# RELATIONSHIP BETWEEN KNOWLEDGE OF HIV/AIDS AND SEXUAL BEHAVIOUR AMONG IN-SCHOOL ADOLESCENTS IN DELTA STATE, NIGERIA

## P.I. Okonta, M. I. Oseji

Reproductive Health Co-ordinator, Public Health Impact Research Centre, Asaba, Delta State, Nigeria.

#### **ABSTRACT**

**Objective:** To determine if there is any correlation between the knowledge of HIV/AIDS among in-school adolescents in Delta state of Nigeria and their sexual behaviour.

**Method:** A questionnaire based descriptive study of randomly selected secondary school students in Asaba, Delta state.

**Results:** A total of 437 students were recruited for the study. About 47% of respondents had good knowledge of HIV/AIDS. The electronic media were their main sources of information. Fifty-eight percent had been sexually initiated but only 10% were currently sexually active. About 73% of the males and 58% of the females reported condom use in their last sexual act. Seventy-three percent of the students that had poor knowledge of HIV/AIDS had ever had sex compared with 69.5% of students with good knowledge. Similarly 45.6% of students with poor knowledge used condom compared with 58.8% who had good knowledge. However these observed differences were not statistically significant.

**Conclusion:** Knowledge of HIV/AIDS by in-school adolescents in Asaba has not significantly influenced their sexual behavior. Program planners should explore and integrate other factors that could impact positively on adolescent sexual behavior.

Key words: In-school adolescents, knowledge of HIV, sexual behavior, Nigeria

### **NTRODUCTION**

Adolescents have long been recognized as particularly vulnerable to sexually transmitted infections (STIs) including HIV/AIDS <sup>1,2,3,4,5</sup>. Thus several programs on HIV/AIDS are targeted at them <sup>6</sup>. Fundamental in all these programs is the need to get the adolescent aware and knowledgeable about HIV/AIDS. Existing reports have documented varying levels of awareness and knowledge about HIV/AIDS by adolescents in some parts of Nigeria <sup>5,6,7,8,9</sup>. The Nigerian National Reproductive Health Survey (NARHS) reports that there is a high level of awareness about HIV/AIDS amongst adolescents but only 19% have complete knowledge of HIV infection

It is presumed that correct reproductive health choices and healthy behaviour can be influenced by good knowledge of reproductive health issues. However reports on the effect of knowledge of HIV/AIDS on sexual behavior have been inconsistent 1.5.6.8. Some reports have shown poor correlation of knowledge with healthy sexual behavior 1.6.11. Against this backdrop, the authors decided to evaluate the knowledge in-school adolescents in Asaba, Delta state of Nigeria have about HIV/AIDS. The study also seeks to document their sexual behavior and finally establish if there exist any

Correspondence: Dr. Patrick I Okonta E-Mail: patrickokonta@yahoo.com

correlation between their knowledge of HIV/AIDS and sexual behaviour.

## MATERIALS AND METHOD

This was a questionnaire based descriptive study conducted in August 2003 in Asaba. Asaba is a fast growing urban town and the capital of Delta state in Nigeria.

The 11 existing secondary schools were stratified according to sex and one school randomly selected by balloting from the male and female schools. All students in the SSS1 class were eligible but only consenting students were given the self administered questionnaire. Confidentiality was assured by making the questionnaires anonymous and keeping their teachers out of the classroom while the questionnaires were filled.

Based on their response to questions relating to HIV/AIDS respondents' knowledge of HIV/AIDS was evaluated and categorized into those with good knowledge and those with poor knowledge. Sexual behavior was elicited using such parameters as; 'ever had sex', 'number of sexual partners in past six months', and 'use of condom in last sexual act'. Any student who had sex in the previous six months was considered sexually active.

Data generated was entered into the computer and analysis done with the SPSS software. Chi square test of statistical significance was applied to compare the variables and a p-value < 0.05 was taken as the level of significance.

### RESULTS

A total of 437 correctly filled questionnaires were analysed in the study. There were 265 females and 172 males. The mean age of the females was 17.1 years while that of the males was 17.3 years. About 205 (47%) of the students had good knowledge of HIV/AIDS while 232 (53%) of the students had poor knowledge of HIV/AIDS. The main sources of the knowledge were through the electronic media. Friends, health workers and parents were not main sources of information and knowledge (Table 1).

Two hundred and fifty-five students (58.4%) comprising of 101 males (59%) and 154 (45%) females reported having ever had sex. Seventy three (73%) of males who had ever had sex reported using condoms in their last sexual act, while 58% of the females reported that their male partner used condom in their last sexual act. About 43 (10%) of the students were currently sexually active. Fifty four percent (54%) of those currently sexually active had only one sex partner in the preceding six months, 13% had 2 sexual partners, 10% had 3 sexual partners, 13% had 4 sexual partners and 5% reported having had 5 sexual partners in the preceding six months.

Analysis of correlation of knowledge of HIV/AIDS with sexual behaviour showed that 73% of students that had poor knowledge of HIV/AIDS had ever had sex, compared with 69.5% of students with good knowledge who had ever had sex. However this difference did not reach statistical significance (p=0.696, OD 1.09, 95% CI 0.70-1.69). Amongst the students that had good knowledge of HIV/AIDS and yet sexually active, 58.8% of them either used condom or had their partner use condom in their last sexual act. This contrasts with 45.6% of students with poor knowledge of HIV. When subjected to statistical analysis the observed difference however did not reach statistical difference (p=0.057, OD 1.7, 95% CI 0.95-3.05).

Table 1: Students Source of Knowledge on HIV/AIDS

Source	Number of Students	%
Radio & Television	264	60.4%
Newspaper & Magazines	49	11.2%
Health Worker	19	4.3%
Friends	27	6.2%
Parents / Family	5	1.6%
Other sources e.g. seminar, school lecture, hiv patient, *swaan.	71	16.3%

<sup>\*</sup> Society for Women and AIDS in Africa, Nigeria

#### DISCUSSION

In our study we found that about 47% of the students had good knowledge of HIV/AIDS as against the remaining 53% of the students who although aware of HIV/AIDS, lacked adequate knowledge of it especially with respect to means of transmission and prevention. Many researchers have documented that though there is a high level of awareness about HIV/AIDS amongst adolescents. much fewer adolescents have the relevant complete knowledge 5.7.8.9.10.12. Odujirin et al in his study on the knowledge, attitude and beliefs of adolescents about HIV/AIDS and its preventive practices in Nigeria, showed that while 96% of adolescents claimed to have heard of the disease called AIDS, only 17% knew all the important routes of transmission 5. Similarly Asindi et al noted that about 92% of adolescents had heard about AIDS but only 30% knew that AIDS exists in Nigeria and only 31% were aware that condoms provide protection <sup>7</sup>

Most programs on HIV/AIDS have focused on creating awareness. Thus the electronic media has been the main medium of achieving this goal. In this study the main source of knowledge by adolescents about HIV/AIDS was through the electronic media. Previous studies have also documented similar findings 1.7.8.9 It is recognized that the mass media can be a powerful tool in the campaign for better reproductive health behaviour of adolescents <sup>13</sup>. However utilization of the mass media for this purpose should be geared towards influencing behavior change rather than just creating awareness. It is debatable if jingles and short adverts could achieve this . We found in this study that friends, health workers and parents were not major sources of knowledge about HIV/AIDS. This finding has important implication for program planning in adolescent sexual and reproductive health (ASRH). Information impacted through friends, health workers and parents are likely to have greater influence on behaviour. This process is interactive and on a personal level. Thus programs on ASRH should focus on exploiting peers, health workers and parents as means of impacting knowledge about HIV/AIDS to adolescents <sup>2,7</sup>

About 58% of our study population (mean age 17 years) had ever had sex, however only 10% were currently sexually active. Thus while more than half of the students would have been sexually initiated, their sexual activity is sporadic. We also observed that there was a relatively high reporting of condom use in their last sexual act. Seventy-three percent of males used condom and 58% of females had their sexual partner use condom in their last sexual act. While this may be encouraging compared to findings from other studies <sup>6</sup>, it should be emphasized that only correct and consistent use of condoms will prevent HIV infection. Moreover, abstinence from

premarital sex still remains the best protection against HIV infection.

There was a slight difference between those who had good knowledge about HIV and those who had poor knowledge of HIV with regard to their sexual behavior. About 73% with less knowledge of HIV had ever had sex compared with 69.5% of students with good knowledge of HIV. Also 58.8% of the students that are sexually active and had good knowledge of HIV used condom in their last sexual act compared to 45.6% of students with poor knowledge of HIV. However these observed differences did not reach statistically significant levels. This finding suggests that knowledge of HIV/AIDS has not significantly impacted on adolescent sexual behavior. There are probably other factors that influence adolescent sexual behavior other than knowledge of sexually transmitted infections including HIV/AIDS. Some researchers have concluded that information and education about HIV/AIDS does not seem to be sufficient motivation to change sexual behaviour 6.11.14. Other reports have also documented that about 30%-40% of adolescents said that their first sexual exposure was not intended or voluntary 6.11, thus other factors apart from adequate knowledge contribute to adolescent sexual behavior

# **CONCLUSION**

From the findings of this study, it is suggested that programs on prevention of HIV infection amongst adolescents should explore more the participation of peers, health workers and parents in providing correct and adequate information about HIV/AIDS. Information given through the mass media should be packaged in such a way as not only to create awareness but more importantly influence behaviour change. Furthermore, being evident that knowledge alone does not contributes much to change adolescent sexual behavior; more research should be carried out to find out other factors that may impact on adolescent sexual behavior in the locality. Findings from such study will form a rational basis for program design that will motivate sexual behavior change.

## REFERENCES:

- Temin MJ, Okonofua FE, Omorodion FO, Renne EP, Coplan P, Haggenhougan HK, et al: Perception of sexual behavior and knowledge about sexually transmitted diseases among adolescents in Benin-city, Nigeria. Int Fam Plan Perspect; 1999; 25(4): 186-190.
- Amazingo U, Silva N, Kaufman J, Obikeze DS. Sexual activity and contraceptive knowledge and use among in-school adolescents in Nigeria. *Int Fam Plan Perspect*; 1997; 23 (1) 28-33

- Makinwa-Adebusoye P. Sexual behavior, reproductive knowledge and contraceptive use among young urban Nigerians. *Int Fam Plan* Perspect; 1992: 18(2): 66-70.
- Nichols D. Sexual behavior, contraceptive practice, and reproductive health among Nigerian adolescents. Stud Fam Plan, 1986; 17: 100-106.
- Odujinrin OM, Akinkuade FO. Adolescents AIDS knowledge, attitude and beliefs about preventive practices in Nigeria. Eur J. Epidemiol, 1991; 7(2): 127-33.
- Oboro VO, Tabowei TO. AIDS prevention programs and sexual behavior among secondary school adolescents in Delta state. Nigeria. *Trop* J. Obstet Gynaecol. 20(1) 2003.
- Asindi AA, Ibia EO, Young MU. Acquired Immune deficiency Syndrome (AIDS): education. exposure, knowledge and attitude of Nigerian adolescents in Calabar. Ann Trop Paediatr. 1992; 12(4): 397-402
- Asuzu MC. Sexual belief, attitude and knowledge of adolescent youths in Ibadan concerning AIDS. West Afr. J Med. 1994; 13 (4): 245-7.
- Nwokocha AR, Nwakoby BA. Knowledge, attitude and behavior of secondary (high) school students concerning HIV/AIDS in Enugu, Nigeria, in the year 2000. J Ped Adol Gynecol.. 2002; 15(2): 93-96.
- 10. FMOH. National HIV/AIDS and Reproductive Health Survey. Federal Ministry of Health 2003.
- 11. Rwenge R. Sexual risk behavior among young people in Bamenda, Cameroon. . *Int Fam Plan Perspect*; 2000: 26(3): 118-123
- Sunmola AM, Dipeolu M, Babalola S, Adebayo OD. Reproductive knowledge, sexual behavior and contraceptive use among adolescents in Niger state of Nigeria. Afr J Reprod Health 2003;7(1):37-48.
- 13. **Keller S.** Media can contribute to better health. *Network* 1997: 17(3): 29-31.
- Ayiembo EH. The effect of health education programs on adolescent sexual behavior: a case study of Nairobi city. *African Population* Studies. 2001;16(1) 87-103.