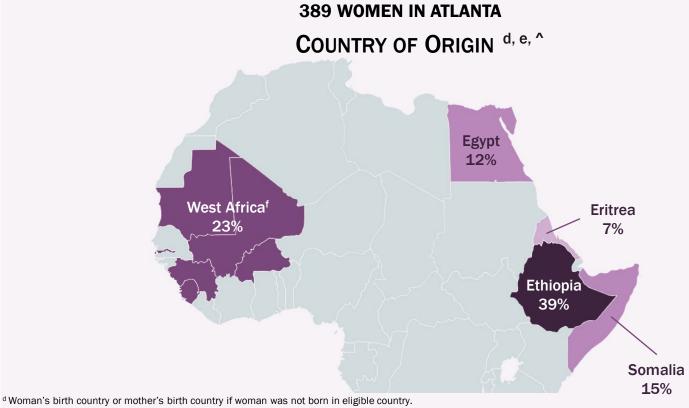
ELIGIBILITY Born, or mother was						
Women ages 18 to 49		born, in a co	ountry where common		poke one of the tudy languages	
WHO PARTICIPATED IN THE STUDY 389 WOMEN IN ATLANTA						
Age Group	29%		33%		38%	
	18-29 years o	old 3	30-39 years old		40-49 years old	
LEVEL OF EDUCATION	20%	18%	39%		23%	
	Less than high H school/GED ^b diploma	High school/GED diploma	Some college/Associate's degree		Bachelor's degree or higher	
IMMIGRATION GENERATION ^C	90%				9%	
	1.0 Generation Immigrated to the U.S. at age 13 or older				1.5 Generation Immigrated to the U.S. before age 13	
MARITAL STATUS	65%			11%	24%	
^a The study took place in the Atlant		nrried/Living with	Previously married	Never married/ Lived with partner		

^a The study took place in the Atlanta metropolitan area.

^b General Education Development

^c Data for "2.0 Generation" responses are not shown due to small percentages or denominators.





^e Data for Sudan are not shown due to small percentages or denominators.

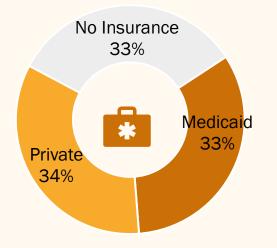
^fWest Africa includes Burkina Faso, The Gambia, Guinea, Mali, Mauritania, and Sierra Leone

^ Country of Origin Map Powered by Bing © GeoNames, Microsoft, OpenStreetMap, TomTom

ACCESS TO HEALTH CARE

HEALTH INSURANCE COVERAGE

Over two thirds (67%) had private insurance or Medicaid.



INTERPRETER

33% prefer an interpreter when visiting their health care provider.

Among women who prefer an interpreter, over half (58%) were offered one during their last visit.



Women's Health Needs STUD

REPRODUCTIVE HEALTH

70%

of women reported having had a pelvic exam or Pap smear within the last 3 years; 21% never had an exam; 9% had one 4 or more years ago.



45%

of women reported having ever used birth control. 24% of women used birth control in the last 30 days.



46%

of women who had a child reported ever having a C-section. 33% of births were delivered by C-section.



20%

of women who reported ever having sexual intercourse were **under 18 at age of first sexual intercourse**; 53% were 18 to 24; and 28% were 25 or older.

FGM/C EXPERIENCE

The World Health Organization defines female genital mutilation/cutting (FGM/C) as all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural, religious, or other non-therapeutic reasons.¹

3 in 5 women reported experiencing FGM/C.



¹ World Health Organization, United Nations Population Fund & United Nations Children's Fund (UNICEF). (1997). Female genital mutilation: a joint WHO/UNICEF/UNFPA statement. World Health Organization. <u>https://apps.who.int/iris/handle/10665/41903</u>.

Women's Health Needs

STUDY

EXPERIENCE OF WOMEN WITH FGM/C

BY COUNTRY OF ORIGIN

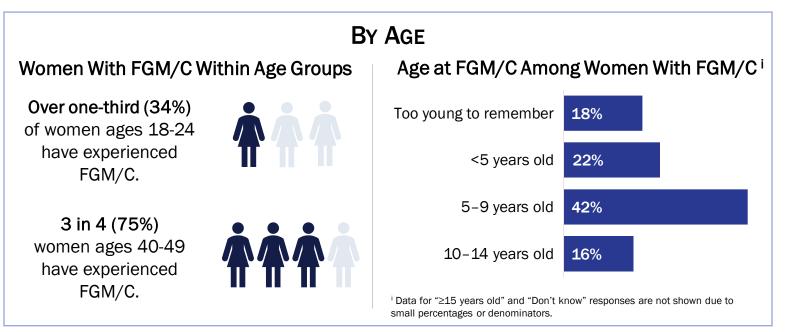


The percentage of women from each country of origin who reported experiencing FGM/C^g:

- West African countries^h: 81%
- Somalia: 65%
- Eritrea: 53%
- Ethiopia: 52%
- Sudan: 39%

g Data for Egypt not shown due to small percentages or denominators.

^h West African countries include Burkina Faso, The Gambia, Guinea, Mali, Mauritania, and Sierra Leone.



BY TYPE OF FGM/C J

- Sewn closed 31% Flesh removed 58%
- 31% said their genital area was sewn closed.
- 58% said flesh was removed from their genital area.
- 8% did not know the type of FGM/C they experienced.

Health Concerns of Women with FGM/C



69% reported **a problem with childbirth** compared to 31% of women without FGM/C. This includes postpartum bleeding, extensive vaginal tears from childbirth, or emergency C-section.



41% reported a **reproductive health problem** compared to 20% of women without FGM/C. This includes difficulty passing period blood, difficulty passing urine, pain with urination, or many urinary tract infections.

26% reported a **sexual health problem** compared to 8% of women without FGM/C. This includes pain or bleeding during sex.



39% reported **feeling sad** for many weeks at a time compared to 18% of women without FGM/C.

Comfort of Women with FGM/C in Talking to Provider

45% would feel comfortable discussing their FGM/C with a health care provider.



20% have discussed their FGM/C with a health care provider.



FGM/C ATTITUDES

91%

believe FGM/C should be stopped.

88%

believe FGM/C can cause health problems later in life.



do not believe FGM/C is required by religion.



Percentages may not sum to 100 due to rounding. Frequencies in the study population are presented as unweighted counts and weighted percentages. Estimates less than 5% or with a denominator of 30 or fewer women are suppressed and represented by an asterisk (*).

Funding of WHNS was provided by the Centers for Disease Control, the U.S. Department of Health and Human Services Office on Women's Health, and the Department of Justice, National Institute for Justice, Office for Victims of Crime. For more information, see https://www.norc.org/research/projects/a-study-of-womens-health-needs-in-the-us.html.