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Cultural Sensitivity in Sexually Transmitted Infections (STIs) Preventive Campaign in Nigeria

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Abstract

The STIs preventive campaign in Nigeria lacks a common vision on how culture ought to inform the design and implementation of interventions. The study investigated how culture can be conceptualised into STIs preventive communication campaign in Nigeria. Data were gathered through in-depth interviews among students of Moshood Abiola Polytechnic, Abeokuta. Findings revealed virginity as one of the protective factors and polygamy as one of the risk factors in culture that must be taken into considerations. The study concludes that STIs preventive campaign in Nigeria needs to develop interventions that recognise not only the negative aspect of culture but also promote the positive and unique aspect of culture.

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1. Introduction

Available evidence in Nigeria suggests that young adults are at higher risk of the acquisition of STIs (Oladebo & Fayemi, 2011) since the country has been recognised as the second largest HIV infected people in the world (USAID, 2008). From the fore going it can be seen that STIs, particularly HIV/AIDS remains a huge challenge in Nigeria in the absence of a cure, and it has been recognized and accepted that the key to its control lies in behavioural change (Erinosho, Joseph, Isiugo-Abanihe, Dike, & Aderinto, 2013). A positive change in the life style

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of Nigerians through the practice of safe sex and abstinence could singularly and significantly checkmate the sporadic spread of the infections (Oladebo & Fayemi, 2011). The evidence for the effectiveness of general STIs mass medium prevention campaign in Nigeria has been adjusted to be weak (Oyediran, 2003) and this is particularly true for campaigns targeting young people in Nigeria. The weakness of the mass media might not be the only reason for the increase in risky sexual behaviours among young people but it could be some barriers that these young people experienced in their exposure to STIs preventive messages in Nigeria. These barriers might be languages and literacy barriers, prevailing STIs messages that run contrary to their cultural practices, beliefs and behaviours. Some other cultural barriers might be the perception that some STIs such as HIV/AIDS were foreign disease and some cultural misconceptions that surrounds STIs and its contractions (Oladebo & Fayemi, 2011). Consequently, it seems that there is a knowledge gap between the huge amount on STIs preventive campaigns that young people are exposed to and the information that will supposedly fit appropriately into their cultural understanding of the message. This reality brings into focus the importance of tackling STIs epidemic through the dissemination of cultural sensitive preventive campaigns that will bring about positive behavioural change among young people in Nigeria.

2. Cultural sensitivity in STIs preventive campaigns

The general consensus in public health and health communication is the recognition of the role of culture in influencing health and health behaviours and also a means of enhancing the effectiveness of health communication program and campaigns (Resnicow, Braithwaite, Dilorio, & Glanz, 2002; Brislin, 1993). Several scholars in health communication and public health have established that sexually transmitted infections (STIs) is a contextually bound socio-cultural phenomenon and beliefs that culture is an outstanding contextual factor in STIs prevention research are common place (Wilson & Miller, 2003; Airhihenbuwa, Makinwa & Obregon, 2000; Airhihenbuwa, 1995). In essence, these intellectuals have advocated that the use of cultural scripts have a dominant influence on the knowledge and attitudes that are known to influence risky sexual behaviours. In addition, many scholars have advocated for cultural sensitivity in STIs preventive campaigns which means the conceptualisation of STIs prevention campaign in a target group's culture which makes it to be better understood and more effective. From the fore-going, it can be seen that cultural sensitivity is paramount for an effective STIs campaign because it integrates cultural cues from the target public into STIs preventive campaigns which results in effective and impactful communication campaign. In the cultural sensitivity approach, culture is hypothesized as a collection of shared values, beliefs, and practices that are contained within a clearly defined community (Ulrey & Amason, 2001; Brislin & Yoshida, 1994). These values, beliefs, and practices are conceptualized as variables, and the goal of the health communicator is to identify those underlying cultural cues that may be incorporated into the delivery of the health message. From a cultural sensitivity standpoint, an intervention is successful when it responds adequately to the variables that have been identified by the interventionists as relevant to the effectiveness of the message, resulting in effective behavioural change in the community.

The STIs prevention field's commitment to the creation of programs that are culturally grounded is driven by lessons learned through implementing interventions and from a philosophical stance that asserts that culturally naïve or mismatched interventions are less effective (Parker, 2001). The unbeneficial and sometimes harmful effects of STIs that were designed for European Americans and then implemented in ethnic minority communities have highlighted the importance of culture as a factor that contributes to programme effectiveness (Jemmott, Catan, Ntamathi, & Anastasia, 1995). The non-implementation of these cultural cues makes STIs preventive campaign to be ineffective. Diaz (1998) asserts that cultural cues and their understanding and interpretations determine how cultural audience assess themselves, the world around them and the sexual behaviours in which they involve in and that these cultural forces ought to inform interventions campaigns are designed.

It is apparent that the importance attached to the influence of culture in STIs preventive health campaign and the role of culture as a causative factor in STIs is long overdue in Nigeria. The cultural influences that steer young people's risky sexual behaviour needs to be understood before effective health promoting practices that will curb STIs should be implemented. Hence, to design appropriate interventions, it is important for STIs intervention to rigorously adapt the culture and values of the Nigerian communities into STIs preventive messages. To date, no study has conducted studies on the culturally sensitivity in STIs preventive campaign in Nigeria. Therefore, the main

objective of this study is to address how culture can be used to improve STIs preventive communication strategies in Nigeria.

3. Methods

This study investigated young students of Moshood Abiola Polytechnic, Abeokuta (MAPOLY), Ogun State, Nigeria. Thirty students who were between the ages of 18 and 26 were interviewed from the institution. Fifteen of the students were females while the remaining were males. The in-depth interview was conducted in English language which was the language used in the schools. In analysing the transcripts of the discussion, NVivo 10 was used for the thematic analysis. The in-depth interview centered on cultural values and belief, norms and taboos, practices, and religion that influenced risky sexual behaviour that mainly result into STIs. The relevance of language in STIs prevention campaign was also investigated. The researcher elicited information on how Nigerian culture has a significant relationship on the high rate of STIs transmission among young people. Also, the study investigated how the cultural values and beliefs could be indoctrinated into STIs preventive messages to make it culturally responsive to the desires of young people. Specifically, the researcher sought information on how the cultural practices which make women to be submissive and obedient to male influence put them at high risk of STIs. Finally, the discussions addressed young people's opinion on how risky sexual behaviour and STIs could be effectively curbed through the utilisation of the culture that was well understood by these young people.

4. Findings

Analysis of the transcripts revealed five main themes which were identified simultaneously by two independent reviewers of the transcripts. The five themes were as follows: practices, norms and taboos, religion, language, values and belief.

4.1. Practices

The informants generally agreed that there were many practices that were either positive or negative. The positive practices were those that had positive impact on the transmission of STIs while the negative had a negative impact on the transmission of STIs. Some of the participants identified marriage without consent or forced marriage as one of the cultural practices that was supposedly used to reduce promiscuity, however it makes young people to be prone to STIs. Some other informants especially the males explained that in some parts of Nigeria, the females do not have a right over who she marries. A young lady is betrothed to an elderly man at an early age in life basically because it is believed that it reduces the promiscuity tendencies of the lady. A male informant explained that in the Northern part of Nigeria: "... sometimes some ladies are used as trade by barter but in a more advanced way by their parents. The rich men go to the father to seek the hands of their daughters in marriage." Another male informant explained: "in... Abia state once the husband dies, the brothers of the husbandmarries the widow with or without her consent".

The in-depth interview also investigated the perceptions of young people on infidelity of men in their marital homes. A vast majority of the informants agreed that it was culturally acceptable irrespective of religion for a married man to have concubines outside their matrimonial homes but the same culture frowned at a lady (married or single) who involved in multiple sexual partners. Interestingly, a male informant explained that in his culture, it was necessary for a man to have respect for his wife by putting her into consideration whenever he wants to take marital decision but such decisions did not include having concubines outside the marital jurisdiction.

On the issue of the use of circumcision as a cultural practice to curb risky sexual behavior which often leads to STIs, there was a greater variety of opinions about this practice. Some of the informants thought that circumcision was a traditional operation that was used to reduce the sexual libido of females. This was usually performed by old and unqualified person with unsterilized knives and razors which could lead to an increase in STIs particularly HIV/AIDS. Some other informants who are aware of the campaign against the practice in the Nigeria mass media express that it is a bad practice that should be stopped because it does not have any positive impact on the

promiscuity of the female gender.

However, there were contrary opinions from some female informants on the eradication of circumcision practice in Nigeria. The views encapsulated by some female informants showed that there were some socio-cultural elements behind the motive for female circumcision. "...till now, I still have the belief that if a lady is not circumcised she will become wayward. She will often be running after men. I was circumcised". Another explained: "... I have a strong conviction that circumcision is okay, but I think the people who are against it don't know the consequences of not doing it; that is the reason why they are campaigning against it.... I will have my daughter circumcised because if I was not circumcised, I would not be able to stay up till this moment without having sex"

4.2. Norms and taboos

Young people described norms and taboos as cultural expectations which had a powerful influence on what was considered an acceptable behaviour. These terms were perceived as specific cultural expectations on how to behave in a given situation and these terms restricted or increased the transmission of some diseases such as sexually transmitted infections. Norms and taboos were also described as a custom that restricted married women than the single ladies. The informants revealed that a married woman is expected to be faithful to her husband even if the husband is not responsible or faithful to his marital responsibilities. The in-depth interview revealed that most of the norms and taboos are mostly stringent on the married woman and not the single ladies or married men. According to a female informants, "It seems they belief that it is better to enjoy yourself while it lasts as an unmarried individual but once you are married you must be ready to settle down and comply with what the tradition expects of you". Another female informant explained that the culture has been able to curb risky sexual behaviour especially for married women because a married woman that flirts will lose her integrity in her household, among in-laws and community. Many of the informants noted that married women who do not comply with the marital vows might face severe consequences such as still birth, death of her children or her husband and herself. When asked if an unfaithful husband also attracts such sanctions like the wife, a female informant explained: "...even if the husband has extra marital affairs, the wife should continue to pray that he does not infect her with STIs". A male explained: "...the culture favours the male than the female. In Igbo land they believe that male are more superior to the female and there are so many things that males get away with that women cannot and must not even think of doing such. It is a man world anyway".

4.3. Religion

Diverse opinions were expressed on the potency of religion and how it could be used to prevent STIs. Most of the respondents agree that religion is one aspect of culture that can be used to prevent young people from involving in risky sexual behaviour or pre-marital sex. A female informant expressed that religion seems to be the best cultural elements that can be used to cajole young people not to involve in risky sexual behaviour. She explained that: "...it is not that I do not sometimes feel like having sex, but anytime the feelings come up I just pick up my bible and go to church". However, another contrary opinion was expressed by a male informant. According to him, religion do have so much impact because some recognised men of God have been found to be involved in risky sexual behaviour. Similarly, another male explained that what is important is the personal conviction of the individual that is exposed to the information.

4.4. Values and beliefs

The young people expressed different views on the values and belief that affected the transmission of STIs within the Nigerian community. On the issue of polygamy, there were mixed reactions by the informants. Most of the informants admitted that an African man is polygamist by nature; therefore it is natural for them to have more than one wife. The informants explained that it is better for a man to have more than one wife than to be involved in adultery. However, they admitted that there were so many men who were involved in adultery despite having more than one wife. Hence, they admitted that polygamy has not effectively curbed the adulterous tendencies of men. A male informant expressed that some men justified their polygamist status by using the Quran and hadith to buttress

their decision. The in-depth interviews reveal a general perception that virginity remains a cultural attribute that can be used to curb risky sexual behaviour of young people. All the participants agreed that though virginity is a difficult task to achieve but it still remains an attribute that is most valued by the African community. They advocated for STIs campaign to promote this cultural attributes by making young people to view virginity as something that they should be proud of. This concern was encapsulated in the view of a female respondent: "... values can be used to curb risky sexual behaviour. A lady's virginity is her value and pride value. It is a dignity and when you get married as a virgin, you will be placed at high value and your husband will always respect you. But when you are married and you are not a virgin, he will be thinking what kind of life you lived before you got married to him and then you start seeing that mistrust paving way".

4.5. Language

All the young people interviewed indicated that their local language was very important aspect of their culture. They explained that their local language gave them a sense of belonging which make them to easily associate with such information compared with the use of an English based STIs messages. Most of the informants explained that STIs messages were being conceptualised in the three main languages in Nigeria. These were Hausa, Igbo and Yoruba despite the fact that there were over 250 languages in Nigeria. Some of the informants observed that they were exposed to information in their dialect only when they are in their ancestral homes.

5. Discussion

The in-depth interview provided important insights into Nigerian culture and the perception of young people on how it can be used to curb risky sexual behaviour. Results from the analysis provide an additional evidence of the urgent need for a culturally sensitive STIs preventive communication campaign in Nigeria. The findings show that young people understand the culture of their community to a reasonable extent. Hence, there is a need for young people to be sensitized on STIs through the incorporation of their cultural values and beliefs. Many of the young people observed that there is positive and negative socio-cultural practice that had the tendencies to reduce or increase STIs prevalence. The subservient role that are played by females in the society such as forced marriage, infidelity of men, circumcision were portrayed by some young people as a negative aspect of culture. However, other informants expressed that there are some positive attribute of the early marriage, virginity and circumcision.

Faithfulness to marital vows on the part of the married woman was an aspect of norms and taboos that the informants identified. The married woman that goes contrary to the marital vows would face severe consequences. This indicates to us that norms and taboos are strictly restricted for married females. The irony of the situation is that married men are given the liberty to involve in extra marital affairs which shows that marital infidelity by husbands is often tolerated and downplayed by culture is a reflection of the double standard of morality which contributes to the spread of STIs. This also showcases the belief about gender role that privilege men over women. Similarly, Turshen, 1991 (in Ebisi, 2012) also corroborated that the cultural practices makes Nigerian men to keep concubines, indulge in multiple sexual liaisons and double standard of morality which lead to increase in STIs.

The study revealed that majority of the young people regard religion as a protective factor in achieving a culturally sensitive preventive campaign. The informants mentioned that virtue of temperance is an endowment which helps them to curb their sexual appetites which might lead to risky sexual behaviour. Regardless of the overwhelming acceptance of religion as having a protective impact, some informants have some reservations towards it. They reported that religion do not have over-whelming influence because everything boils down to self-efficacy.

The remarks from the young people also indicate that there is a need for segmentation of STIs campaign preventive programmes since the Nigeria culture seems to have different roles for different gender category. There is a need for STIs preventive messages to be sensitive to gender cultural issues in their campaign exercise. On the issue of language, it was observed that the young people believe that their local language gives them a sense of belonging which makes them to easily associate with such information compared with the use STIs messages that are disseminated in English language. Therefore, the usage of indigenous language must not be isolated from other

cultural context of the target audience.

6. Conclusion

Although it is common knowledge that awareness does not necessarily lead to behaviour change, inadequate understanding of the communicated messages makes it more difficult for this change to occur among the targeted audience regardless of their level of awareness. Communication activities in different communities in Nigeria should put into consideration the norms, values, beliefs, and other social–cultural factors that are unique in every society. Different ethnic groups in Nigeria possess different cultural elements hence preventive message tailored for this group must not be cultureless; it must incorporate the cultural dynamism of these group of people.

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