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The Attitude of youths towards HIV/AIDS in Uyo metropolis: Religious and Social perspectives

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Abstract

The study examines the attitude of youths towards HIV/AIDS in Uyo metropolis. In this study, a survey design was used. A structured questionnaire was adopted for data collection. Three research questions and two research hypotheses were formulated to guide the study. The population of the study was 10,450 adolescents from Uyo metropolis. A stratified sample technique was used to select a sample size of 200 youths. The reliability test carried out using Pearson Product Moment Correlation Coefficient (PPMCC) gave the result as 0.5 which shows that the instrument was reliable. Data collected was analyzed using percentages while the chi-square statistics was used to test the null hypotheses at 0.05 level of significant. The findings revealed that unsafe sexual involvement by the youths contributes to contracting or spreading of HIV/AIDS by youths in Uyo metropolis of Akwa Ibom State. It was recommended among others that Government and Non-Governmental Organizations should embark on social re-engineering of youths towards positive attitude through the mass media.

1. Introduction

HIV/AIDS is indeed a major public health problem in Nigeria and most countries of the third world. On April 23rd 2001, *Newswatch* cover story estimated that 2.6 million Nigerians were living with the virus; implying that about this number may likely be HIV positive. The amazing statistics of youths infected by HIV/AIDS as revealed in the medical records of some health institutions in Uyo metropolis visited by researches of this paper are unbelievable. This confirms the report of the World Health Organization (WHO:1995) which showed that 50 percent of HIV infections over the world occur among young people below 25 years of age, a period characterized by high exploration and experimentation. The devastating effects of HIV/AIDS is felt in every facet of societal life as Chukuezi, (2002:145) rightly observed, cutting down the youths, the educated and so many people in the prime of their life.

HIV/AIDS is indeed a major public health problem which the Nigerian government, like other government in the world, is battling to solve. In the Nigerian experience, HIV/AIDS portends a great danger and threat to nation health system, individuals, families and communities particularly to the uninformed people. It is against this background of the rapidity of reported cases of the spread of the disease among the youths that this study is being conducted to investigate the attitude of youths towards HIV/AIDS in Uyo metropolis of Akwa Ibom State. This study is to advance the religious and social perspectives towards the reduction of HIV/AIDS infection among the youths. It seeks to achieve the following specific objectives: to determine the contribution of unsafe sexual involvement of youth to contracting HIV/AIDS within Uyo metropolis; to determine the effect of poverty on unsafe sexual attitudes of youth in Uyo metropolis. Furthermore, the study is to also determine the effect of religious bodies and belief systems on youth's involvement in sexual activities in Uyo metropolis. Finally, recommendations are made towards reducing or tackling the problem of HIV/AIDS among youths in Uyo metropolis.

It is expected that from the findings and recommendations made from this study, there will emerge a new body of knowledge that will help the youths change their negative attitude HIV/AIDS. Parents, religious bodies and policy makers will immensely benefit from the findings of this study in the area of reducing the spread of HIV/AIDS and assisting young people to change their attitudes towards this life threatening syndrome.

2. Research Questions

The three research questions used for this study are as follows:

- a) How does unsafe sexual involvement contribute to the contacting of HIV/AIDS by youths in Uyo metropolis?
- b) How does poverty influence unsafe sexual attitudes among youths in Uyo metropolis?
- c) What roles do religious bodies and beliefs play in combating HIV/AIDS among youth in Uyo metropolis?

3. Research Hypothesis

The research hypotheses are as follows:

- a) Poverty does not influence the attitude of youths in Uyo metropolis towards HIV/AIDS

- b) Religious bodies and beliefs does not influence the attitudes of youth in Uyo metropolis towards HIV/AIDS.

4. Research Design

The survey design was used for the study. This is considered appropriate because the study needs the opinion of respondents in determining the influence of religion on the attitudes of youths towards HIV/AIDS in Uyo metropolis.

5. Area of the Study

The research study was carried out in Uyo metropolis in the south-south zone of Nigeria. Uyo is the capital of Akwa Ibom State, a major oil producing state in Nigeria. The population is estimated at 4.5 as of 2006 (NPC reports). It has an area of 95km² (36.75q. ml) and a land area of 95km², 36.75q. ml¹

Uyo Local Government Area is made up of traditional clans namely, Etoi, Offot, Oku and Ikono with eleven (11) political wards and eighty-two (82) villages. The main occupation of the people are farming and trading. By virtue of its geographical location in relation to the rest of the town in the state, Uyo assumes prominence as a commercial nerve centre. The city also boasts of important road network in the state. The Local Government Area is one of the oldest centres of education in the State. Consequently, there are numerous institutions of learning where many youths are enrolled.

6. Population of the Study

The population of the study consists of adolescents in Uyo metropolis, estimated at over 10,450 thousand youths.

7. Sample size and Sampling Technique

A sample size of 200 youths were drawn from the total population of the study. Thus, a stratified sample technique was applied to select 200 youths to form the sample size for the study.

8. Instrument for data collection

Questionnaire tagged "Attitude of Youths towards HIV/AIDS questionnaire" (AYTHAQ) formed the major instrument for data collection. The instrument is divided into two sections; section "A" seeks information on demographic data from the respondents, while section "B" requires information on the attitude of youths towards HIV/AIDS in Uyo metropolis.

9. Validation of the Instrument

In order to determine that the instrument is capable of measuring what is proposed to measure, the instrument was first submitted to two experts from the Faculty of Social Sciences and one from the Department of Statistics in the University of Uyo to assess the content validity. This helped in modifying items necessary to avoid misapplication of work.

10. Reliability of the Instrument

The reliability of the instrument was observed through trial test. The test was carried out on ten respondents outside the study area. The result of the first and second test on the ten respondents was computed by using Pearson Product Moment Correlation Coefficient (PPMCC). The result was used to carry out the reliability of the instrument.

11. Method of data collection

The researcher personally administered the instrument to the respondents in Uyo metropolis. In addition, oral interview was conducted on selected youths in Uyo metropolis to supplement those not covered by the questionnaire. All the respondents were appealed to complete the questionnaire and return to the researcher to avoid loss.

12. Method of data Analysis

The data collection through the structured questionnaire was analyzed according to the research variables, percentage and table were used to analyze the research questions while the chi-square (X^2) statistics was used to test the hypothesis. The entire test was conducted at 0.05 level of significant.

13. Presentation of data

The data collected from the research questions were analyzed using tables and percentages while chi-square (X^2) statistics was used to test the null hypotheses at 0.05 level of significance. To accomplish the purpose of the study, a total of two hundred (200) copies of questionnaire were administered randomly to selected youths in uyo metropolis. Out of this copies, 185 (93%) were appropriately completed and returned for data analysis, while 15 (7%) copies were not returned. Thus the analysis in this chapter is based on the 93% of responses rate.

14. Analysis of demographic data

Table 1: Age Distribution of the respondents

S/N	Age Range	Frequency	Percentage
A	15 – 20	40	21.6%
B	21 – 26	95	51.4%
C	27 and above	50	27.0%
	Total	185	100%

Source: Field work, 2011

Table 1 above shows that 40 (21.6%) of the respondents were between the age range of 15 – 20 years old, 95 (51.4%) were between the age range of 21 – 26 years old and 50 (27%) of the respondents fall within the age range of 27 and above. The data further show that youth within the age range of 21 – 26 years old were the majority in the population among those sampled with the research instrument.

Table 2: Gender distribution of the Respondents

S/N	Gender	Frequency	Percentage
A	Male	120	64.9%
B	Female	65	35.1%
	Total	185	100%

Source: Field work, 2011

Table 2 above shows that 120 (64.9%) of the respondents were male while 65 (35.1%) were female. The data further shows that male were the majority of the youth that the researcher used for the study

Table 3: Religious Distribution of the Respondents

S/N	Religious	Frequency	Percentage
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A	Christianity	165	89.2%
B	Muslim	15	8.10%
C	A. T. R.	5	2.7%
	Total	185	100%

Source: Field work, 2011

Table 3 above shows that 165 (89.2%) of the respondents were Christians, while 15 (8.1%) were Muslims and 5 (2.7%) of the respondents were those youth that belief in African Traditional Religion (A. T. R.)

Table 4: Occupation Distribution of the Respondents

S/N	Occupation	Frequency	Percentage
A	Student	120	64.9%
B	Civil servant	10	5.4%
C	Business	20	10.8%
D	Unemployed	35	18.9%
	Total	185	100%

Source: Field work, 2011

Table 4 shows that 120 (64.9%) of the respondent were students, 10 (5.4%) were civil servants, 20 (10.8%) were business people and 35 (18.9%) were unemployed youths.

Table 5: Educational Distribution of the Respondents

S/N	Educational Status	Frequency	Percentage
A	Non-Education	-	-
B	Secondary	64	34.6%
C	OND/HND	76	41.1%
D	University	45	24.3
	Total	185	100%

Source: Field work, 2011

Table 5 above shows that 64 (34.6%) of the respondents are secondary school students, while 74 (41.1%) were holders of ordinary/higher national diploma, and 45 (24.3%) were university students.

15. Research Question 1

How does unsafe sexual involvement contribute to the contracting of HIV/AIDS by youths in Uyo metropolis?

Table 6: Percentage analysis of unsafe sexual involvement and HIV/AIDS among youths

S/N	Variables	No of Respondents	Percentage
A	Sex with contraceptive	60	32.4%
B	Sex without contraceptive	105	56.8%
C	No knowledge about any contraceptive	20	10.8%
	Total	185	100%

Source: Field work, 2011

Table 6 above shows that 60 (32.4%) of the respondents indicated that sex with contraceptive reduced rate of contracting of HIV/AIDS by youths in Uyo metropolis, 105 (56.8%) indicated that the spread of HIV/AIDS among the youths in Uyo metropolis is done due to sex without contraceptive and 20 (10.8%) indicated that they have no knowledge about any contraceptive. Based on this analysis, it is deduced that the spread of HIV/AIDS by the youths in Uyo metropolis is due to unsafe sexual involvement.

Research Question 2

How does poverty influence unsafe sexual attitude among youths in Uyo metropolis.

Table 7: Percentage analysis on poverty and unsafe sexual attitudes among youths.

S/N	Variables	No of Respondents	Percentage
A	Yes	128	69.2%
B	No	25	13.5%
C	I can't decide	32	17.3%
	Total	185	100%

Source: Field work, 2011

Table 7 above shows that 128 (69.2%) of the respondents indicated that poverty influences unsafe sexual attitudes among youths in Uyo metropolis, while 25 (13.5%) indicated No and 32 (17.3%) asserted that they cannot decide from the data, hence it is deduced that poverty influences unsafe sexual attitude among youths in Uyo metropolis.

Research Question 3

What roles do religious bodies and beliefs play in combating HIV/AIDS among youths in Uyo metropolis?

Table 8: Percentage analysis on the roles of religious bodies and beliefs in combating HIV/AIDS

S/N	Variables	No of Respondents	Percentage
A	Yes	145	78.4%
B	No	10	5.4%
C	I can't decide	30	16.2%
	Total	185	100%

Source: Field work, 2011

Table 8 above shows that 145 (78.4%) of the respondents indicated that religious bodies and beliefs do play a significant roles in combating HIV/AIDS among youth, 10 (5.4%) asserted No and 30 (16.2%) indicated that they cannot decide. From the data, it is deduced that religious bodies and beliefs play a significant roles in combating HIV/AIDS among youths in Uyo metropolis.

16. Testing of Hypothesis

Ho: Poverty does not influence the attitude of youths in Uyo metropolis towards HIV/AIDS

H₁: Poverty does influence the attitude of youths towards HIV/AIDS in Uyo metropolis

Table 9: Chi-Square(χ^2) computation on poverty and attitude of youths towards HIV/AIDS in Uyo metropolis.

S/N	Variables	Fo	Fe	Fo-Fe	(Fo-Fe) ²	$\frac{(Fo-Fe)^2}{Fe}$
A	Yes	128	61.7	66.3	4395.69	71.2
B	No	25	61.7	-36.7	1346.89	21.8
C	I can't decide	32	61.7	-29.7	882.09	14.3
	Total	185				$\chi^2 = 107.3$

Source: Field work, 2011

Significance at 0.05

The degree of freedom is obtained by:

$$(R-1)(C-1)$$

$$(3-1)(2-1)$$

$$(2*1) = 2$$

Table 9 above shows that the computed chi-square value of 107.3 is greater than the critical table value of 5.99 at 0.05 level of significance meaning that the null hypothesis (H_0) is rejected, while the alternative hypothesis (H_1) is accepted.

Hypothesis 2

H_{02} : Religious bodies and beliefs do not influence the attitude of youths in Uyo metropolis towards HIV/AIDS

H_2 : Religious bodies and beliefs do relate or influence the attitude of youths in Uyo metropolis towards HIV/AIDS.

Table 10: Chi-Square (χ^2) computation on Religious bodies and beliefs and its influence on youths attitude towards HIV/AIDS

S/N	Variables	Fo	Fe	Fo-Fe	(Fo-Fe) ²	$\frac{(Fo-Fe)^2}{Fe}$
A	Yes	145	61.7	83.3	6938.89	112.5
B	No	10	61.7	-51.7	2672.89	43.3
C	I can't decide	30	61.7	-31.7	1004.89	16.3
	Total	185				$\chi^2 = 172.1$

Source: Field work, 2011

Significance at 0.05

The degree of freedom is obtained by

$$(R-1)(C-1)$$

$$= (3-1)(2-1)$$

$$= (2*1) = 2$$

Table 10 above shows that the computed chi-square value of 172.1 is far greater than the critical table value of 5.99 at 0.05 levels significance, meaning that the null hypothesis (H_0), is rejected while the alternative (H_1) is accepted.

17. Discussion of Findings

Unsafe sexual involvement among youths and contracting HIV/AIDS

The result of data as analyzed in table 6 shows that the majority of the respondents 105 (56.8%) indicated that sex without contraceptive increase the risk of contracting HIV/AIDS among the youths. These findings are supported by other scholars. Unuigbo and Osufu's (1999:39-44) study among adolescent girls in Benin City explored the extent of knowledge and awareness of HIV/AIDS within the sampled population and the findings review wide knowledge and identified casual sex as the main route of transmission. The study also found high sexual activity among the youth in spite of their knowledge and awareness of HIV/AIDS.

Again, in support of the findings, Onifade (1999: 102) study conducted in Ondo state among 1,758 adolescents comprising 829 males and 929 females, also revealed that 78.6% of the males and 80.7% of the females had knowledge of STDs. Also AIDS and Gonorrhoea were the two most frequently mentioned STDs known by the respondents. Yet, this knowledge did not translate into positive behaviour as substantial respondents kept more than one partner. Thus, unsafe sexual involvement among the youth contributed immensely towards contracting of HIV/AIDS among youths in Uyo metropolis. It further means that unsafe sex relationship among the youths is the main route of contracting and spreading of HIV/AIDS in the state.

Influence of poverty and unsafe sexual attitude among youths

The result of data analysed in table 7 and 9 indicated that poverty contributed immensely towards unsafe sexual attitude among the youths in Uyo metropolis of Akwa Ibom State. The result indicated that above 69.2% of all the respondents agreed that poverty influenced unsafe sexual behaviour of youths in Uyo. These findings are supported by previous findings in other places including Nigeria. Chukuezi (2002:145) asserted that vulnerability of the adolescent in the developing countries included is due to poor economy, which impacts greatly on the family income, are straining resources, burdening women in particular as well as risk of survival.

Furthermore, the findings is supported by Onifade (1999:54), who asserted that the majority of African population now living in the urban areas characterized by overcrowding, low income and lack of employment, are noticeable preponderance of females who are not certain of their daily meals, therefore leading young people to sexual risk. This implies that poverty is the root cause of young risky sexual relationship with people without considering contracting HIV/AIDS.

Religious Bodies and beliefs: it's influence in combating HIV/AIDS among youths.

The result of data analyzed in table 8 and table 10 showed that over 78.4% of the respondents confirmed the significant role that religion and beliefs played in combating HIV/AIDS among the youths in Uyo metropolis. These findings supported by other findings for example Kerby (1994:28), asserted that moral education and preaching by religious organization section played significant role in reducing the rate of spreading HIV/AIDS among the youths. To him, education is paramount because it can empower people with the knowledge they need to protect themselves from infection. Also, only education can combat the discrimination that helps perpetuate the pandemic. Thus, moral

education is very necessary to help children and young people acquire the knowledge and develop skills they need to build a better future.

18. Summary

This was carried out to examine the attitude of youths towards HIV/AIDS in Uyo metropolis and to determine the religious and social perspectives towards reducing the problem among youths. To achieve this purpose, three research questions and two research hypotheses were formulated to guide the study. A structured questionnaire was used as the main instrument to collect data from 200 respondents in Uyo metropolis, through random sampling technique. The data collected from the respondent were analysed using percentage and tables for the research questions and chi-square (χ^2) statistics for testing the hypotheses. The following major findings were revealed;

1. Unsafe sexual involvement by the youths contributed to contracting or spreading of HIV/AIDS by the youths in Uyo metropolis of Akwa Ibom State.
2. Poverty significantly influenced unsafe sexual attitudes among youths in Uyo metropolis
3. Religious bodies and beliefs do play a significant role in combating HIV/AIDS among youths in Uyo metropolis. Church as religious organization has the moral authority to promote healthy behaviour among members, and can offer more imperatives for the family, and to teach moral motivation for abstinence and faithfulness to one sex partner

The findings further revealed that casual sex and poor or inadequate awareness of the HIV/AIDS among youths coupled with cultural beliefs helped to increase the rate of HIV/AIDS among youths in Uyo. Hence it is the hope of this study that strong campaign and enlightenment be mounted on the effect of negative attitudes of youths towards HIV/AIDS on the future of the young people.

19. Conclusion

Based on the findings, the following conclusions were made. From the empirical evidence presented in this study, it is concluded some youths in Uyo metropolis tend to exhibit negative attitude towards HIV/AIDS and use of contraceptive when having sex. This suggests the lack of or inadequacy of moral education that ought to pay particular attention to HIV/AIDS scourge. Because of this deficiency, youths in Uyo metropolis become socialized with the belief system that has neither scientific origin nor proof.

Based on the above, it is concluded that the increase in spread or contracting of HIV/AIDS among youths in Uyo metropolis of Akwa Ibom State is due mainly to unsafe and casual sexual relationship among the youths.

20. Recommendations

Based on the findings of this study and its subsequent conclusion, the following recommendations are made:

1. Government and Non-Governmental organizations (NGOs) should embark on social re-engineering of youths towards positive attitude through the mass media.

2. The family as the biological, social and economic entity should wake up from slumber and spearhead the obligatory task of ensuring adequate upbringing of the children.
3. More so, parent should learn to promote the home as first school.
4. Church should counsel the youths on the life skills education, incorporate it in the youth camps and in youth centre programmes of the church.
5. The church should also recognize the importance of the role of church leadership in this fight, hence, the leaders and workers need to be equipped with the latest update of HIV/AIDS information.
6. Workshop, seminars and training programmes should be organized for the youths and young people on the risk of unsafe sexual relationship, to help them create greater awareness on the impact of HIV/AIDS on their future.
7. The church should also encourage parents to become more involved in their children
8. Government should improve its welfare package on the vulnerable groups in the society to enable them have hope for tomorrow.

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