

**BINDURA UNIVERSITY OF SCIENCE EDUCATION**

**FACULTY OF SOCIAL SCIENCE AND HUMANITIES**

**DEPARTMENT OF SOCIAL WORK**



**Research topic: Determinants of health seeking behaviour among men with STIs in Zimbabwe.a case study of Gutu Mission Gospital, Gutu.**

**BY**  
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**RESEARCH PROJECT SUBMITTED TO BINDURA UNIVERSITY OF SCIENCE EDUCATION IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR BACHELOR OF SCIENCE, HONOURS DEGREE IN SOCIAL WORK.**

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AMONG MEN WITH STIs.A CASE STUDY OF GUTU MISSION HOSPITAL, GUTU.**

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## DECLARATION FORM

I, the undersigned Monalisa Chipanga, B201190B, hereby declare that this research project on determinants of health seeking behaviour among men with STIs, a case of Gutu Mission Hospital is my original work. All the sources that I have used or quoted have indicated and presented by means of complete references.

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## **DEDICATION**

To my mom D. Chikadzi and my dad L. Chipanga

## **ACKNOWLEDGEMENTS**

I would like to express my sincere gratitude to those who have helped me in completing this dissertation. Firstly, I to thank my supervisor, Mr Magocha, for his guidance and support throughout the duration of my research. Your valuable feedback and encouragement have been instrumental in the success of this work.

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I am indebted to my mother and dad for her unwavering support throughout my university journey, without your support the completion of my 4 year studies would not have been possible. My heartfelt gratitude also goes to my brother and my sister for the assistance they have provided me throughout the course of my studies. Your support has been essential in my academic progress.

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## ABSTRACT

*Men play an important role within households and societies. Studies point out that women seek more health assistance and report more incidents of illness than men. Hence, this is one of the reasons why men's life expectancy is short and women live longer than men. Based on the health belief model (HBM), the study aimed to explore the factors that influence health seeking behavior among men with STIs at Gutu Mission Hospital. Four objectives centred on assessing the knowledge, attitudes and beliefs of men with STIs on health care services, examining the challenges that men with STIs face in seeking health care, exploring the role of the health care system in the provision of services to men with STIs and interventions of improving health care facilities for men with STIs. The study adopted a qualitative approach anchored on a case study as the design of the study. The study used In-depth Interviews, Focus Group Discussions (FGDs) and Key Informant Interviews as methods of data collection. The study utilized purposive sampling and snowball sampling which is a form of non-probability sampling by selecting participants based on specific characteristics that are relevant to the study. The research discovered that factors that are affecting the health seeking behaviour among men with STIs seeking medical attention for STIs. Based on the study, the factors that were brought to light are as follows; absence of male health workers, perceived seriousness of STIs, confidentiality, stigma and lack of financial resources. Moreover, the results of the study proved how the health care system is trying to meet the needs of men with STIs. Hence on, the study recommended that government should develop policies and legislations that addresses unique challenges faced by men in accessing STI health care services such as stigma. It also recommended, Gutu Mission Hospital that it should consider having professional male counsellors. To add on, the researcher recommends Social workers to*



*collaborate with Gutu Mission Hospital and community members to identify potential barriers to health seeking behaviour among men with STIs and develop strategies to overcome such challenges and enhance their health seeking behaviour.*

## **LIST OF ABBREVIATIONS AND ACRONYMS**

HBM-Health Belief Model

MOHCC- Ministry of Health and Child Care

STIS- Sexually Transmitted Infections

WHO- World Health Organization

HIV- Human Immune virus

AIDS – Acquired Immune Deficiency Syndrome

EAC - The East African Community

SADC- Southern African Development Community

GHSS-Global Health Sector Strategy

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## **CHAPTER ONE**

### **INTRODUCTION AND BACKGROUND OF THE STUDY**

#### **1.0 INTRODUCTION**

This chapter is composed of the background of the study, purpose of the study, statement of the problem, research objectives, research questions, and assumptions of the study, significance of the study, delimitations of the study, limitations of the study, definition of key terms, ethical considerations and dissertation outline.

#### **1.1 BACKGROUND OF THE STUDY**

The World Health Organization (WHO) defined health in 1948 as more than just the absence of illness or disability; it also includes a condition of whole physical, mental, and social well-being. To name a few, being in excellent health means not having a sickness or disability, feeling like you belong, and having the capacity to handle stress, emotions, and enjoy life. A person engaging in health-seeking activity does so in an effort to keep themselves in a physically fit and healthy state, which allows them to take control of their surroundings and social interactions. Numerous case studies on the disparities in the health sector have been published (Marmot, 2015). Men are not as impacted as women are (James et al., 2020). According to Butler and Carr (2019), there is proof that women lead fulfilling lives than men because they seek for medical attention at any given time. This raises an inquiry into the research concerning the reasons behind men's medical attention seeking for sexually transmitted infections (STIs) at a later or worsened stage (WHO, 2016). Among the most prevalent infectious disorders, sexually transmitted infections (STIs) cause about a million cases worldwide each day (Rowley et al., 2019). An estimated 1.2 billion people worldwide are thought to be impacted by STIs, including HIV, which can have major long-term

health effects (Vos et al., 2016). People in low- and middle-income countries bear the majority of the burden associated with STIs (Unemo et al., 2017). This implies that men's health-seeking behavior shortens their life expectancy. According to the National Institutes of Health (2018), social variables significantly affect an individual's health. Consequently, determinants of health seeking behavior among men is greatly influenced by socio-economic factors.

STIs pose a serious threat to the international community. Due to this, the WHO adopted a strategy in 2016 aimed at ending STIs. Globally health seeking behavior among men is a complex phenomenon that is influenced by a wide range of factors ,including social ,cultural ,economic ,and political determinants .In recent years ,there has been growing interest in understanding the factors that shape health seeking behavior among men, particularly in low-and middle-income countries where men's health outcomes are often poorer compared to women(Martin and Barker ,2018).Hawkes(2018) emphasized the importance of recognizing gender differences in health seeking behavior and addressing them in health care policies and practices. She argues that societal norms and values influence how men and women perceive their health needs and seek health services. Globally, the life expectancy of a 68-year-old man is five years behind that of a woman. There is no country in the world where men's life expectancy exceeds that of a woman. Overall the gender gap has widened since 1970 and will continue to do so, as by 2030 men's life expectancy is assumed to be seven years shorter than women's.

Regionally, 52% of the total population of Rwanda are women. They outnumber men from around 386,000. This is mainly caused by higher life expectancy of women that has been noticed in Rwanda which is the same as other countries. Men die more than women regardless of the cause of the disease (communicable disease, non-communicable disease). Muriithi (2013) established

that health seeking behavior in Kenyan rural areas is affected by lack of information on health services, wealth, user fees and gender.

Nationally health seeking behavior among men in Zimbabwe has been a topic of interest to many scholars in recent years. The country has been facing numerous health challenges, including high rates of HIV/AIDS, tuberculosis, and other infectious diseases which affects men. Men in Zimbabwe are less likely to seek healthcare compared to women, with only 47, 5% of men reporting that they had sought care for illness in the past year, compared to 63, 5% of women (Makamure, 2018). Skovdal, Campbell, Madanhire, Mupambireyi, Nyamukapa and Gregson (2011) stipulate that men are not fully engaged in the use of HIV services and this is due to the issue of masculinity in Zimbabwe. Hence, there is need for social work intervention to inform, conduct awareness campaigns, formulation of policies and provide health education to improve health seeking behavior among men at Gutu Mission Hospital 20% of the clientele is under 5 years and 65 %of the outpatient visits are female. Gutu Mission Hospital, value the importance of health as they try to curb against high mortality rate. Moreover, Gutu Mission Hospital's motto is we treat God heals believes meaning there in the involvement of spiritual wellbeing. This study will focus on Gutu Mission Hospital a referral hospital located in Masvingo Province, under Gutu District. There has been researches focusing in the urban areas neglecting the rural areas what people are going through in terms of seeking medical attention as some hospitals are located very far away from people, lack of financial resources just to mention a few.

## **1.2 STATEMENT OF THE PROBLEM**

Acquiring or seeking medical care and attention is inclusive as everyone has the right to health so as to reduce the mortality rate. The Constitution of Zimbabwe (2013) contains several provisions related to health such as Article 70(1) states that everyone has the right to attain high standard of

health, Article 70(3) states that health care services should be provided in a manner that is equitable, accessible, and of high standard just to mention a few. The National Health Policy (2018) has a goal to ensure universal health coverage for all Zimbabweans. The Ministry of Health and Child Care (MOHCC) is responsible for development, formulation and implementation of policies so as to improve the health and wellbeing of citizens especially the vulnerable groups such as children, women and the elderly. Despite the efforts put by the government and non-governmental organization for instance the male circumcision program in reducing Sexually Transmitted Diseases, men's health seeking behavior has become worrisome in the rural areas (White ,2014). Sachs (2015) argues that high rates of death from infectious diseases, particularly in low income countries, can have a significant impact on economic growth. He also argues that investment in public health is a key factor in reducing poverty and promoting development. Dollahite (2013) the unfortunate reality is that men's health has only been focused on their involvement in maternal health neglecting their own health for instance the issue of STIs. This study grasps more on how societal views and norms have contributed to this situation, to identify challenges faced by men from seeking medical services and to determine the measures that can be utilized to assist men to seek health services.

### **1.3 AIM**

-To explore the factors that influence health seeking behavior among men with STIs at Gutu Mission Hospital.

### **1.4 OBJECTIVES**

1. To assess the knowledge, attitudes and beliefs of men with STIs on health care services at Gutu Mission Hospital.

2. To examine the challenges that men with STIs face in seeking health care at Gutu Mission Hospital.
3. To explore the role of the health care system in the provision of services to men with STIs at Gutu Mission Hospital.
4. To suggest interventions of improving health care facilities for men with STIs.

### **1.5 RESEARCH QUESTIONS**

1. How does the level of education influence health seeking behavior among men with STIs at Gutu Mission Hospital
2. What are the challenges that men with STIs face in seeking health care services at Gutu Mission Hospital?
3. What is the role of the health care system in the provision of services to men with STIs at Gutu Mission Hospital?
4. What are possible interventions of improving health care facilities for men with STIs?

### **1.6 ASSUMPTIONS OF THE STUDY**

Men and women can be considered to have different health needs and different experiences of health seeking behavior to various factors (Hawkes, 2019). Culturally women are caring and nursing in nature and when they experience pain, signs and symptoms they do not hesitate to go and seek medical attention and due to the issue of reproductive health women and men have different health needs (Kearney and Simpson, 2018). Men with STIs are interested in maintaining good health care but however there are obstacles that hinder their health seeking behavior such as client patient relationship meaning the hospital environment is not friendly to men as there are

more female staff at the hospital, culture as culturally man are perceived to be stoic and resilient to pain so due all the man shun away from seeking medical attention as they do not want to be labelled weak persons (Banks and Katz, 2017). It not every man with STIs that have access to health care and resources due to the economic situations including unemployment. Therefore, the issue of social class matters depending on are you an upper or middle class. This hinders men to have access to health care as some cannot afford the medical bills and also if men spend their most time in the labor market and their time to visit the hospital is limited

### **1.7 SIGNIFICANCE OF THE STUDY**

The study will therefore bring an insight of the health seeking behavior among men with STIs at Gutu Mission Hospital. The study is important as it brings a literature gap as past researches has been focusing more on women rather than men (Hawkes, 2018).The gender differences in health needs and experiences such as reproductive health needs therefore women have unique reproductive health needs than men for instance women experience menstruation, pregnancy and child birth which causes complications such as preeclampsia (Madhusudan, 2006).The study will be important to men with STIs as it will give them insight on their health right through accessing the challenges they encounter in accessing health care services. Understanding these determinants can lead to improved health care delivery, better health outcomes, and reduced health care disparities among men with STIs at Gutu Mission Hospital. Moreover, this study will be important to the Ministry of Health and Child Care (MoHCC) and other government department in bringing critical insights in policy planning and formulation as a problem has being identified through the research. This can lead to outreaches efforts to address the specific needs and concerns of men with STIs by increasing awareness about preventive care, screening and early intervention strategies to improve the overall health outcomes for men with STIs at Gutu Mission Hospital.

Therefore, this study is significant as it helps policy makers, social workers and men with STIs health care providers to improve health care services at Gutu Mission Hospital.

## **1.8 KEY DEFINITIONS**

### **1.8.1 Health**

Health is not merely the absence of disease or infirmity but a state of complete physical, mental, and social well-being (Huber, 2011). Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO, 1948).

### **1.8.2 Social determinants**

Marmot and Wilkinson (2006) stipulate that social determinants refers to the social, economic and environmental conditions that influence health outcomes. The World Health Organization (WHO,2020) recognizes social determinants as key drivers of health inequalities globally. The WHO also emphasizes that factors such as income, education, employment, housing and access to health care services has a great influence to individual's health status.

### **1.8.3 Health literacy**

The ability to access, understand, and use health information to make informed decisions and take action to improve health. Rudd (2018) aver that health literacy is the individual's ability to obtain, understand and use health information to make decisions about their health and health care

### **1.8.4 Health seeking behavior**

Is the ability to seek out information, accessing health care services, and adhering to treatment. Kruk (2016) argue that information-seeking is important as it enables individuals to make informed decisions about their health.



### **1.8.5 Cultural competency**

The ability to work and understand working with people of different cultures. Sue (2021) highlighted that cultural competence is not just about acquiring knowledge on different cultures but also developing skills in dealing with people of different cultures.

## **1.9 DISSERTATION OUTLINE**

In an effort to give the dissertation a coherent flow, the study's structure is as follows:

**CHAPTER ONE:** This chapter covers the introduction and background of the research question. It includes the aim, objectives, research questions and assumptions of the research topic. It also elaborates the significance, location, delimitations, limitations, and the defined key terms.

**CHAPTER TWO:** This chapter focuses on writing that is based on other academics' perspectives on the investigation of the subject at hand. This study will be utilizing the health belief model (HBM) and give an exploration on how it links with determinants of health seeking behaviour among men with STIs at Gutu Mission Hospital.

**CHAPTER THREE:** This chapter mainly focuses on data collection methods and techniques. It gives much concentration on the research approach, research design, study setting, target population, sampling techniques, sample size, data collection techniques and tools, data presentation, ethical issues, and study constraints.

**CHAPTER FOUR:** This chapter focuses on presentation and interpretation of study findings... This chapter provides a summary of the data analysis, conclusions and result interpretation.

**CHAPTER FIVE:** This chapter focuses on the summary with reference to data which was presented in the previous chapter and objectives of the study. It will also focus on the conclusion

and recommendations of the research findings on how to improve the provision of health care services among men with STIs.

## **1.10 CHAPTER SUMMARY**

The first chapter focused on the introduction and background to the study focusing on determinants of health seeking behavior among men with STIs at Gutu Mission Hospital. Mainly, the chapter highlighted the problem statement, uttered the gap in literature, justified the applicability then the aim and objectives as well as define the key terms of the study. The following chapter reviews the literature relevant to the study.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.0 INTRODUCTION**

This chapter focuses on bringing out other researcher's perspectives of academics on the topic of the study. Theories were used to evaluate their relevance to the study. The health belief model (HBM) was utilized, linking it with the research objectives. By utilizing the health belief model (HBM), the researcher showed the knowledge gap and draw conclusions from that.

#### **2.1 THEORETICAL FRAMEWORK**

This area articulates the theoretical framework that guides this study. This study adopts the Health Belief Model developed by in 1950 by social psychologists. The Health Belief Model is based on the idea that an individual's health is determined by their perception of a health threat and the value they place on taking action to reduce the threat. The Health Belief Model (HBM) posits that six constructs predict health behavior: risk susceptibility, risk severity, benefits to action, barriers to action, self-efficacy, and cues to action (Becker, 1974; Champion & Skinner, 2008; Rosenstock, 1974). Originally formulated to model the adoption of preventive health behaviors in the United States, the HBM has been successfully adapted to fit diverse cultural and topical contexts (e.g., Griffin, 2012; Scarinci et al., 2012). The Health Belief Model can provide valuable insights into determinants that influence men with STIs on the decision to seek health care services in the context of Zimbabwe.

**2.1.1 Integrating key concepts of HBM on health seeking behavior among men with STIs.** It provides insights into why men engage in certain behaviors, such as seeking healthcare services by considering their beliefs, attitudes, and perceptions. The model consists of several key

constructs such as perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self –efficacy.

The perceived susceptibility refers to an individual's belief about the risk of developing a particular health condition. In the Zimbabwe context perceptions of susceptibility vary and is based on cultural beliefs, lifestyle factors, access to health care services. This can give an understanding or insight on why some men with STIs may be proactive in seeking health care while others may delay or avoid seeking medical attention. In addition, perceived severity relates to an assessment of the seriousness of a particular health condition. Men's perception of severity of illness may influence their health seeking behavior. Furthermore, perceived benefits and barriers plays a crucial role in shaping the health seeking behavior of men with STIs. Men in Zimbabwe may weigh the potential benefits of seeking health care against the barriers they face such as cost, stigma, cultural norms related to masculinity just to mention a few. Understanding these factors through the lens of the Health Belief Model interventions can be done to promote men's health seeking behavior.

Cues to action refer to motivations that prompt individuals to take action regarding their health. These cues can be internal for example symptoms experienced or external for example advice from family or friends. In the Zimbabwe context it is essential to understand the specific cues that influence health seeking behavior among men with STIs to enhance awareness and encourage timely-help –seeking behavior. Addressing men's self-efficacy related to navigate health care systems and managing their health care can positively impact their health seeking behavior. The Health Belief Model is of great importance as a theoretical framework the study has it brings multidimensional influence or barriers of health seeking behavior among men with STIs in Zimbabwe.

The health belief model is applicable to the research topic determinants of health seeking behavior among men with STIs in Gutu Mission Hospital as it enables the researcher to assess different types of determinants that influence men's decisions on healthcare services concerning STIs. Understanding these factors can lead to interventions and strategies to promote appropriate health seeking behavior among men with STIs. Fig 2.1 illustrate different determinants of health seeking behavior among men with STIs in Zimbabwe, Gutu in particular.

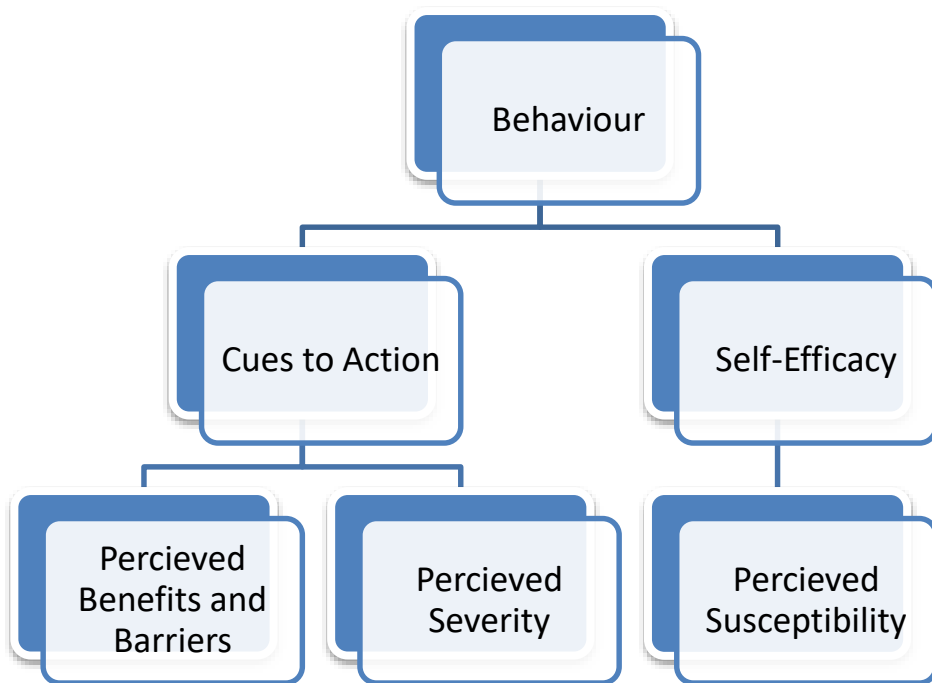


FIGURE 1 THE HEALTH BELIEF MODEL. SOURCE: UPLOADED BY RUTTLE AND QUINE (2002)

## **2.2 LEGAL FRAMEWORK FOR THE PROVISION OF HEALTH**

This section elaborates the suggestions of the World Health Organization (2016), The East African Community (EAC) HIV and AIDS Prevention and Management Act (2012) and The Southern African Development Community SADC Protocol on Health (1999). These legal frameworks provide suggestions on the provision of STI services among men.

### **2.2.1 Global health sector strategies on HIV, viral hepatitis and STIs for 2016-2021**

Three worldwide health sector strategies on HIV, viral hepatitis, and sexually transmitted diseases for 2016–2021 serve as the foundation for the work of the WHO Department of Global HIV, Hepatitis, and STD programs (WHO/HHS). The five common strategic directions of the universal health coverage framework and people-centered approach serve as the foundation for the common structure of the strategies. 1. information for targeted 2. impactful interventions 3. delivering equity 4. funding for sustainability 5. ingenuity to quicken. The spectrum of measures that are advised for nations comprises: (a) enhancing surveillance, together with program monitoring and progress evaluation; (b) STI prevention; (c) early STI diagnosis; (d) patient and partner management; and (e) strategies to target the most vulnerable groups. The global STI strategy of the WHO provides broad guidelines for national customization of STI prevention initiatives.

### **2.2.2 Global health sector strategies on, respectively, HIV, viral hepatitis and sexually transmitted infections for the period 2022-2030 (GHSS)**

In a future where everyone has access to high-quality, evidence-based, and person-centered health services, the new strategies offer a shared vision for putting an end to epidemics and advancing universal health coverage, primary healthcare, and health security. By 2030, the GHSS aims to eradicate the AIDS epidemic as well as the viral hepatitis and STD epidemics. The five strategic directions offer a comprehensive framework for accomplishing these objectives. Among these

strategic directions is the following: 1. Provide excellent, evidence-based, and people-centered services 2. maximize partnerships, sectors, and systems for impact 3. create and apply data to inform decision-making regarding action 4. involve civil society and empowered communities 5. Encourage impactful innovations.

Globally, a number of programs and organizations offer policies and frameworks for mental health treatments. Setting international guidelines for the promotion, prevention, and treatment of mental health is a major responsibility of the World Health Organization (WHO). There is a serious shortage of financial resources in low- and middle-income nations to implement these policies for STIs. Curable and incurable sexually transmitted infections (STI) are acquired by hundreds of millions of people worldwide each year. Undiagnosed and untreated STIs cause a range of negative health outcomes including infertility and among others. In the same way, a far larger percentage of high-income nations than low-income nations report having policies, plans, and laws pertaining to sexually transmitted infections; for example, residents in low-income nations may rely on international aid and partnership due to limited resources to address STIs as well as efforts to integrate STI prevention and treatment into broader public health initiatives, compared to high-income nations which have well established health care systems and infrastructure, which may lead to better access to STI testing, treatment and prevention services.. As a result, the study looked at determinants of health seeking behaviour among men with STIs at Gutu Mission Hospital particularly in Zimbabwe, one of the low-income nations.

### **2.2.3 The East African Community (EAC) HIV and AIDS Prevention and Management Act (2012)**

Encouraging a rights-based approach to HIV/AIDS in East Africa, it is a significant regional legislative framework. The Act seeks to manage the impact of HIV/AIDS in the EAC partner states

and to provide a regional framework for preventing its spread. It places a strong emphasis on defending the liberties and human rights of those who are HIV/AIDS positive or impacted by the disease. Among the provisions are: 1. Prohibits stigmatization and discrimination against individuals living with HIV/AIDS 2. Guarantees that inexpensive, high-quality HIV testing, treatment, care, and support services are available. 3. Encourages underrepresented and vulnerable communities to become more empowered 4. Requires extensive sexuality education and awareness-building initiatives 5. Suggests incorporating HIV/AIDS services within the broader healthcare system.

#### **2.2.4 The Southern African Development Community SADC Protocol on Health (1999)**

Is an important regional framework that allows collaboration on a range of health-related concerns, such as the control and prevention of infectious diseases like STDs. It creates a framework for member states of SADC to work together and coordinate in the field of health. Place special emphasis on creating plans to deal with pressing health concerns, such as infectious diseases, and to encourage the unification of national health laws and policies. A few of the provisions are 1. The creation of policies and initiatives for the management, control, and prevention of communicable illnesses is mandated by Article 10. 2. To stop the spread of STIs and other infectious illnesses, member states must create and put into effect laws, regulations, and other measures. This shows that because the South African Development Community (SADC) Protocol on Health (1999) and the East African Community (EAC) HIV and AIDS Prevention and Management Act (2012) conflict with Zimbabwean sociocultural values, they are difficult to implement in that country. One of the EAC's requirements on comprehensive sexuality education highlights this. Men face a hurdle because they believe that if they disclose their STI status, the community will stigmatize and condemn them in addition to others.



### **2.2.5 The constitution of Zimbabwe (2013) and the Ministry of Health and Child Care (MOHCC)**

Nationally, The Constitution of Zimbabwe (2013) contains several provisions related to health such as Article 70(1) states that everyone has the right to the highest attainable standard of health, Article 70(3) states that health care services must be provided in a manner that is accessible, equitable and of high standard among others. This already gives a loop hole in the Zimbabwe Constitution as all these Articles are not applicable due to limited resources as they cannot cover the whole population in Zimbabwe. The Ministry of Health and Child Care (MOHCC) is responsible for development, formulation and implementation of policies so as to improve the health and wellbeing of citizens especially the vulnerable groups such as children, women and the elderly. The research focused on health care services among men with STIs as they are being sidelined. Therefore, this results in the residual model as the resources cannot cater for everyone as means testing is conducted. This is evidenced as everyone cannot get high standard of health care as already there is a division on the private and public health facilitates were the issue of social class is applied. The quality of health you get depends on the social class that one acquires. Therefore, men have the high population rate of unemployment this hinders men in accessing health care services.

## **2.3 THE KNOWLEDGE, ATTITUDES AND BELIEFS OF MEN WITH STIS ON HEALTH CARE SERVICES**

### **2.3.1 Knowledge on STI**

Lack of knowledge has been a determinant of health seeking behavior among men with STIs. This can lead to a delayed treatment of the STI. Therefore this study digs deep into looking at the impact of lack of knowledge on health seeking behavior among men with STIs. This is in contrast with the

study conducted by Jefferson, Robinson, Tung-Hahn, Schumann, Marrero-Conti, Walton, Golden, Poon, Alam & Tung (2021) who focused on assessing and Improving the Knowledge of Sexually Transmitted Infections among High School Adolescents. He goes further to describe STI prevalence and identify factors associated with STIs in four African countries which are Kenya, Tanzania, Nigeria and Uganda. This also shows a research gap as the research is particularly focusing in the Zimbabwean context. Therefore, the information cannot be generalized because of different cultures and among others. This study therefore looks on lack of knowledge as a key driver to health seeking behavior rather than the study by Oluwole, Oyekanmi, Ogunyemi & Osanyin which looks on Knowledge, attitude and preventive practices of sexually transmitted infections among unmarried youths in an urban community in Lagos State, Nigeria. Therefore, this study focus on both married or unmarried and that study on Nigeria classified and researched on unmarried youth not mentioning either men or women. The study took place in Nigeria therefore the level of knowledge can differ place to place and time to time. The study also focused on urban community in Lagos therefore this study is focusing on rural areas in Zimbabwe.

### **2.3.2 Attitude and beliefs on STIs**

These two words are intertwined and influence each other. Attitudes and beliefs are identified as determinants of health seeking behavior among men with STIs. Culturally men believe in the use of remedial remedies as it is most convenient and less privacy invasion and easily available. However, this leads to delayed treatment or worsening of the STI as the formal hospitals offer prescribed medication appropriate for a certain STI. The study by John, Philippe, Chantal & Kai (2022) highlight that STI prevention, stigma affecting the health seeking behavior and the use of theory of planned behavior. Therefore, this study is focusing on factors influencing men to seek

health care services for STIs and also this study utilizes the HBM as its framework. He went on to give emphasis on stigma as a driver to the health seeking behavior of men with STIs.

## **2.4 CHALLENGES FACED BY MEN WITH STIS TO ACCESS HEALTH CARE SERVICES.**

### **2.4.1 Gender**

According to Butler and Carr (2019), gender, color, and ethnicity are just a handful of the variables that could affect someone's health. The factor that most influences longevity and health turns out to be gender (Courtenay, 2000). Thus, disparities in men's and women's life expectancies are shown by gender variances in regard to health conditions.

According to Hawkes (2018), delivering efficient and equitable healthcare requires an understanding of the disparities across genders' health needs and experiences. Gender disparities exist in terms of health requirements and experiences. For example, women have different demands than males when it comes to their reproductive systems. Women also have challenges during pregnancy, childbirth, and menstruation, which can lead to preeclampsia (Madhusudan,2006). In addition, Hawkes (2018) notes that women are more likely than men to experience mental health issues and to suffer heart disease, shortness of breath, and other cardiovascular disorders. There have been case studies only focusing on women, turning a blind eye on factors and (or) barriers on influencing men's health seeking behavior on STIs as they also need medical attention. Moreover, current literature has not focused more on factors leading to this situation. Thus there is a need to cover up this gap and interrogate factors contributing to men's health seeking behavior. Therefore, this research focuses on Sexually Transmitted Diseases and also it is going to focus on health needs of men as they are being left out in the study of Hawkes (2018) who focuses on women rather than men with STIs.

Gender disparities are pervasive in the region and have a significant effect on health outcomes (Winkler and Belle, 2017). High rates of maternal death, restricted access to family planning and contraception, and harmful customs like genital mutilation are just a few of the difficulties that African women confront (Izugbara, 2010). In addition, gender-based violence and low levels of education put women at risk for HIV/AIDS (Mofokeng, 2021). Men in Africa have unique health issues, such as substance and alcohol misuse and minimal usage of healthcare services. This study is biased as it is not thoroughly researched men also are prone to STIs not only the issue of alcohol and substance abuse. The author did not dig deep on why men have a lower utilization of health care services. This therefore gives room for the research. In African and Indigenous cultures, men are expected to be providers and protectors to their families and communities. This therefore leads to stoic and resilience of men with STIs. Thus leading to lack of attention to men's mental and emotional health. Traditional gender roles and societal expectations can make it difficult for men with STIs to express their emotions and seek help when they need it (Owusu and Ainkrah 2018). The research focused not only on culture but some other aspects that hinder men with STIs from seeking health care services in time.

According to a 2018 report by World Health Organization (WHO), men in Zimbabwe face a range of health challenges such as high rates of HIV and AIDS, cardiovascular diseases and among others compared to women. The report also notes that men in Zimbabwe are more likely to engage in risky behaviors such as excessive consumption of alcohol, with a high risk of developing health problems. Mafunda (2018) highlighted the importance of addressing the social and cultural determinants of men's health in Zimbabwe, and has advocated for development of gender-sensitive health policies and programs that take into account the unique needs and experiences. This research

used these results as assumptions for the study and gives a basis to the research to found out the impact of social and cultural factors in health seeking behavior among men with STIs.

#### **2.4.2 Culture and masculinity**

Individuals' ideas, attitudes, and behaviors about masculinity and femininity are greatly influenced by culture (Connell, 2005). Men use society conventions and culture to define what it is to be a man (Kimmel, 2006). In the lives of males, self-reliance is regarded as credible. Men's behavior is frequently ascribed to prevailing notions about gender norms, particularly with regard to men's hesitation or unwillingness to seek medical care (Courtenay, 2000b; Farrimond, 2012; Lee and Owens, 2002a, 2002b). Men's common views about what it means to be a man are often held responsible for health attitudes that negatively impact men's health (Williams, 2008).

According to Smith et al. (2006), cultural norms empower men who have sexually transmitted infections to make courageous and autonomous decisions about their health and use of services. Stereotypes perpetuated by society restrict men with STIs' access to health care and education. In sub-Saharan Africa, cultural conceptions and behaviors significantly influence men's perceptions (Skovdal et al., 2011). Men are stereotyped as being powerful, rugged, and aggressive due to cultural conceptions. According to Skovdal et al. (2011), there is a prevalent belief in sub-Saharan Africa that men are not prone to illness and that health facilities are exclusively reserved for women. Being a true guy also entails being independent, strong, and the provider for the family—qualities that are acceptable when one has multiple female companions. Seeking health care reveals deviance from the social norms. Fear of being regarded as less of a man serves as an obstacle towards health care seeking by men with STIs. Culture is dynamic not static therefore these cultural perceptions may be different in the context of Gutu Mission Hospital.

The concept of masculinity and gender roles in households and cultures is ingrained in the seldom use of health care facilities by men, as noted by Witty et al. (2011). Masculine ideals push men to put off getting help, avoid health services, and wait for problems to worsen before seeking medical attention (Witty et al., 2011).

Men with STIs are less likely to be open about their health issues due to masculinity. According to Creighton et al. (2013) grief is perceived as feminine behavior. Being a man means controlling emotions and maintaining a strong image (Creighton et al., 2013). Therefore, this research focused on both the positive and negative influence of culture and masculinity as a determinant of health seeking behavior among men with STIs at Gutu Mission Hospital as the family can offer support to a man with STIs.

Albizu-Garcia et al. (2001) argue that men with STIs look for health assistance when their symptoms or sickness are deemed potentially fatal, according to Albizu-Garcia et al. (2001). Additionally, Macintyre et al. (1996) contend that males should only visit a medical facility when they are suffering from severe illnesses and disorders that pose a substantial risk to their lives, such as late-stage or severe STIs. This suggests that men's self-evaluation of sickness influences how they behave while seeking assistance. According to Skovdal et al. (2011), men in Zimbabwe who have STIs most frequently visit medical facilities when they become incapacitated and are unable to walk on their own.

In South Africa, being a male means being proud, independent, involved in the economy, the head of the household, and isoka—that is, having more than one woman as a partner (Lynch et al., 2010:16). Being isoka is encouraged by masculinity; it is seen as a sign of manhood. The risk of contracting HIV rises with multiple partner relationships. According to Brown et al. (2005), in

many South African societies, a man's propensity to have multiple sexual partners is considered a sign of manhood.

In South Africa, Lynch et al. (2010) contend that HIV/AIDS is sustained by masculinity. In South Africa, HIV/AIDS is among the main causes of mortality. Deviant sexual activity has a major role in the disease's transmission. Male autonomy, invulnerability, and promiscuity are encouraged by concepts of masculinity (Lynch et al., 2010). It is more likely for a disease to spread to different people when there are multiple partners. The desire for support and assistance is influenced by pride and an insensitive attitude toward disease and social gatherings. Men are also encouraged to overlook preventative measures like wearing protection because they believe they are invulnerable. According to Lynch et al. (2010), using condoms is viewed as weak and unmanly. Only men with STIs are able to seek and get healthcare. Maladaptive coping strategies result from this, according to Lynch et al. (2010). As a result, the study concentrated on how masculinity ideas affect men with STIs and their behavior when seeking health care in Zimbabwe.

According to Skovdal et al. (2011), men are less likely to get a good diagnosis and treatment as well as to test for infections like HIV. According to Skovdal et al. (2011), masculine ideals in Zimbabwe prevent males from using health care services. The belief that they are not whole men is reinforced by following nurses' health advice, frequently visiting clinics, and taking medicine (Skovdal et al., 2011). Men who are very ill are the ones who get tested. Men with STIs have a greater fatality rate than women because they respond less favorably to services that promote testing and treatment (Skovdal et al., 2011).

It was discovered that men in Zimbabwe were reluctant or ashamed to confess to being ill (Skovdal et al., 2011). They choose not to seek medical advice from institutions and would rather keep their health status a secret. Men's access to appropriate medical care and treatment for sexually

transmitted infections is hampered by expectations about masculinity, manhood, and the attitudes of health care professionals (Skovdal et al., 2011).

### **2.4.3 Lack of time**

Lack of time as a determinant of health seeking behavior among men with STIs in United Kingdom (UK) is a complex issue that has been studied in various contexts. Many man has considered seeking health care for STIs as time consuming and inconvenient, leading in delays to access health care services (Mercer ,2016). Smith et al (2018) examined the barriers to STI testing among men and recognized lack of time as a major factor influencing their decision making on health care services. Therefore, UK is more developed than Zimbabwe in terms of the health care system as it gives everyone the right to health care, enough resources, health personnel which are experts. This is a different case in Zimbabwe as everything about the health care system may be questionable and also the attitudes, behavior and perspectives of men with STIs in seeking health care are questionable again.

According to Siu et al. (2013), men's participation in the workforce is viewed by members of Ugandan society as an essential component of their manhood. Time for medical care is reduced since hard work and independence are valued more highly. Given that men spend the majority of their time engaged in economic activities, they have a gendered right to participate in labor activities (Siu et al., 2013). In South Africa, men make up roughly 72.0% of the labor force (Blackden & Wodon, 2006). Men occasionally quit their homes to find employment for their families since their primary goal is to make money; as a result, they devote more of their time to productivity in an effort to improve their financial situation. The inference is that males are more likely to be employed, which means they may pay less attention to other aspects of their well-being, like routinely visiting the doctor. Due to job and the need to generate income in order to



support a home, time is limited. However, this a different case in Zimbabwe as South Africa is ahead on the issues of employment and the poverty datum line as Zimbabwe relies on dollar per day for a meal which is not adequate. Zimbabwe in terms of employment there is high rate of unemployment therefore leading men to be involved in the informal sector such as illegal mining where there is no safety, vending just to mention a few. Due to many people being involved in the informal sector it becomes a hand to mouth due to competition and this hinders men with STIs to seek health care services on STIs as they may not get money for treatment.

Lack of time has become a significant determinant of health seeking behavior among men with STIs in Zimbabwe particularly at Gutu Mission Hospital (Muzumbi, 2018). Muzumbi (2018) conducted a study on barriers to health seeking behavior among men with STIs in Harare and Bulawayo. It therefore neglects the rural areas as it only focused on cities and this research is going to focus on all determinants of health seeking behavior among men with STIs at Gutu Mission hospital in Gutu a rural area. In Zimbabwe lack of time has been caused by a lot of issues such as work responsibilities, social expectations just to mention a few (Chidi, 2017). These demands therefore cause men with STIs to be reluctant and not prioritizing seeking healthcare for STIs especially when symptoms may not be severe or urgent. This research focused on all determinants of health seeking behavior among men at Gutu Mission hospital. The stigma around STIs may determine the time men seek for appropriate care, limited access to health care facilities, and long distances to health centers especially Gutu Mission Hospital is a referral Hospital for more than thirty health care facilities people coming from different places. Rural areas are understaffed with nurses and doctors so this may result in long waiting of patients and led to lack of time and health care infrastructure may be under resourced. As a result, men may delay or avoid seeking treatment for STIs due to time.

## **2.5 THE ROLE OF THE HEALTH CARE SYSTEM IN THE PROVISION OF HEALTH CARE FOR STIS**

### **2.5.1 Testing and counselling**

Testing and counselling have impact on health seeking behavior among men with STIs. This enhances the health seeking behavior of men with STIs. According to WHO (2023) approximately one million sexually active men in developing countries acquire STIs every day. However, many of these men do not seek health care services in time due to stigma, lack of knowledge and among others. Therefore, through counselling one can get insights pertaining STIs. A randomized controlled trial conducted in India found out that providing free STI testing and counseling to men led to a 30% increase in the number of men seeking treatment for STIs compared to those who did not receive the intervention (Basu et al, 2014). This research is focusing on Zimbabwe and as Zimbabwe there are limited resources to conduct testing and counseling for STIs freely.

### **2.5.2 Health education**

STIs have become common as millions of active men have STIs therefore there is need for health education on prevention for instance use of condoms, treatment and among others. According to WHO, STIs are a major public concern, particularly in developing countries and rural areas where access to health care services is limited (World Health Organisation, 2021). Health education enhances the utilization of health care services among men with STIs. Health education intervention using peer educator resulted in a significant increase in STI testing among men in rural areas (Sahu et al, 2016). Therefore, this study is looking at Gutu Mission Hospital in particular where their cultural beliefs and values may differ from other general rural areas. Moreover, health education increases knowledge. Symptoms and improvement in attitude towards seeking care on STIs.

## **2.6 CHAPTER SUMMARY**

A review of literature was conducted in this chapter on the foundation of the objectives of the study. The primary goal of this review was to identify and discuss the gaps which the study sought to bridge, and to derive a greater understanding of the meaning of the key terms and concepts of the study. This chapter presented health belief model and was used as the framework for the study. Adding on, this chapter reviewed health care policies associated with the health seeking behavior of men with STIs at global level, regional level and in Zimbabwe. It also presented the determinants of health seeking behavior among men with STIs. The next chapter will delve into research methodology

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.0 INTRODUCTION**

According to Haralambos and Holborn (2000), methodology is concerned with both detailed research methods through which data is collected and more general philosophies upon which the collection of data is based. Methodology therefore is a systematic and theoretical analysis of methods applied to a field of study (Kumar, 2019). Methods can be best understood as specific tools and procedures used to collect and analyze data and it includes surveys, interviews and among others.

#### **3.1 RESEARCH APPROACH**

The research used qualitative research as it gives in-depth insights into the subjective experiences, attitudes and beliefs of individuals which is crucial in understanding the determinants of health seeking behavior among men at Gutu Mission Hospital. It allowed the researcher to explore the complex and multidimensional nature of men's health seeking behavior, shedding light on various factors that influence their decision in seeking medical attention. Babbie and Mouton (2015) note that, a researcher who uses qualitative research methodology tries to see reality from the eyes of those living in it as they generally believe that there is no single reality. Denzin and Lincoln (2018) stipulate that qualitative research involves the studied use and collection of variety of empirical materials such as case study, personal experience, and life history, observational that describe routine and problematic moments and meanings in individuals' lives. This also helped the researcher to discover the lived experiences and perception of men concerning health care utilization (Mudyarabikwa and Gwede, 2017).

### **3.2 RESEARCH DESIGN**

A research design can be the structure of a research, it is the 'glue' that holds all of the elements in a research project together, in short it is a plan of the proposed research work (Akhtar, 2016). The research adopted an exploratory case study as a research design this provided in-depth insights into complex phenomena and useful in understanding facts of health seeking behavior which are influenced by cultural, social and economic factors (Chireshe and Rutendo, 2018). The exploratory case study allowed the researcher to dig deeply into contextual factors that shape the health seeking behavior of men and enables the identification of specific barriers and facilitators that influence how men perceive and engage in health care services. By engaging directly with individuals and exploring their experiences, attitudes, and perceptions the researcher gained insights into multidimensional reasons on men's health care utilization. Case studies are based on in-depth investigation of a group. Creswell (2012), a case study is a problem to be studied, which will reveal an in-depth understanding of a "case" or bounded system, which involves understanding an event, activity and process, of one or more individuals. The use of case studies allows the collection of rich qualitative data and helps in identifying new insight and perspectives during the research. A case study helps in getting unique cultural, social and economic context to the research (Ezeh, 2015). This research design helps in development of interventions and policies to improve the utilization of health care services among men at Gutu Mission Hospital.

### **3.3 STUDY SETTING**

The study took place at Gutu Mission Hospital, Gutu District under Masvingo Province which is about 3kms from Gutu town center. Gutu Mission Hospital receives referrals from over 30 smaller facilities and it has a school of nursing. The study setting shaped the research outcome as it gives the specific context for understanding the health seeking behavior among men with STIs at Gutu

Mission Hospital. Hospitals are essential settings for studying health seeking behavior as they are primary points of contact for individuals seeking health care services. Hospitals provides STI testing, treatment, counselling and follow-ups. By conducting a research at a hospital the researcher was able to assess how these services impacts men's health seeking behavior.

### **3.4 TARGET POPULATION**

The target population was men residing in Gutu who have sought medical attention at a late stage or worse stage of STIs and health care providers such as counsellors. This ensured that the study was going to address the unique health seeking behavior and needs of this particular demographic. It helped the research with relevant data as focused on men with STIs. This led to the determination of a sampling technique and sample size. Dooley (2015) aver that population in the whole set of entities that decision relates to. population also refers to all possible units of analysis.

### **3.5 SAMPLING**

Sampling is a statistical analysis technique used to select, manipulate and analyze a representative subset of data points to identify patterns and trends in larger data being examined (Patton, 2002). This research used non-probability sampling techniques to select participants. According to Creswell (2014) stipulate that non- probability sampling can be less time consuming, less expensive and it is flexible and allow more creativity in the sampling process.

### **3.6 SAMPLING TECHNIQUE**

#### **3.6.1 Purposive Sampling**

The study used purposive sampling technique studying determinants of health seeking behavior among men. The researcher purposefully selected individuals who have previously sought treatment for STIs at Gutu Mission Hospital. This allowed for a more targeted exploration of factors influencing health seeking behavior of the specific population of interest. Researcher was

able to identify, recruit participants who possesses relevant knowledge, experiences, or characteristics that helped in understanding the determinants of health seeking behavior among men in Gutu Mission Hospital. The researcher used selective or purposive sampling involving deliberate selection of individuals or sources based on specific criteria that align with the research objectives (Creswell, 2013)

### **3.6.3 Sample Size**

Sample size refers to a number of individuals included in a study (Bingham and Harries, 2010). Based on the target, the study considered 15 people for data collection and 2 of them were key informants. Key informants are people who are knowledgeable and having the information that other participants do not have. For the people who participated in the Focus Group Discussion, they were 8 from the targeted population for data collection. They volunteered to share their ideas collectively. The study intentionally included a smaller number of only 15 participants due to the sensitivity of the topic of STIs, challenges in recruiting participants because of stigma and confidentiality concerns, potential reluctance of individuals to engage in research due to distrust in the process.

## **3.7 DATA COLLECTION TECHNIQUES AND TOOLS**

Data collection is the process of gathering and measuring information on variables of interests, in an established systematic fashion that enables one to answer stated research questions, test hypothesis, and evaluate outcomes (Punch, 2006). The researcher used in-depth interview, focus group discussion and key informants interview to have an understanding of the research problem. The use of a combination of in-depth interviews, focus group discussions, and key informant interviews provided a more complete and comprehensive understanding of the research problem. In-depth interviews provided a detailed understanding of the individual experiences and

perspectives of participants. Focus group discussions provided a deeper understanding of the shared experiences and perspectives of a group of participants. Key informant interviews provided an insight into the views and perspectives of individuals who have specialized knowledge of the research topic. Using a combination of these methods helped to ensure that all relevant perspectives are considered and that the research is more robust and credible.

### **3.8 DATA COLLECTION TECHNIQUES**

#### **3.8.1 In-depth interviews**

The study made use of in-depth interviews as it allows engaging participants in open-ended discussions about their health seeking behaviors. These interviews will dig deep into personal experiences, cultural beliefs, social influences and perceptions of health care services among men at Gutu Mission Hospital. Conducting interviews with men from different demographic backgrounds and regions within Zimbabwe will offer a comprehensive understanding of the determinants of health seeking behavior among men. Interviews are face to face interactions or a form of dialogue between two parties (Babbie, 2011). Easwaramoorthy (2006) assert that an interview can be face to face form of data collection which involves the interviewer, who coordinates the process of the conversation and ask questions and an interviewee, who responds to the questions.

#### **3.8.2 Focus group discussions (FGD)**

The study made use of focus group discussions as it brought a small group of men on the issue of STIs to explore their collective experience and perspectives on seeking health care services. This technique allows for interactions among participants, leading to rich insights into shared beliefs, social norms and community level factors influencing health seeking behavior among men at Gutu Mission Hospital. By facilitating open dialogue, the researcher can uncover other determinants



that may not emerge through individual interviews. Focus group discussions are facilitated discussions conducted in a group of six to twelve participants who have an interest on a particular topic to pour out information (Intrac, 2017).

### **3.8.3 Key informant interviews**

Key informant interviews provide insights into the determinants of health seeking behavior among men with STIs. Key informants can include health care providers, community leaders and other stakeholders who have knowledge and expertise on the research topic. Their insight helps the research to understand the complex of social and cultural factors that influence health seeking behavior among men with STIs. This knowledge can be used to develop interventions and policies that address the specific needs of men with STIs.

### **3.8.4 Documentary Search**

The study to be successfully done required secondary data. The study utilised secondary data to get the in-depth information from the documents that were already published. The documentary search that was utilised includes the global health sector strategies on HIV, viral hepatitis, and STIs for 2016-2021 and WHO 2016 on STIs.

## **3.9 DATA COLLECTION TOOLS**

### **3.9.1 In Depth Interview Guide**

The research made use of interview guide which will constitute questions that will guide the interview with participants. An interview guide is a valuable tool in the research determinants of health seeking behavior among men with STIs in Zimbabwe in the sense that it provides a structure so that all participants are asked same questions to avoid bias of information. It helped to facilitate exploration of complex issues or topics for example issues to do with culture and enables

comparison across participants as the researcher will be able to identify common or different factors influencing the health seeking behavior among men with STIs at Gutu Mission hospital. The interview guide can include the issue of ethical considerations to ensure sensitive topics are handled with care and respect for participants.

### **3.9.2 Focus Group Discussion Guide**

The research made use of discussion guide as it ensures that there is consistency which will enable analyzing and identifying common themes related to the health seeking behavior among men with STIs at Gutu Mission Hospital. The health seeking behavior especially concerning STIs can be sensitive to participants therefore a well-structured discussion guide can help the researcher to navigate these sensitive topics in respect and non-threatening manner. It allowed delving into various determinants of health seeking behaviors among men with STIs at Gutu Mission Hospital. Prompted.

### **3.9.3 key informant interview guide**

Key informants guide was also used to collect data from health workers. Key informants have specialized knowledge and expertise on the topic determinants of health seeking behaviour among men with STIs at Gutu Mission Hospital, which can help to provide context and insight into the research findings. Also, they can offer first-hand information and perspectives that may not be available from other sources. Robin and Babbie (2020) define key informant interviews as in-depth interviews with individuals who are well-informed about a particular subject or topic of interest.

## **3.10 DATA ANALYSIS**

The study utilized thematic analysis which involves identifying and analysing recurring themes, patterns, or concepts in the qualitative data. Data was presented through thematic or conceptual frameworks by organizing the findings around key themes or concepts that emerged from the

analysis. Thematic analysis helped to uncover the underlying patterns and relationships in the data, and to develop a more nuanced understanding of the topic. By organizing the findings around key themes or concepts, the research presented the findings in a way that is accessible and meaningful for the reader. Additionally, thematic analysis allowed for the identification of both common and unique themes within the data, which provided a more complete picture of the research topic. The findings presented these themes or concepts in a structured manner and explained how they relate to the research topic or objectives.

### **3.11 ETHICAL CONSIDERATIONS**

Research ethics refer to the application of moral rules and professional codes of conduct to the collection, analysis, reporting and publication of information about research subjects (Babbie, 2016). Human beings need to be respected therefore the research will adhere to ethics such as confidentiality, informed consent, voluntary participation and avoidance of harm.

**1. Confidentiality** - Seidman (2015) professes that participants should be informed that all records pertaining to the study will be confidential, and that numbers instead of names will be used to identify participants. The researcher ensured confidentiality to the participants that the information they give was not going to be disclosed. The researcher made use of pseudo names so that names were not published, locking the laptop by using passwords just to mention a few.

**2. Informed consent** - This refers to an arrangement to participate in a research when the participants need to be informed of crucial information (Seidman, 2015). This is a process whereby consent forms (the research documents which direct the purpose of the study, how it benefits the participants, time frame and possible risks. The researcher therefore asked for participant's

permission before the interviews. Denscombe (2017) claim that the researcher will ensure that there is informed consent by providing the informed consent forms for the participants to sign.

**3.Voluntary participation** - Newman (2016) and Seidman (2015) state that before conducting interviews, the researcher will make the participants aware that participation in the study is voluntary, that they may withdraw from the study at any time if they wish. The research therefore ensured to uphold this ethic not forcing them to participate thus being in alignment with the client self-determination. However, that participants will be informed on the importance of the study so as to reduce high mortality rates.

**4.Avoidance of harm** - The British Psychological Society (2010) stipulate that in avoidance to harm the researcher must ensure that if vulnerable groups are involved in the study they should be with special care thus dignity and worthy of a person. Efforts were made to ensure that participants are protected from any discomfort that may arise from or within the study. Participants were free from mental or physical harm.

### **3.12 LIMITATIONS**

The study cannot be generalized to other areas or contexts beyond Gutu Mission Hospital as health seeking behaviors vary across regions. There can be bias of information as the issue of STIs can be sensitive and men may underreport such information due to stigma associated with STIs. The research tried to give assurance to the participants for example ensuring that there is confidentiality, informed consent just to mention a few.

### **3.13 DELIMITATIONS**

The study focused on a particular context which is Gutu Mission Hospital and therefore it was difficult to generalize the data gathered on determinants of health seeking behavior among men in

other areas or other hospitals. Time frame was another delimitation as the study focused on health seeking behavior among men with STIs during a particular time. The study only focused on men with STIs health seeking behavior excluding women and individuals with other health conditions. The research did not delve into the health seeking behavior of those men with STIs that does not seek formal health care services at health care facilities.

### **3.14 CHAPTER SUMMARY**

This chapter included the research approach as well as the research design adopted for this study. This chapter also included the sampling method and techniques used to selected participants as well as the sample size. Methods of data collection and data analysis used for this study are highlighted in this chapter. This chapter also include ethical consideration applied in this study, feasibility of the study as well some of the limitations faced by the researcher

## **CHAPTER FOUR**

### **DATA PRESENTATION AND ANALYSIS**

#### **4.0 INTRODUCTION**

This chapter focuses on the presentation and discussion of findings from the study. The findings presented aligning them to the theory which underpinned this study. The chapter also utilized the literature review in understanding of the participants' views regarding the determinants of health seeking behavior among men with STIs at Gutu Mission Hospital. Data collection was done through in-depth interviews, focus group discussions and key informants interviews. Data from men with STIs was presented in Shona then the researcher translated to English language. However, health care providers and men in general provided the information in English. This chapter applied a comparative analysis on the research findings and past researches to identify

similarities and differences. The findings were organised in themes and subthemes. There were in line with the objectives which were to explore the knowledge, attitudes and beliefs of men with STIs on health care services, to explore the challenges that influence health seeking behaviour of men with STIs and to explore the role of the health care system to men with STIs. Descriptive approach will be utilized to convey the results.

#### **4.1 THE KNOWLEDGE, ATTITUDES AND BELIEFS OF MEN WITH STIS ON HEALTH CARE SERVICES AT GUTU MISSION HOSPITAL.**

##### **4.1.1 Knowledge about STIs**

Analysing the knowledge, attitudes and beliefs of men with STIs on health care services at Gutu Mission Hospital is the primary goal of the study. The study discovered that some of the men have no knowledge about STIs or information has an influence on the health seeking behaviour of men with STIs.

“Men with STIs have limited knowledge about specific healthcare services offered at Gutu Mission Hospital. Usually they may be unaware of the availability of STI testing, treatment and counselling” Key informant 1

*“Inini pandakarwara pekutanga ne STI ndakangofunga kuti zvichapera ndisingazive kuti ndaive ndaita STI.Nekusaziva kuti chirwere ichi chobvepi ndakangoti chinopera ndikagara pandakazoonza kuti kuti zvaive zvawedzera ndakazoenda kuchipatara”* (when I had an STI I thought it’s something minor not knowing I have had an STI. Lack of knowledge about STIs, symptoms and among others). Participant A

The findings obtained from the participant narratives emphasize how important it is to be informed of the resources that are available. The information that males with STIs possess demonstrates how

not knowing about the services that are available to them keeps them from receiving medical attention, which exacerbates the STI. They admit that another factor preventing them from acting before the STI becomes serious is their ignorance of the resources that are out there. According to the Health Belief Model (HBM), an individual's perception and beliefs on a certain health issue might impact their actions related to their health. As a result, there may be differences in the awareness of STIs among the men in Gutu regarding their frequency and associated hazards. Knowing that services like STI testing, treatment, and counseling are accessible for men with STIs is crucial. This highlights the study's research gap since another study found that young adults around the world have little awareness of STIs, including HIV/AIDS (UNAIDS, 2014). Therefore, the main emphasis of this study is how males with STIs' behavior in seeking health care is influenced by their lack of awareness. Therefore, being aware of all these options helps improve men's behavior when it comes to seeking STI-related health care. Consequently, a lack of knowledge about these services causes a delay in seeking medical attention and raises the fatality rate (Lahey et al., 2007; Ohl et al., 2010). The researcher concluded that males may find it difficult to seek medical attention in time for STI treatment if they are unaware of the treatments that are available.

#### **4.2 ATTITUDES AND BELIEFS OF MEN WITH STIS ON HEALTH CARE SERVICES**

Attitudes and beliefs of men with sexually transmitted infections (STI) in rural areas can significantly impact their behaviour, health seeking, overall wellbeing and they are intertwined. Understanding the relationship between attitudes and beliefs of men is crucial for designing effective interventions, promoting prevention strategies and improving health care outcomes in rural hospitals.

#### 4.2.1 Alternative use of herbs

The use of alternative treatments, including herbal remedies is common among men with STIs around Gutu due to various reasons such as cultural beliefs, perceived effectiveness of traditional remedies. This therefore act as a barrier to health care utilization of men with STIs.

*“Isusu takaona kuti kushandisa mishonga yechivanhu kwagara kunonyanya kushandiswa nekuda kwekuti takakura kuchikosheswa chivanhu, Saka varume vazhinji vanosarudza kushandisa mishonga yechivanhu nekuti haunetsi kuwana ende haude mari yakawanda”* (We recognize that the alternative use of herbs is a dominant practice and this alternative approach to health seeking behavior is deeply rooted in cultural and traditional beliefs. Many men in rural areas prefer using herbs because of factors such as accessibility, affordability and familiarity with traditional medicines) Participant 3

“When I had an STI, I don’t go to the hospital because its far and expensive. Instead, I use herbs that my grandmother taught me” Participant B

“As men we don’t want to be seen as weak and less of a man because I have an STI. Using herbs is a way to take care of ourselves without losing face” Participant 1

The study's findings suggest that males are turning to herbal treatments as a means of treating STIs. The stigma associated with the formal health system, cultural attitudes, and other factors are to blame for this. However, it might not always be advantageous to rely only on herbal therapies, particularly when it comes to early detection and treatment of sexually transmitted infections. Contrary to findings from the Journal of Public Health (2018), men are less likely than women to seek out formal medical care for sexually transmitted infections (STIs) because they perceive herbal remedies to be efficient and reasonably priced. Smith et al (2018) however, the use of herbal



medications may delay the detection and treatment of sexually transmitted infections, which may lead to problems and increased rates of transmission. In accordance with the HBM, this is consistent with an individual's evaluation of the benefits of taking preventative measures against illness or disease, as well as their belief that they personally represent a health risk. For instance, using herbs is less stigmatizing, costs less money, and among others. In conclusion the researcher noted that there is need to educate men on the consequences of self-treatment of herbs therefore bringing in a social work role to enhance health seeking behavior in the formal sector to get proper treatment.

### **4.3 CHALLENGES FACED BY MEN WITH STIs IN ACCESSING HEALTH CARE SERVICES**

The study brings to light the challenges that men with STIs came across to access health care. Nonetheless, the study found that certain variables are influencing the decision making of men with STIs to have access to health care. The main factors influencing men with STIs to seek health care were found to be lack of financial resources, prolonged treatment, absence of male health care workers, perceived seriousness of the STI just to mention a few. The following sub-themes presented and addressed these noteworthy effects.

#### **4.3.1 Lack of financial resources**

Due to unemployment rate in Zimbabwe looking at Gutu as a rural area the majority of men around Gutu might not afford consultation fee and this has been identified as the major determinant of health seeking behaviour among men with STIs. Due to economic hardships in the country men

find it difficult to seek medical care at hospitals. They pointed out that money serves as a means and tool for accessing proper health care. Most men said they could not afford to use public health facilities most of the time. One of the main obstacles preventing men from using health services they believe to be effective was money.

*“Ini ndakarwara ne Syphilis ndikaenda pa Gutu Mission Hospital kunorapwa asi nekuda kwekuti panodiwa mari yekudhindisa card inoita 12 dollars ndakadzoka kumba nekuda kwaizvozvo asi ndakazenge ndava kurwadziwa zvekutadza kana kufamba plus zvakabva zvaita kuti ndimire pabasa. Ndakazopihwa mari na Ambuya kuti ndinorapwa asi syphilis iyi yakanga yawedzera zvekuti yakanga yava pa stage isiriyo”* (I had syphilis and went for treatment at Gutu Mission Hospital for treatment but the challenge was that I did not have money for consultation. I went back home because I had no option. The situation got worse to the extent that I couldn't walk and work. I was assisted by my grandmother with the money for the consultation fee). Participant C

“The issue of the consultation fee has made men with STIs to be reluctant since the fee is too much for and mostly around this area people are not employed and others are not formally employed”

Key informant 2

The study findings suggest that it can be challenging for men in Gutu area who are infected with sexually transmitted infections to receive medical care at Gutu Mission Hospital. Specifically, the study found that the high consultation fee has prevented many from receiving an early diagnosis of STIs due to a lack of financial resources. According to a study by Sarnquist et al. (2011), 17% of the sample believed that cost was a barrier to care either occasionally or always. This finding is consistent with that observation. In order for men to receive STI treatment, the study's conclusions highlighted the importance of financial resources. This aligns with the principle of the Health Belief Model (HBM), which emphasize how men with STIs are unable to seek timely medical

attention due to lack of funds. As a tenet of the Health Belief Model, perceived barriers highlight how men living with sexually transmitted infections may find it difficult to pay for their medication, obtain affordable health care services, or even afford transportation to medical facilities. Having social support is crucial, as the participants emphasized. The HBM supports the study's conclusions because it identifies a tenant cue to action—that is, the way in which men with STIs can make health decisions influenced by social support from peers, healthcare providers, and the community. Furthermore, the findings are consistent with a larger body of research on the factors influencing men with STIs' health seeking behavior, which suggests that financial scarcity is a major factor in this behavior.

#### **4.3.2 Lack of time for STI treatment**

A new element has been discovered in the study which is prolonged treatment. Since the majority of men around Gutu are not formally employed they have lack of time to seek medication. So the fact that the treatment process is long and men does not want to get tested for HIV they become reluctant to go to the hospital.

*“Pandakaenda kunorapwa gonorrhoea ndakatanga ndanzi enda for HIV testing apa ndaitya kuti ko ndikazonzi ndine HIV. Ndakabva ndadzokera kumba ndikagara kwevhiki. Ndakabva ndambozama musonga wechiboyi asi havzina kuchinja ndakanga ndakunzwa kuti situation iri kuwedzera. Asi ndakazoshingirira kuenda kuchipatara ndikati chauya chikuru ndarapwa “(I went for treatment of gonorrhoea then I was asked to go for HIV testing first and I had fear of being tested HIV positive. I went back home and stayed for a week and resorted to use herbs but the situation remained the same and the situation became worse. I then went back to the hospital to seek for treatment) Participant D*

“Public clinics often provide poor services, some staff members are brutal and they take long to help us; we have to wait long hours for assistance. Nurses at the clinic sit in tea rooms, drinking tea and chatting. When they come to attend to us patients, they shout and treat us as like fools after we have waited for so long” Participant 2

The study's findings indicated that males with STIs' decisions to seek medical attention were influenced by their length of treatment. This aligns with the Health Belief Model (HBM), which emphasizes the impact of extended treatment on men's health-seeking behavior with sexually transmitted infections. It underscores the significance of addressing variables such perceived vulnerability, severity, benefits, obstacles, cues to action, and self-efficacy. Health care professionals and public health interventions can improve the health outcomes of men with STIs by taking these characteristics into account when developing measures to encourage timely and consistent health care seeking. Men's decision-making and contemplation of contacting medical facilities are impacted by this. Men were also encouraged by this kind of service to look for other options. This discourages males who have STIs from seeking medical attention, even though getting tested is necessary in order to obtain the right care and medication. The perceived advantages of receiving STI therapy may be impacted by the extended course of treatment if it is thought to present time-related obstacles. Men prioritize their work over their health because of the nation's economic challenges, which leads to impatience and a lack of leisure. Smith et al. (2006) point out that the lack of time due to employment prevents men from using the health services. The use of herbs lacks sufficient dosage and measurement; STIs must be identified, their kind understood, and appropriate treatment administered; HIV testing is not carried out; and health education on preventing STIs and among others. The researcher came to the conclusion that

prolonged treatment has been a treat to the health seeking behaviour among men with STIs at Gutu Mission Hospital and it highlights the impatience of men in particular.

#### **4.3.3 Geographical location of the hospital**

Findings from the FGD (Focus group discussion) participants pointed that the hospital is located far away from many communities. Men from the community have complained that Gutu Mission Hospital is far to the extent that you have to board a bus or a car to reach there and already the money for consultation fee and drugs is needed.

*“kuti uende ku Gutu Mission Hospital kana kuchibva kumaraini akaita sekwaMasakadza usinganzwe zvakanaka kuti ufambe netsoka haufambe kunyangwe usingarware pane mufambo usingaite. Tine chipatara Chekwa Dewure kure futi unotoona kuti pa Gutu Mission Hospital pari nani”* (it’s difficult difficult to go by foot to Gutu Mission Hospital when coming from areas such as Masakadza when you are not feeling well. Even if you are feeling well the distance to go to Gutu Mission Hospital is too much. We have another hospital in Dewure area but when you weigh it’s better to go at Gutu Mission Hospital) Participant 4

“Usually Gutu Mission Hospital is the big hospital others are clinics so usually people have to travel all the way long from different places to seek medical care as these small clinics might not have enough resources. Due to lack of money due to low levels of income and unemployment rate it becomes a barrier for men with STIs to seek medical attention in time because they cannot afford paying public transport” Key informant 1

The aforementioned research highlights the substantial influence that hospitals' physical locations have on the health-seeking behaviour of men infected with sexually transmitted infections (STIs) in rural places like Gutu. The Health Behaviour Model (HBM) recognizes that perceived obstacles,

such accessibility issues, might impede health-seeking behaviour. Consequently, transportation difficulties and distances to healthcare facilities may serve as impediments to men seeking care linked to sexually transmitted infections. This is in line with research by Sarnquist et al. (2011), which indicates that because public transportation is unreliable in rural areas, the majority of individuals in those areas depend on alternative modes of transportation; in one study, 45.3% of the sample reported having trouble getting to appointments. Being geographically isolated may make it more difficult to get STI treatment on time. Schur et al (2002) stipulate that primary care is not conveniently located and requires substantially longer travel times than for persons living in urban areas. The key informant's statement is in line with a study by Sarnquist et al. (2011) that describes how men with STIs who are unemployed, have poor incomes, and other factors exhibit negative health seeking behaviours that are negatively impacted by depending on someone else to drive or use public transit. Thus, this is consistent with the HBM's focus on how perceived benefits and barriers affect health-related behaviours. Men with STIs may seek treatment differently depending on their geographic location, which may further contribute to health inequalities. The HBM focuses on attitudes and beliefs that are consistent with the knowledge that social and environmental factors, like the accessibility and availability of healthcare facilities, can affect people's behaviour when it comes to seeking health care. In conclusion the research noted that there is need to build hospitals which are convenient and accessible so as to improve the health seeking behaviour among men with STIs.

#### **4.3.4 Religion and culture**

Religion and culture are intertwined, which therefore influences the health seeking behaviour of men with STIs. In Areas around Gutu Mission Hospital religious beliefs and practices may be deeply ingrained so individuals may seek guidance and support from religious leaders or rely on

traditional healing practices. Therefore, these strong religious beliefs do not promote health seeking behaviour of men with STIs to seek health care services. Therefore, they visit health care facilities when their situation or condition is advanced

*“Isusu sevanhu vanopinda Johanne Marange kana ukarwara nema STIs unoshingirira nayo STI yako nekuti nekuti chitendero chedu hachitendere kuenda kuchipatara”*. (As a follower of the white garment sect if you suffer from an STI due to the church ideology we are not allowed to go to hospitals to seek for health care). Participant 5

*“Nekuda kwe culture yedu zvakandiremera kuenda kuchipatara semunhu rume kunoudza vanamukoti nezve nhengo yangu. Ndakaona kuti zvinonyadzisa hazviite”* (Because of our culture it was difficult for me to go to the hospital where there are female nurses mainly. I saw it as inappropriate) Participant E

“Due to the issue of strong culture many people resort on using herbs so as to treat themselves. However due to lack of knowledge these people don’t know that STIs needs hospitals in order to be treated well and professionally” Key informant 2

The preceding study demonstrates how both viewpoints emphasize the influence of religion and culture. Religious beliefs often play a crucial role in shaping cultural norms and values. Certain religious views have the potential to stigmatize conversations or behaviors pertaining to sexuality and STIs. This is consistent with research by Sherman and Bassett (2007), which indicates that sexual health knowledge and risky sexual behaviors are directly influenced by culture and social norms, which in turn affect young adults' risk of STIs. Because of this stigma, males may find it difficult to openly seek STI treatment for fear of being judged or of going against their religious beliefs. STI treatment access may be hampered by religious practices and beliefs. Men may be

reluctant to seek care because of the stigma and guilt surrounding STIs in religious communities, which makes them fearful of being judged. Furthermore, religious beliefs that forbid having sex before marriage could make it difficult to talk about and treat STI-related issues.

However, religion can shape an individual's beliefs, attitude and behaviour for men with STIs to seek medical care. This happens through promoting certain practices and discourage others for instance religious teachings that emphasizes on abstinence or fidelity. Culturally discussing sexual health are considered inappropriate or shameful. Therefore, men may feel embarrassed or stigmatized when discussing their sexual concerns leading to reluctance to seek medical help for STIs. According to Sarkar (2008) different morals, religions and social norms influence condom access and use in different cultural settings. Due to alternative or traditional healers influence and are considered as trusted sources therefore men prefer seeking health care from traditional healers because of culture. This is in consistency with the HBM as it suggests that individuals are likely to take action if they perceive themselves to be susceptible to a health condition. Religious and cultural beliefs can influence men's perceptions of susceptibility for instance the religious teachings emphasize sexual abstinence or fidelity. On the other hand, culture stigmatize premarital or extramarital sexual relationships therefore enhancing perceptions of susceptibility. Therefore this influence men's health seeking behaviour. The researcher has come to a conclusion that this alternative leads to delayed or ineffective treatment for STIs as traditional healers have no knowledge and resources to address the STI appropriately.

#### **4.3.5 Absence of male health workers**

In the absence of male health workers, men may feel uncomfortable seeking health care services, particularly for sensitive issues like STIs. This discomfort can act as a barrier. They pointed out that it would be better if they got assistance and disclose to a male health care worker.



“In most times I do not feel like visiting any health care facility because I often find female health care workers. It was difficult to discuss my condition with a stranger, worse a female care provider. My health condition should remain private at most times and I didn’t feel confident telling a woman about it. There is a condition where I do not even want to discuss with my wife. Sometimes I prefer suffering on my own. I felt ashamed for someone to know my weakness and especially if that someone is a woman. I sustained my status as a man; as a man I was supposed to be brave and independent” Participant A

*“Pakauya client achida kurapwa STI kunyanya vanhurume dzimwe nguva haataure kuti ane STI. Anogona kuuya achitaura kuti mbuya inini ndonzwa musoro. Saka dzimwe nguva akaisa trust mauri anozotaura dambudziko rake. Asi dzimwe nguva we probe so that client inoita open up ende kashoma kuti vazoita open up nekuti vanenge vachishanda nesu vanhukadzi”* (when an STI client comes specially a man he doesn’t disclose that he has an STI. Sometimes he can claim that he is having a headache so during the process if that man tends to trust a health care provider he opens up. Sometimes we have to probe so that the client opens up and its very rare for them to open up because they usually work with us female health care providers) Key informant 1

According to the above-mentioned research, men frequently indicate a preference for male health care providers because they think these professionals would have a greater understanding of the particular problems that men experience. Mostly health care providers are females at hospitals. The study also explored other challenges that men with STIs at Gutu Mission Hospital encounter when they consult health care facilities. The findings indicated that most men faced difficulty in discussing and disclosing their health condition to female health care workers. Young Black males have concerns regarding privacy and confidentiality in clinical settings and that they viewed available healthcare systems as formidable and unwelcoming and healthcare providers as

judgmental and disrespectful (Stewart et al., 2019) , Nyalela, Dlungwane,Taylor & Nkwanyana (2018) study provides evidence to support this viewpoint, showing that participants were hesitant to talk openly with care provider because they perceived that providers were uncomfortable with their sexual orientation and sexual behaviours. According to Fitzgerald et al. (2010), men in KwaZulu-Natal who are seeking HIV treatment valued privacy and having a consistent contact with medical professionals. Men who have STIs have expressed worry that they frequently find it difficult to talk about specific problems.

Therefore, this is in line with the HBM as it suggests that the absence of male health workers will lead to perceived susceptibility as they would need someone who understands them and conduct health education on causes, symptoms and preventative measures of STIs. Men infected with sexually transmitted infections (STIs) made note of specific illnesses they were embarrassed to disclose to female healthcare providers. This suggested that men who had STIs did not have enough faith in women who work in healthcare. Men who had STIs so showed a reluctance to seek medical attention. This is an obstacle that keeps males with STIs from being able to get health care and from having their health issues improved. The researcher concludes by expressing their opinion that talking about health concerns with female healthcare professionals infringes on their right to privacy. Disclosure was seen by them as a sign of weakness.

#### **4.3.6 Perceived seriousness of the STI**

A number of factors which influence health care seeking behavior among men with STIs at Gutu Mission Hospital were identified. The participants indicated perceived seriousness of the STI as one of the factors that influence the health seeking behavior of men with STIs at Gutu Mission Hospital They indicated that they seek health care assistance if a condition gets worse or goes beyond their own control.

*“Inini ndinimirira kuona kuti STI iyi ingawedzere here kana kuti inopera sezvo zvimwe zvirwere zvichiuya zvopera zvega saka ndinomira kuenda kunobatsirwa kuchipatara. Ndinomira kwemazuva maviri kuona kuti zvadii”* (I don't have to rush to obtain care; I wait to see if the condition grows worse because some conditions come and go. I wait at least two days to see the results, so I can't see the doctor right away). Participant 6

*“Handimhanye kuenda kunovhunza kuchipatara kuti chii chiri kuitika pandiri kana ndisiri kunzwa zvakana. Ndinimirira kuona kuti zvawedzera here kana zvawedzera ndinoenda kunoona Chiremba. Chipatara haisi nzvimbo yandinowanza kushanyira. Ndinoenda kana chirwere chaenderera”* (When I don't feel good, I don't consult right away. If money permits, I wait to see if the illness worsens before seeing a doctor. In actuality, I don't frequently attend medical facilities. My decision to seek medical attention is only made when the issue gets worse or becomes intolerable). Participant 7

According to the report, the majority of men assess their health before thinking about visiting a doctor. The majority of males said that they decide whether or not to seek medical attention for their illness. Men believed that it was critical to assess any sickness and then decide on the best course of action. The majority of males said that they have control over their physical and mental health. They said they assess their health and determine whether to seek advice from a medical establishment. Evaluation entails taking into account the resources including time and money as well as the health care services that are being offered. The most striking aspect is that males sometimes regard some illnesses as mild or insignificant. Men typically delay seeking medical advice when they feel unwell, often waiting for more than two days to observe the progress of their symptoms before deciding whether to seek medical attention or not.

#### 4.3.7 Confidentiality

Confidentiality is crucial in addressing the stigma associated with STIs at Gutu Mission Hospital fear judgment, social consequences or breaches of privacy if their STI status becomes known within their communities. The fear of being stigmatized can act as a significant barrier to seeking health care services. Ensuring confidentiality in healthcare settings can help alleviate these concerns and encourage men with STIs to seek appropriate care.

*“Inini ndakaita pubic lice yekuti ndaikwenya zvisingaite ende zvanga zvisina basa kuti paive pana ani.Ndakagera bvudzi repanhengo yangu asi hazvina kupera.Saka pana sahwira akazondidza zvekushandisa brake fluid yemota saka ndaizora pese pandaigeza.Apa ndaitya kuenda pachipatara semushandi wepo unoswerera washambanzwa zvazara chipatara chose kuti ndaita STI.Saka nokudaro hazvina kupera asi ndakazoenda kuchipatara asi zvakanga zvawedzera”* (I had pubic lice which affected my private part which caused irritation. I tried to shave so that I will feel better but nothing worked. A friend insisted that I should use brake fluid so I applied it after I had a bath. My fear was the issue of confidentiality as the rumor could spread that I had an STI.So I decided to go to the hospital because the situation has become worse) Participant B

“Men usually want their lives to be private therefore they fear that if they visit the hospital their information is disclosed and especially because our work space is occupied by women as the majority group there is lack of trust” Key informant 2

The results derived from the participant narratives highlight the significant influence of confidentiality on the health seeking behaviour of men with STIs.Sutton et al (2010) stipulates that providers perceived patient concern about being seen entering or exiting the clinic and losing confidentiality as a significant barrier. Confidentiality due to the close-knit communities becomes a determinant of health seeking behaviour among men with STIs. The study by Alarmingly and

McKinney (1998) is consistent with Participant B's response, which suggests that some men would forego services or travel to further away clinics because they were afraid that the receptionists and nurses at the local clinics would not keep their confidentiality. The HBM emphasizes that individuals are more likely to engage in health seeking behavior if they perceive the benefits of taking action. Confidentiality can be viewed as a benefit itself as it assures men that their personal and sensitive information will remain private. Highlighting the confidential nature of health care providers this can help men to understand the benefits of seeking health care which include effective treatment, improved health outcomes and prevention of further transmission. This is in consistency with the legal framework for STIs which ensure that there should be confidentiality and privacy of patients, and prohibit discrimination based on STI status. Therefore, the researcher has noted that confidentiality has influence on the health seeking behavior of men with STIs due to fear of discrimination and judgement. Hence there is need to implement stiff policies on the issue of confidentiality at rural hospitals so as to encourage early detection and treatment of STIs.

#### **4.3.8 Stigma and judgement**

According to the study's findings, participants identified stigma as an additional factor influencing health seeking behaviour among men with STIs. Many participants voiced fear that if they talked openly about their issues of being STI clients, they would be stigmatized as promiscuous. When men seek care for STI treatment, they frequently experience shame, embarrassment, or judgment as a result of this stigmatization.

*“Inini semushandi wepachipatara pandakaita STI ndakenda ku pharmacy nekuti ndaitya kuti vachataura zvisingaite pamusoro pangu kuti vaizoisa label or kuisa judgement pandiri”* (As a worker at Gutu Mission Hospital I suggested to go at the pharmacy to get treated of the STI that I had due to the issue that people at the work place are judgemental) Participant C

“Most men are afraid of being judged by the community as many people thinks that an STI is caused by the issue of infidelity. However, it’s not always that case STIs can be caused by poor hygiene for instance toilets”Key informant 1

“kushandisa mushonga yechivanhu kwakanakira kuti vanhu havazotaure kuti uyu ane STI pane kuchipatara” (Men perceived that using herbs was less stigmatizing than seeking formal medical care for STIs) Participant 8

These results demonstrate the critical role of stigma and judgment plays in the health seeking behaviour among men with STIs. As a result, the researcher came to the conclusion that, in order to address stigma and motivate people to seek out and keep advocating for policies that foster an inclusive and supportive environment, comprehensive anti-stigma initiatives. We adapt a stigma framework developed for people living with HIV(PLWHIV), with these findings we can develop interventions that support stigma reduction with children and their parents Mason and Sultzman (2019). The experiences that the participants shared are consistent with the body of research on the impact of stigma on the health seeking behaviour among men with STIs. The level of HIV stigma in communities and societies influences stigma practices such as discriminatory attitudes among the public and harmful stereotypes and prejudice that can leads to PLHIV face exclusion and verbal abuse Mahajan et al (2008). This is in consistency with the HBM which proves that stigma and judgement can act as a barrier for men with STIs to seek health care. Fear of being labelled and discriminated against hence discouraging men from seeking health care. Societal expectations of masculinity can affect men’s health seeking behaviour. Therefore, seeking health care of STIs may be viewed as a sign of weakness hence conflicting with traditional notions of male strength and self-reliance. Therefore, in conclusion the researcher can note that by applying the HBM at hospitals especially in rural areas one can gain insight of developing targeted

interventions that address stigma and addressing misconceptions. This promotes or enhance access of services to men with STIs and improve their health seeking behaviour.

#### **4.4 THE ROLE OF THE HEALTH CARE SYSTEM IN THE PROVISION OF SERVICES TO MEN WITH STIS AT GUTU MISSION HOSPITAL**

Assessing the effectiveness of Gutu Mission Hospital on meeting the needs of men with STIs has been conducted in this study. It is integral to live a healthy life style and it is everyone's right to have access to health care services despite his or her status.

##### **4.4.1 Testing and counselling**

The health care provider makes sure that the treatment of an STI is effective and yield good results by taking all the proper stages and procedures as required by the Ministry OF Health and Child Care. Looking at the geographical factor people around Gutu are health illiterate due to the religious ideology so there is limited information of how STIs gets transmitted, how they can be prevented and among others.

*“Tinoendesa client yedu ku HIV testing first, toita screening for STI or testing for STI kuitira kuti tizive mhando ye STI inenge ine munhu kuitira kuti arapwe zvichienderana nechirwere chaanacho. Kana anga ane shamwari yake yepabonde tinoudza client yedu kuti shamwari yake irapwe kuitira kuti infection isadzokorora futi. Chinonetsa ndechekuti vanhu nvazhinji munzvimbo yatiri vanonyaya kushandisa mishonga yechivanhu as ichizoita kuti situation iwedzere vozouya kuchipatara chirwere chapararira mumuviri. (We refer our clients for testing of HIV first, we screen or test the type of the STI so that the client is given proper treatment and dosage. If the client has a sexual partner the partner is also supposed to get treatment to avoid the reinfection of*

the STI. We live in a rural set up and many people still believe in traditional herbs yet it worsens the situation as the STI goes to a worst stage) Key informant 2

*“Pandakaenda kunorapwa siki yangu ndasvika pachipatara vakanditi nditange ndaenda kuno testwa HIV kutanga .Ndatestwa ma results akabuda ari positive izvo zvakandinetsa kutambira nurse vaivemo vakaita kuti ndinzwisise zvese maenderano ne HIV kuti ndonwa sei mapiritisi ende ndichikwanisa kurarama sevamwe izvo zvakanyevenutsa hana yangu”*(I went to the hospital to get treated of an STI that I had , firstly I was told to go tested of HIV and the results came out positive which left me in a shock I couldn’t accept it.The nurse talked to me on all things concerning HIV so that I live like other negative patients like adherence) Participant D

“The issue of stigma can hinder men with STIs to seek medical attention and deter them from testing and counselling services due to fear of judgement or breach of confidentiality. So I think as a hospital there is need to actively address these concerns to create a safe environment and a non-judgemental environment” Key informant 1

The study findings prove that Gutu Mission Hospital conduct testing and counselling and this influence the health seeking behaviour among men with STIs.This is in consistency with the HBM which suggests that if men believe that they may be at the risk due to engaging in risky behaviour they may be motivated to seek these services. On the other hand, if they perceive themselves as not susceptible to STIs they may less likely to seek testing and counselling. If they perceive STIs as serious health conditions with long term complications, they are more likely to seek testing and counselling. The HBM also suggests that testing and counselling can hinder the health seeking behaviour of men with STIs due to the issues such as confidentiality, stigma and fear of judgement associated with STIs. Significant stigma exists in the Black community that discourages members from engaging with STI/HIV testing and SRH education or prevention interventions (Berkley-



Patton et al., 2013) This therefore brings a research gap as the counsellors are not as professionals as social workers in that social workers analyse the social environment on why the negative health seeking behaviour of men on STI treatment. Therefore, there is room for collaborating with Social workers at hospitals particularly Gutu Mission Hospital. This in conclusion shows that testing and counselling can impact positively or negative to the health seeking behaviour among men with STIs at Gutu Mission Hospital.

#### **4.4.2 Health Education**

The health care providers pointed out that they offer health education about STIs so that people will have access to health information, awareness and understanding, overcoming barriers such as stigma and lack of privacy.

*“Isusu kana ma clients auya tinovapa health education kuti chii chinonzi STI, Anokonzerwa nei ma STIs aya uye anodzivirirwa sei ma STIs iwaya. Tinovapa ma condoms senzira yekudzivirira ma STIs. Izvi tinozviita patinopinda mumatunhu, nekushanyira vanhu mudzimba. Asi nyaya iripo ndeye kuti hatina mota sezvo chipatara chine mota imwe chete ne fuel yekushandisa kufamba mumatunhu”* (As a health care provider if men with STIs came we give them health education on what is an STI, the causes of STIs and how one can prevent STIs. We distribute condoms so as to prevent STIs. We conduct health education through outreach and home visits. However, we face a challenge on the issue of transport and fuel as the hospital only have 1 car) Key informant 2

*“Pandakasvika pa Gutu Mission Hospital ndichida kurapwa ndakagara pazvituru vaidzidziswa vaive vari vanhukadzi vakazvitakura chete maererano ehutano hwavo nehwezwana”* (When I went to Gutu Mission Hospital waiting to be attended health education was only given to expecting mothers concerning their health and baby’s health) Participant E

The study findings pointed out the issue of health education which is conducted at Gutu Mission Hospital to men with STIs so as to reduce the prevalence of these STIs. Therefore, basing on the health belief model health education can help men understand the severity of STIs and the benefits of seeking timely medical care. By providing information about the risks and consequences of STIs, health education can influence men's susceptibility and severity. As a social worker's role educating men about the effectiveness of preventative measures and treatment options can enhance their perceived benefits of seeking medical care for STIs. Further more health education can address barriers such as lack of awareness, stigma, and limited resources which hinder men from seeking screening and treatment for STIs.

#### **4.4.3 Treatment**

When diagnosed with a sexually transmitted infection (STI), men in rural areas turn to the health care system for effective treatment. Health care providers prescribe medications based on the type of infection, which may include antibiotics or antiviral drugs. Completing the entire treatment regimen as prescribed is essential for successful recovery and preventing complications.

*“Pandakarwara ne gonorrhoea ndakaenda kuchipatara ndikanorapwa, ndikapihwa mapiritsi ndikabaiwa injection”* (When I got infected with gonorrhoea I went to the hospital to seek treatment. I was given pills and injections) Participant A

“We offer treatment by providing necessary drugs such as antibiotics among others to the patients who come with STIs to avoid reinfection of the STI and the implications surrounding STIs” Participant 4

From the findings of the research proved that treatment is essential to prevent complications. These complications can include infertility, pelvic inflammatory disease and increased HIV transmission

risk. This is in consistency with the HBM as it brings to light the issue of perceived benefits as treatment improves health outcomes and reduced transmission rates and among others. Men have varying levels of perceived susceptibility and severity. Factors like awareness, stigma and cultural beliefs can influence how men perceive their risk of acquiring an STI and possible consequences of untreated infection. Through conducting education and outreach programs, health care providers can help men understand the importance of early detection and treatment. According to the World Health Organization (WHO) in 2016, it is recommended that the healthcare system ensures access to effective, affordable, and quality-assured treatment for sexually transmitted infections (STIs). This includes providing essential medicines and diagnostics at primary healthcare facilities and encouraging adherence to treatment through patient support and follow-up. In conclusion the researcher notes that timely and effective treatment is crucial for men with STIs, as it not only helps to alleviate their immediate symptoms and prevent further transmission, but also contributes to long term sexual and reproductive health outcomes.

#### **4.5 INTERVENTIONS FOR IMPROVING HEALTH CARE FACILITIES FOR MEN WITH STIS AT GUTU MISSION HOSPITAL**

In rural areas access to health care services, especially for men with sexually transmitted infections STIs can be limited. To address this issue effectively, it is crucial to implement interventions that focus on improving health care facilities specifically tailored to the needs of men with STIs at Gutu Mission Hospital.

##### **4.5.1 Increase awareness and education**

According to the study findings, participants identified that awareness campaigns should be conducted and educational interventions so as to address stigma surrounding STI, misconceptions and among others. Therefore, this is discussed by participants below

“I think it’s best to conduct community outreach programs educating men on issues surrounding STIs but the challenge we have as a hospital is that we don’t have transport to conduct the outreach program” Key informant 2

*“Sekuona kwangu ndinofunga kuti kana vakafamba vachidzidzisa nezve ma STIs tinobatsirika sevarume nekuti pamwe pachokuchipatara sevanhurume kunotiremera”* (I think will be helpful when they conduct outreach programs educating us as men on STIs since sometimes as men going to the hospital seems like deviance) Participant 2

The study proved that this can be achieved through community outreach programs, educational campaigns and workshops that provide information on prevention, symptoms and treatment options for STIs. By educating men about the importance of seeking timely medical care for STIs, the stigma can be reduced, leading to more individuals seeking help when needed. This aligns with the HBM, which states that peer-led outreach initiatives or health education campaigns can effectively address perceived vulnerability and cues to action. Misconceptions can be dispelled by education and awareness initiatives, enhancing the confidentiality and accessibility of health care services (WHO, 2016). This may create a culture of support within the community and encourage more men with STIs to seek medical attention. As males with STIs participate in community outreach programs, specific concerns and obstacles to seeking medical attention can be addressed. The researcher concludes by noting that greater knowledge and instruction have a number of advantages, including early diagnosis and treatment, giving men preventative tools like condom use, and more.

#### 4.5.2 Enhance access to testing and treatment services

According to the findings of the study, participants indicated that increasing the availability and accessibility of STI testing services can encourage more men to seek timely diagnosis. This can significantly improve the health outcomes of men with STIs.

*“Chipatara chiri kure saka kuti ndiende zvairema nekuda kukuti pane mufambo kuti ndiende dai vakaisawo ma clinic ari pedyo kuti tirapwe nekukurumidza nekuti inini nekuda kwemufambo ndakaverengera pandakatanga kuvaviwa zvekuti dai pasina mufambo ndakakurumidza kunorapwa”* (The hospital is located far and the long distance made me to be reluctant. I hope they will build nearby clinics so that we don’t become reluctant due to the long distance issue. If the hospital or clinic was near I would have been diagnosed and treated early) Participant B

*“Dai zvaiita vaita kuti munhu apote achizvi tarise ega kuti ane STI here kana kuti vofamba vachiongorora nekurapa vanenge vabatwa vane ma STI”* (If possible they have to distribute self-test kits or they provide the services directly to men in their community) Participant A

“Long distances and lack of transportation options has been an obstacle to men in remote rural communities when they try to access testing and treatment sites. Many have to travel 2-3 hours just to reach the nearest facility due to this we need to bring the services directly to the community through mobile health units” Key informant 1

The study proves that improving access to testing and treatment services is important in rural areas where health care facilities are scarce. Mobile clinics or telemedicine services can be utilized to reach remote populations and provide STI testing and treatment. This is in consistency with the HBM as cues to action can be enhanced through mobile testing clinics. The issue of limited access to health care facilities, particularly for men with STIs in rural areas, is a significant public health

concern. Roughly 50% of the world's population, according to the World Health Organization (WHO), resides in rural regions. Despite this, rural populations are home to 70% of the world's poorest people and frequently suffer barriers to receiving basic health care (World Health Organization, 2021). Telemedicine can be used to enable people to consult with medical professionals remotely over the phone, or mobile clinics can visit isolated areas to provide STI testing and treatment (Centers for Disease Control and Prevention [CDC], 2021). Offering self-test kits, which allow people to check themselves for STIs at home using a simple swab or urine sample, is an additional tactic. Self-test kits like these increase testing rates in populations that are difficult to reach, like males living in rural areas (World Health Organization, 2019). Finally, the researcher observes that by offering self-test kits, mobile clinics and among others, STI transmissions rates can be reduced.

#### **4.5.3 Strengthening confidentiality measures**

According to the findings of the study, participants noted that establishing clear policies and procedures to protect the privacy and confidentiality of men seeking STI related services is essential. This can create a more trustworthy and inclusive environment for men with STIs.

*“Vanhu vazhinji vanoti kana munhu akaita STI inyaya yekuti akaita gumbo mumba gumbo panze. Saka izvi zvinoita kuti isu sevarume tisaenda kuchipatara tichitya kuti zvikabuda pachena vanhu vanotaura taura. Sekuona kwangu nzvimbo yechipatara inofanirwa kuva nzvimbo yekuti munhu wese anosununguka ende nyaya yemunhu inochengetedzwa”* (There is pervasive societal notion that contracting an STI is a sign of moral failing or promiscuity. This makes us men not to seek medical care being afraid of the community knowing our health condition. Therefore, the clinical environment should protect the privacy and confidentiality of the patient) Participant C

*“ndinofunga kuti zvipatara zvinofanirwa kuita vashandi vanobatana varwere zvakafanana vasingatarise kwavanobva nekuti hurumende inofanirwa kuisa mutemo wakaoma wekuti nyaya dze patient dzikabuda vanobhadhariswa mari yakawanda”* (I think it’s good if the hospital facilities train cultural competence health care providers and put stiff laws on confidentiality)

#### Participant 1

The results demonstrate that confidentiality is a significant concern for individuals seeking STI testing and treatment, particularly in small communities where privacy may be limited because of close knit of communities in Gutu. Strengthening confidentiality measures within health care facilities is essential to encourage men to seek care without fear of judgement or disclosure of their condition. This is in consistency with the health belief model as it takes note of perceived benefits therefore if the health care facility ensures confidential STI testing and treatment services it enhances the health seeking behaviour among men with STIs. Training health care providers to communicate effectively with men, build trust and address their specific needs and concerns. Privacy policies, among other things, can provide confidentiality by describing how client information is to be handled, stored, and shared. According to WHO (2016), offering STI services to individuals requires respecting their privacy and maintaining confidentiality. It is imperative to put policies in place that protect the privacy and confidentiality of individuals seeking treatment if we are to encourage access to these services without fear of discrimination or shame. This can be accomplished in a number of ways, for as by using discrete, distinct locations for STI testing and consultations. In summary, enforcing confidentiality policies in medical facilities when treating male STI patients is essential for enhancing patient privacy, lowering stigma associated with sexual health disorders, and increasing access to care. This can create a supportive environment where individuals feel comfortable seeking testing and treatment for STIs.

#### **4.5.4Address socioeconomic barriers**

According to the study's finding participants noted that addressing socioeconomic barriers is a crucial intervention for improving health care facilities for men with STIs. This can significantly improve their ability to access and utilize the STI services therefore leading to better outcome of health for men.

*“Sekuona kwangu dai vadzikisa mari ye consultation yakawandisa hatikwanise kuiwana nemabasa edu atinoshanda asingabhadhare”* (I think they have to decrease the consultation fee we cannot afford it due to the income we get) Participant D

*“Ndinoona kuti vakati testing and treatment hazvibhadharwe vanenge vatibatsira tinokurumira kuuya kuchipatara kunyangwe ukazonzi tenga mishonga nemapiritsi zviri nani”* (They should offer testing and treatment services for free so that we can seek medical care in time it's better to buy drugs) Participant 6

The results stated that interventions should address these barriers by giving reasonable or free testing and treatment choices, providing transportation assistance for clinic visits, or incorporating STI services into current health care programs that cater to low income people. Given that one of the main constructs of the health belief model is perceived barriers, this is consistent with it. These obstacles could be, among other things, transportation issues to the medical center and budgetary limitations. The importance of socioeconomic determinants on access to STI health care was highlighted by the CDC (2020). The study concludes that enhancing health care facilities for males with STIs requires tackling socioeconomic constraints. Through putting into practice measures like mobile health clinics, financial aid programs, and more.



## **4.6 CHAPTER SUMMARY**

The research using qualitative methods delved into how men perceive, their attitudes towards, values on, and experiences with using healthcare facilities when dealing with sexually transmitted infections (STIs). The study highlighted various factors that influence men's behavior in seeking healthcare. It revealed that men typically seek medical help to address specific health issues. The perception of the severity of the illness and the preference for self-treatment often caused delays in men seeking help for STIs at Gutu Mission Hospital. Additionally, factors related to services such as the demeanor of healthcare staff and long waiting times affected the utilization of healthcare services. Moreover, traditional ideas of masculinity played a role in how men sought healthcare and utilized healthcare facilities.

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSION AND RECOMMENDATIONS**

#### **5.0 INTRODUCTION**

This section provided the summary, conclusion and implications of the findings to Social work. It also provided the recommendations of the study all based on the research findings.

#### **5.1 SUMMARY OF FINDINGS**

The research in corresponding with the research objectives respectively. The research objectives are 1. The knowledge, attitudes and beliefs of men with STIs on health care services 2. The

challenges that affect men with STIs to seek health care services 3. The role of the health care system in the provision of services to men with STIs. These determinants can be categorized into individual factors which includes knowledge about STIs, socio cultural factors, economic factors and the health care system related factors.

The results from the study proved how knowledge influence health seeking behaviour of men with STIs. Lack of knowledge on STIs for instance awareness of symptoms, treatment options and among others can delay diagnosis and treatment. Beliefs can influence attitudes of men on health care services for STIs. Therefore the issue of cultural beliefs comes into play for instance use of herbal remedies can give self-reliance to men with STIs. Hence due to the stigma and judgement they get from the society as a whole they then opt to use alternative methods such as herbal remedies.

From the research findings above it shows what challenges men are going through to have access to health care services pertaining STIs. Due to scarcity of hospitals and clinics in rural areas men have to travel long distances to reach the nearest health care facilities. This can be a barrier to timely seeking health care for STIs among men. There is stigma associated with sexual health especially STIs. Men may fear judgement and discrimination from peers and community members if they are seen visiting a health care facility for STI testing and treatment. Financial constraints is another challenge men are passing through in order to have access to STI treatment. Uninsured and underinsured individuals may struggle to afford the costs of consultation, laboratory tests, medication and among others leading to delay treatment of STIs. Men may feel uncomfortable to discuss sensitive issues with health care providers thus concern the issue of confidentiality. This can deter individuals to seek medical help for STIs.

The role played by the health care system is brought to light from the above findings. These roles are crucial in influencing health care seeking behaviour of men with STIs. These roles include testing and counselling and health education to the STI clients. This includes respectively the health care providers offer testing and diagnosis for STIs, this therefore includes screening. Once the STI is diagnosed the health care provider gives the appropriate treatment options to the infected person. Men with STIs may require counselling services to address the emotional and psychological impact of the diagnosis. The issue of health education is brought to light as STI clients are provided with information on prevention, testing and treatment options.

## **5.2 CONCLUSIONS OF THE STUDY**

The research findings highlighted the weaknesses of the legal frameworks for STIs as these frameworks are only applicable in high income countries and therefore does not suit with developing countries where there is low and middle income. Due to the context of the study the researcher noted that men lack access to information or knowledge on STIs as the literacy level is low and the cultural beliefs influencing the attitude of men to seek health care as they are deeply rooted in traditional ways. This leads to alternative way of treatment as men becomes self-reliant on treating themselves.

Some of the demographic factors are brought to light such as socio economic factors as challenges to health seeking behaviour. The researcher noted that there is need to employ social worker as they can be culturally sensitive and practice cultural competence so as to provide a welcoming environment to everyone despite the social class and cultural background. There is need to create a friendly environment for men to be able to open up their sexual reproductive issues by employing male health care workers so as to create a balanced environment at the hospitals.

The study finding showed that the hospitals are trying on working and providing health care services such as testing and counselling and health education. However, this is not enough as the population usually at hospitals are women on daily basis men miss out all these services. Therefore, the health care system should conduct outreach, awareness campaigns, collaborative with the community members and among others.

Hence, efforts should be directed towards improving awareness through targeted educational campaigns, ensuring the availability and accessibility of health care facilities, implementing financial support mechanisms and combating social stigmatization. A holistic approach involving collaboration between health care providers, community organisations and policy makers is crucial for addressing these determinants as promoting health seeking behaviour among men with STIs.

### **5.3 RECOMMENDATIONS**

Based on the research findings pertaining the knowledge, attitude and beliefs of men with STIs, challenges faced by men with STIs in accessing health care and the role of the health care system at Gutu Mission Hospital. Recommendations were made to men with STIs around Gutu, policy makers and social work.

#### **5.3.1 Recommendations to social work practice**

- This study focused on the determinants of health seeking behaviour among men with STIs. To the field of social work practice this study points to contribute to social work in research methods. This will help in the improvement of social worker's knowledge base on the specific challenges faced by men with STIs in accessing health care services. Therefore, it will support social networking which involves the collaboration of social workers and other stakeholders in maintaining the health care of men with STIs.

- Based on the study findings, one of the factor which impede men from seeking health care services is stigma. Hence on, Social workers should strive to create a stigma-free environment and educate the public about issues surrounding STIs. Education should be provided to men with STIs on seeking health care services. Through group and community work methods, social workers can intervene and provide counselling to men with STIs who gets stigmatized by the societies.
- Social workers as they uphold the value of justice, they should also advocate for men with STIs for improved access to health care services. This is done through addressing the issue of limited health care facilities. By working with local health care workers, social workers can help bridge the gap in health care access and ensure that men have the resources they need to seek timely treatment for STIs.

### **5.3.2 Recommendation to policy makers**

- Develop comprehensive educational programs to enhance knowledge about STIs, transmission and prevention strategies targeting both men and the broader community. This can involve community outreach programs, educational campaigns and the provision of resources to increase knowledge about the importance of timely seeking care for STIs.
- Increase the availability and accessibility of STI testing and treatment services in rural areas through additional health care facilities, mobile clinics or telemedicine services. Streamline the process for STI screening and testing to facilitate easier access for men. This can involve making testing facilities more readily available and reduce barriers to seek testing services.

- Implement measures to reduce financial barriers to health care such as subsidized or free STI testing and treatment services in collaboration with non-governmental organisations and the private sector.
- Engage community leaders, local organisations and peer groups to promote positive health seeking behaviour and reduce stigma associated with STIs through community based approaches. It leads into cultural sensitivity which includes cultural norms, beliefs and practices related to health and STIs. Therefore results in the relevance of the community's needs and preferences.

### **5.3.3 Recommendations to men with STIs**

- Men should annually go for annual screening for sexually transmitted infections so as to avoid delay in treatment and reluctance
- The use of preventative services such as condoms

### **5.4 AREA OF FURTHER STUDY**

Health seeking behaviour among adolescents with HIV/AIDS. A case at Gutu Mission Hospital.

### **5.5 CHAPTER SUMMARY**

The chapter provided a summary of findings, conclusions of the findings and the implications to social work practice. It also provided the recommendations that can be useful to strengthen and support the health seeking behaviour among men with STIs.

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## APPENDIX A: LETTER FROM BINDURA UNIVERSITY OF SCIENCE EDUCATION TO CONDUCT THE RESEARCH

FACULTY OF SOCIAL SCIENCES & HUMANITIES  
DEPARTMENT OF SOCIAL WORK



P. Bag 1020  
BINDURA, Zimbabwe  
Tel: 263 - 71 - 7531-6, 7621-4  
Fax: 263 - 71 - 7534

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BINDURA UNIVERSITY OF SCIENCE EDUCATION

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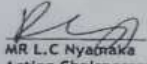
Date: 15/01/24

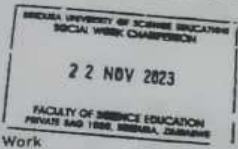
TO WHOM IT MAY CONCERN

RE: REQUEST TO UNDERTAKE RESEARCH PROJECT IN YOUR ORGANISATION

This serves to introduce the bearer, MARALISA CHIPANGA, Student Registration Number B2011906, who is a BSc SOCIAL WORK student at Bindura University of Science Education and is carrying out a research project in your area/institution.

May you please assist the student to access data relevant to the study, and where possible, conduct interviews as part of a data collection process.

Yours faithfully  
  
MR L.C Nyamhaka  
Acting Chairperson - Social Work



**APPENDIX B: APPROVAL LETTER FROM GUTU MISSION HOSPITAL TO  
CONDUCT THE RESEARCH**



## **APPENDIX 1: Informed consent form**

This part of the research is to seek consent for participation in the research titled: determinants of health seeking behavior among with STIs at Gutu Mission Hospital. Participants information will be kept confidential, and the results will only be utilized for academic purposes. Be certain that all information will not be disclosed to anyone and not even directed back to you. The research study will use pseudo names for protecting participants' information. It is voluntary to participate in this study and whenever you feel uncomfortable you are allowed to withdraw without any consequences.

Consent: If you agreed to the conditions of the study and willing to take part in the study, may you put your signature below.

Signature of participant.....Date.....

Signature of researcher.....Date.....



## **APPENDIX2: KEY INFORMANTS INTERVIEW GUIDE**

My name is Monalisa Chipanga. I am a fourth-year student at Bindura University of Science Education, studying Social Work. As part of completing the degree programme, students are required to conduct individual confidential research. Therefore, I am conducting a research on the topic determinants of health seeking behavior among men with STIs. A case study of Gutu Mission Hospital. With due respect, you are kindly requested to participate as one of key informants in this research. Be reminded that your responses will be kept confidential and anonymous and will be used strictly for academic purposes. More so, your contribution in this study is voluntary hence you may choose to excuse yourself anytime during the interview.

Start Time: .....

Finishing Time: .....

Date: .....

## **QUESTIONS**

### **Section A: Biographic Information (Pseudo names)**

Respondent.....

Organization .....

Designation.....

Age .....

**SECTION B: KNOWLEDGE, ATTITUDES AND BELIEFS OF MEN WITH STIs ON HEALTH CARE SERVICES AT GUTU MISSION HOSPITAL.**

1. Can you describe your experience working with men who have been diagnosed with STIs?
2. What are some common misconceptions or myths about STIs that you have encountered among men?
3. In your opinion, what factors contribute to delayed diagnosis?
4. How can health care providers better support men with STIs?
5. What is the attitude of men with STIs towards different health care providers?

**SECTION C: THE CHALLENGES THAT INFLUENCE HEALTH SEEKING BEHAVIOR AMONG MEN WITH STIS AT GUTU MISSION HOSPITAL.**

- 1.What role does income level play influencing health seeking behavior among men with STIs?
- 2.How does stigma surrounding STIs affect men’s willingness to seek health care?
- 3What measures can be taken to reduce stigma and discrimination towards men seeking treatment for STIs?
- 4.How does neighborhood or community context affect health seeking behavior among men with STIs?

5. What are the main barriers that men face when trying to access health care services for STIs
6. How can education and awareness campaigns be improved to reach men in rural communities.

**SECTION D: THE ROLES OF THE HEALTH CARE SYSTEM IN THE PROVISION OF SERVICES TO MEN WITH STIs**

- 1.Are they any gaps or barriers in the current system that prevent men with STIs from getting the care they need?
- 2.How could the health care system be improved to better meet the needs of men with STIs?
- 3.What kind of health care services are most important for men with STIs?
- 4.What are the existing policies and procedures in place for providing services to men with STIs?
5. What strategies have been effective in educating men about STI prevention and treatment?
6. Are there policy changes needed to enhance the delivery of STI services to men within the health care system.

**THANK YOU FOR YOUR CONTRIBUTION!!!**

### **APPENDIX 3: RESPONDEND IN DEPTH INTERVIEW GUIDE**

My name is Monalisa Chipanga. I am a fourth-year student at Bindura University of Science Education, studying Social Work. As part of completing the degree programme, students are required to conduct individual confidential research. Therefore, I am conducting a research on the topic determinants of health seeking behavior among men with STIs. A case study of Gutu Mission Hospital. With due respect, you are kindly requested to participate as one of key informants in this research. Be reminded that your responses will be kept confidential and anonymous and will be used strictly for academic purposes. More so, your contribution in this study is voluntary hence you may choose to excuse yourself anytime during the interview

Start Time: .....

Finishing Time: .....

Date: .....

#### **Section A: Biographic Information**

Participant.....

Age 15-19 [ ] 20-24 [ ] 25-29 [ ] 30-34 [ ] 35-39 [ ] 40-44 [ ] 45-49 [ ] 50+ [ ]

Marital status Married Married [ ] Single [ ] Divorced [ ] Widowed [ ]

Religious affiliation.....

Economic activity.....

**SECTION B: THE IMPACT OR INFLUENCE OF KNOWLEDGE, ATTITUDES AND BELIEFS OF MEN WITH STIs ON HEALTH CARE SERVICES AT GUTU MISSION HOSPITAL**

- 1.Can you describe your understanding of sexually transmitted infections?
- 2.How did you become aware that you might have an STI?
3. How do you feel about the quality of care provided for your STI treatment?
4. Have your interaction with health care providers influenced your perception of STI care?
5. What are your general beliefs about the health care system and its ability to meet the needs of men with STIs?
6. Can you share any experiences you have had with receiving STI care?
7. In your opinion, what changes could be made to encourage more men to seek timely care for STIs?

**SECTION C: THE CHALLENGES THAT INFLUENCE HEALTH SEEKING BEHAVIOUR OF MEN WITH STIS AT GUTU MISSION HOSPITAL.**

- 1.How has your economic situation affected your ability to seek care for your STI?
- 2.Has having an STI affected your career? If so how?
- 3.Have you received any formal education or counselling on STI prevention and management?
4. Do you think there is stigma associated with seeking health care for STIs? If so how does it impact your decision to seek treatment?

5. How would you describe your relationship with health care providers at Gutu Mission Hospital when seeking treatment for STIs
6. Did you feel comfortable discussing sensitive topics like sexual health and STIs with health care professionals at Gutu Mission Hospital?
7. How do cultural beliefs and norms within Gutu community affect men's attitudes towards seeking health care for STI?

**SECTION D: THE ROLES OF THE HEALTH CARE SYSTEM IN THE PROVISION OF SERVICES TO MEN WITH STIs**

1. Did you feel like your doctor was supportive and understanding?
2. How do confidentiality concerns affect men's willingness to seek treatment for STI?
3. Are there sufficient resources and trained staff to provide comprehensive care for men with STIs?
4. What educational initiatives are in place to raise awareness about STIs among men?
5. How was your experience with the staff at the hospital where you received treatment?
6. Did the doctor give you enough information about your STI and treatment options?
7. What do you think health care providers need to know about the specific needs of men with STIs?

**YOUR CONTRIBUTION IS HIGHLY APPRECIATED!!!**

#### **APPENDIX 4: FOCUS GROUP DISCUSSION GUIDE.**

Welcome everyone to this focus group discussion about determinants of health seeking behavior among men with STIs at Gutu Mission Hospital. My name is Monalisa Chipanga. I am a fourth-year student at Bindura University of Science Education, studying Social Work. As part of completing the degree programme, students are required to conduct individual confidential research. Therefore, I am conducting a research on the topic determinants of health seeking behavior among men with STIs. A case study of Gutu Mission Hospital. With due respect, you are kindly requested to participate as one of key informants in this research. Be reminded that your responses will be kept confidential and anonymous and will be used strictly for academic purposes. More so, your contribution in this study is voluntary hence you may choose to excuse yourself anytime during the interview

#### **SECTION A: THE IMPACT OR INFLUENCE OF KNOWLEDGE, ATTITUDES AND BELIEFS OF MEN WITH STIs ON HEALTH CARE SERVICES AT GUTU MISSION HOSPITAL**

1. What do you know about STIs, including symptoms, transmission routes and consequences?
2. Do you believe that having a n STI is a sign of weakness or shame? How does this belief impact your decision to seek testing and treatment?
3. How can we improve communication between health care providers and men with STIs regarding testing, treatment options and follow up care?
4. How can we engage community leaders or other influential figures in promoting STI awareness campaigns

**SECTION B: THE CHALLENGES THAT INFLUENCE HEALTH SEEKING BEHAVIOR AMONG OF MEN WITH STIS AT GUTU MISSION HOSPITAL.**

1. Have you encountered any challenges related to the competence or attitude of health care providers when seeking treatment for an STI?
2. Do you think men with different socio-economic backgrounds experience the health care system differently? Why or why not
3. Do you think men's reluctance to seek care for STIs is influenced by how society views STIs?
4. How important is confidentiality and privacy to you when receiving care for an STI?
5. What other factors besides socio economic status, do you think influence health seeking behavior among people with STIs?

**SECTION C: THE ROLES OF THE HEALTH CARE SYSTEM IN THE PROVISION OF SERVICES TO MEN WITH STIs**

1. Do you think the health care system does enough to educate people about STIs?
2. How can the health care system better address the needs of different populations of people with STIs for example racial or ethnic minorities, young people among others?
3. Do you think there is need for more culturally competent health care providers for people with STIs?



**THANK YOU VERY MUCH FOR YOUR INPUT!!!**

**Props**

1. The challenges influencing the health seeking behavior among men with STIs?
2. What do you think has to be improved in the health care system in accommodating men with STIs?
3. What is the impact of stigmatization on STI treatment, testing and counselling?
4. The roles that has been played by the health care system on the issue of STIs?