
Awareness of HIV/AIDS among Rural Population in Edo State, Nigeria

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ABSTRACT

The purpose of this study was to determine the awareness, knowledge and beliefs about HIV/AIDS among three rural populations of Edo State Nigeria 568 individuals among the inhabitants of the three villages were randomly surveyed for this study. This was done by means of questionnaires administered to them by trained field health workers. It was found that 40% of the population was still not aware of the presence of HIV/AIDS. 80% were fully grown adults and 99% were unmarried. 20% attributed the death toll on our young and active workforce to mysterious circumstances and evil spirits. The need to spread the campaign for the prevention of HIV/AIDS to the rural areas of this country cannot be overemphasized.

Keywords: HIV/AIDS, Rural Dwellers, Sexually Transmitted Diseases (STDs).

INTRODUCTION

HIV/AIDS pandemic is a serious health problem in sub Sahara Africa particularly Nigeria. Since the emergence of this dreaded disease among us which up to date has no cure, it has created a very heavy health burden on the Government of these countries which are predominantly very poor. The lack of industrial development has placed these countries in the under developed zone; this had further led to a large population of these countries been uneducated, unlearned and thus are illiterates. A

lot of awareness campaigns are made in the media by many Non-governmental Organizations (NGOs), Government and Medical Associations mainly through posters, print and electronic media. However, these are done mainly in urban areas and big Cities while the rural areas and villages are completely left out. It is on record that majority of our population lives in the rural areas and villages, so for adequate health coverage the people in the villages and the rural areas of our country must be included, or the health policy and programme will be

defective^[1].

The level of illiteracy in the underdeveloped countries is very high and this could contribute seriously to the ignorance and high degree of unawareness about HIV/AIDS. The spread of HIV/AIDS is decreasing in the developed countries while it is increasing in the underdeveloped countries^[2]. This had further weakened the economic power of these poor nations who are already saddled with high debt burden. The lack of knowledge of the importance of protected and safe sexual activity could lead to unwanted pregnancies, teenage births, induced abortions often by quacks, life threatening complications and maternal death among others^[3, 4]. Comprehensive health education is lacking in this country especially among the rural dwellers and this could contribute to their lack of awareness of this dreaded monster that has plagued our Country. The level of awareness of HIV/AIDS among the rural populations in this country will help in the prevention of this disease and also of its spread, thereby reducing the health risks associated with the disease among others^[5]. It will also help in designing and advocating reproductive health programme for the rural areas. This will equally form a data base for Government, NGOs and health associations'

interventions and solutions to reproductive health problems in rural areas which hitherto have not received the attention it deserves. Moreover, if we concentrate on the rich urban areas alone the cross migration among the population will render the planed strategy defective.

METHODOLOGY

Five hundred and sixty eight adults between the ages of 10 and 55 years bracket from three (3) rural villages in Edo state were randomly selected and surveyed by means of questionnaires. They were surveyed on aspects of awareness of HIV/AIDS, based on their sexual behaviour: number of sexual partners, previous infections with Sexually Transmitted Diseases (STDs), treatment options and protected sexual activity. The questions were aimed at obtaining information on the respondents' socio-demographic characteristics, aspect of sexuality, their beliefs awareness and treatment of STDs including HIV/AIDS. The data gathered through field work was collected between January and June 2002. Ten field workers were recruited and trained for a period of two weeks preceding the exercise. All the field workers were auxiliary nurses who were adequately knowledgeable in reproductive health matters based on their experience in the hospitals.

RESULTS**Table 1: Socio-Demographic Characteristics of Respondents**

		Male	%	Female	%	Total
Age	10-13	58	21.1	91	18.75	150
	14-18	120	50.1	240	50.0	380
	19-25	70	26.0	150	31.25	220
Education	Primary	40	9.5	60	18.2	100
	Secondary	199	73.9	401	83.3	600
	Tertiary	30	7.1	20	6.0	50
Religion	Christian	204	75.8	446	92.7	650
	Islam	50	13.6	30		80
	Others	15	4.1	5		20

Source: Field Survey 2002

Table 2: Pattern of Sexual Practice Among the Respondents

Sexual Practice	Male	Female
Single partner	118	120
Use of condom	11	120
Abstinence	8	12
Multiple partners	130	17
Married couples	44	20
Previous STDs	12	14
Laboratory diagnosis	14	18

Source: Field Survey 2002

DISCUSSION

This study presents, the result of the survey carried out among three villages in Edo state that showed the degree of their awareness about HIV/AIDS. The respondents include 248 males and 320 females giving a total 568 while 99% of the respondents were unmarried more than 65% were adolescents between the ages of 10-15years, while 35% were adults between the ages of 20-55 years. 65% of the boys had girl friends while 95% of the girls had

boy friends. It was also discovered that the girls were more willing to discuss about their sexual life more than the boys. 60% were aware of the presence of HIV/AIDS but did not actually believe that it is a sexually transmitted disease. Their knowledge is just on general note and they do not don't believe that it can be transmitted through sex hence they still practice unprotected sexual activity. With the high percentage of adolescent surveyed in this work it can be seen

that the population at risk of HIV/AIDS infection is therefore very high and what is more disturbing is that teenage sex is practiced among the rural dwellers as the youngest among the survey group is ten years old, this is the age of a child in the upper class of primary school, (table 1).

Moreover, the rural to urban migration and vice versa makes it mandatory that comprehensive health policy must equally include the villages and rural arrears of this country. We also believe that the picture of the awareness of HIV/AIDS in Edo state may not be different from what it is in other States of the country ^[6]. There is therefore the need for a comparative work in other States of the federation so that a national picture can be available both for epidemiological and planning strategy. An audit of health facilities in this country may also reveal the great neglect and absence of adequate health facilities in the rural areas. Even when the facilities are available lack of trained and experienced personnel as well as modern equipment and other challenges etc. tends to affect provision of quality health care service in the rural areas.

REFERENCES

1. Amazigo U., Kaufman J. *et al.* (1997). Sexuality and

Contraceptive Knowledge and Use Among In-school Adolescent in Nigeria. *Studies in Family Planning*. 23:28-33.

2. Nigeria Office of Statistics and Demographic and Health Surveys Macro Systems 1992.
3. Okonofua F.E. (1995). Factors Associated with Adolescent Pregnancy in Rural Nigeria. *Journal of Youths and Adolescence*, 24:419-438.
4. Brabin L. Kemp J. Obunge O. *et al.* (1995). Reproductive Tract Infection and Abortion Among Adolescent Girls in Nigeria. *Lancet* 300-304.
5. Oronsaye F.E. and Yusuf (...). Prevention of HIV/AIDS from a Social Cultural Perspective. *Journal of Social Science and Medicine* in Press.
6. Increase in the Spread of HIV/AIDS in Bauchi State Nigeria. *Vanguard News Papers of Nigeria*. 17th August, 2004 page 35.
7. Oronsaye F. E. and Anumkam K.C. (2002). Practice of Safe Sexual Activity Among Three Populations in Edo State, Nigeria. *African Journal of Nursing and Midwifery*. Vol.4, No. 2, Pp. 30-32.
8. Ferguson A.G., Morris C.N.,

- Kariuki C.W. (2006). Using Diaries to Measure Parameters of Transactional Sex: An Example from the Trans-Africa Highway in Kenya. *Cult Health Sex*; 8:175-0185.
9. Van Rossem R. Meekers D., Akinyemi Z. Consistent Condom Use with Different Types of Partners: Evidence from Two Nigerian Surveys. *AIDS Educ. PreiOOQI*; 13:252-267.
 10. Osho A., Olayinka B.A. Sexual Practices Conducive to HIV Transmission in Southwest Nigeria. *The Axtfimang African HIV/AIDS Epitkmk* 1999: 85-91.
 11. Joint United Nations Programme on HIV/AIDS (UNAIDS). Estimated Adult HIV Prevalence Rate. Report on Global HIV/AIDS Epidemic. Geneva: UNAIDS, 2006.
 12. Hope K.R., Population Mobility and Multi-partner Sex in Botswana: Implications for the Spread of HIV/AIDS. *Afr. J. Reprod. Health*. 2001; 5:73-83.
 13. Rwenge M. Sexual Risk Behaviors Among Young People in Bamenda, Cameroon. *Int. Fam Plam Perspect* 2000; 26:118-123,130.
 14. Ayiamba E.H. The Effect of Health Education Programmes on Adolescent Sexual Behaviour: A Case Study of Nairobi City Adolescents. *Afr. Pop. Stud.* 2001; 16:87-103.

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