

Effects of Sexually Transmitted Infections (STIs) on Academic Performance of Secondary School Students in Aba Education Zone, Abia State, Nigeria

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Abstract: *The study focused on the effects of Sexually Transmitted Infections (STIs) on the academic performance of Secondary School Students in Aba Education Zone, Abia State, Nigeria. Three research questions guided the study. A self structured questionnaire was used as the research instrument. The instrument was administered on two hundred and twenty students from all the secondary schools in Aba Education Zone. Data collected was analyzed using mean and standard deviation to answer the research questions. The study revealed that students in Aba Education Zone are not knowledgeable enough on the signs and symptoms of some sexually transmitted infections or diseases like trichomoniasis, genital wart, genital herpe and chancroid. The study concludes that health workers should launch awareness campaigns for the secondary school students in Aba Education zone to help prevent them from contracting sexually transmitted infections that pose serious academic challenges to the students. The study recommends that seminars and workshops be organized in the nine local government areas that make Aba Education Zone to help prevent sexually transmitted infections amongst students in Aba Education Zone of Abia State.*

Keywords: *Sexually transmitted infections, effects, academic performance*

Introduction

Sexually transmitted infections (STIs) are diseases such as syphilis, gonorrhea, HIV/AIDS or a genital form of herpes that is usually or often transmitted from one person to another by direct contact. Sexually transmitted infections may be transmitted from a mother to child before or after birth or less frequently from person to person in a non sexual contact such as in kissing, in tainted blood transfusion or in the use of unsanitized hypodermic syringes (Encyclopedia Britannica 2009).

Similarly, Achalu as cited in Achalu (2013) defined sexually transmitted diseases as group of infections in which the main form of spread is by sexual activity or contact. However, there are others that are caused by variety of organisms which are capable of being transmitted sexually by unprotected sexual activity

Sexually transmitted infections affect initially the genitals, the reproductive tract, the urinary tract, the oral cavity, the anus, or the rectum that may mature in the body to attack its victim in various organs and systems. Other diseases like the tertiary syphilis or paresis, may affect the skin, bones, the central nervous system, the heart, liver or other organs in the human body. Persons infected by HIV/AIDS virus may remain outwardly healthy for years before the disease takes hold within the immune system.

Sexually transmitted infections have a long history. The best known of these diseases is syphilis caused by bacterium – *treponema pallidum*.

Syphilis was believed to have an ancient origin which was mistakenly identified as leprosy by medical historians in Europe about the 1500AD when a virtual epidemic swept Europe. Urethritis that is caused by the gonococcus bacterium (*Neisseria gonorrhoeae*) is called gonorrhea and is one of the best known sexually transmitted diseases today.

Genital herpes is another infection that is significant not only in terms of the discomfort they cause but for the potentially serious illness that might occur in infants born of mothers with genital herpes infections. The sexually transmitted disease that caused the greatest alarm in the late 20th century was acquired immune deficiency syndrome (AIDS). AIDS spread rapidly from the time of its identification in 1981 with reported cases rising at a high rate among homosexuals and intravenous drug users in the United States of America and Western Europe.

The mortality rate from AIDS and the absence of a cure or vaccine against the disease had a sobering effect on sexually permissive societies. About half of all cases of Urethritis that are not gonorrhea are Chlamydia caused by an infection with *Chlamydia trachomatis*. The bacterium is another infecting agent in pelvic inflammatory disease, lymphogranuloma Venereum.

Trichomoniasis is an infection of the urogenital tract caused by a protozoan, *trichomonas vaginalis*. The males have no symptoms with this infection and only a portion of the infected females have a vaginal discharge (Wenger 2015). Candidiasis (yeast infection) is caused by *candida albicans* (*monilia albicans*) which produces in women a thick, whitish vaginal discharge and causes irritation and itching in the genital area. Males may have irritation of the glands or skin of the penis. Because this yeast is ubiquitous in the environment, the infections are not always sexually acquired.

Warts occurring in the genital areas are caused by certain types of papilloma viruses and can be transmitted to other people by nothing more than a nuisance, but occasionally can become large as to interfere with urination, bowel movements, or vaginal delivery. The word knowledge is defined as general awareness or explicit information of a situation or a fact. It means information in mind; possession of information, facts, ideas, truths and principles (Encarta English Dictionary 2008). In pre-colonial Africa, and after, sex outside marriage was considered repugnant and forbidden. People were generally inhibited and did not openly express their opinions and views pertaining to love, marriage and sex. It was also considered a taboo for teachers and parents to talk with students or children about sexual matters, sexual relationships and sexually transmitted infections in schools as well as at home because of cultural and religious barriers.

In recent times, the issue of sex is the subject matter of youths, children programmes, television and nudity in advertisements, magazines, television show and movies point to a general trend of attitudes and values which promote open discussions of human sexuality that were once considered a taboo. This free attitude has influenced people to have liberal and permissive environments and behaviours towards human sexuality both in premarital and extra marital affairs. The sensitivity of sexuality and youth behaviours seems to obstruct education on sexually transmitted diseases despite the fact that there is now a stronger commitment to address sexually transmitted diseases in schools to enable students excel in education.

Indeed experts are in agreement that sexual attitudes and behaviours of present day students in the secondary schools have become more liberal and permissive (Reiss 2014; Roche as cited in Nwankwo (2008) points out that many of those who have not engaged in coitus during their years of study in secondary school will do so before they marry.

In Nigeria, the traditional values for sanctity of sex for procreation have been abused in favour of liberal sexual behaviours. There is high rate of adolescences coital sex and premarital sexual involvements among Nigerian adolescents especially the secondary school students (Onyemelukwe 2013).

Ijezie (2007) report that practices such as anal intercourse, oral intercourse, homosexuality, heterosexuality and deep kissing are associated with high risk of contracting these diseases especially the virus that causes AIDS. In the same vien, OWolabi (2005) reports that the prevalence of STDs in Nigeria is due to sexual promiscuity and homosexuality, lack of sex education, self medication and drug abuse among secondary school students.

Prevention of sexually transmitted diseases is very necessary to stop secondary school students having unwanted sex in the streets from their sexual partners. It is very necessary to bridge the gap between knowledge and practice as a major behaviour change communication challenge to reduce students' vulnerability to sexually transmitted diseases and unwanted pregnancies which can reduce their academic performances at school. Counselling is needed in the secondary schools to launch awareness campaign and control techniques through sharing pamphlets and leaflets to intensify efforts in assisting the students to know the dangers of sexually transmitted diseases and its consequences to school achievement.

Purpose

The purpose of the study is to examine the effects of sexually transmitted diseases and academic performance of secondary school students in Aba Education Zone..

Research Questions

1. What is the level of knowledge of students on the signs and symptoms of sexually transmitted diseases and its effects on students' academic performance?
2. To what extent do students know the modes of transmission of sexually transmitted diseases and how it affects their academic performance?
3. To what extent are students aware of the control of sexually transmitted diseases?

Method

A descriptive survey design was used for the study with a self structured questionnaire which was used to collect the data for the study. The study was done in all the secondary schools in Aba, Abia State. Aba Education Zone is made up of nine local government areas. It is surrounded by both urban and rural areas (schools) with one hundred and eight secondary schools. The study used 220 students which is 20% of the total number of students in each class of school chosen.

A self designed questionnaire was employed as an instrument in the study which is made up of two parts: part one is on the respondent's personal data like school, sex, class and age. Part two comprises all the variables in the study with a four point rating scale. Data was analyzed with the aid of tables, mean and standard deviation to answer the research questions. A mean of 2.50 was accepted while less than 2.50 was rejected.

Results

Research Question 1

What is the level of knowledge of students on the signs and symptoms of sexually transmitted diseases and its effects on the students' academic performance?

Table 1: Mean and standard deviation of knowledge of students on the signs and symptoms of sexually transmitted diseases

S/N	Sexually transmitted diseases	X	SD
1	AID _s	3.18	0.23
2	Gonorrhoea	2.94	0.43
3	Syphilis	2.60	0.17
4	Candidiasis	3.32	0.14
5	Trichomoniasis	1.18	0.92
6	Genital warts	2.30	0.13
7	Genital herpes	2.18	0.24
8	Chancroid	2.32	0.31

The table reveals that the mean responses for AID_s, Gonorrhoea, Syphilis and Candidiasis are 3.18, 2.94, 2.60 and 3.32 respectively. These mean responses are above the 2.50 cut-off point, meaning that the students have high knowledge of these sexually transmitted diseases. Trichomoniasis, Genital warts, Genital herpes and Chancroid have mean responses of 1.18, 2.30, 2.18 and 2.32 respectively. These mean responses are below 2.50 therefore indicates that the students have little knowledge of the signs and symptoms of these sexually transmitted diseases in the area of study. This shows that they suffer their effects which also affect their academic performances.

Research Question 2

To what extent do the students know the modes of transmission of sexually transmitted diseases?

Table 2: Mean and Standard deviation of responses on students' knowledge of modes of transmission

S/N	Male			Female		
	X	SD	Remark	X	SD	Remark
9	3.36	0.80	Knowledgeable	3.48	0.73	Knowledgeable
10	3.10	0.91	Knowledgeable	3.60	1.00	Knowledgeable
11	2.71	0.90	Knowledgeable	3.15	0.86	Knowledgeable
12	3.26	0.94	Knowledgeable	3.41	1.00	Knowledgeable
13	3.75	0.99	Knowledgeable	3.65	0.81	Knowledgeable
14	3.38	0.70	Knowledgeable	2.86	0.99	Knowledgeable

The table shows that the mean responses of the males on the modes of transmission of sexually transmitted diseases as 3.36, 3.10, 2.71, 3.26, 3.75 and 3.38 for numbers 9 to 14 respectively. Also, the mean responses for the females are 3.48, 2.60, 3.15, 3.41, 3.65 and 2.86 respectively. These mean responses show that the students are knowledgeable of these modes of transmission of sexually transmitted diseases.

Research Question 3

To what extent are students aware of the prevention or control measures of sexually transmitted diseases?

Table 3: Mean and standard deviation on students' awareness of control of sexually transmitted diseases.

S/N	Male			Female		
	X	SD	Remark	X	SD	Remark
15	3.32	0.75	High extent	3.36	0.76	High extent
16	3.51	0.64	High extent	3.24	0.85	High extent
17	2.85	0.99	High extent	2.83	1.02	High extent
18	3.22	0.83	High extent	2.91	1.06	High extent
19	3.81	0.93	High extent	3.81	1.03	High extent
20	3.02	0.85	High extent	3.04	0.89	High extent
21	3.00	0.92	High extent	2.84	1.03	High extent
22	3.30	0.82	High extent	3.12	0.92	High extent

From the table, the mean responses of the male respondents on the extent of awareness of control of sexually transmitted diseases are 3.32, 3.51, 3.51, 2.85, 3.22, 3.81, 3.02, 3.00 and 3.30 for items 15 to 22 respectively. Also, the mean responses for the females are 3.36, 3.24, 2.83, 2.91, 3.81, 3.04, 2.84 and 3.12 respectively. These mean responses show that the students are aware to a high extent that abstinence from sex, not testing blood from another person, and so on are control measures for sexually transmitted diseases.

Discussion

The study revealed that the students have good knowledge of the signs and symptoms of AIDs, Gonorrhoea, Syphilis, and Candidiasis. These symptoms include swollen glands, persistent cough, bleeding after sex, burning sensation during urinating, body discharge, skin rashes, itching in the

vagina and so on. This is in line with the reports of Bamidele as cited in Ochulor (2018) who observed that painful urination, milk-discharge, swollen organs, boils, itching and rashes are most frequently mentioned signs of these sexually transmitted diseases. Supporting this assertion, Kelhinde (2007) reaffirmed that some of the symptoms of sexually transmitted diseases include discharge in both men and women, rashes, itching and irritation in the genital region, inflammation of testicals and so on. These symptoms are brought to the knowledge of the students through seminars, workshops and other sources.

The study revealed that the students do not have knowledge of some of the sexually transmitted diseases like chancroid, trichomoniasis, genital wart and genital herpes. Some of these sexually transmitted diseases are not common in the area of the study and to the students. It is therefore normal that the students are more knowledgeable about the signs and symptoms of sexually transmitted diseases like HIV/AIDS, gonorrhea, candidiasis and so on. Onwudinjo (2006) confirmed this when he observed that students are more knowledgeable about HIV/AIDS than other sexually transmitted diseases.

The study also revealed that students are aware of the modes of transmission of sexually transmitted diseases through sexual intercourse, blood transfusion, anal or oral sex and so on. In affirmation, Nwankwo and Unachukwu (2008) reported on their study that students know that AIDS and other sexually transmitted diseases are transmitted through sex, blood contact and injections.

Conclusion

Sexually transmitted diseases are common among secondary school students and can affect a person when he/she engages in bisexual relationship or not. The signs and symptoms in both men and women include: women bleeding after intercourse or between periods, sores, blisters wads, rashes, irritation or itching near the genital or anus, pain on intercourse, pelvic or lower abdominal pain and inflammation on testicles. Sexually transmitted diseases are on the increase simply because the awareness associated with the disease is confusing. The poor awareness makes them full victim of the disease by not engaging in proper healthcare practices that would help them to control the diseases. Seminars and workshops organized for such programmes should be sound and effective through counselling centers in the schools which would practically give students film stripes of how the disease operates on the human body.

Recommendations

The study recommends the following measures from the findings:

1. That health workers should create sound awareness in the secondary schools with the help of the school counsellors to employ the help of film stripes or cinema to enable students see practically the way sexually transmitted diseases act on human body.
2. Government should as a matter of urgency embark on control measures to bring to the grass root the sound knowledge and control methods to prevent sexually transmitted diseases among the students in the secondary schools – routine checks or periodic medical checkups for students.

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