

# S and other sexually transmitted diseases among women attending a family planning clinic in Nairobi, Kenya

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## Abstract:

We interviewed 1,716 women attending a family planning clinic in Nairobi between January 1990 and May 1991 about their knowledge of the acquired immunodeficiency syndrome (AIDS) and other sexually transmitted diseases (STDs). When participants in the study were asked to name spontaneously the STDs they knew, more than 90% of the women named gonorrhea and AIDS, and 75.0% named syphilis; 65.4% could name two or more signs of AIDS; and 96.9%, 66.5%, and 58.3% mentioned sexual transmission, transmission via blood transfusion, and perinatal transmission, respectively, as routes of transmission of AIDS. Knowledge of most symptoms and routes of transmission of AIDS, as well as knowledge of gonorrhea and syphilis, was significantly positively associated with level of education. Unmarried women were significantly less likely to know symptoms and routes of transmission of AIDS than were married women. Level of knowledge of gonorrhea and syphilis was significantly positively associated with number of lifetime sexual partners. Although awareness of AIDS was very high, detailed knowledge of signs of AIDS and routes of transmission was deficient, particularly among less educated women. This positive association of detailed AIDS knowledge with level of education suggests a need to design AIDS prevention activities that are more accessible to, and better understood by, women who have little education. PIP: Between January 15, 1990 and May 6, 1991, in Kenya, family planning workers interviewed 1716 women who attended 2 peri urban family planning clinics in Nairobi to identify predictors of knowledge about AIDS and other sexually transmitted diseases (STDs). 16.3% of the women reported to have or have had an STD. The majority of the women had spontaneously mentioned gonorrhea, syphilis, and AIDS (95%, 75% and 94.2%, respectively). Reference to syphilis increased with education level (65.3% for none, 71.4% for upper primary, 85.8% for upper secondary;  $p < .001$ ). Few women mentioned herpes, chancroid, chlamydia, warts, and trichomoniasis (2% each) and candidiasis (11.7%). 65.4% of the women were able to correctly name at least 2 signs of AIDS. Knowledge of at least 2 signs of AIDS increased steadily with educational level (50.5% for none, 59.6% for lower primary, 71% for lower secondary;  $p < .001$ ) as it did for infection and diarrhea. The most well-known sign was weight loss regardless of education level (87.7%). Essentially everyone knew that AIDS was transmitted sexually (96.9%). Education level was positively associated with knowledge of its transmission perinatally and through a blood transfusion ( $p < .001$ ). Single women were less likely to be familiar with AIDS signs, perinatal transmission of AIDS, and transmission of AIDS by blood transfusions. The more lifetime sexual partners women had the more likely they were to know about gonorrhea and syphilis. These findings demonstrated the important role education plays in AIDS knowledge and the need to design accessible and easily understood AIDS prevention activities for women with limited education.