HIV/AIDS awareness level of urban and rural adolescents in EDO state, Nigeria: Implication for counselling

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Abstract

HIV/AIDS pandemic awareness among adolescents, no doubt is of great importance to the developed and the developing countries. The major objective of this study was the investigation of HIV/AIDS awareness among adolescents in Edo State Nigeria, with specific focus on urban and rural dwellers, sex and the age of the adolescents. The survey method was adopted for the study. A well structured questionnaire was designed to elicit information on the respondents level of HIV/AIDS awareness. Three research questions and three hypotheses were formulated to guide the study. Data was analysed using percentages and T-test. Results showed no significant difference between urban and rural dwellers in their HIV/AIDS awareness level. Sex and age of respondents did not significantly determine their level of HIV/AIDS awareness. It is recommended that in addition to existing structures and effort being made by government and non-governmental agencies to sensitize the people about the HIV/AIDS scourge, there should be home/school visitations by Health workers, with a view to reaching every individual in the community irrespective of age. During such visits emphasis should be on educating the people on the causes, mode of transmission, prevention and effects of HIV/AIDS pandemic.

Keywords: HIV/AIDS, Adolescent, Sex, Urban, Rural, Age


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1. Introduction

The adolescent period has been described as a period of storm and stress, it is a transition period from childhood to adulthood, characterized by hormonal changes, sexual growth, emotional, cognitive and psychological development, adolescents at this stage could be predisposed to contracting HIV/AIDS. The adolescent constitute 20% of the world population with majority (85%) of them in developing countries. Recent studies indicate that most adolescents engage in risky sexual behaviour, which may predispose them to the HIV/AIDS pandemic, sexually transmitted diseases, early pregnancy and dropout from school. Keating (2006) reported that, HIV/AIDS is a serious concern in Nigeria today because the estimated annual deaths as a result of the disease have increased from 50,000 in 1999 to over 350,000 in 2004. Also Chikonzo (2005) reported that sub-Saharan Africa is the region most affected by HIV/AIDS. An estimated 25.4 million people in the region are living with the disease, also approximately 3.1 million new infections occurred in 2004. It was reported that by 2005 the epidemic would have claimed an estimated 2.5 million lives, with more than 2 million children under the age of fifteen living with HIV and more than 12 million children orphaned by AIDS (Virtual Institute for Higher Education in Africa, 2004).

Komolafe (1999) cited the findings of Piot et al. (1999) that about half the number of infected people die within 5-10 years and that HIV has become endemic in parts of Africa, while the estimated number of affected individuals are in millions. They also observed that in most part of Africa, HIV has become a major public health problem of the same magnitude as malaria, diarrhea and malnutrition.

Therefore, with the high proportion of HIV infected individual in sub Saharan Africa and Nigeria in particular, it becomes imperative that the awareness level of the HIV/AIDS pandemic among adolescents should be investigated with a view to proffering solutions towards getting the adolescents who are leaders of tomorrow more acquainted with ways of preventing the pandemic. According to Wagbatsoma and Okojie (2006), HIV/AIDS is one of the various sexually transmitted infections in the world today and ranks 10th among the world’s killer diseases. World Health Organisation (2009) stated that, 94,000 males form the age group of 15 or over and 27,000 females within the same age range are living with HIV in Pakistan and 5000 deaths due to HIV is reported to date. Parker (2000) is of the view that there is the need to yearly review the awareness level of this disease.

2. Literature review

Many studies on the awareness of adolescents about HIV/AIDS indicates that most adolescents are aware of the pandemic. HIV/AIDS awareness as regards the impact of age indicates that age is positively related to knowledge and information, Schvaneveldt (1990), found that United States children’s stage of development correlated with the accuracy of their replies to questions about AIDS. In a related study, Bulow (1998); Koniak-Griffin and Brecht (1997) investigated developmental concepts in relation to AIDS and found that risk taking behaviour in adolescence is positively related to both age and knowledge of AIDS. James et al. (2004) found that adolescents knowledge level about HIV/AIDS/STI were high for causes and spread of STIs.
Studies by Sekirime et al. (2001) in Uganda revealed that males were three times more likely to contract STDs than females, knowledge on methods of prevention about STDs was high. Blan and Way (1998) in a study on women knowledge about AIDS and its prevention found that majority of women adolescents know about contraceptive methods. In a study in Nigeria by Odujinrin and Akinkuade (1991), 96% adolescent respondents claimed to have heard about AIDS, but only 37.9% knew that it is caused by a virus, most of the respondents indicated mode of transmission as the causative agent.

Research findings also indicates that many young people are poorly informed about sexual issues and HIV/AIDS. McCauley and Salter (1995) and Bott and Jejeebhoy (2001) asserted that young people are poorly informed when it comes to sexual issues. This may be attributed to low level of school attendance, lack of sex education and attitudes that prohibit discussion of sexual issues especially in a cultural conservative country like Nigeria, where sexual issues are treated as taboos. WHO (1988) study reported that students were aware of AIDS, but had poor knowledge of the causes of the disease. In a study by Campell and Mbizvo (1994), they found that 75% boys reported that they received information about HIV through the media and 31% received the information from their teachers. Raza et al. (1998) found in a survey of 1088 respondents that 95% males have the knowledge of AIDS and 28% were aware of its causes. From the foregoing; it could be deduced that some percentage of the adolescents are not well informed about sexual issues and HIV/AIDS. It becomes imperative that further investigation should be carried out in order to determine current awareness level of the adolescents who are leaders of tomorrow. From the foregoing, there is the need to find out the HIV/AIDS awareness level of adolescents in Nigeria. A desire to investigate the HIV/AIDS awareness level of adolescents in Edo State has motivated this study.

Consequently, this study is designed to investigate the HIV/AIDS awareness level of urban and rural adolescents in Edo State, Nigeria. Specifically, the main objective of the study was to determine the age bracket more predisposed to HIV/AIDS awareness, the awareness level of adolescents in the urban and rural areas of Edo State, Nigeria, and to find out the HIV/AIDS awareness level of male and female adolescents in Edo State, Nigeria. To guide this study three research questions were generated and three corresponding hypotheses were formulated.

### 3. Research questions

- Are the adolescents in the urban areas more predisposed to HIV/AIDS awareness when compared to their counterparts in the rural areas of Edo State, Nigeria?
- Are males more predisposed to HIV/AIDS awareness than the females in Edo State, Nigeria?
- What age bracket is more predisposed to HIV/AIDS awareness in Edo State, Nigeria?
- The following corresponding hypotheses were formulated to guide the study.
- Adolescents in the urban area will not significantly differ in their level of HIV/AIDS awareness when compared to adolescents in the rural areas of Edo State, Nigeria.
- Male adolescents are not significantly more predisposed to HIV/AIDS awareness than the female adolescents in Edo State, Nigeria.
• Age will not significantly determine the level of HIV/AIDS awareness among adolescents in Edo State, Nigeria.

4. Method

The method used for this study was a descriptive survey, conducted among senior secondary schools (grades 10-12 high school) students in Benin-City and the outskirts in Etsako Local Government Area of Edo State, Nigeria. The city is located in the south-south geographical zone of Nigeria, the state is made up of eighteen local government councils (LGC), three councils are located within the metropolis, while fifteen are in the outskirts of the city. Two schools within the metropolis and two schools in the outskirts were selected. In each of the selected schools, only students in senior secondary schools were selected using systematic random method for equal representation of both sexes. Consents were obtained from the school authority and the participants before enlisting the participants for the study. One hundred and twenty-six participants were selected from the urban and rural schools respectively, thus giving a total of three hundred and fifty-two participants. The research instrument was a well structured questionnaire designed to elicit information on age, gender, and respondents' level of awareness of HIV/AID pandemic. Moreover for equal representation of the sexes sixty-three female and sixty-three males were selected from the urban and rural schools respectively.

The validity of the instrument was established by experts who ensured that items measured well with the content covered by the research work. The reliability of the research instrument was determined using Cronbach alpha to ascertain the internal consistency which gave a reliability coefficient of 0.75. Data was analyzed using simple percentages for the research questions while t-test was used for the hypotheses.

5. Results

Research Question 1: Are the adolescents in the urban area more predisposed to HIV/AIDS awareness when compared to their counterparts in the rural areas of Edo State, Nigeria.

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>126</td>
<td>39.2</td>
<td>49.2</td>
</tr>
<tr>
<td>Urban</td>
<td>126</td>
<td>60.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>352</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 1. HIV/AIDS Awareness Level of Urban and Rural Adolescents in Edo State, Nigeria
The table above indicates that 39.2% of adolescents in the rural area have some awareness about HIV/AIDS pandemic while 60.8% of adolescents in the urban area have some awareness about HIV/AIDS pandemic. From the information on the table; adolescents in the urban area, have more information about HIV/AIDS pandemic.

Research Question 2: Are males more predisposed to HIV/AIDS awareness than the females in Edo State, Nigeria?

<table>
<thead>
<tr>
<th>Table 2. HIV/AIDS Awareness Level Among Males and Females in Edo State, Nigeria</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Frequency</strong></td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>

The table showed that 47.3% of males have some information about HIV/AIDS pandemic while 52.7% of females have some information about HIV/AIDS pandemic. Therefore, the result indicates that more females are aware of HIV/AIDS or have some information on HIV/AIDS pandemic.

Research Question 3: What age bracket is more predisposed to HIV/AIDS awareness?

<table>
<thead>
<tr>
<th>Table 3. Age Bracket more predisposed to HIV/AIDS Awareness in Edo State, Nigeria</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Frequency</strong></td>
</tr>
<tr>
<td>Below 16 years</td>
</tr>
<tr>
<td>16 years and above</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>

Table 3 indicates that 20.2% of adolescents below 16 years have some information about HIV/AIDS pandemic while 73.8% of adolescents 16 years and above are aware of the HIV/AIDS pandemic. Therefore, it is concluded that adolescents within the age bracket 16 years and above have more information about HIV/AIDS pandemic.

Hypothesis 1: Adolescents in the urban area will not significantly differ in their level of HIV/AIDS awareness when compared to adolescents in the rural areas of Edo State, Nigeria.
Table 4. Summary of t-test for the Awareness Level of HIV/AIDS among Adolescents in the Urban and Rural Areas of Edo State, Nigeria

<table>
<thead>
<tr>
<th>Location</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>t</th>
<th>Sig. (2 tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>126</td>
<td>31.21</td>
<td>6.07</td>
<td>1.950</td>
<td>0.053</td>
</tr>
<tr>
<td>Rural</td>
<td>126</td>
<td>33.00</td>
<td>3.91</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Significant at 0.05

Table 4 above showed a t-value of 1.950 significant at 0.05 level of significance. This is definitely not significant at the alpha level of 0.05 chosen for the study. Thus hypothesis 1 which states that adolescents in the urban area will not significantly differ in their level of HIV/AIDS awareness when compared to adolescents in the rural areas of Edo State, Nigeria is retained. It was therefore concluded that urban and rural adolescents do not differ in their level of HIV/AIDS awareness.

Hypothesis 2: Male adolescents are not significantly more predisposed to HIV/AIDS awareness than the female in Edo State, Nigeria.

Table 5. Summary of t-test for the Awareness Level of Male and Female Adolescents in Edo State, Nigeria

<table>
<thead>
<tr>
<th>Sex</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>t</th>
<th>Sig. (2 tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>126</td>
<td>32.91</td>
<td>4.68</td>
<td>1.374</td>
<td>.172</td>
</tr>
<tr>
<td>Female</td>
<td>126</td>
<td>31.61</td>
<td>5.43</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Significant at 0.05

Table 5 showed a t-value of 1.374 significant at .172 level of significance. This is not significant at the alpha level of 0.05 chosen for this study. Thus hypothesis 2, which states that male adolescents are not significantly more predisposed to HIV/AIDS awareness than the female adolescents in Edo State, Nigeria is retained. It was therefore concluded that male and female adolescents are all equally informed about HIV/AIDS pandemic.

Hypothesis 3: Age will not significantly determine the level of HIV/AIDS awareness among adolescents in Edo State, Nigeria.

Table 6. Summary of t-test for HIV/AIDS Awareness based on Age Levels

<table>
<thead>
<tr>
<th>AGE</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>T</th>
<th>Sig. (2 tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 16 years</td>
<td>159</td>
<td>31.79</td>
<td>3.97</td>
<td>-.395</td>
<td>.693</td>
</tr>
<tr>
<td>Above 16 years</td>
<td>193</td>
<td>32.20</td>
<td>5.56</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Significant at 0.05
Table 6 showed a t-value of -0.395 significant at 0.693 level of significance. This is definitely not significant at the alpha level of 0.05 chosen for the study. Thus hypothesis 3 which states that age will not significantly determine the level of HIV/AIDS awareness among adolescents in Edo State, Nigeria is retained. It was therefore concluded that there is enough awareness irrespective of their age differences.

6. Discussion

Responses to the research questions indicate that adolescents in the urban areas (60.8%) have more information on HIV/AIDS pandemic when compared to the rural dwellers (39.2%). This could be as a result of exposure of the urban dwellers to the print and electronic media, government and non governmental agencies provision of health talks on the causes, effects and prevention of HIV/AIDS pandemic. This indicates that a percentage of young people are poorly informed about the HIV/AIDS pandemic. Results also showed that more females (52.7%) than boys (47.3%) are more aware of the HIV/AIDS pandemic. This finding is in agreement with that of Sekirime et al. (2001) in Uganda who found that males were three times more likely to contract STDS than females, who had more knowledge on prevention of STDS. Also responses from the research questions showed that adolescents within the age bracket of 16 years and above have more information about HIV/AIDS pandemic when compared to those below 16 years. This finding is in line with the observation of Schvraneveldt (1990) who noted that United States children stage of development correlated with the accuracy of their replies to questions about AIDS. This could be as a result of these students being in the senior secondary schools and the exposure of these groups to the print and electronic media, attendance at seminars and health talks, the senior secondary students are usually selected by schools to attend such programmes. Efforts should be made to ensure that health seminars and talks are given to all children in the secondary schools irrespective of age.

Statistically, the results of this study indicated that there was no significant difference in the level of HIV/AIDS awareness of urban and rural adolescents, this implied that urban and rural adolescents were equally informed as regards HIV/AIDS pandemic. This finding is in agreement with the finding of Fawole et al. (2011) who reported high level of awareness among students. However, this finding is at variance with earlier researches conducted by Onyemalukwe (1998), Jatau and Kajang (2002), Onuzulike (2002) and Unachukwu (2003), who reported low HIV/AIDS awareness and high involvement in sexual activities. The finding of this study which indicates that irrespective of location (urban or rural) that adolescents are equally informed in their level of HIV/AID awareness could be as a result of intensified efforts by government, non governmental agencies, and the World Health Organisation (WHO) to sensitize the populace on the causes, effects and dangers of the pandemic. This effort no doubt would have impacted positively on the adolescents who are in the senior secondary schools in the state.

The finding also indicated that male and female adolescents were equally well informed as regards HIV/AIDS awareness. This finding is in agreement with that of Oyo-Ita et al. (2005), who reported that majority of the respondents (students) knew that HIV/AIDS was transmitted through sexual intercourse, and that there was no significant difference between females and males in this regard. This also could be as a
result of the role played by various health organizations, government and non-governmental agencies in reaching and educating the masses, via, health-talks in the print and electronic media, the formation provided by HIV/AIDS awareness clubs in most schools in the state. This no doubt could have been responsible for such a result. The result also showed that irrespective of age bracket (i.e. below 16 years and above 16 years) that adolescents are well informed about the HIV/AIDS pandemic.

7. Implication for counselling

HIV/AIDS awareness seminar should be organized by school counsellors in secondary schools, this should be done in collaboration with the Ministry of Health in the cities and the rural areas where these schools are located. Also in organizing health talks for these adolescents there should be equal representation of both sexes, in that both the boys and the female adolescents need be informed about HIV/AIDS. The coeducational institutions and the single sex schools should be equally counseled and guided by the school counsellors.

The findings that indicated that age has a relationship with HIV AIDS awareness, is an indication that such age bracket should be noted by school counsellors, and appropriate HIV/AIDS awareness programmes should be organized for the adolescents with a view to ensuring that they are properly informed as regards HIV/AIDS awareness enlightenment, irrespective of their age, in addition students in secondary schools should be counseled on the causes, mode of transmission and effects of HIV/AIDS.

8. Conclusion and recommendations

There is general awareness on HIV/AIDS irrespective of adolescents’ place of abode (i.e. urban or rural), sex and age in Edo State, Nigeria. It is therefore, recommended based on this finding that efforts should be made to build on the existing avenues of awareness, by expanding the scope, ensuring that apart from the electronic and print media, government and non-governmental agencies, there should be a community based service, where every community has a HIV/AIDS clinic, with the sole responsibility of educating the community on HIV/AIDS pandemic, with this, individuals in every community would be reached. There should be home/school visitations by health workers, where every individual in the community and school irrespective of age will be well educated on the causes, mode of transmission and effects of HIV/AIDS pandemic. More efforts should be made by government and non governmental agencies to reach at risk individuals who may not be in schools, and provide them with the necessary HIV/AIDS education so as to reduce the spread of the scourge.
References


