

LIFE IS PRECIOUS: IMPACT OF HIV/AIDS AWARENESS AND PEER RELATIONSHIP ON SEXUAL RISK BEHAVIOUR OF STREET TRADERS

Ethelbert C. Njoku

Department of Psychology, Imo State University, Owerri Nigeria.
njokuethelbert101@yahoo.com

ABSTRACT

This study looked at the impact of HIV/AIDS awareness and peer relations on sexual risk behaviour of street traders in Imo State. As a result of the poverty level in Nigeria, street trading has become a norm in major cities in the country. Many families cannot afford to pay for shops and street trading becomes a regular alternative to make ends meet in most families. Three hypotheses were postulated and tested. The participants were selected through convenient sampling from the three geopolitical zones in Imo state which are Owerri, Okigwe and Orlu. The participants were 300 which comprised of 143 females and 157 males. The age range was between 16 and 41 years with mean age of 23.45. Three instruments were used for the study. They were: The Awareness/Attitude to AIDS Scale (AAS), Index of Peer Relation Scale and Sexual Risk Behavior Scale. Cross-sectional survey design was used and a 2-way ANOVA was used to analyze the data. Findings showed that both HIV/AIDS awareness and Peer Relation had no significant impact on Sexual Risk Behavior of street traders in Imo State. One of the major implications is that awareness programs and activities of the government are not yielding the needed significant impact in the creation of awareness of HIV/AIDS. Thus, counselors have tremendous role in ensuring that this important sample population is not abandoned.

INTRODUCTION

Sexual risk behavior is commonly defined as those behaviors that increase an individual's risk of contracting sexually transmitted infections. It entails having sex at an early age, having multiple sexual partners, having sex while under the influence of alcohol or drugs, and unprotected sexual behaviour. High risk sexual behaviours expose people to the risk of contracting sexually transmitted infections, unplanned pregnancy, and being in a sexual relationship before being mature enough to know what makes a healthy relationship. Street traders because of their exposure to risk factors

and their vulnerability due to their circumstances are usually more endangered.

According to Odimegwu and Somefun (2017), Sexual Risk behaviour involves the number and types of partnerships, sexual acts, and sexual orientation an individual partakes. Other elements of sexual risk behaviour include early age at first sexual intercourse, unprotected sexual intercourse with 'at risk' sexual partners, and untreated sexually transmitted diseases. Others are unprotected intercourse without male or female condom use, unprotected mouth to genital contact, early debut to sexual activity, especially before age 18, having multiple sex partners, having a promiscuous partner, having

anal sex and exchange of sex for money. Street traders in most instances go into these high-risk sexual behaviours because they may not understand the implications of contracting sexually transmitted diseases and how they are transmitted. They may not talk about safer sex practices with sex partners, may not be prepared or do not understand how to use protective measures. They usually use alcohol and drugs and these drugs impair judgment and make unsafe sex more likely.

The spread of Human Immunodeficiency Virus (HIV) has continued to be strongly associated with sexual intercourse. Sexual transmission is by far the most common mode of transmission accounting for approximately 70-80% of transmissions globally. Heterosexual intercourse is the primary mode of infection worldwide (National Agency for the Control of AIDS, 2016). Among high school students (sexually and non-sexually active), there is a gap in knowledge about the sexual means of HIV transmission (National Agency for the Control of AIDS 2016). Mariam (2007) asserts that 94.8% of youths agreed that HIV could be transmitted through vaginal, oral and anal sex respectively.

The Human Immune Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS) is a disease which affects human immune system. This disease is one of the world's leading causes of death. A recent global estimate in 2018 revealed that about 39.1 million people are living with HIV around the world and in June 2018, about 18 million people living with HIV were receiving medicine to treat HIV, called Antiretroviral Therapy (ART) worldwide. In Africa, Egypt has the highest number HIV/AIDS cases. An estimated 1.5 million people died from AIDs-related illness in 2017. This disease is been spread by exchange of body

fluids, primarily semen and blood, which cripples the immune system (National Agency for the Control of AIDS, 2018)

Another important variable in this study is peer relations. It is one of the primary contextual factors contributing to street traders' sexual risky behaviour. Peer presence alone—even being observed from a separate room by an anonymous peer—predicts higher level of risk taking (Gardner & Sterberg, 2005). Neuroimaging evidence suggests that peer presence leads to greater activation in brain regions related to reward processing, which in turn sensitizes street traders to the rewarding, but dangerous aspects of risky behaviour in which they are engaging (Chain, Albert, Obrien, Ucker & Steinberg, 2011).

Street traders tend to engage in sexual risky behavior more around their peers than alone. Peer groups provide an arena in which adolescents can learn, clarify and maintain norms for social behaviors as well as practice these behaviors. Most street traders are within the age of forming their identity and establish autonomy from their parents. Thus, the quality of peer relations helps to nurture these identities and the content of it influences their behavior. These peer relations have the potential to promote as well as protect against engagement in dangerous risky behavior. A number of facets of peer relationships are associated with risk taking and peer related factors may moderate the relations between these aspects of peer relations and risky behavior.

Friendship quality appears to influence street traders' engagement in risky behavior. Taffa (2017), states that friendship quality is a multidimensional construct, encompassing companionship, intimacy, support and conflict. Often, relationships with high levels of support are said to be of positive quality. Negative

quality friendships are associated with delinquency, risky sexual behavior and substance use. Suzuki (2017) has posited that these behaviors occur because adolescents are trying to overcome or lessen their negative feelings resulting from high peer conflict and low intimacy.

Interestingly, multiple facets of friendship quality may interact to predict individuals differences in risky behavior, for instance, Galvan (2015), found that peer support moderated the relationship between peer conflict and risky behaviour, such that experiencing high levels of both resulted in less risk taking. The relationship between peer relationship and risky behaviour depends upon the type of friends one associates. Engagement in risky behavior differs for street traders who associate with deviant peers relative to those who do not (Eze, 2009). For example, having positive quality friendships with delinquent peers is associated with increases in risk sexual behavior. Sexual behaviour is complex partly because it is influenced by a wide array, of factors which include personal factors, social factors, cultural, environmental, and moral factors (Eze, 2009).

Statement of the Problem

The issue of street trading has become a notorious activity in Imo State. The menace is so disheartening to the extent that Imo State House of Assembly is passing a bill prohibiting street trading. Apart from the nefarious activities of these street traders, they in most instances indulge in reckless sexual activities without recourse to the health implications. The likely outcome is high level of sexually transmitted diseases amongst them. These diseases are usually transmitted when one engages in risky sexual behaviours such as

unprotected sexual activity, multiple sexual partners, mouth to genital sex, early sexual debut, anal sex etc.

No nation can allow her productive youths to be devastated by escapades which are dangerous. Aggressive awareness of the health problems of sexual risk behaviors is paramount to achieving a healthy society. The issue of intense pressure from peers has also been noted. Peers influence one another. The influence can be positive or negative. Negative influence as noted in the circumstance of street traders lead to sexual risk behaviours. Incidence of HIV/AIDS disease causes problems for individuals, families, and the society.. The researcher is making this research also to close the dearth of proper scientific research on this new behavioural trend in Imo State. Thus, this research is investigating if the awareness of HIV/AIDS prevalence and peer relationship have impact on sexual risk behaviour of street traders in Imo State who are within the workforce age and who constitute 60% of the active population.

Purpose Of The Study

This study will among other things determine if:

HIV/AIDS awareness will have impact on sexual risk behaviour of street traders in Imo state

To ascertain if peer relations will have impact on sexual risk behaviour of street traders in Imo State

To examine if HIV/AIDS awareness and peer relations will have influence on sexual risk behaviour of street traders in Imo State.

Hypotheses

1. HIV/AIDS Awareness will have no statistical significant impact on sexual

risk behaviour of street traders in Imo state

2. Peer Relations will have no statistical significant impact on sexual risk behaviour of street traders in Imo State
3. HIV/AIDs awareness and peer relations will have no statistical significant influence on sexual risk behaviour of street traders in Imo State.

METHOD

Participants

Three hundred street traders participated in this study. They comprised 143 females, 157 males. They were selected through convenient sampling from the 3 geo political zones which are Owerri, Orlu and Okigwe in Imo State. The age range was between 16 and 41 years with mean age of 23.45. The participants were chosen because of the obvious vulnerability of the trade they do. 230 participants are single while 70 others were married. Educationally, 60% had First School Leaving Certificate while 40% had Senior School Certificate.

Procedure

The questionnaire was administered to 345 street traders in Owerri, Orlu and Okigwe. All the participants volunteered to respond to the questionnaire. Out of the 345 participants that responded to the survey, and only 300 copies of the questionnaire were returned and well completed, representing a return rate of 87% and were used in data analysis. The consent of each of the street traders were sought and definitely obtained before distributing the questionnaire to them. They were assured of the confidentiality of their responses to each of the questions and it was so after the research.

Instruments

Three instruments were used in the study. They are: The Awareness/ Attitude to AIDS Scale (AAS). This is 50-item inventories developed by Omoluabi (1995) to quantitatively evaluate the following components of the awareness-attitude, perception and predisposition to HIV/AIDS. The 50 item inventory is designed to quantitatively evaluate five principal components or subscales in awareness and attitudes in this order: K – knowledge = 10 items, I – Infections = 20 items, E – Effects = 10 items; P – Preventions = 10 items, and the T – Total scale = All the 50 items (Appendix IV). The test retest reliability coefficient obtained from the subscales using adolescents and young adults revealed that KIE and P has .96, .91, .52, .77 respectively; and T – total .94. The concurrent validity coefficient of AAS subscale with Osgood Semantic Differential Scale (OSDS, Osgood and Tennabaum 1995). The norms or mean scores are the basis for interpreting the scores of the participants. Scores equal to or higher than the norms indicate that the participant has a high level of awareness, knowledge and accurate information about HIV/AIDS.

The second instrument used for the study, was the Index of Peer Relation. It was used to measure peer relationship. The measure was developed by Hudson (1982). It is a 26 item scale developed in a Likert format. The instrument is both scored direct and reverse. Hudson and Newsome (1986) reported an alpha coefficient of .94. The psychometric properties for Nigeria samples were obtained by Ahumba (1998). The norm for Nigerian samples M (n = 100) 29.31 and F (n = 100) 26.83, scores higher than the Nigerian norm provided indicates poor relations. Scores lower than the norm indicate appropriate peer relations.

The Sexual Risk Behavior Scale (SRBS) was developed in Nigeria by Lawal (2013). It is a 6-item self-report instrument that was developed using formative work, experts' judgment, item and factor analyses to assess sexual risk behaviour for STDs, HIV and AIDS prevention. The SRBS taps items falling into sexual risk assessment and event that allow description of the level of risk and those that allow event-level examination of the co-occurrence of potential risk factors with risk behaviour. The total score is the sum of the points for all the items in the scale. Higher score indicates greater reported sexual risk behaviours. Respondents are required to place a mark on any response option that best describes their sexual experience during the past three months. The three-month time frame was chosen because it has been well-evidenced in the literature as appropriate to evaluate risk behavior in sexually active individuals.

Examples of items in the scale include 'I have taken alcohol heavily before having sex in the last 3 months' and 'I have had sex with a casual friend I met for the first time in the last 3 months'. The scale has a 4-point Likert response format ranging from never (scored 1) to always (scored 4). None of the items in the scale was reverse-scored. On the scale, respondents with a mean score of 15.64 and above have higher sexual risk behavior while those with a score below the mean score have lower sexual risk behaviour. It has a Cronbach's alpha reliability coefficient of 0.85.

Design and Statistics

The design used for this study is the cross-sectional survey design. This is because a portion of the population was selected across a large population of street traders at a particular period of time. A 2-way analysis of variance (ANOVA) was employed for the analysis of data collected.

RESULT

Table I: Summary of Means and Standard Deviation for HIV/AIDS awareness, peer relation and sexual risk behavior.

	Mean	SD	
N			
High HIV/AIDS Awareness	53.70	16.71	
125			
Low HIV/AIDS Awareness	54.63	16.64	175
Poor Peer Relation	52.56	15.63	139
Adequate Peer Relation	55.32	17.67	161

Table II: Summary Table of ANOVA Statistics for HIV/AIDS Awareness on Sexual Risk Behavior

<u>Source</u>	<u>SS</u>	<u>Mean Square</u>	<u>Df</u>	<u>F</u>	<u>Sig.</u>
AIDS Awareness (A)	4.534	4.534	1	1.445	.230 NS
Peer Relations (B)	7.019	7.019	1	2.237	.136 NS
A X B	903	903	1	.288	.096 NS
Error	928.829	63.138			
<u>Total</u>	<u>1,843.353</u>		<u>300</u>		

Note: NS =Not significant

The results as presented on Table I and II above show that the first null hypothesis which stated that HIV/AIDS Awareness will have no statistical significant impact on sexual risk behaviour was accepted [F (1, 296) =1.445, $p>.05$]. A closer look at the mean analysis in Table I above shows that no significant mean difference was found between high and low levels of HIV/AIDS Awareness (M= 53.70&54.63) respectively, hence, HIV/AIDS Awareness does not matter in the practice of sexual risk behaviour as both levels of HIV/AIDS Awareness had mean scores above the norm for sexual risk behaviour. Similarly, the results for the second null hypothesis which stated that Peer Relations will have no statistical significant impact on Sexual Risk behavior was also accepted [F (1, 296) =2.237, $p>.05$]. Again, this finding is clarified by the mean scores in Table I above, the mean scores of (M= 52.56 & 55.32) for poor and adequate peer relationship respectively shows a mean difference, however, both scores were very much above the norm for sexual risk behaviour. Finally, the results for the third null hypothesis which stated that HIV/AIDS Awareness and Peer Relation will have no statistical influence on sexual risk behaviour was accepted [F (1, 296) =.288, $p>.05$].

DISCUSSION

This research work investigated the impact of HIV/AIDS awareness and peer relation on sexual risk behavior of street traders in Imo State. The first hypothesis which states that HIV/AIDS awareness will have no statistical significant influence on Sexual Risk behavior was accepted. This showed that HIV/AIDS awareness does not influence sexual risk behaviour. This result may be as a result the natural sexual libido in every human being. Sex drive is innate and in most instances not in the physical control of some individuals unless those that have strong social skills to resist the libido. It is the id component of the psychosexual stage and is very primitive thus resisting all teachings of proper social sexual behaviour. More so, according to John Hopkins Centre for communication programs and AIDS resource Centre report of 2008, knowledge and awareness of HIV/AIDS does not translate to appropriate sexual behaviour. It means that measures beyond awareness must be put in place to achieve good sexual behaviour especially among street traders. Significantly too, the educational level of the participants must have played a role. Their cognitive strength may not be able to appreciate the

teachings and awareness campaigns in place. Supporting these findings too are researches by Okonta and Oseji (2006) who found no change in individuals sexual risk behavior as a result of HIV/AIDS awareness.

However, the findings by Chanisa and Njoli (2016) were not in consonance with the finding of this result. In a study of the influence of HIV awareness programs in Pakistan, the authors noted that consistent awareness programs reduced the spread of HIV/AIDS by 15%. They found a significant influence of HIV/AIDS awareness on sexual risk behaviour.

The second hypothesis which stated that Peer Relations will have no statistical significant influence on sexual risk behaviour was accepted. This shows that individuals relationship with their peers do not influence their sexual risk behaviour. This result may be as a result of the occupation the participants are pre occupied with. In the course of the research, it was noted that no bond existed amongst the traders as each person was interested in the volume of sales for the day. Also, most of the street traders are from different communities and cities and had no similar socialization, orientation and bonding. Also, there were obvious age differences as the age graph was sloppy. With the variation in age, relationships will be difficult to be formed for the peer relation to have significant impact on each other's behaviour. Again, sexual behaviour is usually a personal secret affair and where the age disparity becomes glaring, the secret aspect of the behaviour becomes stronger. Corroborating this result, Fearon (2015) in his research found no statistical significant influence of Peer Relation on sexual risk behavior of individuals. However, research by Potard (2005) was not in support of the finding of this hypothesis. Potard (2005) discovered in

his study on the influence of Peer Relation on Risk taking of adolescents in Taiwan noted that Peer Relation impacted greatly of the propensity of adolescents to take sexual risks.

The third hypothesis which was a look at other interaction variables like educational level, age had no statistical significant influence on Sexual Risk behavior. This could be attributed to the physiological nature of sex and psychosexual stage it belongs. Moreso, sex has no limitation to educational level and age especially for adults.

Implications

The results of this study have implications for sexual risk behavior research and studies. The government has continued to spend billions of naira in creation of awareness on HIV/AIDS and this result confirms the continued announcement that sexually transmitted diseases are on the increase yearly. This means then that these awareness programs are not yielding any result as confirmed by the results. Thus, efforts then should be directed at using counseling as a formidable method to bringing individuals out of this menace. Counseling activities should be intensified so that people can be helped to come out of the conundrum of risky sexual behaviour. Also, advantages of peer relations strength should be explored. It is pertinent to state that mobile counseling activities can be extended to these individuals since the primary means of informing and equipping them is not yielding the needed results. Future studies and current research can have significant implication for providing sexual education at the family socialization so that people can be better equipped from the early stage of life.

Limitation of the Study and Suggestion for Further Studies

The study has some peculiar limitations. First, the participants were street traders. Street traders operate in very harsh environmental conditions. These conditions and circumstance may influence their approach to life, perception, thinking and appropriate response to issues. Thus, it is very dangerous to generalize result emanating from such harsh environmental conditions. More so, the participants are educationally low, thus they do not have the right cognitive strength. Educationally advantaged people may give you a different result. Educationally advantaged participants can be used next time to test the hypotheses because they have the powers to decipher the good and bad and not being directed by infantile desires. Secondly, the study is a cross-sectional study with data collected at the same time and the issue of causality was not addressed. Experimental or longitudinal approach can be explored to determine causality if need be in the next research.

Conclusion

Despite obvious limitations of this study, it is one of the major attempts in trying to study and know a very neglected but important part of the Nigeria population; street traders. Interactions with them provided great opportunity and a mirror into a unique population with sub norms and culture. The study was able to provide literature and updated information and knowledge on the impact of HIV/AIDS awareness and peer relation on sexual risk behavior with an important sample population. The findings indicate the continued need of counselors to put more efforts especially in bringing back to life vulnerable people that

have taken over our roads in the name of money making. Importantly, this study has made notable contribution relevant to the practice of counseling. The findings of this study can provide more insight in the behaviours of a neglected population.

Recommendation

Significant research confirms that peers influence one another positively. The dynamics of this positive impact of peers in achieving goals should be explored. Again, counselors can help in this direction by bringing out the hidden skills of peers in the positive direction. Educating people is very important. Educationists, counselors, school psychologists should all put their efforts together in ensuring that street traders are educated about the dangers of sexual risk behavior and its relationship with becoming HIV/AIDS infected. An educated individual has the propensity to withstand the tremendous libidinous energy especially from the age bracket of the participants.

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