Global Journal of Human Social Science
Volume 11 Issue 1 Version 1.0 February 2011
Type: Double Blind Peer Reviewed International Research Journal
Publisher: Global Journals Inc. (USA)
ISSN: 0975-587X

Sexual Behaviour and Perception of Hiv/Aids in Nigerian Tertiary Institutions: University of Ilorin, a Case Study

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Classification: GJHSS-C FOR Classification: 130308

Strictly as per the compliance and regulations of:

Sexual Behaviour and Perception of HIV/AIDS in Nigerian Tertiary Institutions: University of Ilorin, a Case Study

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I. Introduction

In recent decades, HIV/AIDS has become a topical issue in Nigeria. Ever since the first case of AIDS was registered in 1982, the epidemic has continued to be on increase. For instance, an estimated 5.1% - 5.4% of the population has been infected with HIV/AIDS by 1999 (Penchard et al, 2002) and by 2006, 6.1 millions of 140 millions population is living with HIV/AIDS. The situation becomes worrisome as the number of people with the disease is expected to grow significantly by the end of 2010 (ICI. 2002). Despite the pandemic nature of HIV/AIDS, it was not until 2000 that the Nigerian government recognised HIV/AIDS as a major health problem (FRN, 2000). Unfortunately, this was not immediately matched with intensified campaign on HIV/AIDS by governments at all level. However, the recent happenings indicate government sudden interest in fighting the scourge. Government mounted aggressive campaign in the media and posted billboards in cities and highways, sensitising on the dangers of the disease, modes of transmission and prevention. There have also been responses from non-governmental organisations in this campaign.

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Despite these concerted efforts by government and non- governmental organisations to address the problem, it is disheartening to note that the rate of infection is still very high.

In Nigeria, as in other countries of the world, youths are the most vulnerable since they are the most sexually active population and have shown to have multiple sex (Okpani and Okpani, 2000, Ibe and Ibe,2003, Juarex and Martin,2006: Demilson, 2008). Current statistics on HIV/AIDS in Nigeria provide evidences that young people within the age bracket of undergraduates are the high risk group (UNAIDS, 2000). The reasons that have been adduced to number of factors which include lack of communication between parents and child about sexually; high level of illicit sexual; high incidence of campus prostitution, poverty or hash economic conditions among other factors (Obinna,2005, Uzokwe,2008)

With the conception of high prevalence of rate of HIV/AIDS among students of tertiary institutions in Nigeria, one is left wondering if the students are aware of the disease and if various campaigns on HIV/AIDS have any impact on them. Nigeria tertiary institutions present a situation whereby everybody is aware of the deadly virus HIV/AIDS (Omoregie, 2002; Adedimeji, 2003) but they all seem not to care. Students give in easily to peer pressure, physical attractiveness etc. to affect their sexual behaviour. This study, therefore, examines the level of HIV/AIDS awareness and its impact on sexual behaviour of students of Nigerian tertiary institutions with University of Ilorin as a case study.

II. Objectives of the Study

This study investigates the level of awareness of HIV/AIDS and sexual behaviour of students in university of Ilorin, Nigeria. This is with the view of establishing the relationship between their level of awareness of HIV/AIDS and their sexual behaviour. The objectives will be realised by answering these questions.

(i) What kinds of sexual behaviour exist among students of tertiary institutions in Nigeria?

(ii) To what level are students of tertiary institutions in Nigeria aware of HIV/AIDS?
(iii) Is there any relationship between the level of awareness of HIV/AIDS and their sexual behaviour?

III. Literatures Review

HIV is the acronym of Human Immune-deficiency Virus, a virus that causes Acquired Immune Deficiency Syndrome (AIDS). According to Wilkinson (2001), HIV destroys part of the white blood cells – the body's diseases fighting immune system. The virus stays in the body and slowly destroys the body's defence mechanisms thereby weakening a person's ability to fight off diseases like tuberculosis, pneumonia, malaria and other diseases. Hence, a persons with HIV/AIDS is likely to contract other diseases (Ugwuegbulom, 2001)

Although, the modes of transmission of HIV/AIDS differs throughout the world (Adegoke, 2010), the World Health Organisation (WHO) identifies three main routes of HIV transmissions among general populace. Prominent among them is through all forms of sexual intercourse. The second most common mode of transmission is the exposure to infected blood through transfusion and needles sharing. The third major route of HIV transmission is the prenatal and substantial vertical (mother to child) transmission. For instance, WHO (1992) estimates that 750,000 of 7.25 HIV infections in Africa has been through this route. Other means of HIV transmission include breast-feeding (if the mother has HIV), sharing of sex toys such as dildos or vibrators without disinfecting them etc.

In Nigeria, 71 percent of the reported AIDS cases were through heterosexual sex (Isiugo- Abanihe, 1994). Blood transfusion and infected blood products account for 2.5% while vertical transmission from mother to infant records 1.4%. The transmission mode for the remaining 25% of AIDS cases in the country could not be ascertained (WHO, 1993) although, the likelihood of sexual transmission is high (Isiugo – Abanihe, 1994)

At least for now, AIDS has no cure but it is preventable. The scourge can be prevented by abstaining from sex, delaying sexual intercourse (Onyene et al, 2010), safer sex practices which include knowing the sexual histories of the sexual partners, reducing the number of sexual partners, faithfulness to one uninfected partner, using latex or polyurethane condom throughout sexual encounter and using rubber dam during oral contact with vulva or anus. Other preventive measures include screening of blood for transfusion, use of personal instruments such as clippers, razor blades etc.

Information about these measures has been widely disseminated, yet HIV/AIDS pandemic continues to spread around the world at an alarming rate. For instance, UNAID (2006) estimates that 3.95 million are people living with HIV/AIDS across the globe while 25 million people have died of AIDS since 1981. More than half of the new cases of HIV infections occur among young people (Onyene et al, 2010)

In Nigeria, the student population is composed mainly of those in the age bracket of 20 -30 years. Those in this age bracket are more sexually active and are vulnerable to HIV/AIDS infection. This is why awareness programmes are often developed and intensified on Nigeria campuses. Several methods have been used to sensitise Nigerian students on the existence of HIV/AIDS scourge. These methods as documented by Onyene et al (2010) include, one on one interaction; use of GSM monitor; use of bills; semesterly symposia; administrative nurturance elements; curricula based activities and sex education programmes. Others include individual mentoring and counselling; use of local and wide area network facilities and faith culture based education.

In spite of various campaign about HIV/AIDS there is a conception that the prevalence rate of the scourge is high among the students in tertiary institutions and this has attracted the research interest of scholars(Ibe, 2005;Magnus and Gbakeji, 2009,; Onyene et al, 2010). These scholars, one way or the others have questioned the effectiveness or adequacy of various campaigns about HIV/AIDS on Nigerian campuses. This is borne out of the fact that there continue to be high rate of premarital sexual activity, drug and cultism among students

In most of our tertiary institutions are situations whereby everybody is aware of the deadly virus HIV/AIDS but they all seem not to care. Despite high level of awareness of HIV/AIDS as reported by Omoregie (2002), Adedimeji (2003), the risky sexual acts are still common occurrences among students. For example, in a research conducted on fresh students of tertiary institutions in Rivers state, Ibe (2005), observed the risky practices recorded among students to include ever having sex without condom (57.0%), having had multiple sex partners (42.1%) and use of condom at first sexual encounter (22.8%) although 56.1% claimed that first partners were same age. Some had multiple current partners with 3.5% having 4 to 6 current partners Similarly, Magnus and Gbakeji (2009) affirmed that sex is a phenomenon currently ravaging higher institution in Nigeria as a lot of students are engaged in premarital and heterosexual relationships on campus.

In the words of Ambe - Uva (2007) when a society needs to face a problem, it typically turns to its

schools and asks what they are doing about it. In the context of HIV/AIDS, schools are expected not only to teach, but also instil in their students the skills, knowledge, and values that promote safe behaviours in order to protect themselves against HIV infection. While the universities in Nigeria are yet to fulfil the expected results to the society on the issue of HIV/AIDS, the schools, themselves are not HIV free (Ambe - Uva, 2007). More worrisome is the apparent lack of institutionalised response to slow the scourge despite the high prevalence of HIV/AIDS inside the universities population (Kelly, 2003)

IV. Methodology

The study was carried out at the University of Ilorin. In this study, both primary and secondary data were utilised. Secondary data was obtained from relevant document and it provides background information on HIV/AIDS and other related issues. Primary data, on the other hand, constitutes the bulk of inputs used on the empirical analysis of the study. It is obtained through the use of questionnaires. The questionnaires which contained a number of questions on respondents' knowledge of HIV/AIDS and their sexual behaviour were administered on 234 on randomly selected students of the institutions. At the end of the exercise, 220 returned questionnaires were considered well enough for analysis. Data collected were statistically analysed using simple frequency tables and percentages

V. Results and Discussions

The results and discussions of the findings are presented in three sub- headings and are discussed below:

1) *Socio – demographic characteristics of Respondents*

The socio – demographic data shows that 112 (50.92%) male and 108 (49.1%) female participated in the study. Four categories of age structure were adopted by the study. These are under 20 years category, between 20 – 25 years category, 26 – 30 years category and above 30 category. According to table 1, 5% of the respondents are less than 20 years, 67.3% are between 20 – 25, 22.3% falls within 26 – 30 years category, while above 30 years category contained 12%. By implication, ages between 20 – 24 are more in the sampled population. This age group is sexually active and more vulnerable population. For instance, Onyene (2010) reported that more than half of all new cases of HIV infections in the world occur among young people under the age of 25. This confirms the earlier findings of AVERT (2007), that HIV/AIDS in Nigeria is highest among young people between 20- 24. Other result from table 1, shows that respondents were mostly single ((94%), Christians (55.9 %.) and are Yoruba (77%)

Table 1: The Socio – Demographic Characteristics of the Respondents

GENDER		
Gender	Frequency	Percentage
Male	112	50.9
Female	108	49.1
Total	220	100
AGE		
Age	Frequency	Percentage
Under 20	11	5.0
20 – 25	25	67.3
26 – 30	49	22.3
Above 30	12	5.4
Total	220	100
MARITAL STATUS		
Marital status	Frequency	Percentage
Married	13	6.0
Single	12	94.0
Total	220	100
RELIGION		
Religion	Frequency	Percentage
Christianity	123	55.9
Islam	92	41.8
Other	5	2.3
Total	220	100
ETHNIC GROUPS		
Ethnic group	Frequency	Percentage
Hausa	3	1.4
Igbo	5	2.3
Yoruba	201	91.3
Others	11	5.0
Total	220	100

Source: Authors' field work, 2010

2) *Sexual behaviour*

Table 2 shows that 72.7% of the sampled students have had sexual intercourse while 27.3% claims they have not. Of those that have had sex, 70% had their first sexual experience between ages 18 to 25, 25.5% between ages 10 – 17 while 5.0% had sexual experience when they are above 25 years (see table 3). This confirms the reports of USAID (2003), AVERT (2007) and Onyene et all (2010) that young people between ages 20 – 25 are more sexually active and are more vulnerable to HIV/AIDS.

Table 2: Sex experience

SEX EXPERIENCE		
Response	Frequency	Percentage
Yes	160	72.7
No	60	27.3
Total	220	100

Source: Authors' field work, 2010

Table 3: Age at first sex experience

AGE AT FIRST SEX EXPERIENCE		
Age group	Frequency	Percentage
10 – 17	40	25
18 - 25	112	70
25 and above	8	5
Total	160	100

Source: Authors' field work, 2010

An assessment of table 4 shows that 62.3% have had more than 1 sexual partners in the last 2 months, with 30.0% having between 2-3 partner., 25.9% have had between 4-6 partners, while 6.4% have had more than 6 partners in the last 2 months. The finding is similar to that of Ibe (2005) which reported multiple sex relationships among students of tertiary institutions in Rivers state, Nigeria.

Table 4: Sexual partners in the last 2 months

SEXUAL PARTNERS IN THE LAST 2 MONTHS		
No of sex partners	Frequency	Percentage
No response	63	28.6
1	20	9.1
2 – 3	66	30.0
4 - 5	57	25.9
6 and above	14	6.4
Total	220	100

Source: Authors' field work, 2010

SEX WITHOUT CONDOM		
response	Frequency	Percentage
No response	60	27.3
Yes	124	56.5
No	36	16.2
Total	220	100

Source: Authors' field work, 2010

Table 5 shows that 56.5% of the sampled students have had sex without condom, 16.2% have not had without condom while 27.3% have not had sex at all and thus have no need to use condom. This validates the work of Akanle (2007), which shows that there is a below average use of condom among youths. In the overall analysis, it is revealed that students engage in risky sexual practices. For instance, majority of them have involved in premarital sex (72.7%). 56.5% have had sex without condom despite having multiple sex partners (62.3%) with 6.3% having more than 6 sexual partners.

3) Students' perception of HIV/AIDS

The study shows that a large number of the sampled students are aware of HIV/AIDS and have accurate knowledge of its modes of transmission (see table 6). Respondents identified "sex with infected person" as a major means of contracting HIV/AIDS. They were also well informed of other modes of transmission such as "needles sharing" (95%), unscreened blood (89.1%). However, many erroneously believe hugging is a means of contracting HIV/AIDS.

Majority of the respondent identified use of condom as a major means of preventing HIV/AIDS (85.7%). Respondents also know that they can be protected by avoiding multiple sexual partners (91.7%) and by abstaining for sex (54.8%). Many believe that going for medical checkup can prevent HIV/AIDS (79. 8%) while 46% believe there is nothing we can do to prevent HIV/AIDS but by praying to God (56%)

Table 6: prevention of HIV/AIDS

Methods	Respondents (n =220)			
	Yes	Percentage	No	Percentage
Avoid multiple sex	202	91.8	18	8.2
Abstinence	128	58.2	92	41.8
Use of condom	191	86.8	29	13.2
Going for medical check up	173	78.7	47	21.3
Praying to God	123	55.9	97	44.1
Nothing	38	17.3	182	82.7

Source: Authors' field work, 2010

Table 7: Modes of transmission of HIV/AIDS

Modes	Respondents (n =220)			
	Yes	Percentage	No	Percentage
Sex with infected person	215	97.7	5	2.3
Unscreened blood	196	89.1	24	10.9
Use of razor or sharp objects	189	85.9	31	14.1
needles sharing	209	95	11	5
Hugging	184	83.6	36	16.4
Mosquito bite	50	22.7	170	77.3

Source: Authors' field work, 2010

Table 8 shows that the respondents have adequate knowledge about HIV/AIDS. For instance, 90.5% believe that AIDS can kill. On their knowledge about the cure, majority 81% knew there is no cure yet for AIDS while 97.2 believe it can be prevented. 90.5% of the respondents affirm that HIV/AIDS victim may look healthy.

Table 9 shows the level of students' knowledge of HIV/AIDS. The total awareness scores were

computed so as know the level of knowledge of students on HIV/AIDS. In the computation, the total percentage of the correct responses to the questions on HIV/AIDS was 73.6% while the total percentage of incorrect responses was 26.4%. The high percentage of correct responses indicates that the level of students' knowledge on HIV/AIDS is very high. This corroborate the findings of Ibe (2005),Magnus and Gbakeji (2009) which revealed the high level of awareness of HIV/AIDS among students in Nigerian tertiary institutions. Although, the level of awareness is very high, it not total awareness. For instance, many of the students erroneously believe that going for medical check up can prevent AIDS. Some also believe that HIV/ AIDS can be contracted through hugging or mosquito bite.

Table 8: knowledge of HIV/AIDS

Knowledge	Respondents (n =220)			
	Yes	percentage	No	Percentage
AIDS is real	217	98.6	3	1.4
AIDS kills	199	90.5	21	9.5
AIDS is curable	42	19.1	178	80.9
AIDS is preventable	214	97.3	6	2.7
AIDS victim may look healthy	199	90.6	21	9.4
Youth are HIV/AIDS vulnerable group	152	69.1	68	30.9
AIDS destroys one's future	139	63.2	81	36.0

Source: Authors' field work, 2010

The high level of knowledge of HIV/AIDS among students suggests that the students are aware of the implications of risky sexual habits. However, this does not have impact on their sexual behaviour as a large number still engages in risky sexual behaviour (see table 4 and 5). For instance, an overwhelming majority of the students have accurate information about HIV/AIDS (Table 9). In particular they associated AIDS transmission largely with casual sex, yet they continue to have multiple sexual partners (table 4) without the benefit of condoms (table 5) even though, majority identified condom as an important preventive measure against HIV/AIDS transmission (Table 6)

Table 9: level of students' knowledge of HIV/AIDS

S/N	Item	Correct response (%)	Incorrect response (%)
1	Do you believe HIV/AIDS is real in Nigeria?	98.6	1.4
2	Do you know AIDS kills	90.5	9.5
3	Do you believe that if infected with HIV/AIDS one's future dream could be jeopardised?	63.2	36.8
4	Can someone already infected with AIDS still look healthy?	90.4	9.6
5	Do you know HIV/AIDS is preventable?	97.3	2.7
6	Do you know HIV/AIDS is curable?	80.9	19.1
7	Can people protect themselves from HIV/AIDS with condom every time they have sex?	86.8	13.2
8	Can people protect themselves from HIV/AIDS by abstaining from sex?	58.2	13.2
9	Can a person contract HIV/AIDS from being injected with unsterilised needles	95	5
10	Can a person get HIV from mosquito bite?	77.3	22.7
11	Do you believe prayer is the way to prevent HIV/AIDS	44.1	55.9
12	Can HIV be prevented by going for medical checkup?	21.3	78.7
13	Can people protect themselves from HIV/AIDS by having one faithful partner?	91.8	8.2
14	Can a person get HIV/AIDS from unscreened blood?	89.1	10.9
15	Can a person contract HIV from hugging?	16.4	83.6
16	Do you believe there is nothing to prevent HIV/AIDS?	82.7	17.3
17	Do you believe youths are HIV/AIDS vulnerable group	69.1	30.9
18	Do you believe sex is the major means of contracting HIV/AIDS?	98.2	1.8
Average percentage		73.6	26.4

Source: Authors' field work, 2010

VI. Conclusions and Recommendations

Based on the findings of this study, it could be concluded that HIV/AIDS awareness and knowledge in university of Ilorin, as in other tertiary institutions in Nigeria, is very high. The students are aware of the existence of HIV/AIDS; they have high knowledge of HIV/AIDS and are adequately informed about the facts and fallacies of HIV/AIDS. The high level of awareness, notwithstanding, the risk of contracting the disease is still very high. This is rooted in risky sexual habits of the students. The study has shown that students get involve in multiple sexual relationships without the benefit of condom. The prevalence of campus prostitution does not help the situation as very many female students are involved in widespread prostitution (Uzokwe, 2008).

The increasing risky sexual habits of students in Nigerian tertiary institutions remain the most visible means of contracting HIV/AIDS, therefore, if any meaningful measure should be taken to address this menace, the illicit sexual acts among students must be first be addressed. In this respect, the following recommendations are offered.

The study revealed that students between ages 20 to 30 are most sexually active and the most vulnerable to HIV/AIDS. It is therefore, suggested that sex education and sexuality exposure should be intensified among this group of students.

The study also revealed that premarital sex is a common practice among the students. In view of this, parents, religious leaders, lecturers are advised to devise a means to counsel the students on the need to be morally upright as not to get involve in pre marital sexual relationship.

Nigerian campuses are full of activities that promote sexual promiscuity, it is therefore, suggested that the institutions' managements should encourage productive ventures like sports and other vocational services rather than activities that promote sex such as parties and beauty pageants.

The indecent dressing in our tertiary institutions, especially among female students is a provocative act that stimulates sexual behaviour. Therefore, all institutions are encouraged to adopt moderate dress code for students, particularly the female students.

Still to mention, the awareness of HIV/AIDS among Nigerian students was not total. It is recommended that more enlightenment campaigns should be organised on our campuses. This could be achieved through continually organised symposia, lectures and rallies on HIV/AIDS. In addition, sex education should be included in the curriculum of Nigerian tertiary institutions.

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