

Nigerian age mismatch in sex relations

By: Olusesan A. Makinde

Intergenerational sex defines sexual relationships between two people of different age categories. Such relationships have been observed in male-female relationships in Africa and male-male relationships in developed countries especially in the United States.

Investigations have shown a link between intergenerational relationships and the spread of the HIV virus. Although the phenomenon is more pronounced in younger women-older men relationships in sub-Saharan Africa, it has also been observed in younger men-older women relationships in this region¹.

In Nigeria, about 21 per cent of girls aged 15 to 17 years were reported to be in relationships with men who were 10 or more years older².

Various factors have been associated with the high prevalence of these relationships in Nigeria and other countries in sub-Saharan Africa. A focus group of adolescent girls in a study conducted in Zimbabwe identified that over two-thirds of their peers were dating much older men. They claimed to be motivated by intentions to get married, attaining higher social standing, money, favour and material support³. Though intergenerational sex has been practised for years, it has become a reason for great



School HIV and AIDS sensitisation session. (Picture courtesy of Olusesan Makinde)

concern since the emergence of the HIV epidemic insofar as it is seen as a factor in the spread of the virus. Research has shown that women involved in such relationships have higher chances of contracting the HIV virus than their peers.

Reports from UNAIDS have also shown that young women between 15 and 24 years were three-to-six times more likely to be infected with HIV than their male counterparts in southern Africa. This was mainly attributed

to the sexual relationships these women had with older men. Intergenerational sex thus becomes an important factor in the spread of HIV in sub-Saharan Africa.

Data from the 2003, 2005 and 2008 national HIV sero-prevalence surveys have consistently shown a predominantly younger female age group compared to the males among people infected with HIV.

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It is therefore critical to understand the significance of age mixing patterns in driving the epidemic. Young girls are at more risk of getting HIV infection compared to their male counterparts when they engage with older men as age mixing increases

their vulnerability. The epidemic cannot be stemmed in the near future as long as age mixing continues in the general population.

In the absence of age mixing, the epidemic will die out with the ageing and death of individuals in the same age group. The same

will happen if the age difference between all sex partnerships in the population remains unchanged. Even with some degree of differences in the age between sexual partners, HIV would be unable to sustain an epidemic in the population.

It has been demonstrated that young women ages 15-29 years are more likely to be infected than young men of the same age group. This association may be explained by at least two interrelated factors. Firstly, HIV prevalence in men is typically lowest among adolescents, rising steadily with age to peak among men in their late thirties – in the case of Swaziland, at prevalence rates above 40 per cent. Secondly, there is growing evidence that men who engage in sex with younger women exhibit higher levels of sexual risk behaviour than other men of the same age group.

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Likewise, data from the HEPNAP project — a population-based HIV counselling and testing project that has tested over 18,000 clients — implemented by Pro-Health International for the US President's Emergency Plan for AIDS Relief, has also confirmed this finding by showing a mean, median and modal age group for HIV positive clients to be lower in the female population.

The search for social status and a better economic situation have significantly contributed to increased HIV infections. In Nigeria, it is common to find a young woman with an "Aristo" otherwise known as "sugar daddy" to cater for her financial needs. In turn she has to satisfy the sexual needs of her male partner since resistance would cut off the benefits she derives from the affair. Such dependent relationships greatly reduce the girl's ability to negotiate safe sex. And yet, such men often indulge in multiple relationships, thus increasing the chances of transmitting HIV between their partners.

The fact that some cultures permit intergenerational marriages has also fuelled the spread of HIV across generations. Child marriages are still predominant in some African cultures with the UNFPA reporting that 42 per cent of girls marry before their 18th birthday. This practice denies the child brides the opportunity for adequate physical, mental and socio-economic maturity before marriage.

In Northern Nigeria, the promulgation of the Islamic Sharia Law further gives legal backing to child marriages. In recent months, there have been cries of foul play when a serving senator was accused of marrying a 13-year-old after paying 100,000 US dollar bride-price to the family. Such marriages rob young women of the chance to develop and choose their own partners.

Occasionally, the girls are married off before puberty, meaning they do not even understand basic reproductive health issues. This practice also increases the biological risk that the girls are exposed to as they may experience coital tears and lacerations during sexual intercourse thus facilitating HIV infection if the man is infected.

Worse still are the possibilities of underage pregnancy and the attendant risk of mother-to-child transmission of HIV. Polygamy is a common practice in areas where these activities are most prevalent. Thus if one member of the family is infected with HIV, it is possible for the virus to spread to the other members in the same marriage.

Some parts of southern Africa have also witnessed some mythical promoters of



Advocacy to a Christian religious group in North Central Nigeria. (Picture courtesy of Olusesan Makinde)

intergenerational spread of HIV through belief that an HIV-infected man can get cured by having sex with an infant or a virgin. Such beliefs have led to statutory rapes and criminality among people who want to be cured of HIV.

Poverty has forced many young women into sex work. They engage in sex with various men who are often much older than they are, and can afford to pay for their services.

Behavioural studies have shown a relationship between transactional sex, alcohol use and drugs. This combination may significantly reduce the sense of judgment of the user, leading to their failure to use any protective method while engaging in this high-risk sexual activities.

Also, the scarcity of female condoms in Nigeria disempowers women and puts the men in charge as regards using a barrier protective method since male condoms are easily available. A recent visit to a brothel in Lagos recently saw many female sex workers seeing the female condom during a demonstration for the first time. Women at higher risk of contracting HIV from infected men need to be empowered by making available to them protective methods that they can control.

Poverty and women's low social status have been identified as major factors which force young women into IGs. These factors have been identified to be major limitations to many development efforts and some are priorities in the millennium development campaign. Thus, ensuring that the targets of poverty eradication, girl child education and gender

equity are met will be significant steps in the right direction and will contribute to the control of the HIV epidemic. Promoting and making available opportunities for pursuing legal redress in cases of sexual coercion and violence will also be significant in reducing intergenerational sex and its attendant risk of HIV transmission.

The time for action in changing perceptions about the social status of women has come. The negative effect of intergenerational sex and its consequences such as the increased risk of young women contracting HIV should be addressed now. ■

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