

The influence of multiple sexual partners practice on HIV/AIDS infections among higher learning peer group students in Dar es Salaam

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Abstract

The study aimed at assessing the influence of multiple sexual partners' behavior on HIV/AIDS infections among students in Higher Learning Institutions in Tanzania. A cross-sectional design was used, and a total of 150 respondents from IFM, UDSM, and KIUT were selected using convenience sampling technique. Data were collected using interview guide, document reviews and Likert scale questionnaires. Qualitative data were analysed using content analysis, and descriptive methods of data analysis were used for quantitative data. It was revealed that students know the consequences of having multiple sexual partners, and that peer groups of students influenced themselves into engaging in sexual relations, even having multiple sexual partners. There are also a set of personal factors that influence students to have multiple sexual partners and the related factors include watching porno videos from websites, social media and love stories on TV and Radio. The study recommends that HIV/AIDS education and, sensitization be given to students reminding students on the risk of having several sexual partners. HIV testing be done regularly among university students to know their status.

INTRODUCTION

The rate of infections of HIV in Sub-Saharan Africa is still high and some of the common reasons why the prevalence is at the increase include alcohol consumption, cultural behaviors and beliefs, postpartum sexual

abstinence, sexual cleansing, widow inheritance, inappropriate responses against HIV infections in Africa, sexual violence and myths, and virgin cleansing fable (Amuche et al. 2017). Other factors are ritualized non-marital sexual intercourse, female mutilation, and non-use of condoms during sexual intercourse, negative attitude toward condom use, male circumcision, practices of body cuttings and blood oaths, poverty, Civil war and multiple sexual partners (Stoebenau, 2016).

The people who are at high risks of being infected are patients during blood transfusion, people who inject drugs, men who have sex with men (MSM), transgender, women, children and adolescent people, sex workers, and people with multiple sexual partners (Mmbaga et al. 2017 and Khasany and Karim, 2016). Students of high schools and higher education are other category of people who are at high risk of getting HIV infections due to having more than one partner during the time they are in school. Some are careless about using condom during sexual intercourse others do not get access to condom, therefore ending up having unsafe sex (Joint United Nations Program on HIV/AIDS, 2018). Therefore, this study is intending to assess the influence of multiple sexual partners on HIV/AIDS infections among students in higher learning institutions in Tanzania.

New infections in Tanzania occur in the context of stable heterosexual relationships 38.8%, casual heterosexual sex 28.9%, sex workers 1.3% clients of sex workers 8.7%, partners of sex worker's clients 3.3%, partners of people engaged in casual sex 7.6%, PWID 2.1% and MSM 6.8% (NACP, 2018). Yet multiple studies have shown that no more than approximately one-third of 15–24-year-old know their HIV status (PEPFAR, 2018).

Lemme et al (2013) assessed the HIV infections among young people in Northwest Tanzania: the role of Biological, Behavioural and socio-demographic risk factors. The study included 7259 males and 6476 females. The findings show that several socio-demographic factors such as age, marital status and mobility, behavioral factors like condom use, number and type of sexual partnerships and biological factors blood transfusion, lifetime pregnancies, genital ulcers, *Neisseria gonorrhoeae* were also associated with HIV infection. Among females, lifetime sexual partners (linear trend, $p < 0.001$), more than two partners in the past year, more than two new partners in the past year and concurrent partners in the

past year were all associated with HIV infection. This study which focused on youth did not assess the impacts of multiple sexual partnerships among such group of people which is now covered in this current study.

In the same context, Mmbaga, et al. (2017), investigated in the prevalence and risk factors for HIV-I infections in rural Kilimanjaro region of Tanzania: implications for prevention and treatment. The study included the sexually active age group of 24 to 49 years old. A total of 1528 participated in the study as cross-sectional research design was used. The findings show that the overall age and sex adjusted HIV-1 prevalence was 5.6%. Women had 2.5 times higher prevalence (8.0% vs. 3.2%) as compared to men. The age group 25–44 years, marriage; separation and low education were associated with higher risk of HIV-1 infection for both sexes. HIV-1 infection was significantly associated with having more than one sexual partner in the past 12 months, unprotected casual sex, bottled alcohol and local brew. Though this study did not assess the university students, its findings reveal the reality of the situation in rural areas. The study did not assess the risks of multiple partners among the community

To reduce the propagation of the infections, the Government of Tanzania has carried out different interventions through TACAIDS, National AIDS Control Program, and many local and International NGOs like awareness campaigns, voluntary testing, providing HIV/AIDS education, and provision of Anti-Retro Viral drugs to those who are HIV positive (UNAIDS, 2019). The situation is worse among young people of 14 to 24, which consists of 30% of new infections (Barker et al. 2016), which is the age of most students in higher learning institutions in Tanzania, and Multiple sexual partners is indicated as among the causes of new infections.

Several studies have been conducted on HIV/AIDS in Tanzania like Mkumbo (2013) who assessed the HI/AIDS knowledge, attitudes, and behaviour among students in higher education in Tanzania; Mhalu Assessed the risky behaviour among young people living with HIV attending care and treatment clinics in Dar es Salaam, Tanzania and Lemme et al (2013) assessed the HIV infections among young people in Northern west Tanzania: the role of Biological, Behavioural and social demographic risk factors but none of them focused on the impacts of

multiple sexual partners on HIV/AIDS infections among students in higher learning institutions in Tanzania.

Tanzania has an estimated 1.4 million adults aged between 15 and 64 years living with HIV. Approximately 80,964 new HIV infections occurred in 2017 (TACAIDS, 2018). Out of the new HIV infections estimated to have occurred in 2017, nearly half (43%) were from young people aged 15 to 24 years. Females young people account for over thirds (70%) of all the new HIV infections reported to have occurred among young people in 2017. Young people are among the Key and Vulnerable populations in Tanzania at high risk of HIV infections (NACP, 2018; TACAIDS, 2018). Other Key and Vulnerable populations include Female Sex Workers (FSW), Men who Sex with Men (MSM), People Who Inject Drugs (PWID), Long Distance Truck Drivers, Agricultural plantations workers, fishermen and fishing communities, miners, students in higher learning institutions and other mobile populations including construction workers. Among all these categories of vulnerable people, those who engage in multiple sexual partnerships are extremely at risk (Mkumbo, 2013 and TACAIDS, 2018).

The impact of HIV/AIDS is being felt in almost all sectors of development. HIV/AIDS scourge has resulted in the following consequences in sub-Saharan Africa: increased number of HIV patients, which demands more trained health personnel; increased level of poverty, health care costs and financial burden of funeral ceremonies; increased burden of responsibilities on children or orphans in affected homes; decreased the number of school enrolments as a result of financial burden, decreased fertility and birth rate, decreased in the skilled labour force, economic and social progress (Age between 15 and 49 is the most affected) (Amuche, et al.2016). The economic and social impact of this pandemic is worsening as a result of economic meltdown in most nations. Alteration in the population structure and dynamics has been recognized as a significant impact of this infection in sub-Saharan Africa. This is due to its high prevalence among the mid-age groups and its attendant high mortality among such people (Mkumbo, 2013). The HIV/AIDS pandemic have been hinted to have profound effects on the economic progress of Africa. This infection has led to a diminished labour force in Africa, with attendant reduction in agricultural productivity, increased poverty levels and economic stagnancy. The high mortality and morbidity associated with HIV infection cause a decrease in tax returns and an attendant

increase in government spending, leading to a decline in economic growth. There is also loss of skilled personnel in core sectors of the economy and an increased importation of expensive antiretroviral drugs into the Africa region (Amuche et al. 2016).

METHODOLOGY

The Study Area

The University of Dar es Salaam, the Institute of Finance Management (IFM) and Kampala International University in Tanzania were selected to be the studied entities for this study. These institutions are found in Dar es Salaam the min business city of Tanzania. The selection of the study area was based on the diversified views on multiple sexual partners effects on HIV/AIDS infections from students situated in different areas of Dar es Salaam. Three institutions were selected for the study which include IFM and UDSM representing the highly populated Public higher learning institutions and Kampala International University (KIU) representing the most populated private institution in Dar es Salaam.

Data Collection and analysis

The study used four instruments as sources of collecting primary data. The instruments that were used are interview guide, questionnaire, and Focus Group Discussion. Secondary data were obtained from literature sources and data collected by other people for some other purposes. Reports on HIV/AIDS from TACAIDS, The National AIDS Control Program and other national and international institutions were used in this study. The study used qualitative data analysis techniques to analyze qualitative data where content analysis was used. On the other hand, quantitative data was analyzed using simple descriptive techniques where frequency tallying, Mode, Median and percentage scores were at the center of the analysis. Cross tabulation was used to find the likelihood of relationship between multiple sexual patners and influencing factors. The analysis was conducted with the help of SPSS and Microsoft Excel software.

FINDINGS AND DISCUSSION

Influence of peer groups in multiple sexual partners

This study was to determine the influence of peer groups on engaging in multiple sexual partners among students in higher learning institutions in Tanzania. Respondents were asked to indicate whether their friends

influenced them by convincing them that having at least one sexual partner is good for them. The results obtained are presented in Figure 1.

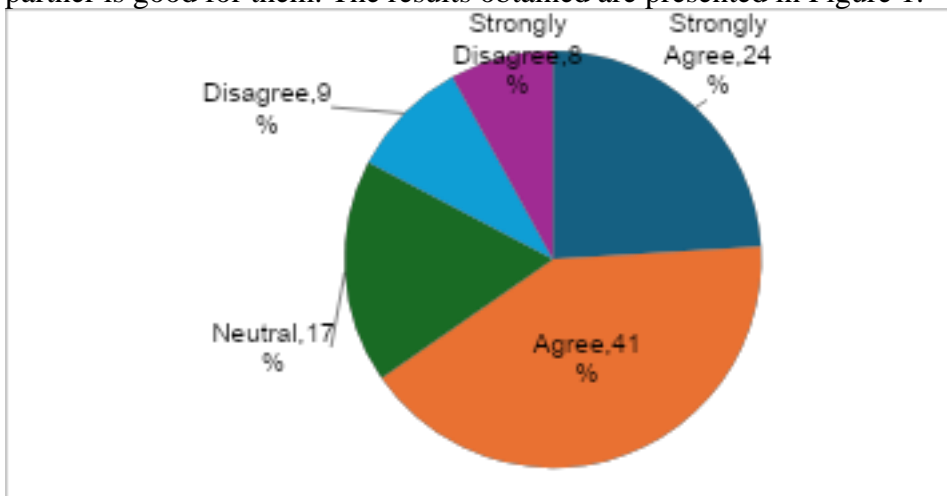


Figure 1: Respondents' views on whether their friends influenced them to have a sexual partner

The findings in Figure 1 show that 24% of respondents strongly agreed, 41.3% agreed, and 17.3% indicated neutrality. However, 9.3% of respondents disagreed, and 8% strongly disagreed.

On the other side, respondents were required to indicate their views on whether they decided to have many sexual partners after seeing their friends who have multiple partners get all the material needs/satisfaction. The results obtained are presented in Table 1.

Table 1: Respondents' views on being influenced by the way their friends are treated by their sexual partners

	Frequency	Percent
Strongly Agree	44	29.3
Agree	67	44.7
Neutral	23	15.3
Disagree	11	7.3
Strongly Disagree	5	3.3
Total	150	100.0

The findings presented in Table 1 show that 29.3% of respondents have strongly agreed, 44.7% of respondents have agreed and 15.3% of respondents were neutral. However, 7.3% of respondents disagreed, and 3.3% of respondents strongly disagreed that they decided to have many

sexual partners after seeing their friends who have multiple partners getting all their material needs.

Respondents were also asked to indicate whether their colleagues influenced them in the university to get into multiple sexual partners' behaviour. The results are presented in Figure 2.

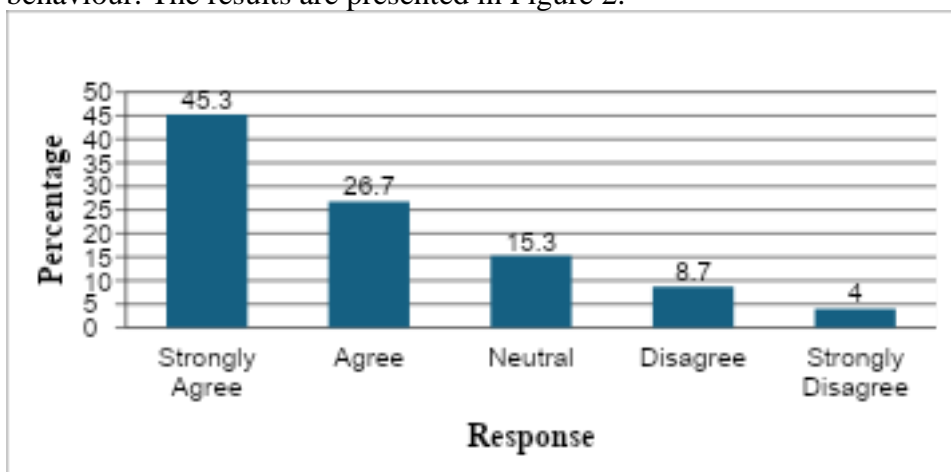


Figure 2: Responses on the influence of colleagues in engaging in Multiple sexual partners

The findings in Figure 2 show that 45.3% of respondents strongly agreed, and 26.7% of respondents agreed that their colleagues influenced them in the university to get into multiple sexual partners. Meanwhile, 15.3% of respondents were neutral, 8.7% of respondents disagreed, and 4% of respondents strongly disagreed with the above statement.

During focus group discussions (FGD), students at IFM, the University of Dar es Salaam, and the Kampala International University in Tanzania argued that most of their time in their discussion groups is used to discuss sexual issues, including how to get sexual partners at the university. Male students feel very happy to discuss sexual issues among themselves, and they even exchange some strategies to get sexual partners, as compared to their counterparts, females, who sometimes feel too shy to speak, though internally they feel interested. During the FDG, respondents indicated that they always get some hints concerning sexual practice, they get the confidence to approach a female, and they even organize class discussion groups based on their closeness.

In the same parameter, respondents were asked to indicate whether they started sexual partnerships in secondary school after being influenced by schoolmates. The results are presented in Figure 3.

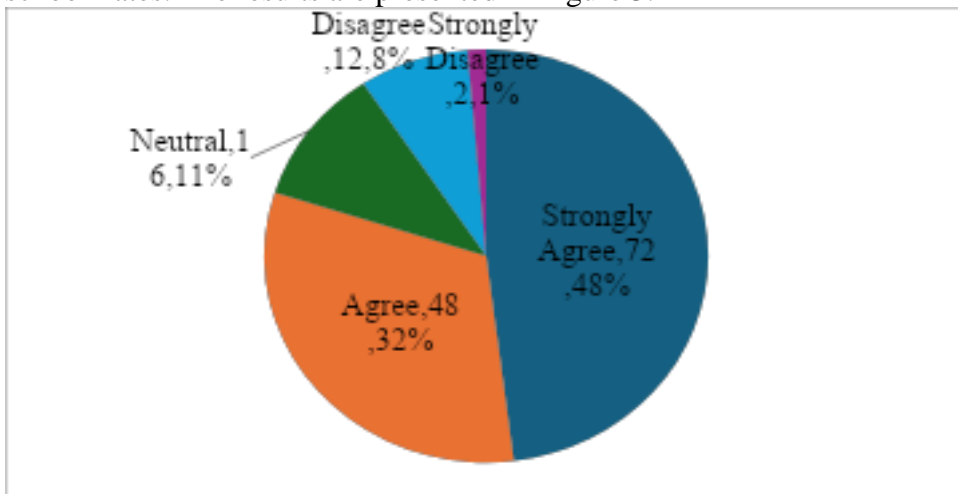


Figure 3: Respondents' views on starting sexual partnerships since secondary school

The findings shows that 48% of respondents have strongly agreed that they started sexual partnership in secondary school after being influenced by schoolmates followed by (32%) of respondents who agreed. The level of disagreement were low with 8% who disagreed followed by 1% who strongly disagree as presented in Figure 3. and 10.7% of respondents who were neutral. This finding is supported by the respondent from IFM during interview, who reported that:

“Among us, there are those who started sexual practice since secondary education, and others were influenced by colleagues at their higher learning institution. As far as multiple sexual partners are concerned, I personally was influenced by my roommate, who is my close friend. She has three (3) men, one at this university, and the other two outside the university premises. Due to that, I have two boyfriends, one in the College and another in UDSM”. Female Student at IFM, 2020.

Responses from respondents from other Universities (UDSM and KIUT) also supported these findings as reported by the following students during the interviews:

“Some of the girls are normally influenced by their friends in their areas. Though I was not influenced to do that, I know some girls in my area who were convinced by their friends to engage in multiple sexual partners’

behaviour. All in all, it depends on how ready you are to accept their influences”, Student from UDSM, 2020.

Another respondent from KIUT indicated that:

“Getting into multiple sexual partners’ behaviour is a result of influence from one’s entourage, her economic situation, and her biological desire to engage in sexual relationships. Most of those who have many boyfriends or girlfriends is a result of mob, sexual incitement and poverty. As for me, having many partners is just because they do help me to meet my daily living expenses”, Student from KIUT, 2020.

The findings show that friends and colleagues at Higher Learning Institutions in Tanzania convince fellow students to engage or have at least one sexual partner and that other students decide to have multiple sexual partners because they see their friends’ getting gifts and other material things from their sexual partners (see table 4.3 and table 4.4). These findings imply that friends and colleagues are the factor that induces their fellow friends into having sexual affairs with one or more partners. These findings are like Mkumbo (2013), who found that most of the students who engage in multiple sexual relationships were influenced by friends and colleagues; this practice was found to be more common among female students than among male students. These findings also confirm what was found by Amuche et al. (2017), as they found that many of those young people who tested positive for HIV were influenced into sexual practices by friends and colleagues who engaged in sexual work. This study went a bit further and found that Students teach their colleagues how to be sexual partners at the university, though many of them, about 80%, got engaged in sexual practice since secondary school.

The findings also show that relatives like sisters/brothers influenced students to engage in multiple sexual relationships and other family members influenced them explicitly to engage in multiple sexual partners’ behaviour. These Findings comply with Amuche et al. (2017), who found that relatives influenced their siblings to engage in sexual work. However, this study determined that some students might have been implied influenced by their relatives who indicated that they know that they have more than one sexual partner. The study also found that neighbors and Commuter bus conductors did influence them to engage in multiple sexual partners.

The findings show that respondents do care about contracting HIV and that HIV/AIDS is not a disease like any other fatal disease, though about

97% of respondents indicated that having multiple sexual partners does not necessarily end up getting HIV. The findings show that the existing fear of HIV and equating it to death has gone down as respondents argued that HIV was so threatening before the invention of Anti Retro Viral (ARV), but currently, its effects have gone down. On the other side, the findings show that poverty is a reason for multiple sexual partners, which respondents did not explicitly declare, but the findings show that the need for subsistence money, High sexual desire were the factors leading students in Higher Learning Institutions in Tanzania to engage in Multiple sexual partners. These findings are like Mhalu et al. (2013), who indicated that those who tested HIV positive among youth were influenced by sexual needs, and desire to meet basic needs. Females were found to be practicing multiple sexual partnerships more than males. In this regard, the findings show that age was not the factor for having multiple sexual partners, different from what Mhalu et al. (2013) found that age was among the factors inducing people into having multiple sexual partners. The findings show that the university freedom and the financial capacity of males were among the factors that influenced students to engage in multiple sexual partners.

Effects of multiple sexual partners' behaviour among students

This study intended to find out whether there are effects of multiple sexual partners' behaviour among students. Respondents were asked to indicate their views on the impacts of multiple sexual partners among students of Higher Learning Institutions in Tanzania. The results obtained are presented in Table 2.

Table 2: Respondents views on whether there are effects of Multiple Sexual Partners

Response	Frequency	Percent
Strongly Agree	61	40.7
Agree	42	28.0
Neutral	31	20.7
Disagree	14	9.3
Strongly Disagree	2	1.3
Total	150	100.0

The findings in Table 2 show that 40.7% of respondents strongly agreed, 28% of respondents who agreed, and 20.7% who were neutral. However, 9.3% of respondents disagreed, and 1.3% of respondents strongly disagreed

In the same regard, respondents were asked if they once suffered from a sexually transmitted disease like Gonorrhea, Syphilis, Hepatitis B, and HIV. The results are presented in Figure 4.

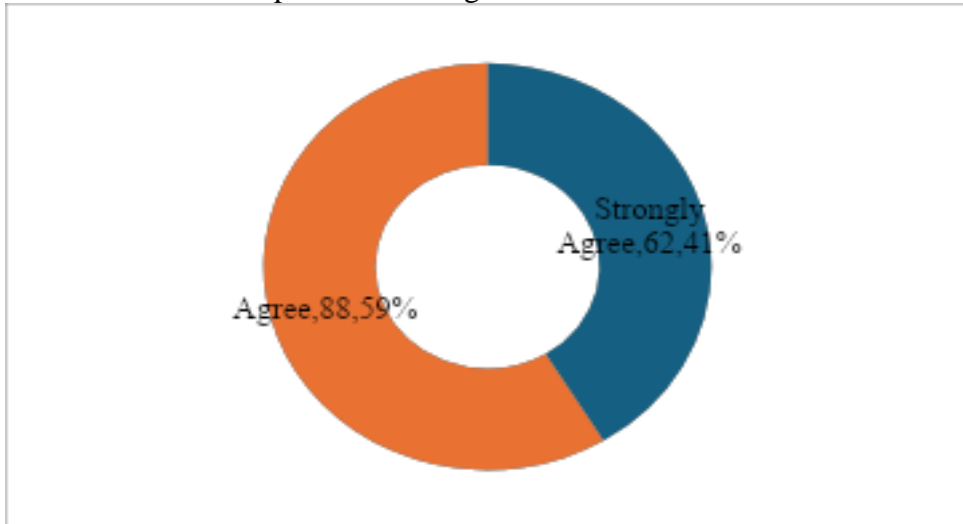


Figure 4: Respondents' views on whether they once suffered from STD

The findings presented in Figure 4 show that 41.3% of respondents strongly agreed, 58.7% of respondents have agreed that they once suffered from STD. This is an indication that, respondents were ignorant or negligible on the use of protective measures of STD, such as the use of condoms during sexual activity and abstinence.

Respondents were asked to indicate the effects of HIV/AIDS on humanity. The results are presented in Table 3.

Table 3: Respondents Views on the effects of HIV/AIDS on humanity

Effects	Frequency=150	Percentage
Increase in morbidity	125	83
Increases the cost of living among victims	83	55
Lowers individual's productivity	107	71
Causes poverty	95	63
Lowers working capacity to victim	98	65
Lowers intellectual capacity to students	132	88
Causes conflicts within the family	89	59
Increases the number of orphans	131	87
Causes stigma to victim	138	92
Increases Mortality	105	70

The findings show that respondents have a very wide understanding of the effects of HIV/AIDS infections in the community. However, the highest scores were on that HIV Causes stigma to victim (92%), HIV Lowers intellectual capacity to students (88%), followed by HIV Increases the number of orphans (87%), and increases in morbidity (83%). The lowest is that it increases the cost of living among victims (55%) as shown in Table 3.

These findings indicate that respondents know the impacts of HIV/AIDS infections and have so far suffered from Sexually Transmitted Diseases (STDs). The findings also show that respondents know the effects brought by HIV/AIDS in the community, which tend to lower the happiness that humanity would get in daily life.

The findings show that students in Higher Learning Institutions in Tanzania know the impacts of having multiple sexual partners and that one effect is getting HIV infections and other Sexually Transmitted Infections (STI). In the same regard, the findings show that most students in Higher Learning Institutions have so far suffered one of the sexually transmitted diseases; this implies that there are times they do not use condoms during sexual practices. The findings also show that there are many effects associated with having multiple sexual partners, which are high infections of HIV, and low working capacity. On the other hand, respondents indicated the effects of HIV on humanity. These findings are similar to Mmbaga's et al (2017), who found that HIV-1 infection was significantly associated with having more than one sexual partner in the past 12 months, unprotected casual sex, bottled alcohol, and local brew. It can be concluded that Multiple Sexual Partners increase the risk of getting HIV infections, HIV and AIDS, lower working efficiency, cause conflicts in the family, increase mortality, and many more effects presented in this study.

Further analysis was conducted to find out whether there is any relationship between having multiple sexual partners and assumed influential factors (Table 4).

Table 4: Cross tabulation showing association between multiple sexual partners and Influential Factors

	Having multiple sexual partners		Fisher's exact P-value
	Yes	No	
Watching porn video			
Yes	74	72	0.070
No	4	0	
Desire			
Yes	14	20	0.084
No	58	51	
Not sure	6	1	
Neighbors			
Yes	66	48	0.015
No	12	22	
Not sure	0	2	
Relatives			
Yes	27	8	0.000
No	51	57	
Not sure	0	7	
Friends			
Yes	78	60	0.000
No	0	9	
Not sure	0	3	

Findings from the Fisher's exact test result shows that watching porn videos and desire are not likely to influence having multiple sexual partners since their p-value exceeds 0.05. This means that watching porn videos and desire are not among the significant, influential factors of having multiple sexual partners.

Again, fisher's exact test result shows that neighbors have a significant association with having multiple sexual partners at 0.05 significance level since the p-value is less than 0.05. This means that neighbors influence is among the significant factors associated with having multiple sexual partners.

Lastly, fisher's exact test result shows that relatives and friends have a strong significant association with having multiple sexual partners at a 0.05 significance level since their p-value is 0.00; this means that relatives and friends are among the major influential factors of having multiple sexual partners.

CONCLUSIONS AND RECOMMENDATIONS

The study found that peer groups of students, technologically literate, relatives and friends influence others into engaging in sexual relationships, even having multiple sexual partners. They easily influence each other into accessing social media and even watching porno videos from websites, and love stories on TV, magazines and Radios.

It is recommended that education about HIV and precautions on the influence of peer groups and the risks of acquisition of STDs and HIV be given to the students in Higher Learning Institutions by the universities in Tanzania, in collaboration with the Government and other non-governmental actors.

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