

## ABSTRACT

## Perceived Risk, Barriers and Prevention Practices of University Students to Sexually Transmitted Infections/Human Immuno-Deficiency Virus in 2006

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Sexually transmitted infections (STIs) are a global public health concern, with Latin America and the Caribbean having the second highest prevalence of infected cases in the world. This communicable disease is of particular interest to universities because they represent the building of human resource and a sector in which persons not only work, but may also live together in dormitories. Furthermore, curable STIs are considered a biologic marker for the transmission HIV. A better understanding of the barriers to sexual behaviour change among university students could therefore guide health promotional strategies to combat this problem. The aim of this study was therefore to determine the perceived risk, barriers and prevention practices regarding STIs/HIV among university students.

The study design involved both quantitative (cross-sectional survey using a self administered questionnaire) and qualitative (focus groups) methodologies. Questions were formulated based on concepts of the Health Belief Model and the Transtheoretical Model of Behaviour. A total of 256 students resident on halls participated in the study.

Students' attitude played a role in their prevention practices regarding STIs/HIV, while knowledge was not a determinant. In addition, gender, perception of risk to STIs/HIV, friends and recreational drug use were associated with prevention practices ( $p < 0.05$ ). Difficulties reported with condom use were bursting, slippage, poor fit and allergies in decreasing order of frequency. Previous negative experiences with condoms tended to prevent persons from being desirous of using condoms. In the qualitative section, Durex and Trojan were reported as good condoms whereas Rough Rider, Long-love and LifeStyles gave more difficulty. Knowledge was associated with intended condom use and with denomination ( $p < 0.05$ ). Persons who used cannabis were more likely to have poor prevention attitudes towards STIs/HIV ( $p < 0.05$ ). Churches and National Drug Prevention Units should be therefore be regarded as important stakeholders when planning STI/HIV prevention programmes. Prevention must go beyond A-Abstinence, B-Be faithful and C-Condoms to include training in the correct use of condoms and the promotion of positive peer pressure among university students.

**Keywords:** Liris Carlotta Benjamin, Sexually transmitted Infections (STIs), Human Immuno-deficiency virus (HIV), Difficulties with condom, Recreational drug use