

Chapter VII

EXPERIENCE STATUS OF RTI/STD BY WIFE AND HUSBAND

RTIs have lot more impact on women's health with special reference to the sexually transmitted and other reproductive tract infections. This study was based on the data collected both from secondary and primary sources to understand the various aspects of prevalence of STDs and RTIs in among 600 women & their spouses. Most commonly reported symptom of STI was itching or irritation or ulcers related to vaginal discharge followed by severe abdominal pain related with the discharge. Most of the women affected with RTIs with symptoms of such as urinal tract infections, pain in abdomen or vagina during intercourse and spotted blood after intercourse. Almost all of the women experience some problems and seek treatment at government and private medical facilities. The level of experience of RTI symptoms by Respondents, nature of treatment seeking, and determinants of level of RTI experience among respondents, and determinants of RTI diseases among husbands are the key factors on which focus was given in this chapters.

7.2 EXPERIENCE OF RTIs/STD

The term reproductive tract infections (RTIs) refer to a variety of infections affecting the lower and upper reproductive tract of men and women. Dixon-Mueller and Wasserheit (1991) call it as "gender asymmetry" and Hatcher et al. (1989) refer to as "biological sexism". Uninfected women are more susceptible to acquire an infection from infected male partner than an uninfected male from an infected woman, and women are likely to suffer more serious and long-term consequences, like, pelvic inflammatory disease (PID), ectopic pregnancy, cervical cancer and infertility. These consequences could be particularly confounding in most developing countries where woman's status in the society, and even within the family, is usually dependent on her fertility. To make things worse, RTIs in many cases are asymptomatic among women, making their detection and diagnosis difficult. Despite such grave consequences, policy makers and health planners in developing countries have not given much attention to these infections.

In the present chapter, effort was made to examine the level of experience of RTI symptoms among Respondents and level of RTI diseases among Husbands.

Table 7.1: Level of Experience of RTI symptoms among respondents

Sl.No.	RTI Symptoms	Level of Experience		
		No	Rarely	Quite often
1	Frequent micturation	513(85.5%)	80(13.3%)	7(1.2%)
2	Pain during Micturation	507(84.5%)	84(14%)	9(1.5%)
3	Urethral discharge	368(61.3%)	203(33.8%)	28 (4.6%)
4	Pain lower abdomen	357(59.5%)	211(35.2%)	32 (5.3%)
5	Genital ulcers	465 (77.5%)	121 (20.1%)	14(23.%)
6	Genital warts	586(97.7%)	14 (2.3%)	-
7	Bleeding after sexual inter course	569 (94.8%)	31 (5.2%)	-
8	Dyspaerunia (pain during sexual inter course)	549(91.5%)	40 (8.1%)	2 (0.3%)
9	Low backache	265(44.2%)	203(33.9%)	132 (22%)
10	Ingunial bubo	591 (98.5%)	9 (1.5%)	-
11	Ophthalmic neonatrum	599(99.8%)	1 (0.2%)	

The above table clearly indicate the frequency of experience of symptoms on eleven RTI related problems among respondents. The highest ‘quite often’ experienced symptom was low backache (22%) and the least experienced symptom was ‘ophthalmic neonatrum’.

Urethral discharge (33.8%), pain in lower abdomen (35.2%) and low backache (33.9%) were the more common symptoms that were ‘rarely’ experienced.

The other notable symptoms experienced ‘quite often’ were pain in lower abdomen (5.2%) and urethral discharge (4.6%).

The other ‘rarely’ experienced symptoms significantly reported were as follows. (a) Genital ulcers (20.1%), (b) Pain during micturation (14%), (c) Frequent micturation (13.3%), (d) Dyspernia (8.1%), (e) Bleeding after inter course (5.2%), (f) Genital warts (2.3%) and ingunia bubo (1.5%).

Index on severity of RTI symptoms

Further, an index was developed based on response to above symptoms to understand the overall level of experience of symptoms.

The scores are allotted to the response as follows:

- (a) Quite often - 0,
- (b) Rarely – 1 and
- (c) Not experienced – 2.

The total range of scores on all the symptoms range from 0 to 22. The respondents are grouped in to three categories based on scores on symptoms as follows.

Category of respondents

Sl.No.	Score & Category of respondents
1	0-7 - Less experience
2	8-15 – Moderate experience
3	16-22 – High experience

The overall experience symptoms of RTI/STD among respondents is presented below

Table 7.2: Index on level of severity of RTI Symptoms among respondents

Sl.No.	Less	Moderate	High	Total
1	196	232	172	600
	32.7%	38.7%	28.7%	100%

According to the above table, majority of respondents had experienced RTI symptoms moderately (38.7%), and 28.7% experienced high severity symptoms. The remaining 32.7% of respondents never experienced any RTI symptom.

DETERMINANTS OF LEVEL OF EXPERIENCE OF RTI SYMPTOMS BY RESPONDENTS

The relation between socio-economic variables and experience status of RTI by wife is discussed here

7.2.1.1 Severity of RTI symptoms and Present Age

The information on the severity of experience of RTI symptoms of respondents basing on their present age has been elicited and presented in the Table 7.3.

Table 7.3: Severity of RTI symptoms among Respondents by 'present age'

Sl. No.	Present Age	Experience of Severity of RTI symptoms			Total
		Low	Moderate	High	
1	Below 25 Years	26	41	71	138
		18.8%	29.7%	51.5%	100.0%
2	26- 30 years	32	38	36	106
		30.2%	35.8%	34%	100.0%
3	30-35 years	51	78	54	183
		28.9%	41.6%	29.5%	100.0%
4	Above 35 years	87	75	11	173
		50.3%	43.4%	6.3%	100.0%
Total		196	232	172	600
		32.6%	38.7%	28.7%	100.0%

Chi-square value- 14.66, p-value-0.023

A clear negative association was noticed between present age of respondents and experience of RTI symptoms. The severity of experience of RTI symptoms declined, with increase in Age. The experience of RTI symptoms was observed as more among young females (Below 25 years of age) as 51.4% suffered with higher severity. It is 34% among those aged 26-30 years, 29.5% among those aged in between 31 to 35 years and only 6.3% among others aged 35 and above years.

However, the moderate severity was more (43.4%) among females of 35 years and above, as against 29.7% among young of aged 25 years and less. Thus, present age of the respondents had bearing on the level of experience of RTI symptoms. The chi-square value is 0.02, and it shows that the association is statistically significant.

7.2.1.2.1 Residence & Severity of RTI

The information on the level of RTI symptoms basing on the residence of the respondents has been elicited and presented in the Table 7.4.

Table 7.4: Residence and Severity of RTI symptoms

Sl.No.	Residence	Severity of Experience of RTI symptoms			Total
		Less	Moderate	High	
1	Rural	15	137	160	312
		4.8%	43.9%	51.3%	100.0%
2	Urban	29	170	89	288
		10.1%	59.0%	30.9%	100.0%
Total		44	307	249	600
		7.3%	51.2%	41.5%	100.0%

Chi-square value-27.33**, p-value-0.05

Among the respondents suffering from high severity of RTI symptoms, majority of the respondents (51.8%) are from rural areas as against only 30% from urban residents. Among urban residents majority had suffered with moderate severity (59%) followed by 30% with high and 10% with less severity. Thus, the severity of RTI was more among rural residents compared to urban counterparts. The Chi-square value is significant at 1 per cent level and hence it can be inferred that residence background has impact on level of experience severity of RTI symptoms by the respondents.

Occupation and Experience of RTI Symptoms

The information on the level of experience of RTI symptoms basing on the occupation of the respondents has been elicited and presented in the Table 7.5

Table 7.5
Occupation and Severity of RTI symptoms

Sl.No.	Occupation	Severity of RTI symptoms in Respondent			Total
		Low	Moderate	High	
1	Labourer	46	52	47	145
		31.8%	35.8%	32.4%	100.0%
2	House wife	106	148	107	361
		29.4%	41%	29.6%	100.0%
3	Self employed	9	6	5	20
		45%	30%	25%	100.0%
4	Part-time employed	29	14	9	52
		55.8%	26.9%	17.3%	100.0%
5	Employees	6	12	4	22
		27.5%	54.5%	18%	100.0%
Total		196	232	172	600
		32.7%	38.7%	28.7%	100.0%

Chi-square value-24.4** p-value-0.05.

A clear negative association between occupational status and level of experience of RTI symptoms is witnessed in the study.

Majority of labourer (32.4%) and Housewives, (29.6%) suffered with 'high' sever RTI symptoms as against only 18% of employees and 17% of Part-time employees. The chi-square value is at 0.5 level, which indicate that the association is statistically significant.

Education

The influence of educational background on level of experience of RTI symptoms is presented below.

Table 7.6
Education and Severity of RTI symptoms

Sl.No.	Education	Severity of RTI symptoms in Respondent			Total
		Less	Moderate	High	
1	No formal education	78	48	53	179
		43.4%	27%	29.6%	100.0%
2	Primary	17	44	35	96
		17.7%	45.8%	46.9%	100.0%
3	Secondary	51	94	53	198
		25.8%	47.4%	38.4%	100.0%
4	Higher education	50	46	31	127
		31.3%	36.3%	24.4%	100.0%
Total		196	232	172	600
		32.7%	38.7%	28.7%	100.0%

Chi-square value-8.435, p-value-0.208

From the above table, it is evident that level of education bears strong influence on level experience of severity of RTI symptoms. Around 24% of higher educated respondents (degree & above) reported to have experienced with less severity, as against 32% of the illiterates and primary level educators clubbed together. Thus, the severity of experience of RTI symptoms was lower among highly educated respondents compared to others with less education. The chi-square value is 0.2 and hence, the association is statistically significant.

Family Type & level of experience of RTI symptoms

The information on the status of RTI experience basing on the type of the family of the respondents has been elicited and presented in the Table 7.7.

Table 7.7: Family Type and Severity of RTI symptoms

Sl.No.	Family type	Severity of RTI diseases in Respondent			Total
		Less	Moderate	High	
1	Nuclear	34	247	185	466
		7.3%	53.0%	39.7%	100.0%
2	Joint	10	60	64	134
		7.5%	44.8%	47.8%	100.0%
Total		44	307	249	600
		7.3%	51.2%	41.5%	100.0%

Chi-square value-3.011, p-value-0.222

The family type was noticed as existing considerable influence on level of experience of severity. More no. of respondents from joint families (47%) experienced high severity of

symptoms as against 39% of those belonging to nuclear families. The respondents in nuclear type of families have reported of experiencing less severity than those in joint families. The chi-square value is 0.2 which denote that the findings are statistically significant.

Annual Income

The information on the status of RTI experience basing on the annual income of the respondents has been elicited and presented in the Table 7.8.

Table 7.8: Annual Income and Severity of RTI symptoms

Sl.No.	Annual income	Severity of RTI symptoms			Total
		Less	Moderate	High	
1	<50000	6	14	27	41
		14.7%	34.1%	51.2%	100.0%
2	50001 - 100000	91	84	69	244
		37.2%	34.4%	28.2%	100.0%
3	100001 - 150000	61	87	51	199
		28.9%	45.9%	25.2%	100.0%
4	150001-200000	17	27	20	64
		26.6%	42.2%	31.3%	100.0%
5	>200000	21	20	11	52
		40.3%	38.4%	21.3%	100.0%
Total		196	232	172	600
		32.7%	38.7%	28.7%	100.0%

Chi-square value-29.30**, p-value-0.05

A clear inverse relation was noticed between level of annual income of respondents and their status of experience of RTI disease. The status of high experience declined with increase in annual income. The higher level of experience of RTI symptoms was reported more among respondents with 50,000 and less annual income (52.4%) followed by 47% among with income between 50,000 to 1,00,000, 45.3% for the income group of 1000 to 1,50,000 , 43.8% for 1,50,000 to 2,00,000 group and least among those with more than 2,00,000 annual income. The Chi-square value is significant at 1 per cent level and hence it can be inferred that there is strong association between the annual income and severity of RTI diseases of the respondents.

Health Seeking Behaviour

The relationship between health seeking behaviour and level of experience of RTI symptoms among respondents is presented in the table below.

Table 7.9
Health Seeking Behaviour and Severity of RTI symptoms among respondents

Health Seeking Behaviour	Level of experience of RTI symptoms			Total
	Less	Moderate	High	
Poor	40	76	63	179
	22.3%	42.4%	35.3%	100.0%
Average	75	65	57	197
	38%	33%	29%	100.0%
Good	81	91	52	224
	36.1%	40.7%	23.2%	100.0%
Total	196	232	172	600
	32.6%	38.6%	28.8%	100.0%

Chi-square -3.01, p-value 0.22

The above table exhibit strong association between pattern of health seeking behaviour of respondents and their level of experience of RTI symptoms.

The proportion of respondents experiencing higher severity of RTI symptoms are less among those practicing 'good' pattern of Health seeking behaviour. Only 23.2% with good health seeking behaviour experienced high severity as against 35.3% with poor behaviour on this regard. Among those experienced less severity of RTI symptoms, more proportion of them followed good health seeking behaviour (36.1%) compared to those with poor behaviour in this regard (22.3%). The chi-square value is 0.22, which denote that the association is statistically significant.

Thus, nature of health seeking behaviour of respondents had considerable influence on the level of experience of RTI symptoms.

Level of exposure to media & Experience of RTI

The information on the status of RTI experience basing on the level of the exposure of the respondents to the mass media has been elicited and presented in the Table 7.10.

Table 7.10
Level of exposure to media and Severity of RTI symptoms

Sl.No.	Respondent on media	Severity of RTI symptoms in Respondent			Total
		Low	Moderate	High	
1	Less	10	106	112	228
		4.4%	46.5%	49.1%	100.0%
2	Moderate	18	74	76	168
		10.7%	44.0%	45.2%	100.0%
3	High	16	127	61	204
		7.8%	62.3%	29.9%	100.0%
Total		44	307	249	600
		7.3%	51.2%	41.5%	100.0%

Chi-square value-23.30**, p-value-0.05

A significant negative association was noticed between level of exposure to mass media and level of experience to RTI symptoms. The experience of RTI diseases declined with increase in level of exposure to media. More number of respondents with less exposure experienced with high severity of RTI (49%) as compared to 45% of those with moderate exposure and only 29.9 % with high exposure to mass media. The chi-square value is 0.05, which confirm that the association is statistically significant.

Level of substances usage & Experience of RTI symptoms

The information on the level of RTI symptoms basing on the level of substances usage by the respondents has been elicited and presented in the Table 7.11.

Table 7.11
Level of substances usage and Severity of RTI symptoms

Sl.No.	Level of substances usage of Respondent	Severity of RTI symptoms in Respondent			Total
		Less	Moderate	High	
1	Less	44	297	237	578
		7.6%	51.4%	41.0%	100.0%
2	More usage	0	10	12	22
		0.0%	45.5%	54.5%	100.0%
Total		44	307	249	600
		7.3%	51.2%	41.5%	100.0%

Chi-square value-2.757, p-value-0.252

Majority of the respondents who use high level of substance usage had high severity of RTI symptoms and the upper the level of substance usage higher was the severity of the RTI symptoms. It is concluded that higher the level of substance of usage higher will be severity of RTI diseases. More than half of respondents (54.5%) who use more substance faced with high severity of symptoms as against 415 of those with less use of substance.

8.2.2 Experience level of RTI diseases by Husband

The experience of level of severity of RTI diseases by husbands was assessed through an index based on related issues. Further, attempt was made to understand the relation between present age of husbands and level of severity of experience of RTI diseases husband.

Severity of RTI/STD diseases among husbands:

The husbands of respondents were separately enquired to know whether they had experienced RTI/STD diseases any time and the response was tabulated.

The type of disease experienced was understood by examining recent doctor's prescription, and symptoms reported by the husbands.

Table No.7.12

Experience of RTI disease by husbands				
Sl.No.	Name of Diseases	Yes	No	Total
1	Gonorrhoea	383 (63.8%)	217 (36.2%)	100%
2	Trichomonas Vaginalis	189 (31.5%)	411 (68.5%)	100%
3	Herpes simplex	113 (18.8%)	487 (81.2%)	100%
4	Human papilloma virus	14 (2.3%)	586 (97.7%)	100%
5	Chlamydia trachomatis	100 (16.7%)	500 (83.3%)	100%
6	Human immunodeficiency virus	22 (3.7%)	578 (96.3%)	100%
7	Genital ulcers	73 (12.2%)	527 (87.8%)	100%
8	Genital urethritis	158 (26.3%)	442 (73.7%)	100%
9	Candida trachomonas	142 (23.7%)	458 (76.3%)	100%
10	Syphilis	166 (27.7%)	434 (73.3%)	100%

The most commonly experienced RTI disease was Gonorrhoea as 63.8% suffered from it, and the least experienced disease was 'Human papilloma virus' (2.3%). The HIV infection was observed from 3.7% of husbands. The other notable diseases reported as

experienced by husbands was a) Trichomonas vaginalis (31.5%), b) syphilis (27.7%), c) Genital urethritis (26.3%) d) Candida trichomonas (23.7%), e) Herpes simplex (18.8%), f) Chlamydia trachomatis (16.7%) and g) genital ulcers (12.2%).

Index of experience of RTI diseases by Husband

To understand the overall experience of RTI disease of husbands based on all diseases mentioned in the table 7.12, an index was developed.

In total, the response was sought on experience of 10 diseases to conduct the index. If the response on each disease experience is 'yes', the score was '0' and, when the response was 'No', the score was '1'. Thus, the total score of index lie between 0 and 10.

The husband are categorised based on level of experience on diseases like 'Less, Moderate and High' based on scores obtained in the index as follows.

Category of husbands by level of experience of diseases

Score	Severity of RTI disease in Husband
0-3	Low
4-6	Moderate
7-10	High

Index table:

Overall experience of RTI diseases by husband.

Sl.No.	Experience of RTI diseases	No. of respondents
1	Low	197 (32.8%)
2	Moderate	209(34.8%)
3	High	194 (32.3%)
Total		600 (100.0%)

As per index majority of husbands have experienced with moderate severity of RTI diseases (34.8%), followed by 32.8% with low severity and remaining 32.3% with high severity.

7.2.2.1 Severity of RTI diseases by present age of husband

The information on the severity of RTI diseases experienced by husbands basing on their present age has been elicited and presented in the Table 7.13.

Table 7.13
Severity of RTI diseases of Husbands

Sl.No.	Age of husband	Severity of RTI disease in Husband			Total
		Less	Moderate	High	
1	35 years & less	8	14	25	47
		17.0%	29.8%	53.2%	100.0%
2	35-40 years	19	28	24	71
		26.8%	39.4%	33.8%	100.0%
3	Above 40 years	170	167	145	482
		35.3%	34.6%	30.1%	100.0%
Total		197	209	194	600
		32.8%	34.8%	32.3%	100.0%

Chi-square value-13.154*, p-value-0.011

The table portrays that 209 husbands (34.8 %) have moderate, 194 husbands (41.5 %) had high and 197 husbands (7.3 %) had less severity of experience RTI diseases. A clear inverse relationship between high severity of RTI diseases and present age of husbands was noticed from the above table. The severity of experience was more among young age group as 53% in the age group of less than 35 years had experienced high severity followed by 33% among 35-40 years age group and 30.1% by those aged above 40 years. The Chi-square value is significant at 5 per cent level and hence it can be inferred that there is substantial relation between the age and severity of RTI diseases of the husbands.

Karl Pearson coefficient of correlation

The Karl Pearson coefficient of correlation has been computed to now the relation among the different variables and presented in the Table 7.14.

Table 7.14
Correlation of severity of RTI symptoms in Respondent

	Severity of RTI disease in Husband	Media exposure of Respondent	Use of substances by Respondent	Severity of RTI Symptoms in Respondent	Health seeking behaviour of Respondent	Personal hygiene of Respondent
Pearson Correlation	0.631(**)	-0.138(**)	0.111(**)	0.654(**)	0.017	0.194(**)
p-value	0.000	0.001	0.006	0.000	0.672	0.000
N	600	600	600	600	600	600

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

The table elicits that severity of RTI disease of husband and severity of RTI symptoms in respondent have substantially and significantly correlated at 1 per cent level. Moreover, use of substances by the respondents as well as personal hygiene of the respondents has significantly correlated at 1 per cent but at lower level.

Multiple Linear Regressions on Severity of RTI symptoms in Respondent

The Multiple Linear Regression on severity of RTI diseases of respondents has been computed basing on Severity of RTI diseases in Husband, Personal hygiene of Respondent, Severity of RTI Symptoms in Respondent, Health seeking behaviour of Respondent, Use of substances by Respondent and Media exposure of Respondent and the results are presented in the Table 8.15.

Table 7.15
ANOVA

R-square value 0.788					
Source	Sum of Squares	df	Mean Square	F-value	p-value
Regression	1644.566	6	274.094	162.047**	0.000
Residual	1003.032	593	1.691		
Total	2647.598	599			

The table portrays that the f value is significant at 1 per cent level and hence it can be inferred that Personal hygiene of Respondent, Severity of RTI Symptoms in Respondent, Health seeking behaviour of Respondent, Use of substances by Respondent and Media exposure of Respondent have lot of impact on the severity of the RTI diseases of the respondents.

Coefficients

The standardised and unstandardised coefficients have been computed and presented in the Table 8.16.

Table 7.16
Coefficients

	Unstandardized Coefficients		Standardized Coefficients	t-value	p-value
	B	Std. Error	Beta		
(Constant)	-9.233	.942		-9.797**	.000
Severity of RTI Disease in Husband	0.410	.029	.400	14.087**	.000
Media exposure of Respondent	-0.083	.019	-.117	-4.452**	.000
Use of substances by Respondent	0.504	.218	.059	2.306*	.021
Severity of RTI Symptoms in Respondent	0.488	.028	.479	17.139**	.000
Health seeking behaviour of Respondent	-0.116	.044	-.068	-2.635**	.009
Personal hygiene of Respondent	0.600	.091	.174	6.602**	.000

Severity of RTI disease in Husband, Media exposure of Respondent, Severity of RTI Symptoms in Respondent, Health seeking behaviour of Respondent and Personal hygiene of Respondent are significant at 1 per cent level and Use of substances by Respondent is significant at 5 per cent level and infer that they have lot of impact on the important factors of severity of the RTI diseases of couples.