

1     **Evaluation of Socio-psychologic factors that impede/promote**  
2           **Voluntary Counseling Test (VCT) services among youths in**  
3                   **Anambra State**

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5     **Keyword:** Social factors, psychologic factors, impede VCT, promote  
6     VCT

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8     **ABSTRACT:**

9     The socio-psychologic factors that impede/promote VCT services  
10    among youths in Anambra State of Nigeria was evaluated. 400  
11    youths were randomly selected using multi-stage method.  
12    Questionnaire was used as the instrument. The split-half method  
13    was used to test the reliability of the instrument with correlation  
14    coefficient of .85. The result showed that socio-psychologic factors  
15    that impede VCT as perceived by youths in Anambra state include  
16    fear of stigma (mean score 2.8), fear of positive test result (mean  
17    score 2.8), Abandonment and rejection (mean score 2.7), fear of lack  
18    of care and support if test is positive (mean score 2.6) while those  
19    factors identified to promote VCT include desire to know how to  
20    remain uninfected (mean score 3.5). It was concluded that since  
21    socio-psychologic factors impede/promotes VCT as perceived by the  
22    youths, public should be made to understand that going to access  
23    VCT services does not mean that the individual is already infected  
24    and want to confirm it in order to be receiving treatment rather it  
25    mean going to acquire information that will help one remain

26 uninfected or reduce transmission of HIV and live healthy life if  
27 found infected.

28

29 **Introduction:**

30 Human immune deficiency virus (HIV) counseling is the confidential  
31 dialogue between individuals and their health care provider to help  
32 clients examine their risk of acquiring and transmitting HIV  
33 infection and to make informed decision based on information  
34 available to them (Osman 2002). As stated by Centre for Disease  
35 Control (2001) and WHO (2004), counseling was designed to help  
36 persons interpret the meaning of negative and positive results, to  
37 initiate and sustain behavior changes that reduce risk of becoming  
38 infected and to assist HIV positive individuals in avoiding infecting  
39 others. Maman and Mbiwambo (2001) opined that the overall  
40 objective of VCT is preventive with emphasis on confidentiality and  
41 voluntary. This includes individual decision, protecting the  
42 individual's decision not to be tested or not to learn about the result  
43 of the test. Because VCT has been confidential and non-  
44 threatening, it has tended to attract those who might otherwise shy  
45 away from HIV interventions.

46

47 Despite these benefits of VCT, many people especially young people  
48 still do not access VCT services as supposed. This may be as a  
49 result of factors which play detrimental role in the acceptance and  
50 use of VCT services as posited by Gretachew, Isemuel and Beloimeh  
51 (2002). Bronnon and Fiest (2000) opined that certain variables or

52 factors could influence compliance or adherence to preventive  
53 measures and grouped these factors as socio-demographic, socio-  
54 economic, socio-psychologic, ethnicity and structural factors.

55

56 Evaluation and understanding the socio-psychologic factors  
57 associated with VCT utilization is important and timely since  
58 identifying these factors may help in removing the barriers to  
59 accessing VCT as well as promoting its use. Hence this study that  
60 aimed at evaluation of socio-psychologic factors that  
61 impede/promote VCT services utilization among youths in Anambra  
62 state of Nigeria.

63

#### 64 **Methodology**

65 A cross-sectional descriptive survey research design was used to  
66 study the youths' knowledge of VCT in Anambra state of Nigeria  
67 with youth population (15-29 years) of 1,307,637 (National  
68 Population Commission (NPC) 2006).

69 Multistage, simple random and proportionate selection techniques  
70 were used in selecting the subjects. This involved random selection  
71 of two local governments from each of the three senatorial zones of  
72 the state making a total of six (6) local government areas. The six  
73 local government areas selected were Oyi, Ogbaru, Ihiala, Nnewi  
74 North, Awka South and Idemili North. A community was selected  
75 using simple random sampling from each of the selected local  
76 government. The communities selected were Okpoko, Umunya,  
77 Ihiala, Nnewi, Awka and Ogidi. The total population of youths in

78 these communities according to NPC (2006) is 137,074.  
 79 Proportionate sampling was used to select a total of 400 youths that  
 80 were used for the study.

81

82 The instrument of data collection was questionnaire. Split-half  
 83 method was used to test the reliability of the instrument and the  
 84 correlation coefficient was 0.85. The researchers administered the  
 85 instrument to the youth in various churches, football fields and in  
 86 schools. Permission to carry out the study was obtained from  
 87 community leaders verbally. Individuals informed consent were  
 88 equally obtained from each participant. The data were analysed  
 89 using SPSS version 17.

90

## 91 **Results**

92 **Table 1:** Socio-psychologic factors that impede/promote VCT  
 93 among youths in Anambra state

Question	Responses	SA Freq.	A Freq	D Freq	SD Freq	- X
Socio- psychologic factors that impede VCT	Fear of stigma/discrimination	115	129	105	48	2.8
	Abandonment and rejection.	112	128	92	65	2.7
	Lack of care and support if test result is positive.	91	121	131	54	2.6
	Fear of a positive test	133	120	85	58	2.8

	result.					
	Don't feel I can contract HIV infection	93	100	129	75	2.5
	Fear of disclosure of result.	73	153	107	14	2.6
	Fear of people finding out.	94	142	113	48	2.7
	Not of age	31	45	143	178	1.8
	Average %	93 (23%)	117 (30%)	113 (28%)	74 (19%)	2.6
Question 2	Responses	SA Freq	A Freq	D Freq	SD Freq	- X
Socio- psychologic factors that promote VCT	Desire to know HIV status	261	116	19	1	3.6
	To obtain counseling	227	146	19	5	3.5
	Availability of support services	115	173	83	26	2.9
	Lack of stigma & Discrimination	117	162	82	36	2.9
	Average %	180 (45%)	149 (38%)	51 (13%)	68 (17%)	3.2

94 SA=strongly agree, A=agree, D=disagree , SD=strongly disagree

95 Table 1 shows that youths had average of 93 (23%) respondents, for  
96 strongly agreed that 117 (30%) responses for agreed, giving and

97 average total of 210(53%) positive responses to socio-psychologic  
98 factors that hinder VCT while a total of 187(47%) responses  
99 represent negative responses to socio-psychologic factors that  
100 hinder VCT. As per individual socio-psychologic factors that hinder  
101 VCT, fear of stigma/discrimination had the highest mean score of  
102 2.8 indicating a positive response, likewise fear of a positive result  
103 with mean score of 2.8. Abandonment/rejection and fear of people  
104 finding out had mean scores of 2.7 respectively. Fear of lack of  
105 support if result is positive and fear of disclosure of result had  
106 mean scores of 2.6 respectively, all indicating positive responses.  
107 Not of age had a mean score of 1.8 indicating a negative response.  
108 For socio-psychologic factors that promote VCT, desire to know HIV  
109 status had 261 strongly agreed responses, 116 agreed while 19  
110 disagreed and 1 strongly disagreed to the item. Their responses to  
111 the item yielded a mean score of 3.6 indicating a positive response.

112  
113 To obtain counseling on how to remain uninfected had 227 strongly  
114 agreed responses, 146 agreed responses, while 19 disagreed and 5  
115 respondents strongly disagreed to the item. A mean score of 3.5 was  
116 got from the responses also indicating a positive response.

117  
118 Availability of support services had 115 strongly agreed responses,  
119 173 agreed responses, 83 respondents disagreed and 26 strongly  
120 disagreed. This gave a mean score of 2.9 positive responses. For  
121 lack of stigma/discrimination, 117 respondents strongly agreed to  
122 the item, 162 just agreed, 2 disagreed and 36 strongly disagreed. A

123 mean score of 2.9 positive responses was got. The table above  
124 further shows that youth had an average of 180 (45%) and  
125 149(38%) responses representing positive responses to socio-  
126 psychologic factor that promote VCT, while a total of 119 (30%)  
127 responses represent negative responses to socio-psychologic factors  
128 that promote VCT.

129

### 130 **Discussion**

131 The socio-psychologic factors that impede VCT as perceived by  
132 youths in Anambra State include.

- 133 • Fear of stigma (means score 2.8)
- 134 • Fear of a positive test result (mean score 2.8)
- 135 • Abandonment and rejection (mean score 2.7)
- 136 • Fear of lack of care and support if test is positive (mean score  
137 2.6)
- 138 • Lack of perception of being at risk (mean score 2.5)
- 139 • Fear of disclosure of result (mean score 2.6)
- 140 • Fear of people finding out that they went for HIV counseling  
141 and test (mean score 2.7)

142

143 Fear of stigma/discrimination and fear of a positive test result were  
144 discovered in many studies like Onabanjo (2004), Illiyasu (2006),  
145 Mulugeta (2003) Zerihun (2003), Mcphail (2008) Lazare et al (2009)  
146 and Na et al (2009) as major reasons for people to avoid VCT.  
147 HIV/AIDS is still a stigmatizing condition in many communities  
148 probably because it has got no cure and a positive test result often

149 indicates HIV infection hence the fear. Also some years back, many  
150 HIV infected persons experienced rejection/abandonment, many  
151 lacked care and support and were left to die as observed by Asian  
152 Pacific Network of People living with HIV/AIDS (2004). This fear still  
153 abounds in the heart of many youths today and this might be  
154 reason why they would not want to be going for VCT regularly and  
155 are afraid of disclosure of test result. However with the discovery of  
156 antiretroviral drugs and with constant supply, this fear is expected  
157 to reduce and may disappear completely with time and more people  
158 will be accessing VCT more regularly without fear of anything.

159

160 Desire to know HIV status (mean score 3.6). This finding was seen  
161 in many studies as previously discussed as youth's main reason for  
162 accessing VCT services.

163 Obtain counseling on how to remain uninfected has a mean score  
164 3.5 and people say that knowledge is power. When one is equipped  
165 with the right knowledge, he/she will be able to make right  
166 decisions/choice and live a more health life and this is what HIV  
167 pre test and post test counseling services intend to help people  
168 achieve.

169

## 170 **Conclusion**

171 Socio-psychologic factors like stigma, fear of positive test result,  
172 abandonment and rejection as well as fear of disclosure were  
173 identified by youths as factors that may impede their response to  
174 VCT while factors that promote youth response to VCT services



175 include desire to know their HIV status and to know how to remain  
176 uninfected.

177

### 178 **Recommendation**

179 It was recommended that parents/guardians should be made to  
180 understand that VCT is a preventive health measure. It helps for  
181 early detection of HIV infection and early initiation of treatment.  
182 The services are free hence they should encourage their youths to  
183 access the professional services in order to be equipped with the  
184 right information that will help them to avoid contracting HIV  
185 infection. This will go a long way in reducing youths sexual risk  
186 behaviours which often expose them to STIs including HIV.

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