



## Internal migration and health: Premarital sexual initiation in Nigeria

Blessing Uchenna Mberu<sup>a,\*</sup>, Michael J. White<sup>b</sup>

<sup>a</sup> African Population and Health Research Center, Nairobi, Kenya

<sup>b</sup> Population Studies and Training Center, Brown University Providence, USA

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### ABSTRACT

The high rates of youth migration to urban and economic centers, in the context of persistent poverty and devastating HIV/AIDS burden, have raised intricate social policy challenges in developing countries. Using the 2008 Nigeria Demographic and Health Survey data, descriptive statistics, Kaplan–Meier survival curves and discrete-time hazard regression models, this study examines the patterns of internal migration and sexual initiation among never-married Nigerian youth aged 15–24. We find that migrants generally show stronger association than non-migrants, and urban–rural and rural–rural migrants particularly show the strongest independent association with premarital sexual initiation. Other significant covariates are age, religion, ethnic origin, educational attainment, independent living arrangement, formal employment and exposure to the mass media. The findings highlight the direct importance of youth migration in understanding and addressing the challenges of premarital sexual behavior and the need for behavior change policies and programs to be sensitive to the complex contextual nuances across youth groups in one country.

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### Introduction

Due largely to the high prevalence of HIV/AIDS, other sexually transmitted diseases (STIs), unwanted pregnancy, unsafe abortion and childbearing among young people, the increasing prevalence of early sexual relationships in sub-Saharan Africa (SSA) has continued to attract research attention (Adedimeji, 2005; Blanc & Way, 1998; Gage, 1998; Isiugo-Abanie & Oyediran, 2004; UNFPA, 2003). The increased sexual activity of young people in developing countries is explained as a logical consequence of rising age at marriage, increased schooling rates, the falling age at puberty, the penetration of western mass media and entertainment, increasingly common ideas about individualism, and the erosion of traditional social controls (NCRIM, 2005). While, migration, particularly towards urban areas, is often implicated in this shift, there is a dearth of population-based research in sub-Saharan Africa that directly connects increased youth migration to young people's sexual behavior. However, evidence from other regions of the world, particularly the United States has underscored the strong linkages between youth geographical mobility, problematic sexual behaviors, and health outcomes (Landsdale & Oropesa, 2001; Stack, 1994). These studies emphasize the social disruptions, which characterize migration and the relationships between migration

and behavioral change. In particular, studies on the impact of social control factors, such as religious systems (Beck et al. 1991; Davidson & Leslie, 1977), and socioeconomic position, and family bonds (Clayton & Bokemeir, 1980; Miller & Moore, 1990), on young people's sexual involvements, have identified migration as an index of weakened social control, which can fracture bonds of integration at family and community levels (Stack, 1994). The weakening of bonds to conventional institutions is in turn associated with enhanced probability of non-traditional behavior (Sampson & Laub, 1993; Vold & Bernard, 1986).

Migration is also a central theme in the discussion of the HIV/AIDS epidemic in Africa (Brockerhoff & Biddlecom, 1999; Hunt, 1989; Lurie, 2006). The massive migration of young and unmarried adults from presumably conservative rural environments to more sexually permissive African cities in recent years, has been suggested as partly responsible for the much higher HIV seroprevalence levels observed in urban than rural areas (United Nations, 1994). The dynamics of transmission becomes more complex as frequent movements between cities, towns and the home villages remain the norm for many migrants in the region (Geschier & Gugler 1998; Gugler, 1991; Smith, 1999). This pattern of circulation complicates the direction of the influence of migration on seroconversion, in both urban and rural areas, since it is also suggested that migrants themselves engage in sexual practices that elevate their risk of acquiring HIV/AIDS (Caldwell et al. 1997; Chirwa, 1997; Lurie et al. 1997). Migrants with previous exposure to urban environments are linked to increased likelihood of

\* Corresponding author. Tel.: +254 20 2720400/1; fax: +254 20 272380.  
E-mail address: [bmburu@aphrc.org](mailto:bmburu@aphrc.org) (B.U. Mberu).

high-risk sexual behavior in rural areas through socialization into less restrictive sexual norms or acquisition of enabling characteristics such as wealth in cities (Brockerhoff & Biddlecom, 1999). Nigeria's estimated 150 million population is youthful, with a median age of about 19 years, and about 65 percent under 25 years of age (U.S. Bureau of the Census, 2010). The United Nations estimates the population living in urban areas in 2000 at 42.5 percent of the total. This was projected to increase to 49 percent in 2010 and 53.4 percent by 2015 (UN, 2009). Young men and women aged 15–29 were identified as the most likely to migrate from rural areas to Nigeria's economic centers in search of livelihood opportunities (Adedimeji, 2005; NISER, 1997; Smith, 2004a). Research evidence has shown that premarital sexual relationships are increasingly common in contemporary Nigeria and unmarried youth are increasingly engaging in risky sexual behaviors such as multiple sexual partnerships, casual and unprotected sex, sometimes involving sex workers (Arowujolu et al. 2002; Isiugo-Abanihe, 2003). The country's current HIV/AIDS prevalence rate is 5 percent, but that translates to about 3 million adults living with HIV/AIDS, which ranks Nigeria third after India and South Africa, in terms of the number of people infected with HIV (UNGASS, 2010). Other problems linked to young people's sexual activities in Nigeria include unwanted pregnancies and clandestine abortions by untrained or poorly trained providers (Aja-Nwachuku, 2004; Aziken et al. 2003; Bankole et al. 2006).

However, relative to its population size and composition, no national level research in Nigeria has simultaneously addressed the direct role of youth migration on reproductive behavior. The bulk of studies on the relationship between migration and reproductive behavior in sub-Saharan Africa, focus on countries of Eastern and Southern Africa, the so called "AIDS Belt" (Brockerhoff & Biddlecom, 1999; French & Dishion, 2003; Kaufman et al. 2002). Most of the studies undertaken in Nigeria are constrained by limited coverage. Some are based on data collected from school students, which exclude an estimated 60 percent of the youth population not at school (Amazigo et al. 1997; Arowujolu et al. 2002; Slap et al. 2003). Other studies are limited to urban Nigeria, excluding rural areas, where almost 60 percent of the population lives (Feyisetan & Pebley, 1989; Makinwa-Adebusoye, 1992; Smith, 2004b). Yet others focus on ever-married women or unmarried female adolescents, entirely leaving out young and adult men (Ajuwon et al. 2002; Isiugo-Abanihe & Oyediran, 2004). However, the importance of understanding men's reproductive motivations and behavior follows the considerable authority and power invested in men generally as decision makers in the African social context (Isiugo-Abanihe, 2003). Moreover, recent studies in South Africa, Nigeria, and Cameroon suggest the vulnerability of young men to some of the problems faced by young women such as sexual coercion, unwanted sexual touch, penetrative sex and being "rented" as prostitutes by older men and women (Ajuwon, 2003; Ganju et al. 2004; Jejeebhoy & Bott, 2003).

In this paper, we examine the linkages between the internal migration of never married young men and women in Nigeria and their propensity to premarital sexual initiation, using data from the 2008 nationally representative Nigeria Demographic and Health Survey, with samples of school and non-school youth aged 15–24, from all the regions of the country, including rural and urban areas. Our focus on never married youth is premised on the fact that marriage protects sexual engagement of young people and its outcomes, primarily pregnancy and childbearing. In contrast, premarital sexual engagement and related outcomes are associated with particular health and psychosocial problems (Amobi & Igwegbe, 2004; Frautschi et al. 1994; Gorgen et al. 1993). In Nigeria, single and unmarried pregnant women suffer violence such as beating and verbal abuse from family members, with most

young women experiencing major stressors as school and job termination, partner's negative attitudes, religious sanction, discrimination and stigmatization (Amobi & Igwegbe, 2004).

The social significance of our study relates to its potential to provide an evidence base for widening the scope of control of epidemics like HIV/AIDS to include the forces that generate the large streams of population movement of young people. With heterosexual contact as the primary mode of HIV/AIDS transmission in sub-Saharan Africa, the study provides new and nationally representative evidence that can inform policies and programs directed at behavior change, by identifying important differentials in the characteristics of young men and women who initiate premarital intercourse and those who abstain.

## Theory and literature

Theoretical and empirical research has associated migrants with riskier heterosexual behavior than non-migrants. This difference in behavior is attributed to three broad factors summarized by Brockerhoff and Biddlecom (1999: 835) as: "1) predisposing individual characteristics; 2) changes in individual attributes due to migration, notably separation from a spouse or partner; and 3) exposure to a new social environment, featuring different sexual norms, opportunities and constraints that result in behavioral modification." These perspectives are linked to concepts used by demographers to account for fertility differences between migrants and non-migrants: selectivity of migration, life disruptions associated with moves, and migrants' adaptation to life norms in places of destination (Hervitz, 1985; Lee & Faber, 1984).

The selectivity hypothesis posits that migrants are not randomly selected, but typically migration is selective with respect to personal characteristics such as higher education, young age, unmarried status, and desire for upward social mobility. These attributes predispose migrants to be different from non-migrants in risky behavior. The disruption hypothesis usually associates the period immediately following migration with both physiological stress due to moving and the loss of social capital due to separation from spouses or significant others. The adaptation hypothesis proposes that migrants adapt to the new economic, social and cultural environment at the places of destination, resulting in behavioral changes.

Despite the import of these perspectives, the relationship between migration and behavior is modified in different contexts. A corpus of empirical research in Africa support that migration takes place within family and community networks, affording migrants some of the support they need to adjust to life in a new environment. For young people, moves are often with family members or close kin as business apprentices or house-holds (Smith, 1999). Consequently, the living arrangements of young migrants at destinations logically moderate the implications of migration for premarital sexual behavior.

Beyond migration, empirical studies have identified significant predictors of young people's sexual behavior in developing countries to include chronological age (Slap et al. 2003); gender (Brockerhoff & Biddlecom, 1999; Mensch et al. 2001); and family economic circumstances (Isiugo-Abanihe & Oyediran, 2004; Luke, 2003). Other predictors include the school environment (Feyisetan & Pebley, 1989; Kaufman et al. 2002); unemployment and nature of employment (Bledsoe & Cohen, 1993; NISER, 1997); religion and religiosity (Feyisetan & Pebley, 1989; Gupta, 2000; Slap et al. 2003); place of childhood residence (Gupta, 2000); and ethno-cultural values (APHRC, 2007; Bledsoe & Cohen, 1993; Gage, 1998).

Taken together, the above review underscores the importance of individual, family, community, and global forces in shaping young people's reproductive behavior. Consequently, this paper builds on

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