Intravaginal practices among rural Malawian women

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Background

- Intravaginal practices (IVP) are highly prevalent and commonly performed in many countries.
- IVP include cleansing the vagina with liquids, inserting dry substances to absorb vaginal fluid, ingesting substances intended to affect the feel or smell of the vagina, and inserting traditional substances.
- Women use IVP for a variety of purposes related to genital health, personal hygiene, and sexual pleasure.
- IVP are associated with unintended and harmful side effects.
- Vaginal cleansing and insertion can disrupt the genital mucosa and perturb the vaginal lactobacilli that populate a healthy vagina.
- Previous research supports an association between IVP, bacterial vaginosis, and HIV.

Objective

To characterize the prevalence and motivations for IVP among women participating in the baseline survey of a community-based cohort study on sexual and reproductive health in rural Lilongwe District, Malawi.

Methods

Participants

- Baseline survey of a community-based cohort study on sexual and reproductive health decision making in the catchment area of a rural clinic in Lilongwe District, Malawi.
- Survey conducted from July 2014 to February 2015.
- Eligibility criteria:
  - Living in selected villages
  - Woman between the ages of 15-39 years of age
- Baseline wave included 1,034 women and their male partners.
- This analysis focuses on a subset of women (n=650) who answered a series of questions on IVP.

Data collection

- Trained research assistants administered in-person questionnaires to consenting participants from July 2014 to February 2015.
- Interviewers recorded answers directly on tablet computers and uploaded data daily to an internet based storage system.

Data measures

- To assess women’s engagement in IVP we asked participants whether they cleansed or inserted any of the following into the vagina in the past 30 days:
  - Water only
  - Soap and water
  - Cotton, cloth or tissue
  - Other (alum or other powder; herbs, leaves or castor oil; lemon juice)
- Frequency of IVP (overall and by practice):
  - More than once a day
  - About once a day
  - Between once a day and once a week
  - Between once a week and once a month
  - Once a month or less often
- Those women reporting IVP were asked to list motivations.

Analysis

- Given the high frequency of reported IVP we collapsed women’s responses into three frequency categories:
  - At least once per day
  - Less than once a day
  - Never
- We characterized unadjusted associations between age, education, HIV status, marital status, current hormonal contraception use, self-report of any STIs, genital ulcers or abnormal discharge, parity, sexual frequency, number of sexual partners, and time since last intercourse and frequency of IVP using chi-squared statistics.

Results

- 650 women were included in the final analysis.
- 81% were married.
- Median age was 25 years (interquartile range (IQR): 20-31).
- 81% of women had some primary education, only 11% had any secondary education.
- Median number of lifetime sexual partners was 2 (IQR: 1-2).
- 10% of women self-reported ever having an STI.
- 12% reported abnormal genital discharge in the past 12 months.
- 78% had sexual intercourse within the past week.

Characteristics of women who performed IVP at least once per day, less than once per day, and never were similar:

- Only significant differences were in time since last intercourse, prevalence of HIV, and prevalence of abnormal vaginal discharge in the last 12 months.

Motivations for IVP

<table>
<thead>
<tr>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remove odors</td>
<td>602 91</td>
</tr>
<tr>
<td>Remove extra moisture</td>
<td>366 58</td>
</tr>
<tr>
<td>Prevent disease</td>
<td>327 49</td>
</tr>
<tr>
<td>Relieve symptoms of disease</td>
<td>273 41</td>
</tr>
<tr>
<td>To improve sex for partner</td>
<td>264 40</td>
</tr>
<tr>
<td>To please sexual partner</td>
<td>262 39</td>
</tr>
<tr>
<td>To improve sex for self</td>
<td>258 38</td>
</tr>
<tr>
<td>To clean after sex</td>
<td>251 37</td>
</tr>
<tr>
<td>To tighten the vagina</td>
<td>236 35</td>
</tr>
<tr>
<td>To get ready for sex</td>
<td>194 29</td>
</tr>
<tr>
<td>To avoid pregnancy</td>
<td>61 9</td>
</tr>
</tbody>
</table>

*Women were allowed to select multiple reasons.

Discussion

- Intravaginal practices are highly prevalent and frequently performed among these rural Malawian women.
- Women’s motivations for IVP varied and many women reported multiple reasons pertaining to genital health, cleansing, and pleasing their sexual partner.
- Future research should investigate the association between IVP and STI prevalence to better quantify the health risks associated with these IVP.

References


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