Awareness and Attitude towards Premarital Health Screening for Choice of Marriage Partner among Undergraduates in the University of Ilorin, Nigeria.

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Abstract

This study investigated the awareness and attitude toward premarital health screening on choice of marriage partner among undergraduates at the University of Ilorin. Premarital health screening is a comprehensive group of test for intending couples to test for genetic information and blood transmitted diseases to prevent any risk of transmitting the disease to their offspring’s. A descriptive research design was employed for this study. Population for the study comprised of 25,569 undergraduates students, University of Ilorin. Multi-stage, Proportionate and Simple random sampling techniques were employed to select 414 respondents. For data collection, the Researchers designed structured questionnaire titled “Pre-marital Screening Questionnaire” (PMSQ) which was validated by three experts from the Department of Health Promotion and Environmental Health Education; University of Ilorin. Using test re-test method for trial test of 30 students who were not part of the study, the data was correlated with Pearson Product Moment Correlation and a reliability coefficient of .82 was obtained. Data collection was conducted by the researchers and four trained research assistants. The null hypotheses were tested using chi-square technique at 0.05 alpha level of significance. The findings of the study among others showed that: awareness of premarital health screening of genetic disorder has significant influence on choice of marriage partner among undergraduates, University of Ilorin. Based on the findings of the study, it was therefore, recommended among others that worthwhile attitude towards premarital health screening for genetic disorder among undergraduate students should be intensified and encouraged so as to prevent any inherited diseases being passed to their offspring.

Keyword: Awareness, Attitude, Premarital health screening, Undergraduates.

Introduction

Sexual activities among adolescents have been reported to be increasing worldwide. Several studies in Sub-Saharan Africa have also documented high and increasing premarital sexual activities among adolescents (World Health Organization, 2006). However, viewing youth as a specific group with their own needs is a relatively recent practice, especially in developing countries (Judith, 1999). Over the years, marriage has been contracted without
recourse to ascertaining the genotype of intending couples. Hence, many families have given
birth to sickle cell children and these children died before them. Unfortunately, couples may
not be equipped to deal with the challenges they face in marriage. Today’s life is very hectic,
population experiences tremendous pressure in all forms of life. There is no bond created by
tradition, heritage or religion, leaving most young people in an atmosphere in which they do
not know what is expected from their partners during their marriage. Match-making is not
quite like match-fixing in sport, it is essential to know about one’s reproductive ability and

Laah and Ayewulu (2010) believed that premarital health screening consist of a
comprehensive group of tests. It is meant especially for those who are planning to get married
and those that care about their partners. The test is designed to identify potential health
problems such as haemoglobinopathies, HIV/AIDS, Hepatitis B, Hemophilia, which may
have an impact on one’s fertility and general wellbeing and also to detect some of the
heritable diseases and infections. Premarital health screening is important because many
people are not aware of their state of health as well as that of the person they want to marry
before going into marriage. An individual might look healthy but may have undetected health
problems that is not shown in the face or be a silent carrier of infectious or hereditary
diseases. A routine blood test can reveal such conditions so that necessary precaution or
treatments can be initiated (Kecler, 2000). In a typical African setting, there is always a
reliable traditional premarital screening mechanism which will enable one to know the family
health and illness history of the families. An extensive investigation of the history of the both
families is usually done before parental consent is given. This method helps in obtaining
useful information on the occurrence of diseases as epilepsy, leprosy and mental illness
(Lewis, 2011). But other significant health problems may not be known except with medical
screening. Lewis (2011) further explained that blood grouping and cross matching before
marriage could also be given consideration in premarital health screening, for instance, if
Rhesus factor (Rh) of both partners are not matching, it can be harmful for the second child
of the couple. However this may be, if such incompatibility is known before hand, precaution
could be taken to avoid any harm to the second child. Special immune globulins, called
RhoGAM are injections that could be taken by the mother immediately after the birth of the
first child to prevent any harm in subsequent pregnancy.
Ahmed (2010) affirmed that premarital health screening enables an individual to assess the general health status, detect presence of infectious diseases such as Human Immune Virus (HIV) and Hepatitis B Infections, screening helps to detect common hereditary conditions that may affect future offspring and screening reveals any fertility problems. Makelele (2005) opined that marriage may be legal, miserable, religious and diseased. Makalele (2005) observed that it is partly due to the colossal ignorance of the public and partly due to the fact that marriage is mainly controlled by lawyers and priest who take no regards for the health status of the so called couples and their offspring. Khater and El-Ghazaly (2003) explained that, it is good to do health screening before marriage as this will prevent Rhesus (Rh) incompatibility. Khater et-al (2003) also observed that the blood group could be A, B, AB, or O and this automatically gives one antibodies in the blood plasma. The implication of this is that if one have group ‘A’ blood, one cannot receive blood that is of group ‘B’ and the vice-versa. If one have group ‘O’ blood, the body will create antibodies to fight group ‘A’ or ‘B’ blood and if it is group ‘AB’ blood one body will not create antibodies for any of the other blood groups.

A study by Joshua and Joshua (2006) in Egypt revealed that gaps in knowledge regarding premarital health screening even among educated people is high. These educated people acquired their knowledge from the mass media and medical personnel. People who responded to information about premarital health screening had favorable attitudes towards premarital counseling and examination of consanguineous marriages, possibly relating to social changes, declining illiteracy, increasing economic pressures, increasing numbers of nuclear families and longer waiting times before starting a family. Joshua and Joshua (2006) reported that people with a negative attitude towards these tests were mostly unmarried males. Joshua and Joshua (2006) therefore suggested that educational programmes about the benefits of premarital health examinations should target unmarried males, so that they can make informed choices about unmarried females and consanguineous marriages. AlKhaldi, Al-Sharif, Al-Sadiq and Ziady (2002) evaluated the attitude of health science students in Saudi Arabia towards premarital health screening and counselling. It was revealed that most students had a positive attitude, but around 25% of the students refused testing and counselling according to their interpretation of Islamic principles. Ahmed (2010) asserted that studies on attitudes among female students in King Saud University discovered that 86% of
them felt positively about premarital health testing. El-Hazmi (2006) also assesses the attitudes of the participants in a community-based study and found out that 94% of participants considered premarital health testing and counseling to be important in preventing genetic blood diseases; 87% thought testing should be mandatory. The Saudi community clearly shows awareness of premarital health testing and its value; Al-Hamdan, Al-Mazrou, Al-Swaidai and Choudary (2007) found out that about 90% of high-risk couples still got married despite knowing their risk of having a sick child. This undermines the high level of awareness identified in other studies.

Morren, Rijken, Banders and Bensing (2007) opined that acceptance of pre-marital health screening is influenced by knowledge and attitude about screening, yet this relationship between acceptance, knowledge and attitude is poorly understood. Bazuaye and Olayemi (2009) reported that despite the abundance of information, the knowledge and attitude of Nigerians towards health screening is worrisome. However, in a study on premarital genetics screening programme in Johor State, Malaysia, Khebir, Adam, Daud and Shahrom (2007) found out that increased knowledge of genetic disorder improves the chance of early detection of potentials genetic disorders. The strategies for reduction of risky marriage and related problems require special skills and attitudinal changes. The strategies include in-depth knowledge about all aspect of marriage through participation and interaction in premarital health screening, marriage counseling and thorough application of universal safety precautions and care, support and treatment for specific clinical problems.

Adeleke, Osayande, Irinoye and Mukoro (2011) opined that the coming together in educational instruction by young boys and girls is usually characterized by multifaceted development experience that include heterosexual interplay which may lead to choosing girl/boyfriend and sometimes end up in becoming husband and wife. They however hinted that the general orientation of school-based relationship is usually predicted on love, companionship, encouragement, intimate, appreciation, emotional security and other empherical things and other things that are important factors such as Rhesus compatibility, genetic compatibility and blood compatibility. Based on afore mentioned, the researcher intends to investigate the knowledge of and attitude toward premarital health screening on choice of marriage partner among undergraduates of University of Ilorin.

**Theoretical Framework:**
Glanz, Rimer and Lewis (2002) explained that the most effective disease reduction strategies include prevention through health education and health promotion. Glanz et al (2002) further hinted that to enhance the effectiveness of genetic education, applying the construction of health belief model (HBM) can be valuable by increasing perceived severity, perceived susceptibility, perceived benefits, self-efficacy and cues to action, while decreasing perceived barriers are actions that encourage participations in recommended health actions.

Statement of the Problem:

It is observed that some students do not have knowledge about premarital health screening and even if they have heard it from the media. It is also discovered that some student’s attitude towards premarital health screening is relatively poor. Also, adequate attention is yet to be given on the need to educate the society at large on human developments and in human genetics, their application in health and wellbeing in developing countries. Moreover, about two of every one hundred births at the maternity wing of University of Ilorin Teaching Hospital have sickle cell anaemia (Black & Meyer, 2009). This report reveals that incidence of sickle cell, trait and sickle cell anaemia among infants in Nigeria is twenty percent and two per cent respectively which is due to the lack of knowledge about their partners genotype and poor attitude towards premarital health screening during their courting.

However, Punch Newspaper (2009) reported that a 10 year old girl was found starved and sleeping on the streets in Yenagoa, Bayelsa State. Some kind-hearted people rescued her and learnt that her parents were separated and she was taken by her mother. When her mother went to live with her new boyfriend, he rejected keeping her as soon as he found out that she had sickle cell anaemia. She was ejected, even though her father had assured her mother that he would continue to bear the cost of her maintenance and education due to their lack of knowledge and poor attitude during their courtship which resulted into the girl. A large number of undergraduate students that are yet to get married need to be enlightened about premarital health screening in order to prevent them and their offspring’s from fallen victims of Sexually Transmitted Infections (STIs), sickle cell and other genetic related diseases. It is on this premise that the researchers’ interest to add to the body of knowledge and investigate
the Knowledge of and Attitude towards Premarital Health Screening on Choice of Marriage Partner among undergraduates, University of Ilorin.

**Purpose of the Study:**

The purpose of the study was to examine awareness and attitude of undergraduates in University of Ilorin towards Premarital Health Screening for Choice of Marriage Partner. Specifically the study sought to:

1. Examine the influence of undergraduates’ awareness of premarital health screening towards genetic disorder and choice of marriage partner.
2. Examine the influence of undergraduates’ attitude towards premarital health screening of genetic disorder and choice of marriage partner.
3. Determine the influence of undergraduates’ attitude towards The following research questions were raised.

**Research Questions:**

The following research questions were raised to guide the study.

1. Does undergraduate students’ awareness about premarital health screening of genetic disorder has any influence on the choice of partner among students in University of Ilorin?
2. Does undergraduate students’ attitude towards premarital health screening of genetic disorder has any influence on the choice of partner among students in University of Ilorin?
3. Does undergraduate students’ attitude towards premarital health screening of STIs has any influence on choice of partner among students in University of Ilorin?

**Null Hypotheses:**

The following null hypotheses were formulated and tested at 0.05 level of significance.

\[ H_{01} \]: Undergraduate students’ awareness of premarital health screening of genetic disorder will not significantly influence their choice of partner among Undergraduate in University of Ilorin.


**Ho2.** Undergraduate students’ attitude towards premarital health screening of genetic disorder will not significantly influence their choice of partner among Undergraduate in University of Ilorin.

**Ho3.** Undergraduate students’ attitude towards premarital health screening of STIs will not significantly influence their choice of partner among Undergraduate in University of Ilorin.

**Methodology**

A descriptive research of survey type was employed for this study. Population for the study comprised of all registered undergraduates student in the University of Ilorin, Kwara State, total of twenty five thousand five hundred and sixty nine 25,569 respondents was used. Multi-stage sampling technique was used for the sample selection. Stratified and sample random sampling technique was used to select five (5) Faculties from the fifteen (15) Faculties in the University of Ilorin, since they already exist in a stratum. Proportionate sampling technique was used to select ten percent (10%) from the targeted population which was four hundred and fourteen (414) respondents, while simple random sampling technique was used to select the respondents. Researchers designed a structured questionnaire titled “Pre-marital Screening Questionnaire” (PMSQ) which was validated by three experts from the Department of Health Promotion and Environmental Health Education; University of Ilorin and tested for reliability using Pearson Product Moment Correlation and a correlation coefficient of .82 was obtained.

The consent of each respondent was sought, privacy was provided, confidentiality pledged and ethical approval was obtained from University of Ilorin, Kwara State before the administration and collection of data. The instrument was administered by the researcher with three research assistants. The data collected were arranged, edited, coded and entered for processing and data analysis with the use of inferential statistics of chi-square using statistical package for social science (SPSS) version 20.0 to test the postulated hypothesis at 0.05 level of significance.
Result

**Hypotheses 1:** Students’ awareness about premarital health screening of genetic disorder will not significantly influence their marriage choice of partner among undergraduates, University of Ilorin.

**Table 1: Chi-square analysis of awareness about premarital health screening of genetic disorder and their choice of marriage partner among undergraduates, University of Ilorin.**

<table>
<thead>
<tr>
<th>S/N</th>
<th>ITEMS</th>
<th>SA</th>
<th>A</th>
<th>D</th>
<th>SD</th>
<th>ROW TOTAL</th>
<th>DF</th>
<th>CAL $\chi^2$ VALUE</th>
<th>TABLE $\chi^2$ VALUE</th>
<th>REMARKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Genetics diseases is incurable. Premarital health screening is essential to marital decision to prevent gene disorder.</td>
<td>312</td>
<td>98</td>
<td>4</td>
<td>0</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Premarital health screening prevents diseases that may lead to the health problems of offspring.</td>
<td>247</td>
<td>153</td>
<td>10</td>
<td>4</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Premarital health screening prevents genetic disorder.</td>
<td>400</td>
<td>12</td>
<td>2</td>
<td>0</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Premarital health screening prevents genetic disorder of stillbirth.</td>
<td>310</td>
<td>94</td>
<td>9</td>
<td>1</td>
<td>414</td>
<td>15</td>
<td>325.44</td>
<td>25.00</td>
<td>Ho Rejected</td>
</tr>
<tr>
<td>5</td>
<td>Premarital health screening prevents genetic disorder of stillbirth.</td>
<td>257</td>
<td>134</td>
<td>20</td>
<td>3</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Premarital screening enables the partner to know the level of their sperm count/ seminalitis.</td>
<td>216</td>
<td>90</td>
<td>6</td>
<td>2</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Column</strong></td>
<td><strong>1742</strong></td>
<td><strong>681</strong></td>
<td><strong>51</strong></td>
<td><strong>10</strong></td>
<td><strong>2484</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

@0.05 alpha level of significance

The findings from Table 1 revealed that the calculated chi-square value of 325.44 and the table $\chi^2$ value is 25.00 with the degree of freedom 15 at 0.05 alpha level of significance. Since the calculated $\chi^2$ value of 325.44 is greater than the table $\chi^2$ value of 25.00 at 15 degree of freedom, the null hypotheses is therefore rejected. This implies that student’s awareness premarital health screening of genetic disorder have significant influence on the choice of marriage partner among undergraduates, University of Ilorin. The finding revealed that premarital health screening prevents genetic disorder of genotype problem as a result of sickle cell diseases from being passed from parents to offspring’s.
Hypotheses 2: Students’ attitude towards premarital health screening of genetic disorder will not significantly influence their marriage choice of partner among undergraduates, University of Ilorin.

Table 2: Chi-square analysis of attitude towards premarital health screening of genetic disorder and the choice of marriage partner among undergraduate, University of Ilorin.

<table>
<thead>
<tr>
<th>S/N</th>
<th>ITEMS</th>
<th>SA</th>
<th>A</th>
<th>D</th>
<th>SD</th>
<th>ROW TOTAL</th>
<th>DF</th>
<th>CAL x² VALUE</th>
<th>TABLE x² VALUE</th>
<th>REMARKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Undergraduate students show less concerns toward the threat of incompatibility that premarital H/S exposes.</td>
<td>136 (32.9%)</td>
<td>272 (65.7%)</td>
<td>5 (1.2%)</td>
<td>1 (0.2%)</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intended couples behave abnormally during premarital health screening.</td>
<td>136 (32.9%)</td>
<td>273 (65.9%)</td>
<td>5 (1.2%)</td>
<td>0 (0%)</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Sentiments are placed during premarital health screening services.</td>
<td>309 (74.6%)</td>
<td>105 (25.4%)</td>
<td>0 (0%)</td>
<td>1 (0.2%)</td>
<td>414</td>
<td>12</td>
<td>426.25</td>
<td>21.03</td>
<td>Ho Rejected</td>
</tr>
<tr>
<td>10</td>
<td>Undergraduate students neglect premarital health screening due to fear of negative results.</td>
<td>330 (79.7%)</td>
<td>80 (19.3%)</td>
<td>2 (0.5%)</td>
<td>3 (0.7%)</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Poor attitude towards premarital health screening leads to genetic disorder</td>
<td>337 (81.4%)</td>
<td>70 (16.9%)</td>
<td>2 (0.5%)</td>
<td>3 (0.7%)</td>
<td>414</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Column Total</strong></td>
<td><strong>1742</strong></td>
<td><strong>681</strong></td>
<td><strong>51</strong></td>
<td><strong>10</strong></td>
<td><strong>2484</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

@0.05 alpha level of significance

The findings from the analysis in the Table 2 reveals that the calculated chi-square value of 426.25 and the table x² value is 21.03 with the degree of freedom 12 at 0.05 alpha level of significance. Since the calculated chi-square value of 426.25 is greater than the table x² value of 21.03 at 12 degree of freedom, the null hypotheses is therefore rejected. This implies that students attitude towards premarital health screening of genetic disorder have significant influence on their choice of marriage partner among undergraduates in University of Ilorin. This reveals that poor attitude of students towards premarital health screening can leads to genetic disorder among undergraduate, University of Ilorin.

Hypotheses 3: Students’ attitude toward premarital health screening of STIs will not significantly influence their choice of marriage partner among undergraduate, University of Ilorin.
Table 3: Chi-square analysis of the attitude toward premarital health screening of STIs and the choice of marriage partner among undergraduate, University of Ilorin.

<table>
<thead>
<tr>
<th>S/N</th>
<th>ITEMS</th>
<th>SA</th>
<th>A</th>
<th>D</th>
<th>SD</th>
<th>ROW TOTAL</th>
<th>DF</th>
<th>CAL x² VALUE</th>
<th>TABLE x² VALUE</th>
<th>REMARKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Premarital health screening/STIs are avoided because of the fear of exposure of STIs.</td>
<td>349</td>
<td>(84.3%)</td>
<td>60</td>
<td>(14.5%)</td>
<td>2</td>
<td>(0.5%)</td>
<td>3</td>
<td>(0.7%)</td>
<td>414</td>
</tr>
<tr>
<td>13</td>
<td>Individual displays poor attitude towards premarital health screening because of the exposure of gonorrhea diseases in them</td>
<td>216</td>
<td>(52.2%)</td>
<td>192</td>
<td>(46.4%)</td>
<td>4</td>
<td>(1.0%)</td>
<td>2</td>
<td>(0.5%)</td>
<td>414</td>
</tr>
<tr>
<td>14</td>
<td>Individual avoid premarital health screening because of the exposure Hepatitis B infection.</td>
<td>215</td>
<td>(51.9%)</td>
<td>190</td>
<td>(45.9%)</td>
<td>4</td>
<td>(1.0%)</td>
<td>5</td>
<td>(1.2%)</td>
<td>414</td>
</tr>
<tr>
<td>15</td>
<td>Individual avoid premarital health screening to avoid syphilis diseases.</td>
<td>136</td>
<td>(32.9%)</td>
<td>272</td>
<td>(65.7%)</td>
<td>5</td>
<td>(1.2%)</td>
<td>1</td>
<td>(0.2%)</td>
<td>414</td>
</tr>
<tr>
<td>16</td>
<td>Individual avoids premarital health screening not to show incompatibility as a result of blood screening.</td>
<td>272</td>
<td>(65.7%)</td>
<td>136</td>
<td>(32.9%)</td>
<td>5</td>
<td>(1.2%)</td>
<td>1</td>
<td>(0.2%)</td>
<td>414</td>
</tr>
<tr>
<td>17</td>
<td>Individual avoids premarital health screening because of the long courtship they do not want to break</td>
<td>334</td>
<td>(80.7%)</td>
<td>80</td>
<td>(18.5%)</td>
<td>0</td>
<td>(0%)</td>
<td>0</td>
<td>(0%)</td>
<td>414</td>
</tr>
<tr>
<td></td>
<td>Column Total</td>
<td>1522</td>
<td>930</td>
<td>20</td>
<td>12</td>
<td>2484</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The findings from the analysis in the Table 3, shows that the calculated chi-square value is 337.71 and the table x² value is 25.00 with the degree of freedom 15 at 0.05 alpha level of significance. Since the calculated x² value of 337.71 is greater than the table value of 25.00 at 15 degree of freedom, the null hypotheses is therefore rejected. This implies that students attitude towards premarital health screening of STIs have significant influence on their choice of marriage partner among undergraduates, University of Ilorin. The implication of this is that if premarital health screenings is avoided because of the fear of exposure of various sexually transmitted diseases among undergraduate, University of Ilorin. The students may have problem in nearly future.
Data Discussion

Hypothesis one on Table 1 stated that undergraduate students’ knowledge of premarital health screening of genetic disorder will not significantly influence their choice of marriage partner among undergraduates, University of Ilorin. The result of the tested hypothesis one shows that students’ knowledge of pre-marital health screening of genetic disorder have significantly influence on their choice of marriage partner among undergraduate, University of Ilorin. The finding is in support of the finding of Abd-Al-Azeem, El-Sherbin & Ahmed (2011), who affirmed that knowledge of pre-marital health screening in genetic disorder allow individuals or persons to take steps to reduce the risk of being a carrier and for people been in an increased risk of certain disorder, health care professionals may recommend frequent screening at early state of relationship which will help them on the choice of marriage partner to prevent and decrease the chance of coping with the disorder. The study shows some early benefits of the premarital health screening in prevention of the targeted genetic disorder and confirmed that the pre-marital health screening helped in early detection of the diseases/disorder before passing to the offsprings.

Hypothesis two on Table 2 stated that undergraduate student attitude towards premarital health screening of genetic disorder will not significantly influence the choice of partner among undergraduates, University of Ilorin. The result of the hypothesis revealed that students attitude towards premarital health screening of genetic disorder have significant influence on the choice of marriage partner among undergraduates, University of Ilorin. The finding is in line with the work of Black and Meyer (2009) which revealed that there was an overall positive attitude towards genetic disorder testing among the respondents in a study carried out. It was further supported by MItwally and Abd-Rahaman (2000) who reported that nursing students showed positive attitude premarital health screening as a means of preventing the spread of genetic disorder before marriage.

Hypothesis three on Table 3, stated that student’s attitude toward premarital health screening of STIs will not significantly influence the choice of marriage partner among undergraduates, University of Ilorin. The result of the tested hypothesis 3 shows that there is a significant influence of student attitude towards premarital health screening of STIs among undergraduates, University of Ilorin. This findings is in accordance with Anyiam-Osigwe and
Okudo (2006) who revealed that attitude of the youth are more susceptible to STIs, HIV/AIDS, gonorrhea and that every 15 seconds, one young person is infected with HIV/AIDS, gonorrhea with poor attitudes to the prevention of the infection. This findings was in a contrary to the findings of Joshua and Joshua (2006) who that posited that no significant difference existed among male and females in their attitude towards STIs campaign during a study carried out.

**Conclusion**

Students’ awareness about premarital health screening of genetic disorder influenced their choice of marriage partner among undergraduates, University of Ilorin, Students’ attitude towards premarital health screening of genetic disorder influenced their choice of marriage partner among undergraduates, University of Ilorin, Students’ attitude towards premarital health screening of STIs influenced their choice of marriage partner among undergraduates, University of Ilorin.

**Policy recommendations**

Based on the findings and conclusion drawn from this study, the following recommendations were made:

1. Premarital health screening for genetic disorder among undergraduate students should be intensified so as to prevent any inherited diseases being passed to their offspring’s.

2. Adequate and immediate concern towards the threats of incompatibility that premarital health screening of genetic disorder would have should be intensify among undergraduate students to prevent the risk of producing sickle cell patients.

3. Undergraduate students should be sensitized and encouraged on premarital health screening of genetic disorder.

4. Students should be encouraged to carry out premarital health screening to reduce the risk of spreading sexually transmitted infection such as syphilis,
Hepatitis B, Gonorrhea among undergraduate students since it influence their choice of marriage partner.

References


