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THEME:
**PRIMARY HEALTHCARE DELIVERY IN THE
FACE OF MULTI-DIMENSIONAL
CHALLENGES**



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WELCOME ADDRESS BY APHPN NATIONAL PRESIDENT

I am very delighted to welcome you all, on behalf of the Board of Trustees (BOT), National Executive Council (NEC), and the entire members of the Association of Public Health Physicians of Nigeria (APHPN), to the 41st Annual Scientific Conference and General Meeting tagged “Abeokuta 2025”. We give thanks to the Almighty God for the grace and strength to put this conference together in spite of the socio-economic situation of our country. The conference being held in Abeokuta fulfills the wish of the late Prof. Kamil Olanipekun Alausa, who served as the Chairman of the APHPN BOT until his passing on November 10, 2023. During the APHPN conference in Ilorin in 2022, Prof. Alausa specifically requested that his state of Ogun host the 2025 conference. Although he is not physically present here today, we believe that he is very happy in the celestial realm, that his wish has come to pass. As a mark of respect, we shall honor, celebrate, and pay special tribute to Prof. Alausa during this conference.

The theme of this year's conference, “Primary Healthcare Delivery in the Face of Multi-dimensional Challenges,” and the subthemes are very critical to effective and efficient healthcare delivery in Nigeria. It is very depressing that the implementation of Primary Health Care in Nigeria has been suboptimal since inception. At this time, Nigeria is besieged with a double burden of communicable and non-communicable diseases, laced with an avalanche of psychosocial and mental health issues. All actors in the healthcare delivery system must revert to the grassroots to tackle these challenges. Therefore, effective implementation of Primary Health Care is a sine qua non for optimal healthcare delivery.

As APHPN, we will continue to advocate for the appointment of medically qualified Medical Officers of Health (MOHs) to lead the health team in all the Local Government Areas (LGAs) of the country. The current situation, where only about 40% of LGAs in Nigeria have medically qualified MOHs is, to say the least, not acceptable. There are many activities lined up for this conference, which include scientific paper presentations, plenary sessions, and interactions with highly experienced subject matter experts, professionals, technocrats, and policymakers. It is hoped that by the end of the conference, we will develop actionable strategies that will lead to a better healthcare delivery system in Nigeria.

On behalf of the BOT and the National Executive Council of APHPN, I profoundly thank the Chairman of the APHPN Ogun State Branch, Dr. Adewale Daniel Adesanya, the Chairman of the Local Organizing Committee (LOC) of this conference, Dr. Olorunfemi Amoran, the LOC Secretary, Dr. Abdulmumin Kayode Ahmed, and all members of the LOC for working tirelessly towards the successful hosting of this conference. I respectfully show gratitude to the keynote speaker at this conference, our own Prof. Olumuyiwa Odusanya. It is on record that you have been very consistent in service to APHPN, and this cannot be taken for granted.

Finally, I sincerely express my appreciation to all the organizations that have supported this conference – APIN Public Health Initiatives, Ave Health Sense, Lagos State University of Science and Technology, and Shell Petroleum Development Company of Nigeria Ltd (SPDC). I wish you all a wonderful conference and beautiful memories of the city of Abeokuta. Long live APHPN. Long live the Federal Republic of Nigeria.

Professor Alphonsus Isara

WELCOME ADDRESS BY THE LOC CHAIRMAN

I welcome you on behalf of the entire Local Organising Committee with great pleasure to the 2025 Annual General Meeting and Scientific Conference. This is the 41st edition and the 51st year since the establishment of the Association of Public Health Physicians of Nigeria. This year, being an election year, is expected to be filled with many interesting activities. Welcome to Abeokuta, Ogun State, the Gateway to Nigeria and home to a rich cultural heritage. You will definitely enjoy the food, the people, and the cultural heritage of the land. You will be delighted to visit the historic Olumo Rock and other heritage sites. Feel free to breathe the fresh, undiluted air of Abeokuta. This international conference is expected to be well attended by physicians and scientists from all over Nigeria and Africa. The theme of the conference has been specifically designed to address the current global health situation. The guest lecturer is a seasoned physician and scientist of repute who will address the issues with substantial field experience. Moreover, the sub-theme has been selected to cover relevant areas of the topic of discussion.

There will be several expert panel discussion sessions and individual scientific paper presentations that will enrich participants' knowledge on primary health care. Recent advances in the specialty of community medicine and public health in relation to primary care will be addressed, and cutting-edge fieldwork that will advance the practice will be shared.

I hereby appreciate the Ogun State Governor, His Excellency Mr. Dapo Abiodun, for creating an enabling environment for adequate health care, especially at the primary health care level. This is what we are leveraging to host this conference. We also appreciate the Honorable Commissioner for Health in the State, Dr. Oluremi Coker, the Executive Secretary of the State Primary Health Care Board, and other Directors at the State Ministry of Health for their support towards the hosting of this conference. I also appreciate all the organizations that have partnered with us in the sponsorship of the various sessions of the conference: APIN/USAID, WHO, SPARKLES, UAC Foods, SHELL, UNFPA, NCDC, JHPIEGO, NPHCDA, etc.

Furthermore, I commend the efforts of the hardworking men and women of the LOC, who worked tirelessly and made great sacrifices to ensure the success of this conference. I also appreciate every member of the Association in the state for their labor and contributions to the conference. The Lord will reward everyone bountifully.

Finally, I salute the National Executive Committee, ably led by Prof. Alphonsus Isara and the Board of Trustees of the Association, for their efforts in expanding the frontiers of knowledge and maintaining excellence in the specialty. My prayer is that this conference will be a fulfilling and memorable experience for all attendees. Please find all the support and information you need and feel free to contact any member of the LOC for further assistance.

Thank you.

Professor Olorunfemi Amoran

Immunization Status of Children Under-Five in Ado-Odo Ota and Ifo LGA, Ogun State

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ABSTRACT

Background: Immunization has proved to be one of the most important public health interventions and cost-effective strategies to reduce the morbidity and mortality of vaccine-preventable diseases among children under five years old. Despite global and national efforts to improve immunization coverage, disparities still exist, particularly in low—and middle-income countries like Nigeria. This study determines the immunization status of children under five in Ado-Odo/Ota and Ifo Local Government Areas (LGAs) of Ogun State, Nigeria, examining maternal knowledge and factors associated with vaccine uptake.

Methods: A descriptive cross-sectional study was conducted in rural communities of Ado-Odo/Ota and Ifo LGAs. A multistage sampling technique was used to select 350 mothers of under-five children. Data were collected through interviewer-administered questionnaires covering socio-demographic characteristics, immunization knowledge, and vaccination status. Immunization data were verified through immunization cards and maternal recall. Data were analysed using IBM SPSS version 20, and associations between variables were tested using chi-square and Fisher's exact tests at a significance level of $p < 0.05$.

Results: Among the 350 respondents, 52.9% had good knowledge of immunization, while 47.1% demonstrated poor knowledge. Immunization awareness was high, with antenatal care visits (75.7%) serving as the primary source of information. The immunization status revealed that 48.9% of children were 'fully and timely immunized', 35.4% were 'fully but not timely immunized', and 15.7% were 'incompletely immunized'. Key factors associated with 'full and timely immunization' included maternal education, antenatal care registration, and geographic location within the LGAs. Socioeconomic factors such as parental education and wealth quintile were also associated with immunization uptake.

Conclusion: While immunization coverage in the study population was relatively high, it remains suboptimal, with significant disparities in timeliness. Maternal education, antenatal care attendance, and geographic accessibility play crucial roles in determining vaccination completion.

Recommendations: To improve immunization rates, targeted health education programmes should focus on increasing maternal awareness and addressing barriers to vaccine accessibility. Strengthening routine immunization services and supplementing them with outreach programmes in underserved communities are essential to achieving full coverage and reducing vaccine-preventable diseases.

Keywords: Childhood vaccination, Immunization coverage, Maternal knowledge, Vaccine uptake, Nigeria.

Patient Satisfaction with Healthcare: A Comparative Study of Insured and Uninsured Patients at a Teaching Hospital in South-South Nigeria

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ABSTRACT

Background: Patients' satisfaction is critical to healthcare quality and outcomes, influencing service utilization and trust in health systems. In Nigeria, satisfaction disparities between insured and uninsured patients remain underexplored. This study compared patient satisfaction across seven subscales: communication, time with the doctor, interpersonal manner, accessibility and convenience, general satisfaction, technical quality, and financial aspects.

Methodology: The study was conducted within the General Outpatient Department of the University of Port Harcourt Teaching Hospital. An analytical cross-sectional design was employed, and systematic sampling was used to recruit 1,400 participants, comprising 700 insured individuals and 700 uninsured individuals. Data collection was facilitated using the Patient Satisfaction Questionnaire (PSQ-18), and the subsequent analysis was performed using IBM SPSS Statistics Version 26. Descriptive and inferential statistical analyses were conducted, with a significance level set at $p < 0.05$.

Results: Significant differences across five subscales were revealed. Insured patients reported greater satisfaction with time spent with the doctor (mean: 3.20 vs. 3.11, 67.2% vs. 62.1%; $p = 0.0351$) and interpersonal manner (mean: 3.32 vs. 3.22, 68.3% vs. 64.6%; $p = 0.0026$). Uninsured patients showed higher satisfaction in accessibility (mean: 3.08 vs. 2.95, 70.2% vs. 65.4%; $p < 0.0001$), technical quality (mean: 3.07 vs. 2.88, 72.8% vs. 62.1%; $p < 0.0001$), and financial aspects (mean: 3.43 vs. 3.19, 74.6% vs. 67.4%; $p < 0.0001$). Communication ($p = 0.0524$) and general satisfaction ($p = 0.554$) showed no significant differences. Age, level of education, and marital status were key predictors of satisfaction. Among insured individuals, communication, time spent, and accessibility had a substantial impact on satisfaction, while among the uninsured, only accessibility had a strong association.

Conclusion: Insured patients are more satisfied with the time spent with doctors and the interpersonal aspects of care, highlighting the importance of provider interaction. In contrast, uninsured patients express greater satisfaction in accessibility, technical quality, and financial aspects, suggesting different priorities in their healthcare experience.

Recommendations: Healthcare systems and providers should implement tailored strategies to enhance patient satisfaction and reduce disparities, ensuring quality care for insured and uninsured individuals.

Keywords: Patient Satisfaction, Quality of Care, Healthcare Financing, Health Insurance, Universal Health Coverage.

Knowledge, Attitude, and Practice of Cervical Cancer Screening Among Female Staff of Delta State University, Abraka, Nigeria

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ABSTRACT

Background: Cervical cancer remains a significant public health concern, particularly in low- and middle-income countries (LMICs) like Nigeria, where it is the second most common cancer among women, with significant mortality associated with poor screening uptake and late diagnosis. Despite being highly preventable, cervical cancer continues to thrive in settings with fragmented healthcare systems. This study aimed to assess the knowledge, attitudes, and practices regarding cervical cancer and its screening methods among female staff of Delta State University, Abraka, Nigeria.

Methods: A descriptive cross-sectional study design was employed to collect data from academic and non-academic female staff of the Delta State University Abraka campus, between July and September 2024.

A multistage sampling technique was used to select 315 respondents from 9 faculties of the institution. Data were collected using a pre-tested, semi-structured, expert-validated questionnaire and analyzed using IBM-SPSS version 26. Descriptive and inferential analysis was done, with significance level set at $p < 0.05$. Ethical approval was obtained from the Health Research Ethical Committee of Delta State University Teaching Hospital, Oghara.

Results: The average age of respondents was 39 ± 8 years. Most respondents identified as Christians (97.8%) and were married (67.0%). The majority of respondents were non-academic staff (62.9%) and junior staff (64.4%). Seventy-five percent reported awareness of cervical cancer, while 65.1% knew about screening tests, with the Pap smear being the most recognized test (61.6%). Overall, 51.1% had good knowledge of cervical cancer and its screening methods, while 95.2% had a positive attitude towards cervical cancer screening. Only 21.3% of respondents underwent screening, with 60.3% receiving recommendations to do so. Notably, 82.4% of those not screened were unaware of where to access screening services. Knowledge ($p = 0.003$), education level ($p = 0.026$), faculty ($p = 0.009$), and type of employment ($p = 0.003$) were significantly associated with the practice of cervical cancer screening.

Conclusion: Despite having good knowledge and positive attitudes toward cervical cancer screening, the uptake remains inadequate, primarily due to a lack of awareness about screening locations.

Recommendations: Interventions to address knowledge gaps, alleviate fear, and improve accessibility are recommended to enhance screening participation.

Keywords: Knowledge, Attitude, Practice, Cervical Cancer, Screening.

Barriers to Utilization of Reproductive, Maternal, Newborn and Child Health Quality of Care Indicators for Quality Improvement at all Levels of Healthcare in Ondo and Ekiti States

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ABSTRACT

Background: Nigeria is among the low- and middle-income countries where the need to improve quality of reproductive, maternal, newborn and child health (RMNCH) care is particularly urgent. The routine health information system (RHIS) is the main source of evidence for quality improvement (QI) initiatives at all health system levels in Nigeria but evidence is lacking on the barriers to the regular use of the RMNCH quality of care (QoC) indicators generated from the RHIS. This study assessed these barriers at all levels of healthcare and policy in Ondo and Ekiti States.

Methods: Using key informant interviews (Ondo:33; Ekiti:33) and focus group discussions (Ondo:4; Ekiti:4), data was collected from purposively sampled health management information system officers/managers at the health facility, local government area (LGA), and state levels; RMNCH service providers; Officers-in-charge of Primary Health Care (PHC) centres; LGA PHC Directors; State Directors of Planning, Research and Statistics; and QI teams/staff across selected LGAs in Ondo and Ekiti States. The interviews were audio-recorded, transcribed, and analysed thematically using ATLAS.ti.

Results: In both states, many participants indicated that they capture various data on quality of RMNCH care. However, the participants alluded to several barriers preventing the regular use of RMNCH QoC indicator results to improve the quality of RMNCH care at the primary, secondary, and tertiary healthcare levels. Poor funding of health facilities; lack of drugs, equipment, and supplies; staff shortage; and lack of staff motivation were high on the list. Other challenges mentioned, among others, were inconsistent data, lack of feedback from State HMIS leads, and inadequate space for ambulance movement.

Conclusion and Recommendations: Inadequate human, material, and financial resources militate against the use of RMNCH QoC indicator results for QI in Ondo and Ekiti States. Provision of these resources is recommended as one of the prerequisites to improving the quality of RMNCH care.

Keywords: RMNCH; Health Care; Quality of Care; Quality of Care Indicator; Quality Improvement

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One Health: Non-health Sector Activities for Improving Health at the Community Level in Nigeria

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ABSTRACT

Background: The One Health approach enables multisectoral collaboration in designing and implementing programs, policies, legislations, and research to achieve better public health outcomes for the human, animal, and environmental sectors. In 2019, Nigeria developed a One Health plan between the Ministries of Health, Environment, and Agriculture & Rural Development. This paper explores what multisectoral activities exist at community levels to improve citizens' health in alignment with the One Health plan.

Methods: A qualitative study was conducted in three states in northern and southern Nigeria- Akwa Ibom, Anambra, and Kano, to explore collaborative activities between non-health sectors, Agriculture and Environment, and the health sector towards improving community health. Twenty-one in-depth interviews (IDIs) were conducted with health providers, Agriculture and Environmental sector stakeholders and six focused group discussions (FGDs) with community groups.

Results: Collaborative health-related activities were identified across the three study states. In Akwa Ibom State, the local government Environmental Department ensures regular cleaning of the environment and drainage through the village sanitation committee. They also involve the education sector when sensitization is required, for example. They are backed by state laws and overseen by the state ministry of environment. In Kano State, the agriculture department ensures that members of the community consume healthy animal products in the form of meat through regular inspection of abattoirs, in collaboration with the health department. In Anambra State, the agriculture sector set up a special programme to cushion the effects of COVID-19. Community groups reported improved health at the household and community levels because of some of these initiatives. They reported inadequate financial and human resources as a challenge to sustainable activities and collaborations.

Conclusion and Recommendations: There is evidence that multisectoral activities towards One Health are being implemented at the community level. However, more needs to be done to strengthen and sustain these activities. One health activities at the community level through a multisectoral action and community empowerment backed by explicit policies.

Key words: One Health; Multisectoral; Community Health; Agriculture; Environment.

Prevalence and Pattern of Methamphetamine (Mkpuru mmiri –“seeds of water”) Use among Students in Anambra State, Nigeria.

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ABSTRACT

Background: Methamphetamine, often known as meth, ice, and crystal meth, is categorized by the United Nations Office on Drugs and Crime (UNODC) as a member of the drug class known as amphetamine-type stimulants (ATS). It is a synthetic medication that is frequently produced in unlicensed facilities. It is available in a variety of forms, including powder, capsules, and crystals that resemble broken pieces of glass. Common names of methamphetamine include tik, shaabu, yaba, ice, chalk, wash, trash, dunk, gak, pookie, cookies, Christina, no doze, white cross, cotton candy, rocket fuel, scoobysnax and Mkpuru mmiri (seeds of water). Mkpuru mmiri is a crystal narcotic hallucinogen that is capable of destroying a person mentally. There is a current surge in the abuse of methamphetamine among adolescents and youths. This study sought to ascertain the prevalence and, pattern of methamphetamine use (Mkpuru mmiri) among students in Anambra State, Nigeria.

Methodology: A descriptive cross-sectional study was adopted for this research. The researcher used the Respondents Driven Sampling (RDS) technique to select the 110 respondents used for the study. Data were analyzed using IBM SPSS Statistics, version 22.0.

Results: Most of the respondents, 67 (60.9%), were between 21- 30 years, and 28 (25.5%) were between 31- 40 years. Most were introduced to it by friends (70.6%). All have used it in the past, 78 (70.9%) are currently taking methamphetamine. Half of the respondents 55 (50%) consume only methamphetamine while others use it in combination with other substances, 83 (75.5%) use it in public, 96 (87.35) depend daily on meth, 64(58.2%) affirmed that they use meth more than five time, while 46(21.8%) use meth less than five times, 79 (71.8%) participants indicated that methamphetamine use is not accepted in the area, yet. Majority 89 (80.9%) identified family history of drug abuse as the major predisposing factor to the use of meth by students, others were 80(72.7%) wrong association, 80(72.7%) wrong association, 54(49.1%) blamed poverty, 83(75.5%) blamed unemployment, 84(76.4%) opined that poor home training by parents should be blamed.

Conclusion: This study shows a high prevalence of intake of methamphetamine by youths, mainly due to (friends) wrong association, poverty and unemployment among others.

Recommendation: There is a need to improve awareness against drug abuse and meth use, initiate punishment for users, manufacturer and distributors. Joint actions between the state government, health agencies, and tertiary institutions are key to reducing this menace.

Keywords: Drug Abuse, Methamphetamine, Mkpuru mmiri (“Seeds of water”), Youths

Ownership and Utilization of Long-Lasting-Insecticide-Treated-Nets among Households in Kaiama Local Government Area, Kwara State, North-Central. Nigeria

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ABSTRACT

Background: Mosquito nets, most commonly in the form of long-lasting insecticide-treated nets (LLINs), are a central component of global malaria control initiatives. Ownership rates remain low in many malaria-endemic regions or amongst particular groups in such regions. Mosquito net ownership in itself is not synonymous with utilization. Malaria continues to be the leading cause of childhood mortality and morbidity despite government efforts, donors and the private sector's interventions to ensure that children under 5, who are most vulnerable access, own and sleep under LLINs. This study aims to assess ownership and utilization of long-lasting insecticide-treated nets among households in Kaiama LGA, Kwara State, North-central, Nigeria.

Methods: A descriptive cross-sectional study, an interviewer-administered questionnaire, which had been pretested in a similar community, was used for data collection. The respondents were the Heads of household in the selected communities in Kaiama LGA of Kwara State. Data analysis was done using SPSS version 20.

Results: The mean age was 34.6 ± 11.9 years. Most respondents, 385 (81.9%), had knowledge of LLINs. Most respondents, 261 (67.8%), knew about LLINs through health workers, while 111 (28.8%) heard about them through the radio. Most respondents, 164 (42.6%), agreed that LLINs cause heat when you sleep in them. Almost all 436 (92.8%) owned nets. Utilization among the age group 1 year old was 97 (35.7%); while 1- 5 years was 117 (43.0%), and 5-14 years accounted for 13 (4.8%). Utilization among non-pregnant women was 6 (2.2%), while pregnant women had 105 (38.6%).

Conclusion and Recommendations: Knowledge of the significance of LLITN among the study population was encouraging; however, negative perceptions affected utilization despite adequate net ownership.

Keywords: LLIN, Perception, Ownership, Utilization, Kaiama-Communities, North-central, Nigeria

Prevalence and Predictors of Viral Load Non-Suppression among Children (0-9) and Adolescents (10-19) attending Clinic in a Tertiary Hospital, South-west, Nigeria.

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ABSTRACT

Background: Despite significant progress made towards achieving the WHO-2030 target, particularly in African regions, viral load non-suppression (VLNS), especially among children and adolescents, remains a substantial challenge. The introduction of HAART has led to a remarkable decrease in global HIV infections, however, the burden of VLNS persistence poses a troubling threat to the achievement of the WHO goal. This study aims to assess the proportion of virological failure and identify predictors of VLNS among children and adolescents receiving antiretroviral treatment (ART) at the Federal Medical Centre, Abeokuta (FMCA), Southwest Nigeria.

Methods: A retrospective cross-sectional analysis of clinical data from pediatric patients aged 0-19 years who attended the FMCA between January 2021 and December 2023 was conducted. The study focused on both patients with viral load ≥ 1000 copies/ml and those with viral load suppression (≤ 1000 copies/ml).

Results: Mean age was 15.76 ± 3.12 years. In 2021, 19 (14.1%) had unsuppressed viral load (VL ≥ 1000 copies/ml). In 2022, the unsuppressed viral load was 12 (8.9%), and in 2023, the unsuppressed viral load was 16 (11.9%). Compliance with ART was significantly associated with VLNS for the years 2021, 2022, and 2023, respectively. A multivariate regression analysis of predictors of Viral Load Un-suppression showed that across the 3 years under review, compliance to ART was a strong predictor of non-suppression.

Conclusion and Recommendations: Despite resources and gains made in HIV interventions in achieving viral load suppression, a substantial population of children and adolescents still remain virally unsuppressed; 2021 [14.1%], 2022 [8.9%], and 2023 [11.9%], respectively. This study showed that efforts to achieve UNAIDS 2030 are achievable if compliance with ART can be sustained [p-value- 0.025].

Keywords: HIV, Viral-Load-Non-Suppression, Children, Adolescents, Antiretroviral-Therapy, South-west, Nigeria.

Pattern of STI Cases at the Sexual and Reproductive Health Clinic in a Tertiary Health Facility in Rivers State, Nigeria

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ABSTRACT

Background: Sexually Transmitted Infections (STIs) remain a significant public health concern globally and have negative impacts on the reproductive age group. This study examined the pattern of STI cases at the sexual and reproductive health clinic in a tertiary Health facility in Rivers State, Nigeria.

Methods: A cross-sectional study design was used to retrospectively review 502 folders of patient cases seen in the facility from January 1, 2019, to December 31, 2023. Data was collected using a structured data extraction sheet designed for the study and analysed using descriptive statistics and Pearson's Chi-Square test.

Results: The findings indicated that the median age of the respondents was 28 years. About 238 (45.8%) were between the ages of 20 to 29 years. Most of the clients (342; 68.1%) were single, 263 (52.4%) were male, and 397 (79.1%) were residents of urban areas. Furthermore, more cases (115; 30.9%) were reported in 2019 compared to other years, and 467 (93.0%) of the cases were new. The proportion of the population with one or multiple sexual partners in the past year was 207 (41.2%) and 209 (41.6%). About 293 (58.4%) used condoms sometimes, while 242 (48.2%) had a previous history of STIs. The most prevalent case observed during this period was genital warts, 132 (26.3%). The association between the pattern of STIs showed that genital warts were common among the age group of 10 to 19 years, 75 (33.3%). A higher proportion of those aged 70 to 79 years (50.0%) had candidiasis, while genital herpes was more common among those aged 50 to 59 years. Additionally, a higher proportion of genital warts, 71 (29.1%), was seen among females, and 3 (50.0%) among those who were separated. It also recorded the highest cases in 2023, 41 (37.6%). The factors significantly associated with the pattern of STI cases were HIV status and a previous history of STIs.

Conclusion and Recommendations: The study concluded that adolescents and young adults are disproportionately affected by genital warts, whereas the older population experiences higher rates of Candidiasis and herpes. There were also gender differences in STI prevalence, with females being more likely to experience genital warts, multiple STI syndrome, and candidiasis. It was recommended, among other measures, the need for early sexual health education and vaccination, especially among adolescents.

Keywords: Pattern, Sexually Transmitted Infections cases, Health facility, Sexual, Rivers State.

Misconceptions and Attitudes towards Exclusive Breastfeeding among Women Attending Clinics in Enugu State

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ABSTRACT

Background: Despite decades of research affirming the life-saving benefits of exclusive breastfeeding (EBF), a startling number of misconceptions continue to cloud public perception, undermining a practice crucial for infant health. Furthermore, cultural beliefs, personal experiences and societal pressures shape attitudes towards EBF, often at odds with medical advice. The objective was to identify the misconceptions and attitudes towards EBF among women attending clinics in Enugu State, Nigeria.

Methods: A descriptive cross-sectional study was conducted in three healthcare centers, involving 600 women aged 15 – 49 years, with at least one child over six months. Data was collected via questionnaires and analyzed using Statistical Package for the Social Sciences (SPSS) software version 23.0.

Results: The response rate was 72% (n = 432). Common misconceptions included the belief that breastfeeding causes saggy breasts (49.5%, n = 214), pregnant women should not breastfeed (65.8%, n = 284), and that formula makes the baby gain weight and appear more attractive (55.5%, n = 240). Most participants (74.1%, n = 320) had a good attitude towards exclusive breastfeeding (EBF). A statistically significant association ($p < 0.05$) was found between attitude and factors such as tribe, educational status, marital status, employment status, and husbands' involvement tribe.

Conclusion and Recommendations: The study highlighted a few common misconceptions about EBF, similar to those seen in earlier studies, as well as a positive overall attitude. Recommendations include targeted educational programs and further research on the factors influencing EBF attitudes.

Keywords: Exclusive breastfeeding, Misconceptions, Attitudes, Enugu State, Maternal and Child Health

Knowledge, Attitude and Practices on Integrated Disease Surveillance and Response: A Cross-Sectional Study among Healthcare Workers in a Private Tertiary Institution in Southwest Nigeria

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ABSTRACT

Background: Integrated disease surveillance and response (IDRS) is a strategy to address the increasing burden of diseases and health-related events globally and particularly in LMIC. There have been several outbreaks of diseases in recent decades, and there is a need to put measures in place for early detection and appropriate responses. Disease surveillance data is the basis for the detection of potential outbreaks for an early warning system to prevent public health emergencies. It enables monitoring and evaluation of the impact of an intervention, helps track progress towards specified goals and clarifies the epidemiology of health issues. Adequate knowledge and practices of healthcare workers towards IDSR are key in the control of diseases and health-related events. Hence, this study was conducted to determine the knowledge, attitudes, and practices of healthcare workers on IDSR.

Methods: This cross-sectional study was conducted among 332 healthcare workers in a tertiary healthcare institution using a quantitative data collection method. The questionnaire was self-administered. Participants were selected using a simple random sampling technique. Data was analyzed with IBM SPSS version 27. Bivariate and multivariable logistic regression analyses were conducted to identify the factors associated with the knowledge, attitudes, and practices of IDSR. Using odds ratios and a 95% confidence interval, a p-value of less than 0.05 was considered statistically significant.

Results: Good knowledge was found among 218 (65.7%) of the participants, 186 (56%) of the participants had a good attitude, while 136 (41.0%) had good practice. The following factors were found to be associated with practice: level of education (OR: 16.848, 95% CI 2.887-16.246, p=0.0001), cadre of healthcare worker (OR: 5.170, 95% CI 2.050-13.037, p=0.002), while for practice: years of working experience (OR: 0.241, 95% CI 0.024-2.465, p=0.0001).

Conclusion and Recommendations: The healthcare workers' knowledge and attitude towards IDSR were good; however, their IDSR practices were poor. The level of education and cadre of the healthcare worker were found to be factors associated with IDSR practices. We therefore recommend that the capacity of lower cadre healthcare workers should be built to improve their IDSR practices.

Keywords: Integrated Disease Surveillance and Response; Epidemics; LMIC; Healthcare Workers; Knowledge; Attitude; Practices.

Knowledge, Attitude and Practice of Modifiable Behavioural Non-Communicable Disease Risk Factors among Undergraduate Students in a Private Tertiary Institution in Southwest Nigeria

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ABSTRACT

Background: Non-communicable diseases (NCDs) are a leading cause of global morbidity and mortality, responsible for 74% of deaths worldwide. Research has shown that NCDs are caused mainly by underlying modifiable risk factors that emerge early in life. The risk factors include tobacco and alcohol use, lack of physical activity, eating unhealthy diets, and air pollution. About 70 per cent of the premature deaths that occur among adults are as a result of the health-related behaviours during childhood and adolescence. Hence, this study assessed the knowledge, attitude and practice of modifiable behavioural NCD risk factors among undergraduate students in a private tertiary institution in Southwest Nigeria.

Method: A cross-sectional study was conducted using self-administered questionnaires among 391 undergraduate students of Babcock University, selected through multistage sampling. Data entry and analysis were performed using IBM SPSS version 27. Statistical analyses included bivariate and multivariate analyses to determine the associations between socio-demographic characteristics and the outcome variables. Using odds ratio and 95% confidence interval, a p-value <0.05 was considered statistically significant.

Result: The study found that 215 (55%) participants had poor knowledge about modifiable behavioural risk factors for NCDs. Regarding attitude, 231(54.5%) of participants exhibited a poor attitude about modifiable behavioural risk factors for NCDs. In practice, 204(52.2%) of participants demonstrated good practice related to modifiable behavioural NCD risk factors. Sex (OR=17.434, 95% CI=0.5.848- 51.973, p = 0.0001) was found to be a factor associated with practices on NCD risk factors.

Conclusion and Recommendations: This study pointed out significant gaps in the knowledge and attitudes of undergraduates in a private tertiary institution in Southwest Nigeria towards modifiable behavioural NCD risk factors among undergraduate students. We therefore recommend that programs and initiatives targeted towards improving the level of knowledge, attitude and practice of modifiable behavioural NCD risk factors among undergraduate students. This will help in reducing the occurrence of NCDs in adulthood.

Keywords: Non-communicable Diseases; Risk Factors; Health Knowledge, Attitudes, Practice.

Knowledge and Practices on Food Safety and Hygiene among Undergraduate Students in a Private University in South-West Nigeria

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ABSTRACT

Background: Foodborne illnesses occur as a result of improper handling, preparation, and storage of food. Eating food that is contaminated by microorganisms such as bacteria, viruses, parasites, and other heavy metals causes over 200 diseases. Foodborne diseases contribute to the global burden of disease and mortality. However, food safety and hygiene can minimize the risk of foodborne illnesses. This study aimed to determine the knowledge and practices of food safety and hygiene among undergraduate students at a private university in South-West Nigeria.

Method: A cross-sectional study involving 416 undergraduates from Babcock University, Illishan-Remo, Ogun State, Nigeria, achieved a 99.5% response rate. A multistage sampling method was used, and self-administered questionnaires assessed their knowledge and practices. Data were analyzed using IBM SPSS version 27; descriptive variables were presented in tables as frequencies and percentages, while quantitative variables such as age and scores were summarized using means and standard deviations. The Chi-square test was used to determine the relationship between sociodemographic factors and knowledge/practice, while logistic regression was conducted to identify the factors associated with knowledge and practices. Using odds ratios and a 95% confidence interval, a p-value of less than 0.05 was considered statistically significant.

Result: Results indicated that 58.9% of respondents demonstrated good knowledge, while 41.1% had poor knowledge. In terms of practice, 71.3% exhibited good practices and 28.7% displayed poor practices. Bivariate analysis showed that marital status ($p=0.24$) was significantly linked to participants' knowledge, whereas age ($p=0.014$), level of study ($p=0.002$), religion ($p=0.035$), and marital status ($p=0.001$) were all significantly related to practice. The multivariate analysis revealed that level of study was significantly correlated with practice (OR=0.385, 95% confidence interval= 0.217-1.683, $p=0.001$), while marital status had a significant association with knowledge (OR=5.333, 95% confidence interval= 0.707-40.21, $p=0.039$).

Conclusion and Recommendations: A considerable proportion of respondents have a good level of knowledge and practice of food safety and hygiene. Given this result, it is recommended that universities implement educational programs and awareness campaigns to further improve these practices and reduce foodborne illness risks among students.

Keywords: Knowledge; Practice; Food Safety; Hygiene; Universities; Nigeria; Undergraduates

Healthcare Waste Management in Southwest Nigeria: A Cross-Sectional Study among Healthcare Workers in a Private Tertiary Hospital

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ABSTRACT

Background: The generation of healthcare waste (HCW) has been increasing due to the growing world population, the rising number of healthcare facilities, and advancements in technological practices. HCW may contain drug-resistant microorganisms that have the potential to harm patients, healthcare workers, and the public when spread from facilities to the environment. Managing HCW poses a significant challenge, particularly in LMIC, due to factors related to poor awareness and funding. Improper management of HCW can lead to the release of toxic microorganisms and other pollutants into the environment, contaminating the soil, surface water, and groundwater, with resultant effects on environmental, animal, and human health.

Methods: This cross-sectional study involved 210 healthcare workers from Babcock University Teaching Hospital, utilizing a self-administered questionnaire through simple random sampling. Data were analyzed using SPSS version 27. Chi-square test and multivariable logistic regression analysis were conducted to determine the factors associated with healthcare workers' knowledge and practices in management. A p-value of less than 0.05 was considered statistically significant at a 95% confidence interval.

Results: The mean age was 29.9 ± 7.8 years, with 51% of the participants being males. Additionally, 65.5% of the participants reported having received training on HCW management. The study found that 110 (53.4%) of the participants had adequate knowledge of HCW management, while good practices were observed in 155 (75.2%) of the participants. Only good knowledge was found to have a statistically significant association with practice (aOR: 0.196, 95% CI 0.090-0.423, $p=0.0001$), while awareness of the availability of HCW management guidelines had a statistically significant association with knowledge of HCW management (aOR: 0.344, 95% CI 0.319-0.852, $p = 0.021$).

Conclusion: This study found that knowledge of HCW management was fair while practice was good. The study also showed a statistically significant relationship between good knowledge and practice. Adequate education and training should be provided for healthcare workers on HCW management to improve practices related to the management of HCW. This may reduce the exposure of healthcare workers and the general public to the health risks associated with poor HCW management practices.

Keywords: Waste Management; Healthcare Workers; LMIC; Knowledge; Practice; Environmental Health.

Prostate Cancer: Comparative Assessment of Knowledge and Screening Uptake Practices Among Men in a Rural and an Urban Community in Lagos State

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ABSTRACT

Background: Prostate cancer (PCa) is reported as the most prevalent cancer among Nigerian men, accounting for 11% of all male cancers. Low levels of knowledge and limited uptake of PCa screening have been observed in both developing and developed countries. This study examined and compared the knowledge and screening practices of PCa, as well as tPSA, among men in rural and urban communities in Lagos State.

Methods: It was a cross-sectional comparative study involving men aged ≥ 40 years, selected using a five-stage sampling technique. A sample size of 631 respondents, with 316 in rural areas and 315 in urban areas, was calculated using the formula for comparative studies. Data were collected using a pre-tested interviewer-administered questionnaire and ELISA. Bivariate and multivariate analyses were employed to show associations between dependent and independent variables. A P-value < 0.05 was considered statistically significant.

Results: A significantly higher proportion of men in urban areas (22.2%) had good knowledge of PCa compared to those in rural areas (17.4%). Similarly, a higher proportion of men in urban areas (17.1%) demonstrated good screening practices compared to rural men (11.1%). The 95th percentile of men with tPSA < 10 ng/ml was 6.59 ng/ml in rural areas and 5.59 ng/ml in urban areas, respectively. Approximately 96% of men in both rural and urban areas had normal tPSA levels. Men of Islamic faith (AOR = 0.487, CI = 0.29-0.82) and those in certain types of work (AOR = 0.21, CI = 0.06-0.74) were less likely to have knowledge about PCa in urban areas. The type of work (AOR = 0.14, CI = 0.04-0.56) was associated with screening practices among men in rural areas, while Islamic faith men (AOR = 0.51, CI = 0.29-0.88) and occupation (AOR = 0.26, CI = 0.07- 0.94) were linked to screening practices in urban areas. A low proportion of men in both rural and urban communities had good knowledge and screening practices concerning PCa. Higher and equal proportions of men in both rural and urban areas had normal tPSA levels of PSA.

Conclusion: Most men in both rural and urban communities have a poor understanding of and screening uptake practices for PCa, with a statistically significant difference between rural and urban areas. The determinants of knowledge and screening uptake practices identified in rural and urban settings were the religion practiced and the type of work.

Recommendation: There is a need for health education and behavioral change communication to improve the knowledge and screening practices of PCa.

Keywords: Prostate Cancer, Knowledge, Screening uptake practices.

Awareness and Determinants of Analgesic Abuse among Undergraduate Students of University of Port Harcourt, Rivers State, Nigeria: A Descriptive Cross-sectional Study

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ABSTRACT

Background: Rising incidents of deaths due to analgesic abuse are a global public health concern. A good level of awareness and understanding of the determinants of analgesic abuse can help reduce mortality associated with this condition. This study assessed the awareness and determinants of analgesic abuse among undergraduate students at the University of Port Harcourt.

Methods: A descriptive cross-sectional study design with multi-stage sampling was employed. An online self-administered questionnaire was used to collect information from 362 undergraduate students at the University of Port Harcourt. The data was analyzed using IBM Statistical Product and Service Solutions (SPSS) version 27. Data were summarized using means, frequency, proportions, Chi-square, and regression analysis; a p-value of <0.05 was considered significant.

Results: The awareness of risks associated with analgesic abuse was low in 47.4% and high in 10.9% of the respondents. Pharmacy students and females had higher levels of awareness. Peer pressure, availability of analgesics on campus/local stores, offer of analgesics by peer(s), and knowledge of someone who has experienced the adverse effects of analgesic abuse were significant determinants; however, only availability of analgesics on campus/local stores and offer of analgesics by peer were significant determinants of analgesic abuse from the bivariate logistic regression.

Conclusion and Recommendations: The result showed that most respondents had low levels of awareness regarding the risks associated with analgesic abuse, with females and pharmacy students displaying higher levels of awareness. Factors such as peer pressure, the availability of analgesics on campus or in local stores, offers of analgesics by peers, and knowing someone who has experienced the adverse effects of analgesic abuse were significant determinants of such abuse. Comprehensive educational and awareness programs that span all departments and genders, addressing analgesic abuse along with policies to regulate the availability of analgesics on campus, should be established within the institution.

Keywords: Analgesic, Analgesic abuse, Awareness, Determinants.

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Mental Health Literacy and Mental Health Status among In-School Adolescents in Oyo State: A Rural and Urban Comparative Study

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ABSTRACT

Background: There is a paucity of research on the relationship between mental health literacy (MHL) and mental health status (MHS) among adolescents in Nigeria and sub-Saharan Africa, despite the rising burden of mental health challenges. Understanding these associations and the ability to recognize mental health issues and seek appropriate care, particularly across rural and urban settings, is essential for addressing adolescent mental health inequities.

Methods: A comparative cross-sectional design was employed involving 711 in-school adolescents in two rural and two urban Local Government Areas in Oyo State. Multistage sampling was used to select participants, and data were collected using a semi-structured, interviewer-administered questionnaire assessing sociodemographic, MHL (via a depression vignette), MHS (measured using anxiety and depression scales), and substance use. Statistical analyses included Chi-squared tests and logistic regression to identify associations and predictors, respectively.

Results: The mean age of respondents was 15.4 ± 1.2 years, with 44.4% males. Urban adolescents had a higher adequate MHL level (52.9%) compared to rural adolescents (35.1%). Poor MHS was more prevalent in rural areas (32.0%) than urban areas (25.8%). Key predictors of poor mental health status included male gender (AOR= 1.7; 95%CI: 1.000-2.500), senior secondary class 2 enrollment (OR= 4.2; 95%CI: 2.200-7.800), and substance use (OR=3.4; 95%CI: 1.600-7.400) in rural areas, while female gender (OR= 2.3; 95%CI: 1.300-3.900), senior secondary class 2 enrollment (OR=2.0; 95%CI: 1.000-3.900), and low maternal education (OR= 3.1; 95%CI: 1.100-8.900) in urban areas.

Conclusion: Urban adolescents demonstrated better MHL, while rural adolescents had poorer MHS. No significant association was found between MHL and MHS.

Recommendations: Targeted interventions to improve MHL and address contextual factors could enhance adolescent mental health outcomes.

Keywords: Mental Health Literacy, Mental Health Status, In-School Adolescents, Rural-Urban, Oyo State.

Risk and Determinants of Non-communicable Diseases among Adolescents in Public and Private Secondary Schools in Port Harcourt, Rivers State, Nigeria

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ABSTRACT

Background: Non-communicable diseases (NCDs) are the leading causes of poor health and premature mortality worldwide. Although NCDs are predominantly prevalent in middle to late adulthood, many lifestyle habits start during adolescence, a significant period of development. This research evaluated the risk factors and determinants of non-communicable diseases among adolescents in public and private secondary schools in Port Harcourt, Rivers State.

Methods: The research utilized a comparative cross-sectional design to gather data from 640 adolescents. Participants were chosen using a multi-stage sampling approach, and the data were analyzed with IBM SPSS version 29. Descriptive statistics presented means and standard deviations for continuous variables, while categorical variables were reported as proportions and percentages. For inferential statistics, a Chi-squared test was applied to compare categorical variables, and independent t-tests were used for continuous variables.

Results: Private and public-school respondents reported that NCDs (asthma, diabetes, and high blood pressure) were 3.4% and 2.5%, respectively. Behavioral and metabolic risk factors for NCDs were prevalent among both private and public-school adolescents. Private school students exhibited a higher prevalence of physical activity (75% vs. 61.6%), soft drink consumption (96.3% vs. 92.5%), alcohol consumption (45.6% vs. 36.9%), overweight (17.3% vs. 7.5%), obesity (5.9% vs. 1.6%), prehypertension (12.8% vs. 5%), and hypertension (6.6% vs. 1.6%). Conversely, public school students had a higher prevalence of daily fruit intake (19.4% vs. 8.8%) and tobacco use (7.5% vs. 2.2%). Socioeconomic status, behavioral risk factors, and metabolic risk factors were statistically significant ($p < 0.05$).

Conclusion and Recommendations: This study identified risk factors for NCDs among adolescents that can lead to the development of NCDs in adulthood; hence, there is a need for targeted and data-driven preventive measures to ensure adolescents adopt healthy lifestyles.

Keywords: Non-communicable Diseases, Risk Factors, Adolescents, Public Schools, Private Schools.

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Knowledge of Non-Communicable Diseases among Adolescents in Public and Private Secondary Schools in Port Harcourt, Rivers State, Nigeria

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ABSTRACT

Background: Non-communicable diseases (NCDs) are the leading causes of poor health and early death globally. Although NCDs are most common in middle to late adulthood, many lifestyle habits that contribute to these diseases begin during adolescence. This research evaluated the knowledge of non-communicable diseases which are diabetes, cardiovascular disease, cancer and chronic respiratory disease, and their risk factors among adolescents in public and private secondary schools in Port Harcourt, Rivers State.

Methods: The study used a comparative cross-sectional design to collect research data from 640 adolescents. Participants were selected through a multi-stage sampling technique, and data were analysed using IBM Statistical Product for the Service Solution version 29. Descriptive statistics were reported as means and standard deviations for continuous variables, and proportions and percentages for categorical variables. Inferential statistics, the Chi-square test of significance was used to compare categorical variables, and independent t-tests for continuous variables.

Results: Few respondents from private (6.3%) and public (5.3%) schools had good knowledge, the majority from private (75%) and public (66.9%) schools had fair knowledge, while 18.8% (private) and 27.8% (public) had poor knowledge on non-communicable diseases. Socioeconomic status and knowledge level were statistically significant ($p < 0.05$). The prevalence of NCDs (asthma, diabetes, high blood pressure) was 3.4% and 2.5% among private and public school adolescents.

Conclusion and Recommendations: The development of non-communicable diseases (NCDs) is strongly influenced by socioeconomic status, family health history, and risky health behaviors. Continuous health education on NCD risk factors among adolescents is needed to ensure they adopt healthy lifestyles through informed choices and foster good and quality health into adulthood.

Keywords: Non-communicable Diseases, Adolescents, Knowledge, Public Schools, Private Schools

Prevalence and Determinants of Tuberculosis-HIV Co-Infection among People Living with HIV (PLHIV), Attending Antiretroviral Therapy (ART) Clinic in Gokana Local Government Area of Rivers State

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ABSTRACT

Background: Tuberculosis and Human Immunodeficiency Virus are global public health issues. A notable percentage of individuals who developed TB worldwide were also HIV-positive. This study aimed to investigate the prevalence and determinants of Tuberculosis-HIV co-infection among people living with HIV attending antiretroviral therapy clinics in Gokana Local Government Area of Rivers State.

Methods: Facility-based descriptive cross-sectional study conducted using secondary data from health facility registers in Gokana across five years among 196 PLHIV using a probability sampling method. Data was analyzed using MS Excel version 2016. Descriptive and inferential statistics were summarized using frequency, percentage, and Chi-square, with a p-value of ≤ 0.05 considered significant.

Results: Findings revealed low prevalence of TB-HIV co-infection, with rates of 0.18% in 2019, 0.16% in 2020, 0.10% in 2021, 0.11% in 2022, and 0.07% in 2023, giving an overall prevalence of 0.12%. Adherence to ART among co-infected patients was high, peaking at 100% in 2021 and 2022, with a cumulative adherence rate of 92% over five years. Viral load suppression rates fluctuated, with an overall suppression rate of 43%. Factors associated with TB-HIV Co-Infection include age: 35–39 years (19%), followed by those aged 50yrs+ and 25–29 years (17% each), with the lowest prevalence observed in the 20–24 years (4%) and 15–19 years (6%) age groups. Gender analysis also revealed that females (54%) had a slightly higher prevalence of TB-HIV co-infection compared to males (46%). These results show middle-aged adults and females may be more susceptible to TB-HIV co-infection in this population. Chi-Square tests revealed significant associations between viral load and TB-HIV co-infection ($\chi^2 = 36366$, $p < 0.05$), as well as differences in prevalence related to age ($\chi^2 = 12909$, $p < 0.05$) and sex ($\chi^2 = 12954$, $p < 0.05$).

Conclusion and Recommendations: TB-HIV co-infection is not prevalent among PLHIV in Gokana LGA, indicating effective TB management and strong ART adherence, the variability in viral load suppression underscores the need for targeted interventions and enhanced support systems to optimize treatment outcomes. The study recommends strengthening monitoring systems for viral load suppression.

Keywords: Tuberculosis, Human Immunodeficiency Virus, Antiretroviral Therapy.

Work-Life Balance, Coping Strategies and Psychological Wellbeing of Medical Doctors in a Tertiary Health Facility, Southwest, Nigeria

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Abstract

Background: The emigration of healthcare professionals from Nigeria has contributed to increased workloads and potential negative consequences for the work-life balance of remaining physicians. This study examined the work-life balance, coping mechanisms, and psychological well-being of physicians at a tertiary health facility in southwestern Nigeria.

Methods: This involved a cross-sectional study of medical doctors in Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife using a mixed method approach. The quantitative method used a semi-structured, self-administered questionnaire to collect data from 250 doctors while the qualitative approach entailed in-depth interviews among eight doctors. Quantitative and qualitative data analysis used SPSS version 25 and ATLAS.ti version 14 software, respectively. Univariate and bivariate analyses were performed on quantitative data with significance level set at a p-value <0.05 while thematic analysis was used for qualitative data.

Results: Nearly half (48.4%) of the respondents were 30-39 years and, majority were male (71.2%) and married (68%). About 60% had a negative work-life balance, but the majority (80.4%) had good psychological well-being. The most used coping strategies were active coping (82.8%), acceptance (82.4%), and planning (80.0%); while the least used coping strategy was substance use (10.4%). Negative work-life balance was significantly associated with being younger age ($p < 0.001$), single ($p = 0.001$), lesser years of professional experience ($p = 0.001$), earning less monthly income ($p = 0.031$), having unemployed spouses ($p = 0.003$), and poor psychological well-being ($p < 0.001$). Common themes concerning factors influencing work-life balance were the type of specialty, professional cadre of doctors, female gender, and insufficiency of health care workers.

Conclusion: The study found a high prevalence of negative work-life balance among doctors. Various sociodemographic and work-family characteristics were significantly associated with work-life balance.

Recommendation: The study recommends introducing employee aid programmes, training on work-life balance and positive coping strategies as well as employing more doctors in the hospital.

Keywords: Work-life Balance, Coping Strategies, Psychological Well-Being, Doctors, and Nigeria

Perceived Effect of Occupational Safety Measures on Workers' Performance in Warri Refining and Petrochemical Company, Delta State, Nigeria

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ABSTRACT

Background: Occupational safety measures when put in place in organizations are expected to increase the productivity of employees and drive organizations to better performance. This study aimed at assessing the perception of workers at the Warri Refining and Petrochemical Company (WRPC) on the effect of implemented occupational safety measures on their individual and organizational performance.

Methods: The study was cross-sectional in design conducted at the WRPC, Delta state, Nigeria, among 236 workers of the WRPC selected via a simple random sampling technique across different job cadres (junior, senior, and management) in the organization. Data were collected using a semi-structured self-administered questionnaire and analyzed using the descriptive and inferential statistical tests of the SPSS version 20 with statistical significance set at $P < 0.05$.

Results: The mean age of respondents was 43 ± 2.26 years with a male-to-female ratio of 1.8:1. More than 50% of the respondents attested that occupational safety measures had been well implemented at the WRPC. Almost all the respondents, 219 (92.8%) and 224 (94.9%), agreed that occupational safety measures in place and training on safety measures had improved individual workers' performance, respectively. Respondents' length of service and job cadres were significantly associated with their perceived effect of the existing occupational safety measures at the WRPC on individual worker and organizational performance ($P < 0.001$). They were also significantly associated with their perceived effect of the neglect of these safety measures on the high labour turnover rate ($P < 0.001$).

Conclusion: Occupational safety measures were perceived to have positively affected workers' and organizational performance.

Recommendation: There should be focused attention on the staff at the lower end of the job cadre to embrace good safety practices.

Keywords: Implementation, Occupational Health, Perception, Performance, Safety Measures

Intergenerational Sexual Relationship and Experience of Intimate Partner Violence among Women of Reproductive Age in Nigeria

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ABSTRACT

Background: Intergenerational relationship is a heterosexual intercourse between partners with at least 10 years' age difference. Women in such relationships may experience power imbalance that could predispose them to intimate partner violence and mental health disorders. Existing literature had focused on the association between intergenerational relationships and sexually transmitted infections. This study investigated the association between intergenerational relationships and experience of intimate partner violence among reproductive-aged women in Nigeria.

Methods: This is an analytical cross-sectional study in design using the Individual Recode data from the 2018 Nigeria Demographic and Health Survey on 28,888 women aged 15-49 years in a sexual union at the time of conducting the study. The data was analysed using STATA version 17 software. The prevalence, patterns and association between intergenerational relationships and intimate partner violence among the study population were determined using descriptive and inferential statistic with significance level set at $p < 0.05$.

Results: The respondents' mean age was 32 ± 8.6 years, while that of their partners was 42 ± 11.2 years, and ranged from 15 to 95. The mean difference in the spousal ages was 10 ± 7.3 years. The prevalence of intergenerational relationships and intimate partner violence were 47.6% and 6.4%, respectively. Among women in intergenerational relationships, 57% had no formal education ($p < 0.0001$) and 47% earned lesser income than their spouses ($p < 0.0001$). Emotional violence was significantly associated with intergenerational relationship ($\chi^2 = 5.23$; $p = 0.021$), while physical and sexual violence were not.

Conclusion: The study found a high prevalence of intergenerational relationship among women in Nigeria. Women's socioeconomic characteristics and emotional partner violence were significantly associated with the practice.

Recommendation: Women in intergenerational relationship should have routine screening for emotional disorders. The study findings suggest further research to explore underlying factors contributing to interactions between intergenerational relationships and partner violence.

Keywords: Intergenerational Sexual Relationship, Intimate Partner Violence, Mental Health, Women of Reproductive Age, and Nigeria.

Assessing Knowledge and Practices of Mental Health Promotion among Rivers State University Undergraduates

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ABSTRACT

Background: Mental health is a crucial aspect of overall well-being, yet it remains one of the most stigmatized areas in healthcare, especially in low- and middle-income countries like Nigeria. Globally, about 20-30% of undergraduates have major mental health problems, the commonest being anxiety, depression and stress-related disorders.

The study aimed to assess the knowledge and practices for promoting mental health among undergraduate students at Rivers State University.

Methods: A descriptive cross-sectional study of 410 enrolled students using a multi-stage sampling technique. Data was collected from eight faculties of the University with pretested, self-online questionnaires (Google Forms) adapted from previously validated studies. An aggregate scoring system was used to assess knowledge of mental health promotion. The total knowledge scores were categorized into three levels: low, 0-33%; moderate, 34-66%; and high, 67-100%. Mental health promotion practices considered included stress avoidance, seeking counselling help, frequency of mental health discussions, and peer help availability.

Results: The mean age of the students was 22 ± 6.8 years. 254 (62.0%) of the students had moderate knowledge of mental health promotion, 11.1% had a high level, and 26.9% had poor knowledge. 325 (79.2%) do not know what is available for mental health support, and 78.4% reported that current resources for mental health promotion are poor. 261 (63.6%) of students engaged in moderate mental health practices, 25.9% in excellent practices, and 10.5% reported poor engagement. Statistically significant variables of mental health promotion practices were age (24+ years; $\chi^2=16.092$, $p=0.003$), and year of study (3rd year; $\chi^2=21.299$, $p=0.019$). There was no statistically significant finding between gender and mental health promotion practices ($\chi^2=3.028$, $p=0.220$).

Conclusion and Recommendations: The poor level of knowledge and resources for mental health promotion at Rivers State University emphasizes the need for programs primarily targeted at raising awareness of mental disorders. Also, educational workshops and seminars for students should be conducted regularly. Including mental health education content as a core compulsory module for all first-year students will ensure students have an introductory level of awareness of mental health issues. The university clinic should establish a mental health unit with trained personnel for mental health screening and prompt treatment.

Keywords: Mental Health, Promotion, Knowledge, Practice, Undergraduates

Assessment of Adverse Events following Covid-19 Vaccinations among Residents of Ogun State Nigeria: A Cross-Sectional Study

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ABSTRACT

Background: Corona virus disease 2019 (COVID-19), in the wake of the COVID 19 pandemic, there was expedited roll out of the vaccine, but a large part of the global population expressed reservations about the vaccine's efficacy and safety. This study was undertaken because of the paucity of information about the adverse events AEFI following COVID-19 vaccination.

Methods: A descriptive cross-sectional study was conducted. Secondary COVID 19 data on AEFI obtained from the State ministry of health were analyzed using Statistical Package for Social Sciences (SPSS) version 23.0 software. A statistical value of < 0.05 was considered statistically significant at 95% confidence interval.

Results: The mean age (SD) of cases reported was 42.8(13.3) years. A total of 17 LGAs reported a least an AEFI while 44 wards reported AEFI. A total of 59 health facilities comprising 53 Primary health centers and 4 hospitals were the reporting sites. The most common AEFI reported were body pains 95(53.7%), fever (40.1%), pain at injection site (35.60%) and headache (29.4%). The least AEFI reported were itching (1.1%) and restlessness (0.6%). Sex was significantly associated with pain at injection site (P-value=0.045). The type of vaccine was significantly associated with body pains (0.010) and also significantly associated with pain at injection site (P-value=0.001). There was no statistically significant association between the dose of vaccine and any of the AEFI's reported.

Conclusion and Recommendations: This study assessed adverse events following COVID-19 vaccination in Ogun State, Nigeria, revealing that most AEFI were mild, with body pains, fever, and injection site pain being the most common. Significant associations were found between vaccine type and certain adverse reactions. The study findings underscore the importance of continuous post-vaccination surveillance and public education to enhance vaccine safety awareness

Keywords: Adverse Events, Immunization, COVID-19 Vaccine, Vaccine Dose, Ogun State

Strengthening Disease Surveillance and Response in Nigeria: A Priority for Public Health Experts

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ABSTRACT

Background: Nigeria's ability to detect and respond to infectious disease outbreaks is hampered by several challenges. Strengthening the country's public health capacity is essential to improving health outcomes and reducing illness and death from these outbreaks. This study aims to explore the key challenges facing Nigeria's disease surveillance and response system and suggests practical steps to strengthen public health capacity.

Method: The research used a mixed-method approach, combining surveys from 500 public health professionals with detailed interviews of 20 key informants. Focus group discussions were also held to gain deeper insights into the underlying issues.

Results: The study identified major challenges, including insufficient funding, weak infrastructure, and a shortage of skilled health workers. It also highlighted poor collaboration and coordination among stakeholders as a key obstacle to effective disease detection and response.

Conclusion and Recommendations: To strengthen Nigeria's disease surveillance and response system, there is a pressing need for better funding, improved infrastructure, and more trained personnel. Encouraging stronger collaboration among government agencies, healthcare providers, and communities will enhance the country's ability to manage infectious disease outbreaks and improve overall public health.

Keywords: Disease Surveillance, Response, Public Health, Nigeria, infectious Diseases, Outbreak.

Observed and Self-reported Hand Hygiene Compliance and its Determinants among Primary Healthcare Workers in Edo State, Nigeria

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ABSTRACT

Background: Hand hygiene is one of the simplest and cheapest methods of preventing the spread of Hospital-acquired infections (HAIs) in healthcare settings. This study assessed compliance with hand hygiene practices and its determinants among Primary Health Care workers in Edo State.

Methods: All available Primary Healthcare facilities and workers in Egor and Oredo LGA were included in this study. A total of 19 facilities were functional at the time of the study; the others were undergoing renovation. Two tools were used for this study: A quantitative standardized questionnaire adapted from the WHO questionnaire for self-reported hand hygiene, and the WHO observation (researcher-observed report) form for hand hygiene compliance. Data was analyzed with IBM SPSS version 25.0, with level of significance set at $p < 0.05$. Univariate, bivariate and multivariate logistics regression was done for data analysis.

Results: The mean age (S.D) of participants was 37.5(8.5) years. Majority 247(95%) of the respondents reported good compliance with hand hygiene practices, while over half 62.0(54.9%) of the respondents were observed to have good compliance. The nurses observed the most hand hygiene actions, 42 (67.7%), with the doctors being the least 3(4.8). Hand hygiene actions observed were handwashing 28(24.8%) and hand rub 34(30.1%), with missed opportunities for hand hygiene being 35(31.0%) and use of gloves in opportunities for hand hygiene being 16(14.2%). Professional cadre of respondents significantly influenced ($p=0.04$) compliance with hand hygiene practices.

Conclusion: Primary Health Care workers in Edo State had good compliance with hand hygiene practices. However, there was a variation, with reported compliance being higher compared with observed compliance with hand hygiene practices.

Keywords: Hand Hygiene, Hospital Acquired Infection, Compliance, Primary Health Care Workers

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Knowledge, Attitude, and Utilization of Contraceptives among Women of Reproductive Age in Oyigbo Local Government Area, Rivers State

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ABSTRACT

Background: Despite several efforts by the country and other developmental partners to reduce the high fertility rate by increasing contraceptive use, the contraceptive prevalence rate among childbearing women remains low. The contraceptive prevalence rate among women in Nigeria was 17%, which was lower than the global prevalence of 44%. This study aimed to assess the knowledge, attitude, and prevalence of contraceptive use among Women of Reproductive age in the Oyigbo local government area of Rivers State.

Methods: A cross-sectional study of 425 women aged 15-49 (child-bearing age) in Oyigbo, Rivers State, South-South Nigeria, was selected using multistage sampling techniques. Data was collected using a semi-structured interviewer-administered questionnaire built using the Kobo toolbox and an Android phone. After this, the Excel sheet was downloaded for analysis. The analysis was done using SPSS version 27. Pearson's Chi-square test was used to test the association between the outcome and the independent variables, and the p-value was set at <0.05 at a 95% confidence interval.

Results: The results showed that the mean age of the respondents was 26.8±8.6, 251(58.6%) were singles, 181(42.3%) were students and 289(67.5%) attained a tertiary level of education. Furthermore, 183(42.8%) of the respondents had good knowledge of contraceptives, 360 (84.1%) had a positive attitude towards contraceptive use, 232 (54.2%) had ever used any contraceptives, and 143 (33.4%) were currently using contraceptives. Condoms 72 (50.3%) were the commonest contraceptive in use with IUDs being the least used 6 (4.2%). Also, 88(20.6%) experienced side effects with their current contraceptive method. Marital status ($P<0.001$, $\chi^2=26.653$), employment status ($P=0.001$, $\chi^2=11.905$), having children ($P<0.001$, $\chi^2=15.582$), past use of contraceptives ($P<0.001$, $\chi^2=144.714$), knowledge of contraceptive ($P<0.001$, $\chi^2=16.579$) and attitude towards contraceptive use ($P=0.016$, $\chi^2=8.249$) were significantly associated with contraceptive use.

Conclusion and Recommendations: Less than half of the participants had good knowledge and use of contraceptives, although contraceptive use was higher than the national average. There is a need for an improvement in Knowledge and use of contraceptives within the community.

Keywords: Knowledge, Attitude, Contraceptive Use, Child-Bearing Age, Rivers State.

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Induced Abortion and Modern Contraceptive Use among Women of Reproductive Age in Akure North Local Government Area, Ondo State, Nigeria

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ABSTRACT

Background: Modern contraceptive use is an effective intervention for prevention of induced abortion and management of fertility. This study aims to determine the prevalence of induced abortion and modern contraceptive use, and predictors of modern contraceptive use among women of reproductive age in Akure North Local Government Area.

Methods: This is a descriptive cross-sectional study among 274 women of reproductive age in Akure North Local Government Area selected by two-stage sampling method. An interviewer administered structured questionnaire was used to collect information on respondents' socio-demography, sexual exposure status, use of modern contraceptive and methods used, reasons for non-use of contraceptive, history of pregnancy and abortion. Analysis was done using IBM SPSS version 22 and results presented on frequency tables and charts. P was set at <0.05. Ethical approval was obtained from the University of Port Harcourt Research Ethics Committee and permission from the Health Department of Akure North Local Government Area.

Results: Majority of the respondents were married (n = 199, 72.6%), aged 30-39 years (n = 94, 34.3%); 190 (69.3%) have not completed childbearing with 127 (46.4%) of them having 1-2 children. Awareness of modern contraceptive was high (n = 231; 84.3%). and its use moderately high; 204 (74.5%) were ever users and 133 (65.2%) of them are current users. The commonest methods used are oral pills (32.3%), implants (28.0%) and male condom (27.4%). Predictor of use modern contraceptive was marriage (AOR = 1.99; 95% CI = 1.01 – 3.95). The commonest reason for non-use was fear of side effects. A total of 235 (85.8%) respondents have been pregnant, 71 (30.2%) of them had unplanned pregnancy, of these 69 (97.2%) were not using modern contraceptive methods. Fifty-eight (24.7%) of the respondents had an abortion and 54 (19.7%) were induced mainly through manual evacuation (n = 28, 51.9%).

Conclusion and Recommendation: Induced abortion rate among women of reproductive age in Akure North Local Government Area was high and the use of modern contraceptive moderately high with marriage as its predictor. Behavioural change communication programme by the Health Department of Akure North Local Government Area to improve perception of modern contraceptive use is recommended.

Keywords: Modern Contraceptives, Induced Abortion, Predictors, Women of Childbearing Age, Akure North Local Government Area

APHPN/AB25/T1/030

Urban–Rural Differences and Determinants of Utilization of Sexual and Reproductive Health Services among Males in Anambra State, South-eastern Nigeria

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ABSTRACT

Background: Males have substantial sexual and reproductive health (SRH) needs, but there is low utilization of these SRH services. We compared the utilization and ascertained factors associated with the utilization of sexual and reproductive health services among males in urban and rural areas of Anambra State, Nigeria.

Methods: A comparative community-based cross-sectional study was conducted in Anambra State. Using multistage sampling, 1147 respondents were surveyed via interviewer-administered, structured questionnaires. Data was collected on socio-demographic characteristics, utilization of, and factors associated with the utilization of SRH services. We compared differences in the utilization of SRH services among males. Multivariable logistic regression was used to identify the factors associated with utilization at $p < 0.05$.

Results: The mean age of the respondents was 28.00 ± 9.35 years. There was a low level of utilization, with males in rural areas (35.6%) having a higher level of utilization than males in urban areas (27.0%). Rural location, older age, higher educational level, communication with sexual partner, access to SRH information, exposure to SRH information on mass media, access to health insurance, being sexually active, feeling susceptible to SRH diseases, and having a diagnosis of SRH disease in the last 12 months were positively associated with the utilization of male sexual and reproductive health services. Marital and employment status, number of children, number of sexual partners and recent sexual intercourse were negatively associated with the utilization of male SRHS.

Conclusion and Recommendations: There is suboptimal utilization of SRH services in Anambra State, Nigeria. Interventions targeting these identified factors could increase the utilization of male sexual and reproductive health services in such settings.

Keywords: Utilization, Male, Urban–Rural, Sexual Health, Reproductive Health, Nigeria.

APHPN/AB25/T1/031

The Impact of Religious Beliefs on Family Decision-Making and Delays in Accessing Primary Healthcare in Yewa-South, Ogun State, Nigeria.

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ABSTRACT

Background: Religion or faith is one of the multidimensional challenges facing primary health care in Nigeria, particularly belief in a higher power, significantly influences individuals perspectives and practices regarding healthcare. Different religions shape unique healthcare beliefs and customs. Hence, to practice one health and public health practice in Nigeria, a holistic and compassionate care to diverse patient populations, healthcare providers must understand the religious beliefs of their patients. The objective of this study was to find out Impact of Religious Beliefs on Family Decision-Making and Delays in Accessing Primary Healthcare in Yewa-South, Ogun State, Nigeria.

Method: Descriptive cross-sectional research was conducted at the State Hospital, Ilaro, Ogun State, in August-September 2023. Purposive sampling was used to select hospital staff and outpatients based on predefined criteria. Data were collected using interviewer-administered questionnaires and analyzed with SPSS v23, applying Chi-square tests and logistic regression. Ethical approval was obtained, and participants provided informed consent.

Results: The study found that the majority of the respondents, 62.2% (147) were between the age of 26-35 years, while the result also revealed predominant percentage, 91.9% (218) that are married with vast majority, 29.7% (70) having polytechnic education Also, it was also presented that significant proportion of the respondents, 81.1% (192) that have been in their religion since birth with largest percentage, 89.3% (212) of them affiliated to Christianity. Furthermore, the research highlighted that predominant of the respondents, 48.6% (115) of respondents are inclined to rely solely on religious practices for healing without seeking professional medical advice.

Conclusion and Recommendations: The findings underscore the significant influence of religion on healthcare choices and family decision among the individuals surveyed. There is strong relationship between socio-demographic characteristics (education and ethnicity) and attitudes influencing medical decision based on religious affiliation having p – values of 0.000 respectively. Therefore, it is crucial to implement health outreach programmes, effective communication strategies, and educational campaigns to improve health-seeking behaviours.

Keywords: Beliefs, Family, Decision-Making, Healthcare, Religion.

APHPN/AB25/T1/032

Lymphedema Management in Lymphatic Filariasis: A Two-Year Intervention in Ogun State, Nigeria

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ABSTRACT

Background: Lymphatic filariasis (LF) is a major public health issue that requires a comprehensive morbidity management strategy. This study evaluated a two-year lymphedema care intervention across the three senatorial districts of Ogun State, Nigeria (Ogun Central, Ogun East, and Ogun West). The intervention involved active case identification during mass drug administration (MDA), enrollment of lymphedema patients, training of healthcare workers and caregivers, and provision of limb care materials.

Methods: A descriptive cross-sectional study with a mixed-methods approach was used. Quantitative data included limb circumference measurements, number of enrolled patients, and care access statistics. Qualitative data were obtained through in-depth interviews and focus group discussions with healthcare workers and caregivers.

Results: A total of 124 patients accessed care services over the intervention period, with a 53% increase in enrollment from Year 1 to Year 2. More than half (57%) of the patients experienced limb size reduction within three months, and wound healing rates improved. Training outcomes demonstrated improved healthcare worker knowledge and patient self-care practices. Community awareness efforts, including educational materials, contributed to increased understanding and reduced stigma.

Conclusion and Recommendations: The intervention significantly improved patient enrollment, care access, and limb size reduction. However, challenges such as limited resources, logistical constraints, and the need for sustained community engagement were identified. Strengthening policies for integrating lymphedema management into primary healthcare, establishing monitoring systems, and enhancing community-based awareness programs are recommended to improve future outcomes.

Keywords: Lymphatic Filariasis, Lymphedema Management, Morbidity Control, Community Awareness, Community-Based Intervention.

APHPN/AB25/T1/033

Prevalence and Determinants of Postpartum Anxiety and Depression in Postnatal Women Attending Urban Primary Health Centres, Ebonyi State, Nigeria

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ABSTRACT

Background: Postpartum anxiety and postpartum depression are notable mental health conditions that can have detrimental effects on the well-being of both mother and child. This study assessed the prevalence and determinants of postpartum anxiety and depression among postnatal women accessing primary healthcare in Abakaliki Metropolis, Ebonyi State.

Methods: A cross-sectional study was conducted on 396 postpartum women selected through a systematic random sampling method. Information on postpartum anxiety and depression was collected using a Likert-scale structured interviewer-administered questionnaire adapted from Zung's Self-rating Anxiety Scale (20 items) to assess anxiety and the Edinburgh Post Natal Depression Scale (10 items) to assess depression. An anxiety Index score above 45 indicates anxiety, while a depression index score of more than 10 determines postpartum depression. Multivariate Logistic regression analysis was used to determine the predictors of postpartum anxiety and depression. The level of statistical significance was set at a p-value of <0.05 and a 95% confidence interval.

Results: The study revealed that 193 (48.7%) of the respondents experienced postpartum depression, while 22 (5.6%) reported postpartum anxiety. Common perceived effects of postpartum anxiety and depression included poor concentration at work (49.2%), impulsive spending (40.7%), and reduced bonding/care for children (18.9%). Predictors of postpartum anxiety were educational status (OR = 0.32; CI = 0.136-0.788) and mode of delivery- cesarean section (OR = 14.980; CI = 3.116-72.015) and spontaneous vertex (OR = 47.555; CI = 8.272 - 273-386). Predictors of postpartum depression included the low-income status of the husband (OR = 0.513; CI = 0.277 - 0.952) and monogamous family type (OR = 4.863; CI – 1.486 - 15.910)

Conclusion: This study highlights the high prevalence of postpartum depression and anxiety influenced by socio-economic factors.

Recommendations: Healthcare providers should develop targeted interventions, including mental health education, counseling, and screening throughout the pregnancy journey – from prenatal to postpartum periods - to promote mental well-being and prevent depression and anxiety in this population.

Keywords: Anxiety, Depression, Determinants, Postpartum Women, Prevalence

APHPN/AB25/T1/034

Dietary Habits and Nutritional Status of Pupils in Public and Private Schools in Port Harcourt, Rivers State

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ABSTRACT

Background: Inadequate diet and or poor nutrition can increase the risk of various forms of malnutrition including undernutrition, micronutrient deficiency, and overweight or obesity all of which have implications on the health and education of children This study assessed dietary intake, and physical activity, and nutritional status among pupils in Port Harcourt's public and private primary schools.

Methods: A comparative cross-sectional study design was utilized, recruiting 348 pupils with the formula for calculating two proportions from both school types via multi-stage sampling. Data were collected through a structured questionnaire, while anthropometric and physical activity measures were taken according to established standards. Analyses were performed using IBM SPSS version 23, with bivariate logistic regression analyzing socio-demographic factors and nutritional outcomes. Chi-square for grouped data and t-tests for continuous data were also used.

Results: Pupils in private schools demonstrated superior dietary habits, characterized by increased fruit and breakfast consumption. Conversely, public school pupils showed higher rates of stunting and underweight, while overweight was more common in private schools. Significant correlations were identified between stunting and factors such as low socioeconomic status, lack of maternal education, and rural living. Public school pupils faced greater risks of being underweight, particularly those from low socioeconomic backgrounds and without maternal education. Low socioeconomic status consistently predicted underweight in both groups, with private school pupils showing higher overweight prevalence.

Conclusion and Recommendations: The study highlights significant disparities in dietary habits and nutritional health between public and private school pupils in Port Harcourt, with private school pupils exhibiting better nutritional status. Addressing socioeconomic barriers and promoting healthy food access and parental health education, especially in disadvantaged areas, is crucial for improving children's nutritional health.

Keywords: Dietary Habits, Public Schools, Port Harcourt.

Accelerating the Adoption of Evidence-Based Maternal, Neonatal, and Child Health Innovations in Nigeria: The ACEPHAP-Led Consortium Experience

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ABSTRACT

Background: Nigeria contributes approximately 28.5% of global maternal deaths, with a maternal mortality ratio of 512 per 100,000 live births. Despite the availability of evidence-based solutions, the adoption and scale-up of life-saving maternal, neonatal, and child health and nutrition (MNCHN) innovations remain limited due to weak policy environments, fragmented implementation strategies, and inadequate stakeholder engagement. This initiative aims to reduce maternal mortality by strengthening the policy environment and supporting the scale-up of prioritized MNCHN innovations. Led by the Africa Centre of Excellence for Population Health and Policy (ACEPHAP), the project seeks to bridge the gap between research and policy, and to drive sustainable health system transformation in Nigeria.

Methods: The intervention is structured into two workstreams: advocacy and service delivery. ACEPHAP and its partners: including Pathfinder International, the Medical Women's Association of Nigeria (MWAN), and TACConnect are leading advocacy efforts at national and subnational levels, engaging policymakers, health institutions, and regulatory agencies. Innovations promoted include the E-MOTIVE bundle for postpartum hemorrhage (PPH) management and STEP-Mag for simplified eclampsia prevention. A phased implementation approach was adopted across 16 Nigerian states.

Results: Key achievements include the development of national training manuals, policy briefs, and stakeholder maps; the establishment of national and regional "Think Tanks" for evidence translation; and the transformation of selected facilities into centers of excellence. Stakeholder awareness has increased, and significant policy actions, such as updates to training curricula and integration of MNCHN indicators into national health information systems have been initiated.

Conclusion and Recommendation: The ACEPHAP-led initiative demonstrates a scalable and evidence-driven model for accelerating the adoption of MNCHN innovations. By leveraging partnerships, data, and strategic advocacy, the project contributes meaningfully to Nigeria's progress toward Sustainable Development Goal 3. This integrated framework offers valuable lessons for other low-resource settings aiming to reduce maternal and child mortality through research-to-policy translation.

Keywords: Maternal Mortality, MNCHN Innovations, Policy Advocacy, E-MOTIVE, Postpartum Hemorrhage.

Malaria Vaccine Awareness, Acceptance and Willingness to Pay among Mothers attending Immunization Clinics in Kwara State, Nigeria

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ABSTRACT

Background: Malaria remains a significant public health challenge in Nigeria, particularly among children. The recent introduction of the malaria vaccine offers a promising tool to reduce this burden. The success of any vaccination program depends largely on public awareness and acceptance. This study examines the awareness, acceptance and willingness to pay for the malaria vaccine among mothers attending immunization clinics in Ilorin, Kwara State, and identifies associated factors.

Methods: A descriptive cross-sectional study was conducted among 409 mothers aged 15–49 years, recruited through multistage sampling technique from three high-volume immunization centres in Ilorin, Kwara State, Nigeria. These are Adewole Cottage Hospital, Okelele health centre and University of Ilorin Well baby clinic (Amilegbe) which are representative of all the LGAs in Ilorin metropolis. These are Ilorin West, Ilorin East and Ilorin South respectively. A pretested, interviewer-administered, semi-structured questionnaire was used to gather data by the use of KoboCollect App. Statistical analysis was performed with R version 4.4.2. A confidence limit of 95% was used in this study and a p-value of <0.05 was considered significant.

Results: The majority of respondents, 266 (65.04%) were aged 25–34 years, with Mean ($\pm$ SD) of 30.16 ($\pm$ 5.32) years. Those with post-secondary education were 254 (62.8%). About 44.5% were traders, and 70.9% were self-employed. Awareness of the malaria vaccine among the mothers was low (20.3%), while, the acceptance for their children to be vaccinated was high (98.3%) after they were informed about the vaccine importance and availability. Also, 95.8% were willing to pay for the vaccine. Employment status was significantly associated with both awareness ($p=0.02$, $\chi^2=9.133$) and willingness to pay ($p=0.005$, $\chi^2=14.676$). Mothers in private employment had lower odds of being aware of the vaccine ($p=0.010$, OR=0.128). Mothers who presented with male children had lower odds of being willing to pay for malaria vaccines ($p=0.0368$, OR 0.290)

Conclusion and Recommendation: Despite low awareness, there is a high willingness among mothers in Ilorin to accept and pay for the malaria vaccine. Efforts to increase awareness could further enhance vaccine uptake, potentially reducing the malaria burden in children.

Keywords: Malaria Vaccine, Awareness, Acceptance, Willingness to Pay, Mothers

APHPN/AB25/T1/037

Factors Influencing Disease Surveillance and Notification Practices among Health Workers in Private Facilities in Federal Capital Territory, Abuja

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ABSTRACT

Background: Late detection of disease outbreak and other health related events of public health importance has been linked to poor implementation of the Integrated Disease Surveillance and Response (IDSR). The aim of this study is to assess factors influencing utilization Integrated Disease Surveillance and Response (IDSR) tools among health care workers in private hospitals at Federal Capital Territory, Abuja

Methodology: It is a cross-sectional study employing multi-stage sampling technique to select 337 respondents. Data was collected using pre-tested self-administered questionnaire, analyzed using Statistical Package for Social Sciences version 23 and presented using appropriate tables and charts. Level of significance set at 0.05.

Results: Concerning demographic status, majority i.e. 217 (57.3%) were within 35-49 years, females were 229 (60.4%), Christians were 303 (79.9%), Ibos 148 were (39.1%), married respondents were 256 (67.5%), 326 (86.0%) attained tertiary educational status and 125 (33.0%) were nurses. Regarding knowledge, awareness was high among more than half of the respondents (i.e. 60%). However, knowledge on the importance of its reporting status, different forms used and its usage is quite low. Overall, using the mean score, more than half of the respondents i.e. 57% had good knowledge while less than one quarter (i.e. 15%) had good practices. There is an association between religion, educational level, knowledge, attitude with summarized good practices. ($P < 0.05$)

Conclusion and Recommendations: Despite the high level of awareness, comprehensive knowledge concerning IDSR is low coupled with poor practices. Regular training and re-training of health workers on IDSR among care providers in the Private sector is recommended.

Keywords: Integrated Disease Surveillance and Notification, Knowledge, Health Workers, Private Facilities

Prevalence, Determinants and Effects of Emotional Intimate Partner Violence among Women Residing in an Urban Area in Lagos, Nigeria

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ABSTRACT

Background: The global burden of Emotional Intimate Partner Violence (IPV) is significant with estimates of 20-75%, across population-based surveys worldwide. Emotional IPV is the most prevalent form of IPV and has far reaching effects on women's mental health and wellbeing. This study assessed the prevalence, determinants and effects of emotional IPV among women residing in Mushin Local Government Area (LGA), in Lagos State, Nigeria.

Methods: This was a cross-sectional study conducted among 502 married/co-habiting women selected by multistage sampling. Data was collected using interviewer administered questionnaires adapted from the WHO multi-country study questionnaire on women's health and life experiences. Univariate analysis was done. Bivariate and multivariate analysis was used to identify the determinants of emotional IPV.

Results: The mean age of the women was 37.4±8.0 years. Seventy-eight percent of the women had ever experienced emotional IPV and 47.8% of the women had experienced emotional IPV in the preceding 12 months. Of the women that had ever experienced emotional IPV, 63.9% had also ever experienced physical IPV and 21.9% also ever experienced sexual IPV. Ninety-six percent of the women that experienced emotional IPV said IPV made them worried/feel sad, feel less of themselves (26.4%), and made them abuse alcohol (11.1%). Violence was often preceded by money problems (44.0%). Women aged 20-29 years were less likely to have experienced emotional IPV in the preceding 12 months compared with women ≥45 years. Co-habiting women and women who had spent 1-10 years in union (aOR 2.49, 95% CI 1.02-6.10), were more likely to have experienced emotional IPV in the preceding 12 months than married women and women in union for >20 years. Women whose partners were <35 years old (aOR 5.79, 95% CI 1.95-17.22) and whose partners had extra-marital relationships were more likely to have experienced emotional IPV in the preceding 12 months compared with women whose partners were >45 years and had no extra-marital relationships.

Conclusion and Recommendations: Investing in family and community-based interventions that focus on healthy relationship skills and conflict resolution, providing counselling, and addressing economic problems is crucial in tackling emotional IPV. Special attention should be paid to younger families.

Keywords: Emotional IPV, Prevalence, Determinants, Effects, Nigeria

Spatial Pattern and Determinants of Hepatitis B birth dose vaccination in Nigeria: a population based cross-sectional study

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ABSTRACT

Background: Hepatitis B virus (HBV) infection remains a significant global public health burden, and a major problem in Nigeria, where the prevalence rate is twice the African average. Despite the availability of an effective vaccine, vaccination coverage remains poor, especially for the Hepatitis B birth dose (HepB-BD), which is crucial in preventing vertical transmission and long-term complications. This study examined the spatial distribution and determinants of HepB-BD vaccination in Nigeria, providing insights to enhance immunization strategies.

Methods: A population-based cross-sectional study design was employed, utilizing data from the 2018 Nigeria Demographic and Health Survey. The analysis included data from 13,064 children aged 0-24 months. Binary logistic regression using STATA 14 was performed to identify predictors of HepB-BD vaccination. Additionally, spatial analysis using Local Moran's I was conducted to detect clusters of high and low vaccination coverage across Nigeria.

Results: The study found that 52% of children received the HepB-BD, with substantial regional disparities. Positive predictors of vaccination included secondary or higher maternal education (aOR: 1.92; 95% CI: 1.63–2.27), rich household wealth status (aOR: 2.46; 95% CI: 1.88–3.23), antenatal care attendance (aOR: 2.76; 95% CI: 2.39–3.18), and health facility delivery (aOR: 2.09; 95% CI: 1.83–2.38). In contrast, children from the Northeast (aOR: 0.68; 95% CI: 0.55–0.84) and Northwest (aOR: 0.64; 95% CI: 0.51–0.80) had significantly lower odds of receiving HepB-BD vaccine. Spatial analysis identified low vaccination clusters in northern states, particularly Kebbi, Sokoto, and Zamfara, while high-coverage hotspots were found in Ogun and Kogi states.

Conclusion: The study highlights substantial inequalities in HepB-BD vaccination coverage across Nigeria, influenced by maternal education, socioeconomic status, healthcare access, and geographic region. These disparities suggest the need for targeted interventions to improve vaccination uptake.

Recommendation: Efforts to improve HepB-BD vaccination coverage should focus on increasing awareness through maternal education, expanding healthcare access in underserved regions, and strengthening policies for immunization programs. Targeted interventions in low-coverage areas, particularly in northern Nigeria, could significantly improve national HepB-BD vaccination coverage.

Keywords: Child, Hepatitis B, Vaccination

Perceptions and Satisfaction with Childhood Immunization Services among Mothers Attending Immunization Clinics in Kwara State, North Central Nigeria

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ABSTRACT

Background: Immunization is a critical component of global health security, significantly reducing the morbidity and mortality associated with communicable diseases. Despite its benefits, poor uptake remains a challenge, often linked to satisfaction levels with immunization services. This study assessed mothers' perceptions and satisfaction with childhood immunization services in Kwara State, Nigeria.

Methods: A cross-sectional study was conducted among 409 mothers attending immunisation clinics in three high-volume immunization centres in Ilorin, Kwara State, Nigeria. These are Adewole Cottage Hospital, Okelele health centre and University of Ilorin Well baby clinic (Amilegbe) which are representative of all the LGAs in Ilorin metropolis (Ilorin West, Ilorin East and Ilorin South) respectively. A multistage sampling technique was used to select the mothers. Data was collected using a semi-structured interviewer-administered questionnaire with the KoboCollect App. Analysis was performed using IBM-SPSS version 25, with associations between client satisfaction and immunization services determined using chi-square tests and regression analysis. A confidence limit of 95% and a p-value of <0.05 were considered significant. Ethical approval, KMOH ERC/MOH/2023/03/101, was gotten before the study was conducted.

Results: Most mothers were aged 25-34 years (65%), and almost two-thirds (62.8%) had post-secondary education. Perceptions included beliefs that "too many vaccines are not good for children" (54%), "a child with fever can be vaccinated" (42%), and "a child with a common cold can be vaccinated" (42%). Overall satisfaction level was high (99.3%). Key satisfaction indicators included short waiting time (93%), conducive waiting area (94%), attitude of healthcare workers (98%), and the number of vaccines administered (97%). Mother who reported that the fathers were self-employed were more likely to be satisfied with the services (OR = 2.17) compared to those who reported that the fathers were employed in government roles.

Conclusion and Recommendation: Despite some negative perceptions about vaccine safety and administration, the overall satisfaction with childhood immunization services among mothers in this study is high. This suggests that while service delivery is effective, addressing misconceptions could further enhance vaccine uptake.

Keywords: Childhood Immunization, Maternal Perception, Mother's Satisfaction, Kwara State, Nigeria.

Prevalence and Risk factors of Urogenital Schistosomiasis among Female Adolescents Residing in Riverine Communities of Abuja, Nigeria

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ABSTRACT

Background: Schistosomiasis is a serious human disease of public health importance in the tropics and the sub-tropics caused by *Schistosoma* species. It is classified by the World Health Organization as a Neglected Tropical Disease (NTD) and is one of the most prevalent of the 17 NTDs. Schistosomiasis in endemic regions, mainly affect the poorest and the most deprived communities characterized by poor sanitation, lack of potable water, inadequate health facilities, poor housing, overcrowding, and squalid environment. Water related activities such as swimming or washing in infested water bodies makes one vulnerable to the infection.

Methods: A cross-sectional study was conducted among 300 adolescent girls aged 10 to 19 years in two riverine communities of the Federal Capital Territory, Abuja, Nigeria to know the burden and associated factors of urinary schistosomiasis using a pre-tested semi-structured questionnaires and laboratory tests on their urine samples.

Results: Out of the 300 urine samples examined, 119 (39.7%) were found to be infected with *S. haematobium*. The highest infection rate was recorded among adolescents aged 10–14 years (40.3%) while it was 38.5% among adolescents aged between 15 – 19 years. There was no significant difference ($p = 0.756$). Factors associated with *S. haematobium* infection are haematuria ($p < 0.001$), proteinuria ($p < 0.001$), distance to stream ($p = 0.007$), degree of contact with stream ($p < 0.05$) and water-related activities ($p < 0.001$). Knowledge of the disease and its mode of transmission was found to be poor among respondents (14.4%).

Conclusion: The presence of urinary schistosomiasis has been established and all adolescents in the study area are equally exposed to the source of infection.

Recommendation: A multisectoral approach (Health, Education, Information, Water resources) by government and relevant stakeholders to initiate prompt interventions including provision of potable water, awareness and campaigns to correct misconceptions and Mass Administration of Praziquantel to reduce the prevalence.

Keywords: Adolescents, Schistosomiasis, Neglected Tropical Diseases, Prevalence, Risk Factors

Prevalence of Antibiotics Misuse among Patients Attending Primary Healthcare Facilities in Plateau State Nigeria

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ABSTRACT

Background: Antibiotic misuse is one of the main drivers of antimicrobial resistance which is becoming a public health problem especially in the third world countries. This development is a threat to control the growing range of infections caused by micro-organisms leading to increased morbidity and mortality risks. In 2019, direct death from antimicrobial resistance was estimated to be 1.27 million while also contributing to the death of about 4.95 million all over the world. This study was carried to determine the prevalence of antibiotic misuse in primary healthcare facilities in Plateau state, Nigeria.

Methods: Cross-sectional study design was used to carried out the study in Patients aged 18 - 60 years who attended PHCs in Plateau State. Multistage sampling technique was used to select 302 participants across the three senatorial zones using an interviewer administered questionnaire. SPSS version 25 was used for the data processing and descriptive frequencies was used to present results.

Results: A higher number of patients said they have infection on yearly basis 133 (44.0%) whereas 4 (1.3%) among the same group of participants said they have infection weekly. Majority of respondents 77 (25.5%) used antibiotics occasionally; this is closely followed by those who rarely used antibiotics 76 (25.2%), with 61.6% of patients purchasing antibiotics without prescriptions, and 77.2% engaging in self-medication. The pharmacy had the highest frequency for place of purchase of antibiotics 112 (38.9%).

Conclusion and Recommendations: The prevalence of antibiotic misuse in this study was on the high side, these figures underscore a significant public health concern in Plateau State. Nearly half of the participants admitted to using leftover prescriptions, a behavior that exacerbates the risk of antimicrobial resistance (AMR). Sensitization and awareness on antibiotic use and resistance will help reduce misuse of antibiotic.

Keywords: Antibiotic Misuse, Antimicrobial Resistance, Patients, Self-Medication

Predictors of Adolescent Reproductive Health Services Experiences among In-School and Out-of-School Adolescents in Owo Local Government Area, Ondo State, Nigeria

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ABSTRACT

Background: Adolescents have peculiar health needs which require adolescent reproductive health services (ARHS). Many adolescents are unaware of the sexual and reproductive health information and services available, the adolescents have limited access to reproductive health services. Accessibility and uptake of adolescent reproductive health services will inform the adolescents' experiences to combat the rising challenges of adolescent sexual behaviours. Out-of-school adolescents are vulnerable and socially marginalised, and In-school adolescents suffer provider bias, making it harder to obtain the expected comprehensive treatment they require. This study focussed on the factors associated with reproductive health services experiences of in-school and out-of-school adolescents.

Methodology: This was a school- and community-based comparative cross-sectional study among adolescents 10-19 years. Six hundred and forty adolescents in Owo local government were recruited. In-school adolescents were selected using multistage sampling technique while consenting out-of-school adolescents in the mapped area were selected. Quantitative data was obtained using the WHO illustrative questionnaire for interview surveys with young people. Experiences of adolescents' reproductive health services were assessed using the adolescents who had at least once utilised or used reproductive health services and was categorised into 'Present' or 'Absent' depending on if the adolescent had 'ever used' or 'never used' reproductive health services respectively. The p-value of less than 0.05 was the level of significance.

Result: More in-school adolescents (52.8%) than 18.8% of out-of-school adolescents had ARHS experiences ($p < 0.001$). The predictors of ARHS experiences among the in-school adolescents were level of ARHS awareness ($AOR = 2.364$; $95\%CI = 0.204-0.880$), and had reproductive health problems requiring ARHS ($AOR = 2.421$; $95\%CI = 0.227-0.750$). The predictors of ARHS experiences among the out-of-school adolescents were the age of the respondents ($AOR = 2.716$; $95\%CI = 1.013-7.282$), ARHS awareness ($AOR = 3.876$; $95\%CI = 0.132-0.507$), having reproductive health problems requiring ARHS ($AOR = 2.667$; $95\%CI = 0.163-0.864$). Being in-school or out-of-school is not a predictor of ARHS experiences among respondents.

Conclusion and Recommendations: There is a dire need for improved awareness of ARHS among adolescents, combining school-based initiatives with community outreaches can create a more comprehensive support system for in-school and out-of-school adolescents.

Keywords: Reproductive Health Services, In-School Adolescents, Out-Of-School Adolescents.

Assessment of Prevalence and Associated Factors of Occupational Stress among Secondary School Teachers in Enugu Metropolis

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ABSTRACT

Background: Occupational stress is defined as the harmful physical and emotional responses that occur when the requirements of the job do not match the capabilities, resources or needs of the worker. Occupational stress significantly impacts secondary school teachers, particularly in Nigeria, where teachers face myriads of challenges. Chronic stress can lead to hypertension, diabetes, cardiovascular diseases and mental problems. There is a paucity of research focusing specifically on secondary school teachers in Enugu State. Understanding the unique stressors faced by teachers in this region is crucial for developing targeted interventions that can effectively mitigate stress and improve teachers' working conditions. The study aimed to investigate the prevalence and associated factors of occupational stress among secondary school teachers in Enugu Metropolis.

Methods: The study was done in Enugu Metropolis- Capital Territory of Enugu State using descriptive cross-sectional survey among 278 full time Public Secondary School Teachers selected through multi stage sampling technique from 9 schools. Data was collected using a self-administered semi-structured questionnaire adapted from the Teachers Stress Inventory. Data was analyzed with IBM SPSS version 21. Ethical approval was secured from the Health Research Ethics Committee of UNTH Enugu. Informed consent was obtained. Necessary approvals were secured from the Enugu State School Board.

Results: The prevalence of occupational stress among teachers was 72.3%. Physical health problems such as fatigue (44.6%) and headaches (33.8%) were reported, alongside anxiety (48.6%) and depression (29.1%). Key stressors included excessive workload (61.1%), student indiscipline (47.1%), and inadequate teaching resources (44.6%). Years of work experience and job insecurity were significantly associated with stress levels ($p < 0.05$). Common coping strategies included taking breaks and time off work (70.5%) and seeking support from family and friends (57.7%).

Conclusion: Occupational stress prevalence is high among secondary school teachers in Enugu State, driven by multiple work-related and socio-demographic factors.

Keywords: Occupational Stress, Prevalence, Teachers, Anxiety, Workload

Perspectives on Exclusive Breastfeeding Practices among Pregnant Women at Rural Primary Healthcare Centres in Ebonyi State Nigeria

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ABSTRACT

Background: Breastfeeding is a crucial public health intervention and a key strategy for child survival. Despite the enormous benefits, adherence to the WHO recommendation for exclusive breastfeeding (EBF) remains below optimal. This study aimed to assess pregnant women's knowledge, perception, and attitude toward EBF in rural communities in Ebonyi State.

Methods: This facility-based cross-sectional study involved 380 pregnant women selected through systematic random sampling at antenatal clinics from six rural primary healthcare centres in Ebonyi State. Information on pregnant women's knowledge, perception, and attitude toward EBF was collected using a structured questionnaire. A percentage score greater than 50% indicated good knowledge, while a mean score above 3.0 was considered a positive perception and positive attitude. Univariate, bivariate, and multivariate logistic regression analyses were conducted with significant levels at a 95% confidence interval and a p-value of less than 0.05.

Results: Most respondents (329, 86.8%) demonstrated good knowledge of exclusive breastfeeding. Specifically, 58.8%, 80.7%, 73.4%, 86.8%, and 90.2% showed a good understanding of the EBF concept, its benefits to mother, baby, and society, and breastfeeding techniques, respectively. A positive perception of EBF was observed in 78.1% of participants, while 56.7% expressed a positive attitude. Only 50.7% indicated a strong willingness to exclusively breastfeed within an hour of birth and for up to six months, with 28.0% feeling very confident in breastfeeding for up to two years. Predictors of positive perceptions included older age (OR = 11.92, CI = 1.32 - 107.71) and higher (tertiary) educational level (OR = 0.104, CI = 0.021-0.541), while predictors of positive attitude were a higher (tertiary) educational level (OR = 0.278, CI = 0.06 - 0.89) and traditional religion (OR = 4.39, CI = 1.30 - 14.93).

Conclusion: The findings showed sub-optimal attitudes and highlighted the importance of education and age in shaping perceptions and attitudes toward EBF among pregnant women in rural communities.

Recommendation: Healthcare providers should intensify efforts to promote EBF, dispel misconceptions, and improve knowledge and attitude, particularly among younger and more educated women.

Keywords: Attitude, Exclusive Breastfeeding, Knowledge, Perception, Pregnant Women

Assessment of Burnout among Non-Clinical Workers in University of Benin teaching Hospital, Benin City

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ABSTRACT

Background: Burnout is a prolonged response to chronic emotional and interpersonal stressors on the job, comprising three dimensions: depersonalization, personal achievement and emotional exhaustion. Non-clinical hospital staff form a vital part of the hospital ecosystem. Despite their crucial roles, the potential burnout experiences and related implications in this group have remained relatively unexplored. The objective of this study was to determine the prevalence, severity and contributing factors of burnout among non-clinical workers in the target teaching hospital.

Method: The study was a descriptive cross-sectional study carried out among 600 non-clinical workers in University of Benin Teaching Hospital Benin City who were selected via multi-staged sampling. Data was collected through a semi structured tool adapted from Maslach Burnout inventory. Univariate, bivariate and multivariate analysis were performed with level of significance set at $p < 0.05$.

Results: The mean age of the respondents was 42.3 ± 7.84 years. Male respondents accounted for 58.8% ($n=353$) of the respondents. A higher proportion of the respondents, 16.3% ($n=98$) were administrative staff, almost all the respondents, 93.3% ($n=560$) work for at least 5 - 8 hours daily and 424 (70.7%) run shift duties. The prevalence of burnout in all three dimension was 46.5%; 79.3% experienced high-level burnout on depersonalization; 70.5% on personal achievement and 60.3% experienced high-level burnout and on emotional exhaustion. Significant predictors of burnout include sex, income, length of employment, working hours and workload.

Discussion: The prevalence of burnout for non-clinical workers in this study was similar to the prevalence of burnout among health workers from other studies. This imply that non-clinical healthcare workers are experiencing burnout just like clinical workers which necessitates a holistic approach in addressing burnout. Addressing long working hours and workdays through improved recruitment, supportive work environments and communication may help deal with these determinants of burnout.

Conclusion and Recommendation: The study revealed a significant prevalence of burnout among non-clinical staff at UBTH. Hospital managers need to establish a supportive work environment, encouraging open communication, and provide resources for coping strategies and mental health support.

Keywords: Burnout, Prevalence, University of Benin Teaching Hospital, Non-Clinical Workers

Assessment of Work-Related Musculoskeletal Disorders among Health Care Workers in a Tertiary Health Facility in South-South Nigeria

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ABSTRACT

Background: Musculoskeletal disorders (MSDs), particularly work-related musculoskeletal disorders (WRMSDs), pose a significant risk to healthcare workers due to the physical demands of their work, including heavy lifting and awkward postures. The aim of this study was to determine the types and prevalence of musculoskeletal disorders among healthcare workers in University of Benin Teaching Hospital (UBTH).

Methods: A descriptive cross-sectional study was carried out in UBTH among 329 healthcare workers using a stratified random sampling technique. Data was collected using structured self-administered questionnaires modified from the Nordic musculoskeletal Questionnaire and analyzed using IBM SPSS Version 27.0.1 software. Univariate, bivariate and multivariate analysis was performed with the level of significance was set at $p < 0.05$.

Results: The mean age of the respondents was 29.17 ± 6.84 years with 62.3% being female. Among the healthcare workers, the majority 47.7% (n=157) were nurses while 43.2% (n=142) were doctors. Regarding working hours per week, almost two-thirds, 60.2% (n=198) of respondents reported working between 49-96 hours per week. The 12-month prevalence of MSDs was 57.8% while the 7-day prevalence was 83.3%. The most common musculoskeletal disorder among respondents was lower back pain, reported by 246 (74.8%), neck pain affected 236 (71.7%), while 202 (61.4%) experienced upper back pain. Significant predictors of MSD were health worker type and engaging in shift work.

Discussion: The prevalence of burnout for non-clinical workers in this study was similar to the prevalence of burnout among health workers from other studies. This implies that non-clinical healthcare workers are experiencing burnout just like clinical workers which necessitates a holistic approach in addressing burnout. Addressing long working hours and workdays through improved recruitment, supportive work environments and communication may help deal with these determinants of burnout.

Conclusion and Recommendation: The prevalence of MSD among healthcare workers was high with the lower back and neck being the most affected parts of the body. Regular ergonomic assessments of workstations and practices to identify high risk areas needs to be prioritized to implement corrective measures.

Keywords: Musculoskeletal Disorders, Hazards, Occupational Health, Ergonomics, Health Care Workers.

Alcohol Use Disorder among Healthcare Professionals in Federal Medical Centre, Yenagoa

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ABSTRACT

Background: Alcohol use disorder (AUD) among healthcare workers is a developing issue with significant impact on patient care as well as the health worker. There is a dearth of literature on AUD among health care professionals in Nigeria. This research therefore was aimed at assessing the prevalence of AUD and the factors associated with alcohol use disorder (AUD) among healthcare professionals in Federal Medical Centre (FMC), Yenagoa.

Methods: A cross-sectional study involving 381 participants using a validated questionnaire to collect data from respondents. Alcohol Use Disorder Identification Test (A.U.D.I.T) was used to determine the prevalence of alcohol use disorder; Mini International Neuropsychiatric interview (M.I.N.I) was used to identify the pattern of AUD; the social demographic section of the questionnaire, was used to identify the factors influencing alcohol use disorder; Data was analyzed with the usage of SPSS version 25. Categorical variables were summarized using proportions. Associations were determined using Chi-square.

Results: The findings showed that 20% of respondents had alcohol use disorder, 20% had a moderate risk of alcohol consumption, and 60% of respondents had a low risk of alcohol consumption. AUD was significantly associated with male sex (OR: 3.000, 95% CI: 1.760-5.114), being married (OR: 2.000, 95% CI: 1.214-3.294), and spending 5 or more hours at work (OR: 4.500, 95% CI: 2.583-7.840) but was not associated with age of <30 (OR: 0.111, 95% CI: 0.060-0.206), 0-10 years of experience in healthcare (OR: .333, 95% CI: 0.187-0.593).

Conclusion and Recommendations: The study concluded that AUD was significantly associated with age, being male, married, spending 5 hours and above at work and over 10 years of experience in healthcare. It was recommended that there should be flexible working hours for health workers and awareness creation programs on the dangers of AUD among healthcare professionals.

Keywords: Alcohol Use Disorder, Associated Factors, Health Workers.

Barriers and Facilitators to Adopting a Nurse-Led Model for Integrated HIV and Hypertension Care in Primary Healthcare Settings in Benue State: A Qualitative Analysis using EPIS

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ABSTRACT

Background: The rising burden of non-communicable diseases (NCDs) alongside HIV in Nigeria necessitates innovative care delivery models. However, health workforce shortages pose a significant challenge especially at the primary healthcare level. Building on the successful HIV task-shifting approaches to integrate hypertension and diabetes management into existing HIV care infrastructure presents a promising solution to address physician shortages and expand NCD care access. This study assessed the contextual factors influencing the adoption of a nurse-led integrated care model in Benue State's primary healthcare settings.

Method: We conducted a stakeholder analysis to identify key stakeholders in the Benue State Health sector, at the State, Local Government and health facility levels. Fourteen In-depth interviews were conducted in December 2024 to assess the stakeholder's perspectives on the barriers and facilitators to adopting a nurse-led model of care for hypertension and diabetes in primary healthcare HIV clinics. Data collection and analysis were guided by the Exploration, Preparation, Implementation and Sustainment (EPIS) Framework.

Results: While stakeholders broadly supported nurse-led integrated care at primary healthcare centers, some advocated for a stepped approach with diagnosis and treatment initiation at higher levels. Key barriers identified included workforce constraints, knowledge and skill gaps, high workload, equipment and medication shortages, poor referral feedback, and inadequate financing. Facilitators encompassed existing task-shifting policies, established treatment protocols, high community acceptability of nurse-led care, anticipated patient benefits, and potential improvement in facility revenue generation.

Conclusion and Recommendations: Successful integration of hypertension and diabetes care into HIV services through a nurse-led model requires systematic attention to identified contextual factors. Multistakeholder collaboration across all health system levels is essential to address implementation barriers and leverage existing facilitators. This approach holds promise for expanding NCD care access while optimizing established HIV care infrastructure in resource-limited settings.

Keywords: HIV Management, Hypertension Care, Nurse-led Model, Task-shifting, Primary Health Care

Cervical Cancer Willingness to Vaccinate and Vaccination Uptake among Female Undergraduate Students Of Kwara State University, Malete, Nigeria

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ABSTRACT

Background: Human Papilloma Virus (HPV) is a preventable cause of cervical cancer, which is one of the leading causes of cancer related deaths in women particularly in low- and middle-income countries like Nigeria. Despite the availability of HPV vaccine and other preventive measures such as cervical cancer screening, uptake remains suboptimal. It is imperative to evaluate the uptake of cervical cancer screening and the readiness of female undergraduate students to receive the HPV vaccine for several reasons. This study therefore assessed the uptake and willingness to vaccinate against HPV infection and associated factors.

Methods: A descriptive cross-sectional study conducted among 604 consenting undergraduate female students selected using multistage sampling technique. Interviewer-administered questionnaire was used to collect data electronically. Knowledge, Attitude, Perception, Uptake, Willingness were measured. Descriptive and inferential analysis were done using STATA 11.0, revealing the knowledge, attitude, perception, uptake, willingness, associated and predictor factors. Level of significance was set at p-value <0.05 and 95% confidence interval. Ethical clearance was obtained.

Results: Majority of respondents were aware of cervical cancer screening (75%) and HPV vaccine (73%) but only 38% have been screened and approximately 34% have been vaccinated. Good knowledge, attitude and perception were found in 88%, 98%, and 93% of respondents respectively. Majority (89%) are willing to be vaccinated and age, religion, previous school attended, academic levels, knowledge, attitude and perception were all significantly associated with this willingness to vaccinate. Religion, levels of study, knowledge, attitude and perception were independent predictors of willingness to be vaccinated.

Conclusion and Recommendations: Study showed that vaccine uptake is low, religion, higher academic levels, knowledge, attitude and perception significantly influence willingness and vaccine uptake. These findings suggest that while information is widely accessible, there are underlying barriers preventing individuals from engaging in preventive health practices. Addressing these factors through targeted educational, sociocultural and religious initiatives can enhance willingness and uptake of cervical cancer vaccine among young females. Integration of health education into curriculum, promotion of religion and community-based health initiatives, strengthening national programs for screening and vaccination, and support for further research and pilot programs are highly recommended.

Keywords: Cervical Cancer, Uptake, Willingness, Screening, HPV-vaccine

Help-seeking Behaviours among Young Females Who Experience IPV in Rural and Urban Areas in Nigeria

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ABSTRACT

Background: Intimate partner violence (IPV) is a pervasive global health and human rights concern that threatens the health and well-being of millions of women and girls. Limited research exists on rural-urban differences in help-seeking behaviours of young females IPV victims in Sub-Saharan Africa. This study compares the help-seeking behaviours of young females who are IPV victims in rural and urban communities in Lagos State, Nigeria.

Methodology: A community-based comparative cross-sectional study was conducted using multistage sampling to select a total of 408, (204 each) ever-partnered young females aged 18-24 years from Ifako-Ijaiye and Epe (urban and rural) Local Government Areas in Lagos State, Nigeria. Interviewer-administered questionnaire was used to collect data that were analysed using IBM SPSS version 25.

Results: The lifetime prevalence of IPV among the young females was 55.4% and 27.9% in the rural and urban communities respectively, ($p=0.071$). Help-seeking was more common in the rural (38.1%) than urban (24.6%) areas, ($p=0.079$). Most IPV victims sought solely informal support, 74.4% and 78.6% in the rural and urban communities respectively ($p=0.569$) primarily from the respondents' family (rural 68.1% vs. urban 57.1%). Few respondents sought only formal help (rural 9.7% vs. urban 5.3%). Being afraid it would end the relationship was the main barrier in seeking help in both rural (39.4%) and urban (25.6%) communities.

Conclusion and Recommendations: Targeted interventions to address barriers to seeking formal help tailored to the unique needs of rural and urban young female victims is vital. These efforts are critical to improving outcomes for IPV victims especially young women in Sub-Saharan Africa.

Keywords: Help-seeking, Young Women, Intimate Partner Violence, Nigeria

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MPOX Outbreak in Abia State, South-East Nigeria, 2024: A Descriptive Study

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ABSTRACT

Background: Mpox is a viral illness caused by the Mpox virus (MPXV), which belongs to the Orthopoxvirus genus of the family Poxviridae. In Nigeria, there has been an upsurge in the burden of Mpox, with changes in the epidemiological trend documented in studies. We aimed to describe the outbreak in time, place, and person and identify the challenges of the outbreak response.

Methods: We investigated the cases and conducted a descriptive study of suspected cases of Mpox line-listed in 2024. Data were collected using a standardized case investigation form, and the case definitions were adopted from the IDSR. Active case search was conducted in affected communities and a review of hospital records was done. All cases were reported on the SORMAS, and the samples collected were transported to the National Reference Laboratory for confirmation. Data was extracted from SORMAS, cleaned and analyzed using SPSS. Frequencies, proportions, and attack rates were generated.

Results: Sixty-one suspected Mpox cases were line-listed and 10 (16.4%) were laboratory-confirmed with 6 (60%) out of the confirmed cases having Varicella Zoster virus (VZV) coinfection. All the cases of Mpox/VZV coinfection were more prevalent among children under 15 years of age. Males constituted 62.3% (38/61) and the median age was 7.0 years (IQR: 2 - 22 years). The predominant age group was 0-4 years 25 (41%) and confirmed cases were dominated in 5 LGAs. The commonest symptoms were fever (85.5%) and rash (75.8%). The most preceding symptom was fever (29.5%). Rashes were mostly on the face (72.1 %). The overall attack rate was 2 cases /100,000 population, with the highest in Ukwu East LGA (8/100,000 population). The epicurve demonstrated a propagative pattern. The challenges of the outbreak response included stigmatization of the cases, recall bias and absence of animal surveillance.

Conclusion and Recommendations: The demographic group (males/children) and Ukwu East LGA were mostly affected in the Mpox outbreak. Mpox/VZV co-infection was prevalent among children. The commonest symptoms included fever and rash (mostly on the face). We recommended awareness campaigns and community sensitization in the affected communities, the intensification of Mpox surveillance under the one health system, and the consideration of Mpox vaccination among children.

Keywords: Case, Epidemiology, Mpox, Nigeria, Outbreak

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Prevalence, Pattern and Predictors of Substance abuse among In-School adolescents in Yenagoa, Bayelsa State

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ABSTRACT

Background: Harmful use of substances by adolescents is adjudged a global epidemic by the WHO, affecting both the individual and society. This study aimed to determine the prevalence, pattern and socio-demographic and psychosocial factors related to substance abuse among in-school adolescents.

Methods: A total of 301 in-school adolescents aged 10-19 years were randomly selected for a cross-sectional study. Data was collected through a semi-structured, self-administered questionnaire that was adapted from the Global School- based Student Health Survey (GSHS) Core Questionnaire, Drug Use Module 2021 version. Data was analysed using SPSS version 25; descriptive statistics in frequencies and percentages; inferential statistics using chi-square at $p < 0.05$

Result: 301 students participated in the study with a mean age of 15.07 ± 1.573 . The prevalence of lifetime substance abuse was 32.3% while the 12 months prevalence was (20.6%) among which 13 (4.3%) were daily substance users. The most commonly abused substance was Alcohol 87 (90.6%), Marijuana 20 (20.5%) and Shisha 18 (18.8%). The mean age of initiation was 12.42 ± 2.971 years, relaxation 23 (24.0%) and curiosity 18 (18.8%) were the most common reasons given. Older adolescents ($\chi^2 = 5.300$; $p = 0.021$), being male ($\chi^2 = 8.149$; $p = 0.004$), in boys' school ($\chi^2 = 15.519$; $p = 0.000$), in polygamous homes, ($\chi^2 = 5.225$; $p = 0.022$) and mother with no education ($\chi^2 = 7.976$; $p = 0.047$) were associated with Substance abuse. Predictors include older adolescents, Negative influence from family members, easy access to drugs and money and history of sexual abuse ($p < 0.05$).

Conclusion: Harmful use of substances was prevalent among in-school adolescents, the age of initiation of substance use is much younger than it was reported in previous studies. Alcohol, cannabis and shisha are the most commonly abused substances.

Keywords: Prevalence, Patterns, Substance Abuse, In-School Adolescents, Yenagoa.

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Knowledge and Perception of Fathers on The Use of Oral Rehydration Solution in the Treatment of Childhood Diarrhoea among University Employees in Nigeria

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ABSTRACT

Background: Childhood diarrhoea continues to be a serious public health concern and a notable cause of under-5 mortality despite advancements in global healthcare. Previous studies conducted in Nigeria indicated poor knowledge and perception concerning Oral Rehydration Solution (ORS) usage in the management of childhood diarrhoea among caregivers, especially fathers. This study assessed the knowledge and perception of ORS use in the management of childhood diarrhoea among male employees of a Nigerian university.

Method: This cross-sectional study was conducted among 198 male employees of Babcock University selected using purposive sampling method. Men who had at least one child below the age of 5 were included while men who were health workers were excluded from the study. Data was collected using a pretested, semi-structured interviewer-administered questionnaire. Data were analyzed using SPSS software version 24 (IBM SPSS Inc., Chicago, IL). Knowledge and perception of ORS were graded as good and poor using mean scores. Data summary was done using mean, standard deviation, and proportions. Chi-squares were used to test for associations between categorical variables. The level of significance was set at 5%. Data were presented as tables. Ethical approval was obtained from Babcock University Health Research and Ethics Committee (BUHREC 883/24) and written informed consents were obtained from the participants.

Results: The mean age of participants was 36.69 ± 7.82 and most (57.6%) of them had tertiary education as the highest level of education. The majority (89.9%) had good knowledge while 10.1% had poor knowledge about the use of ORS in managing childhood diarrhoea. More than half (52.0%) had a good perception while 48.0% had a poor perception concerning ORS use. Age ($p < 0.001$), education ($p = 0.038$), and occupation ($p < 0.001$) were significantly associated with knowledge. Occupation ($p = 0.001$), marital status ($p = 0.017$), and religion ($p = 0.001$) were significantly associated with perception.

Conclusion and Recommendation: Most respondents had good knowledge and perceptions of the use of oral rehydration solutions to treat childhood diarrhoea, which are directly associated either with their levels of education, occupation, religion, and marital status. There is a need for tailored intervention to enhance male knowledge, such as improved health education programmes.

Keywords: Oral Rehydration Solution (ORS), Childhood Diarrhoea, Knowledge, Perception, Male Employees.

Radiation Exposure in Orthopaedic Surgeries: A 5-Year Review in University of Port Harcourt Teaching Hospital

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ABSTRACT

Background: Orthopedic surgeons frequently face occupational hazards, including exposure to radiation from c-arm usage during surgeries. The use of C-arm fluoroscopy is vital in contemporary orthopaedic surgical practice to guide and enhance the surgeon's technical proficiency. Despite these benefits, concerns about the increased radiation exposure to the surgical teams resulting in long-term health complications such as cataracts, genetic mutations and cancer exist, necessitating assessment of relevant data, and implementation radiation safety protocols. The study aimed to determine the prevalence of radiation exposure from c-arm usage and examine the relationship between operative time and radiation exposure during orthopedic surgeries.

Methods: A retrospective review of 848 orthopedic cases done over a 5-year period. Data on radiation exposure and operative time were extracted from the hospital theatre records. The association between operative time and radiation exposure was analyzed using chi-square tests, with statistical significance set at $p < 0.05$.

Results: Radiation exposure following C-arm use occurred in 126 (14.9%) surgeries. Surgeries lasting >1 hour were 675 (79.6%) while 173 (20.4%) lasted <1 hour. Also 119 (17.6%) of the surgeries lasting > 1 hour had more frequent or prolonged fluoroscopic guidance and radiation exposure compared to 7(4.0%) of the surgeries lasting $\leq$ 1 hour. A significant association was relationship was found between prolonged surgeries and radiation exposure ($\chi^2 = 20.084$, $p = 0.001$). Also, prolonged surgeries were 5.08 times more likely to involve radiation exposure. OR (C.I) 5.08 (2.32-11.09) $P < 0.001$

Conclusion and Recommendations: The risk of radiation exposure increases with the surgery duration and complexity. Improved safety measures, including the use of functional protective barriers and enhanced radiation protocols, regular radiation safety training and awareness programs can help safeguard the health of orthopedic surgeons.

Keywords: Radiation, Orthopaedic Surgery, Occupational Hazard, C-Arm Fluoroscopy,

Quality Of Life and Mental Illnesses among the Elderly in Ogun East Senatorial District, Nigeria

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ABSTRACT

Background: In Nigeria, about a quarter of the population are afflicted with mental illnesses, and 3.26% of this population is made of old people, 65 years and above. The economic burden affiliated with mental illness includes health care costs, decreased productivity, and diminishing health-related quality of life (QoL). However, there is a paucity of data on mental illness and its relation to the QoL experienced by the elderly. This study aims to determine the prevalence of good and poor QoL and assess the relationship between mental illnesses and the QoL among the elderly in Ogun East Senatorial district.

Methods: This study was a community-based, cross-sectional survey targeting elderly individuals. A total of 402 participants were selected through multistage sampling and interviewed using semi-structured questionnaires. Data analysis was performed with IBM SPSS Statistics version 22.0. Descriptive statistics were summarized as proportions and displayed in frequency tables. Bivariate analysis included Chi-square tests and logistic regression. The level of significance was set at a 95% confidence interval, with a p-value threshold of <0.05.

Results: The prevalence of mental illness among the elderly respondents was found to be 35.8%. Among the mental health conditions, generalized anxiety disorder (GAD) was the most common (15.4%), followed closely by current alcohol dependence (14.9%). One hundred and fifty-two (37.8%) of the elderly had good QoL. The mental illnesses found to be statistically significant in association with poor QoL were current major depressive episode ($p=0.004$), recurrent major depressive episode ($p=0.042$), and current psychotic disorder ($p=0.019$).

Conclusion: The prevalence of mental illness and poor QoL was high among the community-dwelling elderly respondents of Ogun East Senatorial district.

Keywords: Mental Illness, Elderly, Associated Factors, Quality of life, Community

The Burden of Prolonged Surgeries: A 5-Year Review of Orthopaedic Procedures in a Nigerian Tertiary Hospital

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ABSTRACT

Background: Orthopaedic surgeries are typically characterized by long working hours accompanied by prolonged, static standing, frequent vigorous exertions, repetitive and sustained awkward body positions. These predispose the surgeon to a myriad of occupationally related musculoskeletal injuries that can lead to missed work hours, and negative impact on the surgeon's mental health, career and overall patient care. Prolonged standing has been defined as static, continuous standing of > 1 hour. The aim of the study was to determine the prevalence of prolonged orthopaedic surgeries at the University of Port Harcourt Teaching Hospital over a 60-month period.

Methods: A retrospective review of orthopedic surgeries performed between 2018 and 2023 was conducted. Data on operative time and level of expertise were collected. Surgeries were categorized based on duration: < 1 hour, 1 to 4 hours, and > 4 hours. Data was entered into Microsoft Excel and analyzed using SPSS version 21. Frequencies were summarized as proportions and chi-square was used to determine the association between categorical variables.

Results: A total of 848 surgeries were reviewed and analyzed. The mean operative time was 2.26 ± 1.31 hours. 15.4% of the surgeries lasted < 1 hour, 75.4% were between 1-4 hours, and 9.2% exceeded 4 hours. 84.6% of cases were prolonged, lasting more than one hour. Consultants performed the majority of the surgeries across all time categories, with a significantly higher proportion (86.4%) of extremely prolonged surgeries (≥ 4 hours) handled by consultants (Chi-square = 6.72, $p = 0.009$) suggesting a higher complexity of cases, with increased risk of future complications.

Conclusion and Recommendations: Prolonged static standing necessitates ergonomic interventions to reduce this occupational hazard on orthopaedic surgeons. Strategies such as anti-fatigue mats, adjustable operating tables, and regular breaks can significantly improve surgeons' long-term well-being, performance and enhance surgical outcomes.

Keywords: Prolonged Standing, Orthopaedic Surgeries, Burden, Ergonomic Interventions.

Prevalence of Mental Illness and Associated Factors among the Elderly in Ogun East Senatorial District, Nigeria

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ABSTRACT

Background: Mental health problems are common in the elderly, they often go unnoticed, ignored, untreated, or considered part of normal ageing. About a quarter of the Nigerian population have mental health problems out of which 3.26% are elderly. This study aimed to determine the prevalence, types, and factors associated with mental illnesses among the elderly.

Method: This was a community-based cross-sectional survey of the elderly. Four hundred and two elderly people were selected by a multistage sampling technique and were interviewed using semi-structured questionnaires. Data analysis was done using the IBM SPSS Statistics version 22.0. Descriptive statistics were summarized using proportion and presented in frequency tables. Bivariate analyses were done using the Chi-square test and logistic regression analyses. The level of significance was set at a 95% confidence interval with a p-value <0.05.

Results: The prevalence of mental illness among the elderly respondents was 35.8%. Of all the mental illnesses, generalized anxiety disorder ranked the highest (15.4%), followed by current alcohol dependence (14.9%). The factors found to be associated with mental illness in the elderly included monogamous family type (OR=0.211, P=0.034), and monthly income less than 50,000 Naira (OR=85.108, P=0.003).

Conclusion: This study revealed the prevalence of mental illness was high among the community-dwelling elderly respondents of Ogun East Senatorial district. The determinants of mental illness among the elderly were monthly income of less than 50,000 naira, while monogamous family type was found to be protective of mental illness in the elderly.

Keywords: Mental Illness, Elderly, Prevalence, Associated Factors, Community

Cannabis Use and Its Associated Factors among Students of the University of Port Harcourt, Rivers State

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ABSTRACT

Background: Cannabis use among students is a growing concern globally and on the continent. The need to add to the existing body of knowledge on the factors that influence the use of cannabis among university students in Nigeria is therefore pertinent. The aim of this study was to assess the determinants of cannabis use among students of the University of Port Harcourt, Rivers State.

Methodology: A descriptive cross-sectional study involving 657 participants selected through multistage sampling using self-administered questionnaires was done. The questionnaire used was validated and adopted from cannabis use disorder identification test (CUDIT), cannabis use problem identification test (CUPIT), Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) and MINI-International Neuropsychiatric interview (M.I.N.I.). Data entry was done using MS Excel and IBM SPSS version 26 was used for analysis. Categorical variables were summarized using proportions and percentages. Associations were determined using Chi-square.

Results: The results showed that 30% of the students reported using cannabis in the past 3 months. Factors associated with cannabis use were presence of withdrawal symptoms ($p < 0.001$), having a family member who uses cannabis ($p < 0.001$), and easy access to cannabis ($p < 0.001$). Age ($\chi^2 = 7.504$, $p < 0.001$), place of residence ($\chi^2 = 278.810$, $p < 0.001$), family structure ($\chi^2 = 175.554$, $p < 0.001$), and current academic level ($\chi^2 = 116.661$, $p < 0.001$) were also significantly associated with cannabis use

Conclusion and Recommendation: Cannabis use among students is a serious public health problem with social consequences. Therefore, there is need by relevant stakeholders to stem the tide of cannabis use among students.

Keywords: Cannabis Use, Students, Cross-sectional, Associated Factors.

The Gene Xpert Outcomes of Adult Presumptive Pulmonary Tuberculosis Patients in Nnamdi Azikiwe University Teaching Hospital (NAUTH), Nnewi, Anambra State, Nigeria

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ABSTRACT

Background: Tuberculosis (TB) remains a public health issue in Nigeria. With the current rising TB and Multi-drug resistant / rifampicin resistant Tuberculosis (MDR/RR-TB) burden in the country, there is need for the use of improved molecular diagnostic test like the Gene Xpert assay for detection of TB and resistant TB. This study aimed at finding out the Gene Xpert outcomes of adult presumptive pulmonary TB patients in NAUTH Nnewi, Anambra State, Nigeria.

Methods: A descriptive cross-sectional study was carried out among 180 randomly selected adult presumptive pulmonary tuberculosis (PTB) patients aged ≥ 18 years who presented to TB/DOTS centre, NAUTH Nnewi between June 1, 2024 to September 30, 2024. A pre-tested semi-structured, interviewer-administered questionnaire was used to obtain socio-demographic and clinical information from the respondents. Gene Xpert molecular diagnostic method was used for the detection of Mycobacterium tuberculosis (MTB) and rifampicin resistance (RR) from their sputum samples according to the manufacturer's protocol. Data were analyzed using SPSS version 25. Frequencies and proportions were computed as descriptive measures for the variables. Informed consent was obtained from the study participants prior to the study. Ethical approval was obtained from Nnamdi Azikiwe University Teaching Hospital Ethics Committee.

Results: A total of 180 sputum samples were collected and examined from the participants who were predominantly males (52.8%). The age range of the participants was between 18-84 years. The overall TB and MDR / RR-TB prevalence is 35% and 9.5% respectively. Out of the 180 sputum samples, 63(35.0%) had MTB detected using Gene Xpert assay. Out of the 63 Gene Xpert positive sputum samples, 6(9.5%) were resistant to rifampicin, 38(60.3%) were not resistant, while 19(30.2%) were indeterminate to rifampicin.

Conclusion: Both TB and MDR/RR-TB are public health issues in the study area. There is need for the scale up of the use of improved diagnostic methods like the Gene Xpert assay for the rapid detection of TB and the resistant strains of the disease at every point of care in Anambra State. This will ensure early access to therapy, improve treatment outcomes, and decrease TB transmission rates in the State and the nation at large.

Keywords: Presumptive Pulmonary Tuberculosis, Mycobacterium Tuberculosis, Gene Xpert MTB/RIF Assay, Adult, NAUTH Nnewi.

Knowledge, Attitude and Uptake of Human Papillomavirus Vaccine among Female Students at Pamo University of Medical Sciences in Rivers State, Nigeria

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ABSTRACT

Background: HPV is the most common global sexually transmitted infection, closely linked to cervical cancer, a leading cause of cancer mortality in women. HPV vaccine has been developed as an effective preventive measure. However, despite the proven efficacy of the vaccine in preventing HPV-related diseases, vaccination rates remain suboptimal, especially among female students. This study aimed to assess awareness, perceptions, and vaccine uptake regarding the HPV vaccine among female students at PAMO University of Medical Sciences.

Methodology: A descriptive cross-sectional study recruited 210 participants using the Cochran formula by a multi-stage sampling method which employed a semi-structured self-administered questionnaire to collect data on sociodemographic factors, awareness, attitudes, and vaccination uptake. Data analysis was conducted using IBM SPSS version 30. Results were presented in frequency tables. Mean and standard deviation were also used to summarize continuous data and percentages for categorical data. A Chi-square test was used to test for association between dependent and independent variables. The level of statistical significance was set at $P < 0.05$.

Results: The study revealed that 31.5% of participants had good knowledge, 32% fair knowledge, and 36.5% poor knowledge of the HPV vaccine, while 78.4% held a positive attitude towards it. However, vaccination uptake was low, with only 3.2% vaccinated; concerns about side effects and vaccine accessibility were significant barriers.

Conclusion and Recommendation: Awareness and vaccination uptake of the HPV vaccine among female students at PAMO University were suboptimal, despite a generally positive attitude. Key factors affecting uptake included fears of side effects and availability issues, highlighting the need for improved access to the HPV vaccine through university initiatives.

Keywords: HPV Vaccine, Knowledge, Attitude, Uptake, PUMS

Finding the Missing Tuberculosis Cases in Hospital Service Delivery Points Outside DOTS Clinic and Treatment Initiation- A Review of Tertiary Facilities in South-South Nigeria.

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ABSTRACT

Background: Tuberculosis (TB) remains a global health challenge, and the Directly Observed Treatment Short-course (DOTS) clinics still play an important role in TB management. On the other hand, weak screening at non-DOTS clinics may result in missed cases, late treatment and more cases of TB infection than necessary. The KNCV Nigeria USAID-funded TB LON 1&2 project supports TB screening across all hospital service delivery points (SDPs). This study reviewed TB screening, case detection, and treatment initiation across SDPs beyond DOTS clinics in tertiary hospitals in South-South Nigeria.

Methods: A retrospective analysis was conducted on TB screening cascade data from four teaching hospitals across three South-South states over a two-year period (2022–2023), during which TB screening was actively expanded to non-DOTS SDPs beyond the traditional DOTS clinics. Data were categorized into DOTS and non-DOTS SDPs (emergency units, outpatient clinics, and inpatient wards,). Microsoft Excel® was used for data aggregation and comparative analysis of TB yield and treatment initiation between DOTS and non-DOTS SDPs, with statistical significance set at $p \leq 0.05$.

Results: A total of 387,079 clients were screened for TB across all SDPs (DOTS: 36,140; non-DOTS: 350,939). The overall presumptive TB yield was 7% (21,726), while the TB yield was 8% (1,740 cases: DOTS, 1,479; non-DOTS, 109). The TB yield was significantly higher in non-DOTS SDPs (8.12%) compared to DOTS clinics (7.43%) [OR (95% CI) = 1.3219 (1.082–1.615), $p = 0.0032$]. Treatment initiation rates showed no significant difference between non-DOTS and DOTS SDPs [OR (95% CI) = 2.015 (0.777–5.228), $p = 0.0748$].

Conclusion: TB case detection was higher outside DOTS units, with similar treatment initiation rates. Hence, strengthening case detection and treatment initiation at non-DOTS SDPs is critical for reducing undiagnosed TB cases in tertiary healthcare facilities.

Recommendation: Enhancing TB screening through provider training, diagnostic workflows, and referral mechanisms in non-DOTS service points is essential to optimize TB case management.

Keywords: Tuberculosis, Tuberculosis Yield; DOTS Clinics; Non-DOTS Clinics; Treatment Initiation.

Psychological Morbidity Status and Coping Mechanisms of Medical Students in University of Port Harcourt, Rivers State

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ABSTRACT

Background: The psychological morbidity status and coping mechanisms of medical students are critical to their academic wellbeing and overall health. This study determined the prevalence of psychological morbidity among medical students at the University of Port Harcourt, Rivers State and examined the coping mechanisms employed by these students.

Methods: A cross-sectional study of 367 medical students of the University of Port Harcourt using simple random sampling method. Depression Anxiety Stress Scale (DASS-21) and the Brief COPE Inventory were used to measure psychological morbidity status and coping mechanisms respectively. Scores for each of the respondents over each of the sub-scales (Depression, Anxiety and Stress) were calculated as per severity-rating index. Data was entered using MS Excel and analysed using SPSS version 21. Categorical variables were summarized as proportions while quantitative variables were summarized as mean and standard deviation. Chi-square was used to investigate the relationship between categorical variables and provide a more comprehensive understanding of possible patterns present in the study.

Results: The study showed that the overall prevalence of psychological morbidity among the students was 88%. The subscale prevalence of depression, anxiety and stress was 48%, 69.5% and 34.9% respectively. The most prevalent domains of coping mechanisms was emotion-focused coping mechanism. There was no statistically significant association between psychological morbidity and coping mechanisms ($p > 0.05$). The results also revealed that Year of study ($X^2 = 35.133$, $P < 0.001$), Stage of medical class ($X^2 = 10.635$, $P = 0.001$), self-reported academic Performance ($X^2 = 18.125$, $P < 0.001$), Parental Education Level ($X^2 = 9.207$, $P = 0.010$) were significantly associated with psychological morbidity among the respondents.

Conclusion and Recommendations: The findings underscore the necessity for targeted mental health interventions and support systems within the university to enhance medical students' psychological resilience and academic success.

Keywords: Psychological Morbidity, Coping Mechanisms, Medical Students.

Violation and Exercise of Sexual and Reproductive Health Rights among ever-married women in Ibadan Metropolis-a mixed method approach

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ABSTRACT

Background: Sexual and Reproductive Health Rights (SRHRs) include access to sexual and reproductive healthcare services and information, as well as autonomy in sexual and reproductive decision-making. They are critical to women's ability to protect themselves from unwanted reproductive and sexual outcomes. However, little has been given to the exercise of SRHRs by married women who are majorly vulnerable to and affected by the violation of these rights under marriage, family characteristics, gender roles, and cultural influences. This study assessed the violation and exercise of SRHRs among ever-married women in the Ibadan metropolis.

Methods: A community-based descriptive cross-sectional study was conducted in Ibadan using a mixed methods approach. Ever-married women aged 15 – 49 were selected using a multistage sampling technique. A semi-structured interviewer-administered questionnaire was used to obtain quantitative information from 423 women, and five focus group discussions (FGD) sessions were conducted. Quantitative data were analysed using descriptive statistics and qualitative data using a thematic approach.

Results: Most respondents were aged 25 – 39 (63.6%) and married (94.1%). A majority (90.1%) claimed to have ever used SRHRs among which right to marriage (27.9%) and family planning (25.1%) were reported as the most commonly used. About a quarter (25.1%) of the respondents reported having ever experienced abuse of their SRHRs and the most prevalent abused right was the right to freedom from sexual violence (25.5%). Husbands (38.7%) were the commonest abusers. While 50% had taken action against violation of their SRHRs, only 22% took action against the known abusers. From the FGDs, the violation of SRHRs, especially sexual violence were common. Also, the approach to SRHRs violations in the community varies, as there is no collective or laid down approach, as it is a case of “*each man to his cross*”.

Conclusion: A high proportion of the respondents had ever experienced a form of abuse of SRHRs and the right to freedom from sexual violence was the most prevalent with the male spouses being the main perpetrators. Individuals should endeavour to involve their partners when making decisions on most SRHR issues to help reduce the experience of SRHR violations.

Keywords: Sexual and Reproductive Health Rights, Married Women, Exercise, Violation.

Facilitators and Barriers to Integrating Diabetes, Hypertension, and HIV Care in Primary Healthcare Centers in Abuja: A Formative Qualitative Evaluation

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ABSTRACT

Background: People living with HIV (PLWH) have increased risk of developing diabetes and hypertension. World Health Organization (WHO) recommended integrating diabetes and hypertension care with HIV services. The study objective was to evaluate the facilitators and barriers to integrating diabetes and hypertension care with HIV services at selected Primary Healthcare Centers (PHCs) in Abuja to inform future implementation efforts.

Methods: This qualitative evaluation is a component of mixed-methods formative assessment of selected PHCs in Abuja. The team developed the interview guide per the Exploration phase of EPIS framework to identify potential barriers and facilitators of integration within the EPIS outer and inner contexts. Ten comprehensive Anti-Retroviral Therapy PHCs were selected across the six area councils of Abuja, using multi-stage sampling technique. Between November 2023 and January 2024, the researchers conducted 22 key informant interviews with purposively sampled participants, including 10 interviews among PHC non-physician health workers, 6 among PLWHs at the selected PHCs, and 6 among NCD/HIV program managers at the federal, state & local government levels. Interviews were audio-recorded, de-identified, and transcribed verbatim. The Stanford Lightning Report Method (rapid qualitative approach) was used for the analysis.⁴

Results: The identified facilitators include available Government policies for control of diabetes and hypertension at PHCs, WHO NCDs control programs, successful PHCs HIV control programs, and HIV funding. Others are the appropriateness of the proposed integration, perceived need to manage diabetes and hypertension at the PHC, and the staff readiness to embrace the change. A major potential barrier identified was inadequate government funding for hypertension/diabetes control. Moreover, financial constraints for indigent patients and inadequate infrastructure for some PHC were also reported.

Conclusion: Integrating diabetes and hypertension with HIV services at PHCs in Abuja is perceived as an appropriate health intervention. The implementation can leverage identified facilitators while mitigating the barriers. Successful integration can translate to increased access to diabetes and hypertension care and improved outcomes for PLWHs.

Recommendations: Interviewees recommended advocacy for increased government funding, leveraging available external funding, and improved community health insurance. Also, providing transportation stipends for patients, free clinic registration, free/subsidized medications, staff training, supportive supervision, and robust community awareness/engagement.

Keywords: Integrating Diabetes and Hypertension, HIV Services, Primary Healthcare Centers, Facilitators, Barriers.

Prevalence and Pattern of Risk-Related Behaviours for Non-Communicable Diseases among In-School Adolescents in Benin City

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ABSTRACT

Background: Over 2.1 billion children and adolescents less than 20 years of age are affected by non-communicable (NCDs) and each year, about 1 million of them die from treatable NCDs, accounting for over 15.85 % of deaths in the age group. Unhealthy dietary patterns, physical inactivity, tobacco use and alcohol consumption are also increasingly reported among adolescents, further exacerbating the risk of NCD development. Therefore, this study assessed the prevalence and patterns of these risk factors among in-school adolescents in Benin City.

Methods: A descriptive cross-sectional study was conducted among 625 in-school adolescents selected via simple random sampling. Data were collected using a structured, self-administered questionnaire and analyzed with IBM SPSS version 27.0. A p-value of <0.05 was considered significant. Results were presented using prose, tables, and charts.

Results: The mean age of respondents was 14.75 ± 2.0 years and 58.5% were male. Regarding risk factors, 96.4% consumed less than five servings of vegetables, while 3.0% consumed excessive salt. About 42.4% reported no weekly physical activity, and 76.5% spent more than two hours daily sitting or reclining. Among the respondents, 5.9% currently smoked tobacco, and 41.2% had quit drinking due to health concerns. Notably, 61.3% had three risk factors for NCDs, while 29.2% had two. Age ($p=0.014$), sex ($p=0.004$), class of respondents ($p=0.002$) and fathers' skill level (0.008) were found to be significantly associated with fruit consumption. The factors found to be significantly associated with alcohol consumption of the respondents were age ($p=0.016$) and ethnic group ($p=0.006$), while age ($p=0.018$), sex ($p=0.028$), ethnic group (0.025), who respondents reside with ($p<0.001$), fathers' ($p=0.007$) and mothers' skill level ($p=0.006$) were statistically significant associations of tobacco smoking.

Conclusion: Despite good knowledge of NCDs, most adolescents exhibited inadequate physical activity and poor dietary habits. Among respondents, nearly two-thirds exhibited up to three risk factors. Socio-demographic characteristics emerged as significant factors promoting unhealthy lifestyle choices among adolescents.

Recommendations: Early detection and intervention through comprehensive school-based screening programs are crucial. Such initiatives could address multiple risk factors, reducing the future public health burden of NCDs.

Keywords: NCDs, Adolescents, Behavioural Risk Factors, High Blood Pressure, Prevalence.

Antenatal and Delivery Care Practices and their Predictors among Traditional Birth Attendants (TBAs) in Ogun State, South-West Nigeria

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ABSTRACT

Background: Worldwide, about 830 maternal deaths occur daily, with over 99% of these deaths occurring in low- and middle-income countries (LMICs). Maternal mortality remains a pressing issue in Nigeria, particularly in rural areas where Traditional Birth Attendants (TBAs) provide significant maternal care. This study assessed the antenatal and delivery practices among TBAs in Ogun State and identified the predictors of safe delivery outcomes.

Methods: A descriptive cross-sectional survey was conducted to recruit 275 TBAs registered with the Ogun State Alternative Medicine Board using a multi-stage sampling technique. Data was collected from eligible respondents using a pre-tested, structured, interviewer-administered questionnaire after obtaining an informed written consent. Then, analysis was done using IBM® SPSS software version 21. Descriptive statistics such as frequencies (with percentages) and mean (with standard deviation) were used to describe the study population, while the Chi-square test was used to test for association between sociodemographic characteristics and normal delivery practices. Logistics regression was used to assess the predictors of safe delivery practices. The significance level was pre-determined at p-value <0.05 at a confidence level of 95%.

Results: Respondents' mean age was 48±9.8 years, with 185 (67.3%) being females. Most TBAs (206; 74.9%) had formal training, and 265 (98.9%) encouraged the women to attend ANC in a health facility. Delivery practices were largely safe, with 264 (96.0%) demonstrating good overall delivery practices. However, only 31 (13.4%) of the respondents recognized the abnormal position/presentation of the baby as a cause of obstructed labour. Monogamous marriage setting [aOR 0.145, 95% CI (0.023-0.911), p=0.039] was the only predictor of safe delivery outcomes.

Conclusion and Recommendations: TBAs are essential in maternal healthcare delivery in Ogun State, especially in rural settings. Their formal training has positively influenced practices, but gaps remain in recognizing and managing obstetric complications. Continuous training, effective monitoring of their antenatal and delivery practices by relevant healthcare stakeholders, improved referral systems, and proper integration of the TBAs with modern healthcare services by the government are critical to enhancing maternal and neonatal outcomes in underserved communities.

Keywords: Antenatal-Care, Delivery-Practices, Maternal-Mortality, Traditional Birth Attendants, Ogun-State, Nigeria

Perception and Practice of Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) among Undergraduates of a Tertiary Institution in Oyo State, Nigeria

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ABSTRACT

Background: Sexual orientation and practices such as Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) are becoming prevalent all over the world and gradually being inculcated into the Nigerian youths, including university undergraduates. Understanding the opinions, sexual orientation, and practices of youths in the higher citadels of learning is crucial for fostering inclusivity and informing public health interventions. This study aimed to assess the perception and practice of LGBTQ among undergraduates of a tertiary institution in Oyo State, Nigeria.

Methods: A descriptive cross-sectional survey was conducted to recruit 397 respondents using a multi-stage sampling technique. A pre-tested, self-administered questionnaire was used for data collection and subsequently analysed using IBM® SPSS version 20. Categorical data was presented using frequencies and percentages, while the Chi-square test was used to assess the association between independent variables and LGBTQ practice with a significance level set at $p < 0.05$.

Results: The mean age of respondents was 20.7 ± 2.3 years, with 235 (59.2%) being females. Notably, 364 (91.7%) had heard of LGBTQ, with the media being the primary source of information, and one-half, 199 (50.1%), knew that LGBTQ is being practiced among university undergraduates. Over two-fifths of the respondents, 248 (62.5%), had a good knowledge of LGBTQ, and the majority, 356 (89.7%), had a positive perception of LGBTQ. Only a few, 18 (4.5%), reported ever practiced LGBTQ. A significantly higher proportion (9.8%) of respondents who had poor perception had ever practiced LGBTQ compared to 1.1% of those with a good perception of LGBTQ ($p < 0.05$).

Conclusion and Recommendations: The overall perception of LGBTQ was largely positive among the study population, while the reported prevalence of LGBTQ practice was relatively low. However, the practice of LGBTQ was higher among respondents with negative perceptions. Therefore, efforts to address LGBTQ issues among university students in Nigeria should prioritise education and awareness initiatives that provide accurate information about LGBTQ identities and experiences.

Keywords: Sexual Orientation, LGBTQ Practice, University Undergraduates, Oyo State, Nigeria

Prevalence, Pattern and Associated Factors of Eating Disorders among Undergraduates in a Tertiary Institution in Ogun State, Nigeria

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ABSTRACT

Background: Eating is a fundamental need of all humans to acquire nutrition to fulfil various physiological and psychological needs. Any distortion in the normal eating pattern whether by an abnormal increase or deficiency in food consumption is termed an eating disorder. In this study, we observed the pattern, prevalence and associated factors involved in the development of eating disorders in a random sample of students in a tertiary institution in South-West Nigeria.

Method: This descriptive cross-sectional study of 300 undergraduates in Babcock University utilized the stratified random sampling method. A self-administered structured questionnaire was used. The Eating Attitudes Test-26 (EAT-26) was used to assess eating disorder pattern, Rosenberg self-esteem scale was used to assess for one of the factors associated with eating disorders. Data were analyzed using IBM SPSS version 25.0. Relevant descriptive and inferential statistics were calculated. Results were presented in frequency tables. The level of significance was set at 95% confidence interval with a p-value of 0.05.

Result: 242(80.7%) were positive for high risk of eating disorders. Anorexia nervosa and Bulimia nervosa were assessed with a prevalence of 28% and 23% respectively. Stress (4.7%), sadness and depression (4.0%), self-consciousness when looking at models online (3.3%) and low self-esteem (99%) were the major factors associated with worsening eating disorders. 99% of participants experienced low self-esteem exacerbating eating disorders and a bivariate analysis showed a significant association between dislike of current weight to eating disorders amongst participants.

Conclusion/Recommendation: This study concluded that eating disorders are prevalent in young adults in tertiary institutions and are associated with various factors including stress, social media, depression and self-esteem. Following this study, we recommend that more resources be allocated to caring for students' mental health, improving food quality for more appealing foods and regular awareness programs for understanding and combatting eating disorders and their adverse effects.

Keywords: Prevalence, Associated Factors, Eating Disorders, Anorexia Nervosa, Bulimia Nervosa

Knowledge, Attitude and Self-Reported Practice of Food Safety among Food Handlers in a Tertiary Institution in Ogun State, Nigeria

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ABSTRACT

Background: Food safety is a critical public health concern, particularly in developing countries like Nigeria, where foodborne illnesses significantly impact morbidity and mortality rates. This study assessed the knowledge, attitudes, and self-reported practices of food handlers in a tertiary institution in Ogun State, Nigeria.

Methods: This cross-sectional study was conducted at Babcock University among 80 food handlers using a multi-stage sampling method. A semi-structured self-administered questionnaire was used for data collection. Data were analyzed using IBM SPSS version 22.0. Relevant descriptive and inferential statistics were calculated. Results were presented in frequency tables with a level of significance set at 95% confidence interval with a p-value of 0.05.

Results: The findings revealed that 60% of participants had good knowledge of food safety, while 70% exhibited a positive attitude towards food safety practices. Self-reported practices indicated that 56% of respondents followed good food safety practices. Notably, factors such as educational level and tribal affiliation significantly influenced knowledge and attitudes toward food safety.

Conclusion and Recommendation: The study highlights the importance of enhancing food safety education among food handlers in tertiary institutions. Despite a generally good level of knowledge and positive attitudes, there is a need for ongoing training and monitoring to ensure safe food handling practices, ultimately reducing the incidence of foodborne illnesses.

Keywords: Food Safety, Food Handlers, Knowledge, Attitudes, Self-Reported Practices.

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Lagos State Health Insurance Policy (Ilera Eko): Awareness and Willingness to Enroll Among Patients of Primary Health Centres

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ABSTRACT

Background: The Ilera Eko health insurance scheme was introduced by the Lagos State Government to improve access to affordable healthcare and promote Universal Health Coverage (UHC). However, enrollment remained low despite its potential benefits with just about a million lives. This study assessed awareness levels, willingness to enroll in the scheme and the barriers for enrollment among patients of primary health centres (PHCs) in Lagos State, Nigeria.

Methods: A cross-sectional survey was conducted among 1,899 patients attending selected PHCs in Lagos State, using a multi-stage sampling technique. Data were collected using a structured questionnaire that elicited information on socio-demographic characteristics, awareness of Ilera Eko, willingness to enroll, and perceived barriers. Descriptive statistics, chi-square tests, and logistic regression analysis were performed using SPSS version 25 to identify factors associated with awareness and enrollment willingness.

Results: Only 34.6% of respondents were aware of the Ilera Eko scheme, and awareness was significantly associated with age ($p < 0.001$), marital status ($p < 0.001$), and education ($p < 0.001$). Willingness to enroll was reported by 37.8% of respondents, with cost of enrollment and perceived service quality being major influencing factors. Barriers to enrollment included affordability, complexity of the enrollment process, and trust in healthcare service delivery.

Conclusion and Recommendations: Awareness and willingness to enroll in the Ilera Eko scheme remain suboptimal, highlighting the need for targeted communication strategies and community-based sensitization. Policy interventions aimed at addressing affordability concerns, simplifying the enrollment process, and improving service quality could increase uptake and promote equitable access to healthcare.

Keywords: Health Insurance, Ilera Eko Scheme, Awareness and Enrollment, Primary Health Centres, Policy Implementation

Risk Factors for Cholera Outbreak in 6 Local Government Areas in Adamawa State, Nigeria, 2022: An Unmatched Case-Control Study

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ABSTRACT

Background: Cholera outbreaks have become a yearly occurrence in Adamawa state, with attendant morbidity and mortality. The 2022 cholera outbreak started on June 30, when an index case was identified with laboratory confirmation. As part of the rapid response team deployed, we investigated to identify the risk factors associated with the outbreak.

Methods: We conducted an unmatched 1:1 case-control study between 19 and 30 October 2022. We recruited and interviewed 95 cases and 95 controls. We defined a case as someone >5 years old with acute watery diarrhoea with or without vomiting. At the same time, the control was a person living in the reported LGAs without acute watery diarrhoea and vomiting. We used a structured interviewer-administered questionnaire to collect data on socio-demographic characteristics and the risk factors for cholera outbreaks. Univariate analysis was conducted to summarize the data, and bivariate analysis was conducted to compute the odds ratio and 95% confidence interval. Multivariate analysis using logistic regression was carried out to remove confounding variables.

Results: A total of 189 cases were line-listed during the response, with a case fatality rate of 1.05. The mean ($\pm$ SD) ages of the cases and controls were 18 ($\pm$ 11.6) and 26 ($\pm$ 16.2) years, respectively. Compared to controls, cases were more likely to source their household water from open wells (aOR: 2.5, 95% CI: 1.15 - 5.27) and rivers (aOR: 3.7, 95% CI: 1.4 - 9.8). Cases were more likely to store water in plastic kegs (aOR: 12.2, CI: 6.1-24.3) and buckets (aOR: 14.9, CI: 5.15-39.9). Within the past 5 days before illness, cases were more likely to have consumed fura (aOR: 3.0, CI: 1.1-8.1) and salad (aOR: 12.2, CI: 3.5-41.8).

Conclusions and Recommendations: This investigation highlights the shortage of potable water and personal hygiene as sources of cholera. Health education, decontamination of wells, and others were intensified.

Keywords: Cholera, Diarrhoea, Risk Factors, Adamawa State, Outbreak Response.

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Evaluating Policy-Driven Harm Reduction Strategies for Substance Use Disorder in Vulnerable Populations: A Systematic Review

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ABSTRACT

Background: Substance use disorder (SUD) remains a significant public health challenge worldwide, disproportionately affecting vulnerable populations such as the homeless, ethnic minorities, and incarcerated individuals. Traditional treatment modalities often fail to address the complex needs of these groups, leading to exacerbated health outcomes including higher rates of infectious diseases and premature mortality. Harm reduction strategies (HRS), such as needle exchange programs (NEPs), supervised injection facilities (SIFs), and opioid substitution therapy (OST) offer an alternative approach by reducing adverse health outcomes without requiring abstinence. However, the effectiveness of these interventions is closely linked to supportive policy frameworks, which facilitate funding, community engagement, and integration into public health systems. This systematic review evaluates the impact of policy-driven HRS on health outcomes in vulnerable populations and examines the policy drivers and barriers influencing their implementation.

Methods: A systematic review was conducted following the PRISMA guidelines, focusing on studies published between 2000 and 2024. Multiple electronic databases, including PubMed, Embase, CINAHL, Web of Science, Scopus, JSTOR, and WHO/UNAIDS repositories, were searched using keywords such as “harm reduction,” “substance use disorder,” “vulnerable populations,” and “policy-driven interventions.” Eligible studies encompassed peer-reviewed articles, grey literature, and governmental reports that examined HRS within an explicit policy framework. Data extraction focused on study characteristics, population demographics, intervention details, health outcomes, and identified barriers and facilitators. Quantitative outcomes were synthesized through meta-analysis, while qualitative data were analyzed thematically.

Results: Forty-five studies from 18 countries met the inclusion criteria. Findings indicated that policy-driven HRS, especially NEPs and OST, significantly reduced substance-related morbidity and mortality, with some studies reporting reductions in HIV transmission and opioid overdose deaths by up to 60%. Supportive policies, characterized by robust funding, legal protection, and active community involvement, were consistently associated with improved health outcomes. In contrast, stigma, political resistance, and inadequate resources were identified as major impediments to effective implementation.

Conclusion: Policy-driven harm reduction strategies can markedly improve health outcomes among vulnerable populations when supported by robust policy frameworks. Strengthening funding mechanisms, reducing stigma, and fostering community engagement are essential to scaling these interventions and mitigating the adverse impacts of SUD.

Keywords: Harm Reduction, Policy, Substance Use Disorder, Vulnerable Populations, Systematic Review.