

Knowledge and Practice of Tuberculosis Preventive Measures among Adolescents and Young Adults Living with Tuberculosis in Ifako-Ijaiye Local Government, Lagos State, Nigeria.

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**Being a MPH Thesis Presentation Submitted to the Department of Public Health,
Faculty of Basic Medical and Health Sciences, Lead City University, Ibadan, Oyo State,
Nigeria**

**In Partial Fulfillment of the Requirements for the Award of Masters Degree (MPH) in
Public Health**

2023

Certification

This is to certify that Christianah Temilola OLAWOYIN with Matriculation Number LCU/PG/002176 carried out this research work titled “Knowledge and Practice of Tuberculosis Preventive Measures Among Adolescents and Young Adults Living with Tuberculosis in Ifako-Ijaiye Local Government, Lagos State, Nigeria” in the department of Public Health, Faculty of Public Health, Lead City University, Ibadan, Oyo State, for the award of Master Degree in Public Health and that this has not been previously submitted.

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Dedication

This research work is dedicated to God Almighty who gave me the strength to complete this study.

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Acknowledgement

Words cannot express my gratitude to my supervisor, Dr. T.A. Olowolafe for his invaluable patience, guidance and feedback. I also could not have undertaken this journey without the Medical Officer of Health of Ifako-Ijaiye Local Government who generously provided knowledge and expertise. Additionally, this endeavour would not have been possible without the generous support and assistance from the executive chairman of the Ifako-Ijaiye Local Government, Lagos State Ministry of Health and Primary Health Care Board.

I am also grateful to Jane, Samuel, Taiwo, Zainab and Priscilla for their moral support, editing help, inspiration, advice and suggestions. Thanks, should also go to the various writers, jurists and all others who inspired and impacted me from their writings and work through which I have taken help to complete this project.

Lastly, I would not remiss in not mentioning my parent, Mrs. V.O. Olawoyin, siblings, wonderful children, Hannah and Grace Oshinowo and Ajobiewe Samsideen for all the emotional support. Special thanks to Olugbenga Adeyemo, a.k.a 'Iyebiye', his belief in me has kept my spirits and motivation high during this process.

“Even though the above-mentioned institutions and persons have assisted in the process of this research work, I alone stand responsible for the errors, if any, found in the work”.

Abstract

The prevalence of tuberculosis (TB) is still high in Nigeria, especially young adults. Yet, the outcome of TB preventive measures among adolescents and young adults are not often favourable, which is as a result of the limited knowledge and practice of TB preventive measures among adolescents and young adults. The knowledge about TB infection prevention is a pivotal factor in the development of action plans to prevent and manage pulmonary tuberculosis disease among adolescents and young adults. This study, therefore assessed the knowledge and practice of TB preventive measures among adolescents and young adults living with TB in Ifako-Ijaiye Local Government, Lagos State, Nigeria. A cross-sectional study design method was used. All the adolescents and young adults diagnosed with new sputum smear-positive tuberculosis in the six facilities in Ifako-Ijaiye LGA offering directory observed treatment short-course (DOTs) were recruited for this study. Frequency, percentage, chi-square and logistic regression were used to achieve the objectives. More than half (54.3%) of the respondents were aged ≥ 20 years. About 49.7% had tertiary education. Of the 151 respondents, 40.4% have someone in their household who had contacted TB. About 97% respondents had good knowledge about TB preventive measures; while 67.5% had good practices on TB preventive measures. Respondents aged < 20 years [AOR = 2.21, 95% CI 1.02-4.75] and good knowledge [AOR = 4.9, 95% CI 1.03-25.67] have significant association with the practice of TB preventive measures. There was good knowledge of TB preventive measures among adolescents and young adults living with TB, but the practice was an average. Young people should be encouraged to make informed choices regarding TB preventive measures.

Keywords: Tuberculosis, Adolescents, Young Adults, Living with Tuberculosis, Tuberculosis Preventive Measures

Word Count: 267

Table of Contents

Content	Page
Title page	i
Certification	ii
Dedication	iii
Acknowledgement	iv
Abstract	v
Table of Contents	vi
List of Tables	vii
List of Figures	viii
List of Acronyms	xi
Chapter One: Introduction	
1.1 Background to the Study	1
1.2 Statement of the Problem	4
1.3 Justification of the Study	6
1.4 Aim and Objectives of the Study	7
1.5 Research Questions	8
1.6 Significance of the Study	8
1.7 Scope of the Study	9
1.8 Operational Definition of Terms	9
Endnotes	11
Chapter Two: Literature Review	
2.1 Conceptual Review	14
2.2 Theoretical Review	36
2.3 Review of Empirical Studies	85
2.4 Conceptual Framework	91
2.5 Summary of Gaps in Literature Reviewed	93
Endnotes	94
Chapter Three: Methodology	

3.1	Research Design	103
3.2	Population of the Study	103
3.3	Sample and Sampling Techniques	103
3.4	Description of Research Instrument	104
3.5	Validity and Reliability of the Research Instrument	104
3.6	Data Collection	104
3.7	Data Analysis	106
3.8	Ethical Approval	106
	Endnotes	108
	Chapter Four: Results and Discussion of Findings	
4.1	Demographic Data Analysis	109
4.2	Presentation of Data	113
4.3	Discussion of Findings	134
	Endnotes	138
	Chapter Five: Conclusion	
5.1	Summary of Findings	139
5.2	Conclusion	140
5.3	Recommendation	141
5.4	Contribution to Knowledge	143
5.5	Suggested Areas for Further Research	143
	Bibliography	146
	Appendix	157
	Bio-data	165
	The University Compliance Certification	167

List of Appendices

Appendix	Title	Page
i.	Informed Consent	157
ii.	Questionnaire	160

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List of Tables

Table	Title	Page
2.1	The Five Domains of Adolescent and Well-being	23
4.1	Percentage of Distribution of Respondents according to their Socio-demographic characteristics	112
4.2	Knowledge of Tuberculosis among Respondents	118
4.3	Knowledge of Tuberculosis Preventive Measures among Respondents in Ifako Ijaiye LGA	121
4.4	Association between Selected Socio-demographics Characteristics and Knowledge on Tuberculosis among Adolescents and Young Adults in Ifako-Ijaiye LGA	125
4.5	Association between Socio-demographics Characteristics and Knowledge on Preventive Tuberculosis Measures among the Respondents	127
4.6	Percentage Distribution of Respondent's Practice of Tuberculosis Preventive Measures	129
4.7	Association between Selected Socio-demographic Characteristics and Practices of Tuberculosis Preventive Measures	132
4.8	Logistics Regression Coefficient of Selected Socio-demographic Characteristics showing the Factors Associated with the Practice of Tuberculosis among Adolescents and Young Adults in Ifako-Ijaiye LGA, Lagos	135

List of Figures

Figure	Title	Page
2.1	Current transmission path of Tuberculosis data in Nigeria	18
4.1	Chart Showing Places Used for TB Testing among the Respondents	111
4.2	Percentage Distribution of Specimens Use for TB Test Collection among the Respondents	112
4.3	Percentage Distribution Displaying the Most Recent TB Testing	115
4.4	Percentage of Respondents' Knowledge about Tuberculosis	122
4.5	Pie Chart Illustrating the Percentage of Respondents' Knowledge about Tuberculosis Preventive Measures	123

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List of Acronyms

Abbreviation	Meaning
TB	Tuberculosis
LTBI	Latent Tuberculosis Infection
HIV	Human Immunodeficiency Virus
WHO	World Health Organization
AIDS	Acquired Immune Deficiency Syndrome
TPT	Tuberculosis Preventive Treatment
PMTPT	Programmatic Management of Tuberculosis Preventive Treatment
PLWHIV	People Living With Human Immunodeficiency Virus
IPT	Isoniazid Preventive Treatment
CDC	Centre for Disease Control
MDR-TB	Multi Drug-Resistant Tuberculosis
XDR-TB	Extensively Drug-Resistant Tuberculosis
FDA	Food and Drug Administration
NTP	National Tuberculosis Programme
LG	Local Government
PHC	Primary Health Centre
MTB	<i>Mycobacterium Tuberculosis</i>
AFB	Acid-Fast Bacilli
TNF	Tumor Necrosis Factor
KAPs	Knowledge Attitude and Practices
ANOVA	Analysis of Variance
SD	Standard Deviation

Fig.	Figure
DNA	Deoxyribonucleic Acid
RNA	Ribonucleic Acid
TNF	Tumour Necrosis Factor
TNF α	Tumor Necrosis Factor Alpha
NK	Natural killers
BCG	Bacille Calmette-Guerin
IGRA	Interferon Gamma Release Assays
MTB/RIF	<i>Mycobacterium Tuberculosis</i> or Rifampicin
MODS	Microscopic Observation Drug Susceptibility
UN	United Nations
COVID-19	Coronavirus Disease-2019
UNHLM	United Nations High Level Meeting
UNGA	United Nations General Assembly
DOTS	Directly Observed Therapy Short Course
SARA	Service Availability and Readiness Assessment
NTBLCP	National Tuberculosis and Leprosy Control Programme
LMIC	Low and Low Middle Income Countries
TSR	Treatment Success Rates
PPM	Private Public Mix
SHOPS	Sustaining Health Outcomes through the Private Sector
USAID	United States Agency for International Development

AYA	Adolescent and Young Adult
RR/MDR-TB	Rifampicin Resistant or Multidrug Resistant Tuberculosis
IUATLD	International Union against Tuberculosis and Lung Diseases
IPC	Infection Prevention Control
GUV	Germicidal Ultraviolet
HEPA	High-Efficiency Particulate Air
DR TB	Drug-resistant Tuberculosis
ART	Antiretroviral Therapy
GDG	Global Drug Review
1HP	One Month of Daily Rifapentine Plus Isoniazid
4R	Four Months of Daily Rifampicin Monotherapy
3HR	Three Months of Daily Rifampicin Plus Isoniazid
6H	Six Months of Daily Isoniazid Monotherapy
9H	Nine Months of Daily Isoniazid Monotherapy
3HP	Three Months of Weekly Rifapentine Plus Isoniazid
GDG	Guideline Development Group
STREAM	Systematic Treatment Regimen
BDQ	Bedaquiline
DOT	Directly Observed Treatment
HRH	Human Resources for Health
CHW	Community Health Worker
OPD	Outpatient Department
TBLS	Tuberculosis Leprosy Supervisor

UOR	Unadjusted Odd Ratio
CI	Confidence Interval
AOR	Adjusted Odd Ratio
HW	Health Worker

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