Perceived Benefits And Barriers Toward Testing For Sexually Transmitted Infections Among Undergraduate Students At Maseno University kisumu, Kenya.

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ABSTRACT

This study sought to determine the perceived benefits and barriers toward testing for Sexually transmitted infections among undergraduate students at Maseno University-Kenya. The study design was cross-sectional descriptive study and a questionnaire survey was conducted involving a random sample of 328 undergraduate students from Maseno University. The reported prevalence of STIs was 6.7% and over half (59.1%) of the total respondents reported to have had taken an STI test. The high risk sexual practices reported were: having sex without condom (70.3%), having a one night stand (36.5%) and having sex while intoxicated with alcohol (25.6%). High risk sexual attitudes reported in this study were: greater concern about prevention of unwanted pregnancy than prevention of acquiring an STI infection (69.8%), condom use not important if the partner or self is on a contraceptive (61%), unnecessary for all sexually active Individuals to be tested for STIs (36%), and willingness to have penile/vaginal sex with person on the first date (34.7%). The barriers to STI testing identified in this study included: fear of testing positive for anSTI (83.5%); embarrassment for going for an STI test (73.2%); lack of knowledge aboutSTI testing (72.0%); and location of STI testing services (63.4%). The key perceived benefits to STI testing were: receiving treatment if one is diagnosed with an STI (81.7%); reducing anxiety about not knowing one's STI status (76.8%); and feeling safe in beginning of a new relationship (74.7%). At multivariate level factors that were independently associated with STI testing included age of the respondents and display of messages related to STI testing on billboards. The main sexual practices were sex without condom use, practice of one night stand and sex with more than one partner at the same time. The main perceived barriers to STI testing were fear of testing positive and embarrassment of going for STI test. The main risky sexual attitudes were non condom use in the event of contraception and greater concern about preventing unwanted pregnancy than STIs. The main perceived benefits to STI testing were access to treatment if the

test is positive and reduction of anxiety about not knowing one's STI status. Advocacy against unsafe sexual practices should be strengthened. Counseling and reproductive health education seminars highlighting perceived benefits of health sexual behaviors as well as benefits to STI testing should be strengthened in Universities. Strategies to address barriers to STI testing and risk sexual attitudes should be strengthened in Universities. Treatment for STIs should be made easy for those who test positive for STIs.