

## Assessment of Socio-Demographic Characteristics and Risky Behaviours among Sex Workers in Rivers State

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### Abstract.

*Sex work in Nigeria is illegal and Female sex workers are among HIV/AIDS most at risk groups. This study assessed socio-demographic characteristics and risky behaviours among sex workers in Rivers State. A descriptive cross sectional design was used. A cluster sampling technique was used and the entire available sample who agreed to participate in the study was sampled using interviewer administered questionnaire. Data collected was analyzed using descriptive statistics. More(40.2%) of the respondents are aged 20-24years with a mean age of 24.7±4.6years, 62.5% had secondary education, 19.2% higher education, 85.6% single. Majority (89.9%) consumed alcohol of which 36.9% are occasional drinkers, 36.6% daily drinkers. More (65.9%) had non-paying boyfriends and 36.6% of those with non-paying boyfriends use condom with their partners. More than a quarter (37.2%) had non-paying casual friends of which 70.5% used condom with their casual non-paying friends. Majority (85.1%) of sex workers used condom with their paying sexual partners. Sex workers engaged in risky behaviours that can predisposed them to STIs including HIV/AIDS. There is the need for intervention to deal with demographic variables and consistent supply of condom and condom use.*

**Keywords:** Sex workers, risky behaviours, Socio-demographic characteristics, Rivers State

### Introduction

Nigeria is one of the most populous countries in sub-Saharan Africa with an estimated population of 177,071,561 million (National Agency for the Control of HIV/AIDS, 2014), a growth rate of 2.54% and a Total Fertility Rate of 5.5 (National Population Commission, 2014) is second to South Africa after India in the number of people living with HIV/AIDS worldwide, representing 9 per cent of the global burden of the disease (United Nation Programme on AIDS, UNAIDS, 2011). The first case of AIDS in Nigeria was reported in 1986, consequently and in line with the World Health Organization's (WHO) guidelines, the government adopted Antenatal Clinic (ANC) sentinel surveillance as the system for assessing the epidemics. The first sentinel survey was in 1991. However the National HIV/AIDS and Reproductive Health Survey (NARHS) was adopted in 2003 to provide information on Key HIV/AIDS and Reproductive health knowledge and behaviour related issues. In 2012 the NARSH 2plus was conducted that was representative of the general population.

After three decades of the first case of HIV/AIDS the epidemic has not got to zero infections as the country is still recording new infections despite concerted efforts of the various researchers, government, national, international, bilateral and multi-national agencies in curbing the spread of the virus and understanding the epidemiology of the disease. As available data reveals that in 2013 approximately 220,394 new cases of HIV infections occurred and 3,229,757 people were estimated to be living with HIV/AIDS out of which 210,031 persons died from AIDS related cases (National Agency for the Control of HIV/AIDS, 2014). HIV/AIDS epidemic in Nigeria transited from concentrated epidemic to generalized epidemic and currently to mixed epidemic

Several factors has been align to fuel the spread of the virus in Nigeria, such as transactional sex (sex work), low perception of personal risk, multiple and concurrent sexual partners. Entrenched gender inequalities and inequities, poverty and persistent HIV/AIDS stigma and discrimination (National Agency for the Control of AIDS, 2010 and Federal Republic of Nigeria, 2014)

Most at risk groups for HIV/AIDS are the Female Who Sell sex (FWSS), young people, women, Men who have sex with men (MSM), prisoners, long distance truck drivers, military personnel and police officers, migrant and mobile population and injection drug user (Onwurili & Jolayemi, 2006). Of the most at risk groups female sex workers constituted the most affected by AIDS in Nigeria. In the 2011 Joint United Nations Global Report the prevalence of HIV/AIDS among sex workers was significantly higher (25%) compared to the general population of 3.4%. This prevalence had been attributed to difference in condom use and consumption of alcohol among sex workers.

In 2014 the prevalence of HIV/AIDS among female sex was 19.4% for Brothel based sex workers and 8.6% for non-brothel based sex workers (Federal Ministry of Health, 2014).The 2012 NARSH plus survey result

showed a 15.2% HIV/AIDS prevalence in Rivers state (Federal Ministry of Health, 2013) and 7.7% for brothel based sex workers with 11.7% for non-brothel based sex workers (Federal Ministry of Health, 2014).

Substance use, including alcohol consumption has the ability of inhibiting sense of judgment and sex work had been associated with alcohol and substance abuse. In the study of Swahn, Culbreth, Salazar and Seeley (2016) sex workers were about 8times more likely to consume alcohol as compared to non sex workers. Also in a Turkey study condom use was significantly higher (53.5%) among non-drinkers as compared to social and regular drinkers (33.3% and 27.3%)(Beduk, Unlu & Duyan).

Consistent Condom use among sex workers is a challenge and an indicator in behavioural change process. However studies have shown that variation exist among client characteristic and type of sexual partner (WHO, 2011).In the study of Hesketh, Zhang and Qiang, (2005) only 32% consistently used condom and 18% never used condom. In a more recent study by Berihun and Tadesse, (2013) showed that 32.8% use condom consistently. In another study prevalence of condom use among sex workers was low as only 42% used condom in their last sexual intercourse (Atif ,Khalil, Gul & Bilal, 2015)

Port-Harcourt is an urban centre and the capital of Rivers State of Nigeria the nerve centre of the famous Nigeria oil and gas industry. It is indeed the focal point of activities in the Niger Delta region which houses a vast reserve of oil and gas. Ironically, environmental degradation and economic pauperization are juxtaposed alongside great affluence from oil and related national and international companies. This has serious social implications on sexual activity. This study is therefore aimed at assessing the socio-demographic characteristics and risky behaviours among sex workers in Rivers State.

### Methodology

A descriptive cross sessional survey design was used to assess socio-demographic characteristics and risky behaviours of female sex workers in Port-Harcourt. Port Harcourt city LGA has fifty-three hot spots with a total of 814 sex workers (RIVSACA, 2013). Thirty-two hot spots were selected for the study. Cluster sampling technique was used for brothel based sex workers and all available sex workers in each of the cluster were interviewed. For non-brothel based sex workers time location sampling approach was used and all those within the period and time of data collection who agreed to participate were selected for the study. Data was collected using an adapted Integrated Biological and Behavioural Sentinel Survey (IBBSS) 2014 semi-structured questionnaire. The instrument adapted was designed to elicit socio-demographic information of respondents, such as age at last birthday, educational qualification. Marital status. Age at first sex work. Having non-paying boyfriend, having non-paying causal partner, use of condom with non-paying boyfriend causal friends and paying partners and pattern of alcohol consumption. Data for this study was collected by trained peer educators who are familiar with the environment. Data collected were analysed using descriptive statistics and Binary logistic regression at 0.05 significant levels.

### Results

**Table 1: Socio-demographic characteristics of sex workers in Port Harcourt**

Demographic variables	Frequency	Percentage
<b>Age (in years)</b>		
≤14	1	0.2
15-19	63	10.0
20-24	234	37.3
25-29	244	38.9
30-34	64	10.2
35-39	13	2.1
≥40	9	1.4
<b>Mean 24.9±4.7</b>		
<b>Educational attainment</b>		
No education	20	3.2
Vocational education	11	1.8
Quranic only	4	0.6
Primary education	88	14.0
Secondary	402	64.0
Higher education	103	16.4
<b>Marital status</b>		
Married	12	1.9
Co-habiting	19	3.0
Single	523	83.3

Divorced	20	3.2
Separated	44	7.0
Widowed	10	1.6
<b>Age at first sex work(in years)</b>		
10-14		
15-19	10	1.6
20-24	149	23.7
25-29	261	41.6
30-34	125	19.9
35-39	25	4.0
>40	3	0.5
<b>Mean 21.9±4.5</b>	<b>55</b>	<b>8.8</b>

More than a quarter (38.9%) were age 25-29years, 37.3% aged 20-24years, 0.2% aged ≤14years with a mean age of 24.9±4.7. More (64,0%) had secondary education, 16% Higher education, 3.2% No form of education, 1.8% vocational education. Majority (83.3%) are Single, 7.0% separated, 3.2% divorced, 1.9% married (Table 1).

**Table 2: Risky behaviours among sex workers in Port Harcourt**

Risky behaviours	Frequency	Percentages
<b>Used condom</b>		
Non-paying boyfriend**	200	50.4
Non-paying casual friend**	112	69.1
Paying partners*	468	77.6
<b>Use of Alcohol</b>		
Consumed alcohol	560	89.2
<b>Pattern of Alcohol consumption</b>		
Daily	216	38.7
Once a week	121	21.7
Occasionally	221	39.6

\*Non responses were excluded from the analysis.\*\* respondents with boyfriends and causal partners were analyzed

Majority (77.6%) of sex workers used condom with their paying sexual partners, 69.1% who had non-paying casual sex partners used condom, 50.4% who had non-paying boyfriends used condom. Majority (89.2%) of sex workers consumed alcohol. Of those who consumed alcohol 39.6% consumed alcohol occasionally, 38.7% consumed alcohol daily.

**Table 3: Socio-demographic characteristics, alcohol consumption and condom use among sex workers in Port-Harcourt**

Socio-demographics	CONDOM USE		Odds Ratio	95% Confidence Interval (CI)	P
	Yes	No			
<b>Age</b>					
<14	1(100.0)	0(0)	Ref		
15-19	32(50.8)	31(49.2)	0.008	0.000	<b>0.002</b>
20-24	169(75.8)	54(24.2)	1.196	0.176-8.150	
25-29	198(85.8)	36(15.4)	2.521	0.393-16.173	
30-34	52(86.7)	8(13.3)	4.595	0.720-29.333	
35-39	9(69.2)	4(30.8)	4.989	0.704-35.348	
>40	7(77.8)	2(22.2)	1.425	0.174-13.324	
<b>Educational attainment</b>					
No education					
Vocational education	16(80.0)	4(20.0)	Ref		<b>0.315</b>
Quranic only	8(80.0)	2(20.0)	1.520	0.429-5.395	
Primary education	3(100.0)	0(0.0)	1.455	0.266-7.958	
Secondary	76(87.0)	11(12.6)	0.008	0.000	
Higher education	294(76.4)	91(23.6)	2.390	1.042-5.482	
<b>Marital status</b>					
	71(72.4)	27(27.6)	1.022	0.590-1.770	

Married					
Co-habiting	6(50.0)	6(50.0)	Ref		
Single	16(88.9)	2(11.1)	0.079	0.005-1.128	<b>0.046</b>
Divorced	382(75.8)	122(24.2)	0.554	0.033-9.260	
Separated	15(88.2)	2(11.8)	0.291	0.027-3.191	
Widowed	40(95.2)	2(4.8)	0.493	0.030-8.213	
<b>Pattern of Alcohol consumption</b>	9(90.0)	1(10.0)	1.568	0.107-23.065	
Daily					
Once a week	187(88.6)	24(11.4)	Ref		
occasionally	76(66.7)	38(33.3)	2.497	1.415-4.405	0.000
	157(74.8)	53(22.3)	0.682	0.400-1.165	

Significantly respondents aged 35-39years are 4.98 times more likely to use condom (OR=4.989; 95%CI=0.704-35.345) as compared to 4.595 times among those aged 30-34years. Respondents aged 15-19years are 125times less likely to use condom with their sexual partners (OR=0.008, 95%CI=0.000). Widows are 1.568 times more likely to use condom with their sexual partners (OR=1.568, 95%CI=0.107-23.065,  $p<0.05$ ). Compare to those who consume daily, those who consume alcohol once a week are 2.497times more likely to use condom with their sexual partners.

## Discussion

Sex work in Nigeria is illegal and female sex workers are vulnerable to HIV/AIDS and among the Most at risk group of HIV/AIDS. The Epidemic of HIV/AIDS which has transited from concentrated population to Mixed population is a cause for concern, as more young people engage in sex work. Sex workers are often the target for intervention on behavior change for HIV/AIDS. However, studies have shown that there exist variation on consistent use of condom based on sexual partner type. The findings of this study showed that 50% of the study population did not use condom with their non-paying boyfriend, 30.9% with the casual non-paying partners while 22.4% did not use condom with their paying sexual partners the last time they had sexual intercourse. This is in consistent with the findings of WHO (2011), this gap in condom use is capable of fueling increased prevalence among sex workers and their clients..

The findings of this study indicated that majority of sex workers used alcohol. The findings of this study is in keeping with the findings of Panda, Bijaya, Sadhana, Foley, Chatterjee, Banerjee, Naik, Saha, and Bhattacharya (2006) where majority of sex workers consume alcohol. Alcohol consumption inhibits sense of judgments that predispose sex workers and other sexually active population at risk of HIV/AIDS infection. There is an urgent need for intervention on alcohol consumptions and HIV transmission.

Demographic characteristics such as age and marital status was significantly associated with condom use. The findings of this study is consistent with the findings of Atif, et al, 2015, Matovu and Sebadduka, 2013 and Tamene, Tessema, and Beyera(2015) where age of sex workers was significantly associated with condom use.

The findings of this study showed variation of condom use among type of sexual partner. Nearly half of the sex workers with non-paying sexual partner(boyfriend) did not use condom, this is consistent with the findings of WHO (2011). Low use of condom among regular partner may be as a result of trust and love and long standing relationship. This is quite worrisome as sexual networking with inconsistent condom use propagate the spread of STIs including HIV/AIDS.

## Conclusion

The findings of the study depicted that more of the sex workers in Port Harcourt are young people between the ages of 14 and 24years and more than three quarter are single. Sex workers exhibit risky behaviours as majority consumed alcohol, nearly half of the sex workers who have regular non-paying partners (boyfriends) did not use condom and about twenty-two percent did not use condom with their paying partners. Socio-demographic characteristics such as age and marital status of sex workers were associated with condom use also pattern of alcohol consumption were associated with condom use. However, educational qualification of sex worker was not associated with condom use

## Recommendations

Based on the findings of the study the following recommendations were made

1. Interventions by Community Based Organizations (CBOs), Faith Based Organizations(FBOs) and Non-Governmental Organizations (NGOs) on HIV/AIDS should focus more on age and marital status for better condom use and intervention outcomes.

2. Development partners funding HIV/AIDS intervention should fund more of those working with sex workers who have regular partners as these group of sex workers are less likely to use condom consistently thus fueling the prevalence of HIV/AIDS in the mixed population.
3. Intervention programmes by CBOs, FBOs, NGOs should focus on other risky behaviours such as alcohol consumption that are likely to fuel non condom use which are likely to influence the spread of HIV/AIDS among sex workers and their clients including the general population

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