

Comprehensive Survey to Identify Health Behaviour Risks of Adolescents in Rural Uganda

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Context: Uganda has the highest birth rate in the world, and almost 70% of the population is under 25. There is minimal research on health risk behaviours in adolescent Ugandans, which could have an impact on primary care prevention strategies.

Objectives: To identify health risk behaviours in rural adolescent Ugandans.

Study Design: A standardized Youth Risk Behaviour Surveillance Survey from the Centers for Disease Control and Prevention was modified and then validated in Kamengo, a rural Ugandan town. The final validated survey was provided to 200 participants within the Kamengo community with the assistance of translators. Survey responses were collected, with initial descriptive data analysis performed in excel and SPSS and higher-level analysis ongoing.

Study Participants: Youths and adolescents who attend school in rural Uganda.

Outcome Measures: Health risk behaviours related to transportation safety, violence, sexual violence, depression, alcohol and tobacco use, illicit and prescription drug use, sexual practices, nutrition, and other miscellaneous risks were assessed.

Results: Survey respondents (n=200, response rate = 100%), represented rural adolescent Ugandans, by sex (56% female), religion (63% Catholic, 19% Protestant, 12% Muslim) and primary language (55% English, 43% Lugandan). Most respondents never or rarely wore a helmet when riding a bicycle (74%) or “bota bota” (scooter), (55%), and never or rarely wore a seat belt while in a motor vehicle (51%). Many respondents (33%) reported being threatened or injured with a weapon on school property. Being physically forced to have sexual intercourse was commonly reported (13%). Depression was common with 19% having seriously thought about suicide, 15% having made a plan, and 9% having made an attempt. A minority of sexually active respondents (38%) used condoms during the last sexual intercourse. Over 45% respondents had at least one day without breakfast in the last week. The majority of respondents (65%) had less than 8 hours of sleep per night.

Conclusions: There are considerable health behaviour risks in multiple domains for rural adolescent Ugandans. Data analysis is ongoing to determine which demographic factors predict particular health risk behaviours, so that interventions to change health risk behaviours can be designed and evaluated.