STI RISK AND PROTECTIVE FACTORS AMONG THE GENERAL POPULATION IN LAGOS STATE

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INTRODUCTION/BACKGROUND

Sexually Transmitted Infections (STIs) are a major public health problem in both developed and developing countries, but prevalence rates apparently are far higher in developing countries where STI treatment is often less accessible[1]. Sexually transmitted infections (STIs) increase transmission of HIV. Vulnerability and sequelae for STIs are attributable to biological susceptibility and behavioural factors including sexual practices and health-care seeking behaviour[2,3]. The aim was to document sexual risk and protective behaviours of the general population in Lagos State.

METHODS

A cross-sectional study of 300 people in 10 randomly selected LGAs in Lagos State was carried out using interviewer-administered questionnaires for knowledge, attitude and practice of STIs. Results were presented as frequencies, means and modes in tables or charts as appropriate. Tests of significance using chi-square and comparison of means were carried out as required.

RESULTS

Cronbach alpha determination put reliability of the instrument at 0.86. Two hundred and ninety three (293) questionnaires were retrieved giving a response rate of 97.7%.

Demographic profile of the respondents is as shown in Table 1 and Figures 1 and 2. Most of the respondents were males (63.8%) and the modal age group was 21 to 25 years.

About a third of the respondents (35.8%) had poor knowledge of gonorrhoea and its consequences (Table 2 & Figure 3).

Table 3 shows exposure of the respondents to gonorrhoea with less than 10% of the respondents indicating they had contracted the infection before. Table 4 reveals respondents knowledge and practice about gonorrhoea prevention with almost a quarter of the respondents not believing that gonorrhoea is preventable and eight of the respondents reusing condoms. Only about 52% of the respondents indicate that they have one sexual partner currently while 68% of them have had more than two lifetime partners (Table 5). Statistically significant differences exist between sex and age range of the respondents and use of condoms, number of partners ever and those that have suffered from gonorrhoea before.

TABLE 1: COMMUNITY DEMOGRAPHY

ITEM/ Variables	FREQ. (%) N=293
Age in years	
< 15	1 (0.3)
15 – 20	53 (18.1)
21 – 25	91 (31.1)
26 – 30	69 (23.5)
31 – 35	23 (7.8)
36 – 40	11 (3.8)
41 – 45	8 (2.7)
46 – 50	14 (4.8)
> 50	6 (2.0)
Blank	17 (5.8)
Highest Educational Qualification	
Pre-Secondary Schooling	26 (8.9)
Secondary	102 (34.8)
Post-Secondary Schooling	142 48.4)
Postgraduate Schooling	11 (3.8)
Blank	12 (4.1)
Religion	
Christian	202 (68.9)
Islam	51 (17.4)
Traditional	8 (2.7)
Others	32 (10.9)
Occupation	
Professional	37 (12.6)
Skilled Labour	75 (25.6)
Unskilled Labour	40 (13.7)
Business	23 (7.8)
Student	108 (36.9)
Applicant	1 (0.3)
Blank	9 (3.1)

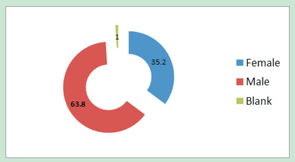

Fig. 1: Gender Distribution of Respondents

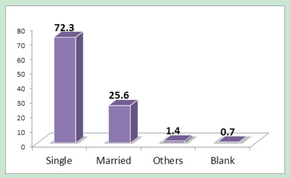

Fig. 2: Marital Status of Respondents

TABLE 2: COMMUNITY KNOWLEDGE OF GONORRHEA

VARIABLES	Heard about gonorrhoea?	Know how gonorrhoea can be contracted?	Know other STIs?	Know symptoms of gonorrhoea?	Know drugs used for gonorrhoea?	Asymptomatic infection possible?	Cause Male infertility	Cause Female infertility	Can be passed to unborn child
	% (N=293)								
No	5.1	14.0	10.9	31.4	62.5	50.9	5.1	6.1	36.9
Yes	92.8	82.6	82.9	63.1	32.8	11.9	52.5	56.7	17.1
Don't know	-	-	-	-	-	35.5	30.4	34.1	43.7
Blank	2	3.4	6.2	5.5	4.8	1.7	2.0	3.1	2.4

Fig. 3: Knowledge Rating of Gonorrhoea of Respondents

TABLE 3: EXPOSURE TO GONORRHEA IN THE COMMUNITY

ITEM/ Variables	FREQUENCY (%) N=293)
Ever Suffered From Gonorrhea?	
No	251 (85.7)
Yes	25 (8.5)
Blank	14 (4.8)
Do You Know Anyone who has?	
No	169 (57.7)
Yes	86 (29.4)
Blank	38 (13.0)

TABLE 4: KNOWLEDGE AND PRACTICE OF GONORRHEA PREVENTION

ITEM/ Variables	FREQUENCY (%) N=293
Can Gonorrhea Be Prevented?	
No	18(6.1)
Yes	233 (79.5)
Blank	42 (14.3)
Do you Use Condoms?	
No	56 (19.1)
Yes	176 60.1)
Not Yet Sexually Active	4 (1.4)
Blank	56 (19.1)
Do you Reuse Condoms?	
No	162 (55.3)
Yes	8 (2.7)
Blank	123 (42.0)

TABLE 5: COMMUNITY AND MULTIPLE SEXUAL PARTNERS

ITEM/Variable	FREQ. (%) (N=293)
How Many Partners?	
1 partner	152 (51.9)
2 partners	29 (9.9)
3 partners	14 (4.8)
4 partners	3 (1.0)
5 partners	3 (1.0)
6 partners	1 (0.3)
More than 6 partners	12 (4.1)
Blank	79 (27.0)
Partners Ever?	
A (1 – 2 partners)	11 (37.9)
B (3 – 4 partners)	36 (12.3)
C (5 – 6 partners)	23 (7.8)
D (7 – 10 partners)	5 (1.7)
E (More than 10 partners)	35 (11.9)
None	4 (1.4)
Blank	79 (27.0)

DISCUSSION

The rate of infection with, and transmission of STIs in the community is influenced by the level of knowledge possessed by members of the community[2,3]. People will often do what they believe and/or what is practiced/believed in their community[4,5]. Ignorance and inadequate knowledge about STIs hastens infection and transmission. Risky behaviour identified among the population surveyed include poor knowledge, a belief that gonorrhoea cannot be prevented, low use of condoms by sexually active individuals and multiple partners. Though the prevalence of gonorrhoea obtained in this survey is low, the high level of risky behaviour should be controlled especially in the light of the HIV/AIDS pandemic.

CONCLUSION

It is concluded that risk for STIs in Lagos is high as sexual protective behaviours are inadequate. Public enlightenment campaigns should be embarked upon to enhance awareness of the risks they are exposing themselves to.

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