Perceptions on Sexually Transmitted Diseases among Women

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Sexually transmitted infections (STIs) are more dynamic than other infections prevailing in the community. It is important that such dynamic epidemiological changes in STIs are acknowledged and kept track of in a vast populous country like India. Like the developed countries, in India too, the bacterial STIs like chancroid and gonorrhea are declining, while viral STIs like HPV and herpes genitalis are on an upswing. This may partially reflect the improved facilities of treatment in the peripheral Centres that prevent the need of many patents in attending the STD clinics in the tertiary Centres.

The older terminology of “venereal diseases (VDs) largely have been superseded in the past 50 years by “sexually transmitted diseases” (STDs), and more recently by “sexually transmitted infections” (STIs). To some, venereal diseases came to be viewed as a narrow term limited to gonorrhea, syphilis, chancroid, lymhogranulomavenereum, and granuloma inguinale, and related VD control laws. The term sexually transmitted diseases more easily incorporate the many newly discovered sexually transmitted agents and syndromes. STD includes diseases that are transmitted by sexual intercourse. Sexual transmission requires the agent to be resent in one partner, the other partner to be susceptible to infection with that agent and that the sex partners engage in sexual practices, which can transmit the pathogen. STIs differs from STD. STD conventionally includes infections resulting in clinical diseases that may involve the genitalia

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and other parts of the body participating in sexual interaction e.g., syphilis, gonorrhea, chancroid, donovanosis, nongonococcal urethritis, herpes genitals etc. STI, in addition, includes infections that may not cause clinical disease of genitals, but are transmitted by sexual interaction like all STD and hepatitis B, human immunodeficiency virus (HIV), HTLV-1 etc. now days the term ST is referred since it covers all the diseases that can be transmitted by sexual intercourse.

Sexually transmitted diseases (STDs) are also known as sexually transmitted infections. They’re passed through vaginal, anal, or oral sexual contact. Female symptoms of an STD can include, vaginal itching, rashes, unusual discharge, pain etc. Many STDs display no symptoms at all. Left untreated, STDs can lead to fertility problems and an increased risk of cervical cancer. These risks make it even more important to practice safe sex.

According to the Center of Disease Control and Prevention (CDC), more than 50 percent of new chlamydia and gonorrhea cases occur in women between the ages of 15 and 24 years. The CDC estimates that 20 million new STDs will occur every year in the United States alone. Every year worldwide, there are approximately 357 million new infections of syphilis, chlamydia, gonorrhea, and trichomoniasis.

Because many women don’t show symptoms with some STDs, they may not know they need treatment. It’s estimated that as many as one in five Americans have genital herpes, but up to 90 percent are unaware that they have it.

Current Trends in India

STDs constitute a major public health problem for both developing and developed countries. The emergence of HIV infection has increased the importance of measures aimed at control of STDs. A proper understanding pattern of STDs prevailing in different geographic regions of a country is essential for proper planning and implementation of preventive strategies.

Sexually Transmitted Diseases in Women:

Sexually transmitted diseases (STDs) are passed through vaginal, anal, or oral sexual contact. Female symptoms of an STD can include vaginal itching, rashes unusual discharge, and pain. Many sexually transmitted infections display no symptoms at all. Left untreated, STDs can
lead to fertility problems and an increased risk of cervical cancer, making it all the more important to practice safe sex. According to centers for disease control and prevention (CDC), untreated STDs cause infertility.

According to WHO 2013, More than a million people acquire a sexually transmitted infection (STI) every day: An estimated 499 million new cases of curable STIs (gonorrhea, chlamydia, syphilis and trichomoniasis) occur every year in addition, 536 million people are estimated to be living with incurable herpes simplex virus type 2 (HSV-2) infections. Approximately 291 million women have a human papillomavirus (HPV) infection. At any given point in time the burden of STIs is greatest in low-income countries. The consequences of STIs have a profound impact on sexual and reproductive health. These may include:

**Fetal and neonatal deaths:** syphilis in pregnancy leads to 305 000 fetal and neonatal deaths, and leaves 215 000 infants at increased risk of dying from prematurity, low birth weight or congenital disease each year.

**Cervical cancer:** HPV infection causes an estimated 530 000 cases of cervical cancer and 275 000 cervical cancer deaths each year.

**Infertility:** STIs such as gonorrhea and chlamydia are an important cause of infertility; in sub-Saharan Africa, untreated genital infection may be the cause of up to 85% of infertility among women seeking infertility care.

**HIV Risk:** Having an STI such as syphilis or HSV-2 infection increases the chances of acquiring HIV infection by three-fold or more.

In addition, the direct physical, psychological and social consequences of STIs have a major impact on quality of life.

Common STDs in women include Chlamydia, gonorrhea, Chancroid, HPV, and genital herpes. Antibiotic treatment can cure STDs caused by bacteria, including Chlamydia, Syphilis, and gonorrhea. No cure is available for some STDs like HIV or Chronic Hepatitis, but medications are available to manage these chronic conditions.

According to the office on Women’s Health, one, who is sexually active, should talk to their doctor about STD testing. Women should get a pap smear every year, and should ask their doctor whether the Human Papilloma Virus (HPV) vaccination is suggested for them. But in practice, due to lack of access to information, ignorance and poverty women are unable to
approach doctor until the situation becomes grave. It is advised that when women found any of the following symptoms, they should approach the doctor.

Women should also be aware of potential STD symptoms so that they can seek medical advice if necessary. Some of the most common symptoms are described below.

**Changes in Urination:** Any pain or burning sensation during urination, the need to pass more frequently, or the presence of blood in the urine can indicate an STD.

**Abnormal Vaginal Discharge:** Changes in the consistency of vaginal discharge, and a thick, white cottage cheese discharge are a sign of a yeast infection. Fewer women are aware that yellow or green discharge might indicate gonorrhea or trichomoniasis.

**Itching in the Vaginal Area:** Itching is a non-specific symptom that may or may not be related to a STD. Sex-related causes for vaginal itching may include an allergic reaction to a latex condom, a yeast infection, pubic lice and/or scabies, genital warts, as well as the early phases of most bacterial and viral STDs.

**Pain during Sex:** This is an often-overlooked symptom but abdominal or pelvic pain can be a sign of pelvic inflammatory disease (PID), most commonly caused by an advanced stage of infection with Chlamydia or gonorrhea.

**Abnormal Bleeding:** Abnormal bleeding is another possible sign of PID or other reproductive Problems arising from an STD.

**Rashes or Sores:** Sores or tiny implies around the mouth or vagina can indicates herpes, HPV, or even syphilis. There is no perfect method to protect against STDs other than through abstinence. By being aware of changes in one’s body and by practicing safe sex, women can protect themselves and their partners, making the transmission of an infection far less likely.

**Women and access to information**

Access to information is a fundamental right enshrined in the Universal Declaration of Human Rights, and critical for the exercise of basic socio-economic and political rights. Often in our societies, it is the most vulnerable and marginalized populations who suffer the greatest due to limited access to information, and this is particularly true for women. Access to information
empowers women to make more effective decisions, for example with relation to education, crop production, land ownership, and health care, enables women to understand and exercise their full range of rights. Gender-specific inequalities, lack of access to resources and high levels of illiteracy had deprived women of equal access to information. Although some progress has been made since the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) was adopted 35 years ago, women around the world continue to lag behind men in terms of power, wealth, education and opportunities.

Methodology

Sampling

This paper is an attempt to understand the perceptions of women, hailing from rural areas regarding Sexually Transmitted Diseases. Data is collected both from primary and secondary sources. Data is collected from 40 respondents who happened to be the victims of STDs. Two cases were also collected. The study adopted the Convenience sampling. Case analysis is done for critical understanding. To maintain confidentiality, original names were changed in the case studies.

Area of the study

Area Hospital of Kuppam, Chittoor district was launched in 1999 with the capacity of 100 beds. Main motto of the Hospital is to serve the poor people and to give a Comprehensive Medical and Nursing care.

Results and Discussion

About 150 to 200 patients visit the hospital every month with the complaint of STIs. It is observed that males are more among the infected. Majority of them works as drivers, agricultural laborers, construction workers, migrated from Bangalore in search of employment. It is evident that the drivers who stay away for longer period from family have un-protective sex with multiple partners. With regard to women, no doubt, it is her partner who transmits the infection to her. Even though fault is with the male partner, women have to bore the brunt. About 50% of women are not aware of the SDS and its transmission. The following are the two cases studies:
Case –I

Ms. Manjula, aged 28 years got married at the age of 19 years. Husband is a lorry driver by profession, residing in a slum of Kuppam town. The couple is blessed with 3 children. The uneducated Majula lead her life as housewife with very minimal comforts at home. Manjula’s husband, being the lone earning member of her joint family, stays away for longer periods as profession forces. Even though she was suffering from genital ulcers and abdominal pain for quite a long time, she didn’t disclose it to anyone due to fear and hesitation. When the condition became worse, she approached the hospital with the following complaints:

Urethral discharge, Genital Ulcers, non-Herpetic, foul smell white discharge, Vulval Itching, Painful urination and Sexual intercourse, increased frequency of urination and Lower Abdominal Pain After examining her medical reports and personal history, doctor came to know that she is infected with (Gonorrhea) sexually transmitted infection. Husband who goes to long trips for 15 – 20 days camps outside, possessing bad habits like smoking and drinking alcohol and unhealthy sex practices with multiple partners is the culprit.

She told that she is not aware of any of the STIs, neither the mode of transmission, nor the risk factors. She never thought that her husband deceives her. Till the moment, she was under the impression that he is very loyal to her. Besides treatment, counseling was also given to both the respondent and her husband.

Case – II

Mrs. Padmamma, aged 35 years got married at the age of 18 years. Husband is a Mason, residing at Kangundi village, Kuppammandal. They have 4 children and had a history of 2 missed abortions. The uneducated Padmamma lead her life as housewife with very minimal comforts at home. Three years back she had 2 units of Blood Transfusion because she was severe Anaemic (Haemoglobin level was 6 grams) Padmamma’s husband is a Mason, stays away for longer period at Bangalore. Even though she was suffering from white discharge, vaginal sores, abnormal bleeding and lower abdominal pain for 3 months, she didn’t disclose it to her family members and even her husband also due to fear and ignorance about the disease condition. When the condition became worse, she approached the hospital with the following complaints:
Rashes over the perineal area, Pain during Sex, Foul smell, white discharge, Vulval Sores, Burning sensation during urination and Abnormal vaginal bleeding.

After examining her medical reports and personal history, doctor came to know that she is infected with (Syphilis) sexually transmitted infection, Doctor was finally ruled out the cause for Syphilis was 3 years back she was transfused 2 units of blood transfusion which was not screened properly for STDs that may be the cause for getting Syphilis to her, even though she and her Husband do not have any bad habits like smoking, taking alcohol and multiple sex partners.

She told that she is not aware of any of the STIs, neither the mode of transmission, nor the preventive measures. She does not follow hygienic practices during Menstrual period, she is not hygienic and all the family members follow open field defecation, these may be the reason to spread the infection to her. Along with treatment, counseling was also given to both the client and her husband.

Case Analysis:

Most of the women are prone for STDs through husbands’ only because of their life style practices and away from family for a longer period for their job purpose. Even though men and their family members always blames the women and neglect their health and practical needs, women are following the culture of silence, related to their reproductive illness and treatment seeking behavior. Living in unhygienic surrounds is also one of the contributing factors of infections.

It is also said that young people are at greater risk of getting STDs for several reasons. Because they are more hesitant to talk openly and honestly and feel that they know everything. It takes a heavy toll on young people. As per the WHO estimates 333 million new cases of curable sexually transmitted infections occur worldwide with the highest rates among 20-24 year olds, followed by 15-19 year olds. One in 20 young people is believed to contract a STI each year excluding HIV and other viral infections.

Preventive Measures:

1. Education and counseling of persons at risk on ways to avoid STDs through changes in sexual behaviors is essential
2. Identification of asymptomatically infected persons and of symptomatic persons unlikely to seek diagnostic and treatment services is necessary
3. Effective diagnosis and treatment of infected persons is crucial
4. Evaluation, treatment, and counseling of sex partners of persons who are infected with an STD is important and
5. Pre-exposure vaccination of persons at risk for vaccine-preventable STDs yields good results.

CONCLUSION:

Sexually transmitted diseases/infections (STDs/STIs) impose a tremendous health burden on women. Women's reproductive organs are more susceptible to harm if an infection is left untreated, and STDs in women often remain undetected and untreated as women are less likely to experience symptomatic diseases. Some of the women are hesitating to express their health problems to their family members and will not come forward to take treatment for their health related problems. Sexually transmitted disease can affect both men and women, but women can have more difficulty figuring out if they even have an STD and untreated the STD can cause other long term problems such as infertility or may even be passed to an unborn child if a woman is pregnant when she develops the infection. Health education and awareness regarding STDs, Menstrual hygiene and hygienic practices during sex and other related problems are very important to reduce the above mentioned problems. Health Education should start from secondary school level and motivate the people not to hesitate to reveal their reproductive health problems with the health personnel and what are the precautions to be followed to prevent the spread of STDs and Reproductive health problems.

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