ATTITUDE TOWARDS PRE-MARITAL GENETIC SCREENING AMONG STUDENTS OF OSUN STATE POLYTECHNICS, NIGERIA

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Abstract
This study investigated the attitude towards pre-marital genetic screening among students of Osun State Polytechnics. Descriptive survey design was used for the study. The instrument for data collection was self developed and structured questionnaire in four-point likert scale format. Descriptive statistics of frequency count and percentages were used to describe the demographic data, while the parametric statistics of t-test and ANOVA set at 0.05 alpha level were used to test the hypotheses. A total number of one thousand, one hundred and sixty-five (1,165) Higher National Diploma (HND) students served as respondents for the study. Multistage sampling technique was used in three stages to select the respondents, namely: purposive sampling technique was used to select the schools; stratified sampling technique was used to select the Faculties and Departments, while proportionate sample of 25% was selected from each stratum.
Three hypotheses were formulated to guide the study. The following were the values obtained: Difference in Attitude towards Pre-marital Genetic Screening (Crit-t = 1.96, Cal.t = 1.310, df = 1163, P > .05); Difference in Attitude Due to Religion (F(2,1162) = .689, P > .05) and Difference in Attitude Due to Course of Study (F(5,1159) = .585, P > .05). Conclusions were drawn based on the findings of the study. The study recommended, among other things that religious organizations should serve as useful channels to disseminate health information since people always have respect for places of worship and religious leaders.
**Key Words:** attitude, pre-marital, polytechnics, genetic disorders, screening, blood group.

**Introduction**

Genetic diseases are hereditary in nature. Deoxyribonucleic Acid (DNA) is responsible for heredity in humans. DNA characteristically condenses to form chromosomes. There are 46 chromosomes in the nucleus of human cells arranged in 23 pairs. Each of the pairs consists of a chromosome of paternal origin and one of maternal origin. Each chromosome is made up of genes. Gene or set of genes control traits. The presence of defective gene in either parent and the probability of its transmission to the children can only be accessed through genetic testing. Therefore, information about couple’s predisposition to certain disease and the likelihood of passing on those diseases to their unborn children is necessary before marriage is consummated.

According to Mehta (2011), genetic disorder is an abnormal condition that a person inherits through genes or chromosomes. Ahmed (2010) stated that genetic disorders and congenital abnormalities occur in about 2%-5% of all live births, account for up to 30% of paediatric hospital admissions and cause about 50% of childhood deaths in industrialized countries. Similarly, Memish and Saeedi (2011) noted that genetic disease affects as much as 5% of the world’s population constituting a major public health problem in many parts of the world. Genetic disease impacts academic achievement negatively as poor health condition resulting from the disease will not allow the affected children to participate in school work.

WHO (1999) described pre-marital genetic screening as services targeted at individuals and families, which try to enable people with a genetic disadvantage, and their families to live and reproduce as normally as possible, assuring access to relevant medical services (diagnostic, therapeutic, counseling, rehabilitative and preventive) and social support systems, helping them to adapt
to their unique situation and providing information so as to make voluntary choices in health and reproductive matters. Pre-marital genetic screening can identify and modify behavioural, medical and other health risk factors known to impact pregnancy outcomes through prevention and management (Chunang and Chen, 2008). It is capable of reducing the burden that birth defects and genetic disorders impose on most people. Abd-Al-Azeem, Elsayed, El-Sherbiny and Ahmed (2011) stated that pre-marital screening is mainly aimed at reducing the number of children with inherited diseases. It is a comprehensive group of tests for those who are planning to get married and highly beneficial for the couples going for consanguineous marriage, if either/both have family history of a serious genetic condition, if they are carriers of the same faulty gene, if they have exposure to some chemical or other environmental agents, or if they are with any abnormalities in the chromosomes.

Rogan (2011) opined that objectives of pre-marital genetic screening includes: early recognition of disorder for intervention that prevents or reverses the disease process; or to ensure optimal management of the patient, that is, appropriate referrals to specialists when symptoms are anticipated and, informed reproductive decisions or disease management. El-Hazmi and Warsy (2004) classified the objectives of pre-marital genetic screening into two, viz: primary objective of identifying carriers among prospective couples, to enable carriers to be better informed about genetic risks and reproductive options, and secondary objective of prevention of morbidity due to genetic disease and alleviation of the suffering that this would impose.

Genetic screening is a public health initiative that has been used interchangeably with genetic testing. Testing implies genetic test done on an individual basis while screening implies large scale mainly to alert couples with potential health risks for their future offspring. Genetic testing (also called DNA based tests) is used to test for genetic disorders which involve direct examination of the DNA molecule itself. It allows for genetic diagnosis of those who are vulnerable to inherited diseases. The test could be performed at designated marriage consultation centres by doing simple blood test. The blood taken from couple is used to do such test as Complete Blood Count (CBC), sickle cell test, haemoglobin electrophoresis in addition to screening for HIV, Hepatitis B and C viruses. Genetic testing can also be used to test for genetic disorder
such as sickle cell anaemia, cystic fibrosis, spinal muscular atrophy, mental retardation, epilepsy and Down syndrome. Attitude is a psychological construct which expresses one’s disposition towards an issue. Knowledge about an issue determines attitude towards it which in turn influences the behaviour. Al Sulaiman, Suliman, Al Mishari, Al Sawadi and Owaidah (2008) found that there was positive attitude of Saudi population towards pre-marital screening and the majority of participants agreed that the program should apply to all couples in all regions of Saudi Arabia. Result of the study by Black and Meyer (2009) showed that there was an overall positive attitude toward genetic testing among the respondents aged 14-95 years of German sample. Also, Hassan, Tayel and Shukair (2001) reported that 80.9% of medical students in Alexandria, Egypt, supported the idea of pre-marital examinations. Similar results of a study that assessed the attitude of Pakistani doctors, medical students, lawyers, parliament members and parents of Thalassemic children towards genetic diagnosis found that pre-marital carrier screening was favoured by 77% of the respondents (Gilani, Jadoon, Qaiser, Nasim, Meraj and Nasir, 2007).

According to Al-Khaldi, Al-Sharif, Sadiq and Ziady (2002), the results of a study conducted to explore the attitude of the students of Health Sciences College in Abha, towards pre-marital genetic screening illustrated that 70% of the participants accepted it. The Alexandria study conducted among nursing students showed that 65.5% of them had a positive attitude towards premarital counseling (Mitwally and Abd El-Rahman, 2000). On the other hand, the Syrian study reported that although students had some positive attitude, they still had negative attitude and perceptions towards other aspects of pre-marital screening programme (Gharaibeh and Mater, 2009). Balck and Meyer (2009) submitted that results of a study reported in 2010 from King Abdul-Aziz University found that most of the students favoured the pre-marital screening programme but there were concerns regarding mandating the testing and interference with individual decision making. Hassan, Tayel, and Shukair (2001) reported that the majority of medical students emphasized the free choice of the partners regarding finalizing the marriage whatever the results of pre-marital screening and less than one third had a positive attitude towards the results.

In Nigeria, Polytechnic programme is geared towards providing full-time and part-time courses of instruction and training
in Applied Sciences, Engineering, Business and Management leading to the production of trained manpower. Polytechnic maintains a two-tier programme of studies, viz: the Ordinary National Diploma (OND) and Higher National Diploma (HND) with one year period of industrial experience serving as one of the pre-requisites for entry into the HND programmes (NERDC, 2004). Healthy manpower is vital to national development. Nigeria is a developing country yearning for development. The health and wellbeing of polytechnic students who are potential manpower of the nation should be of great concern. Therefore, this study was designed to find out the attitude of students of Osun State Polytechnics towards pre-marital genetic screening.

**Statement of the Problem**

Egbochukwu and Imogie (2002) stated that Nigeria has the highest number of sickle cell disease sufferers (a genetic disease) in the world with prevalence found to be 10 persons with sickle cell disease per 1,000 population or 2%. Ehigie (1988) carried out a research on knowledge and attitude towards genetic screening for sickle cell disease among secondary school students in Kwara State, Nigeria. The pretest obtained by the students indicated a low level of awareness about sickle cell disease. This is despite the fact that some of them have been exposed to health-related subjects. Therefore, attitude towards pre-marital genetic screening among polytechnic students where health education is not offered as a course may generate some concerns. Most Higher National Diploma students of polytechnics have already attained marriage age; obviously they would want to go into marriage after their academic programmes. Abd-Al-Azeem, et. al. (2011) said that pre-marital genetic screening is a comprehensive group of tests highly necessary for those who are planning to get married, hence, the need for positive attitude towards this life determining issue. It is on this premise that this study examined the attitude towards pre-marital genetic screening among students of Osun State Polytechnics.

**Hypotheses**

1) There will be no significant difference in attitude towards pre-marital genetic screening between students of the two Osun State Polytechnics.
2) There will be no significant difference in the attitude towards pre-marital genetic screening due to religion among students of Osun State Polytechnics.

3) There will be no significant difference in the attitude towards pre-marital genetic screening due to course of study among students of Osun State Polytechnics.

Methodology
The purpose of this study was to examine the attitude towards pre-marital genetic screening among students of Osun State Polytechnics. The descriptive survey research design was used for this study. It was considered appropriate because according to Best and Kahn (2003), descriptive survey is concerned with the condition and relationship which exists, practices that prevail, point of view or attitude that are held, effects that are being felt, processes that are going on or trend that are developing. The population for this study comprised all students of Osun State polytechnics. The sample for this study was one thousand, one hundred and sixty-five (1,165) respondents drawn from Osun State Polytechnics. Osun State Polytechnics are two, viz: Osun State College of Technology, Esa-Oke and Osun State Polytechnic, Iree. Multistage sampling technique was used to select respondents in the following order: stratified sampling technique was used to select the faculties and departments; purposive sampling technique was used to select Higher National Diploma students; while proportionate sample of 25% of the total population was selected from each stratum (department) using simple random sampling technique.

Instrumentation
The instrument used for this study was self developed questionnaire of Students’ Attitude towards Pre-marital Genetic Screening Questionnaire (APGSQ) designed according to variables tested in the hypotheses, using four-point likert scale format. In order to establish the reliability of this instrument, the collected data from pre-testing was subjected to Crombach Alpha Correlation Coefficient. Following this, 0.76 was obtained as the reliability value for this scale.
Result

**Hypothesis 1:** There will be no significant difference in positive attitude towards pre-marital genetic screening between students in the two Osun State Polytechnics.

**Table 1: t-test table showing Difference in Attitude**

<table>
<thead>
<tr>
<th>Attitude</th>
<th>N</th>
<th>Mean</th>
<th>Std.Dev</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>OSCOTECH, Esa-Oke</td>
<td>435</td>
<td>36.90</td>
<td>5.61</td>
<td>.190</td>
</tr>
<tr>
<td>Polytechnic, Iree</td>
<td>730</td>
<td>36.50</td>
<td>5.61</td>
<td></td>
</tr>
</tbody>
</table>

(Crit-t = 1.96, Cal.t = 1.310, df = 1163, P > .05 level of significance). The null hypothesis is accepted.

The t-test table above showed that the calculated t value is 1.310, while the table value is 1.96 and the degree of freedom is 1163. Since significant P (.190) > 0.05, the hypothesis that said there will be no significant difference in positive attitude towards pre-marital genetic screening between students of the two Osun State Polytechnics is hereby accepted. This implies that there was no significant difference in attitude towards pre-marital genetic screening between students of the two Osun State Polytechnics.

**Hypothesis 2:** There will be no significant difference in the attitude towards pre-marital genetic screening due to religion among students of Osun State Polytechnics.

**Table 2: ANOVA table showing difference in Attitude Due to Religion**

<table>
<thead>
<tr>
<th>Source</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Effect</td>
<td>23.501</td>
<td>2</td>
<td>11.750</td>
<td>.372</td>
<td>.689</td>
</tr>
<tr>
<td>Religion</td>
<td>23.501</td>
<td>2</td>
<td>11.750</td>
<td>.372</td>
<td>.689</td>
</tr>
<tr>
<td>Residual</td>
<td>36679.045</td>
<td>1162</td>
<td>31.565</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>36702.546</td>
<td>1164</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(F(2,1162) = .689, P > .05).

In the ANOVA table above, it was observed that there was no significant difference in the attitude towards pre-marital genetic screening due to religion among students of Osun State Polytechnics.
(F(2,1162) = .689, P > .05). Hence, the hypothesis that said there will be no significant difference in the attitude towards pre-marital genetic screening due to religion among students of Osun State Polytechnics was accepted. This implies that there was no significant difference in attitude towards pre-marital genetic screening due to religion among students of Osun State Polytechnics.

towards pre-marital genetic screening due to course of study among students of Osun State Polytechnics.

Table 3: ANOVA table showing difference in Attitude Due to Course of Study

<table>
<thead>
<tr>
<th>Source</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Effect</td>
<td>92.439</td>
<td>5</td>
<td>18.488</td>
<td>.585</td>
<td>.711</td>
</tr>
<tr>
<td>Religion</td>
<td>92.439</td>
<td>5</td>
<td>18.488</td>
<td>.585</td>
<td>.711</td>
</tr>
<tr>
<td>Residual</td>
<td>36679.045</td>
<td>1159</td>
<td>31.565</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>36702.546</td>
<td>1164</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(F(5,1159) = .585, P > .05).

In the ANOVA table above, it was found that there was no significant difference in the attitude towards pre-marital genetic screening due to course of study among students of Osun State polytechnics (F(5,1159) = .585, P > .05). Hence, the hypothesis that said there will be no significant difference due to course of study on the attitude towards pre-marital genetic screening among students of Osun State Polytechnics was accepted. This implies that there was no significant difference in the attitude towards pre-marital genetic screening among students of Osun State Polytechnics due to course of study.

Discussion

Hypothesis 1: The result of the study showed that there was no significant difference in the attitude to pre-marital genetic screening between students of OSCOTEC, Esa-Oke and students of Osun State Polytechnic, Iree. This finding is in line with that of Al-Aama (2010) whose study found no significant difference in the attitude of students towards pre-marital screening for hereditary hemolytic
between schools. Although each of the polytechnic is autonomous, there are similarities in mode of admission; courses of study and mandate. This may have contributed to the finding.

**Hypothesis 2:** The result of this study revealed that there was no significant difference in the attitude towards pre-marital genetic screening due to religion among students of Osun State Polytechnics. This finding is in line with that of Arulogun and Adefioye (2010) which showed that religion had no significant relationship with the attitude of unmarried youths of Ibadan Northwest Local Government Area of Oyo state, Nigeria towards pre-marital HIV screening. However, reports from three different Islamic countries by Karimi, Jamalianm, Yarmohammadi, Askarnejad, Afsasiabi, and Hashemi (2007; Monaghan (2007); and AlKhaldi, Al-Sharif, Sadiq, and Ziady (2002) provided evidence that religious beliefs could be obstacles to the success of pre-marital screening programmes, regardless of other factors such as educational level. Angastiniotis and Hadjiminasstated (1981) found that support from the Church was the main reason for the success of screening programmes in Cyprus and Greece. According to them, religious beliefs restrict the success of screening programmes in some communities. In Southern Iran, pre-marital screening had been mandatory for 10 years, yet high-risk couples still get married and give birth to children with homozygous for beta-thalassaemia, and often, this is because of religious and traditional or cultural restraints (Karimi, Jamalianm, Yarmohammadi, Askarnejad, Afsasiabi, and Hashemi, 2007). It was also reported in the study that in the case of Islam, consanguineous marriages are permitted, so thalassemia persists in some parts of the community, rendering the programme redundant. Some people believe that their fate is determined by God and therefore accept the risk of having a sick child. A recent report in The Jordan Times showed that many Jordanians view the results of their unions as fate (Monaghan, 2007).
Hypothesis 3: The result of this study showed that there was no significant difference in the attitude towards pre-marital genetic screening due to course of study among students of Osun State Polytechnics. This finding was supported by that of Awatif (2006) which studied attitudes among female students in King Saud University and discovered that 86% of them, irrespective of course of study felt positively about pre-marital screening. Similarly, El-Hazmi (2006) assessed attitudes in a community-based study and found that 94% of participants considered pre-marital screening and counseling to be important in preventing genetic blood diseases; 87% thought testing should be mandatory. Also, Al-Khaldi, Al-Sharif, Sadiq, and Ziady (2002) evaluated the attitude of Health Science students in Saudi Arabia towards premarital screening and counseling and found out that most students had a positive attitude.

Furthermore, Ibrahim, Al-Bar, Al-Fakeeh, Al-Ahmadi, Qadi, Al-Bar and Milaat (2011) stated that the difference in the result of their educational programme about pre-marital screening for unmarried female students in King Abdul-Aziz University, Jeddah, and a study done in Alexandria to assess knowledge and attitude of nursing students towards pre-marital counseling may be because Alexandria’s study was done among nursing students only, with some background about the programme, while the other study was done among students from all faculties.

Conclusion
In recent time, inherited abnormalities are assuming wider proportion. New cases of genetically conditioned diseases are being discovered daily. Some of the diseases with clear genetical components are haemophilia, phenylketonuria, thalasemia, sickle cell anaemia, Down syndrome, spinal muscular atrophy and cystic fibrosis. One of the ways by which genetic disease can be prevented is by pre-marital genetic screening. This is because it helps to identify carriers among prospective couples so as to better inform them about genetic risk and probably opt for other reproductive options. Attitude of people of marriageable age towards genetic screening programme is important as it can determine their participation. Hence, the study of attitude towards pre-marital genetic screening among students of Osun State Polytechnics, Nigeria. The study found that there is no difference in the attitude between students of the two polytechnics used for the study.
Attitude of the students was not determined by religious affiliation. It was also revealed that the attitude of the students was not determined by the course of study.

**Recommendations**

Based on the findings of these researchers, the following recommendations were made:

1) Involvement of community leaders and non-governmental organizations in counseling programmes to youth to raise awareness and change their attitude toward marriage between genetically incompatible partners.

2) Religious organizations can serve as useful channel to disseminate this important health information since people always have reference for places of worship and for religious leaders.

3) Ethical principles of justice, autonomy, confidentiality, beneficence and respect for the dignity and basic intelligence of persons should be adhered to because this will go a long way in helping people to embrace pre-marital genetic screening without any reservation.

4) Educational messages on this topic should be simple, explicit but understandable and presented in a manner that does not cause confusion.

5) The present drive to encourage the teaching of Health Education in Polytechnics should be sustained.

**References**


