

Pregnant women's knowledge of sexually transmitted infections and their impact on pregnancy outcomes in Papua New Guinea

Authors:

Poga P.¹ Vallely LM, ^{1,2} Mengi A,¹ Riddell MA,^{1,2} Chico RM,³ Pomat W,¹ Vallely A,^{1,2} Low N,⁴ and Kelly-Hanku A.^{1,2}

¹ Papua New Guinea Institute of Medical Research, Papua New Guinea, ² The Kirby Institute, University of New South Wales, Australia, ³ Department of Disease Control, London School of Hygiene and tropical Medicine, London, UK, ⁴ Institute of Social and Preventative Medicine, University of Bern, Bern, Switzerland.

Background:

Papua New Guinea (PNG) has a dual burden of high rates of curable sexually transmitted infections (STIs) and adverse birth outcomes. Untreated bacterial STIs during pregnancy have been associated with preterm birth, low birth weight and premature rupture of membranes. As part of a wider clinical trial (WANTAIM) we conducted a qualitative study to explore pregnant women's knowledge and understanding of STIs and the impact of STIs on women and their newborns.

Method:

Fifty-four semi-structured interviews were conducted with pregnant women enrolled into WANTAIM. Women were drawn from across nine antenatal clinics in the trial. Audio recordings were transcribed, translated into English where necessary and then stored, managed, and coded in NVivo. Analysis used deductive and inductive thematic analysis.

Results:

Two key themes were identified: poor biomedical understanding of STIs in general and knowledge of the impact of STIs on pregnancy. Many women spoke about STIs, most often naming syphilis and HIV, but lacked specific knowledge of the infections. Many, however, mentioned multiple partners as a "cause" of STIs. Some women discussed what the outcome of an untreated STI may be on the unborn or newborn baby. Some spoke of problems in childbirth, due to a "damaged" birth canal, others spoke of STIs in pregnancy causing miscarriage and poor growth of the unborn baby. Others spoke of the baby dying in utero or soon after birth due to the "swallowing of the mothers rubbish".

Conclusion:

Pregnant women in these settings had limited biomedical knowledge of curable STIs. While there was some understanding of the consequences of untreated STIs in pregnancy for the woman and her unborn baby, this knowledge was limited and poorly understood. Some of this lack of knowledge could be addressed through targeted health education at the antenatal clinic and in the communities.

Disclosure of Interest Statement:

We disclose we have no conflicts of interest.