



AN ASSESSMENT ON THE LEVEL KNOWLEDGE OF SENIOR HIGH SCHOOL-GOING ADOLESCENTS AGE (14-19 YEARS) REGARDING

SEXUAL TRANSMITTED INFECTION

IN THE 1405 BARNERSVILLE COMMUNITY

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DECLARATION

I, student James K.QuaiQuai hereby declare that this is my original work except where notified and has not been presented for a degree in any other University.

Name: _____ ID#: _____

Signature: _____ Date: _____

I confirm that the work reported in this thesis was conducted by the candidate under my supervision as program supervisor

Mr. Joseph F. Younn _____

Signature

Date

DEDICATION

I dedicate this work to my beloved mother Miss. Hawa S. Korlee and my father Mr. James K.

QuaiQuai

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Truly nature will not forgive me if I cannot remember the divine existence of God who has carried me through. I am grateful to the students of the Barnesville 1405 community who participated in this study. This research would not have been possible without my supervisor Mr. Joseph Yonne; who supervision, suggestion and guidance influenced the completion of this research. It is impossible to credit all those who contributed toward the accomplishment of this research. However, I would like to give particular recognition Mr. Frederick Moigulleh who served as research assistants during this research.

ABSTRACT

Sexual transmitted infections (STIs) are defined by World Health Organization (WHO) as diseases that are spread predominantly through sexual contact, including vaginal, anal and oral sex (WHO, 2016). Adolescent is defined by World Health Organization as persons between 10 and 19 years of age, make up about 20% of the world's population, of whom 85% live in developing countries (WHO, 2001). A descriptive cross sectional survey designed was used in this study. The study site include the following schools in the Barnesville 1405 community: kids international high school, Konowa high school and the grace Baptist high school. In this research the study population include adolescents between the ages 14- 19 years attending the senior high division of the above mentioned schools. The simple size of this study include 30 students who were attending the kid's international high school, the Konowa high school and the grace Baptist high school within the period under study. The data collected for the purpose of this research was analyzed using computer software MS word and Excel. Tables were also used to present the data in a frequency and percentage form. It was found that 90% of the students in this study have heard about sexually transmitted infection. This finding is similar to the finding in Folasayo et al (2017) where 86.6% Of the students in that study heard about sexually transmitted infection. It has been noticed that students had minimum knowledge on those sexually transmitted infection that are uncommon. This could be that awareness and reproductive health promotions has been focus on common sexually transmitted infections such as gonorrhoea, syphilis, and trichomonas. The findings of the study reveal that students have moderate level of knowledge on sexual transmitted infections. Adolescents in this tend to have more knowledge on those common sexual transmitted infections, such as gonorrhoea syphilis and trichomoniasis while the lack knowledge of those sexual transmitted that are uncommon(hepatitis, chlamydia and scabies).

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INTRODUCTION

BACKGROUND

Sexual transmitted infections (STIs) are defined by World Health Organization (WHO) as diseases that are spread predominantly through sexual contact, including vaginal, anal and oral sex (WHO, 2016). Sexually transmitted infections (STIs) are a major global cause of acute illness, infertility, long term disability and death with severe medical and psychological consequences for millions of men, women and infants (WHO 2001). World Health Organization (WHO) estimated that 340 million new cases of syphilis, gonorrhea, chlamydia and trichomoniasis have occurred throughout the world in 1999 in both male and female aged 15-49 years. In 1990, World Health Organization (WHO) estimated that over 250 million new cases of STIs had occurred that year. There are more than 20 pathogens that are transmissible through sexual intercourse. Many of them are curable by appropriate antimicrobial treatment. However, in spite of the availability of effective treatment, bacterial sexual transmitted infection are still a major public health concern in both industrialized and developing countries (WHO, 2001). Adolescents, defined by World Health Organization as persons between 10 and 19 years of age, make up about 20% of the world's population, of whom 85% live in developing countries. Yet, until now they have been neglected as a distinct group and have generally been subsumed under the heading of child, family or women's health and welfare. This has at least partially been because adolescents were considered to be a relatively healthy age group, one without a heavy "burden of disease", compared, for instance, to newborn infants or elderly adults. However, recognition has been growing in recent years among policy-makers that adolescents have special health-related vulnerabilities. The major causes of morbidity and mortality among young people include suicide, road accidents, drug use (including tobacco use) and sexual and reproductive ill health (WHO, 2001)

Statement of the problem

Sexually transmitted infections are a major global cause of acute illness, infertility; long-term disability especially in women and children, with the highest occurrence rate in Africa (WHO 2001). In Liberia, Sexual transmitted infections are among the top five disease for which child bearing age group and adult seek medical care (CDC, 2014). However, information with regard to knowledge of sexual transmitted infections are limited in Liberia. Over the last few years, an increasing number of diagnosed STIs such as syphilis, gonorrhoea, trichomoniasis and scabies have been observed in several clinic within the study area; among teenagers 14 to 19 years old. This increasing number of sexually transmitted infection has caused a concern.

Research Questions

The following questions will guard this study:

1. What is the level of knowledge of senior high school going adolescent regarding sexual transmitted infections (STIs)?
2. What is the level of knowledge of senior school going adolescents regarding the causative agents and the route of transmission of STIs?
3. What is the level of knowledge of senior high school going adolescents regarding the symptoms of STIs?
4. What is the level of knowledge of senior high school going adolescents regarding the complications of STIs?

Significance of the study

This research seeks to improve students' knowledge of senior high school going adolescents towards sexual transmitted infections and reproductive health problems. It seeks to reduce the gap and to meet the demands for information regarding sexual and reproductive health issues among senior high school going adolescents in the study area. This research will also help schools to understand how well students are aware when it comes to sexual transmitted infection, and it will also provide recommendations to the problems.

Objectives of the study

General objective

The general objective of this study is to determine the level of knowledge of senior high school going adolescent regarding sexual transmitted infections.

Specific objectives

1. To determine the level of knowledge of school going adolescents regarding the causative agents and the route of transmission of STIs
2. To determine the level of knowledge of school going adolescents regarding the symptoms of STIs.
3. To determine the level of knowledge of school going adolescents regarding the complications of STIs

Lamination of the study

The lamination of this study include the following:

Several independent variables could not be evaluated for the causes, effect, and risk behaviors and the preventive practices. The researcher was also had Limited funds to carry out the researcher. The researcher also faced difficulty in collecting information from adolescents as the researcher needed approval from some of the adolescent's parents. The researcher also had limited time to do this study therefore, only thirty students was used in this study.

Delimitation of the study

A descriptive research design was used and the study is a cross-sectional survey. This study is a quantative study. The study area is an urban residential area in district # 11 Montserrado County, Liberia. The study was conducted on a random sampling of a cross sectional school survey. The population of this study include senior high school-going adolescents between the ages 14-19 years in the Barnesville 1405 community and the sample size is 30. The period of this study is October 2018 to December 2018.

CHAPTER TWO

LITERATURE REVIEW

2.1 introductions

This chapter deals with the literature on the problem of knowledge and awareness of sexual transmitted infections among adolescents. This literature review familiarizes the reader with theoretical issues relating to the problems and to help the researcher lay a foundation for the study. This literature review on sexual transmitted infections and adolescents will help the researches to formulate appropriate research objectives and to gain further insight on the problem that adolescents are faced with sexual transmitted infections and factors contributing to their lack of knowledge and awareness. This review of literature reveals the following significant issues related to the research topic.

Definition of sexually transmitted infections

Sexually transmitted infections are infections which are mainly transmitted from one person to another through intimate contact (CDC 2010, WHO 2011a). The infection can be spread through oral, vaginal, or anal sex, or through contact with blood during sexual activity. Although uncommon, transmission can also occur through direct contact with affected body parts, tissue, or body fluids of infected persons. Some STIs such as hepatitis B can also be transmitted through sharing or using unsterilized needles (CDC 2010). Vertical transmission, where the mother passes the infection to her child in utero or during childbirth, is also possible. HIV, hepatitis B and syphilis are infections which can be transmitted in this way (CDC 2010). The term STIs describes infections caused by more than 30 different bacteria, viruses and parasites which are transmitted through sexual intercourse. The most common STIs are the bacterial infections: chlamydia,

syphilis, gonorrhoea; and the viral infections: human papillomavirus (HPV), HIV and hepatitis (CDC 2009). If not detected on time or left untreated, these infections can have long-lasting adverse effects. STIs such as HIV and HPV can be asymptomatic over long periods of time while the signs and symptoms of others such as genital herpes can be mild and passing. As a result no attention is paid to them leading not only to delayed diagnosis and treatment, but also increasing the chances of infections being passed on unaware during unprotected sexual intercourse. If untreated, STIs can lead to complications such as pelvic inflammatory diseases, ectopic pregnancies or infertility in women, or epididymitis in men (Adigun T. *at el* 2016)

COMMON SEXUAL TRANSMITTED INFECTIONS

Some of the common sexual transmitted infections are as follow:

CHLAMYDIA

Chlamydia is a common cause of pelvic inflammatory disease with subsequent risk for infertility. The higher prevalence of chlamydia observed amongst female adolescents (24.1%27%),^{6,7} and the association with young age & highlight the important role that screening of sexually active female play in the prevention of infertility.(WHO, 2001)

SYPHILIS

Syphilis, a genital ulcerative disease, causes significant complications if untreated and facilitates the transmission of HIV. Untreated early syphilis in pregnant women results in perinatal death in up to 40% of cases and, if acquired during the four years preceding pregnancy, may lead to infection of the fetus in 80% of cases. (CDC, 2008)

TRICHOMONIASIS

In spite of the fact that trichomoniasis is the most common of STIs, data on prevalence and incidence are limited. Vaginal trichomoniasis has been associated with increased HIV virus seroconversion in women 57. Additionally, trichomoniasis is associated with adverse birth outcomes as premature delivery or rupture of the membranes and low birth weight. Recently, a study conducted in the Democratic Republic of Congo amongst HIV positive and negative pregnant women, show that trichomona vaginalis was isolated twice as often in HIV seropositive women. In addition, trichomoniasis was associated with low birth weight in the group of HIV sero-negative women (WHO, 2001).

PREVENTION OF STIs

The scale of the STI problem is too great to be dealt with in specialized STD centers alone, and steps must be taken to expand and integrate STI management in primary health and other health facilities. The objectives of STI prevention and care are to reduce the prevalence of STI by interrupting their transmission, reducing the duration of infection and preventing the development of complications in those infected (WHO, 2001).

STIs IN ADOLESCENTS AND YOUNG ADULTS

Compared to older adults, sexually-active adolescents 15 to 19 years of age and young adults 20 to 24 years of age are at higher risk for acquiring STDs for a combination of behavioral, biological, and cultural reasons. For some STDs, such as Chlamydia trachomatis, adolescent women may have a physiologically increased susceptibility to infection due to increased cervical ectopy. The higher prevalence of STDs among adolescents may also reflect multiple barriers to accessing quality STD prevention services, including lack of insurance or other ability to pay, lack of

transportation, discomfort with facilities and services designed for adults, and concerns about confidentiality. Estimates suggest that while representing 25% of the sexually experienced population, 15- to 24-year-olds acquire nearly half of all new STDs (CDC2014).

STI knowledge and awareness among adolescents

Most of the literature on knowledge and awareness of STIs among adolescents in industrialized countries comes from the United States and the general consensus is that adolescents are poorly informed about STIs other than HIV/AIDS. Results of a survey conducted among sexually active 14- 18 year old girls in the United States indicate that the adolescents acquired basic information on STIs such as chlamydia, gonorrhea and syphilis only after infection. In the last years, most of the surveys on STI knowledge and awareness among adolescents in a number of industrialized countries such as Australia, Canada and the United Kingdom have focused on HPV and chlamydia. In general, low proportions of adolescents (range 5-66%) were able to identify the two infections or knew that they were sexually transmitted. Recent studies on the knowledge and awareness of HPV and chlamydia among young people in two German cities, Berlin and Bonn, also reported low knowledge levels: in Bonn, 15 % of participants had heard of chlamydia, and in Berlin, less than a third were aware of the fact that HPV can be sexually transmitted. In another study also conducted in Berlin however, comparatively higher levels of HPV awareness were observed, with more than 50% of participating adolescents correctly reporting that HPV infection can cause premalignant lesions and cancer of the cervix and penis. The reasons for this difference are not clear (Folasayo *et al*, 2017)

CHAPTER THREE

Research Methodology

Research setting

The setting of this research is the 1405 Barnesville community. This community is located in District No.11 and there are 3(three) secondary schools within the community in which this research will be conducted. These three schools include: Grace Baptist High School, Kids International High School, and Konowa High School.

Study population and sample size

In this research, the study population includes school going adolescents within the age range 14-19 in the senior high division of the above mention schools in the 1405 Barnesville community. In choosing the sample size the researcher carried out a random selection. The researcher reviewed the information gathered from schools going adolescents with in the age (15-19years) attending the senior high division of the above mention schools within the period under study.

Research Design

A descriptive research design was used and the study was a cross-sectional survey. The study is quantative; this allowed the researcher to use a simple statistical method to present the data that was collected in a more precise and understandable manner, and to find answers to the research question. The study was quantative and data collected from senior high school going adolescent in three schools within the study area within the period under study.

Data collection Instruments and method

A school based cross sectional survey was conducted and this was done by the use of structural questionnaire to access the knowledge of sexual transmitted infection among adolescent attending school in the Barnesville 1405 community from 10th grade and to 12th grade. Student who signed consent completed an anonymous, self-administration questionnaire at the school during normal school time. The questionnaire covered issues on knowledge, of sexual transmitted infections. Questions on knowledge of STIs were constructed based on questionnaire used in other studies.

Data analysis

Data that was collected was analyzed using computer software MS word and Excel. Tables was used to present the data that was collected. Descriptive statistic was used to interpret the data that was collected.

Chapter Four

This Chapter discusses the interpretation and analysis of data collected based on the information collected from School going adolescents in the senior high division of three high schools in the Barnesville. The statistic conclusion made was based on the data collected from students which contributed to the generalization of the study.

Table1: Respondents' knowledge of sexually transmitted infections

Questions	Yes # (%)	No# (%)
Have you ever heard of STI	27 (90%)	3 (10%)
Which of the following are STIs	Correct # (%)	Incorrect # (%)
Gonorrhea	23 (76.66%)	7 (23.33%)
Syphilis	11 (36.66%)	19 (63.33%)
Trichomoniasis	14 (46.66%)	16 (53.33%)
Chlamydia	0 (0%)	30 (100%)
Asthma	30 (100%)	0 (0%)
HIV/ Aids	22 (73.33%)	8 (26.66%)
Hepatitis	5 (16.66%)	25 (83.33%)
Tuberculosis	30 (100%)	0 (0%)
Scabies	0 (0%)	30 (100%)

Table one shows that out of 30 students 27(90%) have heard about sexual transmitted infection. 23(76.66%) know gonorrhea to be a sexually transmitted infection. 11(36%) know syphilis as a sexual transmitted infection. 16(53.33%) do not know that trichomoniasis is a sexual transmitted infection. 30(100%) could not identify Chlamydia as a sexually transmitted infection.

30(100%) know that Asthma is not a sexual transmitted infection. 22(73%) know that HIV/AIDS is a sexual transmitted infection whereas 8(26.66%) do not know. 25(83.33%) do not know that hepatitis is a sexual transmitted infection. 30(100%) know tuberculosis not as a sexual transmitted infection. 30(100%) could not identify scabies as sexual transmitted infection.

Table 2: Respondents' knowledge regarding the causative agent and the route transmission of sexually transmitted infections.

Causative agent	Correct # (%)	Incorrect # (%)
Mosquito	28 (93%)	2 (6%)
Fungi	8 (26.66)	22 (73.33)
Parasites	3 (10%)	27 (90%)
Flies	30 (100%)	0 (0%)
Viruses	17 (56.66)	13 (43.33%)
Bacteria	6 (20%)	24 (80%)
Route of transmission	Correct # (%)	Incorrect # (%)
Anal sex	14 (46.66%)	16 (53.33%)
Oral sex	10 (33.33%)	20 (66.66%)
Vaginal intercourse	19 (63.33%)	11 (36.66%)
Via blood	10 (33.33%)	20 (66.66%)
From Mother to baby	11 (36.66%)	19 (63.33%)

Table 2 shows that 28(93%) know that mosquito is not a causative agent of sexually transmitted infections. 22(73.33%) do not know that fungi are causative agent of sexual transmitted infections. 30(100%) know that flies are not causative agent of sexual transmitted infection. 17(56.66%) know that viruses are causative agents of sexual transmitted infection. 24(80%) do not know that

bacteria are causative agents of sexually transmitted infections. Table 2 also shows that 16(53.33%) do not know that anal sex is a means of transmission of sexually transmitted infections. 20(66.66%)do not agree that oral sex is a means of transmission for sexually transmitted infection. 11(36.66)do not know that vaginal sex is a route of transmission of sexually transmitted infection. 20(66.66%) do not know that sexually transmitted infection can be transmitted through blood. 19(63.33%) do not know that sexually transmitted infection can be transmitted from baby to mother.

Table 3: respondents' knowledge regarding the symptoms of sexual transmitted infection.

Symptom	Correct# (%)	Incorrect (%)
Ulcer in genital area	8 (26.66%)	22 (73.33%)
Pain while passing out urine	18 (60%)	12 (40%)
Discharge from penis or vagina	4 (13.33%)	26 (86.66%)
Sore throat	13 (43.33%)	17 (56.66%)
Painless sore on the mouth and genital area	10 (33.33%)	20 (66.66%)
It can be asymptomatic	0 (0%)	30 (100%)

Table three show that 22(73.33%) do not know that ulcer in the genital organ is a symptom of sexually transmitted infection. 12(40%) do not know that pain while passing out urine is a symptom of sexually transmitted infection. 26(86.66%) do not know that vaginal and penis discharge is a symptom of sexually transmitted infection. 17(56.66%) do not know that sore throat is a symptom of sexually transmitted infection. Also 20(66.66%) do not know in genital area is a symptom of sexually transmitted infections, and lastly 30(100%) do not know that people can have sexually transmitted infection and show no symptom.

Table 4: Respondent's knowledge regarding the complication of sexual transmitted infection.

complications	Correct# (%)	Incorrect# (%)
infertility	11 (36.66%)	19 (63.33%)
Cervical cancer	15 (50%)	15 (50%)
Ectopic pregnancy	11 (36.66%)	19 (63.33%)
Still birth	4 (13.33%)	26(86.66%)

Table three shows that 19(63.33%) do not know that infertility is a complication of sexually transmitted infections. 15(50%) do not know that cervical cancer is a complication of sexually transmitted infection whereas. Also 11(36.66%) do not know that ectopic pregnancy is a complication of STIs while. 4(13.33%) do not know that still birth is a complication of sexually transmitted infections.

CHAPTER FIVE (5)

This chapter contain the discussion conclusion and recommendation. It also contain references.

Discussion

The objective of this study was to determine the level knowledge of senior high School going adolescents of age (14-19years) regarding sexual transmitted infection in the study area. It was found that 90% of the students in this study have heard about sexually transmitted infection. This finding is similar to the finding in Folasayo et al (2017) where 86.6% Of the students in that study heard about sexually transmitted infections. The findings also reveal that 76.66% of the students in this study identified gonorrhoea as a sexually transmitted infections 63.33% of the students did not identify syphilis as a sexually transmitted infection and 53.33% did not identify trichomonas as a sexually transmitted infection. On few of the students identified some of the uncommon sexually transmitted infections. It was alarming to know that 100% of the students do not know that chlamydia is a sexually transmitted infection, 100% do not know scabies to be a sexually transmitted infection and 83.33% did not that hepatitis is a sexually transmitted infections. This findings is different from the finding in Temiloluwa (2017) where 25% 22.0% and 23.6% did not chlamydia, scabies, and hepatitis respectively be a sexually transmitted infection. It has been noticed that students had minimum knowledge on those sexually transmitted infection that are uncommon. This could be that awareness and reproductive health promotions has been focus on common sexually transmitted infections such as gonorrhoea, syphilis, and trichomonas. The findings further reveal that 73.33% of the students in this study do not know that fungi is a causative agent of sexually transmitted infection. It is alarming to know that 90% of the school-going adolescents in this study is do not know that parasites are causative agents of sexually

transmitted infection, and 80% do not know that bacteria are causative agents of sexually transmitted infections. These findings are different from the findings in Folasayo et al (2017) where 17% did not identify parasites, 9.77% did not identify fungi and 7.66% did not identify bacteria as sexually transmitted infections. Regarding the route of transmission of sexually transmitted infections, the findings reveal that 53.33% of the school-going adolescents in this study do not know that anal sex is a route of transmission, 66.66% do not know that oral sex is a route of transmission. Also, 66.66% do not know that sexually transmitted infections can be transmitted via blood. The findings further reveal that 63.33% of the adolescents in this study do not know that sexually transmitted infections can be transmitted from mother to child. When it comes to the symptoms of sexually transmitted infections, 73.33% of the school-going adolescents in this study do not know that ulcer in genital area is a symptom of sexually transmitted infections. Also 86.66% and 56.66% do not know that discharge from penis or vagina and sore throat respectively are symptoms of sexually transmitted infections. It is alarming to know that 100% of the students in this study do not know that sexually transmitted infection can be asymptomatic. Regarding the complications of sexually transmitted infection, the findings reveal that 63.33% of the students do not know that infertility is a complication of sexually transmitted infection. Half (50%) of the population do not know that cervical cancer is a complication of sexually transmitted infection, and 63.33% do not know that ectopic pregnancy is a complication of sexually transmitted infections. It is alarming this research revealed that 86.66% of the school-going adolescents in this study do not know that still birth is a complication of sexually transmitted infection.

Conclusion

The study was a quantitative study. The research design is a descriptive cross-sectional design. The study was to determine the level of knowledge of school going adolescents in the Barnesville 1405

community. At the end of this study, the objectives were met. The researcher was able to provide answers to the research questions. The findings in this study reveal that the students participating in this study have moderate level of knowledge on sexually transmitted infection. It also reveal that students only have knowledge on the most common sexual transmitted infections such as gonorrhea, syphilis, trichomoniasis and HIV/ AIDS. As for their level of knowledge those uncommon sexually transmitted infections such as hepatitis, chlamydia, and scabies; it was very low.

Recommendations

Based on the findings of this study the following are recommended by the researcher:

- a) Health care educators should create a school based health program that will help improve the knowledge of student about sexual transmitted infections.
- b) Parents should also educate their children on reproductive health sexually transmitted infections.
- d) Further study should be conducted to evaluate several other independent variables such as the preventive practices, attitude as well as where school going adolescents get their information regarding sexually transmitted infections could not be evaluated.

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