



(REVIEW ARTICLE)



Sexually transmitted infections and mental health: Integrative review

Lucas Fernandes de Oliveira ^{1,*}, Louise Almeida Lima Freitas ², Maria Alix Leite Araújo ¹, Ana Fátima Braga Rocha ¹ and Ana Karinne Dantas de Oliveira ³

¹ Graduate Program in Collective Health, University of Fortaleza (UNIFOR). Fortaleza, Ceará, Brazil.

² Graduation in Nursing, University of Fortaleza (UNIFOR). Fortaleza, Ceará, Brazil.

³ Graduate Program in Public Health, University State of Ceará (UECE). Fortaleza, Ceará, Brazil.

World Journal of Advanced Research and Reviews, 2023, 18(01), 879–884

Publication history: Received on 07 March 2023; revised on 15 April 2023; accepted on 18 April 2023

Article DOI: <https://doi.org/10.30574/wjarr.2023.18.1.0672>

Abstract

Mental disorders increase the risk of developing diseases and lack of self-care, with Sexually Transmitted Infections (STIs) being one of the major causes of infection in this group. This study is an integrative review with the objective of answering the guiding questions: Which professional category is most public on the subject? What are the years of greatest publication? Which journal published the most on the subject? Which region has the largest number of publications on the subject? What is the population cited in the studies? Given the inclusion criteria, four articles were selected. Because it is a serious problem to be faced by professionals, as well as the need to advance in care and care practices for a comprehensive and positive care, aiming to reduce the incidence of STIs in this population.

Keywords: Sexually Transmitted Diseases; Sexual Health; Mental Disorders; Comprehensive Health Care

1. Introduction

Sexuality still presents social stigmas, although sexual rights are inserted in national and largely international guidelines so that it can improve the collective discussion [1, 2]. We are socially vulnerable to several pathologies, being no different for Sexually Transmitted Infections (STI), however, people who present mental disorders present higher rates of infections [3].

The Pan American Health Organization (PAHO) highlights that 36.5% of the Brazilian population has some disability due to mental disorders, substance use or suicide. Being 9.3% depressive disorder, 7.5% anxiety, 1.1% self-injury and suicide, 1.6% disability due to schizophrenia, 1.4% bipolar disorder, 0.6% disability due to alcohol use disorders, 0.8% disability due to substance abuse disorders, 2.3% due to disorders of habitual onset in childhood and adolescence [4, 5].

The above paragraph shows the large number of people who present some cerebral dysfunction, evidencing a failure of treatment and/or follow-up, which makes it possible to not control the prevalent cases in the country. The assumption of integrality in health care provides that, in the assistance provided, the user should be seen in an integral way by the professional, and that the health system should be able to meet the user's needs at all levels of care. However, there are concerns about the new demands that social insertion and reinsertion establish, including those related to the integrality of health that, more broadly, is included in the social problems of people with mental disorders.

The interconnection of issues with STIs and mental disorders are often treated with prejudice, which causes suffering to the people who experience them, as well as their families, due to the stigma that surrounds them. The sexuality of the mentally ill is part of a social masking or repeated denial in the institutional and professional context. People with

* Corresponding author: Lucas Fernandes de Oliveira

mental disorders are seen as asexual or with a sexuality to be repressed, which is believed to be the hindering reason for health promotion actions for this demand in health services [1, 6].

This population suffers social exclusion and prejudice, maximizing difficulties for self-care [7]. A national multicenter cross-sectional study conducted in 11 public psychiatric hospitals and 15 public mental health clinics (CAPS) in Brazil in 2009 involved adults with mental illness who were randomly selected without taking into account their diagnosis. It obtained a sample of 2,475 interviewed patients, a lifetime prevalence of unprotected sex of 88.8%, and only 8% of the interviewees used condoms during their lives. The general seroprevalences were syphilis 1.12%, HIV 0.80%, HBsAg 1.64%, anti-HBc 14.7% and anti-HCV 2.63%. Evidencing that adults with mental illness in Brazil increase the risk of acquiring any curable or non-curable STI compared to other population groups [3].

Therefore, this study aims to analyze, in the national and international scientific production, the publications about the relationship between mental disorders and STIs, identifying the diffusion of the theme in scientific journals in the last decades. To identify the years of greater publication of articles on the theme, which periodicals most published on the theme, regions of publication of the studies, professional category of the main authors. To present the population studied and the results found, in order to raise data that can help identify factors involved in providing attention to this theme.

2. Methodology

This is an integrative review, which seeks to summarize the results of available research in full and show mainly the conclusions of the corpus of literature on a specific phenomenon, thus comprising the studies related to the guiding question in the literature [8]. The study occurs in a systematic and ordered manner, contributing to the deepening of knowledge about the investigated theme. It consists of six steps:

- Identification of the theme and formulation of the hypothesis or research question;
- Establishment of inclusion and exclusion criteria;
- Definition of the information to be extracted from the selected studies (guiding questions);
- Evaluation of the studies included in the integrative review;
- Interpretation of results;
- Presentation of the review (synthesis of knowledge) [9].

The integrative review aimed to answer the guiding questions: Which professional category publishes the most on the subject? What are the years of greatest publication? Which journal has most published on the theme? Which region has the largest number of publications on the theme? What population is cited in the studies? A synthesis of the data collected from the selected files was then carried out. Data collection was carried out in August and September 2022 in the Virtual Health Library (VHL), Latin American and Caribbean Literature on Health Sciences (LILACS), Scientific Electronic Library Online (SciELO), Medical Literature Analysis and Retrieval System Online (MEDLINE) and Nursing Databases (BDENF) including studies on the theme published in journals from 2010 to 2019.

Inclusion criteria were: journals with QUALIS A1, A2 and B1, articles available entirely in Portuguese, national and international nursing journals. Exclusion criteria: case reports, articles published in English, Spanish or any other language, studies that did not follow the theme and period. We used the descriptors in health sciences (DeCS): Sexually transmitted diseases (STD) AND mental disorders, Sexually Transmitted Infections (STI) AND mental disorders, Assumption of sexuality AND mental disorders.

The data were presented in tables with information about the selected articles aiming at the systematization of the review: data regarding authorship (name and profession of the main author) and data regarding publication (indexation base 0s, year, journal, region, population/subject of study, and main results). This information allowed the data analysis with the purpose of answering the guiding questions. Since this was a study that used secondary data, there was no need to submit it to the Ethics and Research in Human Beings Committee. The "integrative term originates from the integration of opinions, concepts or ideas from the researches used in the method" [10]. Electronic databases were chosen as a source of bibliographic information, in order to obtain research results from other authors, with the objective of theoretically grounding our theme [11].

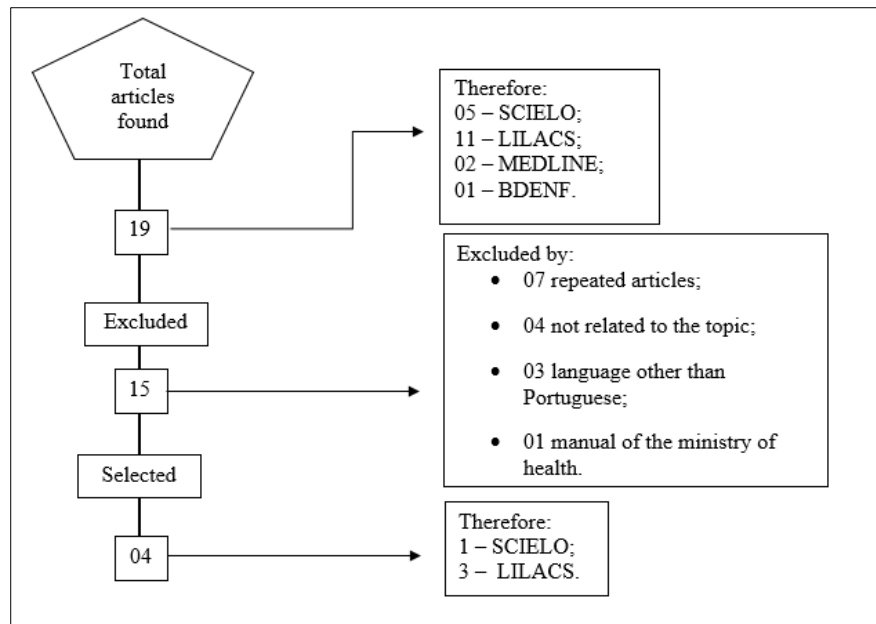


Figure 1 Flowchart of the article selection steps

3. Results

The collection was carried out through digital libraries, resulting in 19 (nineteen) articles, 5 (five) in the Scientific Electronic Library Online (SciELO), 11 (eleven) in the Latin American and Caribbean Literature on Health Sciences (LILACS), 2 (two) Medical Literature Analysis and Retrieval System Online (MEDLINE) and 1 (one) in the Nursing Data Base (BDENF), of which only 4 (four) met the inclusion criteria, and 15 (fifteen) were excluded. Thus, articles that were repeated (the first one being kept), the Ministry of Health Manual, articles unrelated to the theme, with text in a language other than Portuguese or that met the inclusion criteria were excluded.

From an analysis of the selected studies according to the digital library made available, qualis of the journals, year of publication, type of study and title, it was possible to verify that the QUALIS in nursing of the journals that published on the theme are all B1, with three articles in the Latin American and Caribbean Literature in Sciences (LILACS) database and one in the Scientific Electronic Library Online (SciELO). The articles had distinct years of publication, 2011, 2014, 2015 and 2018. It was observed that all of them are articles with a qualitative approach.

The professional category that published the most in the interval from 2010 to 2019 was nursing, according to the selected data. There was also education sciences and one article published by the Institute of Psychiatry of the Federal University of Rio de Janeiro, where the professional category could not be determined. All the articles found were carried out in the southeast region of Brazil. As for the population, two articles brought health professionals, one of women with severe and persistent mental disorders and another of men with severe and persistent mental disorders.

Table 1 shows the objective and conclusion of the selected publications. Article one aims to analyze the sexual experiences of women in order to analyze their way of life based on their culture, way of thinking and living. Article two sought to advance prevention actions for STIs and analyze the perceptions of men with mental disorders. In the third study, the objective was to understand how professionals deal with issues of sexuality in patients with cognitive deficit. The fourth study aimed to analyze the perceptions and practices of mental health professionals on the subject. It is noteworthy that all articles were efficient in reaching their objectives, with satisfactory results.

The proposal of sexual health promotion in patients who present mental problems is highlighted by the difficulty of approach or the non-approach of the theme by professionals and patients, exposed by the article number one. In article two, the lack of practices and conducts that provide the individual with knowledge and self-care to prevent STIs is highlighted, showing the vulnerability and high incidence of this public that has cognitive problems.

Furthermore, it was highlighted the need to demystify the subject, combat prejudice and offer support and respect to the population in health services. Both articles above, identify cases of sexual violence that happened to patients within health institutions. Articles two and three have equivalent conclusions, where they exposed urgency in improving the

care provided by mental health professionals when attending sexual health complaints, with the need for the development of new approaches and training of professionals, where the comprehensive care to this patient includes sexuality, self-care related to the prevention of infections that pass through sexual intercourse.

The results presented in article number four reveal the need for improvement in the care provided by health care professionals, as a possible tool to improve care, adding satisfactory results to the theme in the undergraduate and graduate curricula, as well as a positive reflection on care practice.

Table 1 Purpose and conclusion of the articles according to the inclusion criteria

| Nº | Library | Qualis Nursing | Periodic | Year of Publication | Method | Title |
|----|-----------------|----------------|--|---------------------|-------------|--|
| 1 | LILACS | B1 | REME Journal - mineira magazine of nursing | 2011 | Qualitative | Vulnerability in the face of Sexually Transmitted Infections and HIV/AIDS in the sexual scripts of women with mental disorders. |
| 2 | Scielo | B1 | Health and Society Magazine | 2014 | Qualitative | Perceptions of men with mental disorders about risk and self-care in the face of sexually transmitted infections. |
| 3 | LILACS, Scielo. | B1 | Science and Public Health | 2015 | Qualitative | Addressing sexuality as an essential aspect of integral care for people with mental disorders |
| 4 | LILACS | B1 | Public Health Notebooks | 2018 | Qualitative | Sexuality and STI/AIDS prevention in mental health care: the look and practice of professionals in the municipality of Rio de Janeiro, Brazil. |

4. Discussion

Corroborating with the data collected by Mann and Monteiro [2018], presents patients suffering from mental disorders are more vulnerable to contract an infection by some STI, curable or not compared to other population groups. The risk of this group is a reflection of their social context, sexual practices and behaviors, ignorance of self-care practices. Therefore, the attributions of the health professional are related to patient care practices, since the professional should start a dialogue about sexual health, self-care, health education for family members with positive repercussions on sexual relations and mental health.

Communications between health services is still perceived as a problem faced in Brazil [13]. Once that even supported by mental health and STI policies that stimulate practices in the territory and having an expanded network of services, it is perceived gaps in the organization of services. The health units do not have an active virtual communication, being one of the factors that makes the integral and concrete care of the patient impossible, since outside their territory the health professional cannot search for information that is pertinent to the continuation of care based on reports of previous professionals of the person, as well as the non-visualization of requested exams [14].

It is possible to observe the growth of sectoral policies in health, being reflected in improvements in the communication in their territories, however, this factor only bases the construction of local processes, advances and reforms in unique territories. The insufficiency in the health network for people does not provide integral attention to those suffering from mental health, nor does it follow up on STIs. The lack of connection between health services becomes a complicating factor for HIV carriers, not being associated with primary health care, increasing the degree of vulnerability of these patients with mental health and commonly STI [14].

Vulnerability factors of mental health users in relation to HIV are related to the non-stable union with sexual partners, bringing economic and social difficulties, these disadvantages provide the frequency of sexual abuse of the mentally ill, consequently to the critical judgment. Other factors, such as impulsiveness, damaged self-esteem conditioned to the patient with mental disorder, are added to the difficulties of professionals to address a stigmatized issue such as STIs to these patients with promise the activities proposed by professionals for a resolute approach [15].

Preventive actions in institutions and social environments increase risk factors, thus the prevention of STIs in this population occurs less daily. On the other hand, the lack of information to patients and family members is perceived, depriving them of their sexual rights, as well as corroborating the sexual abuse and exploitation of the subject, once it is perceived the lack of information of this certain population.

Given the precarious communication and institutional guidelines that address communication between health units of different care, it is possible to identify that STI services are rarely addressed in mental health patients, other demands of users are evident and end up standing out on the issue of sexual and reproductive health. The limitations of this study are that it was conducted using data available in the open literature, which may result in not using all the studies made available for free.

5. Conclusion

From the individual results of the articles respecting the inclusion criteria, common points were perceived in the studies, such as vulnerability of sexuality, lack of guidance on sexual intercourse and sexually transmitted infections in patients with mental disorders, showing an incidence in male and female patients. The selected studies reveal situations of sexual violence, where the victims report not knowing that it was violence, showing the high vulnerability and lack of knowledge about sexual violence. The study population were the health professionals brought similar conclusions, pointing out the need to improve the quality of care, better train health professionals, highlighting the existing gaps in the assistance to patients with mental disorders.

It is worth highlighting the need to look at the psychiatric client as an integral being with human rights, which need to be clarified for patients and legal caregivers. Because it is a serious problem to be faced by professionals, as well as the need to advance in care and care practices for a comprehensive and positive assistance, aiming to reduce the incidence of STIs in this population by providing care from the professional and patient empathy, developing trust so that the patient feels comfortable in reporting health concerns, promoting essential support to minimize the incidences of infection through sexual intercourse.

Compliance with ethical standards

Acknowledgments

The authors are grateful to University of Fortaleza for the structure and incentive to research and thank the post-graduation program in collective health.

Disclosure of conflict of interest

Authors have declared that no conflict of interests exists.

References

- [1] Botelho LLRB, Cunha CCA, Macedo M. The Integrative Review Method in Organizational Studies. *Management and Society*. 2011; 5(11): 121-136.
- [2] Mendes KDS, Silveira RCCP, Galvão CM. Integrative review: research method for incorporating evidence in health and nursing. *Text & Context - Nursing*. 2008; 17(4): 758–764.
- [3] Guimarães MDC, Campos LD, Melo, APS, Carmo RA, Machado CJ, Aurcio FS. Prevalence of HIV, syphilis, hepatitis B and C among adults with mental illness: a multicenter study in Brazil. *Brazilian Journal of Psychiatry*. 2009; 31(1):43-7.
- [4] Brito PF, Oliveira CC. The denied sexuality of the mentally ill: perceptions of the sexuality of the mentally ill by health care professionals. *Sciences & Cognition*. 2009; 14(1):246-254.
- [5] PAHO - Pan American Health Organization [Internet]. Burden of mental disorders in the Region of the Americas, 2018. Washington, D.C.: PAHO; 2018.[s.l: n.d.] [cited 2023 Jan 23]. Available from https://iris.paho.org/bitstream/handle/10665.2/49578/9789275320280_spa.pdf?sequence=9
- [6] Souza MCMR. Representations of mental health professionals about sexuality of people with mental disorders. Federal University of Minas Gerais. Minas Gerais; 2014.

- [7] Miranda FANM, Antonia RFF. Social representations of the performance of psychiatric nurses in everyday life. *Psychology: Theory and Practice*. 2004; 6: 67-78.
- [8] Barbosa JAG, Souza MCMRS, Freitas MIF. The approach to sexuality as an essential aspect of integral care for people with mental disorders. *Science & Collective Health*. 2015; 20(7): 2165–2172.
- [9] Crossetti MGO. Integrative review of research in nursing: the scientific rigor required of it. *Revista Gaúcha de Enfermagem*. 2012; 33(2): 8-9.
- [10] BRASIL. Ministry of Health. Sexual health and reproductive health ministry of health. 1ed. Public Health Booklet. Brasilia: [s.n.], 2013. [cited 2023 Feb 14]. Available from https://bvsms.saude.gov.br/bvs/publicacoes/saude_sexual_saude_reprodutiva.pdf
- [11] Whittmore R, Kathleen K. The integrative review: Updated methodology. *Journal of Advanced Nursing*. 2015; 52(5): 546–553.
- [12] Claudio Gruber Mann, Simone Monteiro. Sexuality and STD/AIDS prevention in mental health care: the views and practices of mental health professionals in the city of Rio de Janeiro, Brazil. *Cad. Saúde Pública*. 2018; 34: (7).
- [13] Rufino AC, Madeiro AP. Teaching sexuality in Brazilian medical schools. *Einstein (São Paulo)* 2015; 13.
- [14] Andrade AP, Maluf SW. Everyday life and trajectories of subjects in the context of Brazilian Psychiatric Reform. In: Fleisher S, Ferreira J, organizers. *Etnographies in health services*. Rio de Janeiro: Garamond; 2014. p. 33-56.
- [15] Ribeiro BT, Pinto DS, Mann CG. Mental healthcare professionals' role performance: challenges in the institutional order of a psychiatric hospital. In: Hamilton HE, Chou W-YS, editors. *The Routledge handbook of language and health communication*. Abingdon: Routledge; 2014. p. 389-406.